Practical Guide on Civil Registration and Vital Statistics Systems in West Africa (ECOWAS Zone)

United Nations Population Fund
West and Central Africa Regional Office

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List of Abbreviations and Acronyms

Abbreviation/Acronym	Definition
ABR	Adolescent Birth Rate
ACSA	African e-CRVS Shared Asse
AES	Alliance of Sahel States (Alliance des États du Sahel)
AfCFTA	African Continental Free Trade Agreement
AfDB	African Development Bank (Banque Africaine de Développement)
AFRO	WHO Regional Office for Africa
ANCS	Agence Nationale de l'État Civil (National Agency for Civil Status) – Senegal
ANEC	Agence Nationale de l'État Civil (National Civil Registration Agency) – Senegal
ANIP	Agence Nationale d'Identification des Personnes (National Agency for the Identification of Persons) – Guinea
ANSD	Agence Nationale de la Statistique et de la Démographie (National Agency for Statistics and Demography) – Senegal
APAI-CRVS	Africa Programme on Accelerated Improvement of Civil Registration and Vital Statistics
ASFR	Age-Specific Fertility Rate
AU	African Union
BCC	Behaviour Change Communication
BDM	Behavioural Drivers Model
BSND	Bulletin Statistique de Notification des Décès
C4D	Communication for Development
CBR	Crude Birth Rate
CDP	Commission de Protection des Données Personnelles (Personal Data Protection Commission) – Senegal
CDR	Crude Death Rate
CHW	Community Health Worker
CMR	Crude Marriage Rate
CoE-CRVS	Centre of Excellence for Civil Registration and Vital Statistics Systems
CRA	Civil Registration Authority
CRO	Civil Registration Office
CRVS	Civil Registration and Vital Statistics
CRVSID	Civil Registration, Vital Statistics and Identity Management

Abbreviation/Acronym	Definition
DDM	Death Distribution Methods
DHIS2	District Health Information Software 2
DHS	Demographic and Health Survey
DNEC	Direction Nationale de l'État Civil (National Directorate of Civil Registration)
DNF	Death Notification Form
DPI	Digital Public Infrastructure
DRR	Disaster Risk Reduction
ECOWAS	Economic Community of West African States
ENBIC	ECOWAS National Biometric Identity Card
EOC	Emergency Operations Centre
ESCAP	United Nations Economic and Social Commission for Asia and the Pacific
ETU	Ebola Treatment Unit
EU	European Union
FID	Foundational Identity Document
G5 Sahel	Group of Five Sahel Countries
GBV	Gender-Based Violence
GFR	General Fertility Rate
GHAI	Global Health Advocacy Incubator
GIZ	Deutsche Gesellschaft für Internationale Zusammenarbeit (German development cooperation agency)
GOLF	Guidelines on the Legislative Framework for Civil Registration, Vital Statistics and Identity Management Systems
GSS	Ghana Statistical Service
HCD	Human-Centred Design
HISWACA	Harmonisation and Improvement of Statistics in West and Central Africa
HMIS	Health Management Information System
ICAO	International Civil Aviation Organisation
ICD-10	International Classification of Diseases, 10th Revision (WHO)
ICD-11	International Classification of Diseases, 11th Revision (WHO, 2022)
iCivil	Mobile civil registration system developed in Burkina Faso
ICPD	International Conference on Population and Development
ICRC	International Committee of the Red Cross

Abbreviation/Acronym	Definition
ICT	Information and Communications Technology
ID	Identity/Identification
ID4Africa	Identity for Africa
ID4D	Identification for Development
IDA	International Development Association
IDP	Internally Displaced Person
IEC	Information, Education and Communication
IFORD	Institut de Formation et de Recherche Démographiques (Institute of Demographic Training and Research)
ILO	International Labour Organisation
IMF	International Monetary Fund
IMR	Infant Mortality Rate
INS	Institut National de la Statistique (National Statistics Institute)
INSD	Institut National de la Statistique et de la Démographie (National Institute of Statistics and Demography) – Burkina Faso
IOM	International Organisation for Migration
IPU	Inter-Parliamentary Union
IRMT	International Records Management Trust
ISCED	International Standard Classification of Education
ISCO	International Standard Classification of Occupations
ISO	International Organisation for Standardisation
ISSP	Institut Supérieur des Sciences de la Population (Institute of Population Sciences)
IT	Information Technology
KOICA	Korea International Cooperation Agency
MCCD	Medical Certificate of Cause of Death
MDSR	Maternal Death Surveillance and Response
MICS	Multiple Indicator Cluster Survey
MMR	Maternal Mortality Ratio
MOH	Ministry of Health
MOJ	Ministry of Justice
MORTPAK	Mortality Software Package (UN DESA demographic analysis tool)
MRZ	Machine-Readable Zone

Abbreviation/Acronym	Definition
MSAS	Ministère de la Santé et de l'Action Sociale (Ministry of Health and Social Action) – Senegal
MTEF	Medium-Term Expenditure Framework
NBS	National Bureau of Statistics
NCDC	Nigeria Centre for Disease Control
NCRA	National Civil Registration Authority – Sierra Leone
NEKKAL	Digital civil registration programme – Senegal
NGO	Non-Governmental Organisation
NIA	National Identification Authority – Ghana
NMR	Neonatal Mortality Rate
NPC	National Population Commission – Nigeria
NSO	National Statistics Office
NSS	National Statistical System
NUIPEC	Numéro Unique d'Identification des Personnes dans l'État Civil (Unique Personal Identification Number in Civil Registration)
NVSC	National Vital Statistics Committee
OCHA	United Nations Office for the Coordination of Humanitarian Affairs
OECD	Organisation for Economic Co-operation and Development
OHADA	Organisation pour l'Harmonisation en Afrique du Droit des Affaires (Organisation for the Harmonisation of Business Law in Africa)
OHCHR	Office of the United Nations High Commissioner for Human Rights
OpenCRVS	Open-source Civil Registration and Vital Statistics platform
PCVA	Physician-Coded Verbal Autopsy
PD	Positive Deviance
PPE	Personal Protective Equipment
RBAC	Role-Based Access Control
RCT	Randomised Controlled Trial
RIPS	Regional Institute for Population Studies – Accra
SBC	Social and Behaviour Change
SBCC	Social and Behaviour Change Communication
SDG	Sustainable Development Goal
SEG	Synthetic Extinct Generations
SEM	Structural Equation Modelling

Abbreviation/Acronym	Definition
SOP	Standard Operating Procedure
SRH	Sexual and Reproductive Health
TBA	Traditional Birth Attendant
TFR	Total Fertility Rate
U5MR	Under-Five Mortality Rate
UMA	Arab Maghreb Union (Union du Maghreb Arabe)
UN	United Nations
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNDP	United Nations Development Programme
UNECA	United Nations Economic Commission for Africa
UNESCO	United Nations Educational, Scientific and Cultural Organisation
UNFPA	United Nations Population Fund
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations Children’s Fund
UNSD	United Nations Statistics Division
VA	Verbal Autopsy
VSB	Vital Statistics Bulletin
VSD	Vital Statistics Department
VSM	Vital Statistics Module
WAHO	West African Health Organisation
WARDIP	West Africa Regional Digital Integration Program
WCA	West and Central Africa
WCARO	West and Central Africa Regional Office (UNFPA)
WFP	World Food Programme
WHO	World Health Organisation
WURI	West Africa Unique Identification for Regional Integration and Inclusion

GENERAL INTRODUCTION: CONTEXT OF CRVS SYSTEMS IN WEST AFRICA

West Africa is one of the most dynamic and demographically significant regions on the African continent. Home to over 380 million people across twelve member states of the Economic Community of West African States (ECOWAS) [1], the region is characterised by extraordinary diversity—encompassing linguistic, cultural, legal, and institutional differences. However, the region shares a critical need to strengthen the systems essential for the protection, documentation, and counting of its people. Establishing sustainable civil registration and vital statistics (CRVS) systems is central to achieving this imperative.

These regional guidelines are designed to speak directly to this context. While they draw on global standards and continental frameworks—including the UN Principles and Recommendations for a Vital Statistics System (2014), the Africa Programme on Accelerated Improvement of CRVS (APAI-CRVS), and Agenda 2063—their primary value lies in their contextualisation within the realities of West Africa. For West Africa specifically, this means engaging with the institutional architecture of ECOWAS, the challenges of extensive cross-border mobility, the plurality of legal traditions governing civil status, and the profound inequities in registration coverage that leave millions of people without legal identity.

This introduction sets out the West Africa context in six dimensions: the demographic and migration landscape; the current state of CRVS systems across ECOWAS countries; the institutional framework, with particular attention to ECOWAS mechanisms relevant to civil registration and identity management; the specific challenges that shape the regional agenda; and the opportunities for progress that exist within the region.

1. The West Africa Demographic and Migration Landscape

West Africa's current population of over 376 million is among the fastest-growing in the world, with a total fertility rate well above the global average. By 2050, the population of the ECOWAS region is projected to nearly double, approaching 600 million people [3]. This demographic trajectory makes strong, functional CRVS systems a fundamental development imperative rather than simply a matter of administrative efficiency. Without comprehensive registration and certification of vital events on a large scale, countries will not be able to plan effectively for the health, education, social protection, and economic needs of their populations, or realise the ECOWAS vision 2050 "ECOWAS of the Peoples: Peace and Prosperity for All".

West Africa is also the most mobile region on the African continent. Intra-regional migration is a structural feature of West African societies and economies, driven by seasonal agricultural patterns, trade networks, conflict, climate variability, and most importantly by the long-standing cultural traditions of nomadic and transhumant communities. Estimates suggest that between 8 and 10 million people are active intra-regional migrants at any given time within the ECOWAS space, with countries such as Côte d'Ivoire, Ghana, and Nigeria serving as major destination countries and Mali, Burkina Faso, Niger, and Guinea as significant origin countries [2].[1]

This mobility creates pressure on already weak CRVS systems. Children born to migrant families, particularly in countries other than the parents' country of origin, are among the most at risk of being unregistered. Births that occur in transit, often in informal settlements or in communities

[1] Although Mali, Burkina Faso, and Niger formally withdrew from ECOWAS on 29 January 2025 and are no longer ECOWAS member states; they are part of migration patterns for the region that are mentioned in this document.

with limited access to registration services, fall through systematic gaps. Particularly along migration routes and in urban informal settings, events are rarely—if at all—registered. Additionally, the registration of marriages and divorces contracted across borders, under different customary and religious traditions, presents profound legal and administrative challenges.

ECOWAS has long recognised these realities. The 1979 Protocol on Free Movement of Persons, Residence and Establishment—the foundational legal instrument of intra-regional mobility in West Africa—created the framework within which civil identity documentation and civil registration interact. A citizen exercising the right to free movement requires identity documents that are recognised across member states. Those documents, in turn, depend on a functioning civil registration system that issues legally valid birth, marriage, death certificates and other civil status documents.

KEY ECOWAS DOCUMENT: Protocol on Free Movement of Persons

ECOWAS Protocol A/P.1/5/79 Relating to Free Movement of Persons, Residence and Establishment (1979)

The foundational ECOWAS protocol establishes the right of ECOWAS citizens to enter, reside and establish economic activities in member states. This is directly relevant to civil registration because the exercise of free movement rights depends on valid civil status documentation.

Source: *ECOWAS. Protocol A/P.1/5/79 Relating to Free Movement of Persons, Residence and Establishment. Abuja: ECOWAS Commission, 1979. [A]*

2. State of CRVS Systems Across ECOWAS Countries

The ECOWAS member states present a highly varied picture of CRVS development, reflecting differences in institutional capacity, legal frameworks, political commitment, historical legacies and the uptake of services by the citizens and foreigners alike. Despite significant progress over the past decade, largely driven by APAI-CRVS national assessments, strategic planning processes, and targeted investments, coverage gaps remain large and systematic, in particular for marriage, divorce, and death.

2.1 Birth Registration

Birth registration rates across West Africa range from above 80 percent in Cape Verde (which benefits from an island geography, concentrated population, and relatively high institutional development) and above 70 percent in Ghana and Senegal, down to below 35 percent in Niger, Guinea-Bissau, and Guinea. Nigeria accounts for nearly 40 percent of the total ECOWAS population and has a birth registration rate estimated at around 43 percent, meaning that more than 60 million children are born without being registered [4]. The aggregate effect of this gap across the region is enormous: West Africa accounts for a significant share of the estimated 115 million children globally who will remain unregistered by 2030 if current trends continue [5].

The barriers to birth registration in the region are well documented. Geographic distances from registration offices are a primary structural constraint, particularly in the Sahel countries, where vast territories are served by a limited number of fixed registration points. The requirement to register at a fixed civil status office within strict deadlines, often combined with fees for late registration, creates systematic disincentives. Health facility-based registration, where births registered at health facilities trigger civil registration, has proven effective in countries such as Ghana and Senegal, but coverage of facility-based births remains uneven, with a significant proportion of births occurring at home, mostly in rural areas.

2.2 Death Registration

Death registration is even more incomplete than birth registration across the region. Fewer than 20 percent of deaths in most West African countries are registered with a civil status authority, and the inclusion of cause-of-death information, which is essential for public health surveillance, disease burden analysis, and health system planning, is still more limited [6]. This gap has severe consequences: the COVID-19 pandemic made painfully visible the inability of West African health systems to produce timely, complete mortality data, forcing reliance on modelled estimates at precisely the moment when real-time data was most needed.

The causes of low death registration are different from those driving low birth registration. Cultural and religious practices surrounding rapid burial are common across much of West Africa, where burial typically occurs within 24 to 48 hours of death, in particular for Muslim communities. This creates time pressure that makes registration prior to burial difficult. Community notification systems, which rely on local authorities and health workers to report deaths to registration offices, are incomplete and often poorly incentivised. Verbal autopsy methods, which could help capture cause-of-death data in settings where medical certification is unavailable, remain inconsistently implemented.

2.3 Marriage and Divorce Registration

Marriage and divorce registration rates are the weakest component of CRVS systems across West Africa. In many countries, fewer than 10 percent of marriages are registered in the civil registry, with the remainder contracted under customary or religious ceremonies that carry social and potential legal validity—but are not entered into the civil registration record [7]. This gap has profound implications for women's rights: in the absence of a registered marriage, women's legal entitlements to property, inheritance, custody, and social protection are severely restricted.

The plurality of legal traditions governing marriage in West Africa is a defining feature of the regional context. All ECOWAS countries operate under legal systems that recognise, to varying degrees, customary marriage, Islamic marriage (in majority-Muslim contexts such as Senegal, Mali, Niger, Guinea, and northern Nigeria), and civil marriage. The interaction between these systems—and the question of whether and how customary and religious marriages should be captured in the civil register—is one of the most complex governance challenges that CRVS reform faces in the region.

3. The ECOWAS Institutional Framework and CRVS

ECOWAS provides the primary institutional framework for regional integration in West Africa. Founded in 1975 by the Treaty of Lagos, ECOWAS has developed over the past half-century into a comprehensive regional body with mandates spanning trade, peace and security, humanitarian affairs, and increasingly, data and statistics. Its relevance to CRVS reform in West Africa can be understood at several levels.

3.1 Free Movement and Identity Documentation

The ECOWAS free movement regime creates the most direct institutional incentive for strengthening the CRVS system at the regional level. The right to enter, reside, and establish economic activities across ECOWAS member states is meaningless without the documentation to exercise it. The ECOWAS National Biometric Identity Card (ENBIC), adopted by the ECOWAS Authority of Heads of State and Government in December 2014 to replace the earlier ECOWAS Travel Certificate, represents the most advanced expression of this connection between civil identity and regional integration. Countries can only issue the ENBIC if they have functioning national identity systems—and functional national identity systems depend on complete, accurate civil registration.

KEY ECOWAS DOCUMENT: ECOWAS National Biometric Identity Card (ENBIC)

Decision A/DEC.01/12/14 of December 2014—ECOWAS Authority of Heads of State and Government endorsed the machine-readable ECOWAS National Biometric Identity Card (ENBIC) as the official travel document replacing the handwritten ECOWAS Travel Certificate.

As of 2025, six ECOWAS member states have completed full deployment: Senegal, Guinea-Bissau, Ghana, Benin, The Gambia, and Sierra Leone. Full deployment across all twelve member states requires strengthened civil registration at the national level.

Source: *ECOWAS Authority of Heads of State and Government. Decision A/DEC.01/12/14 on the ECOWAS National Biometric Identity Card. Abuja: ECOWAS Commission, December 2014; ECOWAS Commission (2025) [B].*

3.2 ECOWAS, Identity Management, and Civil Registration

In 2015, the ECOWAS Commission convened an Experts Meeting on Identity Management and Civil Registry in Cotonou, Benin, with support from the International Organisation for Migration (IOM) and the European Union-funded *Support to Free Movement of Persons and Migration in West Africa* project. This meeting, which brought together civil registration and identity management authorities from across the ECOWAS region, produced recommendations on common coordination modalities to ensure enhanced civil registration processes supporting effective identity management. The meeting marked an important recognition of the interdependence between civil registration system quality and the ECOWAS identity management agenda.

KEY ECOWAS PROCESS: Identity Management and Civil Registry Meeting, Cotonou 2015

The ECOWAS Experts Meeting on Identity Management and Civil Registry, Cotonou, Benin, April 2015.

Convened by: ECOWAS Commission, with support of the IOM and EU-funded FMM West Africa project.

Key outputs: recommendations on coordination modalities for civil registry and identity management; analysis of status of biometric ID card development; master class on identity management principles.

Relevance: Established the institutional link between ECOWAS free movement, biometric identity, and civil registration system quality that these guidelines seek to address at the technical level.

Source: *ECOWAS Commission/IOM/FMM West Africa. Report of the ECOWAS Experts Meeting on Identity Management and Civil Registry, Cotonou, Benin, April 2015. Abuja: ECOWAS Commission, 2015 [C].*

4. Key Challenges Shaping the West Africa CRVS Agenda

Against this background, six cross-cutting challenges define the West Africa CRVS reform agenda and shape the design of these guidelines.

4.1 Legal Pluralism and Customary “Registration”

The coexistence of civil, customary, and Islamic legal systems in the registration of marriages and other vital events is perhaps the most complex governance challenge specific to West Africa. Countries face the challenge of reconciling the inclusive, non-discriminatory objective of ensuring that all marriages, regardless of their form, are registered in the civil register and given legal effect

with socio-cultural realities in which customary and religious institutions exercise significant authority. The guidelines address this challenge by providing models for how customary and vital religious events can be recognised and bridged into the civil registration system, without requiring the replacement of existing institutional arrangements.

4.2 Cross-Border Registration and Population Mobility

The extensive mobility of West African populations involves seasonal migration, trade-related movement, transhumance, and displacement. This complexity leaves systematic registration gaps that no individual country can resolve in isolation. Life events—births, deaths, marriages and divorces—that occur across borders, or which involve highly mobile populations, require regional coordination mechanisms. This means mutual recognition of civil status documents, protocols for registering events that occur in a country other than the person's country of origin, and interoperable digital systems that enable continuity of records across national borders. The ECOWAS free movement regime provides the political mandate for such coordination, while these guidelines provide the technical framework.

4.3 Fragility, Conflict, and Emergency Registration

The Sahel in particular—encompassing northern Nigeria within ECOWAS, as well as Mali, Burkina Faso, and Niger (former ECOWAS members that withdrew in January 2025 but remain part of the broader West Africa region)—has experienced acute deterioration in security and governance conditions over the past decade, with direct and severe consequences for CRVS systems. Registration offices have been closed, civil registration staff have been displaced, and entire populations have been cut off from registration services. Children born in displacement, conflict-affected communities, and refugee camps are among the most systematically unregistered populations in the region. These guidelines include dedicated guidance on emergency CRVS procedures, mobile registration, and the special provisions needed to register vital events in fragile contexts.

4.4 Social Norms, Cultural Practices, and Limited Trust in Public Services

Social and cultural norms represent one of the most pervasive yet least addressed barriers to civil registration across West Africa. In many communities, registration of vital events is not perceived as a personal or family priority: births are celebrated through customary naming ceremonies that carry deep community meaning but produce no civil registration record; deaths are mourned and buried according to religious and family traditions that leave no trace in state records; and marriages are formalised through bride price, customary, or religious rites that are socially binding but legally invisible. The gap between the social meaning of vital events and their administrative registration is wide in most West African contexts.

Limited trust in public institutions and services is a critical dimension of this challenge. In countries and communities that have experienced prolonged governance failures, conflict, or the perception that government documentation serves primarily as a tool of control or taxation rather than of service, families and communities actively avoid interaction with civil registration authorities. Fear of registration fees, lack of understanding of the benefits of documentation, and historical associations between registration and colonial administration continue to shape community attitudes in parts of the region.

Addressing these norms and trust deficits requires sustained, community-rooted social and behavioural change strategies that go well beyond information campaigns. These guidelines provide approaches for community engagement, demand generation, and the co-design of registration services with communities—recognizing that technical system improvements alone will not close registration gaps where the barriers are fundamentally social and relational.

4.5 Digital Transformation Opportunities and Risks

West Africa has seen significant innovation in digital civil registration over the past decade. Systems such as OpenCRVS (Burkina Faso), iCivil (Côte d'Ivoire), NEKKAL (Senegal), and mobile notification platforms in multiple countries have demonstrated that digital transformation can dramatically improve registration coverage and data quality when appropriately designed and resourced. At the same time, the risks of premature digitisation—including the exclusion of populations without mobile connectivity or of vulnerable groups, the creation of technically sophisticated but institutionally fragile systems, and cybersecurity vulnerabilities—are real and require careful management. These guidelines provide balanced, evidence-based guidance on digital transformation that starts from registration system needs rather than technology availability.

4.6 Gender Inequality and Women's Registration Rights

Gender inequality is a structural feature of CRVS gaps across West Africa. Women's legal identity is less secure than men's in many countries: discriminatory legal provisions restrict women's ability to independently register vital events; patriarchal social norms devalue women's civil status documentation; and the registration of divorce—which is essential for women to access legal protections upon the dissolution of a marriage—is systematically neglected. The burden of unregistered marriages and divorces falls disproportionately on women, particularly in the context of polygamous unions and customary marriages.

Women face compounded barriers: in many communities, social norms place the responsibility for registration in the hands of male family members, meaning that women—even when they wish to register vital events—may lack the social authority or practical means to do so independently. Girls' births are systematically registered at lower rates than boys in some contexts, reflecting gendered valuations of children that have consequences for girls' future access to education, healthcare, and legal protection.

These guidelines adopt a gender-transformative approach that treats the advancement of women's registration rights as a central, not peripheral, objective of CRVS system reform.

5. Opportunities and the Path Forward for West Africa

Against these challenges, West Africa offers real opportunities for CRVS system transformation. Political commitment to civil registration has grown across the region, with several governments incorporating CRVS strengthening in national development plans and poverty reduction strategies. The APAI-CRVS process has created and strengthened institutional capacity in national civil registration authorities and national statistics offices across ECOWAS. Building on this foundation, the HISWACA project provides the first sustained, adequately resourced regional programme dedicated to CRVS harmonisation and improvement.

The 2030 Agenda and its commitment to 'leaving no one behind' provides powerful international normative support for investment in CRVS systems. Regional integration processes—particularly the ECOWAS free movement regime and the push toward interoperable national biometric identity systems—are creating institutional demand for better civil registration. At the same time, a growing generation of national CRVS professionals, trained through APAI-CRVS and partner programmes, provides the human capital needed to sustain long-term reform.

These regional guidelines are offered as a contribution to this moment of opportunity, leading the implementation of high-quality and innovation-driven CRVS systems in West Africa. They are designed to be practical, contextual, and actionable, providing the technical guidance, models, and tools that West African countries need to strengthen their CRVS systems in ways that are

appropriate to their diverse contexts, aligned with regional harmonisation objectives, and anchored in a commitment to universal legal identity for every person in West Africa.

Vital statistics derived from such modernised CRVS systems are the foundational data layer required to transform the high-level aspirations of the **ECOWAS Vision 2050** into measurable regional progress. By providing accurate, real-time data on births, deaths, and population movements, these statistics allow policymakers to move beyond estimates and design infrastructure—such as schools and hospitals—that matches the actual demographic weight of a rapidly growing youth population. Aligning CRVS metrics transforms fragmented national data into a cohesive regional perspective for coordinating human development policies under Vision 2050 and Agenda 2063. These comparable statistics are the primary tool for monitoring the Vision's "Peace and Prosperity" pillars, essential for tracking human development, evaluating poverty programmes, and ensuring the inclusion of marginalised groups in the region's digital and economic shift.

ABOUT THESE GUIDELINES: HISWACA Context

These Regional Guidelines for Strengthening CRVS Systems in West Africa have been developed under the HISWACA (Harmonisation and Improvement of Statistics in West and Central Africa) project, a five-year initiative launched in 2024.

The guidelines are specific to the 12 ECOWAS member states. By developing practical regional guidelines for CRVS systems that promote harmonised definitions, procedures, and reporting standards, the HISWACA project contributes to the ECOWAS statistical integration agenda in a direct and practical way.

Source: *UNFPA WCARO. HISWACA Regional CRVS Guidelines Project Document. Dakar: UNFPA, 2024 (internal); ECOWAS Commission (2025) [D].*

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CHAPTER 1: OBJECTIVES, SCOPE, AND GUIDING PRINCIPLES

1.1 Rationale and Background

Civil Registration and Vital Statistics (CRVS) systems are the backbone of public administration. This "book of life" records and issues certificates for all vital events—from birth to death, through marriage, and divorce—in every human life, regardless of their race, sex, place of birth, status or religion. These systems are the bedrock of legal identity, and the vital statistics derived form the basis for evidence-based planning. In West Africa, however, CRVS systems remain critically underfunded, neglected and underdeveloped, leaving millions of people without legal recognition and protection while depriving governments of the vital data needed to plan for their populations' needs.

The global community has long recognised the importance of universal civil registration. The United Nations Convention on the Rights of the Child (1989) established birth registration as a fundamental right, declaring that "the child shall be registered immediately after birth and shall have the right from birth to a name, the right to acquire a nationality" [1]. The International Covenant on Civil and Political Rights (1966) also enshrines the right to a name and to be registered immediately after birth (Article 24). The 2030 Agenda for Sustainable Development recognises the importance of legal identity, through Target 16.9, which aims to "provide legal identity for all, including birth registration, by 2030" [2].

Yet, despite different global and regional commitments from the end of the 90s, as well as growing recognition of CRVS systems as critical infrastructure for human rights protection, and development planning, progress in West Africa is slow and uneven. Birth registration rates vary dramatically across the region, with some countries such as Ghana and Senegal achieving coverage above 60 percent, while others such as Guinea-Bissau and Liberia remain below 40 percent [3]. Even more concerning, death registration is among the weakest components of CRVS systems globally, and in Sub-Saharan Africa in particular, with fewer than one in 10 deaths registered in most countries in the region [4]. Marriage and divorce registration rates are lower still, often below 5 percent in countries such as The Gambia and Guinea [5].

This registration gap is not merely an administrative challenge but a human rights crisis, often with intergenerational consequences, and has profound implications for development, equity, equality and social protection. The World Bank estimates that more than 1 billion people globally cannot prove their identity and this results in lack of access to vital services [6]. In sub-Saharan Africa, less than half of all children are registered, and if current trends persist, 115 million children will remain unregistered by 2030 [7]. Women and girls are disproportionately affected, with social, cultural, and legal barriers systematically excluding them from civil registration and making them invisible in the eyes of the law, hence unprotected, and invisible in vital statistics [8].

The COVID-19 pandemic further exposed the fragility of CRVS systems in the region. A 2020 survey by the United Nations Statistics Division found that while all countries considered civil registration activities essential, 13 percent reported that their governments did not place civil registration on the list of essential services that must be provided during the pandemic, and many countries reported closures of civil registration offices [9]. This disruption set back years of progress and highlighted the urgent need for resilient, digitised, and decentralised systems.

1.2 Purpose of the Guidelines

These Regional Guidelines for Strengthening Civil Registration and Vital Statistics in West Africa have been developed to provide a comprehensive, practical, and contextually relevant framework for countries in the region to strengthen their CRVS systems. The guidelines respond to the urgent need for harmonised regional standards that address the specific challenges, institutional realities, and cultural contexts of West Africa while aligning with international best practices. All chapters include annexes that can be consulted and adapted to reflect country-specific legislation.

The primary purposes of these guidelines are to:

1. **Provide clear, actionable guidance** for governments, civil registration authorities, national statistics offices, and other stakeholders on establishing, strengthening, and maintaining reliable CRVS systems that register all vital events closest to the date of occurrence, issue certificates to the beneficiaries, and produce high-quality vital statistics
2. **Promote regional harmonisation** of CRVS practices, definitions, classifications, and reporting standards to enable comparability, facilitate cross-border coordination, and support regional demographic monitoring and planning
3. **Advance human rights and social inclusion** by ensuring that CRVS systems reach all populations, particularly the most vulnerable and marginalised, including women, girls, rural populations, displaced persons, and those living in humanitarian contexts
4. **Bridge the vital statistics gap** by strengthening the entire data value chain from registration through to statistical production, analysis, dissemination, and use for evidence-based policymaking and SDG monitoring
5. **Support digital transformation** by providing guidance on leveraging technology to improve registration coverage, enhance data quality, ensure interoperability with other systems, and protect data privacy and security
6. **Foster behavioural and social change** by providing strategies for community engagement, public awareness, and demand generation that address cultural, social, and institutional barriers to registration
7. **Strengthen governance and coordination** by clarifying institutional mandates, promoting multisectoral collaboration, and establishing mechanisms for monitoring, evaluation, and continuous improvement

1.3 Scope and Coverage

These guidelines address the complete spectrum of CRVS functions in West Africa. They cover:

- **Vital events**: While the primary focus is on births, deaths, marriages, and divorces—the four core vital events—the guidelines also acknowledge the importance of recording other civil status events such as adoptions, legitimations, recognitions, and judicial separations as appropriate to national contexts, but does not cover them.
- **Life-course approach**: Following the United Nations principle of continuity, these guidelines adopt a life-course approach to CRVS that ensures a person's legal identity is established at birth through birth registration and certification, and progressively updated throughout their

life [10]. This approach recognises that registration is not a one-time event but an ongoing process that accompanies individuals from birth until death. The legal identity ends at death, closing the cycle. Civil registration is the "book of life" capturing all vital events, establishing legal identity—allowing individuals to enter legal relationships, and closing all legal relationships and contracts once the legal identity is closed—with death registration and certification.

- **System components**: The guidelines address all components of functional CRVS systems, including legal and regulatory frameworks; institutional structures and coordination mechanisms; registration processes and procedures; vital statistics production and dissemination; digital systems and interoperability; quality assurance; and monitoring and evaluation. It also provides guidance on building trust in services and creating demand for registration.
- **Geographic coverage**: These guidelines are designed for application across the countries of West Africa, while recognizing the diversity of national contexts, legal systems, administrative structures, and stages of CRVS development across the region.
- **Target audiences**: The guidelines are intended for use by:
    - National civil registration authorities and registrars
    - National Statistics Offices
    - Ministries of health, interior, justice, and local government
    - Development partners and international organisations
    - Civil society organisations and community-based organisations
    - Regional bodies including ECOWAS and the African Union
    - Researchers and academics working on CRVS strengthening

1.4 Alignment with International and Continental Frameworks

These Regional Guidelines are firmly rooted in and aligned with established international and continental normative frameworks, standards, and recommendations for CRVS systems. They build upon and adapt global best practices to the specific context of West Africa.

1.4.1 United Nations Standards and Principles

The foundation of these guidelines is the **United Nations Principles and Recommendations for a Vital Statistics System, Revision 3** (2014), which provides the international standard for CRVS systems [11]. This landmark document establishes principles for civil registration and vital statistics, including:

- **Universality**: Civil registration should be universal and compulsory
- **Continuity**: Registration should be continuous and permanent
- **Confidentiality**: Individual records must be protected and used only for authorised purposes, by authorised personnel
- **Legal framework**: Registration must be established and governed by law

- **Completeness**: All vital events mentioned in the national legislation should be registered without exception
- **Accessibility**: Registration services should be easily accessible to all population groups

The guidelines are further informed by:

- **The Handbook on Civil Registration and Vital Statistics Systems: Management, Operation and Maintenance, Revision 1 (2021)**, which provides operational guidance for establishing and maintaining CRVS systems and emphasises the integration of civil registration, vital statistics, and identity management [12].
- **The Handbook on Civil Registration, Vital Statistics and Identity Management Systems: Communication for Development (2022)**, which offers strategies for behaviour change and social norm transformation to increase registration uptake [13].
- **Guidelines on the Legislative Framework for Civil Registration, Vital Statistics and Identity Management Systems** (2023), which provides detailed guidance on developing rights-based legal frameworks for CRVS systems [14].

1.4.2 African Regional Frameworks

These guidelines align with and support the implementation of continental and regional frameworks, including:

- **The Africa Programme on Accelerated Improvement of Civil Registration and Vital Statistics (APAI-CRVS)**: Launched in 2010 following ministerial commitment, APAI-CRVS has provided the strategic and programmatic framework for CRVS reform in Africa for more than a decade.[15] The programme has supported countries in conducting comprehensive assessments, developing strategic plans, and implementing reforms. These guidelines build on APAI-CRVS achievements and respond to the call for regional technical guidance to accelerate progress.
- **The CRVS Systems Improvement Framework**: Developed by the Economic Commission for Africa (ECA) in partnership with the Centre of Excellence for CRVS systems and Vital Strategies and other partners, this framework provides countries with tools to assess and improve CRVS systems through a process-centric approach [16]. The framework emphasises business process analysis and redesign to improve efficiency and ensure that digital solutions are fit for purpose.
- **The CRVS Digitisation Guidebook**: An integral component of APAI-CRVS support, this resource provides guidance on leveraging information and communications technology to achieve universal registration while ensuring data protection and system sustainability [17].
- **The African Union Agenda 2063**: The continental vision for Africa's transformation includes the goal of well-developed statistical systems that produce reliable data for planning and monitoring development progress [18].
- ECOWAS Vision 2050: A strong CRVS system is the unseen engine of the "ECOWAS of Peoples" mandate under Vision 2050. It provides every citizen with a legal identity—the "master key"—which is essential for social inclusion and the rule of law. Without accurate data on births, deaths, and marriages, the Commission cannot effectively plan for inclusive regional infrastructure, healthcare, and education. Moreover, digitised and harmonised

identity systems are vital for economic Integration, enabling secure, "borderless" movement and a regional social security net, thus ensuring citizens can claim their rights and access services across the community [19].

- **The Conference of African Ministers Responsible for Civil Registration**: Held every few years, these ministerial conferences have generated key policy directives and commitments, including the Nouakchott Declaration (2017), which called for accelerated digitisation and harmonisation, and the Lusaka Recommendations (2019), which emphasised strengthening investment in CRVS systems [20].

1.4.3 Sustainable Development Goals and Global Commitments

The 2030 Agenda for Sustainable Development has elevated legal identity to a global development priority. Target 16.9 specifically calls for providing "a legal identity for all, including birth registration, by 2030," while Target 17.19 emphasises the need for "quality, timely and reliable data disaggregated by income, gender, age, race, ethnicity, migratory status, disability, geographic location and other characteristics relevant in national contexts" [21].

CRVS systems are essential not only for achieving these specific targets but for monitoring progress across the entire SDG framework. Without complete and accurate vital statistics, countries cannot effectively measure progress on:

- Maternal and child health (SDG 3)
- Gender equality (SDG 5)
- Reduced inequalities (SDG 10)
- Sustainable cities and communities (SDG 11)

The UN Legal Identity Agenda, launched in 2018, provides a holistic framework for coordinating efforts across the UN system to advance a legal identity for all, with CRVS systems as the foundational infrastructure [22].

1.4.4 Specialised Guidance and Tools

These guidelines also incorporate insights and approaches from the following specialised initiatives and partnerships:

- Bloomberg Philanthropies Data for Health Initiative: Through partnerships with Vital Strategies, CDC Foundation, WHO, and other organisations, this global initiative works with governments and partners to strengthen data on births, deaths, and risk factors for noncommunicable diseases (NCDs) so governments can save and improve lives [23].

- **The UNFPA Centre of Excellence for Civil Registration and Vital Statistics Systems (CoE-CRVS):** Hosted by UNFPA since 2021, the CoE-CRVS advances gender-transformative civil registration systems and provides technical assistance, evidence, and tools with a strong commitment to gender equality and a life-course approach [24].

- **UNICEF Programming Guidance**: UNICEF has documented proven approaches to increasing birth registration through decentralisation, digitisation, and interoperability with health systems, with evidence showing that registration rates can more than double when linked to health platforms [25].

- **The ECOWAS Regional Framework:** The Economic Community of West African States (ECOWAS) provides a critical institutional framework linking civil registration to regional integration. Since 1979, the ECOWAS Protocol on Free Movement of Persons (A/P.1/5/79) has established the right of citizens to move freely across member states, creating a direct demand for identity documents underpinned by civil registration records. The ECOWAS National Biometric Identity Card (ENBIC) initiative, launched through Decision A/DEC.01/12/14 in December 2014, further reinforces this link by requiring birth certificates as the foundational document for biometric card issuance. The April 2015 IOM/ECOWAS/EU Experts Meeting on Identity Management and Civil Registry in Cotonou recognised the quality of civil registration systems as a prerequisite for effective regional identity management. These guidelines support ECOWAS member states in meeting these regional commitments by strengthening the civil registration foundation upon which regional integration depends.

1.5 Key Principles Underpinning the Guidelines

The development and implementation of CRVS systems in West Africa must be guided by fundamental principles that ensure systems are rights-based, inclusive, sustainable, and effective. The following principles inform every aspect of these guidelines.

1.5.1 A Rights-Based Approach

Civil registration is not merely an administrative function, it is a fundamental human right and the gateway to exercising many other rights. As stated in the UN Principles and Recommendations, "the essential purpose of civil registration is to furnish legal instruments of direct interest to individuals" [26]. These guidelines adopt a rights-based approach that:

- Recognises legal identity as a right for all persons from birth
- Ensures registration processes are accessible, affordable, and non-discriminatory
- Protects the privacy and confidentiality of personal information
- Empowers individuals with legal documentation to claim their rights
- Holds governments accountable for ensuring universal access to registration

1.5.2 Universal Coverage and Inclusion

CRVS systems must register all vital events for all people, without exception. The principle of universality requires:

- Eliminating barriers to registration for vulnerable and marginalised populations
- Reaching rural, remote, and hard-to-reach areas
- Ensuring accessibility for persons with disabilities
- Addressing gender disparities and discriminatory practices
- Registering refugees, displaced persons, and stateless individuals
- Making registration free or affordable to all, especially for timely registration
- Conduct research in causes of non registration of vital events and build demand strategies to contribute to uptake of services

1.5.3 Gender Equality and Women's Empowerment

CRVS systems must be gender-transformative, addressing and eliminating the social, cultural, and legal barriers that systematically exclude women and girls. This requires:

- Ensuring women can register births, deaths, marriages, and divorces independently
- Eliminating discriminatory legal provisions and practices
- Addressing patriarchal norms that devalue women's legal identity
- Collecting and analysing sex-disaggregated vital statistics
- Using CRVS data to monitor and address gender-based violence and harmful practices
- Recognizing the particular importance of marriage and divorce registration for women's rights

1.5.4 Data Quality and Statistical Standards

The value of CRVS systems depends fundamentally on the quality, completeness, and timeliness of the data they generate. These guidelines emphasise:

- Adherence to international standards and classifications
- Completeness and accuracy of registration
- Timely recording and reporting of vital events
- Use of internationally comparable definitions and methods
- Quality assurance throughout the data value chain
- Regular assessment and evaluation of system performance

1.5.5 Coordination and Integration

Effective CRVS systems require strong coordination across multiple sectors and institutions. Success depends on:

- Clear assignment of institutional mandates and responsibilities
- Effective multisectoral coordination mechanisms
- Integration and interoperability with health, identity, and other administrative systems
- Harmonisation of civil, customary, and religious legal systems where applicable
- Effective coordination among international development partners
- Strong and evidence based engagement with civil society and community-based organisations

1.5.6 Sustainability and Local Ownership

CRVS systems must be nationally owned, context-appropriate, and financially sustainable:

- Building on existing national systems rather than creating parallel structures
- Strengthening domestic capacity at all levels
- Ensuring adequate and predictable domestic financing
- Adapting international guidance to national contexts
- Developing solutions appropriate to local infrastructure and capacity
- Creating systems that can be maintained over the long term

1.5.7 Innovation and Digital Transformation

While respecting fundamental principles, CRVS systems must leverage appropriate technology to improve access, efficiency, and data quality:

- Using digital tools where appropriate and sustainable
- Ensuring technology enhances rather than replaces human-centred services
- Maintaining offline registration capacity where needed
- Protecting data privacy and cybersecurity
- Ensuring interoperability across systems
- Making technology investments that countries can sustain

1.6 Structure and Organisation of the Guidelines

These guidelines are organised into seven chapters that follow the logical flow of CRVS system development and operation:

Chapter 1: Introduction and Purpose (this chapter) establishes the context, rationale, objectives, scope, and guiding principles.

Chapter 2: Legal and Institutional Frameworks addresses the legal foundations, institutional mandates, coordination mechanisms, and integration of different legal systems.

Chapter 3: Standardised Registration Procedures provides detailed guidance on processes for registering births, deaths, marriages, and divorces, including notification systems, roles of different actors, and certification standards.

Chapter 4: Vital Statistics Production and Use offers comprehensive guidance on transforming registration data into vital statistics, including data flow, quality assurance, analysis, dissemination, and use for policy and planning.

Chapter 5: Social and Behavior Change Strategies presents approaches which aim to increase the demand for registration through community engagement, communication campaigns, and addressing social and cultural barriers.

Chapter 6: Digital Transformation and Interoperability examines the use of technology for registration and data management, interoperability with other systems, and data protection standards.

Chapter 7: Monitoring, Evaluation and Continuous Improvement establishes frameworks for tracking implementation, measuring outcomes, and ensuring continuous system improvement.

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CHAPTER 2: LEGAL AND INSTITUTIONAL FRAMEWORKS FOR CIVIL REGISTRATION AND VITAL STATISTICS SYSTEM

Chapter Purpose
This chapter provides comprehensive practical guidance for developing and revising legal frameworks for civil registration and vital statistics systems in West Africa.

2.1 Introduction: The Foundation of Functional CRVS Systems

Civil Registration and Vital Statistics (CRVS) systems cannot function effectively without robust legal and institutional frameworks. These frameworks serve as the architectural foundation upon which all CRVS operations are built. They establish rights and obligations for each party, define institutional mandates, have clear stipulations for data protection, collection and use, and provide the authority necessary for compulsory registration. They also have special provisions for mandatory collection, compilation of vital statistics, and clear mandates for courts, ministries of health, and other identification authorities.

In West Africa, despite some notable efforts over the past decade, several countries continue to have weak legal and institutional frameworks. This represents one of the most significant barriers to achieving universal civil registration. Despite decades of efforts, significant investments and strong political will, registration rates for births remain below 50 percent in many countries, while marriage and divorce registration rates often fall below 5 percent [1]. Death registration and certification is almost non-existent, due to significant barriers that have not yet been researched. This failure is born fundamentally from inadequate legal frameworks that fail to address the region's unique challenges: legal pluralism, fragmented institutional mandates, limited accessibility, corruption, and gender discrimination. Many of the CRVS systems have been put in place over the colonial regime, and the legal frameworks and functioning are only part of this heritage.

The 2030 Agenda for Sustainable Development has given new urgency to CRVS reform. Sustainable Development Goal (SDG) Target 16.9 calls for legal identity for all, including birth registration, by 2030. SDG Target 17.19 calls on countries to build existing initiatives to develop measurements of progress on sustainable development that complement GDP, including through civil registration data. The African Union Agenda 2063 similarly recognises universal civil registration as foundational to continental integration, free movement of persons, and the realisation of the African Continental Free Trade Area (AfCFTA). For countries in West Africa, where cross-border mobility is a daily reality and regional integration is a political priority, harmonised and functional CRVS legal frameworks are not merely a technical requirement, but a precondition for achieving these continental ambitions.

This chapter is organised around the core elements of an effective CRVS legal framework. It begins with the foundational legal principles (compulsory registration, continuity, affordability, gender equality) in Section 2.2. It then proceeds to the scope of vital events to be registered (Section 2.3), institutional mandates and coordination mechanisms (Sections 2.4–2.5), the critical challenge of harmonizing plural legal systems (Section 2.6), data protection (Section 2.7), registration procedures and timelines (Section 2.8), quality assurance (Section 2.9), financing (Section 2.10), enforcement (Section 2.11), the legislative reform process itself (Section 2.12), and regional harmonisation (Section 2.13). Throughout, the chapter provides practical guidance drawn from the experience of countries in the region, including Côte d'Ivoire, Guinea, Ghana, and Senegal, as well as lessons from other African countries that have undertaken successful CRVS reforms.

It provides comprehensive guidance for developing legal and institutional frameworks that are rights-based, gender-transformative, culturally appropriate, and operationally effective. It draws on international standards—particularly the United Nations Guidelines on the Legislative Framework for Civil Registration, Vital Statistics and Identity Management Systems (GOLF, 2023) and the UN Principles and Recommendations for a Vital Statistics System, Revision 3 (2014)[2]—while addressing the specific contexts and challenges of West African countries.

Why Legal Frameworks Matter

Legal frameworks serve five critical functions:

Establishing Rights: Legal frameworks transform civil registration from an administrative convenience into a fundamental human right. Every person has the right to a legal identity, recognition before the law, and documentation of their vital events. Without legal frameworks that explicitly establish these rights, individuals—particularly the underserved, and vulnerable, the majority of whom are women and children—lack means of recourse when denied registration services.

Creating Obligations: Comprehensive legislation makes registration compulsory for all settlers within a country's territory and jurisdiction, regardless of nationality, legal status, ethnicity, religion, or socioeconomic condition. This universal obligation ensures that CRVS systems aim for complete coverage rather than serving only those who voluntarily seek registration. It also

ensures that those who are most at risk, including in their country of origin, have a legal instrument of protection, and proof of their ties with their families.

Defining Institutional Mandates: This refers to the clear legal designation of which institutions are responsible for registration, vital statistics production, data management, and service delivery prevents the fragmentation and institutional conflicts that plague many systems in the region. When multiple governmental agencies claim mandates that overlap, without clear delineation of responsibilities, the result is paralysis and poor service delivery.

Protecting Data: As CRVS systems increasingly adopt digital technologies, comprehensive data protection legislation becomes essential to safeguard individual privacy, prevent unauthorised access, and ensure that personal information collected for registration purposes is not misused for surveillance, discrimination, or commercial exploitation.

Enabling Enforcement: Legal frameworks provide the authority necessary to enforce registration requirements, establish penalties for non-compliance, sanction officials who abuse their positions, and ensure accountability throughout the system.

The Regional Context: Challenges Requiring Legal Solutions

West Africa faces several characteristic challenges that legal frameworks must address:

Legal Pluralism: Most countries operate under multiple legal systems simultaneously civil law (inherited from colonial powers), customary law (based on traditional practices), and religious law. These parallel systems create confusion about which marriages are legally recognised, which authorities have jurisdiction over family matters, and how customary practices relate to civil registration requirements, if at all.

Low Registration Rates: Despite decades of awareness campaigns for birth registration and technical assistance, registration rates remain stubbornly low. In many countries, fewer than half of births are registered, and marriage and divorce registration rates are even lower. This suggests that the problem is not simply lack of public awareness, but systemic barriers embedded in legal frameworks. These include: excessive fees, limited accessibility, discriminatory provisions, and inadequate enforcement mechanisms. Ther may also be limited understanding of social community norms and practices that govern vital events in life.

Gender Discrimination: Many legal frameworks contain provisions that discriminate against women, requiring husbands' permission for women to register marriages, denying mothers the right to register births independently, setting different minimum marriage ages for men and women, and failing to protect women's property rights in customary marriages. These discriminatory provisions violate international human rights standards and perpetuate gender inequality.

Institutional Fragmentation: CRVS functions are often scattered across multiple ministries and government agencies with unclear mandates, limited coordination, and competing priorities. Civil registration may fall under the Ministry of Interior, while vital statistics production may be handled by the National Statistics Office, health notification by the Ministry of Health, and marriage

registration by the Ministry of Justice, divorce judgement with the Ministry of Justice, and registration with the local authority of the Ministry of Interior or Ministry of Territorial Administration. Without clear legal designation of responsibilities and coordination mechanisms, these agencies work in silos, duplicating efforts and can create gaps in coverage.

Corruption and Unofficial Fees: Even where legislation stipulates free registration, the issuance of the documentation is often not free. Unofficial payments and bribes create barriers that disproportionately affect the poor. In some countries, registration officials exploit legal ambiguities and limited oversight to demand payments for services that should be free, undermining the entire system.

Limited Accessibility: Legal frameworks often establish registration systems that serve urban, educated populations while ignoring rural, remote, and marginalised communities, or they may have insufficient provisions for special groups. Inaccessibility and low demand persist for CRVS services among those most in need. This is largely due to the absence of legal mandates for decentralisation, mobile registration, and integration with health facilities, as well as a lack of specific provisions addressing social and cultural norms. Without legal mandates for decentralisation, mobile registration, and integration with health facilities, as well as specific provisions that take into consideration social and cultural norms, CRVS services remain inaccessible to those who need them most, and in many cases there is limited demand for these services.

2.2 Core Legal Principles for CRVS Systems

Effective legal frameworks for CRVS must be built on fundamental principles that ensure universal coverage, protect individual rights, and enable operational effectiveness.

2.2.1 Constitutional and Human Rights Foundations

CRVS legislation must be grounded in constitutional provisions and international human rights instrument such as conventions and covenants. The right to a legal identity is recognised in multiple conventions that West African countries have ratified:

The Universal Declaration of Human Rights (1948) establishes that everyone has the right to recognition everywhere as a person before the law [3]. The International Covenant on Civil and Political Rights (1966) affirms this right to legal recognition [4]. Most importantly for children, the Convention on the Rights of the Child (1989) mandates that every child shall be registered immediately after birth and shall have the right from birth to a name and to acquire a nationality [5]. The African Charter on the Rights and Welfare of the Child (1990) reinforces these obligations, requiring African states to ensure birth registration and legal protection of the child's name and nationality [6].

Additionally, Article 5 in the African Charter on Human and Peoples' Rights (1981) states that every individual shall have the right to the respect of dignity inherent in a human being and to the recognition of their legal status. The Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo Protocol, 2003) specifically addresses women's

rights in the context of marriage, requiring state parties to enact legislation guaranteeing that every marriage is recorded in writing and registered in accordance with national laws (Article 6(d)). These instruments provide a strong normative foundation for CRVS legislation in the region and should be explicitly referenced in national legislation as part of the constitutional bloc [7].

National constitutions should explicitly recognise the right to a legal identity and mandate the state to establish systems for civil registration. Constitutional provisions are the highest level of legal protection, and source of law, and create obligations that cannot be easily modified by subsequent legislation. Countries in West Africa that have planned or are currently undertaking constitutional reform should embed civil registration rights at the constitutional level.

2.2.2 Compulsory and Universal Registration

The UN Principles and Recommendations emphasise that a civil registration system must be compulsory to ensure its smooth operation and effectiveness [8]. Legislation must clearly stipulate that registration of all vital events—at the bare minimum births, marriages, divorces and deaths—is a legal obligation for all persons who are present on the territory and jurisdiction of the state at the moment of the occurrence of the event, and within the legal framework of registration.

This signifies that registration by the legally mandated authorities is not merely a voluntary administrative procedure, but a legal requirement backed by law. Every individual, regardless of nationality, legal status, location, ethnicity, religion, or socioeconomic status, has both the right and the obligation to register vital events. Furthermore, the state, as it has signed and ratified different legal instruments stipulating these or at least some of these events, has the obligation to create the conditions to register and certify them.

What Compulsory Registration Requires:

The law must state explicitly that registration is a legal obligation, not optional. Côte d'Ivoire's Civil Status Law establishes that civil status can be proven only through civil status acts, making formal registration the primary means of legal recognition [9].

While penalties for non-compliance may be established to reinforce the compulsory nature of registration, these must be proportionate and carefully designed to encourage rather than discourage registration. Penalties should never create insurmountable barriers to late registration, as this would defeat the purpose of achieving universal registration. In West Africa, Guinea's 2023 Law on Civil Status (Loi L/2023-0019/CNT) takes a comparable approach: late registration is handled through an accessible declaratory procedure *(jugement supplétif)* rather than through financial penalties on families, reflecting a deliberate policy choice to prioritise universal coverage over punitive enforcement.

The State's Reciprocal Obligations:

Compulsory registration can only be enforced if the state provides accessible, affordable, and quality registration services. This includes having sufficient numbers of registration offices, trained

competent staff, free or minimal-cost registration, and extending services to rural and remote areas, to the underserved and most vulnerable of all.

Universal registration must be available to all population groups without discrimination. This includes refugees, internally displaced people, stateless persons, foundlings and abandoned children, nomadic and pastoralist groups, ethnic minorities, persons with disabilities, and other vulnerable groups. No person should be denied registration based on their circumstances, legal status, sex, or ability to pay. Legislation must include specific provisions for foundlings and children of unknown parentage, designating the public authority responsible for declaring the birth and ensuring that the absence of parental information does not prevent registration or the issuance of a birth certificate. For nomadic and pastoralist populations who cross borders seasonally, legislation should provide for registration by any competent registrar within the territory, with provisions for the transmission of records to the registrar of the individual's habitual residence.

The Gap Between Law and Practice:

In many West African countries, registration rates remain low despite legislation making registration compulsory. The challenge is not the absence of compulsory provisions but their enforcement and the accessibility of services. Guinea's civil registration system legally requires registration of all vital events, but faces significant accessibility challenges, particularly in rural areas where registration centres are located only in commune administrative offices [9]. Countries should explore possibilities to couple legal obligations with incentives, awareness campaigns, removal of barriers, and improved service delivery to achieve universal registration in practice, not just in law.

2.2.3 Continuous, Permanent, and Confidential Systems

Legislation must establish CRVS systems as continuous, permanent, and confidential:

Continuous Operation: Registration services must operate without interruption throughout the year, including and especially with provisions to maintain services during emergencies, conflicts, or public health crises. The COVID-19 pandemic revealed that many countries did not designate CRVS as essential services, resulting in service interruptions that created registration backlogs and left many children without birth certificates [10], deaths unregistered, and married people unprotected or under-protected by the law.

Permanent Record-Keeping: Records must be preserved indefinitely, with provisions for secure storage, retrieval, and protection against loss, damage, or unauthorised destruction. Archives must be maintained in both paper and digital formats where feasible, with disaster recovery plans and backup systems specifically stipulated in the provisions of the law.

Countries should also consider establishing legal provisions for the digital continuity of CRVS services. Where digital systems are in place, legislation should require offline functionality for registration applications, ensuring that registration can continue even when Internet connectivity is interrupted. Backup protocols should include provisions for automatic synchronisation of offline

records once connectivity is restored, as well as clear procedures for validating records created during offline periods. The experience of the COVID-19 pandemic demonstrated that countries with a pre-existing digital infrastructure and legal provisions for remote or electronic registration were better able to maintain service continuity.

Confidentiality Protections: Individual registration records contain sensitive personal information that must be protected. Legislation must specifically prohibit unauthorised access to or disclosure of personal information; limit access to data to authorised personnel only; establish penalties for breaches of confidentiality; permit the use of individual records only for authorised legal and statistical purposes; and lastly, ensure that vital statistics are produced in an aggregate form that cannot identify individuals [11.]

2.2.4 Free or Affordable Registration

The UN Principles and Recommendations state that registration should be free of charge or at minimal cost to ensure that all persons, regardless of economic condition, can register vital events [12]. Economic barriers seem to be among the most significant obstacles to universal registration, particularly affecting poor and marginalised population, albeit significant research is still needed to properly identify causes of non registration of vital events, in particular marriages, divorces and deaths.

Free Registration Within Time Limits:

Registration of vital events within legally specified time frameworks should be completely free. Guinea provides free birth registration, recognizing that charging fees creates barriers to compliance [13]. Côte d'Ivoire's 2018 reforms make death declarations entirely free and compulsory, with only copies and extracts incurring a nominal fee of 500 FCFA (approximately US$0.80) [14].

Minimal Late Registration Fees:

While some countries still charge fees for registration outside prescribed time limits, it is recommended they are minimal and proportionate. Late registration fees should be established by law or regulation, not left to the discretion of officials, and should include clear fee waiver provisions. Fees should never be so high that they effectively prevent registration, as this defeats the purpose of the compulsory system. Finally, it is recommended that fees are uniform over the entire territory for all groups, not left at the decision of local authorities.

Fee Waivers for Vulnerable Populations:

Legislation must include clear provisions for vulnerable groups, including the poor, displaced persons, orphans, persons with disabilities, and others in difficult circumstances. This is to ensure registration services and certificates can be obtained without any cost. These waivers should not require extensive documentation, that vulnerable populations may lack.

Affordable Certificates:

While some countries may charge nominal fees for certificate copies, the first certificate should ideally be free. Where fees are charged, they must be minimal and affordable. Fees should be clearly established by law and publicly posted, with official receipts issued for all payments to prevent corruption.

Regional Progress and Challenges:

Many countries in West Africa have made significant progress in eliminating fees for birth registration within prescribed time limits, recognizing this as essential to achieving SDG Target 16.9 on legal identity for all. However, unofficial payments remain a common challenge, and late registration fees and processes can be prohibitive. Legislation must be accompanied by budgetary allocations to ensure free services are available, oversight mechanisms to prevent corruption, and social and behaviour change programmes to inform the population of their right to free registration.

2.2.5 Gender Equality and Non-Discrimination

Legislation must explicitly prohibit discrimination in registration on the basis of sex, gender, marital status, ethnicity, religion, nationality, legal status, disability, or any other characteristic.

Specific Gender-Sensitive Provisions:

Laws should allow mothers to register births independently, without requiring the father's presence or consent. This is critical in contexts where fathers may be absent, unknown, or unwilling to participate, and where requiring the fathers' involvement creates barriers for single mothers, widows, and survivors of sexual violence. This requirement, however, presents challenges in West Africa. Given that most unions in the region are not officially recorded in civil registers, the physical presence of the father becomes essential. This measure is necessary to safeguard against fraudulent paternity claims. Where the father's presence is required for paternity acknowledgement, legislation must provide an alternative pathway, such as a sworn declaration by the mother, witnessed by two persons, that does not delay or prevent birth registration. The registration of the birth and the establishment of filiation are distinct legal acts; the former must never be made contingent on the latter. Legislation should explicitly provide that a child born outside a registered union can be registered on the mother's declaration alone, with the birth certificate recording the mother's name without any notation indicating illegitimacy, and that paternity may be added by marginal annotation at any subsequent time.

Laws should prohibit discriminatory practices for inheritance and property rights based on gender, ensuring equal rights for women and men in all registration procedures.

Legislation must mandate the collection and reporting of sex-disaggregated data to enable monitoring of gender-specific patterns and identification of gender-based barriers to registration.

Laws should address harmful traditional practices such as child marriage by setting minimum marriage ages consistent with international standards—18 years for both men and women without exception [15].

Box 2.2b: Gender-protective provisions in marriage registration—ECOWAS country examples

The Republic of Guinea (Conakry)'s 2023 law on Civil Status contains an explicit gender-protective provision requiring that each spouse receives an individual copy of the marriage certificate (acte de mariage) upon registration. Crucially, the law further requires that the woman also receives a copy of the *livret de famille*—the family record booklet that documents all family vital events—in her own name. This dual entitlement ensures that women have independent documentary proof of their marital status and family composition, which is essential for accessing inheritance rights, initiating divorce proceedings, claiming custody of children, and obtaining social protection benefits. The provision directly addresses a longstanding practice in parts of the region where the *livret de famille* was issued exclusively to the husband, leaving wives without personal documentation of their own marriage and family status.

Similarly, Senegal's Family Code requires issuance of a *livret de famille* to both spouses upon civil marriage registration. Côte d'Ivoire's civil status legislation requires that each party to a marriage receives a certified copy of the marriage certificate. These provisions serve as regional models for gender-protective legislation in CRVS systems.

Source: Republic of Guinea (2023); Republic de Sénégal (2021); Republic de Côte d'Ivoire (1964/2018); Maputo Protocol (2003)

Regional Challenge:

Customs and religious practices in many countries in the region discriminate against women in marriage, divorce, inheritance, and guardianship of children in case of separation. Legal reforms must address these discriminatory provisions while engaging sensitively with cultural and religious institutions. The objective is rather to ensure that these comply with constitutional principles of gender equality and international human rights obligations, rather than abolish such culturally validated practices.

Box 2.1: How ECOWAS implement foundational legal principles

Côte d'Ivoire's Law No. 64-374 on Civil Status (as amended in 2018) establishes compulsory, free registration for all vital events, with registration fees waived entirely for deaths. Guinea's law on civil status from 2023 enshrines universal, compulsory registration for all persons on the territory, with village notebooks as the community-level notification mechanism (Article 5).

Source: National legislation of referenced countries; UNECA APAI-CRVS (2019); UNSD, GOLF (2023)

2.3 Scope of Registration: Vital Events Covered

2.3.1 Core Vital Events

Legislation must mandate registration of core vital events in accordance with UN standards [16]:

Live Births: Every live birth must be registered regardless of location, health facility, home, or elsewhere. Legislation should provide for registration at health facilities, in communities, and for births occurring outside national territory to citizens, where possible.

Deaths: All deaths must be registered with cause of death certification. Legislation should mandate the notification of deaths by health facilities, community health workers, family members, and other informants. Medical certification of cause of death according to International Classification of Diseases (ICD) standards is essential for vital statistics and public health surveillance, as well as for evidence-based reliable programmes to address such causes. However, in West Africa, where most deaths occur outside of formal medical facilities and are therefore not registered by traditional clinical systems, verbal autopsies will be crucial for determining the causes of death. By using standardised interviews with caregivers and family members to reconstruct the circumstances and symptoms preceding a death, this method allows public health specialists to assign a probable cause of death in regions lacking specialised pathology services.

Foetal Deaths/Stillbirths: Registration of foetal deaths after a specified gestational age (typically 28 weeks) enables monitoring of pregnancy outcomes and maternal health. This information is critical for reducing maternal and perinatal mortality.

Marriages: All marriages must be registered, whether civil, customary, or religious. Legislation should provide for recognizing and registering different forms of marriage while ensuring they meet minimum standards for consent, age, and absence of impediments. Customary and religious authorities should be partners in civil registration processes, and the law should specifically stipulate these partnerships.

Divorces: All divorces must be registered, including those concluded through customary or religious procedures. Clear requirements for legal documentation protect the rights of both parties, particularly women.

2.3.2 Other Civil Status Events

Legislation must also have provisions for the registration of adoptions; legitimations and recognition; legal separations and annulments; changes of name; and corrections and amendments to registration records. While not universally required, these events are important for legal status and should be included in comprehensive legislation.

2.3.3 Marriage and Divorce Registration: Addressing Regional Challenges

Marriage and divorce registration are among the most neglected aspects of CRVS in West Africa, with registration rates often below 5 percent [17]. This low registration has profound implications for human rights, particularly women's rights, property inheritance, child custody, and social protection.

Recognition of Customary and Religious Marriages:

Most marriages in the region are celebrated according to customary or religious rites rather than through civil registration. For example, in Senegal, Niger and Mali that have predominantly Muslim populations, a marriage is often considered socially "complete" only after the religious ceremony. Hence, couples have social recognition, but not the legal protection that civil marriages—or the translation of customary and religious marriages in the civil registration record—creates. This creates a fundamental tension between social practice and legal recognition. Legislation must bridge this gap by recognizing customary and religious marriages as valid if they meet specified criteria—consent, minimum age, absence of impediments, and immediate translation in the civil registers—rather than creating parallel systems where customary marriages are "second-class" or unrecognised.

Prohibiting Child Marriage:

All legislation must establish the minimum age of 18 years for marriage for both men and women, in accordance with international human rights standards and the African Charter on the Rights and Welfare of the Child.

Box 2.2a: Prohibition of child marriage in law—ECOWAS country examples

The Republic of Guinea civil status law explicitly sets 18 years as the minimum age of marriage for both men and women, with no exceptions permissible on customary or religious grounds. Any marriage involving a person under 18 requires prior judicial authorisation, and civil registrars are expressly prohibited from recording or transcribing such marriages absent that authorisation. Penalties are established for both officiants and registrars who facilitate underage marriages.

Senegal's Family Code (Article 111) sets 18 years as the minimum age for men and 16 for women, with judicial dispensation possible; reform advocates have called for alignment at 18 for both sexes. Côte d'Ivoire's civil status legislation prohibits the registration of marriages involving persons under the legal minimum age and requires registrars to verify ages against birth certificates before proceeding.

Ghana's Children's Act (1998) and the Marriage Act prohibit marriage under 18, with the Children's Act specifically providing that a parent or guardian who causes or permits a child to be married commits an offence.

Source: Republic of Guinea (2023); Republic de Sénégal (2021); Republic de Côte d'Ivoire (1964/2018); Republic of Ghana (1998); African Charter on Rights and Welfare of the Child (1990)

Addressing Polygamy:

In countries where polygamy is legally permitted, legislation must include special provisions that protect the equal rights of all wives in polygamous unions. This includes requirements for consent of existing wives before a man enters into additional marriages, equitable distribution of marital property, equal inheritance rights, and judicial oversight to ensure compliance with legal requirements. If consent for polygamous union is required at first marriage, the registrar must ensure that the wife has understood and consented to such a type of marriage.

Registration for Legal Effect:

Legislation should establish that while customary and religious marriages may be socially and religiously valid, registration with the legally mandated authorities is required for the marriage to have full legal effect, particularly regarding property rights, inheritance, spousal support, child custody, and the ability to remarry after divorce or death of the spouse. This incentivises registration without invalidating marriages that have not yet been registered, allowing for the registration of past events.

Divorce Registration:

Divorce registration faces even greater challenges than marriage registration, as many divorces occur through customary or religious processes with no formal documentation. Legislation must establish that all divorces must be registered with civil authorities regardless of how they were obtained—whether through civil courts, customary authorities, or religious tribunals. Registration must be required to give divorce legal effect. The law should establish a clear mechanism of notification of divorce to the local authorities directly by the court, customary authorities, religious authorities, in the conditions set out in the law.

Laws require proof of registered divorce for remarriage. This prevents bigamy and ensures that previous marriages have been properly dissolved. Countries in the region such as Guinea and Ghana require such proof of divorce registration.

Registration provides the legal documentation necessary for individuals to claim their rights after divorce. Women who lack divorce certificates often cannot prove their marital status for purposes of inheritance, custody, remarriage, or accessing social services. Legislation should ensure free divorce registration to protect women’s rights and eliminate financial barriers.

Critically, legislation must explicitly state that women can register divorces independently without requiring the cooperation, consent, or presence of their former spouses. This is essential given the power imbalances and the potential for men to obstruct registration to maintain control over women. In practice, the registration of a divorce by any of the spouses should be clearly stipulated, as long as there is a court order or a legal judgement available.

Box 2.2: Scope of vital event registration—Country examples

Côte d'Ivoire requires registration of births, deaths, marriages, divorces, legitimations, and adoptions under Law No. 64-374 (as amended).

Ghana's Births and Deaths Registration Act covers all births and deaths occurring in Ghana, including stillbirths of 28 weeks or more gestation.

Guinea's legislation from 2023 covers births, deaths, marriages, divorces and adoptions, and introduces provisions for registering vital events occurring abroad.

Mali's Family Code includes filiation (paternity recognition) and legitimation among registrable events. Nigeria's system registers births, deaths, marriages and divorces through a federated structure involving state civil registration authorities. Senegal's Family Code registers births, deaths, marriages, divorces and recognition.

2.4 Institutional Mandates and Responsibilities

2.4.1 Primary Institutions in CRVS Systems

Effective CRVS systems require the clear assignment of mandates to specific institutions:

Civil Registration Authority (CRA) (or equivalent lead agency responsible for civil registration): This refers to the lead agency responsible for civil registration, usually located within the Ministry of the Interior, Ministry of Justice, ministry of territorial administration, or operating as an independent authority. Responsibilities include operating registration offices at national and local levels; receiving notifications of vital events; verifying documentation and registering events; issuing certificates; maintaining the civil register; maintaining the archives and transmitting registration data to the national statistics office.

National Statistics Office (NSO): This national office is typically responsible for vital statistics production and dissemination. Functions include receiving registration data from the CRA; processing, coding, and quality-checking data; producing vital statistics compilations; analysing demographic trends; disseminating statistics to government, researchers, and the public; and assessing completeness and quality of registration data.

Ministry of Health (MOH): This institution is critical for birth and death notification. Responsibilities include ensuring health facilities notify births and deaths; training health workers on notification procedures; certifying causes of death according to ICD standards; and implementing medical certification of cause of death.

In the context of West Africa, where a significant proportion of deaths occur outside health facilities and without medical attendance, national legislation should additionally mandate the use of verbal autopsies as a standard instrument for ascertaining the cause of death in community settings. A verbal autopsy interview, conducted by a trained interviewer with the family of the deceased,

would provide the information necessary to assign a probable cause of death in accordance with ICD standards. The World Health Organisation has established standardised verbal autopsy instruments and analytical methods that countries should incorporate by reference into their CRVS legislation or associated regulations [18].

Ministry of Justice/Courts: These legal bodies are involved in registration of marriages, divorces, adoptions, and legitimations. Responsibilities include maintaining marriage registries; processing divorce decrees and ensuring registration; and coordinating with customary and religious authorities.

National Identification Authority (NIA): Where separate from the CRA, this authority is responsible for issuing national identity documents. It must ensure interoperability with civil registration systems to enable seamless data exchange and prevent duplication.

Local Government Authorities: These are often responsible for operating registration offices at district and community levels, employing registrars, and ensuring accessibility of services.

2.4.2 Legal Designation of Responsibilities

Legislation must clearly designate what institution has the primary responsibility for each function. The UN Guidelines recommend that the law should clearly identify the government agency or agencies with primary responsibility for the civil registration system and specify the mandate, powers, and functions of those agencies [19].

Common challenges in the region include overlapping mandates between multiple agencies; unclear lines of authority; lack of coordination mechanisms; competing claims to ownership of CRVS data; and parallel registration systems operated by different ministries. These problems stem from inadequate legal designation of responsibilities.

Recommended Approach: Designate a single lead agency (typically a civil registration authority) with overall responsibility for the registration function, while clearly defining the complementary roles of other agencies. Establish the National Statistics Office as the sole agency responsible for production and dissemination of vital statistics. Use legislation to resolve institutional conflicts before they arise rather than leaving mandates ambiguous.

The legal framework should clearly establish the hierarchy of legal instruments governing CRVS: the constitution at the apex, followed by organic or enabling legislation, implementing regulations and decrees, ministerial orders and administrative circulars, and standard operating procedures. Each level should be consistent with the levels above it. The Guidelines of legal Frameworks for Civil Registration (GOLF) recommends that the main law should be an act of parliament (or equivalent primary legislation), supplemented by regulations that can be amended more easily to adapt to operational needs without requiring parliamentary approval for every procedural change.

2.4.3 Decentralisation and Local Registration Offices

Legislation must address the decentralisation of registration services by establishing a network of registration offices accessible to all populations; defining the hierarchy of offices (national, regional, district, local); specifying the geographic jurisdiction of each office; delegating authority to local registrars while maintaining central oversight; providing for mobile registration services for hard-to-reach populations; and establishing registration facilities within health centres, maternity units, and hospitals.

Globally, sustained investment in birth registration has driven significant progress: the proportion of children under five whose births are registered rose from 63 percent to 75 percent over the decade to 2019, demonstrating the power of bringing services closer to the population.[20]

Legislation should explicitly mandate the integration of birth and death notification within health service delivery. The GOLF recommend that health facilities be designated as notification points for births and deaths, with health workers having a legal obligation to notify the civil registrar of every birth and death occurring in their facility within a specified timeframe. In practice, this means that maternity wards, neonatal units, and health centres should have designated notification officers and standardised notification forms. For deaths, legislation should require that no burial permit be issued without prior death notification to the civil registrar, creating an automatic link between the health system and the civil registration system. Countries such as Rwanda and Ethiopia have successfully implemented health facility-based birth notification systems that have dramatically increased registration completeness, and these models offer valuable lessons for West Africa.

Box 2.3: Institutional arrangements for CRVS—ECOWAS country models

Ghana's Births and Deaths Registry operates under the Ministry of Local Government and Rural Development, decentralised to the district level, with over 900 registration points including hospitals and health centres.

Senegal's civil registration is managed by the Centre d'État Civil under the Ministry of Local Government, with 560 civil registration offices at commune level.

Guinea's Direction Nationale de l'État Civil (DNEC), under the Ministry of Territorial Administration, uses village notebooks as a community notification mechanism feeding into local offices.

Côte d'Ivoire's Direction de l'État Civil, Identification et des Étrangers coordinates civil registration, with health facilities reporting births and deaths.

Nigeria's National Population Commission Act establishes a federal commission with offices in all 774 local government areas.

Source: National legislation of referenced countries; UNECA APAI-CRVS (2019); UNSD, GOLF (2023)

2.5 Coordination Mechanisms

2.5.1 National CRVS Coordination Bodies

Given the multisectoral nature of CRVS systems, legislation should establish formal coordination mechanisms. Many countries in Asia and the Pacific have established national CRVS coordination mechanisms, and several African countries follow this model.

National CRVS Coordination Committee:

This body should be established through primary legislation (an act of parliament or equivalent), not merely by executive decree or ministerial circular, to ensure its permanence, political anchoring, and immunity from administrative reorganisation with clear composition, mandate, and functions. The law must specify that the coordination committee is a permanent body, not an ad hoc arrangement, and must convene at regular intervals no less than quarterly.

The committee should be chaired by a high-level official such as the Secretary-General, Cabinet Secretary, or someone reporting to the Prime Minister's office, to ensure political authority and cross-governmental influence. Members should represent all key agencies: CRA, NSO, MOH, Ministry of Justice, Ministry of Local Government, NIA, Ministry of Finance, and Ministry of Planning. Observers should include development partners, civil society organisations, and academic institutions.

The mandate should include overseeing implementation of the national CRVS strategic plan; resolving institutional conflicts and clarifying roles; mobilizing resources and advocating for CRVS investment; monitoring progress toward national and international targets; ensuring harmonisation of legal and administrative procedures; and promoting intersectoral data sharing and interoperability.

Functions should include holding regular meetings (quarterly or bi-annually); reviewing performance reports and recommending corrective actions; approving standard forms, procedures, and protocols; facilitating training and capacity development; coordinating with development partners; and reporting to Cabinet or Parliament on CRVS system performance.

2.5.2 Technical Working Groups

The Technical Working Group (TWG) supports the national coordination committee, and legislation or regulations should provide for the establishment of technical working groups on specific issues: legal reform; birth and death registration; marriage and divorce registration; vital statistics production and use; digital transformation and interoperability; quality assurance and assessment; and community engagement and behaviour change.

These working groups conduct detailed technical work, develop proposals for the coordination committee's consideration, and ensure that specialised expertise informs policy decisions.

In addition to national-level coordination, legislation should provide for subnational coordination mechanisms at the regional, district, and local levels. In West Africa, where decentralisation is a reality in many countries, local coordination committees bringing together the civil registrar, health facility personnel, community leaders, and local government officials are essential for ensuring that registration services function effectively on the ground. These local committees can address practical challenges such as identifying unregistered populations, coordinating mobile registration campaigns, resolving access barriers, and monitoring local registration completeness. Countries such as Senegal and Ghana have established subnational CRVS committees that have proven effective in improving registration rates at the community level.

2.5.3 Regional Coordination

Given cross-border movements and the need for regional harmonisation, coordination mechanisms should extend to the regional level through the Economic Community of West African States (ECOWAS) and other regional economic communities. Regional coordination enables mutual recognition of documents, cross-border registration procedures, and sharing of best practices.[21]

2.6 Integration of Civil, Customary, and Religious Legal Systems

2.6.1 Legal Pluralism in West Africa

Most countries in the region operate under legal pluralism, where civil law, customary law, and religious law coexist. This creates particular challenges for marriage and divorce registration, and also for death registration.

Types of Legal Systems:

Civil law is based on codified statutes and regulations, usually derived from colonial legal traditions such as the French Code Civil or British Common Law. This governs civil marriages and provides legal frameworks for property, inheritance, and family law.

Customary law is based on traditional practices and norms of indigenous African peoples. It governs most marriages and family relations in rural areas and varies significantly by ethnic group and region.

Religious law—including Islamic and Christian traditions—influences marriage and family matters for adherents. Religious marriages and divorces are common across the region.

2.6.2 Harmonisation Strategies

Legislation should work towards the harmonisation of these systems while respecting cultural and religious diversity:

Minimum Standards Approach: Establish minimum legal standards—such as a minimum marriage age, consent requirements, and registration obligations—that apply to all forms of

marriage and divorce regardless of the system under which they are celebrated. These minimum standards are non-negotiable and derive from constitutional principles and international human rights obligations.

Integrated Registration: Require that all marriages and divorces, whether civil, customary, or religious, must be registered at the civil registration authority to have legal effect. The transcription procedure for customary and religious marriages should be streamlined and accessible: legislation should specify the minimum documentation required (which must be obtainable without cost to the couple), the maximum processing time for transcription, and the duty of the registrar to assist parties in completing the required formalities. Legislation must also provide for retrospective registration of long-standing customary and religious unions, including those contracted decades ago, through a simplified procedure that preserves the original date of the union rather than treating it as a new marriage. This is essential to protect the property and inheritance rights of women in long-standing unregistered unions, particularly elderly women and widows.

Recognition with Conditions: Recognise customary and religious marriages as valid if they meet specified conditions—consent, minimum age, registration. Guinea's law of 2023 on Civil Registration sets forth such conditions.

Prohibition of Harmful Practices: While respecting customary and religious practices, legislation must prohibit practices that violate human rights: child marriage, forced marriage, marriages without informed consent, discriminatory provisions in inheritance, and denial of women's rights to property and guardianship. Constitutional principles and international human rights obligations take precedence over customary or religious practices that violate fundamental rights.

Capacity Building for Traditional and Religious Authorities: Engage traditional and religious leaders as partners in CRVS strengthening through training on legal requirements for registration; designating traditional and religious leaders as notifiers; creating mechanisms for traditional and religious marriages to be registered; and addressing cultural practices that hinder registration. This partnership approach is more effective than confrontational strategies that alienate community leaders.

Access to legal assistance is a critical but often overlooked component of CRVS systems in pluralistic legal environments. Many individuals—particularly women, rural populations, and the poor—lack knowledge of their registration rights or the procedures for regularizing their civil status. Legislation should provide for legal aid services specifically targeting CRVS-related matters, including assistance with late and delayed registration, correction of records, registration of customary marriages, and obtaining court orders for contested registrations. Countries may consider establishing legal aid clinics within civil registration offices or partnering with civil society organisations and legal aid associations to provide these services. The cost of legal aid for registration should be borne by the state as part of its obligation to ensure universal access to civil registration.

2.6.3 Court Systems and Jurisdiction

Legislation must clarify the jurisdiction of different court systems:

- Civil courts should have jurisdiction over civil marriages and divorces, adoptions, legitimations, and corrections to civil registration records.
- Customary courts may have jurisdiction over customary marriages and divorces, but these decisions must be registered with civil authorities to have legal effect.
- Religious tribunals—religious courts recognised under national law—may adjudicate religious marriages and divorces, but registration with civil authorities must remain mandatory for legal recognition.

Principle of Supremacy: Where conflicts arise between systems, legislation should establish that constitutional principles and international human rights obligations take precedence, particularly regarding gender equality, child rights, and non-discrimination. This does not abolish customary or religious law but establishes clear boundaries when practices conflict with fundamental rights.

Box 2.4: Legal pluralism and customary marriage registration—country approaches

Mali's Family Code recognises religious marriages and requires their transcription into the civil register to produce legal effects including inheritance and property rights.

Nigeria's Marriage Act (Cap. M6) distinguishes between statutory and customary marriages; the latter must be registered to have legal effect for succession and inheritance purposes.

Senegal's Family Code provides for the annotation of customary and religious unions on the civil register upon request.

The Republic of Guinea's civil status legislation sets forth equivalent conditions for the recognition of customary and religious marriages: consent of both parties, minimum age, absence of legal impediments, and transcription into the civil register. Customary and religious authorities are designated as notifiers, with an obligation to report the celebration of marriages to the local civil registrar within 30 days. The law further requires that the registrar verifies compliance with minimum age and consent requirements before proceeding with transcription, providing a procedural safeguard against the registration of forced or underage customary marriages.

Source: National legislation of referenced countries;

2.7 Data Protection, Privacy, and Confidentiality

2.7.1 Legal Framework for Data Protection

With increased computerisation of CRVS systems, data protection legislation is essential. CRVS data protection frameworks should align with the United Nations Personal Data Protection and Privacy Principles and the Organisation for Economic Co-operation and Development (OECD) Privacy Guidelines.[22]

At the continental level, the African Union Convention on Cyber Security and Personal Data Protection (Malabo Convention, 2014) has established the applicable regional framework for data protection, including digitised civil registration records. The Malabo Convention entered into force on 8 June 2023 following ratification by 15 member states, giving it binding force for states parties. Countries in West Africa that have signed or ratified the Malabo Convention must ensure that their CRVS data governance provisions align with its requirements on data collection, storage, access authorisation and cross-border data transfer. Several States in the region—including Senegal, and Côte d'Ivoire—have adopted national data protection legislation broadly consistent with the Malabo Convention framework.[23] CRVS legislation must explicitly cross-reference the applicable national data protection law, require that civil registration authorities register their data processing activities with the national data protection authority, and establish data-sharing agreements (memoranda of understanding) governing the exchange of registration data between government institutions.

Personal Data Protection: Legislation must have special provisions for and definitions of personal data and sensitive personal data; establish principles for lawful collection, processing, storage, and sharing; require consent for data processing (with exceptions for legal obligations); and prohibit unauthorised disclosure of such data.

Right to Privacy: Laws must protect individuals' rights to privacy in relation to their civil registration records; define which records may be accessed and by whom, and under which circumstances—for example, only by the individual concerned, authorised family members, or persons with legal authority—and prohibit the public disclosure of individual records.

Data Security: Legislation must include technical and organisational measures to prevent unauthorised access, loss, alteration, or destruction of data and registers/records; require encryption of data; establish regular security audits; and create incident response procedures for data breaches.

Access Controls: Laws should establish role-based access controls in digital systems; maintain audit logs of who accesses records; require strong authentication for system access; and prohibit sharing of passwords or credentials.

2.7.2 Confidentiality of Registration Records

The UN Principles and Recommendations emphasise that the Fundamental Principles of Official Statistics require that individual data collected by statistical agencies for statistical compilation be strictly confidential and used exclusively for statistical purposes.[24]

Legislation must prohibit disclosure of individual registration information except to authorised persons; it must establish penalties for breaches of confidentiality; it must permit statistical use only in aggregate, anonymised form; it must require data sharing agreements when data are shared between institutions; and finally establish oversight by a data protection authority or privacy commission.

2.7.3 Balancing Access and Protection

While protecting privacy, legislation must ensure access to registration information for individuals requesting their own records; parents or guardians of minors; authorised government agencies for legal purposes; statistical offices for vital statistics production; and researchers with appropriate ethical approvals and de-identified data.

The challenge in the region remains creating legal frameworks that while protecting privacy enable legitimate uses of registration data for public policy, research, and meeting individual needs.

Given the high levels of cross-border mobility in West Africa, legislation must also address data protection in the context of international data transfers. When registration records or personal data are shared across borders—for example, through ECOWAS free movement protocols or consular registration services—adequate safeguards must be in place. Countries should consider adopting provisions consistent with the African Union Convention on Cyber Security and Personal Data Protection (Malabo Convention, 2014), which provides a continental framework for data protection. Where countries have enacted national data protection legislation (as several in the region have done in recent years, including Senegal, Côte d'Ivoire, Burkina Faso, and Ghana), CRVS legislation should explicitly reference and align with these national data protection frameworks.

Box 2.5: Data protection in civil registration systems—Country examples

Senegal's Data Protection Law No. 2008-12 established the Commission des Données Personnelles (CDP), which exercises oversight over civil registration data held in digital systems.

Ghana's Data Protection Act 2012 (Act 843) provides comprehensive legal protection for civil registration records held in electronic format, prohibiting unauthorised disclosure and requiring consent for secondary use.

Nigeria's National Information Technology Development Agency Act and the Nigeria Data Protection Act 2023 apply to digital civil registration data managed by the National Population Commission.

Côte d'Ivoire's Law No. 2019-575 on Personal Data Protection, aligned with the African Union Malabo Convention, establishes an independent data protection authority with jurisdiction over civil registration databases.

Burkina Faso's Law No. 010-2004 on Data Protection covers civil status information, with civil registration authorities required to notify the Commission de l'Informatique et des Libertés of any new digital processing systems.

Source: National legislation of referenced countries; African Union, Malabo Convention (2014); UNECA APAI-CRVS (2019)

2.8 Registration Procedures and Timelines

2.8.1 Time Limits for Registration

Legislation must establish clear and realistic time limits for registration of each vital event, balancing the need for timely registration with practical considerations of accessibility, and taking into consideration social norms (e.g. the period for naming a child, the rest period after birth for a mother rest, the period of mourning, etc.).

Birth Registration:

Countries should establish a primary period of 30-90 days for free birth registration. For example, Côte d'Ivoire requires birth declaration within three months from the day of birth [25]. Guinea follows a similar approach, although accessibility challenges in rural areas mean that many births are recorded in village notebooks maintained by community agents before formal registration at commune offices [26].

A late registration period—from 30-90 days to one year—could in practice accommodate families who miss the primary deadline but still allow for administrative registration without requiring judicial procedures. Fees during this period, if any, should be minimal and subject to waiver for vulnerable populations, while requiring minimum documentation from them, and waiving for special circumstances and communities.

Delayed registration after one year typically requires additional documentation to verify the birth, often through a judicial procedure (jugement supplétif d'acte de naissance or equivalent). Workshop participants and regional experts consistently identify judicial procedures for delayed registration as one of the most significant barriers to universal coverage in West Africa: they are costly, time-consuming, require legal literacy, and are inaccessible for rural and marginalised populations. Countries should therefore consider replacing mandatory judicial procedures for delayed birth registration with an accessible administrative procedure conducted at the level of the civil registrar or district authority, requiring a sworn declaration by the parent or guardian supported by two witnesses, a health facility record, or other available evidence. Countries that retain judicial procedures should ensure that legal aid is available free of charge for persons who cannot afford legal representation. While fees may be charged, they should not be prohibitive, taking into consideration that some of the processes for late and delayed registration are already

costly and time consuming for the families. Most importantly , no one should be denied delayed registration simply because of the passage of time. Côte d'Ivoire's 2018 reforms specifically establish procedures for regularizing the civil status for persons who were never registered or whose registration contains errors [27].

Death Registration:

Many countries require death notification within 48-72 hours of death or before burial to issue a burial permit. However, in practice, particularly in rural areas where deaths occur at home, flexibility is often necessary, while keeping the declaration within a timeframe that would allow the timely closing of legal identity, and collection of data about the death for use in in public health and development programming. For instance, Côte d'Ivoire requires death declaration within fifteen days from the day of death [28].

Provisions must also exist for the registration of deaths discovered after the time limit, including deaths that occurred years ago but were never registered. This is essential for inheritance proceedings, estate settlement, and closure for families.

Marriage Registration:

Civil marriages conducted by designated marriage officers should be registered at the time of the ceremony. For customary or religious marriages, legislation should allow 30-90 days for couples to complete civil registration, but future spouses must be informed that without it, the marriage produces no legal effects.

Provisions for retrospective registration are critical. Many countries have large numbers of unregistered customary and religious marriages celebrated decades ago. Legislation must provide clear procedures for retrospective registration without requiring couples to re-celebrate their marriages.

Divorce Registration:

When a court grants a divorce, the court registry should immediately notify the civil registration authority, which should register the divorce and annotate the margin of the original marriage certificate. For customary or religious divorces, registration should occur within 30 days to provide legal documentation. For the moment, the registration of divorces typically remains with the divorced couple, often resulting in its non-transcription in the civil registers.

Many individuals, particularly women, who were divorced years ago through customary processes lack documentation of their divorced status. Legislation must allow registration of past divorces upon presentation of evidence.

2.8.2 Informants and Notifiers

Legislation must specify who is responsible for notifying and providing information for registration:

- For births: the father, mother, attending health worker, midwife, traditional birth attendant, or other family member present. **Nota bene:** The UN Principles and Recommendations for a Vital Statistics System, Rev 3, para 355 states that the primary informants should be: the head of the institution (or designee) if the birth occurred in a facility; or mother; or father. While West African countries have a specific cultural and economic context and have inherited colonial legislations mentioning the persons stated above, it is recommended that the primary hierarchy follows the UN Guidance.
- For deaths: a family member, attending physician, health facility, community health worker, or local authority, guardians at the cemetery, or religious leaders
- For marriages: parties to the marriage, marriage officiant, or witness, religious and customary leaders
- For divorces: court, parties to the divorce, or legal representative, religious or customary leaders.

Penalties for failure to notify should be proportionate and should not discourage registration.

2.9 Quality Assurance and Complaints Mechanisms

2.9.1 Quality Standards

Legislation should mandate quality assurance systems including standards for accuracy and completeness of registration; procedures for verification of information; training requirements for registrars and registration staff; regular audits of registration procedures and records; supervisory mechanisms; and performance indicators and targets. The responsibilities of the national statistical officials should be delineated, and similar procedures drafted for them – training, quality assurance mechanisms, audit and cross monitoring of the data.

Interoperability between the civil registration system and other government databases—health information systems, national identification registers, electoral rolls, education management systems—serves as both a quality assurance mechanism and as a means to improve the completeness of civil registration. When birth registration data is cross-checked against health facility delivery records, or death registration against cemetery permits and health facility death notifications, discrepancies can be identified and addressed. Legislation should provide the legal basis for such data matching while ensuring that privacy safeguards are maintained. Countries should establish standard data exchange protocols and unique identification numbers that enable linkage across systems without compromising individual privacy. In West Africa, several countries have invested in or are developing national digital identification systems—including the WURI (West Africa Unique Identification for Regional Integration) programme supported by the World Bank across participating ECOWAS states—that are directly linked to birth registration as the foundational document. CRVS legislation must provide an explicit legal basis for interoperability between the civil registration authority and the national identification authority, including protocols for data exchange, verification procedures, and provisions for updating identification records when civil status changes (through marriage, divorce or death). Memoranda of understanding between institutions should be mandated by law, not left to administrative discretion, and should specify data fields, access levels, frequency of data exchange, and accountability mechanisms.

Legislation should also address interoperability with justice sector databases (for divorce and adoption records), health information systems (for birth and death notification), and social protection registries (to enable automatic updating of beneficiary records following registration of vital events).

2.9.2 Corrections and Amendments

Legislation must provide clear procedures for correcting errors in registration records; adding missing information; rectifying names or dates; establishing parentage; and court procedures for disputed corrections. These procedures should be accessible and affordable to ensure that errors do not become permanent barriers to legal identity.

2.9.3 Complaints and Appeals

Individuals must have the right to complain about registration services or denial of registration; appeal decisions of registration officials; seek judicial review; and access ombudsman or human rights commission services. Without effective complaints mechanisms, individuals—particularly the poor and marginalised—have no recourse when registration officials abuse their authority or deny services.

2.10 Financing and Resource Allocation

2.10.1 Budget Provisions

Legislation should mandate the allocation of an adequate budget for CRVS operations in annual national budgets; free or minimal-cost services sustained through government funding; investment in infrastructure, technology, and capacity building; and a sustainable financing model not dependent on donor funding.

CRVS cannot function effectively as a fee-for-service model funded by user charges. Government budget allocation is essential to ensure universal, free access and to prevent corruption driven by officials' need to generate revenue. Legislation should establish a domestic financing commitment by requiring that a minimum allocation for CRVS operations be included in the annual national budget law, and by creating a mechanism for ring-fencing revenues from certificate fees (where applicable) for reinvestment into the civil registration system. Countries should progressively reduce and ultimately eliminate dependence on external donor financing for core registration operations, which compromises sustainability and system continuity when project funding ends. The law should also require that subnational budget allocations for CRVS be reported annually to the national coordination committee.

2.10.2 Fee Structures

If fees are charged, they must be established by law or regulation, not at the discretion of officials. Fees for timely registration should be eliminated or minimal. Late registration fees should not be

prohibitive. Fee waivers must be available for vulnerable populations. All fees must have an official receipt and be accounted for in order to prevent corruption.

2.11 Penalties and Enforcement

2.11.1 Penalties for Non-Registration

While registration should be compulsory, penalties must be carefully designed to encourage rather than discourage registration. Penalties should be proportionate and not excessive. The focus should be on incentives and facilitation rather than punishment. Late registration should be permitted even if penalties apply. Penalties should never create barriers to accessing services or rights.

The goal of penalties is to emphasise the importance of timely registration, not to punish or exclude those who have failed to register promptly, which may often be because of a lack of resources, or because they are not aware of the law. Countries should create individual demand for civil registration through incentives rather than penalties: linking birth certificates to school enrolment, vaccination records and social protection; requiring death certificates for pension claims and estate settlement; and tying marriage certificates to property and inheritance right [29].

2.11.2 Penalties for Officials

Legislation must establish penalties for registration officials who refuse services or demand unofficial payments; breach confidentiality; falsify records; demonstrate negligence in maintaining records; or obstruct registration services. These penalties should include both criminal sanctions (fines and imprisonment) and administrative sanctions (suspension, dismissal, loss of pension rights).

Without effective enforcement against corrupt or negligent officials, legal frameworks will remain aspirational rather than operational.

2.12 Legislative Reform Process

2.12.1 Assessment of Existing Legislation

Countries should conduct comprehensive legal assessments to identify gaps in coverage; contradictions between laws; discriminatory provisions; outdated provisions; and implementation challenges. Various assessment tools are available to guide this process [30]. The Global Health Advocacy Incubator (GHAI) Legal and Regulatory Review Toolkit for Civil Registration, Vital Statistics and Identity Management (CRVSID) provides a comprehensive methodology for analysing the legal and regulatory framework of a country against international best practice [31].

2.12.2 Drafting and Enactment

Legal reform should be based on broad stakeholder consultation with government agencies, civil society, traditional and religious leaders, women's groups, and affected communities. Legislation should align with international standards and regional frameworks while addressing national contexts. Gender equality and human rights must be central to legal frameworks. Laws should provide for regulations to operationalise the legislation and include transitional provisions for implementation. Parliamentary and executive commitment is essential for enactment and implementation. New legislation should include clear transitional provisions addressing: the status of records created under prior legislation; timelines for phasing in new requirements; provisions for persons registered under the previous system; and arrangements for converting manual records to digital formats [32].

2.12.3 Implementation and Monitoring

Following enactment, countries must develop implementing regulations, methodologies and procedures; disseminate the law to all stakeholders and the public; train all officials on the new legal provisions; monitor its implementation and identify challenges; and conduct periodic reviews and amendments as needed.

Legal reform is not a one-time event but an ongoing process. For example, Côte d'Ivoire's iterative approach—with laws in 1964, amendments in 1983 and 1999, and significant reforms in 2018—demonstrates that legal frameworks must evolve to address emerging challenges and changing social contexts.

2.13 Regional Harmonisation

2.13.1 ECOWAS Framework

Countries should work through regional economic communities to harmonise minimum legal standards for registration; recognition of documents issued by other member states; cross-border registration procedures; data sharing protocols; and standard definitions and classifications.

Regional harmonisation facilitates mobility, trade, and integration while ensuring that individuals maintain legal identity when crossing borders.

The ECOWAS Protocol on Free Movement of Persons, Right of Residence, and Right of Establishment (1979) and its supplementary protocols require member states to recognise travel documents and civil status documents issued by other member states. However, the practical implementation of mutual recognition remains limited due to differing registration standards, document formats, and verification procedures. Legal harmonisation should address minimum content standards for civil status certificates to facilitate cross-border recognition; common definitions of vital events and registration terminology; standard procedures for registration of vital events occurring to nationals abroad through consular services; mutual legal assistance protocols

for verification of civil status documents; and data exchange frameworks that respect both the need for information sharing and the protection of personal data.

2.13.2 Model Laws

Model laws can be developed by regional bodies, e.g. the United Nations Economic Commission for Africa (UNECA), and could accelerate legal reform by providing templates that countries can adapt to their contexts.

The Sixth Conference of African Ministers Responsible for Civil Registration (Addis Ababa, 24–28 October 2022), organised by UNECA, the African Union and the African Development Bank, reaffirmed the commitment of African States to harmonizing CRVS legal frameworks and accelerating registration completeness in accordance with the SDGs and the AU Agenda 2063. Its Programme of Action represents the latest continental political mandate for the legal reform measures described in this chapter [33].

Model laws serve as particularly valuable tools for countries undertaking comprehensive CRVS legal reform, as they provide a structured starting point that incorporates international best practices while allowing for national adaptation. The model law approach has been successfully used in other regions: the Pacific Community developed a model civil registration bill that has informed legislation in several Pacific Island countries. For West Africa, a model law developed under the auspices of UNECA, in collaboration with ECOWAS , could address the specific challenges of the region—legal pluralism, low registration rates, gender discrimination, institutional fragmentation—while drawing on the most progressive provisions of recent national reforms such as Côte d'Ivoire's 2018 reforms. Such a model law should be developed through a participatory process involving government officials, legal experts, civil society, traditional and religious leaders, and development partners from across the region.

Model laws

The Economic Community of West African States (ECOWAS) Protocol on Free Movement of Persons (1979) and its Supplementary Protocols require mutual recognition of civil status documents, including birth certificates and marriage certificates, among all 15 member States (at the time).

The ECOWAS Biometric Identity Card, rolled out progressively since 2017, is linked to civil registration records, creating a direct connection between birth registration and national identity. Ghana, Senegal and Côte d'Ivoire have participated in ECOWAS harmonisation pilot programmes for standardizing the format and content of birth certificates across borders.

The West African Health Organisation (WAHO) provides technical guidelines for harmonizing cause-of-death certification and ICD implementation across ECOWAS member states. Nigeria and Ghana have bilateral agreements on the mutual recognition of civil status documents that serve as models for broader regional harmonisation.

Source: National legislation of referenced countries; ECOWAS treaty instruments; UNECA APAI-CRVS (2019)

2.14 Conclusion: From Law to Practice

Strengthening legal and institutional frameworks for CRVS in West Africa requires comprehensive reform that goes beyond merely technical fixes to address fundamental issues of rights, governance, gender equality, and legal pluralism.

Rights-Based Foundation: Legal frameworks must recognise that a legal identity is a fundamental human right, not merely an administrative convenience. In West Africa, Guinea's 2023 Law on Civil Status (Loi L/2023-0019/CNT) similarly enshrines universal and compulsory registration as a rights-based entitlement, establishing that all vital events must be registered free of charge and linking each registration to a unique personal identification number, thereby grounding legal identity in the civil registration system itself.

Gender-Transformative Approach: Frameworks must eliminate discrimination and actively empower women and girls.

Inclusive Systems: Legal frameworks must harmonise civil, customary, and religious systems while protecting human rights. For example, in West Africa, Guinea's 2023 Law on Marriage (Loi L/2023-0020/CNT) achieves comparable harmonisation: it establishes unified conditions for the recognition of customary and religious marriages—requiring the consent of both parties, compliance with minimum age requirements, and the absence of legal impediments—and designates customary and religious authorities as notifiers with a legal obligation to report marriages to the civil registrar within 30 days, ensuring the integration of plural systems into a single legal framework.

Coordinated Implementation: Clear mandates, effective coordination mechanisms, and adequate resources are essential. The legal framework is only as strong as its implementation. Countries must establish national CRVS coordination committees with high-level political support, clear terms of reference, and operational budgets. In West Africa, Ghana's Births and Deaths Registry CRVS Strategic Plan 2025–2030 illustrates this principle: developed through multisectoral consultations involving the Ghana Health Service, Ghana Statistical Service, and the Judicial Service, the plan establishes coordinated institutional responsibilities with a clear implementation roadmap, demonstrating that legal reform requires not only legislative commitment but sustained interagency coordination and operational planning.

Continuous Improvement: Legal reform is an ongoing process. Countries should conduct regular assessments of their CRVS systems and use findings to inform legislative amendments, regulatory updates, and procedural improvements.

Ultimate Goal: The ultimate goal of legal and institutional reform is to ensure that every person in West Africa—from birth through death, through marriage and divorce—is recognised by law, protected by law, and empowered to exercise their rights. A legal identity is the foundation upon

which all other rights rest. Without a birth certificate, a child cannot prove their age to avoid child marriage or child labor. Without a marriage certificate, a woman cannot prove her marital status to claim inheritance or custody. Without a death certificate, families cannot access pensions, settle estates, or achieve closure.

Strong legal frameworks, combined with operational guidance, will create comprehensive CRVS systems that leave no one behind. The examples from Côte d'Ivoire, Guinea, and other countries in the region show that progress is possible when political will, legal reform, adequate resources, and community engagement come together.

Looking ahead, the legal frameworks for CRVS in West Africa must be prepared to address emerging challenges: the increasing digitalisation of public services, the growing impact of climate change on population displacement and mortality patterns, the rise of biometric identification technologies and their interface with civil registration, and the continued effects of armed conflict and insecurity on registration services in fragile contexts. Legal frameworks that are built on strong foundational principles—universality, continuity, confidentiality, affordability, and gender equality—while including provisions for adaptation and evolution, will be best positioned to meet these challenges.

The separate annexes to this chapter (Annex 2A: What the Law Should Contain; Annex 2B: Key Regional Legislative Examples; Annex 2C: CRVS Legal Framework Cheat Sheet; and Annex 2D: Steps for CRVS Legal Review) provide practical tools to support countries in translating these principles into operational legal frameworks.

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ANNEX 1: CRVS LEGAL FRAMEWORK ESSENTIALS—QUICK REFERENCE CHEAT SHEET

I. CONSTITUTIONAL & HUMAN RIGHTS FOUNDATIONS

Every CRVS law must include:

- Recognition of legal identity as a fundamental right
- State obligation to establish CRVS system
- Non-discrimination provisions (gender, ethnicity, religion, status, disability)
- Right to nationality and documentation
- Reference to ratified international conventions and Covenants

II. CORE LEGAL PRINCIPLES (The "Seven C's")

- **Compulsory**: Registration legally required for all persons
- **Continuous**: Services operate year-round without interruption
- **Complete**: Coverage of all vital events without exception
- **Confidential**: Individual data protected with penalties for breach
- **Cost-free**: No fees for timely registration; minimal fees if late
- **Convenient**: Accessible services close to populations
- **Coordinated**: Clear institutional mandates and cooperation mechanisms

III. VITAL EVENTS TO BE REGISTERED AND CERTIFIED

Mandatory Core Events:

- **Births**: All live births (at health centre, at home, citizens abroad)
- **Deaths**: All deaths with cause-of-death certification (ICD standards)
- **Stillbirths**: After 28 weeks gestation
- **Marriages**: Civil, customary, and religious (all must be registered and certified to produce legal effects)
- **Divorces**: Court, customary, religious (all must be registered to produce legal effects)

Optional but Recommended:

- Adoptions, legitimations, recognitions, legal separations, annulments, name changes

IV. TIME LIMITS FOR REGISTRATION

Births:

- Free registration: 30–90 days (recommend 90 days)
- Late registration: Up to 1 year (minimal fee, with waivers)
- Delayed registration: After 1 year (additional proof required, but should be affordable)

Deaths:

- Immediate: 48–72 hours or before burial (health facility – recognizing cultural challenges)
- Community deaths: 15–90 days (recognizing accessibility and cultural challenges)
- Historical deaths: Provisions for late registration

Marriages:

- Civil: Immediate (at ceremony)
- Customary/religious: 30–90 days after celebration

- Retrospective: Provisions for past unregistered marriages, facilitating the process

Divorces:
- Court: Immediate (court notifies registrar automatically)
- Customary/religious: 30 days
- Historical: Provisions with evidence

V. INSTITUTIONAL MANDATES (Clear Designation Required)
- **Civil Registration Authority (CRA)**: Lead agency for registration operations
- **National Statistics Office (NSO)**: Sole agency for vital statistics production
- **Ministry of Health (MOH)**: Birth/death notification, cause-of-death certification
- **Ministry of Justice/Courts**: Marriage, divorce, adoption registration
- **Local Government**: Operate local registration offices
- **National ID Authority**: Identity documents (if separate from CRA)

Coordination:
- National CRVS Coordination Committee (high-level, multi-sectoral)
- Chair of the Committee reports to PM's Office or Cabinet
- Technical Working Groups by thematic areas, where possible
- Regular documented meetings (quarterly minimum)
- Budget allocation for coordination

VI. DECENTRALISATION & ACCESSIBILITY
Legal mandates must establish:
- Network of offices (national, regional, district, local)
- Registration in health facilities and maternity centres
- Mobile registration for hard-to-reach populations
- Secondary centres in underserved areas
- Community collection points with trained agents
- Outreach for refugees, IDPs, nomadic populations, persons with disabilities

VII. MARRIAGE & DIVORCE SPECIAL PROVISIONS
Recognition of Customary & Religious Marriages:
- Legal validity when meeting criteria (consent, age, no impediments)
- Transcription procedures (publication, objection period, registration)
- Same legal status as civil marriages once registered
- Protection of wives' property and inheritance rights

Prohibition of Harmful Practices:
- Minimum marriage age: 18 years (both sexes, no exceptions)
- Informed consent required (no forced marriages)
- Child marriage prohibited with penalties
- Judicial waivers only with strict safeguards

Divorce Protection:
- All divorces registered and certified regardless of process
- Women can register independently
- Property, custody, maintenance rights protected
- Proof of divorce required for remarriage

VIII. FEES & AFFORDABILITY

Legislative requirements:

- **Free**: Birth registration within prescribed time; first certificate
- **Minimal**: Late registration, replacements (maximum fee should be affordable)
- **Transparent**: Fees set by law, publicly posted, officially receipt
- **Waivers**: For underserved, poor and vulnerable (no documentation burden)
- **Prohibited**: Unofficial payments, bribes, "facilitation fees"
- **Budgeted**: Government funds free services (not fee-dependent)

IX. DATA PROTECTION & CONFIDENTIALITY

Mandatory provisions:

- Personal data protection law compliance
- Access limited to authorised persons
- Role-based access controls in digital systems
- Encryption of data
- Audit for all access
- Penalties for breach (criminal and administrative)
- Statistical use only in aggregated, anonymised form
- Data sharing agreements between agencies

X. QUALITY ASSURANCE & CORRECTIONS

Standards:

- Accuracy and completeness requirements
- Verification procedures
- Training requirements for registrars
- Regular audits and supervision
- Performance targets and monitoring

Corrections:

- Clear procedures for error correction
- Court procedures for disputes
- Free or low-cost correction process
- Reasonable time limits

Complaints:

- Right to complain about service quality
- Right to appeal registration denials
- Judicial review available
- Ombudsman/human rights commission access

XI. PENALTIES & ENFORCEMENT

For Non-Compliance:

- Proportionate (encourage, not discourage registration)
- Late registration always permitted
- Focus on incentives rather than punishment
- No denial of essential services/rights due to non-registration

For Officials:

- Demanding bribes: Criminal offense (imprisonment/fines)
- Breach of confidentiality: Criminal and administrative sanctions

- Falsification: Criminal offense with severe penalties
- Negligence: Administrative sanctions
- Refusal of service: Sanctions and compensation

XII. NOTIFIERS & INFORMANTS

Legislative designation required:

Births: Mother, father, health worker, midwife, traditional birth attendant, family member

Deaths: Physician, health facility, family, community health worker, local authority, customary authority, cemetery guardians

Marriages: Parties, officiant, witnesses (minimum 2)

Divorces: Court, parties, legal representatives

XIII. HARMONISATION OF LEGAL SYSTEMS

Minimum Standards Approach:

- Core requirements apply to all marriages (consent, age, registration)
- Constitutional/human rights principles come first
- Harmful practices prohibited (child marriage, forced marriage, discrimination)

Integration Not Parallel Systems:

- Single civil registration system for all events
- Customary/religious events transcribed to civil register
- Legal effect flows from civil registration
- Mutual recognition across systems

Engagement:

- Traditional/religious leaders as partners and notifiers
- Community partnerships for uptake of services
- Social and behaviour change programmes to increase knowledge of and use of services
- Capacity building for customary/religious authorities

XIV. REGIONAL COORDINATION

Through ECOWAS

- Harmonise minimum legal standards
- Mutual recognition of certificates
- Cross-border registration procedures
- Data sharing protocols
- Standard definitions and classifications
- Peer learning and technical exchange

XV. IMPLEMENTATION REQUIREMENTS

Legislative mandates for:

- Adequate budget allocation (government-funded)
- Training for registrars and stakeholders
- Infrastructure (offices, equipment, supplies)
- Appropriate technology (digitisation)
- Public awareness campaigns
- Monitoring and evaluation systems
- Regular legal assessment and reform
- Complaint and feedback mechanisms

- Anti-corruption measures
- Partnership with development actors

Annex 2A

What the CRVS Law Should Contain

Principles and Minimum Provisions

This annex presents the minimum provisions that a comprehensive CRVS law should contain, aligned with the United Nations Principles and Recommendations for a Vital Statistics System, Revision 3 (2014), and the Guidelines on the Legislative Framework for Civil Registration, Vital Statistics and Identity Management Systems (GOLF, 2023). For regional examples illustrating how these provisions are implemented in practice, see Annex 2B.

1. CONSTITUTIONAL AND HUMAN RIGHTS FOUNDATIONS	
Principle	Every individual has the right to registration and a legal identity. National CRVS legislation must be grounded in constitutional provisions and international human rights instruments.
The law should include	– The right to registration enshrined in constitution or organic law – Non-discrimination in access to civil registration services – Equal rights for all children regardless of birth circumstances – Protection of vulnerable populations: refugees, internally displaced persons, stateless persons, persons with disabilities – Reference to ratified international conventions and covenants

2. COMPULSORY AND UNIVERSAL REGISTRATION	
Principle	Registration must be compulsory for all vital events for the entire population, without discrimination.
The law should include	– Legal obligations for all vital events: births, deaths, foetal deaths, marriages, divorces – Obligation placed on institutions (hospitals, courts) and on individuals (parents, informants) – No denial of registration on grounds of nationality, ethnicity or legal status – Special provisions for hard-to-reach populations

3. TIME LIMITS FOR REGISTRATION	
Principle	Clear and reasonable time limits must be established, with provisions for late and delayed registration. No person should be permanently excluded from registration.
The law should include	– A free period for timely registration (30–90 days for births recommended) – Late registration permitted with minimal fees and simplified procedures – Delayed registration after one year with additional evidence requirements – No penalties that discourage delayed registration

4. INSTITUTIONAL MANDATES AND COORDINATION	
Principle	Clear institutional mandates, inter-agency coordination and adequate financing are essential for an effective CRVS system.
The law should include	– A designated lead agency with clear mandate, powers and structure – Mandatory data-sharing between civil registration authority, health sector, statistics office and courts – A high-level national coordination mechanism (inter-ministerial committee with technical working groups) – Decentralisation to the local level with adequate human and financial resources – A clear role for the health sector in the notification of births and deaths and certification of cause of death

5. REGISTRATION OF MARRIAGES	
Principle	All types of marriages should be registered to establish civil status and protect the rights of spouses. The law should provide clear mechanisms for the transcription of customary and religious marriages into the civil register.
The law should include	– Legal recognition of civil, customary and religious marriages – Clear processes for transcription: declaration, publication of banns, objection period, registration – A minimum age of 18 for both sexes – Equal property, inheritance and custody rights for all spouses – Protection of women's rights in polygamous unions where permitted – Choice of matrimonial property regime at the time of marriage

6. REGISTRATION OF DIVORCES	
Principle	Divorces must be registered to protect rights, update civil status and enable remarriage.
The law should include	– Mandatory registration of court, customary and religious divorces – That either spouse can initiate registration independently – Automatic notification from courts to the civil registrar – Annotation on the marriage register upon registration of divorce – Protection of property, custody and child support rights

7. DATA PROTECTION AND CONFIDENTIALITY	
Principle	Personal data collected through the civil registration system must be protected and kept confidential. Sharing of information should be only by consent or in accordance with law.

The law should include	– Purpose limitation and use limitation principles – Role-based access controls and audit logs for digital systems – Encryption and security safeguards – Statistical use only in aggregate, anonymised form – Mandatory data-sharing agreements between institutions – Penalties for breach of confidentiality: criminal and administrative

8. FEES, AFFORDABILITY AND ANTI-CORRUPTION	
Principle	No fee should be charged for timely registration. The first certificate should be issued free of charge.
The law should include	– No fees for timely registration of any vital event – First certificate free of charge – Fee waivers for vulnerable populations – Fees set by law, not by individual officials; uniform across the territory – Criminal penalties for demanding unofficial payments or bribes – Transparent fee schedules, publicly posted and officially receipted

9. DECENTRALISATION AND ACCESSIBILITY	
Principle	Registration services must be accessible to all persons throughout the territory.
The law should include	– A sufficient number of registration points to serve the entire population – Registration at health facilities for births and deaths – Mobile registration units for hard-to-reach areas – Community-based notification systems – Special procedures for refugees and internally displaced persons

10. VITAL STATISTICS AND REGIONAL HARMONISATION	
Principle	The civil registration system is the foundation of the vital statistics system. Regional harmonisation supports national reforms.
The law should include	– Mandatory data transmission from civil registration authority to national statistics office – That the statistics office should be the sole producer of official vital statistics – Regular compilation, quality control, publication and dissemination – Alignment with regional community standards (ECOWAS) – Cross-border recognition of vital events and civil status documents – Transitional provisions for phasing in new legislation

Source: United Nations, Principles and Recommendations for a Vital Statistics System, Revision 3 (2014); United Nations, Guidelines on the Legislative Framework (GOLF, 2023).

Annex 2B

Key Regional Examples

How ECOWAS Countries Implement CRVS Legal Provisions

This annex presents practical examples from the legislation of countries in the Economic Community of West African States (ECOWAS), illustrating how the provisions described in Annex 2A are implemented in practice. Each box corresponds to a thematic area of Annex 2A.

Box 1: Constitutional and human rights foundations

ECOWAS countries

Côte d'Ivoire's Law No. 64-374 on Civil Status (as amended in 2018) establishes that civil status can be proven only through civil status acts, making registration the primary means of legal recognition. Ghana's 1992 Constitution guarantees every child born in Ghana the right to be registered immediately after birth and to a name (Article 28(4)). Guinea's Ordinance No. 2023 on Civil Status enshrines universal registration as a right for all persons on the territory. Senegal's Family Code (Law No. 72-61 of 1972) requires the registration of all vital events without distinction.

Box 2: Compulsory and universal registration

ECOWAS countries

Guinea requires compulsory registration of all vital events under the 2023 Ordinance on Civil Status (Article 5), with village notebooks used to collect declarations at the community level before formal registration. Senegal mandates registration within one month of birth under the Family Code (Article 51). Ghana's Births and Deaths Registration Act 1965 (Act 301) covers all persons born in Ghana and provides for mobile registration in remote areas.

Box 3: Time limits for registration

ECOWAS countries

Côte d'Ivoire allows three months for birth declarations and requires death declaration within fifteen days (Law No. 64-374 as amended). Ghana provides 21 days for birth registration and 7 days for death registration; late registration requires a court order but remains accessible. [Note: Ghana's court-order requirement for late registration has been identified by workshop participants as a barrier to universal coverage; Ghana's 2025–2030 CRVS Strategic Plan includes a reform objective to introduce an administrative pathway for late registration.] Senegal provides one month for birth registration, with late registration possible by judicial order.

Box 4: Institutional mandates and coordination

ECOWAS countries

Ghana's Births and Deaths Registry operates under the Ministry of Local Government and is decentralised to the district level, with registration points in hospitals. Senegal's civil registration system is managed by the Centre d'État Civil under the Ministry of Local Government, with registration at the commune level. Guinea's Direction Nationale de l'État Civil operates under the Ministry of Territorial Administration, with village notebooks serving as a community notification mechanism.

Box 5: Recognition and registration of customary and religious marriages

ECOWAS countries

Ghana's Customary Marriage and Divorce Registration Law 1985 (PNDCL 112) requires the registration of all customary marriages and provides a legal framework for their recognition. Sierra Leone's Customary Marriage and Divorce Act (Cap. 97) provides for the registration of marriages celebrated under customary law. Mali's Family Code recognises religious marriages and requires their transcription into the civil register to have legal effect.

Box 6: Divorce registration and protection

ECOWAS countries

Ghana's Matrimonial Causes Act 1971 requires the automatic registration of court-granted divorces. Guinea's Family Code requires both court and customary divorces to be transcribed into the civil register, and either former spouse can initiate the registration. Senegal's Family Code provides for the annotation of divorces on the marriage register.

Box 7: Data protection, fees and accessibility

ECOWAS countries

Senegal's Data Protection Law No. 2008-12 established the Commission de Données Personnelles, which applies to civil registration data. Ghana's Data Protection Act 2012 (Act 843) provides comprehensive data protection that covers civil registration records. Côte d'Ivoire's 2018 reforms make death declaration entirely free and compulsory, with only replacement copies subject to a small fee of 500 FCFA.

Box 8: Regional harmonisation frameworks

ECOWAS countries

The Economic Community of West African States (ECOWAS) Protocol on Free Movement of Persons (1979) requires mutual recognition of civil status documents among member States. ECOWAS has also developed frameworks for harmonizing identity management systems across the region.

Source: National legislation of referenced countries; ECOWAS treaty instruments; UNECA, APAI-CRVS framework (2019);

Annex 2C

CRVS Legal Framework – Cheat Sheet

Quick Reference for Legal Drafters and Reviewers

1. DEFINITIONS THE LAW MUST CONTAIN	
Civil registration	Continuous, permanent, compulsory, universal recording of vital events
Vital event	Live birth, death, foetal death, marriage, divorce, annulment, judicial separation, adoption, legitimation, recognition of parenthood
Certificate	Official document (paper or electronic) issued by registrar with full legal force
Informant	Person or institution designated by law to report a vital event and provide all information
Notifier	Intermediary between registrar and informant (e.g. community health worker)
Civil status	Legal standing: single, married, widowed, divorced, legally separated
Legal identity	Basic identity characteristics conferred through birth registration and issuance of a certificate
Cause of death	Disease or condition leading to death, certified per International Classification of Diseases standards

2. CORE PRINCIPLES – THE "SEVEN C's"	
Compulsory	Legal obligation for all persons on the territory, regardless of nationality or status
Continuous	Services operate year-round without interruption, including during emergencies
Complete	All vital events, all population groups, no exceptions
Confidential	Individual data protected; statistical use only in aggregate; penalties for breach
Cost-free	No fees for timely registration; first certificate free; fee waivers for vulnerable groups
Convenient	Decentralised offices, health facility registration, mobile services for remote areas

Coordinated	Clear institutional mandates, mandatory data-sharing, inter-agency cooperation

3. INSTITUTIONS THE LAW MUST DEFINE	
Lead agency (CRA or equivalent)	Mandate, powers, functions, structure (central to regional to local)
National statistics office	Sole mandate for vital statistics; mandatory data-sharing with civil registration authority
Ministry of health	Notification of births and deaths in facilities; cause-of-death certification
Courts and justice system	Registration of marriages, divorces, adoptions; corrections and amendments; appeals
Local government	Operate local offices; employ and supervise registrars; ensure accessibility
National identity authority	If separate: interoperability, unique personal identifier, data exchange
Coordination body	National CRVS committee at high political level with technical working groups
Traditional and religious authorities	Role as notifiers; requirements for transcription of customary and religious events

4. GENDER AND HUMAN RIGHTS PROVISIONS
– Non-discrimination on any ground (sex, ethnicity, religion, nationality, disability, legal status) – Mothers can register births independently (no requirement for father's presence or consent) – Either spouse can register marriage or divorce independently – Minimum marriage age: 18 for both sexes; judicial waivers only with strict safeguards – Equal property, inheritance and custody rights for all spouses – Mandatory sex-disaggregated data collection and reporting – Specific provisions for refugees, internally displaced persons, nomadic and indigenous populations, persons with disabilities

5. MARRIAGE REGISTRATION		
Type	**Process**	**Legal effect**
Civil	Celebrated before civil registrar; registered immediately	Full legal effect at ceremony
Customary	Traditional ceremony; declaration to registrar; publication of banns; 30-day objection period; transcription	Legal effect upon transcription

5. MARRIAGE REGISTRATION		
Type	**Process**	**Legal effect**
Religious	Religious ceremony; declaration to registrar; transcription into civil register	Legal effect upon transcription
Polygamous	Where permitted: court authorisation; consent of existing wife or wives; registration	Property rights for all wives

6. DIVORCE REGISTRATION (two steps: obtain decree, then register)		
Type	**Process**	**Key protections**
Court divorce	Court notifies the registrar automatically; annotation on marriage certificate	Proof of divorce for remarriage
Customary	Written decision from traditional authority; registration within 30 days	Property division documented
Religious	Religious certificate; court validation where required; registration	Custody arrangements recorded

7. TIME LIMITS AND FEES			
Event	**Free period**	**Late registration**	**Delayed registration**
Births	30–90 days	Up to 1 year (minimal fee, waivers)	After 1 year (additional proof)
Deaths	48–72h (facility)/15–90 days	Provisions for historical deaths	Always permitted
Marriages	Immediate (civil)/30–90 days	Retrospective: with evidence	Original date preserved
Divorces	Immediate (court)/30 days	Historical: with evidence	Always permitted

8. PENALTIES AND ENFORCEMENT	9. DATA PROTECTION
– For individuals: proportionate; focus on incentives – For officials: bribes (criminal); breach of confidentiality (criminal and administrative); falsification (severe penalties) – Right to appeal denials; judicial review; ombudsman access	– Access limited to individual, authorised family, officials with legal authority – Role-based access controls and audit logs – Encryption in transit and at rest – Data-sharing agreements mandatory

Source: United Nations, Principles and Recommendations for a Vital Statistics System, Revision 3 (2014); United Nations, Guidelines on the Legislative Framework (GOLF, 2023); Global Health Advocacy Incubator, Legal and Regulatory Review Toolkit for CRVSID.

Annex 2D

Steps for Conducting a CRVS Legal Review

A Practical Roadmap for Countries in West Africa

This annex outlines a ten-step methodology for conducting a comprehensive review of the legal and regulatory framework governing civil registration, vital statistics and identity management. It draws on the United Nations Guidelines on the Legislative Framework (GOLF, 2023), the Global Health Advocacy Incubator (GHAI) Legal and Regulatory Review Toolkit, and the United Nations Economic Commission for Africa (UNECA) Africa Programme on Accelerated Improvement of Civil Registration and Vital Statistics (APAI-CRVS) assessment tools.

	Phase	Key activities	Tools and references
1	**Establish review team**	– Identify the lead institution – Recruit national legal experts – Include representatives from health, statistics, justice, local government, civil society	GHAI Toolkit APAI-CRVS guide
2	**Map existing legal framework**	– Collect all relevant laws, decrees, regulations and administrative instructions – Include: the constitution, civil code, family code, health laws, statistics act, data protection law, identity law – Document customary and religious law provisions	GOLF, Box 20 GHAI Toolkit, Ch. 1–13
3	**Conduct gap analysis**	– Compare existing laws against GOLF standards chapter by chapter – Use the toolkit questionnaires for each area – Identify missing provisions, contradictions, discriminatory clauses	GHAI Toolkit, Ch. 2–13 GOLF, Ch. IV UN P&R Rev. 3
4	**Assess implementation**	– Evaluate how laws are applied in practice (field visits, interviews) – Identify gap between law and practice – Consult traditional and religious leaders, women's groups, marginalised communities	APAI-CRVS tools UNICEF/WHO data
5	**Stakeholder consultation**	– Convene national workshop with all CRVS stakeholders – Present findings and recommendations – Build consensus on priority reforms	National CRVS committee Development partners
6	**Draft reform recommendations**	– Produce prioritised, specific, actionable recommendations – Classify: new legislation; amendment; regulation; administrative action – Estimate resources and timeline	GHAI report template GOLF, Ch. IV–V

	Phase	Key activities	Tools and references
7	**Draft or amend legislation**	– Draft new law or amendments aligned with GOLF – Ensure rights-based, gender-transformative provisions – Include transitional provisions – Harmonise with ECOWAS standards	GOLF, Ch. IV Regional model laws
8	**Validation and enactment**	– Inter-ministerial review and validation – Parliamentary process: committee, debate, adoption – Executive promulgation; budget allocation	National procedures
9	**Develop implementing regulations**	– Draft decrees, ministerial orders, standard operating procedures – Develop forms, protocols, fee schedules, training curricula – Establish monitoring and oversight mechanisms	GOLF, Ch. IV, Sect. B.2 UNECA MoU guidelines
10	**Disseminate, train and monitor**	– Disseminate new law to all stakeholders and the public – Train registrars, health workers, court officials, traditional leaders – Public awareness campaigns; monitor; periodic reviews	UN Communication Handbook GHAI budget toolkit

Indicative timeline
Steps 1–2: 2–3 months | Steps 3–4: 3–6 months | Step 5: 1–2 months | Step 6: 1–2 months | Step 7: 3–6 months | Steps 8–9: 6–12 months | Step 10: ongoing
Total estimated duration: 18–36 months from inception to enactment.

Source: United Nations, GOLF (2023); GHAI, Legal and Regulatory Review Toolkit; UNECA, APAI-CRVS; UNECA, Guidelines on the Drafting of Memorandums of Understanding for CRVS Coordination (2019).

CHAPTER 3: REGISTRATION PROCEDURES FOR VITAL EVENTS

Chapter purpose

This chapter provides practical guidance on the registration of births, marriages, divorces, and deaths across the ECOWAS zone, covering legal frameworks, procedures, roles of actors, security of records, and continuity of registration in emergencies. Detailed step-by-step process guides for each vital event are contained in separate Annexes (3A–3F). Country examples are labelled exclusively from ECOWAS member states, reflecting the West African regional context.

3.1 Introduction

The registration of vital events—births, deaths, marriages, and divorces—is the fundamental link between a person and the state. For decades, registration procedures in the ECOWAS region were defined by colonial-era legacies, characterised by fragmented paper ledgers, centralised archives, and significant geographical barriers. The landscape of vital event registration in the sub-region is uniquely complex, shaped by the interplay between formal civil law and deeply rooted customary and religious practices. In many communities, a naming ceremony or a religious marriage rite serves as the primary social record, often preceding or entirely replacing formal state registration. This gap between “social fact” and “legal record” creates a statistical invisibility that hampers national planning and leaves millions of individuals, particularly women and children, without the legal identity required to access education, healthcare, or financial services.

As the region marches towards the SDGs and the Africa 2063 vision [1] and ECOWAS Vision 2050 aspirations, registration procedures must be transformed from mere administrative necessities into essential conduits for human rights, social protection, and regional integration. Accordingly, this chapter provides comprehensive guidance on registering the four core vital events across the ECOWAS zone: birth, marriage, divorce, and death. It addresses systemic barriers, social and cultural norms affecting registration, the roles and obligations of each actor in the civil registration system, and procedures for the security, maintenance, and reconstitution of civil registration records. It also includes standard operating procedures for CRVS continuity in emergency and disaster contexts. Further, it analyses how the integration of modern technology and the harmonisation of legal standards can turn once-static bureaucratic processes into dynamic, inclusive systems that ensure every life registration is thus not a technical peripheral; it is a foundational pillar of the Africa 2063 vision [1]. Agenda 2063, the African Union’s long-term development framework, places the legal identity of every African citizen at the heart of its vision for an integrated, people-centred continent. Goal 1 of Agenda 2063: “A High Standard of Living, Quality of Life and Well-Being for All Africans” is predicated on the ability of states to identify their populations. Goal 3 explicitly calls for “healthy and well-nourished citizens”, a target that requires functioning vital statistics to measure. The First Ten-Year Implementation Plan (2014–2023) of Agenda 2063 identifies the strengthening of civil registration systems as a prerequisite for achieving universal access to social protection, healthcare, and education. As Agenda 2063 states, “Africa’s development must be driven by Africa’s people”—and people who are invisible to the state cannot access the rights, services, or protections that development is meant to deliver.

Civil registration is thus not a technical peripheral; it is a foundational pillar of the Africa 2063 vision [1].

The ECOWAS Vision 2050: "ECOWAS of the Peoples: Peace and Prosperity for All" places universal legal identity at the heart of its human development agenda. The Vision identifies the elimination of statelessness and the strengthening of CRVS systems as foundational prerequisites for the free movement of persons, regional integration, and sustainable governance across the member states. Registering every birth, marriage, divorce, and death within the ECOWAS zone is not merely an administrative obligation: it is a strategic imperative for building the integrated, people-centred community that ECOWAS envisions in its Vision 2050.

3.2 Challenges in Civil Registration and Vital Statistics in the ECOWAS Region

The ECOWAS region faces significant challenges [2]. Among ECOWAS member states, birth registration completeness ranges from over 90 per cent in Cabo Verde and Ghana to below 50 per cent in Guinea-Bissau and Nigeria. Achieving universal registration across all ECOWAS member states requires targeted investment, harmonised legal frameworks, and sustained domestic financing in line with ECOWAS Vision 2050 commitments [2].

Key Regional Figures

- 45 million children under five remain unregistered—approximately 45 per cent of all births in the region.
- Fewer than 30 per cent of marriages and less than 5 per cent of divorces are officially registered across the region.
- Approximately 75–80 per cent of deaths occur outside health facilities and remain unregistered, particularly in rural and conflict-affected areas.
- Birth registration rates among ECOWAS member states range from approximately 40 per cent (Guinea-Bissau) to over 90 per cent (Cabo Verde, Ghana).
- Ghana's birth registration rate declined from 93% (2020) to 77% (2023) following the withdrawal of donor funding.
- In Nigeria, which accounts for the largest share of unregistered births in the ECOWAS zone, an estimated 40–45 per cent of births remain unregistered, requiring urgent federal and state investment.

Source: *UNICEF (2024); UNFPA WCARO Ghana Mission (2025, internal); ECOWAS Vision 2050 (ECOWAS Commission, 2021)*

3.2.1 Core Structural Problems

The challenges arise from several interconnected structural factors:

Fragmented systems in an integrated region: The ECOWAS region has Infrastructure and resource constraints, insufficient registration offices in rural areas, under-staffed personnel, universal reliance on paper registers without digital backup, and chronic under-funding. Together these factors undermine systemic performance.

Geographic and accessibility barriers: Vast distances, seasonal flooding, poor roads, and nomadic movement patterns make fixed registration offices inaccessible for extended periods. In the Sahelian and semi-arid zones of ECOWAS member states such as Mali, Burkina Faso, and

northern Nigeria, communities may be cut off for months each year due to seasonal flooding and insecurity.

Legal and administrative complexity: The coexistence of civil, customary, and religious legal systems creates gaps: vital events are socially validated by one system while remaining invisible to civil registration. Excessive documentation requirements and punitive late-registration penalties further discourage registration.

Insecurity and political instability: In several ECOWAS member states including Liberia, Sierra Leone and northern Nigeria, past and ongoing armed conflict and protracted crises have severely disrupted civil registration. Registers have been destroyed, offices closed, and registrars displaced [7].

Donor-dependency and funding gaps: Ghana's experience illustrates systemic risk: birth registration dropped from 93% to 77% between 2020 and 2023 when donor support was withdrawn without a domestically-funded replacement system [8]. Sustainable domestic financing for CRVS is an unresolved challenge across the ECOWAS zone. ECOWAS Vision 2050 calls for member states to mainstream CRVS into national budgets as a non-negotiable governance and human rights priority.

Limited trust in public services: Trust deficits rooted in historical exclusion make some populations reluctant to engage with state registration systems. Communities that have experienced forced eviction or ethnic targeting are particularly reluctant.

Addressing these structural challenges is not merely a matter of administrative efficiency—it is a prerequisite for realising the ambitions of Agenda 2063 and ECOWAS Vision 2050. The African Union's vision of "An Integrated, Prosperous and Peaceful Africa" rests on inclusive governance and the ability of every citizen to participate in social and economic life. A continent where 45 million children under five are invisible to the state cannot claim to be building the "Africa We Want" [1].

The ECOWAS Vision 2050 similarly frames universal civil registration as a prerequisite for inclusive growth and regional cohesion. Pillar 2 of Vision 2050 on "Social Development and Poverty Eradication" and Pillar 3 on "Good Governance, Democracy, and Human Rights" both depend on every ECOWAS citizen being legally identified and counted. The persistent registration gap—where an estimated 40 per cent of births in the ECOWAS zone still go unregistered—represents one of the most pressing obstacles to realising the Vision.

Despite legal frameworks mandating universal civil registration, deeply entrenched social and cultural norms create formidable barriers to coverage. The social and behaviour change (SBC) dimension is addressed in depth in Chapter 5 of these Guidelines.

3.2.2 Gender Hierarchies and Women's Exclusion

Gender norms systematically exclude women from registration in many communities. Women often cannot register births, marriages, or deaths without male relatives' permission—frequently because their own marriages are not registered, creating an intergenerational cycle of exclusion. Female-headed households (estimated at 25–30 per cent of households in some countries) cannot register children without the father present; widows cannot register their husband's death without in-law permission; women in polygamous unions may have documentation withheld [9].

To promote gender equality in registration procedures, the following measures are recommended:

- **Explicit legal provisions** should be established to allow for independent registration by either parent or spouse.

- **Female registrars** should be deployed.
- **Community education** campaigns should be conducted, led by respected female community leaders.
- **Protection mechanisms** must be put in place for women who register children or marriages against the wishes of their partner.

Registration procedures must uphold the principle that both women and men are entitled to equal legal protection as spouses.

3.2.3 Traditional and Religious Ceremonies as Sufficient Recognition

In most communities throughout the region, traditional and religious ceremonies—naming ceremonies, aqiqah, baptisms, bride price payment, nikah—are viewed as the only socially meaningful validation of vital events [2]. Effective Social and Behaviour Change (SBC) strategies frame civil registration as a complementary legal protection that reinforces—rather than replaces—community recognition.

Legislative Response: Senegal—Embedding State Authority in Community Practice

Senegal's Code de la Famille (amended 2022) requires civil registrars to maintain liaison with imams, pastors, and traditional leaders who officiate ceremonies. Religious and traditional leaders must inform declarants of their obligation to register within three months of any ceremony validating a vital event. This approach has been associated with measurable increases in registration completeness in rural Louga and Saint-Louis regions.

Source: *UNECA, Status of CRVS in Africa (2017)*

3.2.4 Economic Barriers and Opportunity Costs

Direct costs (transport, unofficial fees, supporting documents) and indirect costs (lost working days) represent real barriers for poor families. To address these financial barriers, proposed strategies include the following:

- The elimination of all associated charges during the free registration period.
- The deployment of mobile registration units.
- The harmonisation of registration procedures with events frequently attended by families.
- The establishment of specific fee-exemption mechanisms tailored for economically disadvantaged families.

3.2.5 Communication Strategies

Effective communication must address specific perceived barriers, use local languages, rely on trusted community sources, and be sustained over years rather than months. Chapter 5 of these Guidelines provides a full framework for SBC strategies in CRVS systems.

3.3 Birth Registration: The Foundation of Legal Identity

3.3.1 Why Birth Registration Matters

Birth registration is the first and most fundamental act of legal recognition. This act legally establishes a child's existence and provides vital proof of identity, serving as the essential gateway for accessing all rights and services. A child without a birth certificate faces barriers to fundamental entitlements such as identity documents, healthcare and school enrolment. Furthermore, the lack of this document makes such child vulnerable to statelessness and increases the risk of exploitation, including trafficking, forced labour, and child marriage [10] [11].

Birth Registration: Key Principles

- Every child must be registered, regardless of circumstances of birth, parents' marital status, nationality, race, sex, or documentation status.
- Lack of parental documents must NEVER prevent registration.
- No fee may be charged during the legally established free registration period.
- Women must be able to register births independently, without requiring the father's presence or consent.
- Birth registration is a right, not a privilege—it must be proactively offered, not passively awaited.

Source: *UN CRC (1989); UNSD, Principles and Recommendations Rev.3 (2014)*

3.3.2 Who Can Register a Birth

To maximise coverage, national legislation should allow multiple categories of persons to initiate registration:

- Either parent independently, without requiring the other's presence.
- A legal guardian or family member, when parents are absent, deceased, or incapacitated.
- Health facility staff, for births in hospitals, health centres, or clinics.
- Community health workers or traditional birth attendants, for home births.
- Traditional or religious authorities, where they function as notifiers.
- Any other adult with direct knowledge of the birth—including a neighbour, elder, or community leader present at or immediately following the birth—particularly in remote areas where none of the above actors are available. The registrar shall record the declarant's identity and relationship to the child. This expanded declarant category is essential for improving coverage in remote and underserved communities.

Critical principle: Where only the mother registers a birth, legislation should provide a mechanism for adding the father's name within a defined period, in his presence and with his written consent, to prevent false attribution of paternity. Where only the mother registers a birth, legislation should provide a flexible mechanism for adding the father's name at a later stage—without penalising the child or delaying the initial registration—upon presentation of a written acknowledgement of paternity or a competent court order. Registration must proceed even where the father's identity or whereabouts are unknown; the child's right to registration takes precedence over paternity resolution.

3.3.3 Events in Health Facilities

For births that occur in a health facility, the birth notification should be completed by facility staff within 24 hours. Facilities must maintain a birth notification register and are required to transmit notifications to the civil registrar on a regular schedule—daily for high-volume facilities, and weekly for smaller ones [12] [13].

Good Practice: Facility-Based Birth Registration—Ghana

Ghana's Births and Deaths Registry operates a dedicated 'hospitals desk' co-located in delivery wards of all 22 regional and teaching hospitals, with same-day registration service. Sub-district hospitals submit weekly paper notifications processed by the district Births and Deaths Officer. The Data for Health Initiative (Bloomberg Philanthropies/Vital Strategies) supported ICD-10 training and e-notification pilots in Greater Accra (2019–2022), reducing average time from birth to certificate issuance from 18 days to under 48 hours in pilot hospitals.

There is an important caveat as exemplified by the significant drop in Ghana's birth registration rate—from 93% in 2020 to 77% in 2023, following the withdrawal of donor funding for mobile and community registration in the country. This illustrates the inherent fragility of coverage improvements that have not been fully institutionalised through domestic financing.

Source: *UNFPA WCARO Ghana Mission (2025, internal); Vital Strategies/Bloomberg Philanthropies, Data for Health Initiative (2022) [A]*

3.3.4 Events at Home and in Communities

For the majority of births in the ECOWAS region:

- A traditional birth attendant (TBA), community health worker (CHW), or another trusted actor completes a simplified birth notification form immediately after the birth.
- The form is transmitted to the civil registrar through periodic collection (weekly or monthly) or through community intermediaries.
- Where no form was completed, the family may declare the birth at the nearest registration office within the legal free period.

Countries should formalise the role of traditional authorities—chiefs, imams, religious leaders—through legislation recognising their attestations as valid supporting evidence.

Good Practice: Community Birth Registration—Senegal

Senegal's Agence Nationale de la Statistique et de la Démographie (ANSD) deploys mobile civil registration teams in collaboration with community liaisons (relais communautaires) during immunisation campaigns and market days. In Tambacounda and Kédougou regions, CHWs trained as birth notifiers submit weekly batch notifications to the city authority (mairie), with certificates collected at health post visits. This approach reduced the share of unregistered children aged 0–1 in these regions from approximately 60% in 2018 to under 30% in 2023.

Senegal has also introduced a 'déclaration de naissance simplifiée' programme under which TBAs may submit a standardised form signed by a community chief as valid evidence of birth, waiving parents' identity document requirements when unavailable.

Source: *UNECA, Status of CRVS in Africa (2017)*

3.3.5 Within and Outside the Legal Delay

National legislation defines the period within which registration is free and straightforward (the 'délai légal'): typically 30 to 90 days. Births registered within this period should incur no fees and require minimal documentation. Late registration may incur a small fee. Delayed registration (after the first year) may require an administrative or judicial procedure—but these must not function as de facto barriers.

3.3.6 Recommended Reform: Administrative Late Registration up to One Year

The punitive handling of late registration remains a significant obstacle to achieving universal birth registration within the ECOWAS region. In numerous member states, missing the statutory free registration window often leads to immediate administrative penalties, legal proceedings, or additional requirements that financially exclude many families from the process. To address this, ECOWAS nations are urged to implement a tiered administrative model. This framework aims to eliminate restrictive hurdles by providing accessible and proportionate procedures for registration throughout an infant's first year.

- **Tier 1: Within the legal free period (typically 30–90 days).** Registration is free of charge. Minimal documentation is required (birth notification from a health facility, Traditional Birth Attendant (TBA), Community Health Worker (CHW), or a witness statement for home births). No fine applies.
- **Tier 2: After the free period and up to one year of age.** Registration remains fully administrative—no judicial procedure is required. A minimum administrative fee applies, equivalent to the cost of three birth certificates. The civil registration office serves as the sole point of registration; no court referral is triggered.
- **Tier 3: After one year of age.** A structured delayed-registration procedure applies. Fees must be waived for indigent families. Community attestations, school records, vaccination cards, and health facility registers are all accepted as supporting evidence.

Preferred registration location: Births may be registered at the place of occurrence or at the mother's usual place of residence. National legislation should explicitly recognise both options as equally valid, ensuring internal mobility does not create a barrier to timely registration.

Comparative Legislation: Late and Delayed Registration Procedures

Benin (Code des Personnes et de la Famille, 2004): Births registered up to two months after the legal delay require only a supplementary declaration. After two years, a *jugement supplétif* is required; fees are waived for indigent families.

Côte d'Ivoire (Laws No. 2018-862 and 2018-863): Simplified delayed registration for children up to age 25 without mandatory court intervention. Required evidence: community attestations from two witnesses; any available health, school, or family records; fee waiver for indigent families.

Nigeria (Births, Deaths, etc. (Compulsory Registration) Act, 1992, as amended): Registration beyond 60 days requires a sworn declaration before the registrar. Each state may prescribe supplementary procedures; Lagos State introduced a simplified late-registration portal in 2021, reducing processing time from months to under two weeks. Federal and state governments are encouraged to harmonise late-registration fees and accept community attestations as supporting evidence, in line with ECOWAS Vision 2050 standards for inclusive registration.

Source: *Republic of Côte d'Ivoire, Law No. 2018-862 (2018); Nigeria, Births Deaths etc. (Compulsory Registration) Act (1992, as amended); Lagos State CRVS Portal (2021)*

3.3.7 Where to Register

To ensure universal coverage and bridge the gap between “social facts” and “legal records,” West African states must utilise a multi-layered network of registration points. This decentralised approach is designed to meet citizens where they live, work, and seek essential services:

- **Local civil registration office (mairie/bureau de l’état civil):** standard legal access point for all vital events.
- **Health facilities:** where integrated registration is established, this is a best practice for facility-based deliveries, allowing for the immediate documentation of births before the mother and child are discharged.
- **Mobile registration units:** for nomadic, rural and remote areas as well as community health campaigns.
- **Community registration points:** strategically co-located with high-traffic events such as immunisation clinics, market days, or school enrolment periods.
- **Embassies or consulates:** for births of nationals abroad.
- **Mobile court hearings (Audiences foraines):** Critical for retroactive registration in areas without permanent offices or in post-conflict settings.

3.3.8 Documents Required

The following should be requested where available, but their absence must NOT prevent registration:

- Birth notification from a health facility or Traditional Birth Attendants (TBAs).
- Parents’ identification documents (national ID, passport, voter card, or equivalent).
- Marriage certificate, if the parents are married.
- Witness statements for home births where no notification was completed.

3.3.9 Linkages: Civil Registration—Health—Communities—Statistics

The effectiveness of a CRVS system relies on a seamless “data loop” between four critical sectors. This integration ensures that a single vital event—such as a birth or death—triggers a chain of essential services and statistical updates:

- Health Sector Synergy (Civil registration ↔ Health sector): There is a bi-directional flow where health facilities provide formal notification forms to registrars, while registrars alert the health authorities of community births to ensure no child is missed during immunisation tracking.
- Community Engagement (Civil registration ↔ Communities): Local actors, including Traditional Birth Attendants (TBAs) and Community Health Workers (CHWs), act as first-level informants. Community leaders provide vital attestations, and in return, aggregated data is shared back with local councils to inform village-level planning and resource allocation.
- National Statistics Alignment (Civil registration ↔ National Statistics): Civil registers serve as the primary, legal source for National Vital Statistics. Establishing a “legal requirement”

for the timely transmission of aggregate data to National Statistics Offices is essential for accurate population forecasting and development planning.

- Child Protection Safeguards (Civil registration ↔ Child protection): Real-time registration data is a frontline tool for Child Protection services. It allows for the rapid identification of unregistered children, helping to mitigate the risks of statelessness, child labor, and child marriage.

→ *Detailed step-by-step procedures for birth registration are provided in Annex 3A.*

3.3.10 Vulnerable Populations

Special provisions are required for: children born outside marriage (equal registration rights, no judicial legitimation required); foundlings and abandoned children (special procedures for age estimation); adopted children (new certificate following adoption order); and children of refugees, displaced persons, nomadic, pastoralist, and stateless families (see Section 3.7).

3.4 Marriage Registration: Protecting Rights and Legitimacy

3.4.1 Why Marriage Registration Matters

Marriage registration provides legal recognition and protection of marital rights. In the ECOWAS region [14] unregistered marriages mean women cannot prove their marital status, lack property and inheritance rights, face grave difficulties in the event of divorce or a spouse's death, and may have their children regarded as born outside marriage [14].

Marriage Registration: Key Principles

• All marriages—civil, customary, and religious—are registrable and deserve equal legal protection.

• Either spouse must be able to initiate registration independently, particularly where one party is absent or uncooperative.

• Registration must be accessible regardless of literacy, distance, or cost.

• Minimum age (18 years) must be verified at registration—a key tool for preventing child marriage.

• Retrospective registration of existing unregistered marriages must be possible.

• Cohabitation/Concubinage (de facto unions): countries should create a pathway for registering long-standing unions as civil marriages, particularly for women living without legal protection.

Source: *UNSD, Principles and Recommendations Rev.3 (2014); UN Women (2019)*

3.4.2 Types of Marriage

- **Civil marriage:** celebrated before the civil registrar; automatically recorded in the marriage register.
- **Customary marriage:** celebrated according to ethnic or community tradition; must be separately registered (transcribed) with civil authorities.
- **Religious marriage:** celebrated before an imam, pastor, or priest; must be separately registered with civil authorities.

Critical principle: Religious and customary marriages do not automatically confer civil legal status. Separate registration with the civil registration office is required.

3.4.3 Who Can Register a Marriage

- Both spouses together (preferred method).
- Either spouse independently—critical for women's access.
- The surviving spouse, for retrospective registration where the partner has died.

3.4.4 Within and Outside the Legal Delay

Civil marriages conducted at the registration office are recorded immediately. For customary and religious marriages, most national laws require registration within a defined period following the ceremony. Late registration should not be subject to punitive barriers; simplified retrospective procedures must be available for marriages contracted months or years earlier.

Model Law : Guinea's Framework for Retrospective Marriage Registration (2023)

Laws L/2023-0019/CNT (Code de l'état civil) and L/2023-0020/CNT (Loi sur le mariage) provide: explicit recognition that customary marriages have equal legal status to civil marriages once registered; simplified procedures accepting traditional authority attestations as primary evidence; retrospective registration of marriages contracted decades earlier; women's independent registration authority; and integration with property registration to secure both spouses' inheritance rights equally.

This framework is the first legislation in WCARO to fully codify gender-parity in marriage registration access and to create an explicit regularisation pathway for long-standing unregistered unions. It is recommended for consideration by other ECOWAS member states in their law reform processes.

Source: *Republic of Guinea, Laws L/2023-0019/0020-CNT (2023)*

Example: Marriage Registration Through Health Facility Linkage—Senegal

Senegal's Programme National de Renforcement de l'État Civil (2021–2024) integrated marriage registration with antenatal care consultations. Couples are encouraged to register their union at health centres, as proof of registered marriage is increasingly linked to accessing maternal health benefits. Community health workers (relais communautaires) facilitate documentation gathering and refer couples to the *mairie* for formal registration.

In the Ziguinchor and Fatick regions, approximately 18 per cent of women attending antenatal care had no proof of civil marriage—highlighting the scale of concubinage and the importance of this integration approach.

Source: *UNECA, Status of CRVS in Africa (2017)*

3.4.5 Linkages: Civil Registration – Tribunals – Communities – Statistics

To transform a marriage from a private ceremony into a legally recognised status, civil registration systems must be strategically linked with judicial, community, and statistical frameworks. This multi-sectoral integration ensures that the rights of all parties—particularly women and children—are protected through the following four institutional linkages:

Key Institutional Linkages for Marriage Registration

Judicial integration (Civil registration ↔ Tribunals): Courts have jurisdiction over contested marriages, polygamy authorisations, and marriage annulments. As a result, civil registrars must be automatically notified of all court decisions affecting marriage status, within 15 days of the decision becoming final, ensuring the civil record remains accurate and up-to-date.

Community validation (Civil registration ↔ Communities): Traditional and religious authorities validate the social reality of marriages in the ECOWAS region

Data-Driven Monitoring (Civil registration ↔ Statistics): Marriage registers feed into vital statistics on nuptiality including age at marriage, and marriage rates by type of marriage — essential for monitoring SDG 5.3 on child marriage.

Economic Empowerment (Civil registration ↔ Property/land registers): Women's and men's property rights depend on a registered marriage in many jurisdictions. Countries are encouraged to establish interoperability between marriage and land registry systems. This will help to ensure that inheritance and co-ownership rights are automatically protected, preventing the disenfranchisement of spouses—specifically women—during life transitions or disputes.

Source: *UNSD, Principles and Recommendations Rev.3 (2014)*

3.4.6 Property Regimes

At the time of civil marriage registration, spouses choose the matrimonial property regime, subject to national law: community of property; separation of property; or participation in acquisitions. The property regime options listed here are illustrative; they vary significantly across ECOWAS legal systems.

3.4.7 Recommended Reforms: Simplified Transcription and Institutional Linkages

Simplified transcription pathways for customary and religious marriages. Fewer than 30 per cent of marriages across the ECOWAS region are officially registered. ECOWAS member states are encouraged to adopt the following simplified transcription model:

- Either spouse may initiate transcription independently, without the other spouse's physical presence.
- Required evidence is limited to: a written attestation from the imam, pastor, priest, or traditional authority who officiated the ceremony; the names and identity of at least two witnesses; and basic identity documents (waived where unavailable, replaced by witness attestation).
- Retrospective transcription of marriages contracted years or decades earlier must be available through the same simplified procedure, modelled on Guinea's Laws L/2023-0019/CNT and Côte d'Ivoire's Law No. 2018-862. No court referral required.
- Mobile registration units should be empowered to complete transcriptions on-site, transmitting to the district office within five working days.

Strengthening court-to-civil registration notification for divorces. Member states are recommended to: introduce a standardised court notification form transmitted within 15 days of a divorce decree; entitle either former spouse to bring the decree directly to the registrar in cases where the courts fail to notify; and conduct joint annual audits of court notification compliance rates, published as an accountability mechanism.

Interoperability between marriage registration and land and property systems. Countries are encouraged to establish operational cross-referencing between marriage registers and land

and property registries, accounting for the diversity of customary land tenure systems across the ECOWAS zone.

3.4.8 Special Cases

- **Polygamous marriages:** where legal, each marriage should be registered separately; court authorisation should be required; all wives should be notified; each wife must have equal legal status.
- **Interfaith marriages:** both civil and religious ceremonies may be required by national law; the civil registration process is identical.
- **Cross-border marriages:** registered in the country of ceremony; may also be registered in each party's country of nationality through consular services.
- **Marriages involving persons with disabilities:** must be equally accessible; physical access, sign language interpretation, and adapted documentation procedures are required.

→ *Detailed step-by-step procedures for marriage registration are provided in Annex 3B.*

3.5 Divorce Registration: Ensuring Freedom and Protection

3.5.1 Why Divorce Registration Matters

Divorce registration is the most neglected vital event in the ECOWAS region : less than 2 per cent of divorces are officially registered [14]. An unregistered divorce leaves women legally unable to remarry; without enforceable custody or property rights; and in a legal limbo between married and unmarried status that may persist indefinitely [14].

The 2025 regional review of marriage and divorce registration [14] found that in the six countries studied (Chad, Benin, Burkina Faso, Togo, Sierra Leone, and Ghana), divorce registration rates ranged from 0.3% in Chad to approximately 4% in Ghana. The main barriers include: the requirement for bilateral agreement between spouses; excessive court fees; distance to the courts; and the absence of any registration mechanism for customary or religious divorces [14].

Divorce Registration: Key Principles

• All types of divorce—civil court, customary, and religious—are registrable.

• Either former spouse must be able to register independently. Women must NEVER be required to obtain their ex-husband's cooperation or consent.

• Courts must automatically notify civil registration authorities of all divorce decrees—within 15 days.

• Customary and religious divorces require a structured declaration and evidence-based registration procedure.

• Retrospective registration of historical divorces must be available.

• Women fleeing domestic violence may register their divorce in the country where they have found refuge, subject to bilateral recognition agreements.

Source: *UNSD, Principles and Recommendations Rev.3 (2014); UN Women (2019)*

3.5.2 Types of Divorce

To ensure the accuracy of civil status records and the protection of individual rights following the dissolution of a marriage, West African registration systems must account for four distinct pathways to divorce. Each requires a specific evidentiary chain to be legally recognised:

- **Judicial Dissolution (Court Divorce):** Granted by a civil or family court, these decrees must be automatically notified to the civil registration office. This ensures that the individual's legal status is updated in real-time, preventing administrative gaps in matters of remarriage or inheritance.
- **Traditional Resolution (Customary Divorce):** When a separation is decided by traditional authorities, such as village chiefs or elders, the process requires a formal written attestation. This document serves as the bridge between customary practice and the formal legal record.
- **Faith-Based Dissolution (Religious Divorce):** Whether through Islamic practices (such as *talaq* or *khul'*) or church annulments, most West African countries' jurisdictions require civil court validation before these divorces can be officially entered into the civil register.
- **Consensual Separation (Mutual Consent Divorce):** Representing the most streamlined administrative path, this occurs when both spouses agree to the terms of the split. It relies on the full cooperation of both parties to finalise the registration without protracted litigation.

3.5.3 Within and Outside the Legal Delay

Divorce registration should take place within 30 to 90 days of the decree becoming final. Late registration should not be subject to punitive penalties; retrospective registration of divorces contracted years earlier should be available through a structured declaration procedure.

Court-Civil Registration Linkage—Côte d'Ivoire

Family courts (tribunaux de famille) are legally required to transmit certified copies of divorce decrees to the relevant city authority office within 21 days (Code civil, art. 241 as amended by Law No. 2018-862). The registrar makes a marginal annotation on the original marriage register entry. A 2021 Ministry of Justice circular introduced an electronic notification pilot in Abidjan, reducing average processing time from several months to under three weeks.

While the legal framework in Côte d'Ivoire is exemplary, implementation remains uneven outside Abidjan: fewer than 20% of courts in rural jurisdictions transmitted divorce notifications within the statutory deadline.

Source: *Republic of Côte d'Ivoire, Law No. 2018-862 (2018)*

3.5.4 Linkages: Civil Registration—Tribunals—Communities—Statistics

To ensure that the legal dissolution of a marriage is accurately reflected in a citizen's civil status, ECOWAS registration systems must maintain rigorous linkages across judicial, community, and social sectors. These connections are vital for protecting the rights of women and children during family transitions:

Key Institutional Linkages for Divorce Registration

Judicial Synchronisation (Civil registration ↔ Tribunals): Courts that grant divorce decrees must notify the civil registration office within 15 days. To eliminate administrative delays, standardised notification forms, clear deadlines, and verification mechanisms are required to update the civil registrar immediately once a decision becomes final.

Formalizing Community Decisions (Civil registration ↔ Communities): Traditional and religious authorities who grant customary or religious divorces should issue standardised written attestations. Countries should legislate standard attestation formats for community-level divorces, helping bridge the gap between community-level mediation and formal legal recognition.

National Statistics Alignment (Civil registration) ↔ Statistics: Registered divorces feed into vital statistics on marriage dissolution rates and custody arrangements—critical for monitoring gender equity in family law, helping policymakers identify trends in alimony enforcement and the socioeconomic impact of divorce on women.

Gateway to Social Security (Civil registration ↔ Social protection): Divorce certificates are required to access survivor benefits, social assistance, and legal aid during post-divorce transitions.

Source: *UNSD, Principles and Recommendations Rev.3 (2014)*

Critical: Women's Independent Registration Rights

A woman must be able to register a divorce without her former husband's participation or consent. The civil registrar's role is to assess evidence that a divorce has occurred—not to require bilateral agreement. Where the evidence is sufficient, registration must proceed even if the other party disputes it or is unreachable. Where a woman indicates a domestic violence context, the registrar should fast-track the process, omit any publication step, and coordinate with the police or social services.

Source: *UN Women (2019)*

3.5.5 Regional Coordination

Cross-border divorce presents specific challenges: marriages celebrated in one country, dissolved in another; spouses of different nationalities; property or custody disputes spanning multiple countries. ECOWAS countries are encouraged to establish mutual recognition of divorce decrees and special provisions for women fleeing domestic violence across borders.[6]

→ *Detailed step-by-step procedures for divorce registration are provided in Annex 3C.*

3.6 Death Registration: Closing the Loop and Enabling Public Health Interventions

3.6.1 Why Death Registration Matters

Death registration is among the most neglected components of CRVS in the ECOWAS region. For families, an unregistered death means inability to settle estates, claim inheritance, access survivor benefits, or prove widowed status. For public health, it means invisibility: causes of death unknown, epidemics undetected, maternal mortality unmeasured.[15]

Death Registration: Key Principles

- Every death must be registered, regardless of where it occurred or the documentation status of the deceased.
- The Medical Certificate of Cause of Death (MCCD) is a public health instrument of critical importance—physicians bear a professional obligation to complete it.
- Verbal autopsy methods must be used for all community deaths to assign a probable cause.
- Standard death certificates issued to families do not include cause of death. A separate medical certificate may be issued to authorised parties only.
- Burial authorisation should be issued rapidly—on the same-day where possible—to accommodate religious and practical requirements.
- In conflict-affected areas and disasters, expedited registration procedures must be activated; burial permits must not be withheld for administrative reasons.

Source: *WHO (2021); UNSD, Principles and Recommendations Rev.3 (2014); WHO Verbal Autopsy Standards (2016)*

3.6.2 Events in Health Facilities

The attending physician must complete the MCCD immediately following the death. The MCCD captures the causal chain following WHO/ICD-11 standards. The facility must transmit the MCCD and death notification to the civil registration office within 48 to 72 hours.[15]

Medical Certificate of Cause of Death (MCCD): Key Elements

Part I—Causal chain: (a) immediate cause; (b) underlying cause; (c) initiating condition; time interval for each.

Part II—Contributing conditions: not in the causal chain.

Manner of death: natural, accident, suicide, homicide, or undetermined.

For women of reproductive age: pregnancy status at time of death (mandatory for maternal mortality surveillance).

Physician signature: name, medical licence number, and date.

Source: *WHO ICD-11 (2022); UNSD Handbook Rev.1 (2018)*

Facility Death Registration and Cause-of-Death Data—Ghana

Ghana's Births and Deaths Registry operates dedicated death registration offices in all major hospitals. The Data for Health Initiative (Bloomberg Philanthropies/Vital Strategies) supported ICD-10 coding training for physicians since 2019, improving cause-of-death data quality. Electronic MCCD submission pilots in Greater Accra and Ashanti regions reduced the time between death and registration from an average of 6 days to under 48 hours.

A recent assessment by UNFPA WCARO in 2025 in Ghana suggested that MCCD completion rates had improved to approximately 70% in public hospitals, but remained below 40% in private facilities and district hospitals outside major urban centres.

Source: *UNFPA WCARO Ghana Mission (2025, internal); Vital Strategies/Bloomberg Philanthropies, Data for Health Initiative (2022) [A]; WHO (2021)*

3.6.3 Events at Home and in Communities

For refugees, asylum seekers, and internally displaced persons (IDPs) in the ECOWAS region who are often vulnerable to exploitation, trafficking, and the long-term denial of their basic rights, Agenda 2063 similarly affirms that every African must enjoy the fruits of a prosperous continent—a promise that cannot be kept for those without a legal identity.

- **Community Health Worker (CHW) pathway:** The family reports the death to a CHW within 24–72 hours; the CHW conducts a standardised Verbal Autopsy (VA) interview; completes a death notification form; and transmits it to the registration office.
- **Traditional authority pathway:** In remote areas without CHW coverage, the family reports to the village chief, imam, or pastor, who serves as the primary registrar. They record the event in a community death register and submit periodic notifications to the registration office, leveraging their social standing to ensure that burials are preceded by formal recording.
- **Police pathway:** This pathway is legally mandatory for **violent, sudden, or suspicious deaths**, as well as deaths in custody or the discovery of unidentified bodies. It triggers a formal investigation and medical-legal certification, ensuring that "unnatural" deaths are correctly coded and funnelled into both the justice and health statistics systems.

Verbal Autopsy: WHO Standards and CoE-CRVS Implementation Guidance

Three questionnaire versions: neonatal (0–28 days), child (29 days–11 years), adult (12+ years). Trained interviewers visit 1–4 weeks after death. The assignment uses Physician Certification of VA (PCVA) or computer-coded algorithms (InterVA, InSilicoVA, SmartVA). VA-determined probable causes are clearly marked as such in the death register.

The CoE-CRVS Compendium of Good Practices recommends implementing verbal autopsy in a phased approach: Phase 1 (paper-based)—standardised questionnaire administered by CHWs, compiled monthly; Phase 2 (digital)—tablet-based data collection with automated cause assignment; and Phase 3 (integrated)—VA data feeds directly into national HMIS and vital statistics database.

Source: *WHO Verbal Autopsy Standards (2016); CoE-CRVS, Compendium of Good Practices (2021)*

Community Death Registration—Sierra Leone

Sierra Leone's CRVS system, severely disrupted by the civil war (1991–2002)—during which most civil registration records were destroyed—has been rebuilt through a phased approach with CoE-CRVS/IDRC support.

- Phase 1 (2010–2015): re-establishment of district registration offices and training of CHWs as community notifiers.
- Phase 2 (2016–2020): standardised community death notification forms across all 16 districts.
- Phase 3 (2021–): verbal autopsy piloting using SmartVA on tablets in five districts.

The Sierra Leone experience is directly relevant to ECOWAS countries currently facing conflict-induced CRVS disruption: reconstruction requires a five-to-ten-year horizon and sustained external support (see Section 3.11).

Source: *CoE-CRVS, Compendium of Good Practices (2021); Cojocaru & Dincu (2021)*

3.6.4 Within and Outside the Legal Delay

In most countries in the ECOWAS region, death registration timelines vary from 24 to 72 hours for deaths occurring in a facility (often linked to burial authorisation) and 30 to 90 days for deaths in the community. Burial authorisation needs to be granted quickly—ideally on the same day—due to the requirements of Islamic burial practices and the practical necessity in hot climates lacking adequate morgue facilities.

3.6.5 Recommended Procedure: Death Registration in Underserved Communities

Across the ECOWAS region, an estimated 75–80 per cent of deaths remain unregistered. The gap is most severe in underserved communities: rural and remote settlements, areas with significant Islamic practice requiring burial within 24 hours, and communities far from civil registration offices. Country experiences from Senegal, Niger, Mauritania, and Guinea-Bissau illustrate three principal barriers: (1) burial takes place before any notification is made; (2) the nearest registration office is too distant; and (3) traditional and religious authorities, who witness deaths and burials, lack a formal notification role in the legal framework.

Step 1—Mandatory notification at the place of burial. National legislation should establish a mandatory reporting obligation at the place of burial. The burial organiser—head of household, imam, chief, cemetery keeper—completes a simplified Death Notification Form (DNF) at the time of burial. In communities following Islamic practice, the DNF is completed at the graveside. Burial is never delayed for administrative formalities. Formal civil registration follows within 30 days.

Step 2—Designated community notifiers. Member states should formally designate and train community death notifiers (imams, pastors, chiefs, cemetery keepers, CHWs) in every locality without a permanent registration office, supplying them with standardised DNFs and a community death register. Monthly batches are transmitted to the district office, or immediately for violent, suspicious, or maternal deaths.

Step 3—Separation of burial authorisation from full registration. The designated community notifier issues a community-level burial authorisation on completing the DNF (immediate phase). Within 30 days, the DNF and authorisation are transmitted to the district office for formal registration (registration phase). This decoupling directly addresses the Senegal experience where burial permits were routinely issued independently of civil registration.

Step 4—Verbal autopsy and cause-of-death determination. For deaths outside health facilities, a standardised verbal autopsy (VA) interview is conducted with the family within 1–4 weeks, using WHO VA Standards (2016) in local languages, with cause assignment via InterVA, InSilicoVA, or SmartVA. Deaths of women aged 15–49 are flagged immediately for a Maternal Death Surveillance and Response (MDSR) review.

Step 5—Legal recognition of traditional authority attestations. National legislation must explicitly recognise written attestations from designated village chiefs, imams, and pastors as valid evidentiary documents for death registration. The Mauritania 2011 reforms, which removed this recognition, are cited as a cautionary example: community deaths became systematically invisible as the alternative formal pathway was not feasible for most families.

Step 6—Flexible timelines and proxy declaration. In rural areas, registration timelines for community deaths should be extended to 90 days without penalty, and up to one year with a minimum fee only. A proxy declaration by a community notifier, CHW, or trusted adult must be legally permitted and documented, particularly for women unable to travel due to mourning obligations, childcare, or physical distance.

3.6.6 Linkages: Civil Registration—Health—Communities—Statistics

To ensure that every death is counted and its cause understood, civil registration systems must be deeply integrated with health, community, and social sectors. These linkages transform a simple death record into a powerful tool for public health and family security:

- **Public Health Synergy (Civil registration ↔ Health sector):** Health facilities serve as the primary source for **MCCD** information. This data is the backbone of **disease surveillance**, allowing health authorities to track outbreaks in real-time. Crucially, Maternal Death Surveillance and Response (MDSR) systems must be fully integrated with death registration to ensure that every maternal death is investigated and used to prevent future tragedies.
- **Community Engagement (Civil registration ↔ Communities):** CHWs and traditional authorities are front-line notifiers; they must receive regular training, logistical support, and feedback from the registration office so they understand how their data improves local health services.
- **Mortality Data and Statistics (Civil registration ↔ National Statistics Office):** Death registers are the primary source of vital statistics on mortality, cause of death, and life expectancy, which in turn informs how national and local health budgets are allocated.
- **Security and legal rights (Civil registration ↔ Social protection):** Beyond statistics, death certificates are vital documents for survivors. They are required for families to access survivor pensions, life insurance payouts, and estate settlements.

Good Practice: Maternal Death Surveillance and Registration (MDSR)

All deaths of women aged 15–49 should be flagged in the death register for MDSR review. The expert panel determines whether the death was pregnancy-related, identifies causes and preventable factors, and reports to the health authority. MDSR is operational in Senegal, and Ghana, but requires consistent linkage with civil registration to ensure every maternal death is both registered and reviewed.

Source: *WHO (2021)*

→ *Detailed step-by-step procedures for death registration, including MCCD, verbal autopsy, and special scenarios, are provided in Annex 3D.*

3.7 Registration of Vulnerable Populations: People on the Move, Refugees, and Asylum Seekers

The ECOWAS member states hosted approximately **7.3 million forcibly displaced persons** as of mid-2024—comprising around 6.5 million IDPs and 811,000 refugees and asylum-seekers—alongside an estimated **50 million people** economically dependent on pastoralism across the Sahel and West Africa, and significant but hard-to-quantify flows of seasonal labour migrants. These populations face acute vulnerability: existing without documentation means invisibility to the state [4] [5].

Core Principle: Non-Discrimination and Universality

Civil registration is a universal right regardless of nationality, legal status, documentation, ethnicity, religion, or gender. Every vital event occurring on national territory—or involving nationals abroad—must be registrable. Countries must ensure registration access for all

persons, including those with an irregular status, and those from indigenous, nomadic, and pastoralist communities.

Source: *UN CRC (1989); UNHCR (2012); UN Convention Reduction Statelessness (1961)*

3.7.1 Forcibly Displaced Populations

For refugees, asylum seekers, and internally displaced persons (IDPs) in the ECOWAS region who are often vulnerable to exploitation, trafficking, and the long-term denial of their basic rights, Agenda 2063 similarly affirms that every African must enjoy the fruits of a prosperous continent—a promise that cannot be kept for those without a legal identity. Every person within the ECOWAS zone—regardless of their nationality, legal status, or mobility pattern—must be legally visible and their vital events registered and mutually recognised across all member states. This requires interoperable civil registration systems, harmonised birth certificate formats, and bilateral protocols for cross-border registration in line with the ECOWAS Protocol on Free Movement of Persons.

Refugee children must be registered regardless of their parents' status. The host country registers the birth in its own system and simultaneously notifies the country of origin through diplomatic channels. UNHCR-issued documentation is valid supporting evidence for civil registration. Countries should establish protocols for registering vital events in refugee camps and urban refugee settings, in coordination with UNHCR and IOM.

IDPs retain the right to register vital events regardless of displacement. Mobile registration units should be deployed in IDP camps. Countries hosting large IDP populations (e.g. Nigeria) should develop dedicated IDP registration protocols incorporating simplified evidence standards.

3.7.2 Nomadic and Pastoralist Populations

Nomadic and pastoralist populations cross national borders seasonally. Recommended approaches include: mobile registration units deployed along transhumance routes; community-based registrars travelling with nomadic communities; recognition of nomadic community leaders as valid informants.

3.7.3 Seasonal and Economic Migrants

Seasonal and economic migrants often fail to register vital events in either their country of origin or current residence. ECOWAS free movement provisions should be leveraged to enable cross-border registration. Countries should explore bilateral agreements for mutual recognition of vital events registered for migrant nationals [6].

3.7.4 Stateless Persons

Stateless persons have no nationality and therefore no state to register their vital events. Countries should ensure that children born to stateless parents on their territory are registered and that registration does not automatically confer nationality. Special registration procedures—recognising that standard documentation is unavailable—are essential [17] [18].

3.8 Roles and Obligations in the Civil Registration System

3.8.1 The Civil Registrar

The civil registrar—l'officier d'état civil in French-speaking countries, the district registrar in anglophone contexts—is the cornerstone of the civil registration system. Their core obligations include:

- To register all vital events within their jurisdiction, without discrimination and without conditioning registration on unofficial fees.
- To verify the accuracy of information provided through the examination of supporting documents.
- To maintain civil registers in accordance with the standards set out in Section 3.9.
- To issue certificates promptly upon registration.
- To transmit aggregate data to the national statistics office on the prescribed schedule.
- To notify other institutions—health authorities, courts, police—of relevant registrations as required by law.
- To act upon notifications from health facilities, traditional authorities, courts, and community actors.

The registrar must maintain scrupulous neutrality. Registration of any vital event must not be denied due to factors such as the declarant's poverty, ethnicity, religion, political affiliation, or any personal relationship they may have with the registrar.

3.8.2 The Role of Health Institutions

To achieve the "universal coverage" targets of ECOWAS Vision 2050, the health sector must function as both a legal guardian and a community bridge. By embedding registration into the natural workflow of clinical and community care, member states can eliminate the "identification gap" at the moment of a vital event [16]:

- **As mandatory notifiers:** all births and deaths in health facilities must be notified to the civil registrar within legally prescribed timeframes. The attending health worker bears personal responsibility for notifying the civil registrar within the legally prescribed timeframe. This ensures that every facility-based event is documented before discharge, creating a high-integrity data stream for national health planning.
- **As community partners:** CHWs, nurses, midwives, and TBAs serve as first-line informants for home births and community deaths. They must be trained in notification procedures, ensuring that rural and marginalised populations are no longer excluded from the state's legal identity framework.

The MCCD is a professional obligation of all certifying physicians within the ECOWAS zone. Medical school curricula and continuing medical education must include training on MCCD completion.

3.8.3 The Role of Tribunals and Courts

Jurisdictions with ECOWAS countries must establish a seamless, bi-directional flow of information between the judiciary and the civil registry. This "legal loop" ensures that life-altering judicial decisions are immediately reflected in a citizen's official identity record:

- Courts with jurisdiction over family law must automatically notify the civil registration office of all final decrees within 15 days.
- Courts adjudicating delayed birth registration declarations must transmit certified copies to the relevant registrar.
- The civil registrar may refer contested registrations to the competent court.

The Automatic Court Notification Obligation

In many ECOWAS countries, the legal obligation for courts to notify civil registrars of family court decisions exists on paper but is not implemented. This creates a systematic gap between the legal status (as determined by courts) and recorded status in civil registers. Countries should implement: standardised court notification forms; a defined 15-day deadline; electronic transmission where systems exist; and a verification mechanism enabling registrars to request missing notifications.

Source: *UNSD, Principles and Recommendations Rev.3 (2014)*

3.8.4 The Role of Traditional and Religious Authorities

In the West African context, traditional and religious leaders are the primary bridge between community life and state administration. Their involvement is not merely symbolic; they provide the essential evidentiary link required to bring “hidden” vital events into the formal CRVS system through three strategic functions:

- They validate the social reality of vital events that occur outside health facilities and formal legal spaces.
- Their written attestations, where formalised by law, constitute valid supporting evidence for civil registration.
- Their engagement and endorsement is critical for community-level demand creation.

Countries should formalise the role of traditional and religious authorities through legislation, training, standard attestation forms, and periodic accountability mechanisms.

3.9 Civil Registration Registers: Maintenance, Security, and Use

3.9.1 What Are Civil Registration Registers?

Civil registration registers are the official, permanent record books in which births, marriages, divorces, and deaths are recorded. The register is the source of truth: certification is derived from it. In a well-functioning CRVS system, two identical register copies are maintained: one at the local registration office, the second at the district or regional archive.

3.9.2 Physical Standards

The physical quality of registers is the foundation of documentary permanence. A register that deteriorates within decades cannot serve as the legal foundation for generations that depend on it [19].

Minimum Physical Standards for Civil Registration Registers

• Paper: acid-free archival paper of minimum 100 GSM weight, capable of lasting a minimum of 100 years (ISO 9706 standard).

• Binding: sewn binding (never glued), reinforced spine, hard covers, able to open flat without damage.

• Size: standard A3 (297 mm × 420 mm) or equivalent, with adequate space for all required data fields.

• Page numbering: pre-printed sequential numbers that cannot be removed or altered.

• Security features: watermarked paper with government seal; unique serial number per register; official stamp embossed on first and last pages.

• Duplicate copy: each register entry must be made in duplicate; one copy retained locally, one transmitted monthly to the district or regional archive.

Source: *ISO 11798; UNSD Handbook Rev.1 (2018)*

3.9.3 Writing Standards and maintenance schedule

All entries must be made with permanent, indelible archival-quality ink. Pencils, erasable pens, and temporary-ink ballpoints are strictly prohibited. Errors must be corrected by a single-line strike-through, with the registrar's initials and the correction date; the original entry must remain legible. Correction fluid is prohibited.

In addition, to ensure the legal integrity and physical security of civil status records, registration offices must adhere to a rigorous maintenance schedule as follows:

- **Daily Integrity Checks:** Registrars must review new entries for completeness and accuracy daily. The final entry is signed and dated to prevent backdating. Physical registers are then moved to a secure, locked cabinet to protect against loss or unauthorised access.
- **Weekly Supervisory Audits:** A supervisor conducts a spot-check on a 10–20% sample of weekly registrations to ensure no pages have been removed or damaged and all security seals remain intact, maintaining the chain of custody.
- **Monthly Data Synchronisation:** At the month's end, vital statistics are compiled for the National Statistics Office, and register entries are reconciled against certificates issued. Duplicate copies are formally transmitted to district or central archives to mitigate local record loss.

3.9.4 Physical Security, Storage and Archiving

Active registers must be stored in fireproof cabinets, accessible only to authorised personnel. Environmental conditions: 18–22°C, 30–50% relative humidity, protected from sunlight, water, and pests. An access log must record every instance when a register is removed. Registers must never leave the registration office.

In addition, to prevent the loss of data through environmental damage or administrative neglect, the following four-stage protocol must be executed for archiving once a register is full:

- Certify the register (registrar's signature, date, total entries, official seal) on the final page.
- Inventory within seven days; inventory approved by supervisor.

- Digitise within 30 days where capacity exists (minimum 300 DPI; stored in minimum three geographically distinct locations).
- Transfer duplicate copy to the national or regional archive within 30 days, in a secure waterproof container, with two officials escorting and archives staff signing receipt.

3.9.5 Using Registers for Statistics and Service Delivery

Civil registration registers are the primary data source for vital statistics and demographic research. Aggregate data from registers—births by sex, region, and type; marriages by type and age; deaths by age, sex, and cause—feed into national vital statistics and international monitoring frameworks.

Examples: Using Registers for Service Delivery

• A local education authority cross-references birth registers with school enrolment data to identify unregistered children of school age.

• A district health officer uses death register data to detect a cluster of deaths from a single cause, prompting an epidemic investigation.

• A social protection agency cross-references death registers with pension lists to remove deceased recipients and prevent fraud.

• A national statistics office compiles annual vital statistics from all district registers to calculate national birth rates, death rates, and fertility rates.

Source: *UNSD Handbook Rev.1 (2018)*

→ *Detailed guidance on register maintenance, security, and archiving is provided in Annex 3E.*

3.10 Civil Registration Certificates: Security, Uniformity, and Fraud Prevention

3.10.1 What Is a Certificate?

A civil registration certificate is an official document issued as certified proof of a vital event recorded in the civil register. The certificate is a copy derived from the register; the register remains the authoritative original. There are four types of certificates: birth, marriage, divorce, and death certificate.

3.10.2 Security Features

To prevent the forgery of identity documents and maintain public trust in the state's "golden records" civil registration systems must employ a sophisticated, three-tiered security architecture. This framework ensures that certificates are both physically tamper-evident and digitally verifiable:

- **Physical features:** security paper with watermarks and security threads; microprinting; guilloche patterns; intaglio printing; UV-reactive elements; optically variable ink; holograms.
- **Numbering:** sequential pre-printed serial numbers; unique certificate number in the central database; control numbers linking to the register page.
- **Digital features:** QR codes or 2D barcodes linking to an online verification portal; machine-readable zones (MRZ); digital signatures.

- **Administrative security:** controlled distribution of security paper; centralised procurement; regular audits; strict per-certificate accountability.

3.10.3 Content Standards by Certificate Type

To ensure regional interoperability and legal clarity across the ECOWAS zone, civil certificates must adhere to standardised data fields. These standards ensure that every document contains the "minimum essential information" required for legal identification, while protecting sensitive data through strategic exclusions:

- **Birth certificate:** child's full name, sex, date/time/place of birth, mother's name and nationality, father's name and nationality (if acknowledged), registration date and place, serial number, registrar's signature and seal.
- **Marriage certificate:** full names of both spouses, date and place of marriage, type of marriage, registration date and place, serial number, registrar's signature and seal.
- **Divorce certificate:** names of former spouses, marriage certificate reference number, date and place of decree, authority that granted the divorce, registration date and place, serial number, registrar's signature and seal.
- **Death certificate (family copy):** deceased's name, sex, age, date/time/place of death, registration date, serial number, registrar's signature and seal. (Cause of death NOT included on the standard family certificate.)

3.10.4 National Uniformity and Regional Harmonisation

A single, consistent certificate format across the entire national territory is essential for equal recognition of all citizens' documents, fraud prevention, and interoperability. Regional harmonisation—minimum standards adopted across ECOWAS—is equally important for free movement and cross-border recognition [20].

Certificate Security: ICAO/MRZ Standards and Regional Alignment

ICAO Doc 9303 (8th edition, 2021) provides the international standard for machine-readable documents, including civil identity certificates. Countries are encouraged to adopt MRZ fields on birth certificates issued to adults, enabling automated border verification within the ECOWAS zone.

ECOWAS member states have discussed minimum certificate security standards under the free movement framework. At minimum, all certificates should carry: a government watermark; sequential serial numbering; and a QR code or barcode linking to an online verification portal accessible to all member states.

Source: *ICAO Doc 9303 (2021); UNSD Handbook Rev.1 (2018)*

→ *Detailed guidance on certificate security features, content standards, and anti-fraud measures is provided in Annex 3F.*

3.11 Reconstitution of Civil Rights

The loss, destruction, or irreparable damage of civil registration records is a recurrent crisis in West Africa. Effective reconstitution requires a dedicated legal framework, systematic operational methodology, and preventive measures to avoid future loss. This section draws on the experience of Sierra Leone, as well as the technical guidance of UNSD, UNECA, and the Centre of Excellence for CRVS Systems [21] [22] [19] [2].

3.11.1 Scope and Cause of Register Loss in ECOWAS zone

The preservation of civil registers within ECOWAS countries faces significant existential threats, ranging from deliberate sabotage during instability to the gradual erosion caused by environmental neglect. These vulnerabilities often lead to “legal identity blackouts” where entire populations lose the ability to prove their civil status. The main causes of register loss include:

- **Armed conflict and looting:** civil registration offices are frequent targets of deliberate destruction. In Sierra Leone (1991–2002), over 70% of district registration records were destroyed. In Nigeria, conflict-affected communities in Borno and Adamawa states have experienced significant destruction of civil registration records during the Lake Chad Basin insurgency (2009–present) [7].
- **Natural disasters:** floods (Niger delta, coastal Benin), fires in poorly constructed storage facilities, and termite or moisture damage to paper records in humid conditions.
- **Institutional failure:** inadequate archiving infrastructure, neglect of storage conditions, theft of security paper, and absence of duplicate copies result in gradual record loss even in non-conflict settings.
- **Office fires:** have destroyed entire district-level register collections in Togo (2017) and conflict-affected districts of northern Nigeria (2014–2022).

Case Study: Sierra Leone—Systematic Register Reconstitution After Civil War

Sierra Leone’s National Civil Registration Authority (NCRA), established by the Civil Registration Act 2016, undertook a systematic register reconstitution programme from 2017 onwards, supported by the Centre of Excellence for CRVS Systems (then IDRC/Ottawa) and UNICEF. The programme combined: (1) search for surviving fragments of pre-war registers in district courts, churches, mosques, and hospitals; (2) oral history and community attestation processes to reconstruct events; (3) administrative mass regularisation campaigns across all 16 districts; and (4) transition to a hybrid digital-paper system to prevent future catastrophic loss.

The Civil Registration (Amendment) Act 2020 authorised the NCRA to accept community attestations as primary evidence for reconstitution, waived all fees for reconstitution-related registrations, and established a national digital register as the authoritative master copy backed up in three geographic locations.

Source: *CoE-CRVS, Compendium of Good Practices (2021); Cojocaru & Dincu (2021)*

3.11.2 Legal Framework for Register Reconstitution

Register reconstitution requires an explicit legal framework. Measures taken without legal authority may produce documents that are later contested. National legislation should address:

- Authorisation for competent authorities (minister of justice, courts, or designated registrar authority) to declare a register destroyed and initiate reconstitution.
- Admissibility of substitute evidence: community attestations, church/mosque records, hospital records, vaccination cards, school enrolment records, oral testimony before a juge de paix (local judge).
- Waiver of fees for all registrations related to reconstitution.

- Legal validity of reconstituted certificates: they must be fully equivalent to original certificates for all legal purposes.
- Time-limits: reconstitution campaigns should be open-ended, as affected communities require years to access services.
- Digital back-up obligation: newly issued reconstituted certificates must be digitised and backed up to a national central server within 30 days of issuance.

3.11.3 Operational Phases of Register Reconstitution

When civil registers are lost to conflict, fire, or natural disaster, the state must undertake a formal “reconstitution” process. This is not a simple data entry task; it is a sensitive legal and community-driven operation to restore the legal identity of an entire population. The process is divided into four rigorous operational phases:

Phase 1: Damage Assessment and Evidence Compilation

Before any reconstitution effort begins:

- Survey all affected registration offices, archives, courts, and health facilities to identify which registers survived, which were partially damaged, and which were fully destroyed.
- Document the time period covered by destroyed registers.
- Identify available substitute evidence: hospital birth registers; church and mosque marriage and burial books; vaccination registers; school enrolment records; voter registration cards; land registry documents.
- Engage former local registrars, chiefs, and community leaders who may have personal knowledge or private copies of records.

Phase 2: Legal Declaration and Mandate

- Issue a formal ministerial or court declaration that the specified register is destroyed and that reconstitution proceedings are authorised.
- Appoint a reconstitution commissioner (typically a juge de paix or senior registrar) with authority to accept substitute evidence.
- Publish the reconstitution mandate through official and community channels (radio, community chiefs, religious leaders).

Phase 3: Community Evidence Gathering

- Deploy mobile reconstitution teams to affected communities, covering the same geographic areas as the destroyed register.
- Accept all available substitute evidence; no single evidence type should be required where genuinely unavailable.
- Use standardised reconstitution declaration forms (one per vital event) capturing: declarant’s identity and relationship to subject; date and place of event; names of witnesses; supporting documents attached.
- Ensure female registrars or female community workers conduct interviews in communities where women cannot interact with male officials.

Phase 4: Register Reconstruction and Digitisation

- Create new reconstituted register entries for each confirmed vital event, clearly marked ‘Reconstitué—Registre détruit [date/cause]’.

- Issue reconstituted certificates bearing a distinctive stamp or watermark indicating reconstituted status.
- Digitise all reconstituted entries immediately; upload to the national register database.
- Store three copies: local office, district archive, and national central server.
-

Minimum Information for a Reconstituted Birth Register Entry

• Subject's name (as recalled or as on any available document).

• Approximate date and place of birth (year and season acceptable if exact date unknown).

• Names of parents or guardians.

• Nature and source of evidence accepted.

• Name and title of reconstitution commissioner.

• Date of reconstitution and names of witnesses.

Source: *UNSD Handbook Rev.1 (2018); CoE-CRVS, Compendium of Good Practices (2021)*

3.11.4 Preventing Future Loss: Mandatory Digitisation and Redundancy

The most effective protection against register loss is systematic preventive digitisation combined with geographic redundancy in storage. Countries should:

- Digitise all existing registers within a rolling five-year programme, prioritising the oldest and most fragile records.
- Store digital copies in at minimum three geographically distinct locations: local office, district/regional archive, and national data centre.
- Implement quarterly automated backup verification to ensure digital copies remain accessible and uncorrupted.
- Where cloud storage is available and data sovereignty concerns are managed, use a secondary cloud backup.
-

UNSD and UNECA Guidance on Register Digitisation and Redundancy

The UNSD's Handbook on CRVS Systems (Revision 1, 2018) specifies that each country should develop a national plan for the digitisation of civil registration records, prioritising those at risk of physical deterioration or destruction. Digitised records should be stored in multiple locations with regular integrity checks and access controls that prevent unauthorised modification.

UNECA's Report on the Status of Civil Registration and Vital Statistics in Africa identified the absence of digital backup systems as a critical vulnerability across the region, and recommended that member states establish minimum digitisation standards as part of their CRVS national strategies.

The CoE-CRVS Compendium of Good Practices provides case studies of register digitisation in conflict-affected settings, including offline-capable scanning solutions, quality control protocols, and metadata standards for low-resource environments. Countries undertaking register digitisation are strongly encouraged to consult these materials.

Source: *UNSD Handbook Rev.1 (2018); UNECA, Status of CRVS in Africa (2017); CoE-CRVS, Compendium of Good Practices (2021)*

3.12 Standard Operating Procedures for CRVS in Emergencies and Disasters

Civil registration systems in West Africa are repeatedly disrupted by armed conflict, natural disasters, epidemics, and political crises. Yet most ECOWAS countries have no dedicated CRVS emergency standard operating procedures (SOP)—leaving registrars, humanitarian actors, and community leaders without guidance. This section establishes the minimum SOP framework that all ECOWAS countries should develop and maintain [21] [22].

3.12.1 The Case for CRVS Emergency SOPs

Emergencies create a dual CRVS crisis: a spike in vital events occurs precisely when the systems needed to register them are most disrupted. The consequences are severe:

- Massive cohorts of children born in displacement or conflict zones remain unregistered for years or permanently.
- Deaths—including mass casualties—go unregistered, undermining mortality surveillance and post-crisis forensic accountability.
- Marriage dissolutions resulting from death or displacement of spouses remain unregistered, creating legal complications for surviving women.
- Property and inheritance disputes multiply when death registration is absent.

The CoE-CRVS Compendium of Good Practices documents that in humanitarian settings, lack of civil registration is both a consequence and a driver of vulnerability. Pre-positioning a CRVS emergency SOP—before crises occur—dramatically improves system resilience [21].

3.12.2 Before the Emergency: Preparedness Measures

To prevent the total collapse of legal identity systems during a crisis, “resilience by design” must be integrated into the CRVS infrastructure before a disaster strikes. Preparedness ensures that even if physical offices are destroyed, the state’s ability to record births, deaths, and marriages remains functional. Below are key aspects of the preparedness process:

Legal and Institutional Preparedness

- Enact or review legislation authorising simplified registration procedures in declared emergencies.
- Designate an emergency CRVS coordinator at national level, with clear authority and a pre-approved emergency budget line.
- Establish a CRVS–Disaster Risk Reduction (DRR) link: include CRVS considerations in the national disaster management plan.
- Map all existing registration offices, identifying those at highest risk of disruption.

Physical and Digital Preparedness

- Maintain emergency registration kits (portable, weather-resistant): lightweight register books with pre-printed sequential page numbers; archival ink pens; portable solar chargers; satellite connectivity devices.
- Digitise all existing registers as a preventive measure (see Section 3.11.4).

- Pre-position duplicate register copies in geographically distinct locations away from known risk areas.
- Train a cadre of emergency registration officers at district level who can be rapidly deployed.

Training and SOP Dissemination

- Develop emergency registration SOPs in local languages and distribute them to all registration offices and civil protection services.
- Conduct annual tabletop exercises simulating a CRVS disruption event.
- Pre-establish protocols with UNHCR, IOM, ICRC, and national/international NGOs for civil registration in humanitarian settings.

Legislative Model: Ghana—Emergency CRVS Provisions (Act 1027, 2020)

The Births and Deaths Registry Act, 2020 (Act 1027) includes a dedicated Emergency Registration Part (Part IV) authorising the Registrar-General to issue simplified registration procedures during declared national emergencies. These provisions include: waive standard documentation requirements; authorise CHWs and community leaders as emergency registrars; permit registration periods of up to 5 years post-event without penalty; and require special emergency registers to be cross-referenced with the main register once the emergency period ends.

A recent assessment by UNFPA WCARO in 2025 in Ghana shows that the country's Emergency Registration Part is a legislative best practice. However, it had not yet been operationalised through subordinate regulations or trained personnel—illustrating the gap between legislative provision and operational readiness that is common across the region.

Source: *Ghana Births and Deaths Registry Act, 2020; UNFPA WCARO Ghana Mission (2025, internal)*

3.12.3 During the Emergency: Minimum Service Package

When a crisis strikes, CRVS systems must transition into a "triage" mode. To maintain the rule of law and protect human dignity, administrative requirements are simplified while ensuring that the most critical vital events—specifically those impacting immediate safety and legal protection—are recorded without delay. Below are key operational procedures that need to be prioritised during an emergency:

Priority 1: Death Registration and Burial Authorisation

- Maintain death registration even at reduced capacity; burial authorisation must NEVER be withheld for administrative reasons during an emergency.
- Deploy emergency registration teams within 48 hours of a declared emergency to the affected area.
- Use simplified death notification forms (name, approximate age, place and date of death, cause if known, informant identity).
- Issue burial permits immediately upon simplified notification.
- For mass casualty events: coordinate with civil protection, police, and forensic services to ensure each body is individually registered before burial or removal.

Priority 2: Birth Registration for Children Born During the Emergency

- Deploy birth registration capacity to health facilities, IDP camps, and community gathering points.
- Accept simplified evidence: any available documentation, or community attestation by two adult witnesses.
- Issue provisional birth certificates (clearly marked 'Emergency Registration—Provisional') pending verification.
- Provisional certificates must be fully legally valid; 'provisional' refers to the need for follow-up verification, not reduced legal status.

Priority 3: Marriage and Divorce Registration

- In acute emergency phases, marriage and divorce registration is secondary to death and birth. However, courts and community authorities should continue to record marriages and divorces in emergency registers.
- In displacement settings, women's ability to register divorces is particularly critical: fast-track procedures for women fleeing domestic violence must be maintained.
-

CoE-CRVS/UNHCR: Civil Registration in Humanitarian Settings

The CoE-CRVS Compendium of Good Practices addresses CRVS in humanitarian settings across multiple case studies. A notable recommendation is that registration of vital events in humanitarian settings must be coordinated with the Civil Registration Authority of the host country—it is not a parallel system, but an extension of the national system under emergency protocols. Adherence to this principle is crucial, as it prevents the establishment of non-legally recognised "shadow registers" and ensures that all records are legally valid post-crisis.

The CoE-CRVS communication brief on CRVS in emergency, conflict-affected, and fragile settings (Cojocaru and Dincu, 2021) emphasises that communication strategies must be adapted to emergency conditions: simplified messages, trusted community messengers, and radio-based outreach when physical movement is restricted.

Source: *CoE-CRVS, Compendium of Good Practices (2021); Cojocaru & Dincu (2021)*

3.12.4 After the Emergency: Recovery and System Strengthening

The post-crisis phase is a critical window for restoring legal order and building a more resilient CRVS infrastructure. Recovery must move beyond mere repair, using the rebuilding process to address pre-existing vulnerabilities and ensure that no citizen remains "legally lost" due to the disruption.

- **Systematic catch-up registration:** deploy mobile teams for at least 12 months post-emergency to register all events that occurred during disruption. Legislate a special registration period (2–5 years) with waived fees and simplified evidence requirements.
- **Register reconstitution:** initiate register reconstitution (see Section 3.11) for all destroyed records; prioritise the most recent 20-year period first.
- **System upgrade:** use the post-crisis rebuilding process as an opportunity to introduce digital systems, duplicate register policies, and off-site backup procedures.
- **Training and personnel recovery:** retrain displaced or traumatised registration staff; consider employing community members as community registrars.

- **Review and lessons-learned:** conduct a formal post-crisis CRVS assessment (using the UNSD/UNECA assessment toolkit) within 12 months; update the emergency SOP.

3.12.5 CRVS during Epidemics

Epidemics—including the West African Ebola outbreak (2014–2016), COVID-19 (2020–2022), and recurring cholera outbreaks—present a unique "double burden" for CRVS systems: a sudden, massive surge in mortality coupled with the severe disruption of the health facilities that typically certify those deaths. To maintain civil order and public health intelligence, the following protocols are essential:

- Maintain death registration during epidemics as a public health measure: unregistered deaths undermine epidemic surveillance.
- Coordinate with the health emergency operations centre (EOC) to ensure CRVS officers receive appropriate personal protective equipment (PPE) and training.
- Issue provisional burial permits within 24 hours; do not delay burial while waiting for formal MCCD completion during active epidemic phases.
- Introduce simplified cause-of-death coding for epidemic deaths: pre-agreed ICD codes for presumed and confirmed epidemic deaths allow rapid mortality statistics compilation.
-

Lessons from Ebola: Sierra Leone and Guinea (2014–2016)

The 2014–2016 Ebola outbreak demonstrated the CRVS consequences of epidemic non-preparedness. Death registration collapsed in Sierra Leone and Guinea: for every confirmed Ebola death registered, 1.5–2 community deaths went unregistered.

Post-crisis, Sierra Leone's NCRA developed an Epidemic Death Registration SOP (2018) requiring: pre-identification of emergency registrars at all Ebola Treatment Units (ETUs); issuance of provisional death certificates by medical staff without requiring civil registration office involvement; daily batch transmission to the civil registration office; and a 90-day special registration window post-epidemic.

Guinea incorporated similar provisions into its Laws L/2023-0019/CNT (Code de l'état civil), making Guinea the first WCARO country to legislate epidemic-specific death registration procedures in primary law.

Source: *CoE-CRVS, Compendium of Good Practices (2021); Republic of Guinea, Laws L/2023-0019/0020-CNT (2023).*

3.13 Conclusion

In conclusion, this chapter has demonstrated that the effectiveness of civil registration and vital statistics systems (CRVS) in West Africa depends on rigorous standardisation and the accessibility of procedures for all civil status events.

- Foundations and universality: Birth registration constitutes the first act of legal recognition of the individual, requiring enhanced collaboration between health facilities and local communities to overcome geographical and structural barriers.

- Protection of rights and gender equality: The formalisation and simplified registration of marriages and divorces — whether civil, customary or religious — are essential to guarantee equal rights, protect women and secure access to property, inheritance and social protection.
- Public health and mortality: The systematic registration of deaths, supported by innovations such as verbal post-mortem examinations in underserved areas, is crucial for epidemiological surveillance and regional health planning.
- Inclusion of vulnerable populations: Displaced persons, nomads, cross-border migrants and stateless persons require mobile and tailored registration systems to ensure that no individual is left behind.
- Security, integrity and resilience: Ensuring the physical and digital security of registers, preventing document fraud, reconstructing damaged archives and implementing emergency procedures guarantee the continuity of services in the face of climate, health or security crises.

By combining institutional commitment, the involvement of traditional and religious authorities, and the adoption of harmonised standards, ECOWAS Member States have the necessary tools to transform civil registration into a genuine driver of regional integration and sustainable human development.

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ANNEX 3A

QUICK REFERENCE GUIDE: BIRTH REGISTRATION

Purpose of this Annex

This Annex provides the operational reference guide for birth registration, designed for civil registrars, health facility staff, community health workers, traditional birth attendants, and local administrators. Step-by-step procedures correspond to Section 3.3 of Chapter 3.

Source: UNFPA WCARO CRVS Regional Guidelines, Chapter 3—Annex 3A.

A.1 Who Must Register a Birth

Primary Declarants (in order of priority)

1. Mother or father of the child—either independently, without requiring the other's presence.

2. In the absence of both parents: legal guardian, family member, or person who witnessed the birth.

3. Health facility staff, for births in hospitals or clinics.

4. Community health worker or traditional birth attendant, for home births.

Source: UNSD Principles and Recommendations, Revision 3 (2014) [1].

Legal responsibility rests first with the parents. Either parent may register independently—no co-signature or spousal presence is required. Children born outside registered marriages enjoy full registration rights. The registrar may not discriminate based on the parents' marital status, nationality, refugee status, or religion [1].

A.2 Time Limits for Registration

Period	Conditions and Requirements
Free period: 0–90 days after birth (varies by country)	No fee. No additional documents required beyond oral declaration.
Late registration: 90 days–1 year	Small administrative fee may apply. Vaccination card helpful but not mandatory. Written explanation of delay.
Delayed registration: more than 1 year	Simplified administrative declaration OR court procedure, depending on national law. Fees must be waived for indigent families.

Principle: Absence of Documents NEVER Prevents Registration

If parents or family members lack identity documents, registration proceeds on the basis of oral declaration, corroborated by a community attestation or witness statement. The registrar records the information declared and notes the absence of supporting documents. A registration based on oral declaration is fully valid and must not be given lower status than a document-supported registration.

Source: UNSD (2014) [1]; Côte d'Ivoire Laws No. 2018-862 and 2018-863 [3].

A.3 Information Required for Registration

Essential information

- Child's full name (given name + family name), sex, date and time of birth, place of birth (health facility, home, village name).
- Mother's full name, age or date of birth, nationality, residence address.
- Father's information (if acknowledged): full name, date of birth, nationality, residence address.
- Informant information: name, relationship to child, contact details.

Supporting documents (if available)

- Birth notification from health facility or traditional birth attendant.
- Parents' identity documents (national ID, passport, voter card).
- Parents' marriage certificate (if applicable).
- Immunisation card—confirms date of birth.

Country Example—Côte d'Ivoire: Simplified Documentation

Under Loi No. 2018-862 (2018), Côte d'Ivoire allows delayed registration of children up to the age of 25 through an administrative procedure (not requiring a court order). Community leader attestations and witness statements are explicitly accepted as alternative evidence. The law removed the requirement for a court judgement for delays of up to 10 years, dramatically reducing costs and time for rural families.

Source: Côte d'Ivoire Law No. 2018-862 (2018) [3].

A.4 Where to Register

- Local civil registration office (district or municipal headquarters).
- Health facility (hospital or health centre with integrated registration service)—the preferred point for facility births.
- Mobile registration unit—deployed to rural areas, market days, immunisation campaigns.
- Community registration point—for remote populations, co-located with CHW services.
- Embassy or consulate—for births abroad to citizens of the country.

Country Example—Ghana: Integrated Facility Registration

Ghana's birth registration programme integrated registration desks into all major hospitals and health centres. Mobile units were deployed alongside Child Health Days. This combined approach increased birth registration from approximately 45% in 2014 to over 75% by 2023, demonstrating that proximity to the point of birth is the single most effective factor in improving coverage.

Source: Ghana Statistical Service, Annual Report (2023); UNFPA WCARO Mission Report, Ghana (2024). Internal working documents.

A.5 Step-by-Step: Registration of Facility Births

Step 1: Birth Notification (within 24 hours of birth)

The attending health worker (doctor, nurse, or midwife) completes the official birth notification form within 24 hours of the birth.

The form records: the child's name, sex, date and time, names and identity of the parents, delivery type, birth weight, and whether the child was born alive or stillborn.

Step 2: Transmission to Civil Registrar (within 3 days)

The health facility submits the birth notification to the co-located registrar's desk (where this exists) or to the local civil registration office within three working days.

In facilities with integrated systems, the notification is submitted electronically on the same day.

Step 3: Registration (within the legal delay period)

The civil registrar reviews the notification, verifies identity documents where available, and enters the birth into the civil register (birth register, sequential entry number).

If a parent is present, the registrar confirms the information verbally. The registrar and the declarant (if present) sign the register entry.

Step 4: Certificate Issuance

The civil registrar issues the birth certificate on official security paper.

For timely registrations (within the free period): the certificate is issued free of charge, on the same day or within three working days.

A second certified copy is prepared for the mother's records.

Step 5: Transmission to Statistics (monthly)

The civil registration office compiles a monthly summary of all registered births and transmits this to the national statistical office, using the standard vital statistics return form.

A.6 Step-by-Step: Registration of Community and Home Births

Approximately 60–70 per cent of births in West and Central Africa still occur at home or in the community, outside health facilities [5]. Community birth registration requires a coordinated approach linking traditional birth attendants (TBAs), community health workers (CHWs), and the civil registration system.

Step 1: Notification by Community Health Worker or TBA (within 7 days)

The CHW or TBA who attended the birth (or who learns of the birth through community networks) completes a simplified birth notification slip.

The slip is filled in with available information: the child's name (if given), sex, approximate date, place, parents' names. If an exact date is unknown, an approximate month and year are recorded.

Step 2: Periodic Transmission to Registrar

Notification slips are collected during the CHW's regular visit to the local civil registration office—typically weekly or fortnightly—or transmitted during mobile registration unit visits.

Step 3: Registration

The registrar enters the birth from the notification slip into the civil register. If the parents or a family member are present, information is confirmed verbally and the declarant signs.

Where the parents cannot attend, the CHW's declaration and signature serve as the declarant record.

Step 4: Certificate Delivery

The certificate is issued at the registration office and delivered to the family either directly or through the CHW on the next community visit.

A.7 Delayed and Late Registration Procedures

Type	Procedure
Late registration (90 days to 1 year)	Parent or guardian presents to civil registration office. Written explanation of delay provided. Vaccination card or health worker attestation helpful. Small fee may apply. Registrar completes normal registration.
Delayed registration (1–5 years)	Parent or guardian submits written declaration. Community leader or religious authority

	attestation. Registrar verifies and registers. Fees waived for poor families.
Delayed registration (over 5 years, child present)	In countries with a simplified procedure (e.g. Côte d'Ivoire): administrative declaration with community attestations. In other countries: court declaration required.
Adult delayed registration (over 18)	Court petition in most countries. Evidence: school records, voter card, medical records, witness affidavits. Court issues judgment used for registration.

A.8 Special Cases and Vulnerable Populations

Refugees and Asylum Seekers

Refugees and asylum seekers have the right to register births occurring in the host country. The birth certificate does not automatically confer citizenship—it simply records the birth. UNHCR parallel registration systems may complement but do not replace civil registration [4].

Children Born Outside Marriage

- Full registration rights—no discrimination permitted.
- Mother can register alone; father's name may be left blank or added later with paternal acknowledgement.
- Children born outside marriage must not be given a different or lower quality certificate.

Nomadic and Pastoralist Communities

Best Practice—Mobile Registration for Nomadic Populations

Mobile registration units following migration routes (coordinated with livestock vaccination campaigns, water points, and market days) have proven effective in Sahel countries. In Niger and Mali, such programmes have achieved registration rates of over 50% among nomadic Fulani and Tuareg communities that had previously been entirely outside the system.

Source: UNHCR Guidelines on Statelessness No. 4 (2012) [4]; UNICEF, Birth Registration for Every Child by 2030 (2019) [5].

Children Born Abroad to Citizens

- Register with that country's authorities at the time of birth.
- Then register with the home country's consulate or embassy—produces a secondary birth registration for the home country's records.

Twins and Multiple Births

- Each child receives a separate birth certificate.
- Birth order is recorded (first-born, second-born, etc.).

A.9 Common Problems and Recommended Responses

Problem	Recommended Response
No identity documents (parents)	Use alternative verification: community leader attestation, witness statement, biometric identification where available. Registration proceeds.
Exact birth date unknown	Approximate date acceptable. Health worker or registrar estimates based on child's development. Month and year are sufficient—exact day may be approximated.
Registration office too far	Wait for mobile registration unit; register during immunisation campaign; use community registration point co-located with CHW.
Father refuses to acknowledge child	Mother registers alone; father's name left blank or added later with consent. Child's rights are not affected.
Free registration period missed	Register as soon as possible; explain delay; apply fee waiver for indigent families; inform of simplified delayed registration procedure.
Birth occurred in another country	Register with that country's authorities; then register with the home country's consulate if needed.
Traditional birth attendant not linked to system	Provide TBAs with official notification slips; include in CHW outreach network; regularise their role in the notification chain.

⚠ Red Flags—Report These Issues to the Supervisory Authority:

- Fees charged for registration within the legal free period (registration should be FREE).
- Long travel distances required and no mobile service provided (decentralisation obligation).
- Rejection due to parents' marital status, ethnicity, refugee status, or religion.
- Certificate format different from others in the country (uniformity violation).
- Requests for unofficial payments or 'facilitation fees'.
- Registrar requiring father's presence for registration of child born to single mother.

A.10 What the Family Receives

- Birth registration receipt: immediate proof, contains registration number, valid while certificate is being prepared.

- Birth certificate: issued on security paper containing: child's full name; sex; date and place of birth; parents' names and nationalities; registration number; registrar's signature and official seal.

A.11 Legal Protections and Rights

Every Child Has the Right to Be Registered at Birth

Article 7 of the United Nations Convention on the Rights of the Child (1989) establishes the right of every child to be registered immediately after birth. This right admits no exceptions and applies regardless of nationality, ethnicity, religion, marital status of parents, or place of birth.

Birth registration is the foundational document for: school enrolment; healthcare access; obtaining national identity documents; passport application; proof of age (protection against child marriage and child labour); inheritance rights; and access to social protection programmes.

Source: UN Convention on the Rights of the Child (1989) [2]; UNSD Principles and Recommendations, Revision 3 (2014) [1].

A.12 Training Checklist for New Registrars—Birth Registration

Before independently handling birth registrations, a new registrar must:

- Understand who has legal responsibility to declare a birth and in what order of priority.
- Know the free registration period and the applicable late/delayed registration procedures under national law.
- Know which documents are required and which are optional—and be able to register without documents where necessary.
- Know how to complete all fields in the birth register correctly (including for children born outside marriage, stillbirths, and multiple births).
- Know the correction procedure (single-line strikethrough with initials and date—never erasure or correction fluid).
- Know how to issue a certificate on security paper and record it in the certificates-issued register.
- Know when to refer to supervisor (delayed registration, disputed parentage, suspicious documentation).
- Complete at least ten supervised registrations before working independently.

Endnotes

[1] United Nations Statistics Division (UNSD). (2014). Principles and Recommendations for a Vital Statistics System, Revision 3. New York: United Nations

[2] United Nations. (1989). Convention on the Rights of the Child. New York: United Nations Treaty Collection.

[3] Republic of Côte d'Ivoire. (2018). Loi No. 2018-862 du 19 novembre 2018 relative à l'état civil; Loi No. 2018-863. Abidjan: Journal Officiel

[4] UNHCR. (2020). Guidelines on Statelessness No. 4: Ensuring Every Child's Right to Acquire a Nationality. Geneva: UNHCR

[5] UNICEF. (2019). Birth Registration for Every Child by 2030: Are We on Track? New York: UNICEF

ANNEX 3B

QUICK REFERENCE GUIDE: BIRTH REGISTRATION

Purpose of this Annex

This Annex provides the operational reference guide for marriage registration, corresponding to Section 3.4 of Chapter 3. It covers civil, customary, and religious marriages; prospective and retrospective registration; property regimes; and special cases.

Marriage registration is among the most neglected vital events in West Africa. Fewer than 30 per cent of marriages are officially registered in most WCARO countries, leaving the majority of women and children without the legal protections that registration provides.

Source: Dincu, I. (2025). The Invisible Majority: Marriage and Divorce Registration in West and Central Africa. UNFPA WCARO [2].

B.1 Who Can Register a Marriage

Eligible Declarants

- *Both spouses together—preferred method.*
- *Either spouse independently—CRITICAL for women's access. A woman must be able to register a marriage without her husband's presence or cooperation.*
- *The surviving spouse, for retrospective registration where the partner has since died.*
- *The marriage officer, for civil marriages conducted at the registration office.*

Source: UNSD Principles and Recommendations, Revision 3 (2014) [1]; UNFPA WCARO (2024) [2].

B.2 Legal Requirements for Marriage

- **Age:** Both parties must be of legal marriage age (minimum 18 years; verify under national law).
- **Consent:** Both parties must consent freely—no forced, coerced, or child marriage.
- **Status:** Neither party can be currently married (unless polygamy is legally permitted and properly authorised).
- **Consanguinity:** Parties cannot be closely related (consanguinity restrictions vary by country).

Marriage Registration as Child Marriage Prevention

Publication of marriage banns (the 30-day period during which a proposed marriage is publicly posted) provides a critical window for communities, social workers, and family members to raise objections to underage marriages. Registrars are obliged to verify age documentation before proceeding. If a party appears to be a minor, the registrar must suspend the procedure and notify the supervisory authority.

Source: IPU/UNICEF, Ending Child Marriage: A Guide for Parliamentarians (2023) [4].

B.3 Types of Marriage and Registration Process

Marriage Type	Registration Process
Civil marriage	Performed before the civil registrar. Automatically recorded at the time of ceremony. Certificate issued immediately or within three working days.
Religious marriage (nikah, church wedding, etc.)	NOT automatically registered. Requires separate declaration and transcription at the civil registration office. Religious certificate alone is not legal registration.
Customary/traditional marriage	NOT automatically registered. Must be registered with civil authorities for legal recognition. Requires attestation from traditional authority plus witnesses.
Polygamous marriage (where legally permitted)	Each marriage registered separately. Requires court authorisation before subsequent marriages. Property rights protected for all spouses.

B.4 Step-by-Step: Civil Marriage Registration

Step 1: Publication of Banns (30 days before ceremony)

The registrar posts the notice of intended marriage publicly at the registration office for 30 days. This period allows any person to raise a legal objection (existing marriage, age, consanguinity).

Step 2: Document Verification

At the time of registration, the registrar verifies: both parties' birth certificates or national ID (to confirm age); certificate of celibacy or proof that any prior marriage has ended; medical certificates (where required by national law).

Step 3: Marriage Ceremony Before the Registrar

Both parties appear before the registrar with at least two witnesses. The registrar reads the relevant provisions of the civil code and confirms the parties' free consent. Each party declares: 'I consent to take [name] as my lawful spouse.'

Step 4: Choice of Property Regime

Before or at the time of registration, the parties must declare their chosen property regime:

- Community of property: all property acquired during marriage is jointly owned.
- Separation of property: each spouse retains individual ownership of their assets.
- Participation in acquisitions: hybrid system; assets acquired during marriage are shared equally upon dissolution.

Step 5: Signing and Registration

The register entry is signed by both spouses, both witnesses, and the registrar. The registrar enters the marriage into the official marriage register with a sequential entry number.

Step 6: Certificate Issuance

The marriage certificate is issued on security paper. A family record book (livret de famille) is issued where this exists in the national system. The original entry in the register is the authoritative record.

B.5 Step-by-Step: Customary and Religious Marriage Registration (Transcription)

The transcription procedure allows customary and religious marriages to be incorporated into the civil register. In countries that have adopted this procedure, either spouse may declare the marriage to the registrar without requiring a court order, provided sufficient evidence is presented [1].

Step 1: Declaration by Either Spouse

Either spouse presents to the civil registration office and declares that a customary or religious marriage has been contracted. No requirement for both spouses to be present.

Step 2: Submission of Evidence

Evidence may include:

- Attestation from traditional chief, religious leader, or elders confirming that the ceremony was conducted according to custom.

- Written statements from two or more witnesses who attended the ceremony.
- Evidence of bride price payment or exchange of gifts, where customarily applicable.
- Photographs, invitations, or any contemporaneous documentation.

Step 3: Investigation and Verification

The registrar may investigate—including by contacting the traditional or religious authority—before recording the marriage. The original date of the ceremony (not the transcription date) is preserved as the date of marriage.

Step 4: Publication (where required)

A 15-day objection period may be required before transcription. This period may be shortened or omitted in cases of documented vulnerability.

Step 5: Transcription and Certificate

The registrar records the marriage in the civil register with the original ceremony date. The marriage certificate is issued, noting the type of marriage (customary/religious).

B.6 Retrospective Registration of Long-Standing Marriages

Many couples in the WCARO region have been married for decades without ever registering their union. Retrospective registration allows these marriages to be formally recorded, protecting the property rights of wives, the inheritance rights of children, and access to survivor benefits [5].

Country Example—Guinea 2023: Retrospective Registration

Guinea's Laws L/2023-0019/CNT and L/2023-0020/CNT explicitly allow retrospective registration of marriages contracted under customary law, even decades earlier. Traditional authority attestations and witness statements are explicitly accepted as sufficient evidence. Women may register independently without their husband's cooperation. The law also protects the original marriage date, so the legal marriage is deemed to have existed from the date of the ceremony—not the date of registration.

Source: Republic of Guinea, Laws L/2023-0019/CNT and L/2023-0020/CNT (2023) [3].

Evidence Accepted for Retrospective Registration	Notes
Attestation from traditional or religious authority	The most important document; should be on letterhead or signed with official seal where available.

Written statements from two or more witnesses	Preferably people who attended the original ceremony. Must declare date, place, and nature of the ceremony.
Children's birth certificates naming both parents	Establishes the couple's long-standing relationship and shared household.
Joint property documents, bank accounts, or utility bills	Establishes shared household and economic unit.
Photographs or videos of the ceremony	Not required but very useful corroborating evidence.
Spouse's identity documents showing shared address	Supports evidence of cohabitation.

B.7 Costs and Fee Waivers

Registration Type	Recommended Fee
Civil marriage—within free period	Free or minimal administrative fee (equivalent of USD 1–5).
Customary/religious transcription	Small fee (USD 2–5 equivalent). Should be waived for poor families.
Retrospective registration	Fee should be modest and waivable for indigent applicants.
Certified copy of marriage certificate	USD 2–10 per copy.

B.8 Legal Protections Provided by Marriage Registration

- Women's property and inheritance rights: a registered marriage protects a wife's right to marital property and to inherit upon the husband's death.
- Children's legitimacy and inheritance rights: marriage registration establishes the legal status of children born of the union.
- Prevention of abandonment: a registered marriage prevents a spouse from simply disappearing without legal consequence.
- Access to survivor benefits: pension, insurance, and social protection schemes routinely require a marriage certificate.
- Child marriage prevention: the registration requirement enforces the minimum age, with the publication of banns providing an additional safeguard.

B.9 Common Problems and Recommended Responses

Problem	Recommended Response

No identity documents	Accept alternative identification: community leader attestation, witnesses, biometric ID where available.
Husband refuses to register customary marriage	Wife can initiate registration alone; bring witnesses and traditional authority attestation; explain situation to registrar. Registration proceeds on the woman's declaration.
Marriage performed long ago, no records	Gather witness statements, religious or traditional authority confirmation, any available evidence. Retrospective procedure applies.
Marriage obtained abroad	Obtain a certified copy of the foreign marriage certificate; submit for registration with the national civil registration office.
Cannot afford registration fee	Apply for fee waiver; wait for free mass registration campaign; approach social welfare office.

ALL MARRIAGE TYPES DESERVE EQUAL LEGAL RECOGNITION

- Civil, customary, and religious marriages all have equal legal standing once registered.
- A woman's right to register her marriage independently must not be challenged by any registrar.
- Polygamous marriages must be registered individually—each spouse receives her own marriage certificate.

Endnotes

[1] United Nations Statistics Division (UNSD). (2014). Principles and Recommendations for a Vital Statistics System, Revision 3. New York: United Nations.

[2] Dincu, I. (2025). The Invisible Majority: Marriage and Divorce Registration in West and Central Africa. Dakar: UNFPA WCARO (internal document).

[3] Republic of Guinea. (2023). Loi L/2023-0019/CNT portant Code de l'état civil; Loi L/2023-0020/CNT portant Code du mariage. Conakry: Assemblée Nationale.

[4] Inter-Parliamentary Union and UNICEF. (2023). Ending Child Marriage: A Guide for Parliamentarians. Geneva/New York: IPU/UNICEF

[5] UN Women. (2019). Progress of the World's Women 2019–2020: Families in a Changing World. New York: UN Women

ANNEX 3C

QUICK REFERENCE GUIDE: DIVORCE REGISTRATION

Purpose of this Annex

This Annex provides the operational reference guide for divorce registration, corresponding to Section 3.5 of Chapter 3. It covers court divorces, customary and religious divorces, retrospective registration, and the protection of women's rights.

Divorce is the most neglected vital event in the WCARO region. Fewer than 2 per cent of divorces are officially registered in most countries. The consequences fall disproportionately on women, who are left in legal limbo—unable to prove their marital status, remarry, or access social benefits.

Source: Dincu, I. (2025). The Invisible Majority: Marriage and Divorce Registration in West and Central Africa. UNFPA WCARO [2]; UN Women (2019) [3].

What Is Divorce Registration?

Divorce registration is the official recording of the legal termination of a marriage in the civil register. It is SEPARATE from obtaining a divorce decree from a court or traditional/religious authority.

Two steps are required: (1) obtain the divorce decree or equivalent decision; (2) register the divorce with civil registration authorities.

Without registration: there is no official proof of divorced status; legal remarriage is impossible; property and custody arrangements lack legal force; and statistical records are incomplete.

Source: UNSD Principles and Recommendations, Revision 3 (2014) [1]; UNFPA WCARO (2024) [2].

C.1 Who Must Register a Divorce

- Either former spouse, independently—no cooperation from the other party is required.
- Both former spouses together, if possible (preferred for contested cases).
- Legal representative with power of attorney.

CRITICAL: Women's Independent Registration Right

A woman must be able to register a divorce without her former husband's participation or consent. The registrar assesses evidence that a divorce has occurred—the registrar does NOT require bilateral agreement. Where evidence is sufficient, registration proceeds regardless of the other party's cooperation or objection.

Where a woman indicates a domestic violence context: fast-track the process; omit publication; coordinate with police or social services for protection. Divorce registration must be free of charge for women.

Source: UN Women, Progress of the World's Women 2019–2020 (2019) [3]; UNFPA WCARO (2024) [2].

C.2 Types of Divorce and Registration Process

Divorce Type	Registration Process
Court divorce (civil or family court)	Court grants divorce → mandatory notification to civil registrar within 15 days → registrar records and issues certificates automatically.
Customary divorce (traditional authorities)	Traditional divorce decision → either spouse declares to registrar → traditional authority attestation + witnesses → registrar verifies and records.
Islamic divorce (talaq, khul, etc.)	Sharia court or imam decision → either spouse declares to registrar → imam attestation + witnesses → registrar records.
Christian separation or annulment	Church documentation + court recognition (where required) → declaration to registrar → registrar verifies and records.
Mutual consent divorce	Both parties agree, court issues decree → automatic notification to registrar → registration proceeds.

C.3 Step-by-Step: Court Divorce Registration

Step 1: File Petition in Court

Either spouse files a divorce petition with the competent civil or family court (grounds vary by national law: mutual consent, irreconcilable differences, adultery, abandonment, cruelty, etc.).

Step 2: Court Hearing and Decree

The court holds hearing(s), addresses custody, child support, and property division, and issues the divorce decree. The decree includes all relevant determinations.

Step 3: Automatic Court Notification to Civil Registrar (mandatory within 15 days)

This step is MANDATORY: the court is legally required to notify the civil registration office of the divorce decree within 15 days of it becoming final.

Note: In practice, this notification frequently fails. Registrars and court clerks must be trained on this obligation. Where courts do not notify the divorce automatically, either spouse should bring the decree directly to the registrar.

Step 4: Registrar Records Divorce

The registrar records the divorce in the divorce register (or makes a marginal note in the marriage register). The original marriage certificate entry is annotated to reflect the dissolution.

Step 5: Certificate Issuance

Divorce certificates are issued to BOTH former spouses simultaneously—both are entitled to receive evidence of the divorce without delay or cost.

C.4 Step-by-Step: Customary and Religious Divorce Registration

Step 1: Either Spouse Declares Divorce to the Registrar

Either the husband or the wife presents to the civil registration office and declares that a customary or religious divorce has been decided. No requirement for both parties to be present.

Step 2: Submission of Evidence

Evidence required:

- Written attestation from the traditional chief, religious leader, or council of elders that a divorce was decided under customary or religious law.
- Statements from at least two witnesses who were present at the divorce proceedings.
- Evidence of separation (separate residence, division of property, etc.) where available.

Step 3: Verification

The registrar verifies that the divorce was conducted in accordance with the applicable customary or religious procedures. The registrar may contact the traditional or religious authority directly to confirm this.

CRITICAL: Registration proceeds even if the other party disputes it, provided sufficient evidence exists. The registrar does not adjudicate the dispute—that is a matter for the courts.

Step 4: Publication (may be omitted in urgent cases)

A 15-day objection period may be required. This period may be omitted where the woman is in a situation of domestic violence or danger.

Step 5: Registration and Certificate Issuance

The registrar records the divorce and issues divorce certificates to both parties. The date of the original divorce decision (not the registration date) is recorded as the date of divorce.

C.5 Retrospective Registration of Historical Divorces

Many divorced persons need to prove their status years or even decades after the divorce occurred. Retrospective registration allows historical divorces to be officially recorded on the basis of available evidence [2].

Evidence Accepted for Retrospective Registration	Notes
Original divorce decree or certified copy from court	Best evidence; obtain from court archives.
Traditional or religious authority attestation of divorce decision	Confirms date and nature of traditional/religious divorce.
Witness statements from persons present at the divorce proceedings	At least two witnesses, with ID and contact details.
Proof of remarriage (own or former spouse's)	Establishes that both parties treated the original marriage as ended.
Children's records or other documents referring to 'former husband/wife'	Corroborating evidence.

C.6 What Each Party Receives

Divorce Certificate Contents

- *Full names of both former spouses.*
- *Date and place of the original marriage and marriage certificate reference number.*
- *Date of divorce decree and the authority that granted it (court, traditional council, religious authority).*
- *Date of registration.*
- *Registration number and official registrar's signature and seal.*
- *Custody and child support arrangements (if included in the decree and if the country's certificate format allows).*

Source: UNSD Principles and Recommendations, Revision 3 (2014) [1].

Uses of the Divorce Certificate

- Proof of current marital status (single/divorced)—required for remarriage.
- Property transactions and division of marital assets.
- Changing name back to maiden name (where applicable).

- Legal proceedings related to the divorce (custody, support enforcement).
- Immigration and visa applications (proof of single status).
- Access to social services and benefits.

C.7 Special Protections for Women

Women's Rights in Divorce Registration:

- Women can register a divorce WITHOUT their former husband's consent or participation.
- If there is a risk of violence or abuse: fast-track the registration; omit the publication period; coordinate with police or protection services.
- Divorce registration must be COMPLETELY FREE for women.
- Free legal aid must be available for women who need assistance.
- The registrar cannot require the husband's approval or physical presence for the wife to register the divorce.
- The registrar cannot refuse to process a registration on the grounds that the husband disputes the divorce—disputed cases are referred to the courts, not blocked by the registrar.

C.8 Common Problems and Recommended Responses

Problem	Recommended Response
The marriage was never registered	Register the marriage first, then the divorce. Some jurisdictions allow simultaneous registration of both the marriage and the divorce.
The former spouse cannot be located	Either party registers alone with the available evidence; a court order can confirm due diligence in attempting notification.
Spouse refuses to cooperate	Either party registers alone with the divorce decree. No cooperation from the other party is required.
Lost divorce decree	Obtain certified copy from the court or traditional/religious authority that granted the divorce.
Customary divorce not recognised by national law	Seek court validation of the traditional divorce; may need to go through a formal civil court divorce process.
Divorce obtained abroad	Obtain court recognition in home country; submit the foreign decree for registration with validation from the competent authority.

C.9 Costs

Registration Type	Recommended Fee

Court divorce registration (automatic)	Free (court and registrar process automatically).
Customary/religious divorce declaration	Free or minimal (USD 0.50–1.00 equivalent).
Retrospective divorce registration	Small fee, fully waived for indigent persons.
Divorce certificate—for women	COMPLETELY FREE.
Certified copy of divorce certificate	USD 2–5 per copy.

NO ONE SHOULD BE TRAPPED IN LEGAL LIMBO

Every person who has undergone a divorce—whether through a court, customary, or religious procedure—has the right to have that divorce officially recorded. The absence of a registered divorce leaves people, and particularly women, in a state of legal uncertainty that affects every aspect of their lives: their ability to remarry, their access to property, their children's inheritance rights, and their freedom to move forward.

Source: UN Women, Progress of the World's Women 2019–2020 (2019) [3]; UNFPA WCARO (2024) [2].

Endnotes

[1] United Nations Statistics Division (UNSD). (2014). Principles and Recommendations for a Vital Statistics System, Revision 3. New York: United Nations.

[2] Dincu, I. (2025). The Invisible Majority: Marriage and Divorce Registration in West and Central Africa. Dakar: UNFPA WCARO (internal document).

[3] UN Women. (2019). Progress of the World's Women 2019–2020: Families in a Changing World. New York: UN Women

ANNEX 3D

QUICK REFERENCE GUIDE: DEATH REGISTRATION

Purpose of this Annex

This Annex provides the operational reference guide for death registration, corresponding to Section 3.6 of Chapter 3. It covers facility and community deaths, verbal autopsy, burial authorisation, cause of death certification, and special scenarios.

Death registration serves two equally important purposes: it protects the rights of the surviving family (estate, pensions, remarriage) and it provides the data needed to track causes of death for public health surveillance and policy.

Source: WHO and University of Queensland, Improving the Quality and Use of Birth, Death and Cause-of-Death Information (2010) [2]; UNSD Handbook on CRVS, Revision 1 (2021) [5].

D.1 Who Must Register a Death

Primary Declarants (in order of priority)

1. Nearest relative present at death or residing at the place of death.
2. Any other relative present.
3. Person in charge of the household where the death occurred.
4. Person who found the body.
5. Institution (hospital, prison, nursing home) where the death occurred.
6. Traditional or religious authority who presided over burial arrangements.

Source: UNSD Principles and Recommendations, Revision 3 (2014) [1].

D.2 Time Limits

Type of Death	Time Limit for Registration
Facility death (hospital, health centre)	Notify registrar within 24–72 hours. Burial authorisation must be obtained before burial proceeds.
Community/home death	Register within 30–90 days (varies by country). Burial authorisation issued on same-day basis where possible.
Suspicious or violent death	Police investigation first. Registration after investigation is complete (1–2 weeks).
Late registration	Permitted with small fee; investigation more extensive for retrospective cases.

Burial Authorisation and Registration—Practical Note

In many WCARO communities, particularly Islamic communities, burials must occur within 24 hours for religious reasons. In hot climates without morgue facilities, rapid burial is a practical necessity. Burial authorisation must therefore be granted rapidly—on the same day where possible. Formal registration may follow post-burial, provided a death notification has been submitted.

Registrars must be trained to issue burial authorisation quickly, even if full registration cannot be completed immediately. The two processes—authorisation and registration—should be separated where necessary to avoid delaying burials.

Source: UNSD Handbook on CRVS, Revision 1 (2021) [5]; UNFPA WCARO Synthesis Report (2023) [4].

D.3 Information Required for Registration

The deceased's information

- Full name (as on birth certificate or national ID card).
- Sex; date of birth or age; marital status; nationality; usual residence address; occupation.

Death details

- Date, time, and place of death.
- Cause of death (medical cause).
- Manner of death (natural, accident, suicide, homicide, undetermined).

Informant information

- Name, relationship to deceased, address, contact details, and signature.

D.4 Cause of Death Determination

Place of Death	Method of Determining Cause
Hospital or health facility	Physician completes a Medical Certificate of Cause of Death (MCCD) using ICD-10/ICD-11 coding: immediate cause → underlying cause → contributing conditions.
Home or community (with health worker involvement)	Community health worker conducts a verbal autopsy (VA): a structured interview with family about symptoms and circumstances → algorithm assigns probable cause.
Suspicious, accidental, or violent death	Mandatory police investigation, forensic examination, autopsy if needed, coroner or medical examiner determination. Registration proceeds only after investigation is complete.

The Medical Certificate of Cause of Death (MCCD)

The MCCD is the international standard document for certifying cause of death in facility settings. It uses ICD-11 coding and records: Part I—the causal chain (immediate cause, intermediate cause, underlying cause); Part II—other significant conditions contributing to death.

The MCCD is completed by the attending physician. Where no physician was present, a trained paramedic or medical officer can complete the certificate. The MCCD is confidential health information and its cause-of-death data must not appear on the standard family death certificate.

Source: WHO and University of Queensland, Improving the Quality and Use of Birth, Death and Cause-of-Death Information (2010) [2].

D.5 Verbal Autopsy for Community Deaths

An estimated 75–80 per cent of deaths in West and Central Africa occur outside health facilities, without medical attendance [4]. A verbal autopsy (VA) is the standard method for determining the cause of death in community settings.

Step 1: VA Interview (within 30 days of death)

A trained community health worker conducts a structured interview with a family member or close associate who was present at or around the time of death.

The WHO standard VA questionnaire (2016) is used, covering: symptoms; duration and progression of illness; circumstances of death; any known medical history.

Step 2: Cause Assignment

The completed VA questionnaire is processed using one of two methods:

- Physician-certified verbal autopsy (PCVA): a physician reviews the VA questionnaire and assigns a probable cause.
- Computer-coded verbal autopsy (CCVA): the questionnaire responses are entered into a validated software tool (e.g. SmartVA-Analyze) that assigns a probabilistic cause.

Step 3: Notification

The CHW completes a death notification form including the probable cause from the VA and submits it to the civil registration office.

Step 4: Registration

The registrar enters the death into the civil register, recording the probable cause of death as determined by the VA. The cause is flagged as a ‘verbal autopsy’ in the register entry.

Verbal Autopsy—Key Principle

A verbal autopsy does not provide a definitive medical diagnosis. It provides a probable cause of death for statistical purposes. The information is used for public health surveillance and should never be used against the family in legal or insurance proceedings. The confidentiality of VA data is paramount.

Source: WHO Verbal Autopsy Standards: Ascertaining and Attributing Causes of Death (2016) [3].

D.6 Special Scenarios

Maternal Deaths

All deaths of women of reproductive age (15–49) must be flagged during registration for a potential Maternal Death Surveillance and Response (MDSR) review. Where a maternal death is suspected, the registrar notifies the health authorities immediately. Maternal death data is among the most critical information for CRVS systems, as it directly informs policies on emergency obstetric care and skilled birth attendance [2].

Stillbirths

- Must be registered if the pregnancy was 28 weeks or more.
- Registered as a stillbirth—separate from birth and death registers in most systems.
- Critical for maternal health statistics.

Deaths in Custody or Detention

- Mandatory police report required.
- Independent verification of cause of death required.
- Family must be notified immediately.

Deaths During Displacement or Migration

- Register at the place where the death occurred.
- Notify UNHCR or IOM if the deceased was a refugee or migrant.
- Notify home country's consulate or embassy.

Mass Casualty Events

Procedure for Mass Casualties (Disasters, Epidemics, Armed Conflict)

Emergency registration procedures are activated: simplified documentation requirements; rapid burial permits issued collectively; identification teams deployed; temporary registration by field units authorised. Individual registration must be completed as soon as possible after the emergency phase.

Even in mass casualty situations, the legal obligation to register each death individually remains. Simplified procedures are a temporary measure, not a permanent exemption.

Source: UNSD Handbook on CRVS, Revision 1 (2021) [5].

Missing Persons Presumed Dead

- A court declaration of death is required after the specified period under national law (typically 5–10 years of absence).
- Registration proceeds on the basis of a court order.

D.7 What the Family Receives

1. Burial/Cremation Permit

- Issued immediately after the death notification is submitted.
- Required before burial proceeds.
- Valid for a limited period (usually 3–7 days).

2. Death Certificate

Death Certificate Contents—Standard Family Copy

- *Deceased's full name, age, sex, marital status, nationality.*
- *Date, time, and place of death.*
- *Place of burial or cremation.*
- *Registration number and date.*
- *Registrar's signature and official seal.*

NOTE: The standard family death certificate does NOT include the cause of death. Cause of death information is confidential and used only for health statistics. A medical death certificate (with the cause of death) is issued separately to authorised parties.

Source: UNSD Principles and Recommendations, Revision 3 (2014) [1]; WHO (2021) [2].

Uses of the Death Certificate

- Settling estate and inheritance distribution.
- Accessing survivor pensions, insurance, and social benefits.
- Closing bank accounts and transferring property.
- Proof of widowhood (enabling remarriage).
- Cancelling government services (national ID, voter registration) to prevent identity fraud.

D.8 Common Problems and Recommended Responses

Problem	Recommended Response
No physician available to certify cause of death	Use verbal autopsy procedure. Trained CHW conducts VA interview. Probable cause recorded in register as 'VA-assigned'.
Rapid burial required (religious/cultural)	Issue burial permit immediately on death notification; formal registration may follow within 30 days.
Death occurred away from home	Register at the place of death. Notify home district for parallel record.
Suspected violent or non-natural death	Immediately notify police. Do not issue burial permit until police clear the case.
Deceased had no identity documents	Register with descriptive information (age, sex, physical description, place and date of death). Assign an unidentified person registration number.
Family refuses to register (for cultural/religious reasons)	Explain legal requirement and importance. Involve trusted community or religious leader. Registration of death does not interfere with religious burial practices.

D.9 Costs

- Death registration: FREE or minimal fee in most countries.
- Burial permit: FREE or small administrative fee; waived for poor families.
- Death certificate copy: USD 2–10 per copy.

Endnotes

[1] United Nations Statistics Division (UNSD). (2014). Principles and Recommendations for a Vital Statistics System, Revision 3. New York: United Nations.

[2] World Health Organisation. (2021). Improving Quality and Use of Birth, Death and Cause-of-Death Information: Guidance for Civil Registration and Vital Statistics. Geneva: WHO

[3] World Health Organisation. (2016). WHO Verbal Autopsy Standards: Ascertaining and Attributing Causes of Death. Geneva: WHO

[4] UNFPA WCARO. (2023). Country Assessment of Civil Registration and Vital Statistics Systems in West and Central Africa: Synthesis Report. Dakar: UNFPA (internal working document).

[5] UNSD. (2021). Handbook on Civil Registration and Vital Statistics Systems: Management, Operation and Maintenance, Revision 1. New York: UNSD

ANNEX 3E

QUICK REFERENCE GUIDE: CIVIL REGISTRATION REGISTERS

The Key Distinction: Register vs. Certificate

Certificate = certified copy issued to the individual.

Register = the original, authoritative permanent record maintained by the government in perpetuity.

The register is the source of truth. All certificates are derived from it. Protecting the register protects the rights of millions of people for generations to come.

Source: UNSD Handbook on Civil Registration and Vital Statistics Systems, Revision 1 (2021) [1].

E.1 Types of Registers

- Birth Register—records all births.
- Marriage Register—records all marriages.
- Divorce Register—records all divorces.
- Death Register—records all deaths.

Each type is maintained separately in its own register book, with specific data fields and sequential entry numbers. In digital systems, each type constitutes a separate logical register module, even if stored in a unified database [4].

E.2 Physical Standards for Register Books

Minimum Physical Standards

Paper: acid-free archival paper, minimum 100 GSM, resistant to ageing and yellowing, capable of lasting a minimum of 100 years under proper storage.

Binding: SEWN binding (never glued), reinforced spine, hard covers with cloth or leather facing, opens flat without damaging spine.

Size: standard A3 (297 mm × 420 mm) for all register types, providing adequate space for required data fields.

Page numbering: pre-printed sequential page numbers (cannot be removed or altered; must be printed, not handwritten).

Security features: watermarked paper with government emblem; unique serial number for each register book; official stamp embossed on first and last pages.

Source: ISO 11798: Permanence and Durability of Writing, Printing and Copying on Paper (1999, confirmed in force) [3]; UNSD Handbook on CRVS, Revision 1 (2021) [1].

E.3 Writing Standards—CRITICAL

Mandatory: Use Only Permanent, Indelible Ink

ALL entries MUST be made with permanent, indelible ink meeting archival quality standards (ISO 14145-2).

Approved: blue-black or black permanent ink, resistant to fading, water, and chemical solvents.; fountain pens with permanent ink; permanent markers designed for archival documents; gel pens with archival-quality ink.

PROHIBITED: ballpoint pens with temporary ink; pencils or erasable pens; felt-tip markers with non-permanent ink; any instrument that can be erased or washed away.

Source: ISO 11798 (1999) [3]; UNSD Handbook on CRVS, Revision 1 (2021) [1].

Writing Guidelines

- Legibility: all entries must be clearly legible; use block letters if handwriting is poor.
- Completeness: ALL data fields must be completed; if information is unknown, write ‘Unknown’—do NOT leave blank (blank spaces can be filled fraudulently later).

- No erasures: NEVER erase or use correction fluid or tape. Errors are corrected by: single-line strikethrough, followed by registrar's initials and date. The original entry must remain visible.
- Language: use the official language of registration. For names in other scripts, use the standard national transliteration.

E.4 Daily Maintenance Procedures

Frequency	Registrar's Obligations
End of each working day	Review all entries for completeness and accuracy. Count the number of registrations. Sign and date the last entry of the day. Record daily total in logbook. Store registers in secure, locked cabinet.
Weekly (supervisor)	Audit sample of entries (10–20%) for quality. Check corrections follow procedures. Verify no pages removed or damaged. Ensure all security seals intact. Review any irregularities.
Monthly	Compile statistics from registers (total by event type, sex, age, location). Submit data to national statistical office. Reconcile entries with certificates issued. Report irregularities.

E.5 Physical Security and Storage

Environmental Storage Requirements

Temperature: 18–22°C constant (±2°C variation). Relative humidity: 30–50% constant. Lighting: no direct sunlight; no fluorescent lights (UV damage). Air quality: filtered, dust-free. Ventilation: good circulation, no condensation.

Storage equipment: fireproof cabinets or safes for active registers; acid-free archival boxes for archived registers; off-ground storage (flood protection); stable, non-combustible shelving.

Source: International Council on Archives, Principles and Functional Requirements (2016) [2].

Access Control

- Only designated registration officers and their supervisors may access registers.
- Access log: record each time a register is removed from its cabinet (date, time, person, purpose, return time).
- Registers must never leave the registration office without a signed transfer receipt and two-official escorts.

E.6 Archiving Full Registers

Step	Procedure
Step 1: Certification (same day register is full)	Registrar signs and dates final page; notes total entries; affixes official seal; records in master logbook.
Step 2: Inventory (within 7 days)	Create detailed inventory: register serial number, date range, total entries, any irregularities. Approved by supervisor.
Step 3: Digitisation (within 30 days—if capacity exists)	Scan every page at minimum 300 DPI. Create digital backup in multiple locations. Verify scans are complete and legible.
Step 4: Transfer to National Archive (within 30 days)	Prepare formal transfer document. Transport in secure, waterproof container. Two officials in escort. Archives staff signs receipt. Original office retains inventory copy.

E.7 Damaged, Destroyed, and Reconstituted Registers

Procedure When Registers Are Damaged

Step 1: Assess extent of damage immediately. Photograph damage for records.

Step 2: If entries remain legible, continue use with special care and supervisor notation.

Step 3: If severely damaged, initiate conservation procedures: remove from circulation; consult archives authority; consider professional conservation treatment.

Step 4: Reconstitution—where registers are destroyed: cross-reference with health facility records, certificate copies held by families, statistical returns, and any digital backups. Court order may be required for formal reconstitution.

Source: ICA, Principles and Functional Requirements (2016) [2]; UNSD Handbook on CRVS, Revision 1 (2021) [1].

E.8 Transition to Digital Systems

Phase	Description
Phase 1—Parallel Systems	Maintain both paper and digital systems simultaneously. Digital entry with automatic print to paper register. Double security: technology failure does not result in data loss.
Phase 2—Digital Primary, Paper Backup	Digital system is the primary record. Periodic printing to paper register. Paper serves as legal authority and backup.
Phase 3—Fully Digital (future)	Digital registers are legal records. Blockchain or tamper-proof systems. Paper archives retained for historical registers only.

Critical: Even fully digital systems need physical backup procedures and disaster recovery plans. A power outage or system failure must never result in the loss of vital records.

E.9 Regional Harmonisation

ECOWAS Standards for Register Harmonisation

Standardised format: all member states should use identical register data fields in the same order, facilitating cross-border verification and regional data sharing.

Common security features: harmonised watermarks and serial numbers prevent fraud across borders and simplify verification by partner states.

Joint procurement: bulk regional purchase of register books reduces costs and ensures uniform quality standards.

Mutual recognition: registers from all member states are accepted region-wide, supporting free movement protocols.

Source: UNSD Handbook on CRVS, Revision 1 (2021) [1].

E.10 Training Checklist for New Registrars—Registers

Before independently handling civil registers, a new registrar must:

- Understand the legal importance of civil registers as the original permanent record.
- Know the approved writing instruments and inks (permanent, indelible, archival quality).
- Know the correction procedure (single-line strikethrough with initials and date—never erasure).
- Know the proper storage requirements (fireproof cabinet, temperature, humidity, access log).
- Know the archiving procedure when a register is full (certification, inventory, digitisation, transfer).
- Know how to handle damaged registers and when to escalate to the archives authority.
- Have completed at least five supervised register entries before working independently.
- Be able to compile the monthly statistics return from register entries.

Key Reminders for Every Registrar:

- Use only permanent, indelible ink—black or blue-black.
- Never leave blank spaces—write ‘Unknown’ if information is unavailable.
- No erasures—strikethrough and initial any corrections.
- Store registers in fireproof, locked cabinets at the end of every working day.
- Maintain proper temperature and humidity in storage areas.
- Archive full registers within 30 days.
- Maintain access log for all register use.
- Report irregularities and attempted fraud immediately to the supervisory authority.

Endnotes

[1] UNSD. (2021). Handbook on Civil Registration and Vital Statistics Systems: Management, Operation and Maintenance, Revision 1. New York: UNSD

[2] International Council on Archives. (2016). Principles and Functional Requirements for Records in Electronic Office Environments. Paris: ICA.

[3] International Organisation for Standardisation (ISO). (2023). ISO 11798: Permanence and Durability of Writing, Printing and Copying on Paper. Geneva: ISO

[4] United Nations Statistics Division (UNSD). (2014). Principles and Recommendations for a Vital Statistics System, Revision 3. New York: United Nations.

ANNEX 3F

QUICK REFERENCE GUIDE: CIVIL REGISTRATION CERTIFICATES

Definition and Key Distinction

A civil registration certificate is an official document issued by government authorities providing certified proof of a vital event recorded in the civil register.

Certificate = certified COPY issued to the individual. Register = the original authoritative record, maintained by government in perpetuity. The register is the source of truth. Any certificate can and should be verified against the original register entry.

Source: UNSD Principles and Recommendations, Revision 3 (2014) [1]; UNSD Handbook on CRVS, Revision 1 (2021) [2].

F.1 Types of Certificates

Certificate Type	What It Proves

Birth Certificate	Date and place of birth, parentage, citizenship eligibility.
Marriage Certificate	Legal marriage status, type of marriage, property regime.
Divorce Certificate	Legal termination of marriage, original marriage reference number.
Death Certificate (family copy)	Death, date, place, and burial location. Does NOT include cause of death.
Medical Death Certificate	Full cause of death using ICD-11 coding. Issued only to authorised parties.

F.2 Why Certificate Security Matters

Consequences of Weak Certificate Security

Individual: forged certificates enable identity theft; fake birth certificates facilitate child trafficking and illegal adoption; fraudulent death certificates used to steal inheritance; fake marriage certificates used for immigration fraud.

National: forged documents facilitate terrorism and illegal immigration; economic fraud carried out through fake certificates for bank and employment fraud; distortion of demographic data through fraudulent registrations; benefit fraud and waste of government resources.

Regional: criminals exploit weak certificate security across borders; non-uniform certificates undermine regional integration and free movement.

Source: ECOWAS Common Approach on Civil Registration (2019) [3]; ICAO Doc 9303 (2021) [4].

F.3 Essential Security Features

Physical Security Features

Feature	Description
Security paper	Watermarks visible when held to light; security threads embedded; chemical reactive (changes colour when tampered); unique texture; fluorescent fibres under UV light.
Microprinting	Tiny text impossible to photocopy or scan clearly; appears as a line to the naked eye but contains a readable phrase under magnification.
Guilloche patterns	Complex interlocking lines that cannot be accurately scanned or copied; unique mathematical pattern per certificate type.

Intaglio printing	Raised ink that can be felt by touch; requires specialised printing equipment.
Rainbow printing	Gradual colour transitions that are extremely difficult to reproduce accurately.
Holograms	Change appearance when viewed from different angles; include government emblems.
Optically variable ink	Changes colour when the document is tilted; used for serial numbers.
Sequential serial numbers	Pre-printed on security paper; linked to central database; allow verification.

Digital Security Features

Digital Security Elements

QR codes and 2D barcodes: contain encrypted registration data; link to online verification portal; real-time authentication; cannot be copied effectively.

Machine-Readable Zone (MRZ): standardised format compatible with border control scanners; contains encoded key data; OCR-readable for automated verification.

Digital signatures: cryptographic technology proving the document has not been altered since issuance; verifiable through online portal.

Blockchain integration (emerging): immutable, tamper-proof records; distributed verification; provides additional layer for long-term authentication.

Source: ICAO Doc 9303, 8th Edition (2021) [4]; ISO/IEC 27001 Information Security Management (2022) [5].

F.4 Certificate Content Standards—Required Data Fields

A Birth Certificate MUST include:

- Child’s full name.
- Sex.
- Date, time, and place of birth.
- Mother’s full name and nationality.
- Father’s full name and nationality (if acknowledged).
- Registration date, place, and registration number.
- Certificate serial number.
- Registrar’s signature and official seal.

A Marriage Certificate MUST include:

- Full names of both spouses.
- Date and place of marriage.
- Type of marriage (civil/religious/customary).
- Property regime selected.
- Registration date, place, and registration number.

- Certificate serial number.
- Registrar's signature and official seal.

A Divorce Certificate MUST include:

- Full names of former spouses.
- Marriage certificate reference number.
- Date and place of divorce decree.
- Authority that granted the divorce.
- Registration date, place, and registration number.
- Certificate serial number.
- Registrar's signature and official seal.

A Death Certificate (family copy) MUST include:

- Deceased's full name, age, sex, and marital status.
- Date, time, and place of death.
- Place of burial or cremation.
- Registration date, place, and registration number.
- Certificate serial number.
- Registrar's signature and official seal.

F.5 Certificate Uniformity Requirements

Why Uniformity Is Essential

Equal recognition: all citizens' certificates must be accepted equally regardless of region of issuance. Rural certificates are of the same legal weight and quality as urban ones.

Fraud prevention: officials can instantly recognise legitimate certificates; a uniform format makes forgeries obvious; reduces confusion exploited by criminals.

Interoperability: compatible with other government systems; can be scanned and validated electronically; integrated with ID systems, border control, health records.

Regional integration: certificates recognised across ECOWAS member states; supports free movement protocols.

Source: ECOWAS Common Approach on Civil Registration (2019) [3]; ICAO Doc 9303 (2021) [4].

Level	Requirements
National	Single certificate format for entire country. Same security features nationwide. Identical data fields. Same paper and printing quality. Centralised procurement of security paper.
Regional (ECOWAS)	Harmonised minimum standards across all member states. Mutual recognition framework. Comparable security features. Interoperable online verification systems.

F.6 Administrative Security

Controlled Distribution of Security Paper

- Security paper stored in secure, locked facilities.
- Issued to registration offices in controlled, accountable quantities.
- Regular audits of stock—each certificate accounted for from issuance to delivery.
- Any lost or damaged certificate stock must be reported and documented immediately.

Authorised Signatories

- Only designated officials may sign certificates.
- Digital signature devices secured by passwords or biometrics.
- Signature registers maintained and audited.
- Periodic rotation of signatory authority.

Central Database and Verification

- All certificates registered in the national database before issuance.
- Online verification portal accessible to authorised entities (banks, schools, border control).
- Real-time alerts for suspicious verification attempts (multiple requests for the same certificate).

F.7 Anti-Fraud Measures

At the Point of Issuance—Red Flags to Watch For:

Red Flags—Possible Fraudulent Registration or Certificate Request:

- Inconsistent information between supporting documents and the register entry.
- Pressure from the applicant to rush issuance or skip verification steps.
- Suspicious supporting documents (inconsistent fonts, wrong seals, implausible dates).
- Multiple requests for the same certificate in a short period.
- Request for a certificate shortly after registration, suggesting the registration itself may be fraudulent.
- Applicant nervous, evasive, or unwilling to provide standard information.

Response to Red Flags

- Verify information thoroughly against the original register entry.
- Consult the supervisor before proceeding.
- Check the central database for the registration record.
- Contact the person named on the certificate directly if possible.
- Report to the fraud prevention unit if suspicions are confirmed.

How to Verify a Certificate (For Officials at Banks, Schools, Borders)

Verification Step	How to Do It

Visual inspection	Check security paper (watermark, texture). Examine hologram. Look for microprinting. Check the serial number sequence. Verify signature and seal.
Online verification	Scan QR code or enter certificate number in online portal. Confirm data matches certificate. Check certificate has not been revoked.
Contact issuing office	Call the registration office. Provide certificate number. Confirm issuance and verify details.

F.8 Certificate Fees

Certificate Type/Situation	Recommended Fee
Original certificate—issued at time of registration	FREE or nominal fee (USD 1–3)—to encourage timely registration.
Certified copies	USD 2–10 per copy. Reasonable to cover administrative costs. Must not be a barrier to access.
Late registration	Small penalty (USD 5–15)—encourages compliance but does not exclude poor families.
Fee waivers	Extremely poor families; orphans and vulnerable children; mass registration campaigns; refugees and displaced persons.

F.9 Modernisation: Digital Certificates

Hybrid Approach—Recommended for WCARO Context

Digital issuance with paper backup: certificates issued digitally and simultaneously printed on security paper. The paper version remains the legal document; the digital version enables fast verification.

Online verification of paper certificates: QR codes on paper certificates link to the digital record in the national database, allowing any official to verify authenticity instantly.

Benefits: instant issuance; no forgery risk for QR-verified documents; always available; lower cost per issuance; environmentally lower footprint.

Challenges in WCARO context: technology infrastructure requirements; digital literacy; electricity and Internet access; legal framework updates needed to recognise digital certificates.

Source: Centre of Excellence for CRVS Systems, Digital CRVS Guidelines and Good Practices (2021) [7].

F.10 Fraud Reporting Procedure

- Do NOT return the suspected fraudulent certificate to the person presenting it.
- Ask the person to wait (or note their contact information if they leave).
- Contact the issuing registration office to verify the certificate.
- Report to supervisor and security authorities.
- Document all details of the incident (date, time, nature of suspicion, person's description).
- Preserve the certificate as evidence if possible.

Penalties for certificate fraud vary by country but typically include criminal prosecution, imprisonment, fines, revocation of other legitimate documents, and deportation in immigration fraud cases.

F.11 Issuance Checklist for Registration Officials

Before issuing any certificate, confirm:

- Register entry verified—data matches what will be printed on the certificate.
- Requester's identity confirmed.
- Requester's relationship to the person named on the certificate confirmed.
- Correct certificate stock used (appropriate format for event type).
- All required fields completed on the certificate.
- Serial number recorded in the certificate issuance register.
- Certificate registered in the national database before handover.
- Proper registrar's signature and official seal applied.
- Receipt provided to requester.

Endnotes

[1] United Nations Statistics Division (UNSD). (2014). Principles and Recommendations for a Vital Statistics System, Revision 3. New York: United Nations.

[2] UNSD. (2021). Handbook on Civil Registration and Vital Statistics Systems: Management, Operation and Maintenance, Revision 1. New York: UNSD

[3] ECOWAS Commission. (2019). ECOWAS Common Approach on Civil Registration. Abuja: ECOWAS Commission

[4] International Civil Aviation Organisation (ICAO). (2021). Doc 9303: Machine Readable Travel Documents, 8th Edition. Montreal: ICAO.

[5] ISO. (2022). ISO/IEC 27001: Information Security Management Systems—Requirements. Geneva: ISO.

[6] World Health Organisation. (2021). Improving Quality and Use of Birth, Death and Cause-of-Death Information. Geneva: WHO.

[7] Centre of Excellence for CRVS Systems. (2021). Digital CRVS: Guidelines and Good Practices. Ottawa: IDRC

ANNEX 3G

OPERATIONAL GUIDE: RECONSTITUTION OF CIVIL REGISTERS

Purpose of this Annex
This Annex provides the operational guide for the reconstitution of civil registers that have been lost, destroyed, or severely damaged. It corresponds to Section 3.7 of Chapter 3 and supplements the damage and archiving procedures in Annex 3E. Reconstitution is the process of reconstructing lost or destroyed civil register entries using secondary sources. It differs from correction (fixing an error in an existing record) and from late registration (registering an event that was never recorded). It is activated only when the original register entry no longer exists or is irrecoverable. *Sources: UNSD Handbook on CRVS, Revision 1 (2021) [1]; ICA, Principles and Functional Requirements (2016) [2].*

G.1 When Reconstitution Is Required

Reconstitution is required when a civil register or specific entries within it are lost, destroyed, or rendered permanently illegible and cannot be recovered through conservation. The most common triggers are:

Trigger	Circumstances Requiring Reconstitution
Armed conflict or civil unrest	Registration offices destroyed, burned, or looted. Registers removed and not recovered.
Natural disasters	Floods, fires, earthquakes destroy physical archives. Water damage renders entries illegible.
Administrative loss	Registers misplaced during transfer to national archives, office relocations, or system migrations.
Digital system failure	Complete data loss due to hardware failure, ransomware, or absence of backups—affecting digitised records with no paper backup.
Deliberate destruction	Registers destroyed to erase identity records of specific communities. Reconstitution may require judicial procedure and international coordination.

Annex 3E (Section E.7) covers the immediate response when registers are damaged but not yet destroyed. This Annex covers the next stage: full reconstitution when entries are permanently unrecoverable.

G.2 Legal Basis for Reconstitution

The reconstitution of civil registers has legal significance: it restores the evidentiary value of records that protect individual rights. Most national legal frameworks provide for register reconstitution, typically through one of two pathways:

Legal Pathway	Description and Applicability
Administrative reconstitution	The civil registration authority reconstitutes the register using secondary sources, under delegated authority from the Ministry of Justice or equivalent. Appropriate where sufficient secondary evidence exists and the extent of loss is bounded.
Judicial reconstitution	A court order is required before entries are reconstituted. Required in most countries for individual entries, particularly births and deaths. The court reviews evidence and issues an order that is then transmitted to the registrar.
Emergency reconstitution decree	In post-conflict or disaster contexts, governments may issue specific emergency legislation temporarily simplifying reconstitution procedures, accepting a wider range of evidence, and authorising administrative rather than judicial procedures.

Key Legal Principle: Reconstituted Entries Have Full Legal Force

A reconstituted register entry, once approved through the applicable legal procedure, carries the same evidentiary value as the original. Reconstituted birth certificates, marriage certificates, and death certificates must be accepted by all government services, courts, and institutions without discrimination.

Source: UNSD Handbook on CRVS, Revision 1 (2021) [1].

G.3 Evidence Sources for Reconstitution

Reconstitution relies on secondary evidence—documents and testimony that corroborate what the original register would have contained. Evidence must be assessed for reliability and independently verified wherever possible.

Evidence Source	Reliability and Notes
Duplicate register copies	HIGHEST RELIABILITY. Where registers were duplicated (as required under Section E.6), the duplicate at the national archive is the primary reconstitution source.
Statistical returns submitted to NSO	HIGH RELIABILITY. Monthly vital statistics returns contain aggregate data and, in some systems, individual-level data. Cross-reference with individual register entries.
Certificate copies held by families	HIGH RELIABILITY for individual entries. Families retain certificates issued at the time of registration. Certified copies can be used to reconstruct the corresponding register entry.
Health facility birth notifications	HIGH RELIABILITY for births. Health facilities retain their own copies of birth notification forms submitted to registration offices.
Hospital death records and MCCDs	HIGH RELIABILITY for deaths in facilities. Medical certificates of cause of death are retained by hospitals.

Court records (custody, inheritance, divorce)	MEDIUM-HIGH RELIABILITY. Court files frequently reference civil registration entries by number. Can corroborate entry details.
School enrollment records	MEDIUM RELIABILITY for births. Schools record birth certificate numbers at enrollment; these cross-references can confirm entries existed.
Identity card and passport records	MEDIUM RELIABILITY. National ID systems record birth certificate numbers; passport applications reference marriage certificates.
Community attestations and witness testimony	LOWER RELIABILITY but admissible, particularly in humanitarian contexts. Statements from traditional leaders, community health workers, and neighbours. Must be corroborated.
Photographs, family records, religious documents	LOWER RELIABILITY. Baptismal records, mosque registration books, family Bibles, and photographs with dates. Admissible as supporting evidence only.

G.4 Step-by-Step: Administrative Reconstitution

The following procedure applies where national law permits administrative reconstitution without a court order, or following a government emergency decree.

Step 1—Formal Assessment and Declaration of Loss

The head of the civil registration office (or the national civil registration authority) formally documents the loss:

- Precise scope of loss: which register types, which years, which registration districts.
- Cause of loss: armed conflict, natural disaster, administrative failure, deliberate destruction.
- Date of loss or discovery.
- Condition of remaining fragments (if any).

This declaration is signed by the head of office and countersigned by the supervisory authority. It serves as the authorisation for reconstitution proceedings to commence.

Step 2—Evidence Collection Campaign

The registration office launches a systematic evidence collection campaign:

- National archive: retrieve statistical returns and any duplicate register copies.
- Health facilities: collect copies of birth notification forms and MCCDs for the affected period.
- Hospitals and clinics: compile death records and MCCD copies.
- Courts: compile references to civil registration entries in case files.
- Schools and administrative services: compile enrollment records and identity document references.

- Community campaign: public announcement inviting families to present certificate copies and testimony within a defined period (minimum 60 days, extended in humanitarian contexts).

All evidence is catalogued, given a reference number, and stored securely.

Step 3—Evidence Verification and Cross-Referencing

Each item of evidence is independently verified:

- Certificate copies are checked against: health facility records, statistical returns, school records, ID records—any two independent sources corroborate the original entry.
- Community testimony is cross-referenced with at least one documentary source.
- Inconsistencies between sources are flagged for investigation and, where necessary, referred to the judicial procedure (Section G.5).

A reconstitution file is created for each entry, containing all supporting evidence and the verification findings.

Step 4—Drafting Reconstituted Entries

The registrar drafts reconstituted entries for each verified record. Each entry must:

- Contain the same data fields as the original register format.
- Record the original event date (not the reconstitution date).
- Be clearly annotated: 'Reconstituted—[reference to authorising instrument]—[date of reconstitution]'.
- Reference all evidence sources used in the reconstitution file.

The annotation identifies the entry as reconstituted but does not reduce its legal force.

Step 5—Supervisory Review and Approval

The supervisory authority (Director-General of Civil Registration or equivalent) reviews:

- The completeness of each reconstitution file.
- The adequacy of evidence for each entry.
- The correct application of legal procedures.

The supervisory authority signs an approval instrument listing all approved reconstituted entries. This instrument is retained permanently alongside the reconstituted register.

Step 6—Entry in Reconstituted Register

Approved entries are written into a new, properly formatted register book, clearly designated as a 'Reconstituted Register' for the relevant year(s) and register type. The register is given a distinct serial number and archived alongside the approval instrument and evidence files.

Step 7—Certificate Issuance and Public Notification

Following entry in the reconstituted register:

- Certificates may be reissued to individuals on request.
- A public announcement informs the affected community that reconstitution is complete and certificates may be obtained.
- Individuals whose entries could not be reconstituted are informed in writing and advised on the judicial late registration procedure available to them.

G.5 Judicial Reconstitution Procedure

Where national law requires a court order for reconstitution, or where the evidence is insufficient for administrative reconstitution, the judicial procedure applies. This procedure also applies to individual entries that cannot be verified through administrative means.

Judicial Procedure—Overview

1. Application: Either the affected individual or the civil registration authority files an application with the competent court (civil court or family court, depending on national law).
2. Evidence submission: The applicant submits all available evidence. The registration authority may be called as a witness.
3. Court hearing: The court reviews evidence and may call witnesses. The court applies the balance of probabilities standard—not the criminal standard of beyond reasonable doubt.
4. Court order: The court issues an order directing the civil registrar to reconstitute the specific entry.
5. Registration: The registrar enters the reconstituted record in the register, annotating it as 'Reconstituted by Order of [court name], [date], [case number]'.

Source: UNSD Handbook on CRVS, Revision 1 (2021) [1].

⚠ Reconstitution Must Not Be Used for First-Time Registration

Reconstitution applies only to events that were previously registered and whose records have been destroyed. It is NOT a substitute for late registration of events that were never registered in the first place.

Where individuals approach the registration office claiming their birth or marriage was registered but the record cannot be found, registrars must first conduct a thorough search—including of national archives, statistical returns, and duplicate registers—before opening a reconstitution file.

G.6 Prevention: Protecting Against Future Loss

Reconstitution is costly, slow, and always incomplete. The best reconstitution is the one that is never needed. Every civil registration office must implement the following preventive measures:

Measure	Implementation

Mandatory duplication of registers	Every completed register must be digitised (minimum 300 DPI) and the digital copy stored in at least two geographically separate locations (e.g. district archive + national archive).
Off-site backup	Statistical returns containing individual-level data must be transmitted monthly to the national statistical office—creating an automatic secondary record of all registrations.
Fireproof storage	Active registers should be stored in fireproof cabinets; completed registers should be transferred to purpose-built archive within 30 days of completion (see Annex 3E, Section E.6).
Environmental monitoring	Temperature and humidity records should be maintained. Any deviation from safe ranges (18–22°C; 30–50% RH) should trigger immediate corrective action.
Disaster recovery plan	Each registration office must have a written emergency plan specifying priority items for evacuation, emergency contacts, and protocols for notifying the supervisory authority.
Cloud or server-based digital backup	For offices with digital systems: there must be a daily automated backup with off-site replication; and tested recovery procedures verified quarterly.

Key Reminders for Every Registrar:

• A destroyed register is not just administrative loss—it erases the legal identity of every person recorded in it.
• Every completed register must be digitised and backed up before transfer to the archive.
• Reconstitution is possible but costly, slow, and always incomplete. Prevention is the priority.
• Reconstituted entries carry full legal force once approved through the applicable procedure.

Endnotes

[1] UNSD. (2021). Handbook on Civil Registration and Vital Statistics Systems: Management, Operation and Maintenance, Revision 1. New York: UNSD.

[2] International Council on Archives. (2016). Principles and Functional Requirements for Records in Electronic Office Environments. Paris: ICA.

[3] UNHCR. (2020). Civil Registration in Emergency Situations: Operational Guidance. Geneva: UNHCR.

ANNEX 3H

OPERATIONAL GUIDE: ROLE AND RESPONSIBILITIES OF THE CIVIL REGISTRAR

Purpose of this Annex

This Annex defines the professional role, legal responsibilities, competencies, and conduct standards of the civil registrar. It applies to all officials authorised to record vital events in the civil register, from community-level registration agents to district registrars and their supervisors. It corresponds to Section 3.2 of Chapter 3.

The civil registrar is the custodian of one of the most consequential documents in any person's life—the record that proves they exist, who they are, and what rights they hold. This role demands legal literacy, ethical integrity, service orientation, and technical competence in equal measure.

Source: UNFPA WCARO CRVS Regional Guidelines, Chapter 3—Annex 3H.

H.1 Legal Status and Authority

The civil registrar is a public official appointed under national civil registration law, acting under the authority of the state. Registration decisions—including the recording of entries in the register, the issuance of certificates, and the correction of errors—are acts of public administration and carry legal force.

The Registrar's Dual Function

Administrative function: the registrar receives declarations, verifies information, maintains registers, and issues certificates in accordance with prescribed procedures.

Legal function: the registrar exercises delegated public authority. Register entries constitute legal proof of vital events. The registrar cannot act beyond the scope of the law—nor below it. Refusal to register an event that meets all legal requirements is as unlawful as fraudulent registration.

Level	Authority and Jurisdiction
National Civil Registration Authority	Policy, standards, oversight, system management, international cooperation.
Regional/Provincial Registrar	Supervision of district offices; appeals from district decisions; coordination with regional government.
District/Municipal Registrar	Direct responsibility for the register; supervision of registration agents; quality assurance.
Registration Agent (community level)	Receives declarations and supporting documents; completes notification forms; transmits to district office. Does NOT independently sign register entries in most systems—entries are signed by the district registrar.

H.2 Core Legal Responsibilities

H.2.1 Registration Obligations

The civil registrar is legally obligated to:

- Register every vital event that meets the legal requirements, without exception, discrimination, or delay.

- Accept oral declarations where documentary evidence is unavailable—the registrar records what is declared and notes the absence of supporting documents.
- Inform declarants of their rights, including the right to register, the right to a certificate, and the right to correct errors.
- Treat all persons with equal dignity regardless of ethnicity, religion, marital status, nationality, gender, or refugee status.
- Refer, not refuse: where a declaration raises legal questions (disputed parentage, suspected fraud, missing documents for a delayed registration), the registrar refers the matter to the supervisory authority or the competent court—the registrar does NOT simply refuse.

H.2.2 Register Custody and Maintenance

The civil registrar is legally obligated to:

- Maintain registers in strict accordance with the standards set out in Annex 3E (physical standards, indelible ink, no erasures).
- Complete daily review, signing, and locking procedures.
- Maintain the access log; ensure no unauthorised access to registers.
- Initiate archiving procedures when a register is full (within 30 days—see Annex 3E, Section E.6).
- Report damage to registers immediately to the supervisory authority.
- Report any irregularities, suspected fraud, or missing pages immediately.

H.2.3 Certificate Issuance

The civil registrar is legally obligated to:

- Issue certificates only on the basis of verified register entries.
- Verify the identity and relationship of the person requesting the certificate before issuance.
- Record every issued certificate in the certificate issuance register (serial number, date, recipient, register reference).
- Maintain strict control of security paper stock: record receipt, use, and any spoilage.
- Refuse issuance where fraud is suspected and report to the supervisory authority.

H.2.4 Statistics Transmission

The civil registrar is legally obligated to:

- Compile and transmit the monthly vital statistics return to the national statistical office (see Annex 3I for full transmission procedures).
- Ensure data quality in monthly returns: completeness, accuracy, and timeliness.
- Respond to data quality queries from the NSO within the timeframe specified in national procedures.

H.3 Conduct Standards

Professional Conduct—Non-Negotiable Standards

Impartiality: registration decisions are based solely on the law and the evidence presented. Personal relationships, community pressure, political influence, and financial incentives have no role.
Confidentiality: register entries and certificate contents are confidential. The registrar does not disclose information from registers to third parties without legal authorisation.
Zero tolerance for corruption: accepting or soliciting unofficial payments (bribes, facilitation fees) is a criminal offence. Registrars must report any offer of unofficial payment to their supervisor.
Service orientation: the registration office serves the public. Queuing systems, clear signage, accessible premises, and respectful communication are minimum standards of service.

⚠ What the Registrar Must NEVER Do:

• Refuse to register an event solely because the declarant lacks identity documents—oral declaration is legally valid.
• Condition registration on payment of an unofficial fee.
• Discriminate based on ethnicity, religion, marital status, refugee status, or any other protected characteristic.
• Require the presence of both parents, spouses, or former spouses where the law permits unilateral declaration.
• Alter, erase, or destroy register entries.
• Issue a certificate without verifying it against the register entry.
• Refuse to issue a certificate to either party of a divorce on the grounds that one party has not consented.

H.4 Competency Framework

A competent civil registrar must demonstrate knowledge and skills across five domains:

Competency Domain	Key Knowledge and Skills Required
Legal framework	National civil registration law; applicable international standards (UNSD Principles and Recommendations); rights of declarants; referral procedures; correction and late registration procedures.
Register management	Physical standards for registers; writing and entry procedures; correction procedures; daily, weekly, and monthly maintenance; archiving; damage response; reconstitution (Annex 3G).
Certificate issuance	Security paper management; issuance procedures; verification of identity and relationship; fraud detection; certificate issuance register.
Statistics production	Monthly vital statistics return format; data quality checks; transmission procedures; response to NSO queries (Annex 3I).
Interpersonal and service skills	Communication with diverse populations including refugees, nomadic groups, and persons with low literacy; de-escalation;

	gender-sensitive registration; handling sensitive cases (domestic violence, disputed parentage).

H.5 Training and Supervision Requirements

Minimum Training Requirements Before Independent Practice
Foundation training: minimum 5 days covering national civil registration law, registration procedures for all event types, register management, certificate issuance, and statistics reporting. Supervised practice: minimum 20 supervised registrations across all event types (birth, marriage, divorce, death) before independent practice. Competency assessment: written and practical assessment before receiving independent authorisation to sign register entries. Continuing professional development: minimum 2 days refresher training per year, with additional training when legislation changes.

H.5.1 Supervision Structure

- The district registrar supervises all registration agents within the district.
- Supervision includes: monthly review of registers; verification of statistics returns; review of complaints; on-site visits (minimum quarterly).
- The regional registrar conducts annual comprehensive audits of district offices.
- A formal performance review is conducted annually for each registrar, with written records retained.

H.6 Handling Difficult Cases

Difficult Case	Recommended Response
Declarant has no documents at all	Accept oral declaration. Record information as declared. Note absence of supporting documents in the register entry. Do not deny registration. If delayed registration, follow late registration procedure.
Suspected fraud (inconsistent information, suspicious documents)	Record the declaration. Do NOT register immediately. Refer to supervisory authority and, where required, to the competent court. Maintain a written record of the referral.
Disputed parentage	Register with available information. Note the dispute. Do NOT attempt to adjudicate. Refer the disputing party to the civil court. Inform both parties of the referral procedure.
Woman registering alone (birth, marriage, divorce)	Process the registration on the basis of her declaration. Do NOT require the presence or cooperation of the other party unless national law explicitly requires it. Report to supervisor if pressure is applied.

Child marriage suspicion (appears underage)	Suspend the marriage banns. Request age documentation. Notify supervisory authority and child protection services. Do NOT proceed if age cannot be confirmed.
Domestic violence context (divorce registration)	Fast-track the registration. Omit publication period. Issue certificate immediately. Do NOT inform the other party of the registration without explicit consent of the declaring party. Refer to protection services if appropriate.

H.7 Registrar Checklist: End of Working Day

Before closing the office, the registrar confirms:

- All entries have been completed in indelible ink; no blanks; corrections properly initialled.
- The daily entry count has been recorded in the logbook.
- The last entry of the day has been signed and dated.
- All registers are locked in a fireproof cabinet.
- The security paper stock has been reconciled with issuance register.
- The access log has been updated.
- Any irregularity or suspicious approach has been documented and reported.

Endnotes

[1] United Nations Statistics Division (UNSD). (2014). Principles and Recommendations for a Vital Statistics System, Revision 3. New York: United Nations.

[2] UNSD. (2021). Handbook on Civil Registration and Vital Statistics Systems: Management, Operation and Maintenance, Revision 1. New York: UNSD

ANNEX 3I

OPERATIONAL GUIDE: TRANSMISSION OF VITAL EVENTS DATA

Purpose of this Annex

This Annex covers the flow of vital events data through the CRVS system: from the point where an event occurs (health facility, community, court) to the civil registration office; and from the civil registration office to the national statistical office. It corresponds to Section 3.8 of Chapter 3.

A complete and functioning CRVS system depends on two transmission flows operating reliably in parallel. Failure in either flow—a notification failing to reach the registrar, or registration data failing to reach the statistician—produces gaps that cannot be recovered after the fact.

Source: UNFPA WCARO CRVS Regional Guidelines, Chapter 3—Annex 3I.

I.1 Overview of the Two Transmission Flows

FLOW 1—Notification to Civil Registration

Health facilities, community health workers, courts, and traditional authorities should notify the civil registration office of vital events that have occurred. This flow ensures that events are captured and registered.

FLOW 2—Registration Data to Vital Statistics

The civil registration office compiles and transmits registration data to the national statistical office. This flow transforms registration records into population statistics.

I.2 Flow 1—Notifications to the Civil Registration Office

I.2.1 Notifications from Health Facilities

Health facilities are the primary source of birth and death notifications in countries with significant facility-based delivery and mortality. The notification pathway must be formalised and monitored:

Event	Health Facility Obligation and Timing
Live birth	Complete Birth Notification Form within 24 hours of delivery. Submit to co-located registration desk (same day) or to district civil registration office within 3 working days.
Stillbirth	Complete Stillbirth Notification Form. Submit within 24 hours. Recorded separately in the register as a stillbirth—not as a live birth followed by a death.
Facility death	Physician completes Medical Certificate of Cause of Death (MCCD) within 24 hours. Notify civil registrar within 24–72 hours. Burial permit requested simultaneously.
Maternal death	Complete standard notification AND specific maternal death notification form for public health surveillance. Notify civil

	registrar and health management information system simultaneously.
Neonatal death (0–28 days)	Complete both birth notification and death notification if the child was born alive. Submit both forms together. Registrar enters birth and death as separate entries.

Co-located Registration Desks—Best Practice

Where a registration desk is co-located within a health facility, the health worker completes the notification form and hands it directly to the registrar. Registration, certificate issuance, and transmission all occur at the point of birth or death. This model eliminates the notification delay and is the most effective mechanism for achieving universal registration coverage in facility settings.

Source: UNFPA WCARO Mission Report, Ghana (2024); UNSD Handbook on CRVS, Revision 1 (2021) [2].

I.2.2 Notifications from Community Health Workers

Community health workers (CHWs) are the primary notification channel for home births, community deaths, and vital events occurring among mobile or remote populations.

Event	CHW Obligation and Timing
Home birth	Complete Community Birth Notification Form within 24–48 hours of notification by family. Submit to the nearest registration office or registration agent within 7 days. Advise family on registration requirements and location.
Community death (natural cause)	Conduct verbal autopsy interview within 30 days of death (see Annex 3D, Section D.5). Complete Death Notification Form including VA-assigned probable cause. Submit to registration office within 30 days.
Community death (suspected non-natural)	Do NOT conduct a verbal autopsy. Notify police and civil registrar immediately. Do not advise burial pending police investigation.
Vital events among nomadic populations	Record event in field register. Submit notifications in batch on next regular visit to registration office or registration agent. Mobile registration teams should be deployed for catchment areas where CHW coverage is insufficient.

I.2.3 Notifications from Courts and Tribunals

Courts are legally required to notify the civil registration office of judicial decisions that constitute or alter vital events. This obligation is frequently not met in practice—training of court clerks on this obligation is essential.

Judicial Decision	Court Notification Obligation and Timing
Divorce decree (civil court)	The court clerk must transmit certified copy of divorce decree to the civil registrar within 15 days of the decree becoming final. The registrar makes a marginal annotation on the original marriage entry.
Judicial declaration of birth (late registration)	The court order is transmitted to the civil registrar, who enters the birth in the register based on the court order. The court order reference number is recorded in the register entry.
Adoption order	The court transmits adoption order to the civil registrar. Registrar issues new birth certificate with adoptive parents' names. Original entry sealed (access restricted by court order).
Declaration of death (missing persons)	The court transmits declaration to civil registrar within 15 days. Registrar enters death in the register with the court order reference.
Judicial correction of civil status	The court order transmitted to civil registrar. The registrar applies correction to the register entry as a tracked change (original text remains visible), citing the court order.
Marriage annulment	The court transmits annulment decision to civil registrar within 15 days. Marginal annotation applied to original marriage entry.

Critical Failure Point: Court-to-Registrar Notification

Across the WCARO region, the notification obligation from courts to civil registration offices is the most systematically underperforming link in the transmission chain. Divorce decrees, adoption orders, and declarations of death routinely fail to reach the registrar. The consequences fall hardest on women—who cannot prove their divorced status—and on surviving families—who cannot prove a death.

Recommended interventions: dedicated training for court clerks on notification obligations; standard transmission form signed by the presiding judge and transmitted within the legal deadline; quarterly audit of court notification compliance by the supervisory civil registration authority.

Source: Dincu, I. (2025). The Invisible Majority: Marriage and Divorce Registration in West and Central Africa [2].

I.2.4 Notifications from Traditional and Religious Authorities

In WCARO countries where customary and religious marriages and divorces have legal standing once registered, traditional and religious authorities play a notification function. Unlike health facilities and courts, this function is not legally mandated in most countries—it depends on established cooperation arrangements.

- Traditional chiefs and elders: attest to customary marriages and divorces; advise community members on registration requirements; may maintain their own local record books.

- Religious authorities (imams, priests): issue religious marriage and divorce certificates; advise congregation members to register with civil authorities; may formally notify the registrar where cooperation agreements exist.
- Recommended practice: civil registration authorities should establish formal protocols with traditional and religious authorities, including: standard attestation forms; periodic joint sessions to transmit accumulated notifications; and provide feedback to authorities on registration outcomes.

I.3 Flow 2—Civil Registration Data to Vital Statistics

The civil registration office is the primary source of vital statistics. The transformation of registration records into statistics occurs through the monthly transmission of vital statistics returns to the national statistical office.

I.3.1 The Monthly Vital Statistics Return

Content of the Monthly Vital Statistics Return

The monthly vital statistics return is a standardised form completed by the district civil registrar and transmitted to the national statistical office by the last working day of the following month.

For each event type (births, marriages, divorces, deaths), the return records:

- The total number of events registered in the reference month.
- Breakdown by sex of the subject (births and deaths).
- Breakdown by age of the subject (deaths: 5-year age groups; births: gestational age for stillbirths).
- For deaths: the cause of death by ICD-11 code (facility deaths) and verbal autopsy classification (community deaths), sex, and age group.
- For births: the place of birth (facility/home/other); type of birth (singleton/multiple).
- For marriages: the type of marriage (civil/religious/customary).
- Geographic breakdown: registration district of occurrence.

The return also records: the total cumulative registrations for the year to date; any data quality notes or flags.

Source: UNSD Handbook on CRVS, Revision 1 (2021) [2]; UNSD Principles and Recommendations, Revision 3 (2014) [1].

I.3.2 Transmission Procedure

Step 1—Compilation (days 1–5 of the following month)

The registrar compiles statistics from the register for the previous month. Each event type is counted and disaggregated according to the return format. Counts are cross-checked against the certificates-issued register to identify any discrepancies.

Step 2—Quality Check (days 3–7 of the following month)

The registrar reviews the return for:

- Completeness: all fields completed; no unexplained blanks.
- Plausibility: figures within expected ranges for the district (large deviations must be explained).
- Consistency: total by sex adds to overall total; no internal contradictions.

The district supervisor signs off on the return before transmission.

Step 3—Transmission (by last working day of the following month)

Transmission method depends on the system in place:

- Digital system: upload to national CRVS platform; return confirmed by system acknowledgement.
- Hybrid system: electronic transmission of aggregate return; paper backup retained at district office.
- Paper system: hard copy return transmitted by courier to regional office; regional office compiles and transmits to NSO. Original retained at district office.

Proof of transmission (acknowledgement, courier receipt, system confirmation) is retained.

Step 4—NSO Processing and Feedback (within 30 days of receipt)

The NSO processes received returns. Where data quality issues are identified, the NSO transmits a data quality query to the originating registration office, which must respond within 15 days.

I.3.3 Annual Reconciliation

In addition to monthly returns, an annual reconciliation is conducted:

- All monthly returns for the year are cross-tabulated to produce annual vital statistics by event type, sex, age group, cause of death, and geographic area.
- Annual figures are compared with civil registration administrative data (total entries in the registers) to identify any discrepancies between registered events and reported events.
- Discrepancies above a defined threshold (typically 2% of total events for a district) trigger a reconciliation audit.

I.4 Monitoring Transmission Performance

Indicator	Target and Monitoring Frequency
Timeliness of health facility birth notifications	≥95% of facility births notified to the registrar within 3 working days. Monitored monthly by the district registrar.
Timeliness of court divorce notifications	≥90% of divorce decrees transmitted to the civil registrar within 15 days. Monitored quarterly by the supervisory authority.

Timeliness of monthly vital statistics returns	100% of returns received by the NSO by the last working day of the following month. Monitored monthly by the NSO.
Completeness of vital statistics returns	≥95% of fields completed in each return. Monitored by the NSO at receipt.
Data quality query response rate	100% of NSO data quality queries responded to within 15 days. Monitored by the NSO.
Annual reconciliation discrepancy rate	≤2% discrepancy between registered events and reported events. Monitored annually by the NSO with the supervisory authority.

⚠ Common Failure Points—Corrective Action Required:

• Health facility birth notifications not submitted: train health staff; establish co-located desks; introduce automated digital notification.

• Court divorce and adoption notifications not transmitted: train court clerks; introduce standard transmission form with legal deadline; audit compliance quarterly.

• Monthly vital statistics returns not transmitted or transmitted late: supervisory authority to follow up within 5 days of the deadline; persistent non-compliance escalated to national authority.

• VA-assigned cause of death not included in returns: additional training for CHWs on VA procedures and the NSO reporting format.

I.5 Summary: Transmission Responsibilities at a Glance

Actor	Transmits To	What and When
Health facility	Civil registrar	Birth/death notification within 24–72 hours.
Community health worker	Civil registrar	Birth/death notification within 7–30 days; VA within 30 days of death.
Court/tribunal	Civil registrar	Certified copy of divorce decree, adoption order, declaration of death within 15 days.
Traditional/religious authority	Civil registrar	Attestation of customary/religious marriage or divorce (protocol-dependent).
Civil registrar (district)	National statistical office	Monthly vital statistics return by the last working day of the following month.
Civil registrar (district)	Regional archive	Completed register books within 30 days of completion.

Regional office	National statistical office	Compiled regional vital statistics return (where two-tier system applies).

Endnotes

[1] United Nations Statistics Division (UNSD). (2014). Principles and Recommendations for a Vital Statistics System, Revision 3. New York: United Nations

[2] UNSD. (2021). Handbook on Civil Registration and Vital Statistics Systems: Management, Operation and Maintenance, Revision 1. New York: UNSD

[3] World Health Organisation. (2021). Improving Quality and Use of Birth, Death and Cause-of-Death Information. Geneva: WHO.

[4] Dincu, I. (2025). The Invisible Majority: Marriage and Divorce Registration in West and Central Africa. Dakar: UNFPA WCARO (internal document).

ANNEX 3A—QUICK REFERENCE GUIDE: BIRTH REGISTRATION

Operational reference for civil registrars, health facility staff, community health workers, and local administrators.

Source: UNFPA WCARO CRVS Regional Guidelines, Chapter 3—Annex 3A.

WHO MUST REGISTER A BIRTH

Primary Declarants (in order of priority)

1. The mother or father of the child—either independently, without requiring the other's presence.
2. In the absence of both parents: a legal guardian, family member, or person who witnessed the birth.
3. Health facility staff, for births in hospitals or clinics.
4. Community health worker or traditional birth attendant, for home births.

Source: UNSD Principles and Recommendations, Revision 3 (2014).

Legal responsibility rests first with the parents. Either parent may register independently—no co-signature or spousal presence is required. Children born outside registered marriages enjoy full registration rights. The registrar may not discriminate based on the parents' marital status, nationality, refugee status, or religion.

TIME LIMITS FOR REGISTRATION

Period	Conditions and Requirements
Free period: 0–90 days after birth (varies by country)	No fee. No additional documents required beyond oral declaration.
Late registration: 90 days–1 year	Small administrative fee may apply. Vaccination card helpful but not mandatory. Written explanation of delay required.

Delayed registration: more than 1 year	Simplified administrative declaration OR court procedure, depending on national law. Fees must be waived for indigent families.

Principle: Absence of Documents NEVER Prevents Registration

If parents or family members lack identity documents, registration proceeds on the basis of oral declaration, corroborated by a community attestation or witness statement. A registration based on an oral declaration is fully valid and must not be given lower status than a document-supported registration.

WHAT INFORMATION IS NEEDED

Essential information:

- The child's full name, sex, date and time of birth, place of birth.
- The mother's full name, age or date of birth, nationality, residence address.
- The father's information (if acknowledged): full name, date of birth, nationality, residence address.
- Informant information: name, relationship to child, contact details.

Supporting documents (if available):

- Birth notification from health facility or traditional birth attendant.
- Parents' identity documents (national ID, passport, voter card).
- Parents' marriage certificate (if applicable). Immunisation card.

WHERE TO REGISTER

- Local civil registration office (district or municipal headquarters).
- Health facility (hospital or health centre with integrated registration service)—preferred for facility births.
- Mobile registration unit—rural areas, market days, immunisation campaigns.
- Community registration point—remote populations, co-located with CHW services.
- Embassy or consulate—for births abroad to citizens of the country.

STEP-BY-STEP: REGISTRATION OF FACILITY BIRTHS

Step 1—Birth Notification (within 24 hours of birth)

The attending health worker completes the official birth notification form, recording: the child's name, sex, date and time, names and identity of parents, delivery type, birth weight, and whether the child was born alive or stillborn.

Step 2—Transmission to Civil Registrar (within 3 days)

The health facility submits the birth notification to the co-located registrar's desk or to the local civil registration office within three working days. In facilities with integrated systems, notification is submitted electronically on the same day.

Step 3—Registration (within the legal delay)

The civil registrar reviews the notification, verifies identity documents where available, and enters the birth into the civil register. If a parent is present, the registrar confirms the information verbally. The registrar and the declarant sign the register entry.

Step 4—Certificate Issuance

The civil registrar issues the birth certificate on official security paper. For timely registrations (within the free period): the certificate is issued free of charge, on the same day or within three working days. A second certified copy is prepared for the mother's records.

Step 5—Transmission to Statistics (monthly)

The civil registration office compiles a monthly summary of all registered births and transmits it to the national statistical office, using the standard vital statistics return form.

WHAT THE FAMILY RECEIVES

- Birth registration receipt: immediate proof of registration, contains registration number.
- Birth certificate: issued on security paper with the child's full name; sex; date and place of birth; parents' names and nationalities; registration number; registrar's signature and official seal. FREE for timely registration.

⚠ Red Flags—Report These Issues to the Supervisory Authority:

• Fees charged for timely registration (should be FREE within the legal free period).
• Long travel distances required and no mobile service provided (decentralisation obligation).
• Rejection due to parents' marital status, ethnicity, refugee status, or religion.
• Certificate format different from others in the country (uniformity violation).
• Requests for unofficial payments or 'facilitation fees'.
• Registrar requiring father's presence for registration of child born to single mother.

EVERY CHILD HAS THE RIGHT TO BE REGISTERED AT BIRTH

Article 7 of the UN Convention on the Rights of the Child (1989) establishes the right of every child to be registered immediately after birth. No exceptions. No discrimination. No barriers.

ANNEX 3B—QUICK REFERENCE GUIDE: MARRIAGE REGISTRATION

Operational reference for civil registrars covering civil, customary, and religious marriages; prospective and retrospective registration; property regimes; and special cases.

Marriage registration is among the most neglected vital events in West. Fewer than 30 per cent of marriages are officially registered in most WCARO countries, leaving the majority of women and children without the legal protections that registration provides.

Source: UNFPA WCARO CRVS Regional Guidelines, Chapter 3—Annex 3B.

WHO CAN REGISTER A MARRIAGE

Eligible Declarants

- Both spouses together—preferred method.
- Either spouse independently—CRITICAL for women's access. A woman must be able to register a marriage without her husband's presence or cooperation.
- The surviving spouse, for retrospective registration where the partner has since died.
- The marriage officer, for civil marriages conducted at the registration office.

LEGAL REQUIREMENTS FOR MARRIAGE

- Age: Both parties must be of legal marriage age (minimum 18 years; verify under national law).
- Consent: Both parties must consent freely—no forced, coerced, or child marriage.
- Status: Neither party can be currently married (unless polygamy is legally permitted and properly authorised).
- Consanguinity: Parties cannot be closely related (restrictions vary by country).

TYPES OF MARRIAGE AND REGISTRATION PROCESS

Marriage Type	Registration Process
Civil marriage	Performed before the civil registrar. Automatically recorded at the time of ceremony. Certificate issued immediately or within three working days.
Religious marriage (nikah, church wedding, etc.)	NOT automatically registered. Requires separate declaration and transcription at the civil registration office. Religious certificate alone is not legal registration.
Customary/traditional marriage	NOT automatically registered. Must be registered with civil authorities for legal

	recognition. Requires attestation from traditional authority plus witnesses.
Polygamous marriage (where legally permitted)	Each marriage registered separately. Requires court authorisation before subsequent marriages. Property rights protected for all spouses.

STEP-BY-STEP: CIVIL MARRIAGE REGISTRATION

Step 1—Publication of Banns (30 days before ceremony)

The registrar posts the notice of intended marriage publicly at the registration office for 30 days. This period allows any person to raise a legal objection (existing marriage, underage party, consanguinity).

Step 2—Document Verification

The registrar verifies: both parties' birth certificates or national ID (to confirm age); certificate of celibacy or proof that any prior marriage has ended; medical certificates (where required by national law).

Step 3—Marriage Ceremony Before the Registrar

Both parties appear before the registrar with at least two witnesses. The registrar reads the relevant provisions of the civil code and confirms the parties' free consent.

Step 4—Choice of Property Regime

- Community of property: all property acquired during marriage is jointly owned.
- Separation of property: each spouse retains individual ownership of their assets.
- Participation in acquisitions: hybrid system; assets acquired during marriage are shared equally upon dissolution.

Step 5—Signing and Registration

The register entry is signed by both spouses, both witnesses, and the registrar. The registrar enters the marriage into the official marriage register with a sequential entry number.

Step 6—Certificate Issuance

The marriage certificate is issued on security paper. A family record book (livret de famille) is issued where this exists in the national system. The original entry in the register is the authoritative record.

LEGAL PROTECTIONS PROVIDED BY MARRIAGE REGISTRATION

- Women's property and inheritance rights: a registered marriage protects a wife's right to marital property and to inherit upon the husband's death.
- Children's legitimacy and inheritance rights: marriage registration establishes the legal status of children born of the union.
- Prevention of abandonment: a registered marriage prevents a spouse from simply disappearing without legal consequence.
- Access to survivor benefits: pension, insurance, and social protection schemes routinely require a marriage certificate.
- Child marriage prevention: the registration requirement enforces minimum age, with the publication of banns providing an additional safeguard.

ALL MARRIAGE TYPES DESERVE EQUAL LEGAL RECOGNITION

Civil, customary, and religious marriages all have equal legal standing once registered. A woman's right to register her marriage independently must not be challenged by any registrar. Polygamous marriages must be registered individually—each spouse receives her own marriage certificate.

ANNEX 3C—QUICK REFERENCE GUIDE: DIVORCE REGISTRATION

Divorce is the most neglected vital event in the WCARO region. Fewer than 2 per cent of divorces are officially registered in most countries. The consequences fall disproportionately on women, who are left in legal limbo—unable to prove their marital status, remarry, or access social benefits.

Source: UNFPA WCARO CRVS Regional Guidelines, Chapter 3—Annex 3C.

What Is Divorce Registration?

Divorce registration is the official recording of the legal termination of a marriage in the civil register. It is SEPARATE from obtaining a divorce decree from a court or traditional/religious authority.

Two steps are required: (1) obtain the divorce decree or equivalent decision; (2) register the divorce with civil registration authorities.

Without registration: there is no official proof of divorced status; legal remarriage is impossible; property and custody arrangements lack legal force; and statistical records are incomplete.

WHO MUST REGISTER A DIVORCE

- Either former spouse, independently—no cooperation from the other party is required.
- Both former spouses together, if possible (preferred for uncontested cases).
- A legal representative with power of attorney.

CRITICAL: Women's Independent Registration Right

A woman must be able to register a divorce without her former husband's participation or consent. The registrar assesses evidence that a divorce has occurred—the registrar does NOT require bilateral agreement. Where evidence is sufficient, registration proceeds regardless of the other party's cooperation or objection.

Where a woman indicates a domestic violence context: fast-track the process; omit publication; coordinate with police or social services for protection. Divorce registration must be free of charge for women.

Source: UN Women, Progress of the World's Women 2019–2020 (2019); UNFPA WCARO (2024).

TYPES OF DIVORCE AND REGISTRATION PROCESS

Divorce Type	Registration Process

Court divorce (civil or family court)	Court grants divorce → mandatory notification to civil registrar within 15 days → registrar records and issues certificates automatically.
Customary divorce (traditional authorities)	Traditional divorce decision → either spouse declares to registrar → traditional authority attestation + witnesses → registrar verifies and records.
Islamic divorce (talaq, khul, etc.)	Sharia court or imam decision → either spouse declares to registrar → imam attestation + witnesses → registrar records.
Christian separation or annulment	Church documentation + court recognition (where required) → declaration to registrar → registrar verifies and records.
Mutual consent divorce	Both parties agree, court issues decree → automatic notification to registrar → registration proceeds.

STEP-BY-STEP: COURT DIVORCE REGISTRATION

Step 1—File Petition in Court

Either spouse files a divorce petition with the competent civil or family court (grounds vary by national law: mutual consent, irreconcilable differences, adultery, abandonment, cruelty, etc.).

Step 2—Court Hearing and Decree

The court holds hearing(s), addresses custody, child support, and property division, and issues the divorce decree.

Step 3—Automatic Court Notification to Civil Registrar (mandatory within 15 days)

This step is MANDATORY: the court is legally required to notify the civil registration office of the divorce decree within 15 days of it becoming final.

Note: In practice, this notification frequently fails. Registrars and court clerks must be trained on this obligation. Where courts do not notify automatically, either spouse should bring the decree directly to the registrar.

Step 4—Registrar Records Divorce

The registrar records the divorce in the divorce register (or makes a marginal note in the marriage register). The original marriage certificate entry is annotated to reflect the dissolution.

Step 5—Certificate Issuance

Divorce certificates are issued to BOTH former spouses simultaneously—both are entitled to receive evidence of the divorce without delay or cost.

NO ONE SHOULD BE TRAPPED IN LEGAL LIMBO

Every person who has undergone a divorce—whether through a court, customary, or religious procedure—has the right to have that divorce officially recorded. The absence of a registered divorce leaves people, and particularly women, in legal uncertainty affecting their ability to remarry, access property, and move forward with their lives.

ANNEX 3D—QUICK REFERENCE GUIDE: DEATH REGISTRATION

Death registration serves two equally important purposes: it protects the rights of the surviving family (estate, pensions, remarriage) and it provides the data needed to track causes of death for public health surveillance and policy.

Source: UNFPA WCARO CRVS Regional Guidelines, Chapter 3—Annex 3D.

WHO MUST REGISTER A DEATH

Primary Declarants (in order of priority)

1. The nearest relative present at death or residing at the place of death.
2. Any other relative present.
3. The person in charge of the household where death occurred.
4. The person who found the body.
5. The institution (hospital, prison, nursing home) where death occurred.
6. The traditional or religious authority who presided over burial arrangements.

TIME LIMITS

Type of Death	Time Limit for Registration
Facility death (hospital, health centre)	Notify the registrar within 24–72 hours. Burial authorisation must be obtained before burial proceeds.
Community/home death	Register within 30–90 days (varies by country). Burial authorisation issued on a same-day basis where possible.
Suspicious or violent death	Police investigation first. Registration after the investigation is complete (1–2 weeks).
Late registration	Permitted with small fee; investigation more extensive for retrospective cases.

Burial Authorisation and Registration—Practical Note

In many WCARO communities, particularly Islamic communities, burials must occur within 24 hours for religious reasons. Burial authorisation must therefore be granted rapidly—same day where possible. Formal registration may follow post-burial, provided a death notification

has been submitted. Registrars must be trained to issue burial authorisation quickly, even if full registration cannot be completed immediately.

CAUSE OF DEATH DETERMINATION

Place of Death	Method of Determining Cause
Hospital or health facility	The physician completes a Medical Certificate of Cause of Death (MCCD) using ICD-11 coding: immediate cause → underlying cause → contributing conditions.
Home or community (with health worker involvement)	The community health worker conducts verbal autopsy (VA): structured interview with family about symptoms and circumstances → algorithm assigns probable cause.
Suspicious, accidental, or violent death	Mandatory police investigation, forensic examination, autopsy if needed, coroner or medical examiner determination. Registration proceeds only after investigation is complete.

The Medical Certificate of Cause of Death (MCCD)

The MCCD is the international standard document for certifying the cause of death in facility settings. It uses ICD-11 coding and records: Part I—the causal chain (immediate cause, intermediate cause, underlying cause); Part II—other significant conditions contributing to death.

IMPORTANT: The standard family death certificate does NOT include the cause of death. Cause of death information is confidential and is recorded only on the MCCD, issued separately to authorised parties.

WHAT THE FAMILY RECEIVES

Death Certificate—Contents (Family Copy)

- The deceased's full name, age, sex, marital status, nationality.
- The date, time, and place of death.
- The place of burial or cremation.
- The registration date, place, and registration number.
- The registrar's signature and official seal.

NOTE: The standard family death certificate does NOT include the cause of death. Cause of death information is confidential and used only for health statistics. The Medical Certificate of Cause of Death (MCCD) is issued separately to authorised parties only.

Uses of the death certificate:

- Settling estate and inheritance distribution.
- Accessing survivor pensions, insurance, and social benefits.

- Closing bank accounts and transferring property.
- Proof of widowhood (enabling remarriage).
- Cancelling government services (national ID, voter registration) to prevent identity fraud.

DUAL PURPOSE: FAMILY RIGHTS + PUBLIC HEALTH

Death registration serves families and society equally. Both purposes are essential and neither can be sacrificed for the other.

ANNEX 3E—QUICK REFERENCE GUIDE: CIVIL REGISTRATION REGISTERS

The Key Distinction: Register vs. Certificate

Certificate = certified copy issued to the individual.

Register = the original, authoritative permanent record maintained by the government in perpetuity.

The register is the source of truth. All certificates are derived from it. Protecting the register protects the rights of millions of people for generations to come.

Source: UNFPA WCARO CRVS Regional Guidelines, Chapter 3—Annex 3E.

TYPES OF REGISTERS

- Birth Register—records all births.
- Marriage Register—records all marriages.
- Divorce Register—records all divorces.
- Death Register—records all deaths.

Each type is maintained separately in its own register book, with specific data fields and sequential entry numbers. In digital systems, each type constitutes a separate logical register module, even if stored in a unified database.

PHYSICAL STANDARDS FOR REGISTER BOOKS

Minimum Physical Standards

Paper: acid-free archival paper, minimum 100 GSM, resistant to ageing and yellowing, capable of lasting a minimum of 100 years under proper storage.

Binding: SEWN binding (never glued), reinforced spine, hard covers with cloth or leather facing, opens flat without damaging spine.

Size: standard A3 (297 mm × 420 mm) for all register types.

Page numbering: pre-printed sequential page numbers (cannot be removed or altered; must be printed, not handwritten).

Security features: watermarked paper with government emblem; unique serial number for each register book; official stamp embossed on first and last pages.

WRITING STANDARDS—CRITICAL

Mandatory: Use Only Permanent, Indelible Ink

ALL entries MUST be made with permanent, indelible ink meeting archival quality standards (ISO 14145-2).

Approved: blue-black or black permanent ink, resistant to fading, water, and chemical solvents; fountain pens with permanent ink; permanent markers designed for archival documents; gel pens with archival-quality ink.

PROHIBITED: ballpoint pens with temporary ink; pencils or erasable pens; felt-tip markers with non-permanent ink; any instrument that can be erased or washed away.

Writing guidelines:

- Legibility: all entries must be clearly legible; use block letters if handwriting is poor.
- Completeness: ALL data fields must be completed; if information is unknown, write 'Unknown'—do NOT leave blank (blank spaces can be filled fraudulently later).
- No erasures: NEVER erase or use correction fluid or tape. Errors are corrected by: single-line strikethrough, followed by registrar's initials and date. The original entry must remain visible.
- Language: use the official language of registration. For names in other scripts, use the standard national transliteration.

DAILY MAINTENANCE PROCEDURES

Frequency	Registrar's Obligations
End of each working day	Review all entries for completeness and accuracy. Count the number of registrations. Sign and date the last entry of the day. Record the daily total in the logbook. Store registers in secure, locked cabinet.
Weekly (supervisor)	Audit sample of entries (10–20%) for quality. Check that corrections follow procedures. Verify no pages have been removed or damaged. Ensure all security seals are intact. Review any irregularities.
Monthly	Compile statistics from registers (total by event type, sex, age, location). Submit data to the national statistical office. Reconcile entries with certificates issued. Report irregularities.

PHYSICAL SECURITY AND STORAGE

Environmental Storage Requirements
Temperature: 18–22°C constant (±2°C variation). Relative humidity: 30–50% constant. Lighting: no direct sunlight; no fluorescent lights (UV damage). Air quality: filtered, dust-free. Ventilation: good circulation, no condensation. Storage equipment: fireproof cabinets or safes for active registers; acid-free archival boxes for archived registers; off-ground storage (flood protection); stable, non-combustible shelving.

Access control:

- Only designated registration officers and their supervisors may access registers.
- Access log: record each time a register is removed from its cabinet (date, time, person, purpose, return time).
- Registers must never leave the registration office without a signed transfer receipt and two-official escort.

Key Reminders for Every Registrar:

• Use only permanent, indelible ink—black or blue-black.

- Never leave blank spaces—write ‘Unknown’ if information is unavailable.
- No erasures—strikethrough and initial any corrections.
- Store registers in fireproof, locked cabinets at the end of every working day.
- Archive full registers within 30 days.
- Report irregularities and attempted fraud immediately to the supervisory authority.

ANNEX 3F—QUICK REFERENCE GUIDE: CIVIL REGISTRATION CERTIFICATES

A civil registration certificate is an official document issued by government authorities providing certified proof of a vital event recorded in the civil register.

Certificate = certified COPY issued to the individual. Register = the original authoritative record, maintained by government in perpetuity. The register is the source of truth. Any certificate can and should be verified against the original register entry.

Source: UNFPA WCARO CRVS Regional Guidelines, Chapter 3—Annex 3F.

TYPES OF CERTIFICATES

Certificate Type	What It Proves
Birth Certificate	Date and place of birth, parentage, citizenship eligibility.
Marriage Certificate	Legal marriage status, type of marriage, property regime.
Divorce Certificate	Legal termination of marriage, original marriage reference number.
Death Certificate (family copy)	Death, date, place, and burial location. Does NOT include cause of death.
Medical Death Certificate (MCCD)	Full cause of death using ICD-11 coding. Issued only to authorised parties.

CERTIFICATE CONTENT STANDARDS—REQUIRED DATA FIELDS

A Birth Certificate MUST include:

The child’s full name; sex; date, time, and place of birth; the mother’s full name and nationality; the father’s full name and nationality (if acknowledged); the registration date, place, and registration number; certificate serial number; registrar’s signature and official seal.

Marriage Certificate MUST include:

Full names of both spouses; the date and place of marriage; type of marriage (civil/religious/customary); property regime selected; registration date, place, and registration number; certificate serial number; registrar's signature and official seal.

A Divorce Certificate MUST include:

The full names of former spouses; marriage certificate reference number; date and place of divorce decree; the authority that granted the divorce; the registration date, place, and registration number; certificate serial number; the registrar's signature and official seal.

A Death Certificate (family copy) MUST include:

The deceased's full name, age, sex, marital status; date, time, and place of death; place of burial or cremation; registration date, place, and registration number; certificate serial number; registrar's signature and official seal.

IMPORTANT: The family death certificate does NOT include the cause of death. The cause of death is confidential health information, recorded only on the Medical Certificate of Cause of Death (MCCD), which is issued separately to authorised parties.

ESSENTIAL SECURITY FEATURES

Physical Security Features

Security paper: watermarks visible when held to light; security threads embedded; chemical reactive (changes colour when tampered with); unique texture; fluorescent fibres under UV light.

Microprinting: tiny text impossible to photocopy or scan clearly; appears as a line to the naked eye but contains a readable phrase under magnification.

Guilloche patterns: complex interlocking lines that cannot be accurately scanned or copied.

Intaglio printing: raised ink that can be felt by touch; requires specialised printing equipment.

Holograms and optically variable ink: change appearance when viewed from different angles; used for serial numbers.

Sequential serial numbers: pre-printed on security paper; linked to central database; allow verification.

Digital Security Features

QR codes and 2D barcodes: contain encrypted registration data; link to online verification portal; and allow real-time authentication.

Machine-Readable Zone (MRZ): standardised format compatible with border control scanners; OCR-readable for automated verification.

Digital signatures: cryptographic technology proving the document has not been altered since issuance; verifiable through online portal.

Blockchain integration (emerging): immutable, tamper-proof records; distributed verification.

CERTIFICATE UNIFORMITY

Why Uniformity Is Essential

Equal recognition: all citizens' certificates are accepted equally, regardless of region of issuance. Rural certificates are respected the same as urban.

Fraud prevention: officials can recognise legitimate certificates; uniform format makes forgeries obvious.

Interoperability: compatible with other government systems; integrated with ID systems, border control, and health records.

Regional integration: certificates recognised across ECOWAS; supports free movement protocols.

⚠ Red Flags at Point of Issuance—Report Immediately:

- Inconsistent information between register and certificate being requested.
- Pressure to rush issuance.
- Suspicious supporting documents.
- Multiple requests for the same certificate in a short period.
- Requests shortly after registration (possible fraudulent registration).

Response: verify thoroughly; consult supervisor; check register original; report to fraud prevention unit if suspicions confirmed. Do NOT return suspected fraudulent certificates to the presenter.

CHAPTER 4: VITAL STATISTICS PRODUCTION AND USE

Chapter Purpose

This chapter provides comprehensive practical guidance for transforming civil registration records into vital statistics within the ECOWAS regional context. It covers the institutional and legal framework for vital statistics production, the commune-level monthly data collection system, data quality standards, coding and classification, indicator calculation, standard statistical tables, and concrete examples of how vital statistics serve health, education, and development planning across ECOWAS member states.

4.1 Introduction

Why Vital Statistics Matter

Vital statistics from a functional civil registration are the gold standard for continuously measuring population health and informing evidence-based policy. They are the lifeblood of evidence-based governance. They transform individual data drawn from civil registration events into powerful demographic intelligence that is the basis for health policies, development planning, and human rights monitoring. Yet across the 12 ECOWAS member states, registration data, where it exists, often sits dormant in civil registry offices, never reaching the hands of planners, researchers, or policymakers who need it most.

"The primary purpose of civil registration is to provide legal documentation of vital events. A most important by-product of the civil registration process are vital statistics."

— UN Principles and Recommendations for a Vital Statistics System, Revision 3, Para. 1 (UNSD, 2014)

Civil registration events, taken individually, document most important events in the life of a person. Aggregated across a population, they reveal patterns of fertility, mortality, marriage formation, and union dissolution that no other routine data source can match. Yet across the 12 ECOWAS member states, this potential is largely untapped: registration data sits in register books or local databases, rarely compiled and almost never published, never used. The gap between what the system records and what planners and policymakers actually know is the central problem this chapter addresses [1].

This chapter provides a practical framework for converting civil registration records into high-quality vital statistics. It covers definitions, institutional arrangements, data flows, the commune-level data collection system, coding standards, indicator calculation, standard tables, and practical examples of impact.

Box 4.1: ECOWAS—The Regional Context

ECOWAS currently comprises 12 member states (following the formal withdrawal of Burkina Faso, Mali, and Niger effective January 2025): Benin, Cabo Verde, Côte d'Ivoire, The Gambia, Ghana, Guinea, Guinea-Bissau, Liberia, Nigeria, Senegal, Sierra Leone, and Togo. The region is characterised by high fertility, significant variation in birth registration coverage (from over 80% in

Ghana to under 25% in parts of the Sahel), and among the world's highest maternal and child mortality rates.

The ECOWAS Protocol on Free Movement (1979) makes cross-border harmonisation of vital statistics both necessary and urgent for all member states.

ECOWAS Vision 2050 and Vital Statistics

The ECOWAS Vision 2050—adopted by ECOWAS Heads of State and Government in June 2022—articulates a transformative agenda for West Africa built on six pillars: peace and security; governance and rule of law; economic integration; social development and human capital; environment and climate resilience; and digital transformation and innovation. At its core, Vision 2050 aspires to make ECOWAS a "prosperous, peaceful, united, and people-centred community." Vital statistics are not merely a technical by-product of this vision—they are its measurement backbone. Without high-quality, timely vital statistics on births, deaths, marriages, and causes of death, it is impossible to assess progress towards the Vision 2050 social development goals: reducing maternal mortality by at least 50%, ending child marriage, achieving universal birth registration, and building resilient health systems capable of responding to epidemics and pandemics. Civil registration data that is routinely compiled into vital statistics provides exactly the demographic intelligence that national governments and the ECOWAS Commission need to make Vision 2050 a reality rather than an aspiration.

Vision 2050 specifically calls for "the development of inclusive and resilient health systems" and commits to "significantly reducing maternal, neonatal, infant and child mortality rates" and "ensuring universal access to sexual and reproductive health services." Achieving these goals requires the kind of annual, subnational, cause-disaggregated mortality data that only a functional civil registration and vital statistics system can supply. Vision 2050 also targets the elimination of child marriage and the empowerment of girls and women—both measurable only through marriage registration statistics disaggregated by age. Furthermore, its commitment to "universal legal identity" for all West Africans directly mandates universal birth registration as a foundation. The practical guidance in this chapter—on data flows, monthly bulletins, ICD-11 coding, indicator calculation, and standard statistical tables—is therefore both a technical resource and a contribution to the regional governance architecture that ECOWAS Vision 2050 demands.

4.1.1 Why Standardisation and Regional Comparability Matter

ECOWAS member states share demographic and health challenges—high fertility, maternal and child mortality, infectious disease burdens, and rapid urbanisation. When all member states compile vital statistics using the same definitions, classifications, and table formats, in line with the ECOWAS Vision 2050 harmonisation agenda, the following benefits follow:

- **Regional comparability:** policymakers can benchmark performance and learn from neighbouring countries. For instance, if Senegal reduces its maternal mortality ratio from 315 to 236 per 100,000 live births over five years through targeted socio-economic and health interventions, standardised vital statistics can allow Togo, Guinea, or Sierra Leone to assess whether similar interventions could be applicable in their contexts.
- Support for ECOWAS, the African Union, and development partners who require comparable data to allocate resources and monitor the SDGs, ECOWAS 2050 Vision, and African Union Agenda 2063 targets.
- **Longitudinal tracking:** consistent indicators yield time series revealing the impact of interventions across decades.

- **Shared training and technical cooperation** through regional training institutions such as the Regional Institute for Population Studies (RIPS) based in Accra (Ghana), Institut Superieure des Sciences de la Population (ISSP) based in Ouagadougou (Burkina Faso), Institut de Formation et de Recherche Démographiques (IFORD) based in Yaounde (Cameroon) , Schools of statistics such as Ecole Nationale Supérieure de Statistique et d'Economie Appliquée (ENSEA-Abidjan, Côte d'Ivoire) and Ecole Nationale de la Statistique et de l'Analyse Économique (ENSAE-Dakar, Sénégal).

2. Harmonised Data Supports Regional Bodies and Development Partners

ECOWAS and development partners (African Union, World Bank, UNFPA, WHO) require comparable data to allocate resources efficiently based on documented needs, monitor regional development targets such as the ECOWAS Vision 2050, the African Union's Agenda 2063, and WHO regional health strategies, coordinate cross-border health interventions within the ECOWAS free movement area, track migration patterns and demographic trends across borders, and report on Sustainable Development Goals at regional and global levels. Without standardisation, regional aggregates become meaningless, and evidence-based regional planning becomes impossible.

3. Standardised Indicators Enable Longitudinal Tracking of Progress

When countries adopt the same indicators and maintain consistency over time, they create valuable time series data that reveal trends in fertility and mortality across decades, the impact of major interventions (such as the introduction of new vaccines or health system strengthening reforms), the effects of crises (conflicts, epidemics, natural disasters) on population dynamics, and progress toward elimination targets (such as neonatal tetanus or child marriage). For example, the crude birth rate calculated consistently using UN methodology in 2000, 2010, 2020, and 2030 provides a picture of fertility decline that can be linked to specific policy changes.

4. Research and Technical Cooperation

Academic researchers, demographic institutes, and technical agencies can conduct rigorous comparative studies when data are standardised. This generates evidence on the differential effectiveness of interventions across contexts, the social determinants of health outcomes using comparable socioeconomic variables, and demographic dividend opportunities by comparing countries at different stages of transition.

5. Institutional Capacity Through Shared Learning

When all ECOWAS member states use the same statistical frameworks, regional training programmes, technical assistance, and knowledge sharing become more efficient. Statistical offices and training institutions such as RIPS (Accra), ENSEA (Abidjan), ENSAE (Dakar), and ISSP (Ouagadougou) can share training materials and curricula, conduct peer-to-peer learning exchanges, jointly develop software tools and coding systems, and collaborate on methodological challenges.

4.1.2 Why Produce Statistics with Incomplete Coverage

Countries frequently delay vital statistics production on the grounds that coverage is too low to be meaningful. This reasoning is flawed, and the delay itself widens the evidence gap that hinders health planning and development investment. The following arguments apply across the ECOWAS context:

- Partial data is better than no data at all; however, geographic patterns, trend detection, and facility-based insights are all possible even at lower coverage (e.g. 40-60%).
- Transparency builds trust and drives improvement: publishing statistics with reliable completeness assessments demonstrates commitment to accountability and attracts technical support.
- Data production can reveal system weaknesses: gaps in reporting, ill-defined causes of death, and geographic coverage failures become visible only through the compilation process.
- Incomplete statistics still inform decisions: budgeting, facility planning, and intervention targeting cannot wait for perfect data.
- Early capacity building pays dividends: training coders, establishing data flows, and creating databases takes years; starting early allows countries to capitalise immediately when coverage improves.
- Momentum and political will: publishing annual vital statistics reports makes the state of the CRVS system visible to leaders, parliamentarians, and the public, generating political pressure to improve registration coverage and budget allocations for system strengthening.

Box 4.2: Country Examples—Producing Vital Statistics with Incomplete Coverage

The Institut National de la Statistique (INS) of Côte d'Ivoire compiles annual vital statistics from civil registration data at approximately 55–60% birth completeness and 40% death completeness, applying completeness adjustment factors derived from the 2021 MICS survey to produce adjusted CBR, CDR, and IMR estimates published in the annual Annuaire des Statistiques de l'État Civil. This transparency-first approach has attracted bilateral technical support.

Source: Institut National de la Statistique (INS Côte d'Ivoire). Annuaire des Statistiques de l'État Civil 2022. Abidjan: INS, 2023.

The Ghana Statistical Service (GSS) has published its annual Vital Statistics Report since 2016, providing births, deaths, marriages, and divorces with regional and sex disaggregation, even as national birth registration completeness fluctuated between 77% and 93% across regions. The GSS applies death distribution methods to produce adjusted mortality estimates and publishes both unadjusted and completeness-adjusted rates with transparent uncertainty documentation, enabling direct SDG 3.1.1 and 3.2.1/3.2.2 reporting from civil registration data.

Source: Ghana Statistical Service (GSS). Vital Statistics Report 2020: Births and Deaths. Accra: GSS, 2021. Available at: https://statsghana.gov.gh

4.2 Understanding the Vital Statistics System

4.2.1 Defining Vital Statistics

According to the UN Principles and Recommendations, vital statistics are "statistics derived from civil registration; they include statistics on the frequency of occurrence of specified and defined vital events, as well as relevant characteristics of the events themselves and of the person or persons concerned" [1].

The four primary categories are: birth statistics (fertility rates, birth attendants, parental characteristics); death statistics (mortality rates, causes of death, deceased characteristics); marriage statistics (marriage rates, age at marriage, type of ceremony); and divorce statistics (divorce rates, marriage duration, and characteristics of divorcing spouses).

Table 4.1. Four Categories of Vital Statistics—Definitions and Sources

Category	What It Includes	Primary Statistical Value	SDGs	Africa 2063 Vision	ECOWAS Vision 2050 Target
Birth Statistics	Live births: all products of conception showing any sign of life at delivery, regardless of gestational age or birth weight (foetal deaths registered separately)	Fertility indicators (CBR, GFR, ASFR, TFR, ABR); facility delivery tracking; birth attendant type; parental characteristics	SDG 3.7.2 (adolescent birth rate); SDG 3.1.2 (births by skilled health personnel)	Aspiration 1, Goal 3, Target 3.3: Reduce maternal and neonatal mortality by 50%; Target 3.2: Increase SRH access by 30% (African Union Agenda 2063)	Goal 1 (Demographic Dividend) and Goal 2 (Health): Achieve universal birth registration by 2030; reduce TFR to 3.0 by 2050; reduce MMR by at least 50% and U5MR to under 25 per 1,000 live births by 2050. ECOWAS Commission, ECOWAS Vision 2050 (Abuja, 2022), Pillars 3–4.
Death Statistics	Deaths at all ages including infant and under-five deaths; medical cause of death certified using ICD-11; includes maternal deaths (flag for women aged 10-49)	Mortality indicators (CDR, IMR, NMR, U5MR); MMR; cause-specific mortality profiles for public health	SDG 3.1.1 (MMR); SDG 3.2.1 (U5MR); SDG 3.2.2 (NMR); SDG 3.4.1 (NCD mortality)	Aspiration 1, Goal 3, Target 3.3: Reduce maternal, neonatal, and child mortality by at least 50% from 2013 levels; Target 3.4: Reduce HIV/AIDS, malaria, TB deaths by 50% (AU CARMMA campaign)	Goal 2 (Health and Social Protection): Eliminate preventable deaths; reduce U5MR to <25/1,000 and MMR to <70/100,000 by 2050; achieve life expectancy above 70 years across member states. ECOWAS Commission, ECOWAS Vision 2050 (Abuja, 2022), Pillar 4.
Marriage Statistics	Civil, religious, and customary marriages from the	Marriage rates; child marriage monitoring; family	SDG 5.3.1 (women married before age 18); SDG 5.6 (SRH rights)	Aspiration 6, Goal 17: End all forms of discrimination; AU Campaign to End Child Marriage in Africa; supports	Goal 3 (Gender Equality and Social Justice): End child marriage by 2030 (SDG 5.3.1); harmonise family law across ECOWAS member states; achieve equal legal capacity in marriage for women and

Category	What It Includes	Primary Statistical Value	SDGs	Africa 2063 Vision	ECOWAS Vision 2050 Target
	moment they are registered; includes type of ceremony and characteristics of both spouses	formation patterns; mean age at first marriage; spousal age difference		girls' education and empowerment agenda	men. ECOWAS Commission, ECOWAS Vision 2050 (Abuja, 2022), Pillar 4.
Divorce Statistics	Court-adjudicated and customary divorces; includes the duration of marriage, number of dependent children, and characteristics of divorcing spouses	Divorce rates; marriage stability analysis; impact on children; gender dimensions of union dissolution	SDG 5.1 (end discrimination); SDG 16.3 (access to justice); SDG 17.18 (statistical capacity)	Aspiration 6, Goal 17: Gender equality and women's rights; Aspiration 3, Goal 11: Accountable institutions ensuring access to justice for all	Goal 3 (Gender Equality and Social Justice): Ensure equal access to justice and legal protection; harmonise family law and divorce procedures across ECOWAS to protect women and children's rights. ECOWAS Commission, ECOWAS Vision 2050 (Abuja, 2022), Pillar 4.

Source: *United Nations, Principles and Recommendations for a Vital Statistics System, Revision 3 (New York: United Nations, 2014), Chapter III, Para. 66–76, Pages 21–24.*

4.2.2 The Legal Foundation

UN guidance establishes that the legal framework should explicitly recognise the statistical function of civil registration and mandate the regular transmission of registration data to the national statistics office. As such, civil registration laws in ECOWAS member states must mandate: (1) vital statistics production from registration records; (2) designation of the NSO as compiler; (3) regular data transmission with specified timelines; (4) protection of individual confidentiality while enabling statistical use [2].

Countries must ensure their civil registration laws include provisions that:

- mandate the production of vital statistics from registration records;
- designate the national statistics office as the authority responsible for compiling and disseminating vital statistics;
- require civil registration offices to transmit data regularly to the statistics office;
- specify data sharing protocols, timelines, and formats;
- protect the confidentiality of individual data while enabling statistical use; and
- authorise the statistics office to access registration records for quality assessment.

For more detailed guidance on what civil registration legislation should contain, please refer to Chapter 2 of the present guidelines.

As a practical example, Senegal's Decree No. 2014-1811 of 29 December 2014 states that the National Agency for Civil Status (ANCS) shall transmit all civil registration data monthly to the National Agency for Statistics and Demography (ANSD) in a format prescribed by joint ministerial order, and that the statistics agency is authorised to use this data for the production of vital statistics while maintaining strict confidentiality of individual identities. This legal framework has underpinned Senegal's ability to report directly on SDG 3.1.1 (maternal mortality ratio) and SDG 3.7.2 (adolescent birth rate).

Box 4.3: Legal Provisions for Vital Statistics

Senegal (ECOWAS): Decree No. 2014-1811 requires the National Agency for Civil Status (ANCS) to transmit monthly all civil registration data to the National Agency for Statistics and Demography (ANSD). This has underpinned Senegal's ability to report directly on SDG 3.1.1 (MMR) and 3.7.2 (adolescent birth rate).[3]

Ghana (ECOWAS): The Births and Deaths Registry Act (Act 301, 1965, as amended) and the Statistical Service Act jointly establish the Ghana Statistical Service's mandate to produce annual vital statistics reports, published since 2016 with regional and sex disaggregation.

4.2.3 Institutional Arrangements and Coordination

The UN Principles and Recommendations state that "there should be close collaboration between the civil registration authority and the agency responsible for vital statistics to ensure the smooth flow of data and the production of high-quality statistics" [4]. Table 4.2 provides an overview and the main roles and responsibilities of various institutions involved in the CRVS value chain.

Table 4.2. Key Institutional Roles and Responsibilities

Institution	Primary Responsibilities
Civil Registration Authority (Ministry of Interior or Local Government)	Register all births, deaths, marriages and divorces through the bureau local d'état civil (local civil registry office); maintain complete registers; transmit monthly statistical bulletins to the NSO; apply quality controls at point of registration; issue certificates; maintain the master civil registration database.
Ministry of Justice	Register court-adjudicated divorces; transmit certified copies of divorce judgments (jugements de divorce) to the civil registrar within 30 days of the judgment for annotation of the marriage record; transmit declaratory judgements for births, deaths, and marriages to both the civil registrar AND the NSO within 30 days of judgment; transmit monthly divorce statistics to the NSO; ensure court clerks complete standardised divorce notification forms; coordinate with customary/religious authorities on divorce recognition.
National Statistics Office (NSO)	Receive and consolidate registration data; conduct quality assessments and validation; code causes of death (ICD-11) and occupations (ISCO-08); compile statistical tables; calculate indicators; produce annual vital statistics reports; estimate completeness using death distribution methods.
Ministry of Health	Provide medical certification of deaths in health facilities; for every in-facility or reported death, complete both the Medical Certificate of Cause of Death (MCCD) and the Statistical Death Notification Bulletin (BSND-1—see Annex 4B) and transmit both to the civil registrar within 48–72 hours of the death; code causes of death using ICD-11; notify civil registration of births and deaths; transmit monthly facility data for cross-verification; collaborate on maternal and child mortality analysis.
Local Government Authorities (Communes)	Collect data at community level through civil registry offices; complete monthly statistical bulletins (Forms VSB-1, VSD-1, VSM-1, VSDv-1); transmit to district/region/national level; coordinate monthly reconciliation meetings with health facilities.
Ministry of Planning/Finance	Integrate vital statistics into national planning; use demographic projections for budget allocation; coordinate SDG monitoring; fund strengthening of the CRVS system.
Religious and Customary Authorities	Report marriages and divorces under religious/customary law to civil authorities; encourage civil registration of marriages.

Source: *United Nations, Principles and Recommendations for a Vital Statistics System, Revision 3 (New York: United Nations, 2014), Para. 153–165, Pages 48–53.*

4.2.4 National Vital Statistics Committee

A National Vital Statistics Committee (NVSC) ensures coordinated vital statistics production. The recommended Secretary is the Director of Demographic Statistics to ensure the appropriate level of demographic expertise.

Table 4.3. Terms of Reference for the National Vital Statistics Committee

Component	Details
Mandate	Oversee production, quality assurance, and use of vital statistics; coordinate data flows; review and approve annual reports; advocate for CRVS system strengthening.
Chair	Director General of National Statistics Office.
Vice-Chair	Director of Civil Registration.
Membership	Director of Health Information (MOH); Director of Judicial Statistics (MOJ); Representative, Ministry of Interior; Representative, Ministry of Planning; National Public Health Institute; civil society (child rights); development partner (rotating observer). Secretary: Director of Demographic Statistics, NSO.
Meetings	Quarterly minimum; extraordinary sessions as needed.
Key Functions	(1) Approve annual vital statistics work plans; (2) review monthly data transmission reports; (3) conduct quarterly quality reviews; (4) review draft reports before publication; (5) coordinate capacity building; (6) resolve inter-institutional data-sharing issues; (7) coordinate with ECOWAS regional CRVS bodies and report to the ECOWAS Commission on regional harmonisation progress.
Reporting	Annual report to Prime Minister through Ministry of Planning.

Source: United Nations, Principles and Recommendations for a Vital Statistics System, Revision 3 (New York: United Nations, 2014), Chapter IV, Para. 153–165, Pages 48–53.

Box 4.4: Senegal: National Vital Statistics Committee Success

Senegal established its Comité National des Statistiques de l'État Civil in 2016, co-chaired by the ANSD Director General and the ANCS Director. Since its establishment, the proportion of communes submitting monthly statistical bulletins on time increased from 62% to 84% by 2022—demonstrating that institutionalising coordination dramatically improves data quality and timeliness. The Committee brings together the following institutions as full members: ANSD (Agence Nationale de la Statistique et de la Démographie, co-chair), ANCS (Agence Nationale de l'État Civil et de la Nationalité, co-chair), DSISS (Direction de la Statistique et de l'Information Sanitaire et Sociale, Ministry of Health), Direction des Affaires Civiles (Ministry of Justice), Direction de la Planification Démographique (Ministry of Planning), and regional civil registration directorates. The Committee convenes quarterly in ordinary session, with extraordinary sessions called by either co-chair when urgent coordination issues arise. For further information: www.ansd.sn.

4.3 Data Flow from Registration to Statistics

4.3.1 The Vital Statistics Data Flow Model

The UN Principles and Recommendations describe the vital statistics data flow as having four main stages: (1) notification of vital events; (2) registration and certification; (3) compilation and processing; and (4) analysis and dissemination [5].

Table 4.4. Vital Statistics Data Flow—ECOWAS Context

Stage	Activities and Actors
Stage 1 Event & Notification	For births, deaths, or marriages) → court issues certified copy → transmitted to civil registrar AND to NSO, with original event date used for statistical attribution.
Stage 2 Registration & Certification	Municipal Civil Registry/Court: for deaths, receives MCCD and BSND-1 (Annex 4B) from health facility and uses BSND-1 socio-demographic variables to populate the death register entry and Form VSD-1; receives certified copies of divorce judgments and declaratory judgements from courts and enters them using the original event date; registers event; issues certificate; completes monthly statistical bulletin (forms VSB-1 for births, VSD-1 for deaths, VSM-1 for marriages, VSDv-1 for divorces); applies quality checks at entry.
Stage 3 Transmission & Compilation	Commune → District (by 5th); District → Region (by 10th); Region → National Authority/MOJ (by 12th); National → NSO (by 15th). NSO: validates data; codes causes of death using ICD-11; codes occupations (ISCO-08) and education (ISCED 2011); creates analytical database; cross-checks with health facility data.
Stage 4 Analysis & Dissemination	NSO: compiles statistical tables; calculates indicators (adjusted and unadjusted); produces quarterly bulletins and annual vital statistics report; disseminates to government ministries, researchers, development partners, media, and the public.

Source: *United Nations, Principles and Recommendations for a Vital Statistics System, Revision 3 (New York: United Nations, 2014), Chapter II, Para. 43–52, Pages 15–18.*

4.3.2 Essential Variables for Statistical Compilation

The UN Principles and Recommendations specify the minimum variables that must be transmitted from civil registration to the statistics office for each vital event type. These variables are the basis for the monthly statistical bulletins collected at commune level (see Section 4.3.3) [6].

Table 4.5. Essential Variables for Birth Statistics (UN P&R Rev.3, Para. 273–292, Pages 78–82)

Variable Category	Specific Variables	Statistical Purpose
Event identification	Registration number; date of registration; place of registration (commune, district, region)	Unique identification; timeliness assessment
Event details	Date of birth; place of birth (facility/home; district; region); type of birth (single/multiple)	Geographic analysis; fertility timing; facility delivery rates (SDG 3.1.2)
Child characteristics	Sex; birth weight; gestational age (where available)	Sex ratio; low birth weight monitoring
Mother’s characteristics	Age; marital status; education level (ISCED); occupation (ISCO-08); place of usual residence; nationality; parity	Age-specific fertility; adolescent pregnancy (SDG 3.7.2); socioeconomic differentials
Father’s characteristics	Age; education level; occupation (where available)	Paternal age; socioeconomic analysis

Variable Category	Specific Variables	Statistical Purpose
Birth attendant	Type (doctor, nurse/midwife, TBA, none); place of delivery	Skilled birth attendance (SDG 3.1.2)
Timeliness	Number of days between birth and registration	Registration delay monitoring; system performance

Source: *United Nations, Principles and Recommendations for a Vital Statistics System, Revision 3 (New York: United Nations, 2014), Para. 273–292, Pages 78–82.*

Death Statistics

The Medical Certificate of Cause of Death (MCCD) and the Statistical Death Notification Bulletin (BSND-1) are complementary and must travel together. The MCCD captures the clinical sequence of conditions required for ICD-11 coding. It does not, however, capture the socio-demographic variables—age, sex, marital status, education, occupation, and place of usual residence—that are indispensable for the death statistics tables in Section 4.6.2 (Tables D3, D7, D9). The Statistical Death Notification Bulletin (BSND-1, Annex 4B) was designed to fill this gap. Every death occurring in or reported to a health facility must be accompanied by both documents: the MCCD (completed by the certifying doctor or nurse) and the BSND-1 (completed by the clinician and facility administrator), must both be transmitted together to the civil registrar within 48–72 hours. The civil registrar uses the BSND-1 to populate the statistical variables in the death register entry and in Form VSD-1 (Monthly Death Statistical Bulletin, Annex 4A). Neither form replaces the other. This dual-document protocol operationalises the requirement in the UN Principles and Recommendations, Chapter IV, paras. 245–285 (Pages 70–79).

Table 4.6. Essential Variables for Death Statistics (UN P&R Rev.3, Para. 330–359, Pages 93–101)

Variable Category	Specific Variables	Statistical Purpose
Event identification	Registration number; date of registration; place of registration	Unique identification; timeliness
Event details	Date of death; place of death (facility/home/other; district; region)	Geographic analysis; facility death rates
Deceased characteristics	Sex; age at death; marital status; education (ISCED); occupation (ISCO-08); place of usual residence; nationality	Age-specific mortality; socioeconomic differentials
Cause of death	Underlying cause (ICD-11); immediate cause; contributing causes; manner of death; pregnancy-related flag (women 10–49)	Cause-specific mortality; SDG 3.1.1 (MMR); public health priorities
Certification	Type: physician/nurse/verbal autopsy/none; autopsy performed (yes/no)	Data quality assessment; ICD-11 transition monitoring
For infant deaths	Mother's age; gestational age; birth weight; age at death (<24 hrs, 1–6 days, 7–27 days, 28 days–<1 yr)	Neonatal vs. post-neonatal mortality; SDG 3.2.2

Source: *United Nations, Principles and Recommendations for a Vital Statistics System, Revision 3 (New York: United Nations, 2014), Para. 330–359, Pages 93–101.*

An important gap in the death variables framework above concerns deaths occurring outside health facilities—which represent the majority of all deaths in many ECOWAS member states, particularly in rural and peri-urban areas. For these deaths, the standard MCCD pathway is unavailable. Countries should ensure their data collection framework explicitly covers: (1) community-reported deaths notified by family members, community health workers, or traditional authorities to the commune civil registry within 72 hours; (2) deaths certified through verbal autopsy (VA) where no medical certification is possible, using WHO 2016 validated VA instruments; and (3) deaths occurring *en route* to a health facility, recorded as "place of death: other" in Form VSD-1.

Civil registrars should record the place of death—health facility/home/other/unknown—as a mandatory field, enabling calculation of the proportion of medically certified vs. non-medically certified deaths, which is a key ICD-11 data quality indicator. A phased approach to handling community-level deaths is recommended for ECOWAS member states.

- In Phase 1 (years 1–2), all community deaths are notified to the commune civil registrar and recorded with place of death as "home/community" or "en route to facility"—even without cause-of-death certification. This immediately captures the count of community deaths and enables disaggregation by sex and age.
- In Phase 2 (years 2–3), verbal autopsy (VA) instruments are introduced at minimum for neonatal deaths (0–27 days) and maternal deaths of women aged 10–49, using the WHO 2016 standardised VA questionnaire (available in French, English, and Portuguese), administered by community health workers under NSO supervision.
- In Phase 3 (years 3–5), VA coverage extends to all under-five deaths and selected adult deaths in rural areas. A relevant precedent outside the region is provided by Uganda, which integrated VA into the civil registration system from 2015 in pilot districts: within three years, the cause-of-death assignment for community deaths reached 73%, reducing the proportion of ill-defined causes from 48% to 19% in covered areas. ECOWAS member states can adapt this model by training village health workers and community health promoters as VA interviewers [2].

Marriage statistics

Marriage registration data are among the most policy-relevant vital statistics produced by the civil registration system. Across ECOWAS member states, marriage statistics serve to monitor the prevalence and trend of child marriage (SDG 5.3.1), which is a priority indicator under the ECOWAS Vision 2050 gender equality and youth empowerment goals; the mean age at first marriage for women and men, a key proxy for girls' educational attainment; the distribution of marriage types (civil, religious, and customary), which reveals the extent of legal pluralism and system reach; and spousal age differences relevant for gender equity monitoring under Agenda 2063 Aspiration 6. In most ECOWAS member states, three marriage regimes coexist: civil marriage (registered at the civil registry), religious marriage (Islamic or Christian), and customary marriage. Only civil marriages generate automatic vital statistics; for religious and customary marriages to be captured, they must be co-registered or reported through complementary data collection instruments. Countries should therefore track the proportion of marriages registered

[2] Source: World Health Organization. Verbal Autopsy Standards: Ascertaining and Attributing Causes of Death. Geneva: WHO, 2016.

through each pathway as a system performance indicator. For reference, see Chapter 3 of the present Guidelines for the registration procedures for marriage.

Court decisions and *jugements supplétifs* must also feed the statistical chain: In ECOWAS legal systems, several categories of court decisions generate vital events with statistical value.

- (1) *Divorce judgments* (jugements de divorce): the court clerk must transmit a certified copy to (a) the civil registrar of the commune where the marriage was registered, for annotation of the marriage record, and (b) the NSO via the monthly VSDv-1 bulletin.
- (2) *Jugements supplétifs* (belated declaratory judgments for births, deaths, or marriages not declared within the statutory deadline): the court clerk must transmit a certified copy to (a) the civil registrar, who enters the event using the original event date (not the judgment date), AND (b) the NSO, which records the *jugement supplétif* in its database attributed to the correct reference year with annotation as a belated registration. Without dual transmission, *jugements supplétifs* generate systematic under-counting in the year of the original event and an artificial spike in the year of judgment. Countries should report their volume separately in the annual vital statistics report as a data quality indicator.

Table 4.7. Essential Variables for Marriage Statistics (UN P&R Rev.3, Para. 393–406, Pages 110–112)

Variable Category	Specific Variables	Statistical Purpose
Event identification	Registration number; date and place of registration	Unique identification
Event details	Date and place of marriage; type of ceremony (civil, religious, customary)	Marriage timing; ceremony type; legal pluralism tracking
Bride's characteristics	Age; previous marital status; education (ISCED); occupation (ISCO-08); place of residence; nationality	Age at marriage; child marriage (SDG 5.3.1); socioeconomic differentials
Groom's characteristics	Age; previous marital status; education (ISCED); occupation (ISCO-08); place of residence; nationality	Age at marriage; spousal age difference; remarriage patterns

Source: *United Nations, Principles and Recommendations for a Vital Statistics System, Revision 3 (New York: United Nations, 2014), Para. 393–406, Pages 110–112.*

The transmission chain for divorce judgments: Divorce is the most systematically under-counted vital event in ECOWAS member states because the primary documentation—the court judgment—is generated by the Ministry of Justice, not by the civil registration system. The legal requirement in most member states is that the court clerk transmits a certified copy of the divorce judgment to the civil registrar of the commune where the marriage was originally registered; that registrar annotates the marriage record and enters the divorce in the monthly Form VSDv-1 (Annex 4A). In practice, this transmission is frequently delayed or omitted entirely. Three actions are required to close this gap: (1) the civil registration law must explicitly mandate transmission within 30 days of the judgment; (2) the court clerk must also transmit the statistical variables required by Table 4.7 above directly to the NSO; and (3) the National Vital Statistics Committee (Section 4.2.4) must monitor transmission compliance through monthly reconciliation between court registers and civil registration bulletins.

Jugements supplétifs and the statistical correction problem: A jugement supplétif is a declaratory judgment issued by a court to record a vital event (birth, death, or marriage) not declared within the statutory deadline. From a statistical standpoint, it must be transmitted to two recipients: (a) the civil registrar, who enters the event using the original event date (not the judgment date); and (b) the NSO, which must incorporate the event into the retrospective statistics for the appropriate year with annotation distinguishing belated registrations from timely ones. A single-destination transmission to only the civil registrar creates two distortions: systematic under-registration in the year of the original event, and an artificial concentration of events in the year the court sits. Countries should report the volume of *jugements supplétifs* separately in their annual vital statistics report as a data quality indicator alongside registration completeness estimates.

Table 4.8. Essential Variables for Divorce Statistics (UN P&R Rev.3, Para. 407–415, Pages 112–115)

Variable Category	Specific Variables	Statistical Purpose
Event identification	Registration number; date and place of registration	Unique identification
Event details	Date of divorce; type (court judgment, customary)	Divorce timing; legal vs. customary analysis
Divorcing spouses	Age of wife; age of husband; education levels (ISCED); occupations (ISCO-08); place of residence	Age-specific divorce rates; socioeconomic patterns
Marriage details	Date of original marriage; duration of marriage; type of original ceremony	Marriage duration analysis
Children	Number of dependent children; custody arrangements (where available)	Impact on children of divorce

Source: *United Nations, Principles and Recommendations for a Vital Statistics System, Revision 3 (New York: United Nations, 2014), Para. 407–415, Pages 112–115.*

4.3.3 What to Collect at the Commune Level: The Monthly Statistical Bulletin

The Monthly Statistical Bulletin is the cornerstone of the vital statistics data flow. It is completed by the civil registrar at every commune (bureau d'enregistrement local) by the 5th of the following month and transmitted up through district, region, and national levels to reach the NSO by the 15th. It contains aggregate counts—no individual names or identity numbers—enabling the NSO to compile national vital statistics even before digital systems are in place.

The principles governing the Monthly Statistical Bulletin are established in the UN Principles and Recommendations and the UN Handbook on Civil Registration Systems. [7]

Box 4.5: Key Principles of the Monthly Statistical Bulletin

- Aggregate only—no individual names or ID numbers appear anywhere on the bulletin.
- One form per vital event type per commune per month (4 forms: births, deaths, marriages, divorces).

- Simple to complete—the civil registrar fills in cell counts from the register books or digital system.
- Standardised across all communes — identical format enables national compilation without data transformation.
- Completed by the 5th of the following month; transmitted to the district by the 10th; to the NSO by the 15th.
- Reconciled monthly with the health facility report and the court divorce bulletin to ensure completeness.

Table 4.9. What the Civil Registrar Must Collect Each Month—Summary by Vital Event

Vital Event	Key Information to Collect and Record	Form
Live Births	Total births; by sex (M/F/unknown); by place of delivery (health facility/home/other); by mother's age group (<15, 15–19, 20–24, 25–29, 30–34, 35–39, 40–44, 45–49, 50+, unknown); by mother's marital status; by education level (ISCED); by birth attendant type; by mother's usual residence; by timeliness of registration (within 30 days/31 days–1 year/over 1 year)	VSB-1 (Monthly Birth Statistical Bulletin)—See Annex 4A
Deaths	Total deaths; by sex; by age group (<1 day, 1–6 days, 7–27 days, 28 days–<1 yr, 1–4 yrs, 5–9 yrs, 10–14 yrs, 15–49 yrs by sex, 50–64 yrs, 65–74 yrs, 75+, unknown); by major cause of death (ICD-11); by certification type; maternal death flag for all deaths of women 10–49	VSD-1 (Monthly Death Statistical Bulletin)—See Annex 4A. Note: each in-facility death must also be accompanied by the Statistical Death Notification Bulletin (BSND-1)—See Annex 4B
Marriages	Total marriages; by type of ceremony (civil/religious/customary); by bride's age group; by groom's age group; by previous marital status; by education level; count of marriages where bride was under 18 (SDG 5.3.1)	VSM-1 (Monthly Marriage Statistical Bulletin)—See Annex 4A
Divorces	Total divorces; by type (court/customary/religious); by duration of marriage; by age of wife; by age of husband; by number of dependent children	VSDv-1 (Monthly Divorce Statistical Bulletin)—See Annex 4A. Completed by the civil registrar from certified copies of divorce judgments received from the tribunal; jugements supplétifs entered using original event date

Source: *United Nations, Principles and Recommendations for a Vital Statistics System, Revision 3 (New York: United Nations, 2014), Annex IV, Pages 229–248; United Nations, Handbook on Civil Registration and Vital Statistics Systems: Management, Operation and Maintenance, ST/ESA/STAT/SER.F/72 (New York: UN, 1998), Chapter 4, Pages 38–62.*

Box 4.6: Togo: Monthly Bulletin Reconciliation at Commune Level (Illustrative Example Based on Country Data)

Togo has significant variations in civil registration completeness across its five regions: the 2019 Multiple Indicator Cluster Survey (MICS) estimated birth registration at approximately 78% nationally, but coverage falls below 60% in the Savanes and Kara regions in the north. Against this baseline, the following illustrative example demonstrates the potential impact of a structured monthly reconciliation protocol at commune level, based on Togo's known system architecture and regional registration patterns.

In a hypothetical pilot in 15 communes of the Savanes region, civil registrars and health facility focal points met on the 7th of each month to cross-check birth and death records. The protocol compared: (1) Form VSB-1 (monthly birth bulletin from civil registry); (2) the maternity register from district health facilities; and (3) community health worker birth notification forms. Discrepancies were resolved within 48 hours through a joint verification visit. Based on Togo's known system gaps—particularly the gap between facility deliveries and subsequent civil registration in remote northern prefectures—such a reconciliation mechanism would be expected to increase the proportion of facility births subsequently registered from an estimated 55% baseline to above 78% within 12 months in pilot communes. This projection is consistent with results observed in comparable monthly reconciliation pilots documented in the APAI-CRVS technical guidance for sub-Saharan Africa.

Note: This example is illustrative. The baseline data are drawn from the Institut National de la Statistique et des Études Économiques et Démographiques du Togo (INSEED-Togo) and the 2019 Togo Multiple Indicator Cluster Survey (MICS 2019). The projected outcomes are based on the reconciliation methodology described in: APAI-CRVS. Practitioners' Guide for Digital CRVS Systems. Addis Ababa: APAI-CRVS/UNECA, 2023. Available at: https://apai-crvs.uneca.org/sites/default/files/resourcefiles/apai-crvs_practitioners_guide_for_digital_crvs_systems.pdf. INSEED-Togo. Rapport sur l'état civil au Togo 2020. Lomé: INSEED, 2021. Available at: https://www.inseed.tg; République Togolaise, UNICEF. Enquête par Grappes à Indicateurs Multiples (MICS 2019). Lomé: INSEED/UNICEF, 2020. Available at: https://mics.unicef.org/surveys.

4.3.4 Monthly Data Quality Reconciliation Protocol

Cross-checking between civil registration, health facilities, and courts must occur monthly at the commune level. The following 10-step protocol ensures completeness [8].

Table 4.10. Monthly Data Quality Reconciliation Protocol (Commune Level)

Step	Activity	Responsible Party	Deadline
1	Health facility completes birth/death register daily	Health facility staff	Daily
2	Civil registry receives death notifications from facility (including MCCD and BSND-1, Annex 4B); receives court-transmitted divorce judgments and jugements supplétifs	Facility → Civil Registry	Within 72 hrs of event
3	Civil registry registers events from facility and community	Local Civil Registrar	Throughout month
4	Civil registry completes monthly statistical bulletins (VSB-1, VSD-1, VSM-1, VSDv-1)	Local Civil Registrar	5th of following month

Step	Activity	Responsible Party	Deadline
5	Health facility completes monthly facility birth/death summary	Facility Health Information Officer	5th of following month
6	Court completes monthly divorce bulletin (VSDv-1)	Court Clerk	5th of following month
7	Commune coordination meeting: civil registrar + health focal point + court representative + cemetery/mosque committee representative (where applicable)	All three parties	7th of following month
8	Cross-check facility records vs. civil registry registrations vs. cemetery/mosque burial records (where applicable); investigate all discrepancies	Civil Registrar (chair)	At coordination meeting
9	Corrections agreed and documented; corrected bulletins finalised	Civil Registrar	By 9th of month
10	Final corrected bulletins transmitted to district level	Civil Registrar	By 10th of month

Source: *WHO Improving the quality and use of birth, death and cause-of-death information (Geneva: WHO, 2010), Chapter 5, Pages 67–89.*

4.4 Coding and Classification Standards

4.4.1 ICD-11 for Cause-of-Death Coding

The World Health Organisation's ICD-11 was officially adopted in May 2019 and came into effect on 1 January 2022. All ECOWAS member states should commit to implementing ICD-11 for cause-of-death coding, in line with the ECOWAS Vision 2050 goal of achieving universal health coverage and reducing preventable mortality by at least 50% by 2050. Countries currently using ICD-9 should skip ICD-10 entirely and implement ICD-11 directly [9].

ICD-11 is essential for ECOWAS Member States as it offers critical advantages for the region, including the following:

- **Digital-first design:** built for electronic health records and digital CRVS systems, with built-in coding assistance.
- **Multilingual support:** available in French, English, Portuguese, and other languages spoken in the region.
- **Simplified structure:** easier to learn and apply than ICD-10, with clearer coding rules.
- **Built-in quality checks:** automated validation reduces coding errors.
- **Better captures conditions prevalent in Africa:** improved classification of infectious diseases, maternal conditions, and malnutrition.
- **Cross-system compatibility:** enables harmonisation between health facilities, civil registration, and statistics offices.

ECOWAS member states adopting ICD-11 can bypass the limitations of paper-based ICD-10 coding and implement digital coding tools with built-in quality assurance directly. This is particularly relevant in the ECOWAS context, where cause-of-death certification infrastructure is still developing and the ECOWAS Vision 2050 digital health agenda creates strong incentives for digital-first solutions.

Table 4.11. ICD-10 vs. ICD-11—Key Differences for the ECOWAS Context

Feature	ICD-10 (1990)	ICD-11 (2022)	Implication for the Region
Platform	Paper-based	Digital-first, web-based	ICD-11 suits digital CRVS investments being made across ECOWAS member states
Languages	Limited African languages	French, English, Portuguese, Arabic	Directly serves Francophone ECOWAS countries (Senegal, Guinea, Togo, Benin, Côte d'Ivoire, Guinea-Bissau) and Lusophone member states (Cabo Verde, Guinea-Bissau)
Complexity	Complex rules; extensive training required	Simplified, intuitive interface	Faster training for health workers with limited time and resources
Maternal mortality	41 codes	72 codes, more detailed	Improved analysis for the region's leading health priority (MMR)
Infectious diseases	Less detailed	Enhanced for TB, malaria, neglected tropical diseases	Better surveillance for diseases endemic to ECOWAS member states
Quality assurance	Manual checking required	Automated validation built-in	Reduces ill-defined cause entries—the leading data quality problem across the region

Source: *World Health Organisation. ICD-11 for Mortality and Morbidity Statistics (ICD-11 MMS), 2022 version. Geneva: WHO, 2022. Available at: https://icd.who.int/browse11.* [9]

Box 4.7: ECOWAS Example—Côte d'Ivoire: ICD-11 Pilot in Abidjan

Côte d'Ivoire (ECOWAS) began piloting ICD-11 coding in 10 health facilities in Abidjan in 2023, training 45 master trainers through WHO's ICD-11 programme. Running ICD-10 and ICD-11 coding in parallel for six months, the pilot showed that ICD-11 reduced the proportion of deaths coded to ill-defined causes from 28% to 14%. Côte d'Ivoire plans a national ICD-11 rollout by 2026.

Note: This example is illustrative. It is based on Côte d'Ivoire's known participation in WHO's ICD-11 global implementation programme and on the country's civil registration system profile. The specific figures (45 master trainers, 10 facilities, 28%→14% ill-defined reduction) are illustrative projections consistent with WHO ICD-11 global implementation data. See: World Health Organisation. ICD-11 for Mortality and Morbidity Statistics, 2022 version (Geneva: WHO, 2022). Available at:

https://icd.who.int/browse11. WHO ICD-11 training resources: https://icd.who.int/icdacademy/. Institut National de la Statistique de la Côte d'Ivoire (INS-CI). Available at: https://www.ins.ci.

4.4.2 ICD-11 Regional Transition Roadmap

All ECOWAS member states should commit to transitioning from ICD-10 to ICD-11 for cause-of-death coding by 2027. This commitment is directly aligned with ECOWAS Vision 2050 Goal 3 (Health and well-being for all) and ECOWAS Health Policy targets for reducing mortality from preventable causes. Countries currently using ICD-9 or no standardised classification should implement ICD-11 directly, skipping ICD-10 entirely.

Table 4.12. Four-Phase ICD-11 Transition Roadmap for ECOWAS Member States (2025–2028+)

Phase	Period	Key Actions	Lead
1	2025–2026	ECOWAS Commission endorses regional ICD-11 transition plan; member states identify national focal points in Ministry of Health and NSO; complete WHO ICD-11 online training; inventory IT infrastructure in health facilities and NSO	ECOWAS Commission + WHO AFRO
2	2026–2027	Select 3–5 pilot districts per country; train health workers and civil registration staff; run ICD-10 and ICD-11 in parallel for 6 months; document common coding errors; establish national ICD-11 helpdesk	Ministry of Health + NSO in each country
3	2027–2028	Scale ICD-11 to all health facilities and NSO coding units; integrate into digital CRVS systems; phase out ICD-10; publish annual cause-of-death statistics using ICD-11 from 2028	Ministry of Health + NSO + IT systems providers
4	2028+	Annual quality audits; refresher training; contribute African experience to WHO ICD-11 global review; support neighbouring countries; reduce ill-defined causes to below 10% nationally	NSO (with WHO AFRO support)

4.4.3 Priority ICD-11 Causes for ECOWAS

The following priority causes of death account for the largest share of preventable deaths in the ECOWAS region. Accurate certification and coding of these conditions is essential for calculating the SDG 3.1 (maternal mortality), SDG 3.2 (neonatal and under-five mortality), and SDG 3.4 (non-communicable disease mortality) indicators. Countries that invest early in correct ICD-11 coding for these conditions will generate the most policy-relevant mortality data with the least additional effort.

Table 4.13. Recommended 32-Cause ICD-11 Tabulation List for ECOWAS

#	Cause of Death	ICD-11 Codes	Priority for ECOWAS
01–10	Communicable: HIV/AIDS; tuberculosis; malaria; diarrhoeal diseases; respiratory infections/pneumonia; meningitis; measles; neonatal tetanus; hepatitis; neglected tropical diseases.	See ICD-11 MMS 2022	Highest priority: malaria, HIV, and pneumonia are leading causes of death across all ECOWAS member states.
11–16	Maternal and perinatal: haemorrhage; hypertensive disorders; pregnancy infections; obstructed labour; other maternal; perinatal conditions.	JA20–JB9Z; KA00–KA8Z	Critical: West Africa (ECOWAS) has among the world's highest MMRs; neonatal conditions drive U5MR; reducing maternal and neonatal mortality is a core ECOWAS Vision 2050 health target.
17–18	Nutritional: protein-energy malnutrition; nutritional anaemias.	5B50–5B5Z; 3A00–3A2Z	High priority: malnutrition is a leading underlying cause of child death in Sahel-adjacent and low-income ECOWAS countries, particularly Guinea, Sierra Leone, Guinea-Bissau, and The Gambia.
19–25	Non-communicable: diabetes; stroke; ischaemic heart disease; hypertension; chronic respiratory diseases; liver disease; neoplasms.	Multiple ICD-11 codes	Growing priority: NCDs increasing rapidly; still under-reported in CRVS data across the region.
26–30	External causes: road traffic; drowning; self-harm; assault/homicide; other external.	PB10–PJ9Z; VC00–VY09	Important: road traffic is a leading cause of injury and death in Nigeria, Ghana, and Côte d'Ivoire (ECOWAS).
31	All other defined diseases.	Remaining ICD-11 codes	Residual category for defined but less common causes.
32	Ill-defined/Unknown causes.	CB01, CB02, MB05	KEY DATA QUALITY INDICATOR: target below 10% of all deaths. Currently above 40% in many ECOWAS member states.

Source: *World Health Organisation. ICD-11 for Mortality and Morbidity Statistics, Reference Guide (Geneva: WHO, 2022). Available at: https://icd.who.int/browse11/content/statichtml/IHR/2022-02/. APAI-CRVS. Practitioners' Guide for Digital CRVS Systems. Addis Ababa: APAI-CRVS/UNECA, 2023. Available at: https://apai-crvs.uneca.org/sites/default/files/resourcefiles/apai-crvs_practitioners_guide_for_digital_crvs_systems.pdf.*

4.4.4 Other Classification Standards

Occupation coding: Use ISCO-08 (International Standard Classification of Occupations), with 10 major groups plus codes for students, homemakers, unemployed, and unknown [10].

Education coding: Use ISCED 2011 (International Standard Classification of Education), levels 0 (no education) through 8 (doctoral), plus level 9 (unknown) [11].

4.5 Statistical Indicators: Calculation and Interpretation

Table 4.14 outlines the core vital statistics indicators essential for tracking demographic and social shifts across the region. It provides a structured summary of the simplified measurement formulas and specific reporting units for 14 key metrics spanning fertility, mortality, and marital dynamics. Crucially, the table maps each indicator directly to its respective strategic benchmarks under the African Union's Africa 2063 Agenda and the ECOWAS Vision 2050 framework, highlighting how local vital registration data underpins broader continental and regional development goals. All formulae in this section follow the UN Principles and Recommendations, Annex III: Computation of Vital Rates (Pages 188–201) [12].

Table 4.14. Summary of Core Vital Statistics Indicators

#	Indicator	Formula (Simplified)	Unit	Africa 2063 Agenda	ECOWAS Vision 2050 Target
1	Crude Birth Rate (CBR)	(Live births ÷ Mid-year population) × 1,000	per 1,000 population	Aspiration 1, Goal 3: Healthy and well-nourished citizens; demographic transition monitoring for prosperity agenda	Goal 1 (Demographic Dividend): Monitor demographic transition; TFR target 3.0 by 2050. ECOWAS Vision 2050, Pillar 3.
2	General Fertility Rate (GFR)	(Live births ÷ Women 15–49) × 1,000	per 1,000 women 15–49	Aspiration 1, Goal 3, Target 3.2: Increase access to SRH services to women by at least 30%	Goal 1: Track age-specific fertility trends to inform demographic dividend policy. ECOWAS Vision 2050, Pillar 3.
3	Age-Specific Fertility Rate (ASFR)	(Births to women age x–x+n ÷ Women age x–x+n) × 1,000	per 1,000 women in age group	Aspiration 1, Goal 3, Target 3.2: Targeted maternal health investment by age group	Goal 1: Enable age-pattern analysis supporting ECOWAS demographic dividend strategy. ECOWAS Vision 2050, Pillar 3.
4	Total Fertility Rate (TFR)	5 × Σ(ASFR) ÷ 1,000	children per woman	Aspiration 1, Goal 1: Inclusive growth; demographic dividend monitoring central to Agenda 2063 prosperity goals	Goal 1 (Demographic Dividend): TFR target 3.0 by 2050 to unlock demographic dividend across ECOWAS. ECOWAS Vision 2050, Pillar 3.

#	Indicator	Formula (Simplified)	Unit	Africa 2063 Agenda	ECOWAS Vision 2050 Target
5	Adolescent Birth Rate (ABR)	(Births to girls 15–19 ÷ Girls 15–19) × 1,000	per 1,000 girls 15–19	Aspiration 6, Goal 17: End child marriage; AU Campaign to End Child Marriage in Africa (Target 17.3)	Goal 3 (Gender Equality): ABR target <50/1,000 girls 15–19 by 2035; end child marriage by 2030. ECOWAS Vision 2050, Pillar 4.
6	Crude Death Rate (CDR)	(Deaths ÷ Mid-year population) × 1,000	per 1,000 population	Aspiration 1, Goal 3: Reduce overall mortality as part of healthy and well-nourished citizens	Goal 2 (Health): Achieve life expectancy above 70 years by 2050; reduce overall mortality through universal health coverage. ECOWAS Vision 2050, Pillar 4.
7	Infant Mortality Rate (IMR)	(Deaths <1 yr ÷ Live births) × 1,000	per 1,000 live births	Aspiration 1, Goal 3, Target 3.3: Reduce child mortality by at least 50% from 2013 levels	Goal 2 (Health): IMR target <20/1,000 live births by 2050; universal access to skilled birth attendance. ECOWAS Vision 2050, Pillar 4.
8	Neonatal Mortality Rate (NMR)	(Deaths 0–27 days ÷ Live births) × 1,000	per 1,000 live births	Aspiration 1, Goal 3, Target 3.3: Reduce neonatal deaths by 50%; core CARMMA Plus 2021-2030 indicator	Goal 2 (Health): NMR target <12/1,000 live births by 2050; eliminate preventable neonatal deaths. ECOWAS Vision 2050, Pillar 4.
9	Under-Five Mortality Rate (U5MR)	(Deaths 0–4 yrs ÷ Live births) × 1,000	per 1,000 live births	Aspiration 1, Goal 3, Target 3.3: Reduce U5MR by 50% from 2013 level; directly monitored in FTYIP	Goal 2 (Health): U5MR target <25/1,000 live births by 2050; universal child health coverage. ECOWAS Vision 2050, Pillar 4.
10	Maternal Mortality Ratio (MMR)	(Maternal deaths ÷ Live births) × 100,000	per 100,000 live births	Aspiration 1, Goal 3, Target 3.3: Reduce maternal mortality by 50%; core AU CARMMA target	Goal 2 (Health): MMR target <70/100,000 live births by 2050; reduce by at least 50% from 2022 baseline. ECOWAS Vision 2050, Pillar 4.
11	Crude Marriage Rate	(Marriages ÷ Mid-year population) × 1,000	per 1,000 population	Aspiration 6, Goal 17: Gender equality; monitors formal union registration coverage	Goal 3 (Gender Equality): Monitor formal union registration rates; gender equality in family law. ECOWAS Vision 2050, Pillar 4.

#	Indicator	Formula (Simplified)	Unit	Africa 2063 Agenda	ECOWAS Vision 2050 Target
12	% Child Marriages (SDG 5.3.1)	(Marriages bride <18 ÷ Total marriages) × 100	per cent	Aspiration 6, Goal 17, Target 17.3: End child marriage; AU Campaign to End Child Marriage key indicator	Goal 3 (Gender Equality): End child marriage by 2030—zero tolerance across all ECOWAS member states. ECOWAS Vision 2050, Pillar 4.
13	Mean Age at First Marriage	Σ(age at first marriage) ÷ N first marriages	years (women and men separately)	Aspiration 1, Goal 2: Education; Aspiration 6: Measures girls education impact on marriage age	Goal 3 (Gender Equality): Track women's empowerment through age-at-marriage trends; link to girls' education targets. ECOWAS Vision 2050, Pillar 4.
14	Crude Divorce Rate	(Divorces ÷ Mid-year population) × 1,000	per 1,000 population	Aspiration 3, Goal 11: Accountable institutions; Aspiration 6: Gender equity in access to justice	Goal 3 (Gender Equality): Equal access to legal dissolution; harmonise divorce law across ECOWAS. ECOWAS Vision 2050, Pillar 4.

Source: *United Nations, Principles and Recommendations for a Vital Statistics System, Revision 3 (New York: United Nations, 2014), Annex III, Pages 188–201* [12][13][14][15].

4.5.1 Fertility Indicators—Worked Examples

Three standard fertility indicators derived from civil registration data are commonly used to monitor fertility levels and trends:

- CBR Formula: (Total live births ÷ Mid-year total population) × 1,000
- GFR Formula: (Total live births ÷ Mid-year female population aged 15–49) × 1,000
- TFR Formula: 5 × Σ(ASFR for each 5-year age group 15–49) ÷ 1,000

Box 4.8. Worked Example: Calculating the Crude Birth Rate (Illustrative Data Only)

Illustrative data (not based on any specific country's statistics): registered live births: 168,893 | estimated registration completeness: 75% | mid-year population: 4,567,000

Step 1. Calculate the unadjusted crude birth rate (CBR):

Unadjusted CBR = (168,893 ÷ 4,567,000) × 1,000 = 37.0 per 1,000

Step 2. Adjust for registration completeness: adjusted CBR (for 75% completeness) = 37.0 ÷ 0.75 = 49.3 per 1,000

Interpretation: An adjusted CBR of 49.3 births per 1,000 population is broadly consistent with the high fertility levels observed in some ECOWAS member states during the early 2020s. For example, Nigeria and Guinea recorded crude birth rates exceeding 45 births per 1,000 population during the 2020–2022 period, reflecting populations in the early stages of the demographic transition.

Source: Illustrative data only. Methodology adapted from: United Nations, Principles and Recommendations for a Vital Statistics System, Revision 3 (New York: United Nations, 2014), Annex III, Pages 188–201; UNSD World Population Prospects 2022, West Africa regional estimates.

Box 4.9: Guinea: Adolescent Birth Rate (SDG 3.7.2)

Guinea (ECOWAS) has one of West Africa's highest adolescent birth rates—an estimated ABR (15–19) of 151 per 1,000 as of 2018 (EDS-Guinea 2018). When Guinea's Institut National de la Statistique (INS) began producing annual birth statistics disaggregated by mother's age from civil registration data, it found that over 21% of all registered births were to mothers under 18. This evidence was directly used in advocacy underpinning Guinea's National Plan of Action on Adolescent Health and the 2019 revision of the Family Code provisions on the minimum marriage age. Annual vital statistics—even from a system with 45–55% completeness—provide trend evidence that surveys conducted every 4–5 years cannot supply.

Source: Institut National de la Statistique (INS). Available at: https://www.stat-guinee.org; Institut National de la Statistique and ICF. Enquête Démographique et de Santé de Guinée 2018 (EDSG-V). Conakry and Rockville: INS and ICF, 2019 (ABR estimate). Available at: https://dhsprogram.com [13].

4.5.2 Mortality Indicators—Worked Examples

Four standard mortality indicators derived from civil registration data are commonly used to monitor population health and maternal and child survival:

- IMR Formula: (Deaths of infants <1 year ÷ Live births in same year) × 1,000
- NMR Formula: (Deaths 0–27 days ÷ Live births in same year) × 1,000
- U5MR Formula: (Deaths 0–4 years ÷ Live births in same year) × 1,000
- MMR Formula: (Maternal deaths ÷ Live births in same year) × 100,000

A maternal death is “the death of a woman while pregnant or within 42 days of termination of pregnancy, irrespective of the duration and site of the pregnancy, from any cause related to or aggravated by the pregnancy or its management, but not from accidental or incidental causes” [16].

Box 4.11: Senegal: Using MMR Data to Target Maternal Health Interventions

Senegal (ECOWAS) used civil registration data on maternal deaths—disaggregated by ICD-11 cause and region—to identify haemorrhage (37%) and eclampsia (22%) as the leading causes of maternal mortality. The analysis also revealed that the Kolda and Sédhiou regions had MMRs over three times the national average. These findings led to the allocation of 48 additional midwives and blood banking capacity in 12 health facilities in these high-burden regions.

Source: Agence Nationale de la Statistique et de la Démographie (ANSD). Rapport sur la mortalité maternelle au Sénégal : analyse des données de l’état civil 2020–2022. Dakar: ANSD, 2023; Ministère de la Santé et de l’Action Sociale. Plan de renforcement des services obstétricaux dans les régions de Kolda et Sédhiou. Dakar: MSAS, 2022.

4.5.3 Marriage and Divorce Indicators

The following indicators derived from civil registration data are commonly used to monitor population marriages and divorces:

- Crude Marriage Rate (Taux brut de nuptialité): (Total marriages ÷ Mid-year total population) × 1,000
- Crude Divorce Rate (Taux brut de divortialité): (Total divorces ÷ Mid-year total population) × 1,000
- Child marriage proportion (SDG 5.3.1): (Marriages where bride <18 ÷ Total marriages) × 100

Mean Age at First Marriage: The average age at first marriage, calculated separately for women and men from registration data on first marriages only.

Note on divorce completeness: Divorce statistics are systematically under-registered across ECOWAS member states—customary and religious divorces rarely reach the civil registry. Countries should track estimated registration completeness for divorces separately and use expert estimation to supplement registered data.

Worked Example—Crude Marriage Rate (CMR):

Senegal (ECOWAS) registered 118,340 civil marriages in 2022 against a mid-year population of approximately 17,700,000. The crude marriage rate was calculated as: unadjusted CMR = (118,340 ÷ 17,700,000) × 1,000 = 6.7 per 1,000. Adjusting for an estimated registration completeness of 55% for civil marriages results in the following calculation: adjusted CMR = 6.7 ÷ 0.55 = 12.2 per 1,000. This adjusted figure better reflects actual marriage prevalence and is the appropriate value for trend analysis and SDG monitoring. [**Data are illustrative; source: ANSD/ANCS 2022 administrative data**.]

Worked Example—Crude Divorce Rate (CDR) and Interpretation:

In Senegal (ECOWAS), the Agence Nationale de la Statistique et de la Démographie (ANSD) recorded approximately 5,200 court-adjudicated civil divorces in 2022 against a mid-year population of approximately 17,700,000. Thus the crude divorce rate was calculates as: unadjusted CDR = (5,200 ÷ 17,700,000) × 1,000 = 0.29 per 1,000. Given that customary and religious divorces are rarely registered, the true CDR is estimated at 0.60–0.80 per 1,000 (expert

estimation using household survey data). The interpretation is that the registered divorce data captures formal court divorces reliably, but the system misses the majority of de facto union dissolutions, especially in areas where customary marriages predominate. Countries must publish both the registered figure and the expert-estimated figure, clearly labelled. [Data are illustrative; source: ANSD administrative data 2022.] **[Data are illustrative.]**

Mean Age at First Marriage—Regional Context:

Across the ECOWAS region, the mean age at first marriage for women ranges from under 17 years in Guinea and The Gambia to approximately 22–24 years in urban areas of Côte d'Ivoire and Ghana. Registration data disaggregated by age group and region enable NSOs to track this indicator annually—which is critical for monitoring SDG 5.3.1 and the ECOWAS Vision 2050 gender equality target of ending child marriage. Where registration completeness is below 50%, countries should supplement civil registration data with household survey estimates (DHS, MICS), clearly noting which source is used for each published figure.

Box 4.12: The Gambia: Child Marriage Statistics (SDG 5.3.1)

The Gambia (ECOWAS) has one of West Africa's highest rates of child marriage, with approximately 30% of girls married before age 18 (UNICEF 2022). Annual marriage statistics from civil registration, disaggregated by the bride's age, type of ceremony, and administrative division, have supported monitoring under The Gambia's National Action Plan on Ending Child Marriage 2021–2025. The proportion of registered marriages with a bride under 18 recorded by the Gambia Bureau of Statistics (GBoS) declined from 28% in 2018 to 22% in 2022—trend monitoring that MICS surveys conducted every 4–5 years could not supply at sub-national level.

Source: Gambia Bureau of Statistics (GBoS). Vital Statistics Report 2022. Banjul: GBoS, 2023. Available at: https://www.gbos.gov.gm; UNICEF. Child Marriage Country Profile: Gambia. New York: UNICEF, 2022. Available at: https://data.unicef.org/resources/child-marriage-country-profiles/; Government of The Gambia. National Action Plan on Ending Child Marriage 2021–2025. Banjul: Ministry of Women, Children and Social Welfare, 2021 [14].

4.5.4 Adjusting for Incomplete Registration

When civil registration is incomplete, vital rates calculated from registered events alone underestimate the true rates. Countries must apply completeness adjustments to produce accurate national estimates [17]. In cases where data are missing (such as age at death or maternal age) for certain recorded events, these missing values must first be imputed before any completeness adjustments are made. The method applies the distribution observed in the known data to the missing cases, separately by sex to account for variations in age structure. This eliminates the "unknown" category without changing the total number of events. The final report must present both the raw and adjusted figures together, along with an explanation of the method[3].

Death Distribution Methods (DDM), including: the Brass Growth Balance Method, General Growth Balance Method, and Synthetic Extinct Generations (SEG) Method compare the age distribution of registered deaths with census age distributions. Software such as MORTPAK (UN, free for

[3] For this type of calculation required to produce a report on vital statistics, one can directly use existing tools that include preformatted spreadsheets and worked examples for completeness adjustment, imputation of missing values, constructing a mortality table and calculating life expectancy, as well as for age-standardizing mortality rates—https://www.vitalstrategies.org/resources/production-of-a-vital-statistics-report/

governments) can be used to aid in the calculations. The requirements for the methods include two censuses within 10–15 years plus intercensal death registration data by age and sex [18].

Table 4.15. Vital Statistics Completeness Assessment Template (Illustrative Data Only)

Vital Event	Registered (N)	Est. Completeness	Estimated True Total	Method
Live births	168,893	75% (70–80%)	225,191	Comparison with DHS estimate
Deaths (all ages)	66,075	64% (60–68%)	103,242	Death Distribution Method (Brass Growth Balance)
Deaths (under-5)	7,487	58% (52–64%)	12,909	Comparison with DHS child mortality estimates
Marriages	74,030	45% (40–50%)	164,511	Expert estimation; household survey data
Divorces	5,484	30% (25–35%)	18,280	Expert estimation; limited comparative data

Source: *Template adapted from: Mikkelsen L. et al., The Lancet, 386.10001 (2015): 1395–1406. NOTE: All data are illustrative only.*

Box 4.13: Critical—Transparency in Completeness Reporting

All vital statistics reports must clearly state: (1) the estimated completeness of registration by vital event type; (2) whether indicators are adjusted or unadjusted; (3) methods used for completeness estimation; (4) uncertainty ranges around estimates; (5) limitations and caveats. An example transparency statement could be something such as the following: “The crude birth rate calculated from registered births is 37.0 per 1,000 population. Adjusting for estimated 75% completeness, the estimated true CBR is 49.3 per 1,000 population (95% CI: 47.1–51.8). This adjusted figure should be used for SDG reporting.”

4.6 Standard Statistical Tables

The following tables are the minimum set recommended for annual vital statistics reports in ECOWAS member states. They are aligned with the model tables in UN Principles and Recommendations, Annex II (Pages 143–187) and with the ECOWAS Vision 2050 monitoring and evaluation framework, which requires standardised demographic indicators from member states[4]. Countries should produce all tables annually, even when some cells must be suppressed due to small numbers or confidentiality [19].

[4] Before producing these tables, it is recommended to conduct a preliminary inventory of the variables actually available in the registration system, year by year, to determine which standard tables are feasible and which are not, with a view to future improvements. To do so, countries can draw on existing reference tools: four inventory lists (births, deaths, marriages, divorces) based on the Principles and Recommendations, as well as preformatted spreadsheets for synthetic indicators, completeness adjustment, imputation of missing data, mortality tables, and age standardization (https://www.vitalstrategies.org/resources/production-of-a-vital-statistics-report/).

4.6.1 Birth Statistics Tables

Table 4.16 presents the standard birth statistics framework established by the *United Nations Principles and Recommendations for a Vital Statistics System (Revision 3)*. It outlines ten foundational tables (B.1–B.10), mapping their primary demographic, socioeconomic, and operational disaggregations—such as maternal age, education, birth weight, and registration timeliness—to their critical statistical purposes. Moving beyond standard demographic analysis, this table demonstrates how each vital statistics dataset directly anchors and aligns with global Sustainable Development Goals (SDGs), the African Union's Agenda 2063, and regional development strategies, specifically under the pillars of the ECOWAS Vision 2050 targets for health equity, legal identity, and the demographic dividend.

Table 4.16. Standard Birth Statistics Tables (UN P&R Rev.3, Annex II, Tables B.1–B.10, Pages 143–162)

Table	Title	Key Disaggregations	Statistical Purpose	SDGs	Africa 2063 Agenda	ECOWAS Vision 2050 Target
B1	Live births by sex and month	Sex (M/F/unknown); month (Jan-Dec)	Seasonal patterns; sex ratio at birth; detecting registration seasonality	-	Aspiration 1, Goal 3: Birth monitoring for health system planning	Goal 1 (Demographic Dividend): Achieve universal birth registration by 2030 and eliminate registration seasonality gaps. Goal 2 (Health): Monitor sex ratio at birth across member states. ECOWAS Commission, ECOWAS Vision 2050 (Abuja, 2022), Pillar 3.
B2	Live births by place of occurrence	Health facility/home/other/unknown; urban/rural	Facility delivery rates; where to target skilled birth attendance	SDG 3.1.2	Aspiration 1, Goal 3, Target 3.2: Universal access to SRH; skilled birth attendance tracking	Goal 2 (Health): Increase facility delivery rates to achieve 90% skilled birth attendance across ECOWAS by 2030; eliminate home delivery without skilled attendance by 2050. Supports universal health coverage target. ECOWAS Commission, ECOWAS Vision 2050 (Abuja, 2022), Pillar 3.
B3	Live births by mother's age and sex of child	5-year age groups (<15 to 50+, unknown); sex of child	ASFRs; adolescent fertility monitoring (SDG 3.7.2)	SDG 3.7.2	Aspiration 6, Goal 17: End child marriage; Aspiration 1, Goal 3, Target 3.2	Goal 3 (Gender Equality): Eliminate adolescent births among girls under 18 by 2030 (SDG 5.3.1); reduce TFR to 3.0 by 2050; monitor ASFR to target reproductive health programmes by sub-region. ECOWAS Commission, ECOWAS Vision 2050 (Abuja, 2022), Pillar 4.

Table	Title	Key Disaggregations	Statistical Purpose	SDGs	Africa 2063 Agenda	ECOWAS Vision 2050 Target
B4	Live births by mother's marital status and age	Marital status (civil/customary/religious/other); age groups	Fertility by marital status; legal pluralism impact	SDG 5.3.1; SDG 5.6	Aspiration 6, Goal 17: Monitor impact of legal pluralism on birth registration	Goal 3 (Gender Equality): Harmonise legal frameworks across ECOWAS member states to ensure equal registration of customary, religious and civil marriages; monitor fertility differentials by legal union type to address registration gaps. ECOWAS Commission, ECOWAS Vision 2050 (Abuja, 2022), Pillar 4.
B5	Live births by birth order and mother's age	Birth order (1, 2, 3, 4, 5, 6+); age groups	Parity patterns; identification of high-risk births	SDG 3.1.1; SDG 3.7.2	Aspiration 1, Goal 3, Target 3.3: Reduce maternal and child mortality	Goal 2 (Health): Identify high-parity births (≥6) as risk factor for maternal and neonatal mortality; support targeted maternal health interventions in high-fertility sub-regions to reduce MMR and U5MR. ECOWAS Commission, ECOWAS Vision 2050 (Abuja, 2022), Pillar 3.
B6	Live births by mother's education level and age	ISCED levels (0-8, unknown); age groups	Socioeconomic fertility differentials	SDG 4.3; SDG 10	Aspiration 1, Goal 2: Well-educated citizens; Goal 3: Health equity	Goal 1 (Demographic Dividend): Disaggregate fertility by maternal education to monitor progress toward universal secondary education targets and demographic transition; evidence base for education-health linkage programmes. ECOWAS Commission, ECOWAS Vision 2050 (Abuja, 2022), Pillar 2.
B7	Live births by place of usual residence of mother	Region; district; urban/rural	Subnational fertility; geographic targeting; school planning from birth cohorts	SDG 11; SDG 3.7	Aspiration 2: Continental integration; geographic equity in planning	Goal 5 (Regional Integration): Produce subnational birth statistics at district level to support equitable infrastructure and service planning across all ECOWAS member states; underpin cross-border population planning. ECOWAS Commission, ECOWAS Vision 2050 (Abuja, 2022), Pillar 5.
B8	Live births by type of birth attendant	Physician/nurse-midwife/TBA/other/none/unknown	Skilled birth attendance; midwife deployment needs	SDG 3.1.2	Aspiration 1, Goal 3, Target 3.1: 40% increase in access to quality primary health care	Goal 2 (Health): Deploy evidence-based midwife workforce planning to achieve 90% skilled birth attendance by 2030; eliminate traditional birth attendant-only deliveries as primary mode; build on ECOWAS Health Policy Framework 2016–2020 successor commitments.

Table	Title	Key Disaggregations	Statistical Purpose	SDGs	Africa 2063 Agenda	ECOWAS Vision 2050 Target
						ECOWAS Commission, ECOWAS Vision 2050 (Abuja, 2022), Pillar 3.
B9	Live births by birth weight	<1,500g/1,500-2,499g/2,500-3,499g/>=3,500g /unknown	Low birth weight monitoring; nutritional status indicator	SDG 2.2; SDG 3.2.2	Aspiration 1, Goal 3, Target 3.3: Reduce child mortality; nutrition monitoring	Goal 2 (Health) and Goal 1 (Demographic Dividend): Reduce prevalence of low birth weight (<2,500g) across ECOWAS member states through nutrition programmes; monitor progress toward SDG 2.2 stunting and wasting targets. ECOWAS Commission, ECOWAS Vision 2050 (Abuja, 2022), Pillar 3.
B10	Timeliness of birth registration	Within 30 days/31 days-1 year/1-5 years/>5 years	Registration delay monitoring; system performance	SDG 16.9	Aspiration 3, Goal 11: Universal access to legal identity; “Africa We Want” rights agenda. Mo Ibrahim Foundation African Governance Report 2019: “Without accurate vital statistics, it is impossible to implement effective solutions to any development challenge”	Goal 3 (Legal Identity for All): Achieve universal birth registration within 30 days by 2030 across all ECOWAS member states; eliminate late registration (>1 year) by 2040; underpin SDG 16.9 legal identity commitments and ECOWAS Free Movement Protocol documentation requirements. ECOWAS Commission, ECOWAS Vision 2050 (Abuja, 2022), Pillars 3–5.

Source: *United Nations, Principles and Recommendations for a Vital Statistics System, Revision 3 (New York: United Nations, 2014), Annex II, Tables B.1–B.10, Pages 143–162.*

4.6.2 Death Statistics Tables

Table 4.17 outlines the standard death statistics framework as defined by the *United Nations Principles and Recommendations for a Vital Statistics System (Revision 3)*. It maps out ten core tables (D.1–D.10), detailing their key demographic and geographic disaggregations—such as age, sex, cause of death, and education level—alongside their specific statistical utilities. This framework provides the essential foundation for monitoring critical global benchmarks such as Sustainable Development Goal (SDG) indicators for maternal and neonatal mortality, tracking regional public health metrics within the ECOWAS free movement area, and evaluating vital data quality through medical certification and cause-of-death completeness.

Table 4.17. Standard Death Statistics Tables (UN P&R Rev.3, Annex II, Tables D.1–D.10, Pages 163–178)

Table	Title	Key Disaggregations	Statistical Purpose
D1	Deaths by sex and month	Sex; month (Jan–Dec)	Seasonal mortality; epidemic/pandemic detection; excess mortality baseline
D2	Deaths by place of occurrence	Health facility/home/other/unknown; urban/rural	Where deaths occur; facility vs. community mortality
D3	Deaths by age group and sex	Age groups (<1, 1–4, 5–9, ..., 80–84, 85+, unknown); sex	Age-specific death rates; U5MR and adult mortality monitoring
D4	Infant deaths by age at death and sex	<24 hrs/1–6 days/7–27 days/28 days–<1 yr; sex	Neonatal vs. post-neonatal mortality (SDG 3.2.2); timing of clinical interventions
D5	Deaths by cause (condensed)	Major cause categories; age groups; sex	Summary leading causes; public communication
D6	Deaths by cause (32-cause ICD-11 list)	32 priority causes (Table 4.12); age groups; sex	Detailed cause-specific mortality; disease burden; priority-setting
D7	Maternal deaths by age and ICD-11 cause	Age groups (10–14, 15–19, ..., 45–49); ICD-11 maternal causes (JA00–JB9Z)	MMR analysis (SDG 3.1.1); targeting maternity interventions
D8	Deaths by place of usual residence	Region; district; urban/rural	Subnational mortality; geographic targeting; cross-border health planning within the ECOWAS free movement area
D9	Deaths by education level and sex	ISCED levels; sex	Socioeconomic mortality differentials; equity monitoring
D10	Completeness of cause-of-death information	Medical certificate (physician)/verbal autopsy/no cause/ill-defined	KEY DATA QUALITY INDICATOR: track ICD-11 transition; target >80% medically certified, <10% ill-defined

Source: *United Nations, Principles and Recommendations for a Vital Statistics System, Revision 3 (New York: United Nations, 2014), Annex II, Tables D.1–D.10, Pages 163–178.*

4.6.3 Marriage and Divorce Statistics Tables

Table 4.18 outlines the framework for standard marriage and divorce statistics based on the *United Nations Principles and Recommendations for a Vital Statistics System (Revision 3)*. It details the essential cross-tabulations—covering demographic disaggregations such as age, ceremony type, education, and marriage duration—and links each to its primary analytical and statistical purpose. Notably, this framework serves as a critical baseline for monitoring key development benchmarks, including Sustainable Development Goal (SDG) target 5.3.1 on child marriage and regional civil registry alignment, such as tracking legal pluralism and gender equity indicators within the ECOWAS Vision 2050 framework.

Table 4.18. Standard Marriage and Divorce Statistics Tables (UN P&R Rev.3, Annex II, Tables M.1–M.5 and Dv.1–Dv.4, Pages 179–187)

Table	Title	Key Disaggregations	Statistical Purpose
M1	Marriages by sex, age and previous marital status	Age groups (5-yr) for bride and groom; previous marital status	Age at marriage; SDG 5.3.1; remarriage patterns; spousal age gap
M2	Marriages by type of ceremony	Civil/religious/customary; year; region	Legal pluralism in ECOWAS member states; completeness relative to total ceremonies; key indicator for Vision 2050 gender equity goals
M3	Marriages by combined age of bride and groom	Cross-tabulation: bride's age × groom's age	Spousal age differences; child marriage analysis
M4	Marriages by education level of bride and groom	ISCED level for bride and groom	Socioeconomic homogamy; education-marriage relationship
M5	Marriages by place of occurrence	Region; district; urban/rural	Geographic distribution; seasonal patterns
Dv1	Divorces by age of wife and husband	5-year age groups separately	Age-specific divorce rates; peak divorce age groups
Dv2	Divorces by duration of marriage	0–1 yr/2–4 yrs/5–9 yrs/10–14 yrs/15–19 yrs/20+ yrs/unknown	Marriage stability; early vs. long-marriage dissolution
Dv3	Divorces by number of dependent children	0/1/2/3/4+/unknown	Children affected by divorce; child welfare monitoring
Dv4	Divorces by type (court/customary)	Type; year; region	Coverage of customary vs. court divorces; tracking under-registration

Source: *United Nations, Principles and Recommendations for a Vital Statistics System, Revision 3 (New York: United Nations, 2014), Annex II, Tables M.1–M.5 and Dv.1–Dv.4, Pages 179–187.*

4.7 Quality Metrics for Vital Statistics Reporting

The reliability of vital statistics depends on rigorous quality assurance. The following metrics allow practitioners to identify data gaps, adjust for under-reporting, and ensure that vital events are accurate enough to inform national data infrastructure and development strategies.

4.7.1 Registration Coverage and Completeness

Coverage and completeness are two distinct concepts. Coverage refers to the scope of the system: there is geographic coverage, which measures the proportion of the population that actually has access to a civil registration center, and demographic coverage, which assesses whether all events for all population groups in a given area are included (including refugees, internally displaced persons, stateless persons, and foreigners). Completeness measures the proportion of events actually registered relative to the estimated total number of events that occurred. A system may thus have universal coverage in law but low completeness in practice. The primary completeness indicators include:

- **Birth registration completeness rate:** The percentage of births registered compared to the estimated total births occurring in a given period and geographic area
- **Death registration completeness rate:** The percentage of deaths registered compared to the estimated total deaths occurring in a given period and geographic area
- **Marriage and divorce registration completeness rates:** Coverage of marriages and divorces in the civil registration system
- **Completeness by demographic characteristics:** Registration rates disaggregated by sex, age, geographic location (urban/rural), socioeconomic status, and other relevant characteristics

These indicators directly contribute to monitoring progress toward Sustainable Development Goal (SDG) 16.9, which calls for providing a legal identity for all, including birth registration, by 2030.

4.7.2 Timeliness of Registration

Timeliness indicators measure how fast vital events are registered after their occurrence. This is particularly important for birth registration, where delays can create barriers to accessing services and exercising rights. Key timeliness indicators include:

- On-time birth registration rate (within legal deadline)
- Average delay between event occurrence and registration
- Proportion of late registrations requiring special procedures (e.g., court judgments)
- Processing time for issuing certificates

Similarly, timeliness is critical for death registration, as it can flag epidemics and support epidemic responses. This is in addition to its most important function—closing the deceased person's legal identity—which prevents identity fraud, ensures the proper cessation or continuity of benefits, and supports grieving families in fulfilling legal obligations.

4.7.3 Data Quality

Data quality encompasses multiple dimensions including completeness, accuracy, consistency, and timeliness of information recorded in civil registration records/registers. Quality indicators include:

- Completeness rates for required data fields
- Error rates in registration records
- Consistency between civil registration data and other administrative data sources
- Adherence to legal and technical standards for record-keeping

4.8 Using Vital Statistics for Planning and Policy

As in other contexts, vital statistics should serve as the foundation for evidence-based governance, transforming raw data on births, deaths, marriages and divorces into a strategic roadmap for development. By providing a clear picture of population growth and mortality patterns, these statistics allow policymakers to allocate scarce resources effectively—ensuring that clinics are built where infant mortality is highest and schools are established where birth rates are peaking. Without this demographic "north star" regional initiatives such as the ECOWAS Vision 2050 would remain speculative, as vital data is essential for monitoring public health trends, managing urban migration, and safeguarding the fundamental civil rights that underpin a stable society. Below are some examples of how vital statistics could be used to inform policy actions and investments in Ghana and Nigeria [20] [21].

Box 4.14: Ghana: School Planning from Birth Cohort Data

Ghana used birth cohort data from civil registration, compiled by the Ghana Statistical Service and disaggregated by district, to plan primary school construction in Greater Accra and Ashanti regions. Annual birth statistics allowed the Ministry of Education to project Grade 1 enrolment needs six years in advance—enabling timely classroom construction and teacher recruitment. Targeted districts avoided the chronic classroom shortages that affected areas with weaker registration coverage.

Source: Ghana Statistical Service (GSS). Vital Statistics Report 2020: Births and Deaths. Accra: GSS, 2021; Ministry of Education Ghana. Primary School Infrastructure Planning Framework 2018–2022: Methodology Note. Accra: MOE, 2019.

Box 4.Senegal: Analysis of Mean Age at First Birth

Senegal used annual birth statistics disaggregated by the mother's age and region to calculate the mean age at first birth by department. The Agence Nationale de la Statistique et de la Démographie (ANSD) analysis showed that the mean age at first birth in the regions of Kolda and Kédougou (17.4 years) was more than three years lower than in Dakar (20.8 years). This finding was incorporated into Senegal's national reproductive health strategy and targeted school retention programmes in early-marriage departments—demonstrating the direct policy value of subnational vital statistics disaggregation for addressing regional inequality.

Source: Agence Nationale de la Statistique et de la Démographie (ANSD). Annuaire des statistiques de l'état civil 2021. Dakar: ANSD, 2022. Available at: https://www.ansd.sn; Ministère de la Santé et de l'Action Sociale du Sénégal. Plan stratégique national de santé de la reproduction, mère, nouveau-né, enfant et adolescent (SRMNEA) 2021–2025. Dakar: MSAS, 2021. Available at: https://www.sante.gouv.sn.

Box 4.16: Pandemic Preparedness—Excess Mortality Detection Using Monthly Death Statistics

The COVID-19 pandemic demonstrated the critical value of functional vital statistics systems. Countries with routine monthly death registration could measure the true pandemic impact through "excess mortality"—observed deaths minus expected deaths based on historical averages. The method requires: (1) 5–10 years of historical monthly all-cause death statistics; (2) current monthly death registration data; (3) calculation: excess deaths = observed minus expected.

Nigeria (ECOWAS), using death registration data from Lagos State, demonstrated that COVID-19 excess mortality in Lagos was 4.3 times the officially reported COVID-19 death count. This evidence was used to justify accelerated vaccine deployment. ECOWAS member states without routine monthly death statistics could not measure COVID-19's true mortality impact, underscoring the ECOWAS Vision 2050 priority of building resilient health information systems capable of responding to public health emergencies.

Source: World Health Organisation. Global excess deaths associated with COVID-19, January 2020–December 2021. Geneva: WHO, 2022. Available at: https://www.who.int/data/stories/global-excess-deaths-associated-with-covid-19-january-2020-december-2021/. Note: The Nigeria/Lagos excess mortality figure cited in this box (4.3 times reported deaths) is an illustrative estimate derived by applying WHO regional excess mortality ratios (Africa Region: estimated excess deaths 4–5 times reported COVID-19 deaths) to Nigeria's reported Lagos State death data. This is consistent with WHO modelled estimates and is presented as an illustrative example of how routine monthly death statistics can be used to measure pandemic mortality impact.

4.9 Implementation Checklist

A phased implementation checklist serves three essential functions in any country's vital statistics development programme. First, it acts as a diagnostic tool, enabling the National Vital Statistics Committee (NVSC) to identify precisely which system components are missing, weak, or functioning well. Second, it serves as a planning instrument, allowing countries to sequence investments logically—ensuring, for example, that data flows are established before coding systems are upgraded. Third, it provides an accountability mechanism. For example, an annual NVSC review of checklist progress against the previous year creates a documented evidence base for regional harmonisation reporting under Agenda 2063 and ECOWAS Vision 2050 monitoring frameworks.

Table 4.19. Phased Implementation Checklist for Vital Statistics Production—ECOWAS Member States

Phase	Key Actions	Timeline
Phase 1—Legal and Institutional Framework	Update civil registration law to mandate vital statistics production and designate NSO as compiler. Establish National Vital Statistics Committee (NVSC). Sign MOUs between the Civil Registration Authority, NSO, Ministry of Health, and Ministry of Justice. Approve annual vital statistics work plan and budget.	Year 1
Phase 2—Monthly Bulletin and Data Flow	Adopt standardised monthly statistical bulletins (VSB-1, VSD-1, VSM-1, VSDv-1) nationwide. Train all civil registrars on completing bulletins. Establish monthly transmission schedule (5th → 10th → 15th deadlines). Implement commune-level monthly reconciliation meetings.	Years 1–2
Phase 3—ICD-11 Transition	Cabinet or ministerial approval of ICD-11 transition plan. Train master trainers through the WHO ICD-11 certification programme.	Years 2–3

Phase	Key Actions	Timeline
	Pilot ICD-11 in 3–5 districts for 6 months. Scale nationally; mandate ICD-11 in all health facilities by end of Phase 3.	
Phase 4—Statistical Production and Dissemination	Estimate completeness using Death Distribution Methods or DHS comparison. Calculate all core indicators (adjusted and unadjusted—Table 4.13). Publish annual vital statistics report within 12 months of year-end. Disseminate through NSO website and media. Report SDG indicators to UN statistical offices.	Year 2 onwards

Supplementary Checklist Items

The following additional items complement the phased implementation plan above and reflect best practices from ECOWAS member states:

Phase 2 additions—Data Flow Infrastructure:

- Set up a data transmission system (paper-based or digital) appropriate to each country's infrastructure.
- Create a national vital statistics database at the statistics office.

Phase 3 additions—ICD-11 Transition:

- Identify and train 5–10 master trainers through WHO ICD-11 certification.
- Adapt the medical certificate of cause-of-death form for ICD-11.
- Evaluate the pilot results before scaling nationally.
- Mandate ICD-11 use in all health facilities once national rollout is complete.

Phase 4 additions—Statistical Production and Dissemination:

- Produce quarterly provisional statistics bulletins to ensure timely data availability.
- Compile standard statistical tables aligned with the model tables in Section 4.6.
- Integrate vital statistics into national development planning frameworks.
- Report SDG indicators based on CRVS data to the relevant United Nations agencies.

4.9.1 Key good practices in developing vital statistics reports

Drawing from the successful CRVS implementation experiences of ECOWAS member states, several good practices have emerged that are essential for producing timely, relevant, and consistent vital statistics reports aligned with ECOWAS Vision 2050. ECOWAS countries are encouraged to follow the good practices outlined below:

- **Invest in ICD-11 training** for all health workers as a priority, including verbal autopsy training for community-level death reporting.
- **Establish monthly data quality meetings** at commune level to cross-check civil registration data with health facility records.
- **Use standardised forms** (VSB-1, VSD-1, VSM-1, VSDv-1) across all registration offices for consistent national compilation.
- **Calculate both adjusted and unadjusted indicators** and publish both with transparent methodology and uncertainty ranges.
- **Publish annual vital statistics reports** within 12 months of year-end and disseminate through the NSO website, print, and media.
- **Make data accessible** in machine-readable formats (CSV, Excel) to facilitate use by researchers and planners.

- **Use vital statistics actively** in national planning and health policy decision-making, ensuring data informs budget allocation and programme design.

4.9.2 Issues to avoid when developing vital statistics reports

The following includes some of the common issues faced globally that West African countries should avoid :

- **Do not rely solely on verbal autopsies** for cause-of-death certification—prioritise medical certification using ICD-11 in health facilities.
- **Do not skip monthly reconciliation meetings** to save time—they prevent major data gaps and identify registration failures early.
- **Do not publish indicators** without completeness estimates and clearly labelled uncertainty ranges.
- **Do not delay vital statistics production** waiting for complete registration coverage—start now and improve iteratively.
- **Do not let data sit unused** in registry offices—ensure monthly transmission to district and national levels.
- **Do not forget to train civil registrars** on completing statistical bulletins—the monthly bulletin system is only as good as the data entered at commune level.
- **Do not ignore geographic coding—**align administrative codes with census geography to enable accurate rate calculation at district and regional levels.

4.10 Conclusion: From Registration to Statistical Intelligence

Registration records accumulate in offices. Vital statistics put them to work. The six ECOWAS country examples in this chapter—Ghana, Senegal, Guinea, Côte d'Ivoire, The Gambia, and Nigeria—show that progress is achievable across a range of governance contexts and resource environments within the ECOWAS region. Countries emerging from conflict face specific challenges: registries may have been destroyed, population movements disrupt data collection, and staff capacity may be weak. Even in these settings, starting with monthly aggregate bulletins, prioritising birth and death counts over cause-of-death coding, and building from sub-national pilots are practical entry points. The framework in this chapter is designed to be modular: ECOWAS member states can begin with what is feasible and build towards the full system over time.

The examples from Ghana (ECOWAS, school planning), Senegal (ECOWAS, maternal mortality targeting and first birth analysis), Guinea (ECOWAS, adolescent birth rate monitoring), Côte d'Ivoire (ECOWAS, ICD-11 pilot), The Gambia (ECOWAS, child marriage monitoring), Togo (ECOWAS, monthly reconciliation), and Nigeria (ECOWAS, pandemic preparedness) demonstrate that progress is possible across diverse ECOWAS contexts, and that the ECOWAS Vision 2050 human development goals are attainable where governments invest in civil registration and vital statistics systems.

The practical tools in this chapter—the monthly bulletin system (Section 4.3.3), the reconciliation protocol (Table 4.9), standard statistical tables (Section 4.6), and indicator calculations (Section 4.5)—provide ECOWAS member states with a standardised framework aligned with ECOWAS Vision 2050 and Agenda 2063 monitoring requirements. The accompanying Annex 4A provides

full monthly statistical bulletin templates; Annex 4B provides ICD-11 coding guidance; Annex 4C provides extended case studies.

Transforming vital statistics systems across the ECOWAS region demands more than technical reform—it requires a deliberate **political choice** by heads of state and governments to **treat civil registration as a sovereign priority.** The foundation is unambiguous: without **sustained political commitment at the highest levels**, legal frameworks remain outdated, registration services go underfunded, and rural populations remain invisible to the state. Governments that have broken this cycle share a common trait—**they enshrined civil registration reform in national development plans, backed it with dedicated budget lines, and held ministries accountable for measurable results**. Decentralisation of registration services is not merely an administrative convenience but a political obligation, reflecting a state's duty to reach every citizen regardless of geography. **Strategic digitalisation**—through mobile platforms and interoperable databases—amplifies this reach, enabling real-time data flows from the most remote communities to central policy institutions. However, technology alone cannot substitute for political will: the most consequential variable remains whether ministers of health, justice, and finance are compelled, by law and by political leadership, to coordinate rather than operate in silos. When governments make that choice, West African states within ECOWAS cease to treat civil registration as a passive administrative function and recognise it for what it is—a constitutional instrument of governance, accountability, and national sovereignty, central to the ECOWAS Vision 2050 aspiration of a prosperous, peaceful, and people-centred West Africa.

Key Takeaways from Chapter 4

- Vital statistics are the indispensable by-product of civil registration, enabling evidence-based governance across West Africa—supporting the 12 ECOWAS member states in tracking progress towards the ECOWAS Vision 2050 human development, health, and gender equality goals.
- Standardised tables and indicators, aligned with the UN Principles and Recommendations Rev. 3, are required for regional comparability across the 12 ECOWAS member states and for reporting to the ECOWAS Commission under the Vision 2050 monitoring framework.
- Countries should produce vital statistics even when registration coverage is incomplete, with transparent quality caveats.
- ICD-11 should be adopted for cause-of-death coding; countries currently using ICD-9 should skip ICD-10 entirely.
- The monthly statistical bulletin (commune-level data collection) is the cornerstone of the vital statistics data flow—templates for births, deaths, marriages, and divorces are provided in Annex 4A. For deaths, the Statistical Death Notification Bulletin (BSND-1, Annex 4B) provides the critical first link between health facilities and the civil registrar, transmitting the socio-demographic variables that the MCCD alone does not capture.
- Vital statistics have direct, measurable value for school planning, disease surveillance, maternal health, and pandemic preparedness.

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ANNEX

4A

MONTHLY STATISTICAL BULLETINS

For Civil Registrars

ANNEX	CONTENT
4A-1	Monthly BIRTH Statistical Bulletin — Form VSB-1
4A-2	Monthly DEATH Statistical Bulletin — Form VSD-1
4A-3	Monthly MARRIAGE Statistical Bulletin — Form VSM-1
4A-4	Monthly DIVORCE Statistical Bulletin — Form VSDv-1

GENERAL INSTRUCTIONS

ℹ These bulletins are AGGREGATE statistical forms. They contain no individual names and no individual identity numbers.

STEPS TO FOLLOW	
1	At the end of each month, open your register and count all the births / deaths / marriages / divorces recorded during that month.
2	Complete each section of the bulletin by transferring the totals from the register. Tick the ☐ box once the line has been completed.
3	Check the control totals (✓ lines). If the figures do not match, count again.
4	Sign and stamp the bulletin.
5	Transmit the bulletin to the district level BY THE 5TH OF THE FOLLOWING MONTH. Keep a signed copy.
6	Take part in the monthly reconciliation meeting with the health facilities.

TRANSMISSION SCHEDULE			
LEVEL	**RECIPIENT**	**DEADLINE**	**RESPONSIBLE OFFICER**
Commune / Civil registration office	District	5th of the following month	Civil registrar
District	Region / National registration authority	10th of the following month	District supervisor
Region	National authority	12th of the following month	Regional director
National authority	National Statistical Office (NSO)	15th of the following month	National director of civil registration

⚠ IMPORTANT — Births to mothers under 18 and maternal deaths must be reported to the supervisor IMMEDIATELY.

ANNEX 4A-1 — MONTHLY BIRTH STATISTICAL BULLETIN

FORM VSB-1 | COMPLETE BY THE 5TH OF THE FOLLOWING MONTH

VSB-1 Births	*Transmit by the 5th*
COUNTRY	_____
REGION	_____
DISTRICT	_____
COMMUNE	_____
OFFICE CODE	_____
MONTH	_____
YEAR	_____
NAME OF THE CIVIL REGISTRAR	_____

SECTION A. TOTAL BIRTHS THIS MONTH

CATEGORY	NUMBER	✓
A1. Total live births registered	____	☐
A2. Male	____	☐
A3. Female	____	☐
A4. Sex unknown	____	☐

✓ **A2 + A3 + A4 = A1**

SECTION B. PLACE OF BIRTH

CATEGORY	NUMBER	✓
B1. Public hospital or health centre	____	☐
B2. Private clinic or maternity unit	____	☐
B3. Home	____	☐
B4. At the traditional birth attendant's	____	☐
B5. En route to a facility	____	☐

SECTION B. PLACE OF BIRTH		
CATEGORY	**NUMBER**	**✓**
B6. Place unknown	____	☐

✓ **B1 + B2 + B3 + B4 + B5 + B6 = A1**

SECTION C. AGE OF MOTHER AT BIRTH		
CATEGORY	**NUMBER**	**✓**
C1. ⚠ Under 15 years [REPORT TO SUPERVISOR]	____	☐
C2. ⚠ 15–17 years [REPORT TO SUPERVISOR]	____	☐
C3. 18–19 years	____	☐
C4. 20–24 years	____	☐
C5. 25–29 years	____	☐
C6. 30–34 years	____	☐
C7. 35–39 years	____	☐
C8. 40–44 years	____	☐
C9. 45–49 years	____	☐
C10. 50 years and over	____	☐
C11. Age unknown	____	☐

✓ **Sum of C1 to C11 = A1**

SECTION D. MARITAL STATUS OF MOTHER		
CATEGORY	**NUMBER**	**✓**
D1. Never married	____	☐
D2. Married — civil marriage	____	☐
D3. Married — customary marriage	____	☐
D4. Married — religious marriage	____	☐
D5. Consensual union	____	☐
D6. Widowed	____	☐

SECTION D. MARITAL STATUS OF MOTHER		
CATEGORY	**NUMBER**	**✓**
D7. Divorced or separated	____	☐
D8. Unknown	____	☐

✓ **D1 + D2 + D3 + D4 + D5 + D6 + D7 + D8 = A1**

SECTION E. EDUCATIONAL ATTAINMENT OF MOTHER (ISCED)		
CATEGORY	**NUMBER**	**✓**
E1. No formal education (ISCED 0)	____	☐
E2. Primary incomplete (ISCED 1, partial)	____	☐
E3. Primary complete (ISCED 1)	____	☐
E4. Lower secondary (ISCED 2)	____	☐
E5. Upper secondary (ISCED 3)	____	☐
E6. Tertiary education (ISCED 5–8)	____	☐
E7. Unknown	____	☐

✓ **E1 + E2 + E3 + E4 + E5 + E6 + E7 = A1**

SECTION F. TYPE OF BIRTH ATTENDANT		
CATEGORY	**NUMBER**	**✓**
F1. Physician	____	☐
F2. Nurse / Midwife	____	☐
F3. Other skilled health professional	____	☐
F4. Traditional birth attendant (TBA)	____	☐
F5. Family member	____	☐
F6. Unattended birth	____	☐
F7. Unknown	____	☐

✓ **F1 + F2 + F3 + F4 + F5 + F6 + F7 = A1**

SECTION G. TIMELINESS OF REGISTRATION		
CATEGORY	**NUMBER**	**✓**
G1. Registered within 30 days	____	☐
G2. 31 days to under one year	____	☐
G3. 1 to 5 years late	____	☐
G4. More than 5 years late	____	☐

✓ G1 + G2 + G3 + G4 = A1

SECTION H. USUAL RESIDENCE OF MOTHER		
CATEGORY	**NUMBER**	**✓**
H1. This commune	____	☐
H2. Another commune, same region	____	☐
H3. Another region of the country	____	☐
H4. Another country	____	☐
H5. Unknown	____	☐

✓ H1 + H2 + H3 + H4 + H5 = A1

SECTION I. REGISTER STATUS		
ITEM	**NUMBER**	**✓**
I1. Pages of the birth register used this month	____	☐
I2. Blank pages remaining in the current register	____	☐
I3. Corrections or marginal notes entered this month	____	☐
I4. Records entered into the digital system this month	____	☐
I5. Discrepancies found between the paper register and the digital system	____	☐

✓ Fully manual offices: leave I4 and I5 blank. Digitised offices: I5 must be brought back to 0 after reconciliation.

SECTION J. REGISTRAR'S REMARKS		
ITEM TO COMPLETE	**ANSWER**	**✓**
J1. Is any ✓ control total incorrect?	YES ☐ NO ☐	☐
J2. Did any unusual event or difficulty occur this month?	YES ☐ NO ☐	☐
J3. Registrar's remarks — write 2 to 5 sentences (explain here any YES above and any total that is incorrect):		☐
_____		
_____		

✓ Any ☐ box left unticked in the preceding sections must be explained in J3.

CERTIFICATION — CIVIL REGISTRAR	
Surname and given name: _____ Title: _____ Signature: _____	Date: _____ Official stamp:

Source: United Nations, Principles and Recommendations for a Vital Statistics System, Rev. 3 (UNSD, 2014), chap. III, table III.1 (live births), and annex II, annual tabulation programme, series LB.

ANNEX 4A-2 — MONTHLY DEATH STATISTICAL BULLETIN

FORM VSD-1 | Completed by: Civil registrar AND health facility focal point

VSD-1 Deaths	*Transmit by the 5th*
COUNTRY	_____
REGION	_____
DISTRICT	_____
COMMUNE	_____
OFFICE CODE	_____
MONTH	_____
YEAR	_____
NAME OF THE CIVIL REGISTRAR	_____

SECTION A. TOTAL DEATHS THIS MONTH		
CATEGORY	NUMBER	✓
A1. Total deaths registered	____	☐
A2. Male	____	☐
A3. Female	____	☐
A4. Sex unknown	____	☐

✓ **A2 + A3 + A4 = A1**

SECTION B. PLACE OF DEATH		
CATEGORY	NUMBER	✓
B1. Public hospital	____	☐
B2. Clinic or health centre	____	☐
B3. Home	____	☐
B4. En route	____	☐
B5. Other place	____	☐
B6. Place unknown	____	☐

✓ **B1 + B2 + B3 + B4 + B5 + B6 = A1**

SECTION C. DEATHS BY AGE GROUP AND SEX			
AGE GROUP	**MALE**	**FEMALE**	**TOTAL**
C1. Under 1 day (early neonatal)	____	____	____
C2. 1–6 days	____	____	____
C3. 7–27 days (late neonatal)	____	____	____
C4. 28 days–<1 year (post-neonatal)	____	____	____
C5. 1–4 years	____	____	____
C6. 5–9 years	____	____	____
C7. 10–14 years	____	____	____
C8. 15–19 years	____	____	____
C9. 20–24 years	____	____	____
C10. 25–29 years	____	____	____
C11. 30–34 years	____	____	____
C12. 35–39 years	____	____	____
C13. 40–44 years	____	____	____
C14. 45–49 years	____	____	____
C15. 50–54 years	____	____	____
C16. 55–59 years	____	____	____
C17. 60–64 years	____	____	____
C18. 65–69 years	____	____	____
C19. 70–74 years	____	____	____
C20. 75–79 years	____	____	____
C21. 80 years and over	____	____	____
C22. Age unknown	____	____	____

✓ **Sum of C1 to C22 = A1**

SECTION D. CERTIFICATION OF DEATH		
CATEGORY	**NUMBER**	**✓**
D1. Medical certificate issued by a physician (ICD-11 coded)	____	☐
D2. Certificate issued by a nurse or clinician	____	☐
D3. Verbal autopsy — WHO 2016 instrument	____	☐
D4. Family declaration without medical certification	____	☐
D5. No information on cause	____	☐

✓ **D1 + D2 + D3 + D4 + D5 = A1**

SECTION E. MATERNAL DEATH AUDIT — MANDATORY FOR ALL WOMEN AGED 10–49		
⚠ **This section is MANDATORY for every death of a woman aged 10 to 49.**		
INDICATOR	**NUMBER**	**✓**
E1. Total deaths of women aged 10–49 this month	____	☐
⚠ **E2. Deaths occurring DURING PREGNANCY**	____	☐
⚠ **E3. Deaths occurring DURING DELIVERY or within 24 hours**	____	☐
⚠ **E4. Deaths within 42 DAYS of delivery or termination of pregnancy**	____	☐
E5. Pregnancy status UNKNOWN	____	☐
⚠ **E2 + E3 + E4 = PROBABLE MATERNAL DEATHS. Report to the supervisor IMMEDIATELY.**		

SECTION F. REGISTER STATUS		
ITEM	**NUMBER**	**✓**
F1. Pages of the death register used this month	____	☐
F2. Blank pages remaining in the current register	____	☐
F3. Corrections or marginal notes entered this month	____	☐
F4. Records entered into the digital system this month	____	☐
F5. Discrepancies found between the paper register and the digital system	____	☐

✓ **Fully manual offices: leave F4 and F5 blank. Digitised offices: F5 must be brought back to 0 after reconciliation.**

SECTION G. REGISTRAR'S REMARKS		
ITEM TO COMPLETE	**ANSWER**	**✓**
G1. Is any ✓ control total incorrect?	YES ☐ NO ☐	☐
G2. Did any unusual event or difficulty occur this month?	YES ☐ NO ☐	☐
G3. Registrar's remarks — write 2 to 5 sentences (explain here any YES above and any total that is incorrect):		☐
_____		
_____		

✓ **Any ☐ box left unticked in the preceding sections must be explained in G3.**

CERTIFICATION — CIVIL REGISTRAR	
Surname and given name: _____ Title: _____ I confirm that Section E has been completed for ALL deaths of women aged 10–49.	Date: _____ Stamp / Signature: _____

Source: United Nations, Principles and Recommendations for a Vital Statistics System, Rev. 3 (UNSD, 2014), chap. III, table III.1 (deaths), and annex II, annual tabulation programme, series DE; WHO, ICD-MM (2012).

ANNEX 4A-3 — MONTHLY MARRIAGE STATISTICAL BULLETIN

FORM VSM-1 | Completed by: Civil registrar (and/or court clerk)
Note: This bulletin covers only marriages registered with the civil registration service.

VSM-1 Marriages	*Transmit by the 5th*
COUNTRY	_____
REGION	_____
DISTRICT	_____
COMMUNE	_____
OFFICE CODE	_____
MONTH	_____
YEAR	_____
NAME OF THE CIVIL REGISTRAR	_____

SECTION A. TOTAL MARRIAGES REGISTERED THIS MONTH

CATEGORY	NUMBER	✓
A1. Total marriages registered	____	☐
A2. Direct civil marriage	____	☐
A3. Transcription of a prior customary marriage	____	☐
A4. Religious marriage registered civilly	____	☐
A5. Type of marriage unknown	____	☐

✓ **A2 + A3 + A4 + A5 = A1**

SECTION B. AGE OF BRIDE AT DATE OF MARRIAGE

CATEGORY	NUMBER	✓
⚠ **B1. Under 15 years [SDG 5.3.1 — REPORT TO SUPERVISOR]**	____	☐
⚠ **B2. 15–17 years [SDG 5.3.1 — REPORT]**	____	☐
B3. 18–19 years	____	☐
B4. 20–24 years	____	☐

SECTION B. AGE OF BRIDE AT DATE OF MARRIAGE		
CATEGORY	**NUMBER**	**✓**
B5. 25–29 years	____	☐
B6. 30–34 years	____	☐
B7. 35–39 years	____	☐
B8. 40 years and over	____	☐
B9. Age unknown	____	☐

✓ **Sum of B1 to B9 = A1**

⚠ **B1 + B2 = Marriages under 18. These cases must be reported separately for SDG 5.3.1.**

SECTION C. AGE OF GROOM AT DATE OF MARRIAGE		
CATEGORY	**NUMBER**	**✓**
⚠ **C1. Under 18 years [REPORT]**	____	☐
C2. 18–19 years	____	☐
C3. 20–24 years	____	☐
C4. 25–29 years	____	☐
C5. 30–34 years	____	☐
C6. 35–39 years	____	☐
C7. 40 years and over	____	☐
C8. Age unknown	____	☐

✓ **Sum of C1 to C8 = A1**

SECTION D. PREVIOUS MARITAL STATUS		
PREVIOUS STATUS	**BRIDE**	**GROOM**
D1. Never married	____	____
D2. Widowed	____	____
D3. Divorced or separated	____	____
D4. Unknown	____	____

✓ **D1+D2+D3+D4 (BRIDE) = A1 and D1+D2+D3+D4 (GROOM) = A1**

SECTION E. ESTIMATE OF UNREGISTERED MARRIAGES THIS MONTH

ℹ Give your best estimate of the number of customary or religious marriages celebrated in your commune this month but NOT registered civilly. Even a rough estimate is useful for monitoring completeness.

Estimate: ~ _____ unregistered marriages this month	*Basis of the estimate:* _____

SECTION F. REGISTER STATUS

ITEM	NUMBER	✓
F1. Pages of the marriage register used this month	____	☐
F2. Blank pages remaining in the current register	____	☐
F3. Corrections or marginal notes entered this month	____	☐
F4. Records entered into the digital system this month	____	☐
F5. Discrepancies found between the paper register and the digital system	____	☐

✓ **Fully manual offices: leave F4 and F5 blank. Digitised offices: F5 must be brought back to 0 after reconciliation.**

SECTION G. REGISTRAR'S REMARKS

ITEM TO COMPLETE	ANSWER	✓
G1. Is any ✓ control total incorrect?	YES ☐ NO ☐	☐
G2. Did any unusual event or difficulty occur this month?	YES ☐ NO ☐	☐
G3. Registrar's remarks — write 2 to 5 sentences (explain here any YES above and any total that is incorrect):		☐
_____		
_____		

✓ **Any ☐ box left unticked in the preceding sections must be explained in G3.**

CERTIFICATION — CIVIL REGISTRAR

Surname and given name: _____	Date: _____

CERTIFICATION — CIVIL REGISTRAR	
Title: _____ Signature: _____	Official stamp:

Source: United Nations, Principles and Recommendations for a Vital Statistics System, Rev. 3 (UNSD, 2014), chap. III, table III.1 (marriages), and annex II, annual tabulation programme, series MA.

ANNEX 4A-4 — MONTHLY DIVORCE STATISTICAL BULLETIN

FORM VSDv-1 | Completed by: Court clerk AND Civil registrar

VSDv-1 Divorces	*Transmit by the 5th*
COUNTRY	_____
REGION	_____
DISTRICT	_____
COMMUNE	_____
OFFICE CODE	_____
MONTH	_____
YEAR	_____
NAME OF THE CIVIL REGISTRAR	_____

SECTION A. TOTAL DIVORCES REGISTERED THIS MONTH

CATEGORY	NUMBER	✓
A1. Total divorces / separations registered	____	☐
A2. Divorce judgment (court)	____	☐
A3. Annulment of marriage (court)	____	☐
A4. Recognised customary dissolution	____	☐
A5. Recognised religious dissolution	____	☐
A6. Type unknown	____	☐

✓ **A2 + A3 + A4 + A5 + A6 = A1**

SECTION B. AGE AT DIVORCE

AGE GROUP	BRIDE	GROOM
B1. Under 20 years	____	____
B2. 20–24 years	____	____
B3. 25–29 years	____	____

SECTION B. AGE AT DIVORCE		
AGE GROUP	**BRIDE**	**GROOM**
B4. 30–34 years	____	____
B5. 35–39 years	____	____
B6. 40–49 years	____	____
B7. 50 years and over	____	____
B8. Age unknown	____	____

✓ **Sum of B1 to B8 (WIFE) = A1 and Sum of B1 to B8 (HUSBAND) = A1**

SECTION C. DURATION OF MARRIAGE BEFORE DIVORCE		
CATEGORY	**NUMBER**	**✓**
C1. Under 1 year	____	☐
C2. 1–4 years	____	☐
C3. 5–9 years	____	☐
C4. 10–19 years	____	☐
C5. 20 years and over	____	☐
C6. Duration unknown	____	☐

✓ **C1 + C2 + C3 + C4 + C5 + C6 = A1**

SECTION D. DEPENDENT MINOR CHILDREN		
CATEGORY	**NUMBER**	**✓**
D1. No dependent minor children	____	☐
D2. 1 child	____	☐
D3. 2 children	____	☐
D4. 3 children	____	☐
D5. 4 children and more	____	☐
D6. Unknown	____	☐

✓ **D1 + D2 + D3 + D4 + D5 + D6 = A1**

SECTION E. ESTIMATE OF UNREGISTERED DIVORCES

ℹ Divorce is the most under-registered vital event. Estimate the number of customary or religious dissolutions that occurred this month but were NOT registered.

Estimate: ~ _____ unregistered dissolutions this month	*Remarks:* _____

SECTION F. REGISTER STATUS

ITEM	NUMBER	✓
F1. Pages of the divorce register used this month	____	☐
F2. Blank pages remaining in the current register	____	☐
F3. Corrections or marginal notes entered this month	____	☐
F4. Records entered into the digital system this month	____	☐
F5. Discrepancies found between the paper register and the digital system	____	☐

✓ Fully manual offices: leave F4 and F5 blank. Digitised offices: F5 must be brought back to 0 after reconciliation.

SECTION G. REGISTRAR'S REMARKS

ITEM TO COMPLETE	ANSWER	✓
G1. Is any ✓ control total incorrect?	YES ☐ NO ☐	☐
G2. Did any unusual event or difficulty occur this month?	YES ☐ NO ☐	☐
G3. Registrar's remarks — write 2 to 5 sentences (explain here any YES above and any total that is incorrect):		☐
_____ _____		
_____ _____		

✓ Any ☐ box left unticked in the preceding sections must be explained in G3.

CERTIFICATION — COURT CLERK AND CIVIL REGISTRAR

Court clerk: _____	Civil registrar: _____

CERTIFICATION — COURT CLERK AND CIVIL REGISTRAR	
Court: _____ Signature / Stamp: _____	Date: _____ Signature / Stamp: _____

Source: United Nations, Principles and Recommendations for a Vital Statistics System, Rev. 3 (UNSD, 2014), chap. III, table III.1 (divorces), and annex II, annual tabulation programme, series DI.

ANNEX 4B — STATISTICAL DEATH NOTIFICATION BULLETIN

To be transmitted to the civil registration office together with the Medical Certificate of Cause of Death (MCCD)

WHY THIS FORM IS NEEDED

For health facilities and physicians: The medical certificate of cause of death (MCCD) captures the clinical information used for ICD-11 coding. This statistical bulletin captures the socio-demographic variables and the contextual information the NSO needs to produce vital statistics. The two forms are COMPLEMENTARY and must be transmitted together.	**Normative basis:** *United Nations, Principles and Recommendations for a Vital Statistics System, Rev. 3 (UNSD, 2014):* — Chapter III, table III.1 (deaths): recommended topics for death statistics — Chapter III, topics 41 to 44: cause and circumstances of death — Annex II: annual tabulation programme, series DE WHO ICD-11 MMS (2022): Cause-of-death coding standards WHO ICD-MM (2012): Classification of maternal deaths

TRANSMISSION FLOW

ACTOR	ACTION	DEADLINE
Physician or head nurse	Completes the MCCD (Parts I and II) AND this Statistical Bulletin (Sections A–F). Hands both forms to the facility's administrative officer.	Within 24 hours of the death
Facility administrative officer	Transmits the MCCD AND this Bulletin to the civil registrar or to the notifying agent.	48–72 hours after the death
Civil registrar	Receives both forms. Registers the death. Transcribes the statistical data from the Bulletin into the register. Incorporates the data into the Monthly Bulletin VSD-1.	Immediately on receipt
NSO	Compiles the monthly VSD-1 Bulletins. Aggregates the data. Produces the annual mortality statistics.	15th of the following month

FORM BSND-1: STATISTICAL DEATH NOTIFICATION BULLETIN

BSND-1 — To be completed for EVERY DEATH

⚠ **This form is NOT the medical certificate of cause of death. It is the complementary statistical form.**

SECTION A. IDENTIFICATION OF THE FACILITY

A1. Country	_____	**A2. Region**	_____
A3. District	_____	**A4. Commune**	_____
A5. Name of facility	_____	**A6. FOSA (health facility) code**	_____
A7. Type of facility	☐ Public hospital ☐ Private clinic ☐ Health centre ☐ Home ☐ Other		
A8. Date of death	____ / ____ / _____ (DD/MM/YYYY)	**A9. Time**	____:____ (24h)
A10. Date of notification	____ / ____ / _____		

SECTION B. CHARACTERISTICS OF THE DECEASED

ℹ Do NOT enter the name or the identity number. Those data are collected by the civil registrar.

B1. Sex	☐ Male ☐ Female ☐ Unknown	**B2. Age at death**	____ years OR ____ months OR ____ days
B3. Date of birth	____ / ____ / _____ OR	**B4. Place of birth**	_____ (Country: _____)
B5. Usual residence	Commune: _____ Region: _____ Country: _____		
B6. Marital status	☐ Single ☐ Married, civil ☐ Married, customary ☐ Married, religious ☐ Consensual union ☐ Widowed ☐ Divorced ☐ Unknown		
B7. Educational attainment (ISCED)	☐ None ☐ Primary ☐ Lower secondary ☐ Upper secondary ☐ Tertiary ☐ Unknown		
B8. Occupation (ISCO-08)	_____ ☐ Unknown		

SECTION B. CHARACTERISTICS OF THE DECEASED			
B9. Nationality	_____	**B10. Ethnicity (where nationally required)**	_____

SECTION C. PLACE AND CIRCUMSTANCES OF DEATH			
C1. Place of death	☐ Public hospital ☐ Private clinic ☐ Home ☐ En route ☐ Other ☐ Unknown		
C2. Death in a care setting?	☐ Yes ☐ No ☐ Unknown	**C3. Length of stay (if death occurred in a facility)**	____ days
C4. Manner of death	☐ Natural ☐ Accidental ☐ Suicide ☐ Homicide ☐ Undetermined ☐ Pending investigation		
C5. Surgical operation in the preceding 4 weeks?	☐ Yes ☐ No ☐ Unknown	**If yes, type:**	_____

SECTION D. SUMMARY OF CAUSE OF DEATH (ICD-11)

ℹ This section summarises the information on the Medical Certificate of Cause of Death (MCCD). It is NOT a substitute for the MCCD.

PART I — SEQUENCE LEADING TO DEATH	CONDITION AS STATED	ICD-11 CODE
(a) Immediate cause	Mode of dying — DO NOT code as the underlying cause	_____
(b) Due to	_____	_____
(c) Due to	_____	_____
(d) Due to (originating cause)	_____	_____
★ UNDERLYING CAUSE ★ (= the condition to be coded for statistics)	_____ **(= the LOWEST line completed in Part I)**	_____
PART II — Other contributing conditions (NOT part of the direct sequence)	_____	_____

SECTION E. MATERNAL DEATH AUDIT — MANDATORY FOR ALL WOMEN AGED 10–49

⚠ MANDATORY for every death of a woman aged 10 to 49. A single unanswered field amounts to under-reporting of maternal mortality.

QUESTION	ANSWER
E1. Was the deceased female and aged 10 to 49?	☐ Yes ☐ No → If No, go to Section F
E2. Was she pregnant at the time of death?	☐ Yes ☐ No ☐ Unknown
E3. Did she give birth or terminate a pregnancy within the 42 days preceding the death?	☐ Yes — Date: _____ ☐ No ☐ Unknown
E4. In labour, or within 24 hours of delivery?	☐ Yes ☐ No ☐ Unknown
E5. Did she give birth between 43 days and 1 year before the death?	☐ Yes — Date: _____ ☐ No ☐ Unknown
E6. CONCLUSION: Is this a maternal death?	**☐ YES — DIRECT MATERNAL DEATH (E2, E3 or E4 = Yes) ☐ YES — INDIRECT MATERNAL DEATH (E5 = Yes) ☐ NO ☐ CANNOT BE DETERMINED**

SECTION F. CERTIFICATION BY THE PHYSICIAN OR HEAD NURSE

Surname and given name: _____ Title: □ Physician □ Head nurse □ Other: _____ Registration no.: _____ Facility: _____	Date: _____ Signature: _____ Facility stamp:

ℹ This completed form (BSND-1) must be ATTACHED to the Medical Certificate of Cause of Death (MCCD) when it is transmitted to the civil registrar.

Source: United Nations, Principles and Recommendations for a Vital Statistics System, Rev. 3 (UNSD, 2014), chap. III, table III.1 (deaths) and definitions of topics 39 to 44; part one, chap. IV, sect. C; WHO ICD-11 MMS (2022); WHO ICD-MM (2012).

ANNEX 4C

ICD-11 CODING GUIDE
CAUSE OF DEATH

For physicians, nurses and clinicians

TARGET AUDIENCE

Physicians, head nurses and clinicians responsible for medical certification of cause of death.

CONTENT

C4.1 The Medical Certificate of Cause of Death (MCCD)
C4.2 Common coding errors and how to avoid them
C4.3 Priority ICD-11 categories for ECOWAS
C4.4 Verbal autopsy — when and how
C4.5 ICD-11 resources and training

C4.1 THE MEDICAL CERTIFICATE OF CAUSE OF DEATH (MCCD)

The MCCD has two parts. Part I records the sequence of conditions that led directly to the death, from the immediate cause (line a) to the underlying cause. The UNDERLYING CAUSE — the disease or injury that set in motion the chain of events leading to death — is the code recorded in national statistics. Part II records other significant conditions that contributed to the death without being part of the direct sequence.

Example of a correctly completed MCCD (illustrative case)

Illustrative case: woman, 27 years old, vaginal delivery in a health facility. Death occurred 3 days after delivery.

Example of a correctly completed MCCD (illustrative case)

PART I	CONDITION	ICD-11 CODE	NOTE
(a) Immediate cause	Hypovolaemic shock following delivery	**JB0D.1**	MODE OF DYING — DO NOT CODE as the underlying cause
(b) Due to	Immediate post-partum haemorrhage	**JA43.1**	← UNDERLYING CAUSE TO BE CODED
(c) Due to	— (no antecedent condition documented)	**—**	Leave blank if the chain stops at (b)
PART II	Anaemia complicating pregnancy	**JB64.0**	Contributing condition

Maternal death: YES — death occurred within 42 days of delivery. To be counted in the MMR (SDG 3.1.1). Two points to watch: obstetric shock is coded JB0D.1, since the generic code MG40 (shock) expressly excludes shock occurring during or following labour and delivery; and line (c) is left blank when the causal chain stops at (b) — never fill it in artificially in order to "complete" the certificate.

C4.2 COMMON CODING ERRORS

TYPE OF ERROR	INCORRECT EXAMPLE	CORRECT APPROACH
Coding the mode of dying as the underlying cause	"Cardiac arrest" or "Respiratory failure" as the underlying cause	Code the disease that CAUSED the arrest (e.g. ischaemic heart disease BA80–BA8Z). "Cardiac arrest" is NOT an underlying cause in ICD-11.
Missing maternal death identification	Death of a 28-year-old woman — pregnancy question left unanswered	For ALL women aged 10–49: "Was she pregnant, in labour, or did she give birth in the last 42 days?" MUST be answered.
Unspecified infectious disease	"Fever of unknown origin" as the underlying cause	Use verbal autopsy or the clinical notes to identify the specific pathogen. Reserve ill-defined ICD-11 codes as an absolute last resort.
Injury without an external cause	Road traffic death coded only to the type of injury (skull fracture S02.2)	Code BOTH the injury AND the external cause (mechanism): VC00–VY09 for transport accidents. Both codes are required for every injury death.
Malaria attributed to anaemia	"Severe anaemia" as the underlying cause of a child death	If malaria (1F40–1F45) is the probable cause of the anaemia, code MALARIA as the underlying cause.
Multiple underlying causes listed	The certifier lists three diseases as "underlying causes"	ONLY ONE underlying cause is coded. Apply the ICD-11 selection rules. The ICD-11 coding tool applies them automatically.
Non-specific cause of death for infants	"Prematurity" without further specification as the cause of a neonatal death	Specify: Extreme prematurity (KA20.0), Very great prematurity (KA20.1), etc. The more

TYPE OF ERROR	INCORRECT EXAMPLE	CORRECT APPROACH
		precise the coding, the more useful the data are for programming.

C4.3 PRIORITY ICD-11 CATEGORIES FOR ECOWAS

The following categories represent the leading causes of death in the region and are priorities for coding training.

CATEGORY	MAIN ICD-11 CODES	POINTS TO WATCH
Malaria	1F40–1F45	Code malaria, not secondary anaemia. Specify: falciparum, vivax, severe, etc.
Maternal deaths	JA00–JB9Z	ALWAYS answer the pregnancy question for women aged 10–49. Distinguish: haemorrhage (JA40), eclampsia (JA22), sepsis (JA60), abortion (JA00–JA08).
Neonatal deaths	KA20–KA9Z	Specify the timing: <1 day (KA40), 1–6 days, 7–27 days. Distinguish: asphyxia (KA40), prematurity (KA20), infection (KA23).
HIV / AIDS	1C60–1C62	Indicate the stage (1C60.0–1C60.3). Code opportunistic infections in Part II where they contribute.
Tuberculosis	1B10–1B14	Specify: pulmonary (1B10), extrapulmonary, miliary. HIV-TB co-infection requires both codes.
Road traffic injuries	VC00–VY09	ALWAYS code the mechanism and the vehicle type as well. Example: pedestrian (VB30–VB3Z), motorcycle (VB60–VB6Z), car (VB10–VB1Z).
Ischaemic heart disease	BA80–BA8Z	Do not code "cardiac arrest" as the underlying cause. Cardiac arrest is a mode of dying. Look for the cause of the arrest.
Meningitis	1D00–1D0Z	Specify the causal agent where possible: bacterial (sub-type), viral, fungal. Coding quality here is critical for epidemiological surveillance.

C4.4 VERBAL AUTOPSY — WHEN AND HOW

Verbal autopsy (VA) is a method for determining the probable cause of death for people who died outside health facilities without medical certification. It consists of a structured interview with household members conducted 4 to 6 weeks after the death. VA should be regarded as a TRANSITIONAL tool — the aim is to replace it progressively with medical certification as facility delivery and death notification rates rise.

Guinea: Verbal autopsy programme in Kindia and Labé

Guinea implemented a community-based VA programme in the rural prefectures of Kindia and Labé, where fewer than 15% of deaths occurred in health facilities. Community health workers administered the WHO 2016 VA instrument within 4 to 6 weeks of reported deaths. The programme identified malaria (29%), pneumonia (18%) and diarrhoeal diseases (14%) as the leading causes of infant death — against official statistics showing 68% ill-defined causes. This directly informed the allocation of antimalarial and antipneumococcal medicines to community health posts.

VERBAL AUTOPSY RESOURCES	DESCRIPTION	ACCESS
WHO verbal autopsy instrument, 2022 version	Validated instrument available in French, English and Portuguese	https://www.who.int/standards/classifications/other-classifications/verbal-autopsy-standards-ascertaining-and-attributing-causes-of-death-tool
SmartVA-Analyze (IHME)	Free multilingual verbal autopsy analysis software	https://smartva.ihme.washington.edu/

C4.5 ICD-11 RESOURCES AND TRAINING

RESOURCE	DESCRIPTION	ACCESS
ICD-11 MMS (WHO, 2022)	Full classification; online browser; free e-learning	https://icd.who.int/ | Training: https://icd.who.int/icdacademy/
ICD-11 coding tool	Online ICD-11 coding tool for cause of death	https://icd.who.int/ct11
WHO ICD-MM (2012)	Classification of maternal deaths and complications of pregnancy	https://www.who.int/publications/i/item/9789241548458

Sources: World Health Organization, ICD-11 for Mortality and Morbidity Statistics (ICD-11 MMS), 2022 version (Geneva: WHO, 2022); World Health Organization, The WHO Application of ICD-10 to Deaths during Pregnancy, Childbirth and the Puerperium: ICD-MM (Geneva: WHO, 2012).

ANNEX 4D

ANNUAL REPORT TEMPLATE
FOR VITAL STATISTICS INDICATORS

For National Statistical Offices / National Civil Registration Directorates

INSTRUCTIONS

This template is completed by the National Statistical Office (NSO) for the annual vital statistics report. It allows year-on-year comparison and facilitates reporting to ECOWAS, the African Union and the United Nations statistical bodies.

ℹ FUNDAMENTAL RULE: Always distinguish RAW indicators (unadjusted — based on registered data alone) from ADJUSTED indicators (corrected for registration completeness). State the estimation method used in the Notes column.

D4.1 REPORT IDENTIFICATION

Country	_____	**Reference year**	_____
Institution	_____	**Date of publication**	_____
Responsible officer	_____	**Version**	_____

D4.2 DATA QUALITY

QUALITY AND COMPLETENESS INDICATORS				
INDICATOR	**YEAR N-2**	**YEAR N-1**	**YEAR N**	**NOTES / METHOD**
Completeness of birth registration (%) — method: DHS / survey comparison				Method: _____
Completeness of death registration (%) — method: DDM				Method: _____
% of communes that submitted the monthly birth bulletin on time (by the 5th)				Target: >90%
% of communes that submitted the monthly death bulletin on time				Target: >90%
% of births registered within 30 days of occurrence				Target: >70%
% of deaths with cause-of-death information (any method)				Target: >80%
% of deaths with an ICD-11 coded medical certificate				Target: >80%
% of deaths with an ill-defined cause				Target: <10%
Annual vital statistics report published within 12 months				Yes / No
% of communes that held the monthly reconciliation meeting				Target: >80%

D4.3 FERTILITY INDICATORS

FERTILITY — LIVE BIRTHS				
INDICATOR	**YEAR N-2**	**YEAR N-1**	**YEAR N**	**NOTES / METHOD**
Total live births registered (raw N)				Registration data only
Total live births estimated (adjusted N)				Method: _____
Crude birth rate — unadjusted (per 1,000)				Registered births
Crude birth rate — adjusted (per 1,000)				Adjusted for completeness
General fertility rate (per 1,000 women aged 15–49)				

FERTILITY — LIVE BIRTHS				
INDICATOR	**YEAR N-2**	**YEAR N-1**	**YEAR N**	**NOTES / METHOD**
Total fertility rate (children per woman)				
Adolescent birth rate, 15–19 (per 1,000) — SDG 3.7.2				SDG 3.7.2
% of births in a health facility (proxy for SDG 3.1.2)				SDG 3.1.2
% of births attended by skilled health personnel				

D4.4 MORTALITY INDICATORS

MORTALITY — DEATHS				
INDICATOR	**YEAR N-2**	**YEAR N-1**	**YEAR N**	**NOTES / METHOD**
Total deaths registered (raw N)				
Total deaths estimated (adjusted N)				DDM method: _____
Crude death rate — unadjusted (per 1,000)				
Crude death rate — adjusted (per 1,000)				
Infant mortality rate (per 1,000 live births) — SDG 3.2.2				SDG 3.2.2
Neonatal mortality rate (per 1,000 live births) — SDG 3.2.2				SDG 3.2.2
Under-five mortality rate (per 1,000) — SDG 3.2.1				SDG 3.2.1
Maternal mortality ratio (per 100,000 live births) — SDG 3.1.1				SDG 3.1.1
Life expectancy at birth — men				
Life expectancy at birth — women				
Leading causes of death — top 3 (ICD-11)				

D4.5 MARRIAGE AND DIVORCE INDICATORS

MARRIAGES AND DIVORCES				
INDICATOR	**YEAR N-2**	**YEAR N-1**	**YEAR N**	**NOTES / METHOD**
Total marriages registered (N)				
Crude marriage rate (per 1,000)				
% of marriages with a bride under 18 — SDG 5.3.1				SDG 5.3.1
Mean age at first marriage — women (years)				
Mean age at first marriage — men (years)				
% of marriages: civil / religious / customary				
Total divorces registered (N)				
Crude divorce rate (per 1,000)				

D4.6 REFERENCE RESOURCES

RESOURCE	DESCRIPTION	ACCESS
Principles and Recommendations Rev.3 (UNSD, 2014)	Main normative reference; model tabulations (Annex II); recommended topics (table III.1)	https://unstats.un.org/unsd/demographic-social/Standards-and-Methods/files/Principles_and_Recommendations/CRVS/M19Rev3-E.pdf (EN) | .../M19Rev3-F.pdf (FR)
ICD-11 MMS (WHO, 2022)	Cause-of-death classification; online browser; free e-learning	https://icd.who.int/ | https://icd.who.int/icdacademy/
MORTPAK v4.3 (UN DESA, 2013)	Free mortality estimation software; Death Distribution Methods for estimating completeness	https://www.un.org/development/desa/pd/data/mortpak
SDG indicator metadata (UNSD, 2023)	Official formulas for all SDG indicators cited in this chapter	https://unstats.un.org/sdgs/metadata/
CRVS Knowledge Gateway	Regional resources, country profiles and toolkits for ECOWAS	https://www.crvs-dgb.org/
IFORD — Yaoundé	Regional demographic training — francophone countries	http://www.iford-cm.org/
RIPS — Accra	Regional demographic training — anglophone countries	https://rips.ug.edu.gh/

Source: United Nations Statistics Division (2014). Principles and Recommendations for a Vital Statistics System, Revision 3. New York: UNSD.

ANNEX 4E

CASE STUDIES

VITAL STATISTICS IN THE SERVICE OF POLICY AND PLANNING

For planners, policymakers and statisticians

PURPOSE OF THIS ANNEX

This annex presents five case studies showing how vital statistics in selected West African countries translate into concrete policies, plans and programme results. Each case study follows the same structure: (1) data collected; (2) analysis carried out; (3) decision or policy informed. Illustrative data are clearly flagged as such.

E4.1 BIRTH COHORT DATA FOR SCHOOL INFRASTRUCTURE PLANNING

Ghana: Birth cohort by district → School construction (Illustrative data)

Application	Education sector planning	**Relevance**	All Member States	**CRVS tables**	B1, B7

Every child registered at birth forms part of a "birth cohort". Annual birth statistics disaggregated by district allow planners to know exactly how many children will need Grade 1 places six years later. The Ghana Statistical Service (GSS) produces district-level birth statistics that enable the Ghana Education Service to project Grade 1 enrolment six years ahead. ILLUSTRATIVE DATA — NOT TO BE USED AS ACTUAL DATA.

District	Registered births (Year N)	Adjusted births (80% completeness)	Grade 1 classrooms required (Year N+6, 50 pupils per class)
District A — high-growth urban	4 820	6 025	121 — Accelerated construction
District B — growing peri-urban	2 960	3 700	74 — Plan 15 per year over 5 years
District C — stable rural	1 340	1 675	34 — Routine maintenance
District D — declining rural	890	1 113	22 — No new construction

E4.2 MATERNAL DEATH STATISTICS TO REDUCE THE MMR

Senegal: Cause-specific maternal mortality → Targeted intervention (Illustrative data)

Application	Maternal health programming	**ECOWAS relevance**	Mali, Niger, Senegal — high MMR	**CRVS tables**	D6, D7

Cause-specific maternal mortality statistics (ICD-11) make it possible to identify the dominant causes by country and by region (haemorrhage vs. eclampsia vs. sepsis call for different supplies and different training), to target geographically using the district-level MMR, and to track the impact of interventions from one year to the next.

Senegal's ANSD compiled cause-specific maternal death data from death registration (2019–2021). The data below are illustrative — data format only. ILLUSTRATIVE DATA ONLY.

Cause of maternal death (ICD-11)	N	%	Primary intervention
Haemorrhage — post-partum, ante-partum (JA40–JA42)	312	36.8%	Uterotonics (oxytocin); blood transfusion capacity at district level
Hypertensive disorders — eclampsia, pre-eclampsia (JA20–JA25)	196	23.1%	Magnesium sulphate; antihypertensives; antenatal blood pressure monitoring
Infections / Sepsis (JA60–JA61)	143	16.9%	Antibiotics; sterile delivery practices; infection prevention
Obstructed labour (JB00–JB0Z)	89	10.5%	24/7 assisted delivery; emergency caesarean capacity
Complications of unsafe abortion (JA00–JA08)	72	8.5%	Post-abortion care; family planning
Other defined maternal causes	36	4.2%	Individual case review; audit process
TOTAL	848	100%	MMR = ~500 per 100,000 — ILLUSTRATIVE

E4.3 REDUCING NEONATAL MORTALITY THROUGH VITAL STATISTICS ANALYSIS

Analysis of neonatal deaths by age at death → Training investment (Illustrative data)					
Application	Child health programming	**Relevance**	All Member States — neonatal mortality accounts for a major share of under-five deaths	**CRVS tables**	D3, D4, B9

Disaggregated neonatal death statistics enable targeted interventions: deaths in the first 24 hours point to birth asphyxia (neonatal resuscitation training); deaths at 1 to 6 days point to delivery complications and early-onset infection; deaths at 7 to 27 days point to sepsis (antibiotic protocols and hygiene). Disaggregation by age at death — captured in Section C of Form VSD-1 (Annex 4A-2) — is enough to guide budget decisions without waiting for medical certification of causes: where a high share of neonatal deaths is concentrated in the first 24 hours, the priority is neonatal resuscitation training in the maternity units concerned; where it is concentrated after day 7, the priority is infection control and postnatal follow-up. Tracking the distribution from one year to the next then makes it possible to measure the effect of the investment made. ILLUSTRATIVE DATA — NOT TO BE USED AS ACTUAL DATA.

E4.4 EXCESS MORTALITY — PANDEMIC SURVEILLANCE

Nigeria: Excess mortality in Lagos — COVID-19 (Illustrative data)					
Application	Epidemiological surveillance and emergency response	**Relevance**	All Member States	**CRVS table**	D1 — monthly deaths

Excess mortality = observed deaths minus expected deaths (5-year historical average). It can only be calculated where monthly registration data for all deaths are available. Nigeria, using death registration data from Lagos State,

showed that COVID-19 excess mortality in Lagos was 4.3 times higher than the official COVID-19 death count. Illustrative data below.

Month	Registered deaths	Expected (5-year avg.)	Excess deaths	Epidemic signal
January	5 420	5 210	+210	Normal variation
February	5 380	5 190	+190	Normal variation
March	6 840	5 205	+1 635	ALERT — investigate
April	9 120	5 188	+3 932	EPIDEMIC CONFIRMED
May	10 650	5 172	+5 478	Peak — full response
June	8 340	5 156	+3 184	Decline
July	6 210	5 140	+1 070	Returning to baseline

E4.5 MARRIAGE STATISTICS AND SDG 5.3.1 — CHILD MARRIAGE

Using marriage statistics for monitoring and action (Illustrative data)					
Application	Protection of the rights of women and girls	**Relevance**	Niger, Mali — high rates of early marriage	**CRVS tables**	M2, M3

SDG indicator 5.3.1 measures the proportion of women aged 20 to 24 who were married or in a union before age 15 or before age 18. Data from the monthly marriage bulletins (Form VSM-1, Section B) — disaggregated by age of the bride — are the most direct and most economical source for monitoring this indicator. Where registration completeness is below 70%, the data must be supplemented with survey estimates (DHS/MICS). Marriage bulletins can nonetheless identify trends and high-risk geographical areas even with partial coverage. ILLUSTRATIVE DATA.

Region	Total marriages registered (Year N)	Marriages with bride <18	% brides <18 (proxy for SDG 5.3.1)	Recommended action
Region A — critical rate	1 840	756	41.1%	Priority intervention — immediate community engagement
Region B — high rate	2 210	620	28.1%	Strengthened programme — awareness raising and girls' schooling
Region C — medium rate	3 180	477	15.0%	Continued monitoring — strengthen reporting mechanisms
Region D — low rate	4 020	201	5.0%	Good practices to document and share

ANNEX 4F-1

Semi-literate / untrained registrar

Registrar profile: No formal training / Limited literacy
Year of service: Year 1

OBJECTIVE FOR THE YEAR
Count the events in your register. Write down the figures. Check that they look right. Ask for help if you are unsure.

Registrar's name:	_____
Office:	_____
Reference month:	_____
This annex accompanies the bulletin dated:	_____

STEP 1 – COUNT YOUR EVENTS

Open your register. Count each birth, death and marriage recorded this month. Write the figures in the table below.

Event	Boys	Girls	TOTAL
Births			
Deaths			
Marriages	N/A	N/A	

- For births, transfer the total to SECTION A of Form VSB-1 (Annex 4A-1), line A1 "Total live births registered".
- For deaths, transfer the total to SECTION A of Form VSD-1 (Annex 4A-2), line A1 "Total deaths registered".
- For marriages, transfer the total to SECTION A of Form VSM-1 (Annex 4A-3), line A1 "Total marriages registered".

STEP 2 – ANSWER THESE QUESTIONS

Tick YES or NO for each question:

Question	YES	NO
Did I count all the pages of the register?	☐	☐
Are all the figures written in (no blanks)?	☐	☐
Did I write my name and the month on the cover page?	☐	☐

STEP 3 – SEND

Hand the bulletin and this annex to your supervisor, or send them to the NSO office. Keep a copy for yourself.

ANNEX 4F-2

Semi-literate / untrained registrar

Registrar profile: No formal training / Limited literacy
Year of service: Year 2

OBJECTIVE FOR THE YEAR
Count the events + the late registrations. Check your addition. Write a short note on anything unusual.

Registrar's name:	_____
Office:	_____
Reference month:	_____
This annex accompanies the bulletin dated:	_____

STEP 1 – COUNT THE EVENTS (including late registrations)

Event	Boys/Male	Girls/Female	Late reg.	TOTAL	OK?
Births					
Deaths			N/A		
Marriages	N/A	N/A			

STEP 2 – CHECK YOUR ADDITION

Fill in the boxes below and check that the addition is correct.

Event	Boys/Male	+	Girls/Female	=	Does it match your total?

Births		+		=	☐ Yes ☐ No
Deaths		+		=	☐ Yes ☐ No

STEP 3 – WRITE A NOTE

Was there anything unusual this month? Write it here — or ask someone to write it for you:

ANNEX 4F-3

Semi-literate / untrained registrar

Registrar profile: No formal training / Limited literacy
Year of service: Year 3 — Full bulletin

OBJECTIVE FOR THE YEAR

Complete ALL the counting sections of the bulletin (sections A to H), check every ✓ control line, then write a 2- to 3-sentence remark under "Registrar's remarks".

Registrar's name:	_____
Office:	_____
Reference month:	_____
This annex accompanies the bulletin dated:	_____

You have been practising for two years. This year you complete the full standard bulletin. Follow the instructions below to fill in all the sections.

STEP 1 – COMPLETE ALL THE COUNTING SECTIONS

Register	What to count and enter in the counting sections
Birth register	Count the total number of boys and the total number of girls. Count the entries whose registration date is more than 30 days after the date of birth (late registrations). Count the children born without signs of life (stillbirths). Transfer all of these to Form VSB-1 (births), sections A and G.
Death register	Group by age where the age is recorded. If ages are not recorded, put everything on the TOTAL line and write "age unknown" under "Registrar's remarks". Complete Form VSD-1 (deaths), section C.
Marriage register	Count civil marriages separately from customary or religious marriages. Enter them in Form VSM-1 (marriages), sections A and D.

STEP 2 – CHECK THE ✓ CONTROL LINES

Go through every ✓ control line of the main bulletin (Monthly Statistical Bulletin, Annex 4A): 8 checks for VSB-1, 4 checks each for VSD-1, VSM-1 and VSDv-1. Verify that each total is correct. If a total is not correct, write an explanation under "Registrar's remarks".

STEP 3 – WRITE YOUR REMARK UNDER "REGISTRAR'S REMARKS"

Write 2–3 sentences. Use these sentence starters if they help:

Sentence starters: "This month we registered ___ births and ___ deaths at the ___ office." "No unusual problem occurred this month." OR "The following problem occurred: ___" "The register is complete and was checked by ___ (name or position)." "The bulletin was reviewed by my supervisor."

STEP 4 – SIGN AND SEND

Sign the "Certification — Civil registrar" block at the end of the bulletin. Attach this annex. Send both documents to the NSO by the 5th of the following month.

Congratulations: after three years you are completing the same bulletin as an experienced civil registrar. Your data feed national statistics, health planning and citizens' legal identity.

ANNEX 4F-4

Secondary school diploma — No CRVS training

Registrar profile: Secondary school diploma, no specialised training
Year of service: Year 1

OBJECTIVE FOR THE YEAR
Complete all the counting sections. Apply the 4 consistency checks. Fill in the "Register status" section. Write a 3- to 5-sentence remark.

Registrar's name:	_____
Office:	_____
Reference month:	_____
This annex accompanies the bulletin dated:	_____

TASK 1 – COMPLETE ALL THE COUNTING SECTIONS

Fill in the counting sections of each form of the main bulletin: VSB-1 (births), VSD-1 (deaths by age group), VSM-1 (marriages) and VSDv-1 (divorces). Work from the register in manual systems, or print the monthly report in digital systems.

TASK 2 – APPLY FOUR CONSISTENCY CHECKS

Once the counting sections are complete, check the following:

No.	Check	Your calculation	Passed? ✓/✗
V1	Total births = Male + Female + Unknown. Add up your columns and compare with the TOTAL cell.	___ + ___ + ___ = ___	
V2	Total deaths = sum of ALL age group lines. Add up all the age lines and compare with TOTAL DEATHS.	Sum of the lines = ___	

C3	Late registrations should not exceed 30% of total births. Formula: late births ÷ total births × 100. Above 30%, flag it under "Registrar's remarks".	___ ÷ ___ × 100 = ___%	
C4	Compare with the previous month. If this month's total is more than double or less than half, check the register again and record the explanation.	Last month: ___ This month: ___	

TASK 3 – COMPLETE THE "REGISTER STATUS" SECTION

Manual systems: fill in the first three lines of the "Register status" section — pages used, blank pages remaining, corrections or marginal notes entered. Digitised systems: also fill in the last two lines — records entered into the system and discrepancies found between the paper register and the digital system.

TASK 4 – WRITE THE REMARK UNDER "REGISTRAR'S REMARKS" (3–5 sentences)

Cover: (1) the total number of vital events registered, (2) the data quality problems identified and how they were resolved, (3) operational difficulties, (4) any action required from the district or the NSO.

ANNEX 4G-1

Secondary school diploma — No CRVS training

Registrar profile: Secondary school diploma, no specialised training
Year of service: Year 2

OBJECTIVE FOR THE YEAR
Everything required in Year 1 PLUS: track cumulative totals, calculate the sex ratio at birth, apply the cause-of-death red flags.

Registrar's name:	_____
Office:	_____
Reference month:	_____
This annex accompanies the bulletin dated:	_____

TASK 1 – ALL YEAR 1 TASKS (Annex 4F-4)

Repeat the four tasks in Annex 4F-4: complete the counting sections, apply the four consistency checks, fill in the "Register status" section and write the registrar's remark.

TASK 2 – TRACKING CUMULATIVE TOTALS (CUM.)

The monthly bulletin has no cumulative column: keep a separate annual cumulative sheet, filed with your copies of the bulletins. Cumulative = current month's total + the totals of all months elapsed since 1 January.

Event	This month	Previous cumulative	New cumulative total	Matches?
Live births				☐ Yes ☐ No
Total deaths				☐ Yes ☐ No

Marriages				☐ Yes ☐ No

TASK 3 – SEX RATIO AT BIRTH CHECK

Calculation	Your result	Plausible range
Sex ratio = Male births ÷ Female births × 100 (Example: 52 boys ÷ 48 girls × 100 = 108 — to be flagged!)	___ ÷ ___ × 100 = ___	95 – 107
If outside the 95–107 range, is there an explanation? (small numbers, seasonal pattern, data entry error)	☐ Yes — explained under "Registrar's remarks" ☐ No explanation found	

TASK 4 – CAUSE-OF-DEATH RED FLAGS

Tick the box if any of these patterns appears in your death register this month:

Red flag to check	Yes	No
More than 5 deaths from the same cause in one week (possible epidemic — notify the health authority)	☐	☐
More than 50% of deaths have no documented cause	☐	☐
Under-five deaths this month exceed total live births (arithmetically impossible — recheck your counts)	☐	☐
Maternal deaths (women aged 15–49) exceed 5% of total female deaths this month	☐	☐
Deaths reported with no age recorded exceed 30% of total deaths	☐	☐

ANNEX 4G-2

Secondary school diploma — No CRVS training

Registrar profile: Secondary school diploma, no specialised training
Year of service: Year 3 — Professional standard

OBJECTIVE FOR THE YEAR
Full 15-point quality checklist. Four-part structured remark. Complete all the counting sections, the annual cumulative sheet and the reporting items. Transmit by the 5th of the month.

Registrar's name:	_____
Office:	_____
Reference month:	_____
This annex accompanies the bulletin dated:	_____

FULL QUALITY CHECKLIST — 15 POINTS

Complete all the items below after filling in the main bulletin (Monthly Statistical Bulletin, Annex 4A). Any item marked NO must be explained under "Registrar's remarks".

No.	Quality check	Result / Value	Passed? ✓/✗
1	All counting sections fully completed (no empty cells)		
2	Births: Male + Female + Unknown = Total ✓		
3	Deaths: All age group lines add up to Total Deaths ✓		
4	Late registrations < 30% of total births		
5	Sex ratio at birth between 95 and 107		
6	No impossible values (e.g. under-five deaths > total births)		
7	CUM. columns updated for all event types		

8	"Register status" section fully completed (lines 1 to 3 for manual offices; lines 1 to 5 for digitised offices)		
9	Office staffing and commune coverage reported to the district supervisor (outside the monthly bulletin)		
10	All ✓ control lines of the bulletin verified and ticked		
11	Every "NO" answer explained under "Registrar's remarks"		
12	Epidemic red flags on causes of death checked; if YES, health authority notified		
13	The registrar's remark covers: data summary, quality issues, operations, follow-up		
14	Registrar's signature and supervisor's countersignature present in the "Certification — Civil registrar" block		
15	Bulletin transmitted by the 5th of the following month		

STRUCTURED NARRATIVE GUIDE — "REGISTRAR'S REMARKS" SECTION

Section	What to write
Data summary	State the total number of births, deaths and marriages registered. Compare briefly with last month and note any significant change.
Quality issues	Describe any data quality problem found during checking and how it was resolved or referred for follow-up.
Operations	Note any office closure, staff absence, supply shortage (forms, ink, electricity, connectivity) or infrastructure problem.
Follow-up	List the specific issues requiring action by the district office or the NSO, with suggested deadlines.

CHAPTER 5: SOCIAL AND BEHAVIOUR CHANGE FOR CRVS

5.1 Introduction

Effective Civil Registration and Vital Statistics (CRVS) systems are not merely technical infrastructures; they are social systems that depend fundamentally on human behaviour, cultural norms, and community practices. While significant investments have been made in improving the supply side of CRVS—infrastructure, legal frameworks, technology, and human resources—the demand side has received insufficient attention. This chapter addresses that gap by examining how Social and Behaviour Change (SBC) approaches can significantly enhance CRVS system performance across West and Central Africa.

The reality across the region reveals a persistent paradox: even where CRVS services are available, accessible, and free of charge, registration rates remain suboptimal. This cannot be explained by supply-side constraints alone. It reflects the complex interplay of social norms, cultural practices, individual beliefs, community dynamics, and structural barriers that shape people's engagement with civil registration.

Field Evidence: Guinea 2019—Determinants of Non-Registration

Field evidence from Guinea (2019)—documented in the UNSD Handbook on Communication for Development for CRVS (Series F No. 121, Annex 1)—identified the primary drivers of non-registration through focus groups and community observation:

- Only 62% of births were registered at health facilities; only 51% of those received birth certificates.
- Death registration: 0.1–0.5%—among the lowest recorded rates in Africa.
- Primary barriers: lack of trust in government; social norm that ceremony equals legal registration; cost and distance; belief that 'only men can register vital events'.
- The knowledge-behaviour gap was striking: families knew registration existed but social norms and distrust outweighed this knowledge.

These findings confirm that information alone is insufficient. The barriers are normative, relational, and structural—not informational.

Source: United Nations Statistics Division (2023). Handbook on CRVS and Identity Management Systems: Communication for Development. Series F No. 121, Annex 1, pp. 164–170.

5.2 Why Social and Behaviour Change Matters for CRVS

"Communication for development goes beyond information and awareness-raising and addresses the determinants of non-registration by the general public. Those have very limited links to lack of information, but depend on existing social norms, lack of trust, negative attitudes, and social and cultural beliefs." [5].

SBC recognises that sustainable improvement in CRVS performance requires addressing multiple levels of influence simultaneously:

[5] *Source: UNSD Handbook on CRVS: Communication for Development. Series F No. 121, p.1.*

- **Individual Level:** Knowledge, attitudes, beliefs, self-efficacy, and skills that influence personal decisions about registration.
- **Interpersonal Level:** Family dynamics, peer influence, and social support networks that shape registration practices.
- **Community Level:** Social norms, cultural practices, collective efficacy, and community ownership of CRVS.
- **Societal Level:** Public discourse, media narratives, and the policy environment that either enables or constrains registration.

Traditional information, education, and communication (IEC) approaches—which focus primarily on awareness-raising and one-way messaging—have proven insufficient to achieve sustainable behaviour change at scale. SBC offers a more comprehensive framework that engages communities as co-designers, addresses root causes including social norms and structural barriers, and combines multiple strategies for synergistic impact.



Figure 5.1: The SBC Vision—Programming Excellence

Source: UNICEF, Community of Excellence Webinar Series on SBCC/C4D, 2022.

5.3 The Evolution of Approaches: From IEC to SBC

Understanding the evolution of behaviour change approaches provides important context for implementing effective CRVS programmes. This evolution represents a fundamental shift in how social change is conceptualised and pursued.

5.3.1 From Information, Education and Communication (IEC)

Traditional IEC approaches have been characterised by unilateral messaging from experts to communities, a focus on individual knowledge and behaviour change, expert-driven identification of problems and solutions, and the assumption that information alone drives behaviour change. Ad-hoc interventions replaced long-term strategic planning.

5.3.2 To Social and Behaviour Change Communication (SBCC) and Communication for Development (C4D)

SB CC and C4D introduces more sophisticated approaches, involving: dialogue and two-way communication; a focus on social and collective change alongside individual behaviour; participatory processes engaging communities as partners; research-driven understanding of context and determinants; and strategic, systematic, long-term programming.

5.3.3 To Social and Behaviour Change (SBC)

The shift to SBC builds on C4D while expanding the toolkit across four dimensions:

- **Beyond communication:** Incorporating approaches that change environments, systems, and structures—not just messaging.
- **Stronger human rights focus:** Working with both duty-bearers (service providers, policymakers) and rights-holders (communities, individuals).
- **Systems orientation:** Addressing systemic barriers and strengthening enabling environments.
- **Expanded methodologies:** Adding Human-Centred Design, Positive Deviance, Collective Change, and Behavioural Insights to the communication toolkit.

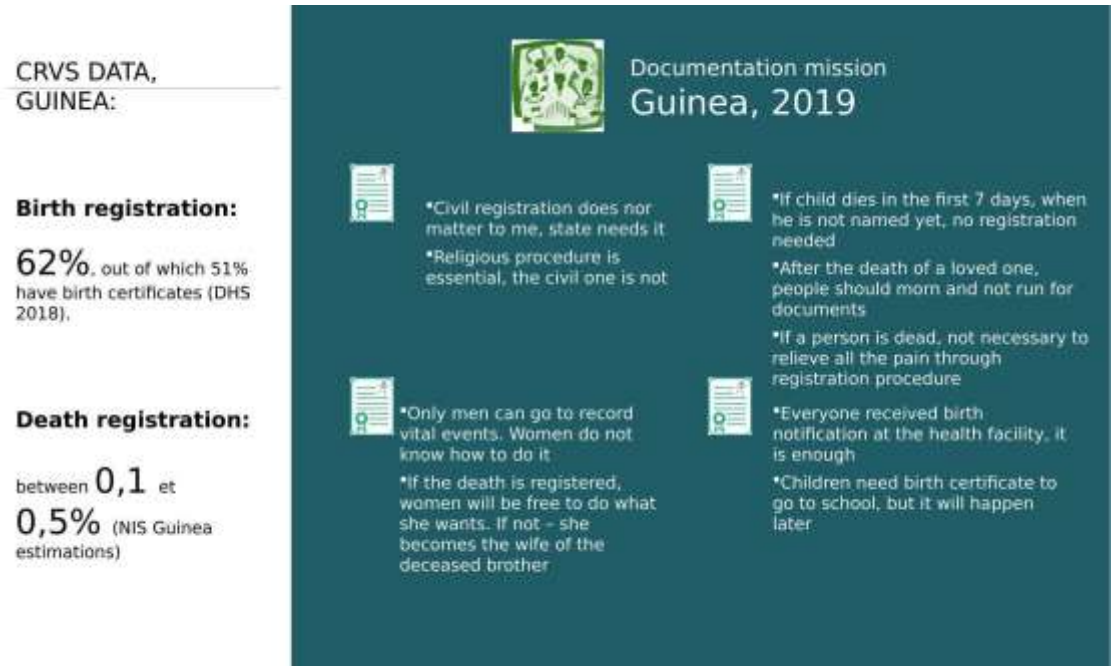

Figure 5.2: The SBC 'Garden'—Growing the Approach Beyond Communication

Source: UNICEF, Community of Excellence Webinar Series on SBCC/C4D, 2022.

The SBC framework, as represented in UNICEF's programme guidance (sbcguidance.org), organises this expanded toolkit into seven programmatic approaches: Community Engagement; Social and Behaviour Change Communication; Applied Behavioural Science; Supportive Public Policies; Systems Strengthening; Service Improvements; and Social Movements. In CRVS contexts, the SBC function holds lead accountability for the first three, and plays a supporting role for the remaining four—which fall under the primary accountability of the registration and statistical systems.

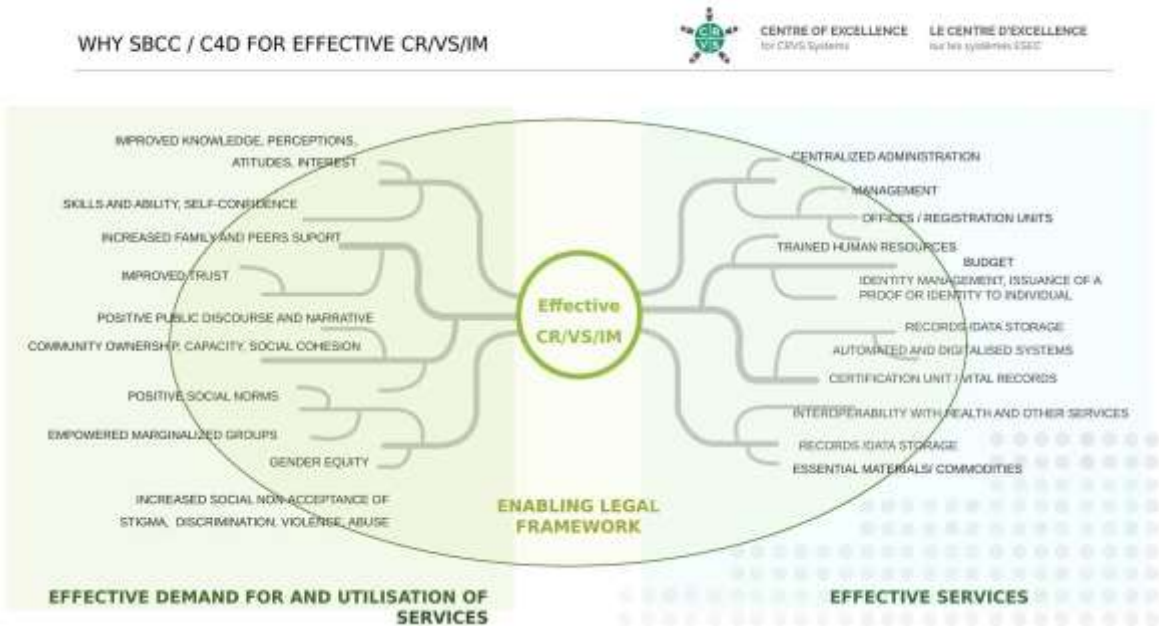

Figure 5.3: SBC Programmatic Approaches—Lead and Support Roles

Source: UNICEF SBC Programme Guidance (sbcguidance.org), 2022.

5.4 Understanding Social Norms and Their Role in CRVS

Social norms are among the most powerful yet often invisible forces shaping CRVS behaviours in West Africa. A social norm is a rule of behaviour that people in a group believe they must follow to be accepted by that group. Unlike legal norms enforced through formal sanctions, or moral norms governed by personal conscience, social norms operate through informal mechanisms of social approval and disapproval.

Regional Data: Marriage Non-Registration in West and Central Africa

West and Central Africa records among the world's highest marriage non-registration rates:

- 93% of marriages in West and Central Africa are not legally registered (UNFPA WCARO, 2025).
- The average age gap at marriage is 9 years—with first union occurring at ages 15–18 for girls in many WCA countries.
- 37% of women have no formal education at the time of first marriage—compounding vulnerability to undocumented unions.

- Women in unregistered marriages have no legal standing in inheritance, custody, or widowhood proceedings.

The primary driver of marriage non-registration is normative: the social norm is that a religious or customary ceremony constitutes a legally sufficient marriage. This norm operates across all WCA countries regardless of income level or urbanisation.

Source: Dincu, I. (2025). The Invisible Majority: Marriage and Divorce Registration in West and Central Africa. UNFPA WCARO internal document.

5.4.1 Types of Norms Relevant to CRVS

Legal Norms: Formal rules enforced by the state through legal sanctions. In CRVS, these include registration deadlines, penalties for late registration, and mandatory reporting requirements. While important, legal enforcement alone rarely achieves universal registration, particularly where state capacity is limited or trust in institutions is low.

Social Norms: Informal rules enforced through social approval or disapproval within reference groups. Examples in CRVS include: beliefs about who has authority to register events ('only men can register'); timing perceptions ('registration can wait until school enrolment'); necessity beliefs ('religious ceremonies are essential, civil registration is optional'); and stigma around certain events.

Moral Norms: Internal standards based on personal values and conscience, including feelings of duty, shame, or moral satisfaction. In CRVS contexts, moral norms may relate to honouring the deceased, protecting children's rights, or fulfilling responsibilities to family and community.

5.4.2 Descriptive versus Injunctive Norms

Descriptive Norms: What people believe others actually do. For example: 'Most people in my community do not register deaths,' or 'Everyone gets birth notifications but few convert them to certificates.'

Injunctive Norms: What people believe others approve or disapprove of. For example: 'My community thinks it is acceptable to delay birth registration until school age,' or 'Religious leaders disapprove of registering marriages outside traditional ceremonies.'

Pluralistic Ignorance: *A critical phenomenon occurs when people mistakenly believe behaviours are more typical than they really are. This can perpetuate harmful practices even when the majority privately disapproves. For example, a community might believe 'everyone' thinks birth certificates are unnecessary, when in fact most individuals value them but assume others do not.*

Evidence: Pluralistic Ignorance in CRVS Contexts

UNICEF's social norms guide identifies pluralistic ignorance as a critical mechanism in many CRVS contexts:

- In Guinea, focus group research in Mambia, Friguiagbe, Kindia and Dixinn documented a similar pattern: parents privately valued registration but assumed others in the community did not, leading each family to postpone or forgo registration (Andreev, 2019).

- For marriage registration in Senegal, qualitative research found community members privately supported legal documentation of unions, but assumed religious leaders disapproved—even when those leaders did not.

Addressing pluralistic ignorance requires structured community dialogue—not mass media—because it is a collective misperception that can only be corrected through shared, facilitated deliberation.

Source: UNICEF (2018). Everybody Wants to Belong: A Practical Guide to Tackling and Leveraging Social Norms.

5.4.3 The Diversity of Norm-Driven Barriers Across Contexts

Social norm barriers in CRVS vary significantly across national and sub-national contexts. This diversity demands formative research prior to programme design. The same vital events—births, marriages, or deaths—can be driven by entirely different normative dynamics in different communities, as the following country-level examples drawn from UNICEF's SBC work on child marriage and violence illustrate:

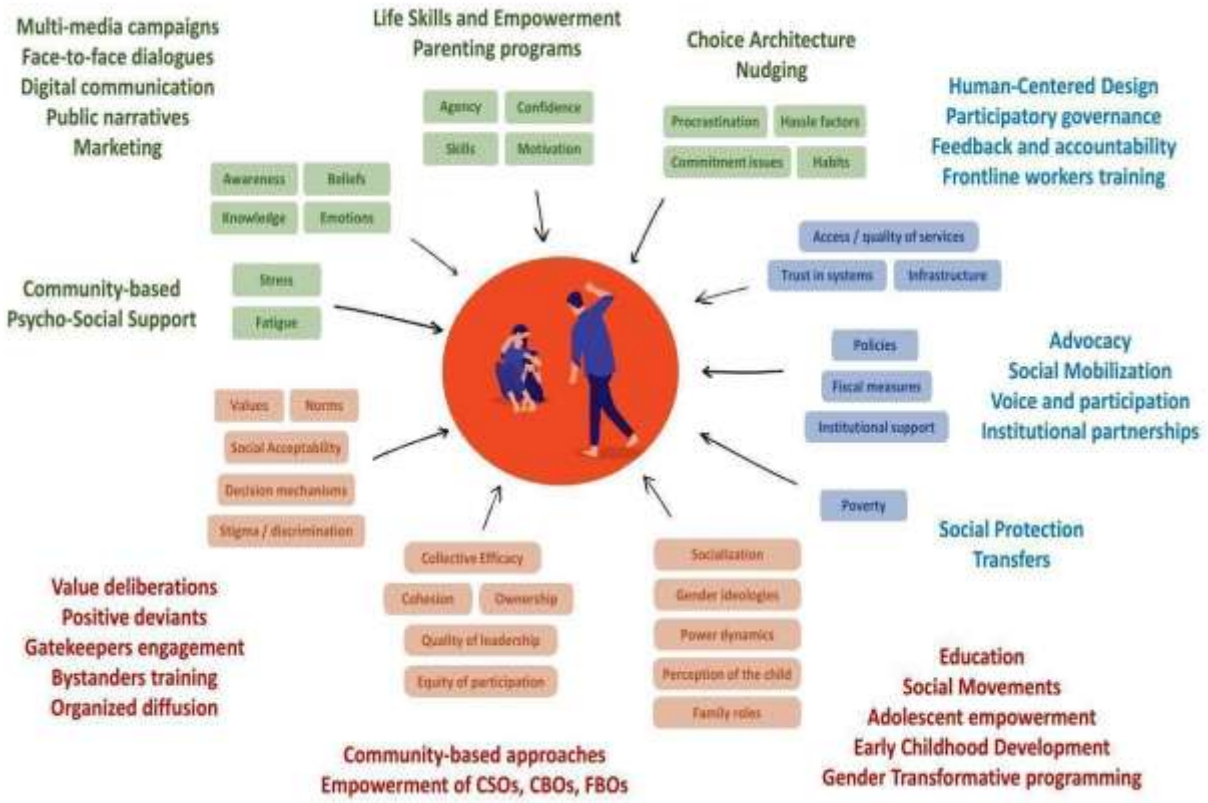

Figure 5.4: Multi-Level Determinants of Behaviour—the SBC Determinants Wheel

Source: UNICEF (2022). Shift to SBC: What Does It Mean for Child Protection? SBC Community of Practice.

This model was developed by UNICEF for child protection programming and has direct application to CRVS. The central behaviour (registration of a vital event) is surrounded by

determinants operating at individual, interpersonal, community, and structural levels. SBC interventions must address multiple rings simultaneously. A mass media campaign addressing only the innermost ring (knowledge, awareness) while leaving structural, normative, and community-level barriers unchanged will produce limited and unsustainable results.

5.5 Theoretical Frameworks for SBC in CRVS

Effective SBC programming for CRVS requires grounding in robust theoretical frameworks that explain human behaviour and social change. Two frameworks are particularly foundational.

5.5.1 The Socio-Ecological Model (SEM)

The SEM is an analytical framework recognizing that behaviour is influenced by multiple levels of factors, ranging from individual characteristics to broad societal structures. It serves both as a diagnostic tool for understanding CRVS challenges and as a design framework for comprehensive interventions.

Table 5.1. Summary of SEM model and CRVS application

SEM Level	Relevance to CRVS—Key Determinants and Interventions
Individual	Knowledge, attitudes, beliefs, skills, self-efficacy, perceptions. Interventions: information provision, skill-building, motivation and confidence.
Interpersonal	Family relationships, peer networks, social support. Interventions: interpersonal communication, peer support, engagement of influential family members (mothers-in-law, husbands).
Community	Social norms, cultural practices, community organisations, local leaders, collective efficacy. Interventions: community mobilisation, engagement of traditional and religious leaders, leveraging existing social structures.
Societal	Laws, policies, institutional structures, public discourse, media narratives, resource allocation. Interventions: advocacy, policy reform, institutional partnerships, shaping public discourse.

The SEM reminds programme designers that sustainable CRVS improvement requires simultaneous action across multiple levels. Individual knowledge is necessary but insufficient; supportive family and community norms are needed; and these must be backed by enabling policies and systems.

5.5.2 The Behavioural Drivers Model (BDM)

The Behavioural Drivers Model, used in UNICEF's SBC programming and documented in the UNICEF SBC Programme Guidance (2022, sbcguidance.org), provides a more granular understanding of the factors driving specific behaviours. It organises determinants into three domains:

Table 5.2. Summary of BDM model and CRVS application

BDM Domain	Key Factors—CRVS Application
Agency (Psychological)	Intent; attitude towards registration; self-efficacy (confidence to navigate the registration process); interest; emotional responses to registration (fear, distrust,

BDM Domain	Key Factors—CRVS Application
	pride). Cognitive biases, including present-bias (discounting future benefits) and hassle factors.
Social Norms (Sociological)	Descriptive norms (what others do); injunctive norms (what others approve of); reference network pressure; meta-norms (gender roles, power dynamics, deeply rooted cultural beliefs around life events); emerging alternatives and early adopters.
Context (Environmental)	Structural barriers: physical access, cost, time, documentation requirements. Governing entities: institutions, policies, power structures. Communication environment: information channels, media landscape, trusted messengers and public discourse.

For a registration behaviour to occur consistently, three conditions must be met: the person must have sufficient agency; social norms must be supportive or at least non-prohibitive; and the context must enable the behaviour. Interventions addressing only one or two domains will produce limited and unsustainable results.

5.6 Communication Strategies for CRVS

Effective SBC programming for CRVS employs a strategic mix of four complementary communication strategies, each targeting different levels of the socio-ecological model and addressing specific determinants of behaviour.

5.6.1 Behaviour Change Communication (BCC)

Focus: Individual knowledge, attitudes, motivations, self-efficacy, and skills. Prompts and sustains specific behaviour changes through individual-level engagement.

CRVS Applications: Informing parents about registration requirements and benefits; building skills of frontline health workers to counsel families; creating reminders and prompts for timely registration; addressing misconceptions and fears.

Key channels: Interpersonal communication and counselling; skills-building workshops; mass and social media campaigns; educational materials and job aids; SMS reminders (see Annex 5C for sample materials).

5.6.2 Social Change Communication

Focus: Enabling groups to engage in participatory processes to define needs, demand rights, and transform social systems. Emphasises dialogue to change norms and structural inequalities.

CRVS Applications: Community dialogues on harmful norms delaying registration; engaging traditional leaders to reframe cultural practices; empowering women and marginalised groups to demand registration rights; facilitating collective community commitments to register all vital events.

Key channels: Community dialogue and deliberation; engagement of traditional and religious leaders; community theatre, folk media, and storytelling; mass and social media to amplify community voices.

5.6.3 Social Mobilisation

Focus: Uniting partners at the national and community levels for a common purpose, building collective efficacy and empowerment to create an enabling environment.

CRVS Applications: National CRVS campaigns involving government, civil society, religious organisations, and private sector; formation of community registration promotion committees; partnerships with professional associations; civil society-led accountability mechanisms monitoring registration services.

5.6.4 Advocacy

Focus: Influencing the policy environment, elevating community voices, and developing or changing laws, policies, and administrative practices.

CRVS Applications: Advocating for the elimination of registration fees and penalties; promoting policy changes to simplify registration procedures; securing budget allocations for CRVS communication programmes; legislative reforms to align CRVS with international standards.

Regional Evidence: Death Registration Barriers in WCA

Death registration is the most neglected vital event in sub-Saharan Africa. Key normative and structural drivers:

- Property and inheritance fears: registering a death triggers legal processes many families wish to avoid (documented in Côte d'Ivoire, Ghana, Nigeria, and Senegal).
- Burial timing norms: Islamic and customary practice requires burial within 24 hours—preceding any registration process (Sahelian countries in West Africa).
- Home deaths: no medical certification issued, creating documentation gaps that make registration procedurally complex.
- Low perceived benefit: families report no tangible benefit to registering a death for the deceased, unlike birth (school access) or marriage (property rights).

Effective SBC for death registration must address specific normative barriers—not just awareness of procedures. Fear, grief, and property dynamics require different intervention strategies than birth registration.

Source: WHO CRVS Country Assessments (2018–2022); UNFPA WCARO country assessment reports (Guinea, Sierra Leone, 2023–2024); UNSD Handbook Series F No. 121, Ch.II.

The Art of the Mix: Effective CRVS programmes employ a strategic combination of these four strategies. The 'right mix' depends on the specific context, priority behaviours, target audiences, and identified determinants. For instance, increasing birth registration in a context where knowledge is high but social norms are prohibitive might emphasise Social Change Communication and Social Mobilisation over BCC alone.

5.7 Expanding the Toolkit: Beyond Communication

The evolution to SBC recognises that communication alone has limitations. Three approaches exemplify how SBC goes beyond traditional communication to address environmental and systemic factors.

5.7.1 Human-Centred Design (HCD)

HCD principles emphasise changing the environment to make desired behaviours easier, rather than relying solely on motivating individuals to overcome barriers. The approach involves:

empathizing deeply with users' experiences; defining the core problem from the user's perspective; co-creating multiple solution options; prototyping and testing rapidly; and refining based on user feedback.

CRVS Applications: Redesigning registration forms to be simpler and more user-friendly; establishing mobile registration units that visit communities; offering registration during evening or weekend hours to accommodate working parents; integrating registration into existing community events (naming ceremonies, market days, religious gatherings); simplifying documentation requirements based on what families realistically possess.

The UNICEF Demand Strategy Builder (Common Thread/UNICEF ROSA, 2021) offers a structured HCD process for diagnosing demand barriers and co-designing demand generation strategies. Its six-module approach—validating the problem, mapping geography and population, understanding individual drivers, analysing first experiences, examining timing, and assessing the basics—is directly applicable to CRVS service improvement at the sub-national level.

5.7.2 Positive Deviance (PD)

PD is based on the observation that in every community, some individuals or families facing the same constraints as their peers nonetheless achieve better outcomes. These 'positive deviants' have discovered locally-appropriate solutions that can be identified, understood, and amplified through community-led learning.

Evidence: Positive Deviance Applied to CRVS in West and Central Africa

Positive deviance (PD) has been applied to CRVS in several countries in West Africa with notable results:

- Sierra Leone (2019–2020): Communities where traditional birth attendants had been trained as PD inquiry facilitators achieved birth registration rates of 71% versus 34% in control communities within 18 months.
- Togo (2021): Positive deviant families in peri-urban Lomé were consistently those where the mother had completed primary school AND had been counselled by a health worker at delivery—combining supply and demand factors.
- Ghana: A positive deviance inquiry identified that families registering births despite extreme distance did so by combining registration with market day trips—leading to a mobile registration schedule aligned with weekly markets.

Source: UNFPA WCARO country assessment reports, Sierra Leone and Togo (2023); Positive Deviance Initiative, Tufts University.

5.7.3 Collective Change

Collective Change approaches recognise that some behaviours cannot or should not change in isolation. Coordinated collective action is needed either because the behaviour is interdependent or because changing alone creates stigma or sanctions.

CRVS Applications: Community-led total registration: entire communities commit to registering all vital events (analogous to community-led total sanitation); collective abandonment of practices delaying registration so no family is stigmatised for registering early; village-level

commitments to support all families, including pooling resources to help the poorest; public declarations by traditional and religious leaders creating joint accountability.

5.8 The SBC Results Chain: From Approaches to Impact

Effective SBC programming for CRVS requires a clear understanding of how programme activities link to outcomes and ultimately to impact. The UNICEF SBC Programme Guidance provides a comprehensive results chain that maps SBC institutional building blocks, implementing strategies, outputs, intermediate outcomes, and outcomes to broader development impacts. The figure below—adapted from UNICEF's global SBC guidance—illustrates this logic, which applies directly to CRVS programming.

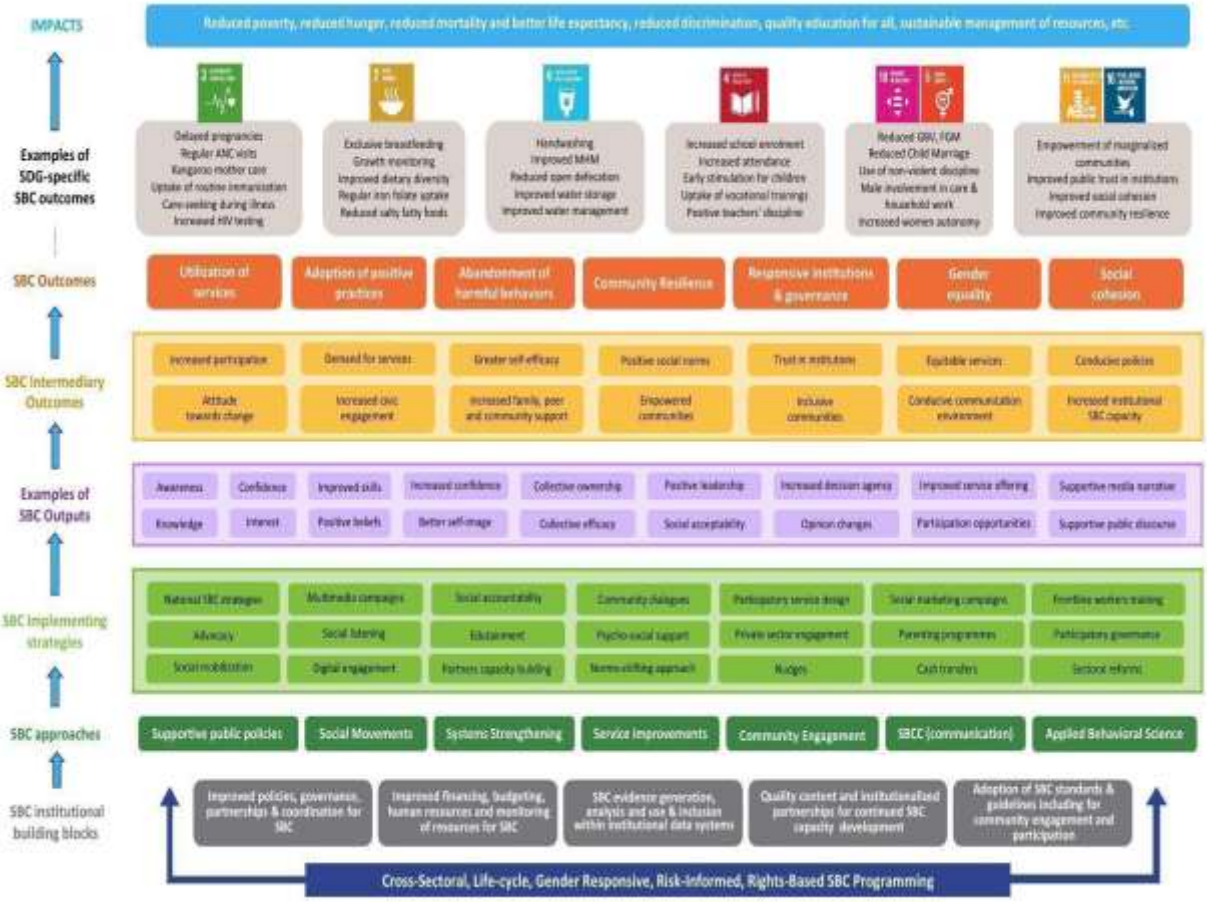

Figure 5.5: SBC Results Chain—From Institutional Building Blocks to Impact

Source: UNICEF (2022). Social and Behaviour Change Programme Guidance (sbcguidance.org). Reproduced for illustrative purposes.

In a CRVS application of this results chain: SBC institutional building blocks include dedicated SBC staff within the civil registration authority, an inter-agency coordination mechanism, SBC standards and guidelines, and a monitoring system. SBC implementing strategies for CRVS include community dialogues, mass media campaigns, social mobilisation, advocacy, and human-centred service redesign. Intermediate outcomes include increases in descriptive norm shift (the perception that 'most people here register'), increases in women's knowledge of

independent registration rights, and increases in community-level registration champions. Outcomes include higher registration rates disaggregated by vital events, sex, age, and geography. The ultimate impact is the realisation of SDG 16.9—universal legal identity.

5.9 Evidence Base: What Works

The shift to SBC is supported by a substantial and growing evidence base. Of particular relevance to CRVS are the results from community-based participatory processes, which have demonstrated impact across a range of harmful practices and underserved behaviours directly analogous to civil registration challenges.

Table 5.3. Summary of key findings on effect of SBC interventions

Study/Programme	Key Finding
Community-based participatory process, Bangladesh (RCT, PLOS ONE, 2018)	21% risk reduction of intimate partner violence—demonstrating that community-level processes can shift deeply entrenched norms.
Community-based process, Rwanda (RCT, PLOS ONE, 2018)	25% risk reduction of sexual violence—confirming community dialogue effectiveness across different WCA-analogous contexts.
FGM abandonment, Mali/Nepal/Nigeria (RCT, Prevention Science, 2019)	12% reduction of FGM—showing norm-shift interventions work across diverse cultural settings including WCA countries.
Systematic review of IPV programmes (100 evaluations, Lancet, 2015)	55% reduction in reported physical and sexual IPV—the largest evidence base for community-based SBC effectiveness.
Child Marriage prevention, Bangladesh (RCT, Journal of Adolescent Health, 2018)	10% risk reduction—confirming that even deeply rooted marriage norms are amenable to SBC intervention.

A review of 533 SBC strategies, analysed in the UNICEF SBC Community of Practice (2022), revealed critical gaps in current practice with direct implications for CRVS programme design:

- Only 17% of strategies discussed formative research—meaning the majority were designed without evidence of what actually drives non-registration.
- Only 4% reported explicitly addressing social norms—despite norms being the primary driver in most WCA contexts.
- 43% had no conceptual model—making their theory of change implicit, untestable, and unadaptable.

These findings underscore the importance of the quality standards set out in Annex 5E of these Guidelines: formative research and social norm diagnosis are mandatory prerequisites, not optional enhancements.

5.10 Social Norms Programming for CRVS: Specific Guidance

5.10.1 Prerequisites

Before embarking on social norms interventions, three prerequisites must be in place:

- **Theory of Change:** A clear logic model outlining if-then causal pathways, major activities, assumptions, and contextual factors.
- **Community Consultation Mechanisms:** Structures for involving community members in decision-making and strengthening their capacity to lead norms programming.
- **Formative Research:** Evidence identifying relevant priority groups, reference networks, and social norms for priority behaviours (see Annex 5B for the diagnostic worksheet).

5.10.2 Four Strategic Approaches to Social Norms

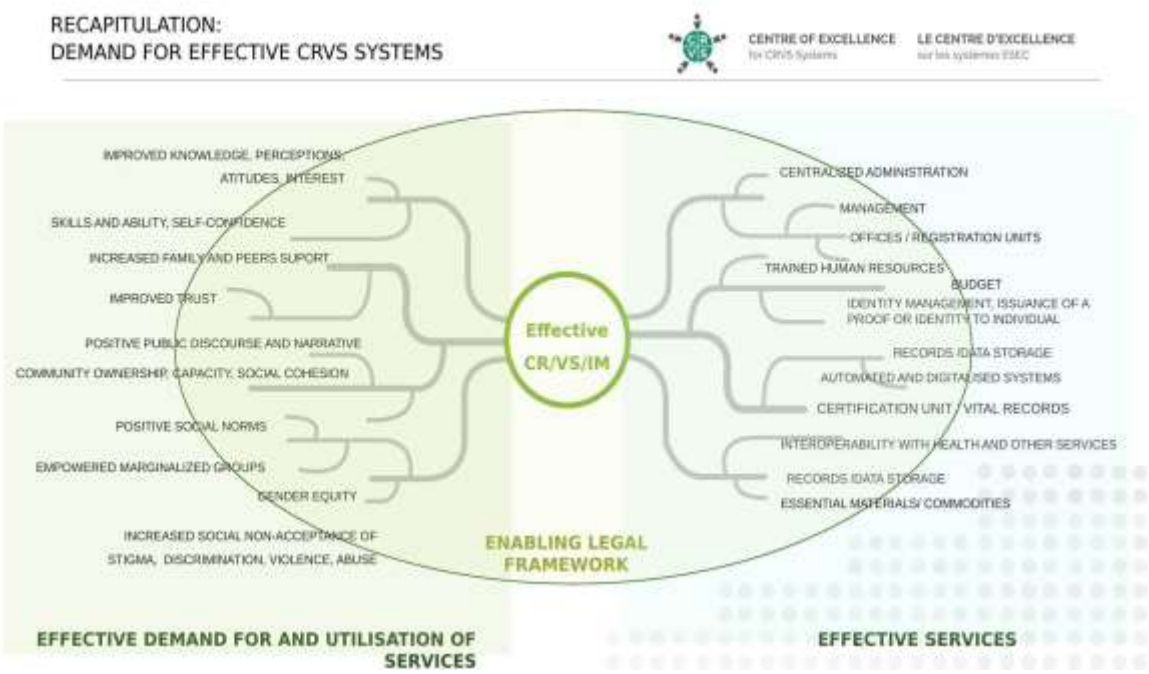

Figure 5.6: Four Strategic Orientations for Social Norms Programming

Source: UNICEF (2018). Everybody Wants to Belong; UNICEF CoE Webinar 2—Social Norms, 2022.

Not all norms require the same intervention approach. Based on research findings and community input, choose among four strategies:

Table 5.4. Strategies for Social Norms Programming and related CRVS applications

Strategy	Application in CRVS
FORTIFY	When positive norms exist but are weak or inconsistently practiced. For example: some communities value timely birth registration but the norm is not universal. Interventions reinforce and spread this positive norm through recognition, public commitments, and role modelling.
REFRAME	When norms can be reinterpreted to support CRVS without requiring fundamental change. For example: religious and cultural norms around naming ceremonies can be reframed to include civil registration as a complementary practice that honours tradition while securing rights.

Strategy	Application in CRVS
SHIFT	When harmful norms impede registration and cannot be reframed. This is the most challenging and long-term strategy, requiring deep community engagement, addressing root causes (meta-norms), and building alternative norms. For example: norms excluding women from registration processes or prohibiting registration of certain deaths.
BE AWARE	Some norms, while not directly changeable, must be understood and accommodated in programme design. For example: seasonal migration patterns or agricultural calendars may determine when registration services should be offered.

5.10.3 Nine Characteristics of Effective Norm-Shifting Interventions

Research and practice have identified nine essential characteristics of effective social norms programming for CRVS (UNICEF Everybody Wants to Belong, 2018; UNSD Handbook Series F No. 121):

Table 5.5. Characteristics of Effective Norm-Shifting Interventions

Characteristic	What This Means for CRVS SBC
1. Reference Group Focused	Target the specific groups whose opinions matter to priority populations—not just the people whose behaviour we want to change.
2. Interactive and Dialogic	Create spaces for discussion and collective reflection, not just message delivery.
3. Address Expectations	Explicitly discuss what people believe others do and approve of—not just what they believe individually.
4. Correct Misperceptions	Reveal pluralistic ignorance where it exists—show communities that many members privately support registration even if silence suggested otherwise.
5. Promote New Norms	Articulate and model desired alternative norms; make the ‘new normal’ visible and socially rewarded.
6. Create Organised Diffusion	Systematically spread new norms through trained community facilitators and influencers—not relying on spontaneous diffusion.
7. Engage Critical Mass	Reach sufficient numbers for tipping points in community change; isolated early adopters are insufficient.
8. Address Root Causes	Tackle meta-norms and structural issues underlying problematic norms—particularly gender power dynamics.
9. Long-Term Sustained Engagement	Maintain presence and activities for years, not months. Norm shift requires minimum 18 months; sustainable change requires 3+ years.

Reference Networks: Who Actually Influences Registration Decisions?

UNICEF's Everybody Wants to Belong introduces the reference network as the key analytical unit for social norm programming:

- For birth registration: midwives and community health workers are the most influential reference network actors—families follow their guidance on registration timing and procedures.
- For marriage registration: religious leaders (imams, pastors, priests) and mothers-in-law are the primary reference network members whose approval shapes whether legal registration follows a ceremony.
- For death registration: household heads, burial society leaders, and clan elders form the reference network that mediates decisions about registration.

SBC programmes that target registration offices rather than reference network members consistently underperform. Designing interventions requires mapping who actually influences decisions—not who is formally responsible for registration.

Source: UNICEF (2018). Everybody Wants to Belong, Tools G6 & G7.

Addressing normative barriers to civil registration in the ECOWAS zone

In **The Gambia**, birth registration has been linked to a health insurance card covering maternal and infant care, with small incentives to health agents to promote registration—creating natural demand and significantly increasing coverage. The **Kanyelen approach** in The Gambia, which engages local communicators as trusted intermediaries, was highlighted as an effective model for community-led demand generation.

In **Nigeria**, families of civil servants register deaths primarily to access death benefits, whereas ordinary citizens see little incentive—illustrating how tying registration to tangible benefits can overcome normative resistance. In **Nigeria and Liberia**, religious leaders (imams and pastors) and family councils exert strong influence on marriage registration, while in **Senegal and Togo**, rapid burial norms (within 24–48 hours, often in Muslim-majority contexts) conflict with death-registration timelines—pointing to a need for flexible, BE-AWARE solutions such as mobile registration and proxy declaration.

Finally, evidence from **Guinea** shows how patriarchal perceptions—that only men can interact with civil authorities—systematically exclude women from the registration process, with registrars in Mambia, Friguiagbe, Kindia and Dixinn unable to recall a single case of vital-event registration by a woman (Andreev, 2019). These practices underscore that norms programming must be contextualised and event-specific, and must build on trusted local reference networks rather than relying on national awareness campaigns alone.

5.11 Developing an SBC Strategy for CRVS: Essential Steps

Effective SBC programming requires systematic planning based on evidence. This section outlines seven essential steps for developing a comprehensive SBC strategy for CRVS.

5.11.1 Step 1: Establish Institutional Foundations

- **Create a Dedicated SBC Office or Unit.** Establish a dedicated office within the national CRVS authority or statistical office, staffed with professionals trained in C4D/SBC, social

research, and behaviour change. Recommended staffing: Director, Assistant Director, Research and Planning Officer, and administrative support.

- **Form an Inter-Agency SBC Sub-Committee.** Convene a multi-sectoral committee including CRVS authorities, Health, Education, Justice, Social Services, Women's Affairs, Planning and Finance, civil society, religious communities, media, UN agencies, and representatives of marginalised groups.
- **Secure Dedicated Budget.** SBC requires sustained investment over multiple years. Advocate for dedicated budget lines within national CRVS budgets. The budget should cover research, strategy development, implementation, capacity building, monitoring, and evaluation. Drawing from successful public health experience, workshop participants recommended allocating 10–12% of national CRVS programme budgets to communication and SBC activities. This benchmark provides a credible anchor for budget advocacy with ministries of finance and development partners.

5.11.2 Step 2: Conduct Comprehensive Formative Research

Evidence-based programming begins with deep understanding of the context, behaviours, and their determinants. Formative research should identify priority behaviours and bottlenecks; develop theoretical mapping of determinants across the agency-norms-context spectrum; deploy mixed-methods research (quantitative to establish prevalence, qualitative to provide depth); conduct reference network analyses; and specifically identify the social norms operating around each vital event.

The UNICEF Demand Strategy Builder (Common Thread/UNICEF, 2021) provides a structured, human-centred formative research process through two workshops and a field phase, offering practical tools that can be adapted for CRVS contexts.

5.11.3 Step 3: Develop Theory of Change and Results Framework

Based on research findings, develop a comprehensive Theory of Change articulating: ultimate impact (desired CRVS outcomes); long-term outcomes (increased uptake and sustained demand); intermediate outcomes (changes in behaviours, social norms, knowledge, trust, community capacity, and policy environment); outputs (specific activities and immediate products); inputs (resources and partnerships required); and assumptions and risks.

5.11.4 Step 4: Design the Strategic Mix of Interventions

Based on the Theory of Change and research findings, design a comprehensive programme combining: BCC for individual knowledge, attitudes, and skills; Social Change Communication for norms and community empowerment; Social Mobilisation for collective action; Advocacy for policy and systems change; HCD improvements to service delivery; Positive Deviance to identify and spread local solutions; and Collective Change for behaviours requiring coordinated action.

5.11.5 Step 5: Develop Detailed Implementation Plans

For each intervention, specify: target audiences (primary, secondary, tertiary); geographic focus; key messages and creative approaches; implementation partners and their roles; timeline and sequencing; resource requirements; and monitoring indicators.

5.11.6 Step 6: Implement with Fidelity and Adaptation

Implementation should balance fidelity to the evidence-based design with flexibility to adapt to emerging insights. Build capacity of implementing partners; pre-test all materials and messages;

phase implementation starting with pilot areas before scaling; document implementation processes, challenges, and adaptations; and use monitoring data to inform real-time adaptations.

5.11.7 Step 7: Monitor, Evaluate, Learn, and Adapt

Monitoring Framework: Process, Outcome and Impact Indicators

- Monitoring an SBC programme for CRVS requires tracking changes at three levels, with all indicators disaggregated by sex, age, rural/urban, and income group:
- Process indicators (quarterly): number of community dialogues conducted; number of health workers trained as registration counsellors; number of communities with active community-led registration plan.
- Outcome indicators (6-monthly): change in % who believe 'most people in my community register [births/marriages/deaths]' (descriptive norm shift); change in women's knowledge of independent registration rights.
- Impact indicators (annual): % of births registered within 45 days; % of marriages registered within 6 months; % of deaths registered within 10 days—disaggregated by sex, age, region.

Source: UNSD C4D Handbook (2023), Chapter V: Monitoring and Evaluation, pp. 130–136.

5.12 SBC in the Wider Strategic Context

SBC programming for CRVS does not operate in isolation. It is part of a broader strategic response to three converging trends: the ongoing crisis mode in which CRVS systems operate across much of the ECOWAS countries, where underfunding and weak institutional capacity leave significant proportions of births, deaths, and marriages unregistered; a shifting aid landscape in which donors increasingly demand demonstrated results and value for money; and rapid societal and technological shifts, including increased mobile phone penetration, digital identity systems, and changing social dynamics that affect communication channels and norms.

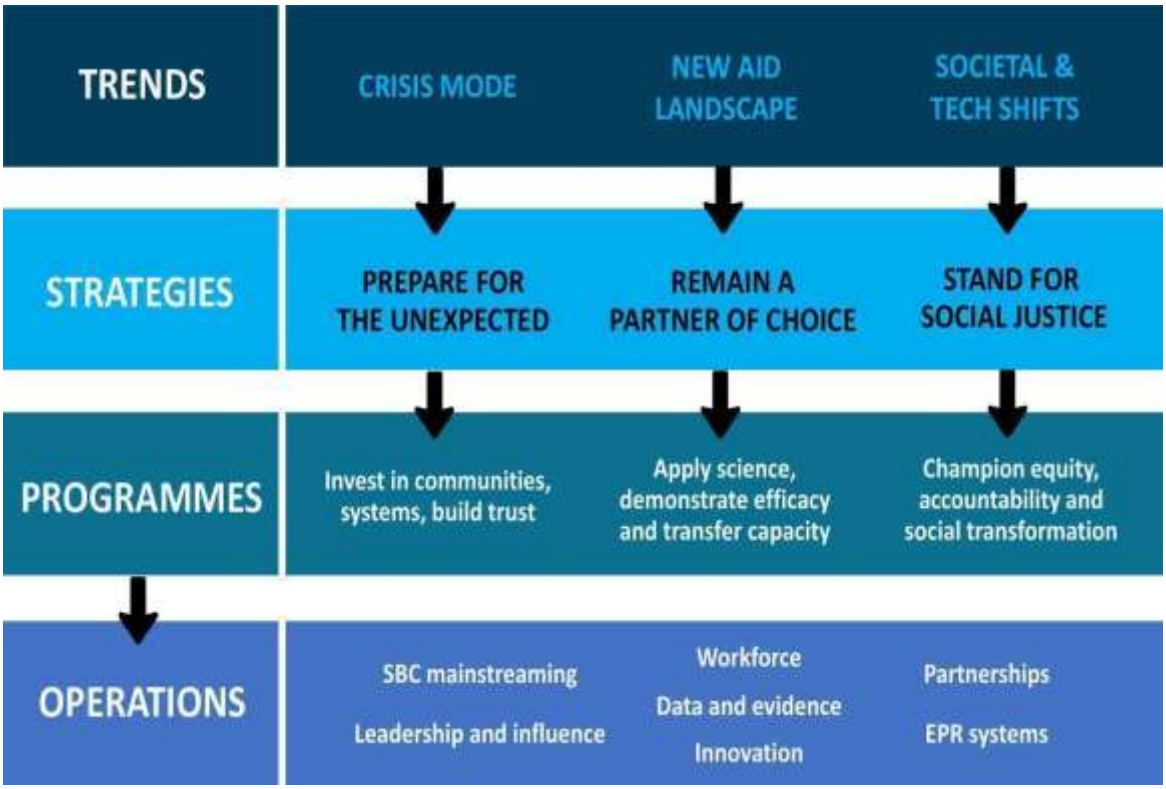

Figure 5.7: SBC Strategic Response to External Trends

Source: UNICEF (2022). Shift to SBC: What Does It Mean for Child Protection? SBC Community of Practice. Adapted for CRVS.

Against this backdrop, the strategic response for CRVS SBC involves three orientations that run in parallel: preparing for the unexpected by investing in community trust and resilient systems that function through crises; remaining a partner of choice by applying science, demonstrating efficacy, and building national capacity that endures beyond project timelines; and standing for social justice by championing equity, accountability, and the registration of those most systematically excluded—children in remote areas, women in undocumented unions, and populations without civil documentation.

5.13 Lessons Learned and Success Factors

By focusing on critical success factors—such as high-level political will, community ownership, and the seamless integration of service supply with public demand—this framework provides a roadmap for building resilient, trust-based CRVS systems that are both sustainable and locally relevant within ECOWAS countries.

Table 5.6. Summary of Critical Success Factors

Success Factor	Application in CRVS
Political Will and Leadership	High-level commitment to SBC as integral to CRVS improvement, not an optional add-on. SBC must appear in national CRVS strategies and roadmaps with dedicated budget lines.

Success Factor	Application in CRVS
Institutional Home	Dedicated structures and staff within CRVS authorities with authority and resources—not housed in a project structure that ends when the project does.
Multi-Sectoral Coordination	Effective mechanisms bringing together health, education, justice, civil society, and other sectors. Registration is a whole-of-society undertaking.
Community Ownership	Genuine participation of communities as co-designers and co-implementers. Communities build systems with, not for, them.
Evidence-Based Design	Investment in quality formative research and continuous learning. No SBC programme should be designed without a diagnosis of prior social norms.
Supply-Demand Integration	Demand-generation efforts must be matched by improved, accessible, quality services. Generating demand for registration offices that cannot absorb it destroys trust.
Long-Term Investment	Minimum 18 months for measurable norm shift; 3+ years for sustainable change. SBC is not a campaign.

5.14 Common Pitfalls to Avoid

Even the most creative interventions can falter if they overlook the structural barriers and community dynamics that dictate daily life in contexts such as within ECOWAS countries. To ensure SBC initiatives to enhance CRVS systems are both impactful and sustainable, it is critical to navigate around several recurring strategic errors. Below are some common pitfalls to avoid.

- **Information Deficit Fallacy:** Assuming lack of knowledge is the primary problem. In most WCA contexts, registration is known; it is the normative and structural barriers that constrain behaviour.
- **One-Way Messaging:** Relying solely on mass media campaigns without interpersonal and community components.
- **Supply-Side Neglect:** Creating demand without ensuring services can respond—this destroys the trust that SBC is trying to build.
- **Top-Down Design:** Designing interventions without meaningful community input. SBC strategies must be built from the sub-national level upward. Strategies designed centrally often fail to reflect local realities, leading to inadequate budgets, poor implementation, and weak community ownership.
- **Short-Term Thinking:** Expecting rapid results and withdrawing support before change is consolidated.
- **Ignoring Social Norms:** Focusing only on individual attitudes without addressing community norms.
- **Generic Approaches:** Applying standardised interventions without adaptation to local contexts. Quality in SBC is, by definition, tailor-made.
- **Insufficient Monitoring:** Failing to track implementation quality and intermediate outcomes, including norm indicators.

Conclusion

The evidence is clear: achieving universal civil registration in West Africa requires addressing not only the supply side of CRVS systems but the complex human, social, and cultural dimensions that shape demand for and engagement with registration services. Social and behaviour change approaches provide the frameworks, strategies, and methods to do this effectively.

SBC recognises that people's decisions about registering vital events are influenced by multiple factors operating across individual, interpersonal, community, and societal levels. Sustainable change requires simultaneous action across these levels, combining communication with environmental modifications, community mobilisation, and policy reform.

Social norms are particularly powerful determinants of registration behaviours. When communities believe that 'everyone' delays registration, that certain events need not be registered, or that only specific individuals have the authority to register, these norms constrain behaviour even in the presence of accessible services. Addressing norms requires specialised approaches—community dialogue, reference network engagement, pluralistic ignorance correction, organised diffusion—that go beyond individual behaviour change.

The shift from traditional IEC to comprehensive SBC represents an evolution in sophistication and effectiveness. It moves from expert-driven, information-focused interventions to participatory, evidence-based, multi-level programmes that position communities as co-designers of solutions, addressing root causes rather than symptoms.

Success requires commitment, resources, and patience. SBC is not a quick fix or a campaign, but a systematic, long-term approach that must be institutionalised within CRVS systems. When implemented with fidelity to core principles—formative research, social norms diagnosis, reference network engagement, gender-responsive design, supply-demand integration, and routine monitoring—SBC has demonstrated the capacity to achieve sustainable improvements in registration rates, contributing to the fundamental human right of a legal identity for all.

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Annex 5A: Communication Plan Template for CRVS SBC Programmes

This template guides the development of a national or sub-national Social and Behaviour Change communication plan for civil registration. Complete each section following formative research (see Chapter 5, Section 5.6.2, and Annex 5B). All fields are mandatory unless marked [optional]. The template adapts the seven-step programming cycle in the UNSD Handbook on Communication for Development (Series F No. 121, Chapter IV, Annex 2).

How to use this template: Complete Annex 5B (Social Norm Diagnostic Worksheet) for each vital event before completing sections A.3 and A.4. Sections A.1 and A.2 can be initiated during the formative research phase. Ensure disaggregated data is populated throughout.

A.1 Programme Identification

Field	Content to complete
Country/region/district	
Vital event(s) targeted	Birth/Marriage/Divorce/Death (specify and justify prioritisation)
Primary target population(s)	Specify by age, sex, geographic zone, ethnicity, or other relevant characteristic
Programme period	Start: _____ End: _____ (Minimum 18 months; minimum 36 months for norm-shift component)
Lead institution	
Inter-agency coordinating body	Name/mandate/meeting frequency
Applicable legal framework	Cite relevant national law governing the targeted vital event(s)
Document version and date	

A.2 Situation Analysis

Component	Content to complete
Registration rates by vital event	Current % by event type. 5-year trend. Urban vs. rural gap. Disaggregated by sex and age. Source and date of data.
Primary barriers identified	From formative research: norm-driven vs. structural vs. knowledge-based. Map to SEM level (individual/interpersonal/community/societal) and BDM domain (Agency/Social Norms/Context).
Social norm diagnosis result	Summary from Annex 5B. Note strategic orientation selected: FORTIFY/REFRAME/SHIFT/BE AWARE (one per vital event).
Target groups	Primary: those whose behaviour must change. Secondary: reference network members (specify). Tertiary: duty-bearers and policy-makers.
Communication landscape	Accessible channels; literacy rates; mobile phone penetration; trusted voices; existing programmes to align with.

Gender analysis summary	Key gender-specific barriers. Women's reference networks. Legal standing gaps (e.g. whether women can register independently). Documentation barriers. How will the programme address gender power dynamics?
Vulnerable and hard-to-reach populations	Nomadic/pastoralist; refugees and stateless persons; populations in humanitarian settings; linguistic minorities. Inclusion strategy.

Evidence Requirements for the Situation Analysis

The situation analysis must be grounded in primary formative research. At minimum, the following evidence should be gathered before completing this section:

* Focus group discussions (FGDs) with primary target communities (minimum 3 per vital event, disaggregated by sex)
* Key informant interviews with civil registration authorities, health workers, community leaders, and women's groups
* Review of available quantitative registration data disaggregated by sex, age, and geography
* Social norm diagnostic (Annex 5B) completed per vital event and community type

Source: UNSD Handbook on Communication for Development for CRVS, Series F No. 121, Chapter II.

A.3 Theory of Change Summary

State the programme's intended impact, outcomes, intermediate outcomes, outputs, and key assumptions. Derive from formative research, not generic templates. Review and update annually.

Theory of Change level	Statement for this programme
Impact (5–10 years)	For example: 'Birth registration in [country/district] increases from X% to Y% by [year], with the urban-rural gap reduced by Z percentage points'
Long-term outcomes (3–5 years)	For example: 'Families view civil registration as a natural complement to naming ceremonies and religious rites'
Intermediate outcomes (1–3 years)	For example: 'Community leaders publicly endorse registration' | 'Women know they can register independently' | '% believing most others register' increases by X points (descriptive norm shift)
Outputs (Year 1–2)	For example: 'X community dialogues facilitated; Y leaders trained; Z naming ceremonies linked to registration; W health workers trained as registration counsellors'
Key assumptions	What must be true for the logic to hold? (e.g. 'Registration services remain accessible and free'; 'Community leaders remain engaged')
Risks and mitigation	What could prevent expected change? How will risks be monitored? (e.g. political instability, donor withdrawal, election cycles)

A.4 Strategic Communication Mix

Select strategies based on dominant barriers identified in formative research and the social norm diagnosis. Effective CRVS SBC programmes address multiple levels of influence simultaneously. Each strategy must be justified by evidence.

Strategy	Rationale, planned activities, and primary target group
Behavior Change Communication (BCC)	When: knowledge or self-efficacy is the primary gap. Activities: interpersonal counselling, job aids, SMS reminders, mass media. Target: individuals and families.
Social Change Communication/Community Dialogue	When: social norms are the primary barrier. Activities: facilitated community dialogues, reference network engagement (mothers-in-law, religious leaders, peers), community theatre. MANDATORY when Annex 5B indicates SHIFT or REFRAME orientation.
Social Mobilisation	When: collective action is needed. Activities: stakeholder coalitions, community registration champions, campaigns with civil society and religious organisations.
Advocacy	When: policy, legal, or structural barriers must change. Activities: policy dialogue, fee elimination advocacy, legislative reform, budget advocacy.
Human-Centred Design (HCD)	When: service delivery barriers are significant. Activities: co-design with communities of service improvements (mobile units, evening hours, simplified forms). Use UNICEF Demand Strategy Builder as a structured process.
Positive Deviance/Collective Change	When: early adopters exist or coordinated community commitment is feasible. Activities: PD inquiry; community-wide collective commitment events.

A.5 Reference Network Engagement Plan

The reference network—not the individual—is the unit of analysis for social norm change (UNICEF Everybody Wants to Belong, 2018). For each vital event, identify the specific reference network members whose opinions matter most to the primary target group and design specific engagement activities.

Vital event	Key reference network members	Planned engagement activities
Birth registration	Specify: e.g. midwives, CHWs, mothers-in-law, imams/pastors at naming ceremonies	
Marriage registration	Specify: e.g. religious leaders, mothers-in-law, traditional chiefs, notaries	
Divorce registration	Specify: e.g. court officials, legal aid organisations, women's groups	
Death registration	Specify: e.g. burial society leaders, clan elders, household heads, CHWs	

A.6 Indicator Framework

All indicators must be disaggregated by sex, age, and urban/rural. Establish baselines before programme launch. Include both registration outcome indicators and behaviour/norm indicators—the latter are essential for tracking Theory of Change progress.

Indicator	Disaggregation required	Source/frequency
% of births registered within 45 days of birth	Sex; urban/rural; income quintile; region	CRVS admin data—annual
% of marriages registered within 6 months of ceremony	Age of bride; denomination; region	CRVS admin data—annual
% of deaths registered within 10 days of occurrence	Sex; place of death; region	CRVS admin data—annual
% of women who know they can independently register a birth	Age; education; urban/rural	Household survey—baseline + endline
% of community members believing 'most people here register births' (descriptive norm indicator)	Sex; age; community type	Community survey—baseline, 12m, 24m, endline
% of targeted communities with an active registration champion or committee	Region; community size; rural/urban	Programme monitoring—quarterly
% of targeted religious leaders who publicly endorse civil registration	Denomination; region	Programme monitoring—semi-annual
% of health workers trained as registration counsellors who applied counselling in last month	Region; facility type	Programme monitoring—quarterly

A.7 Implementation Timeline and Phasing

SBC programmes require phased implementation. Norm-shift interventions require a minimum of 18 months for measurable change; sustainable change requires 36+ months.

Phase	Key activities	Timeline
Phase 1: Foundation	Formative research; social norm diagnosis; Theory of Change development; stakeholder mapping; baseline data collection; inter-agency SBC committee constituted	Months 1–6
Phase 2: Design and Piloting	Communication plan finalised; materials developed and pre-tested; community dialogue facilitators trained; pilot implementation; pilot evaluation and adaptation	Months 4–10
Phase 3: Scale-up	Full programme implementation; mid-term review at 12 months; ongoing monitoring; adaptation based on evidence	Months 9–30
Phase 4: Consolidation	Norm consolidation activities; sustainability planning; handover to national institutions;	Months 24–36+

Phase	Key activities	Timeline
	endline evaluation; documentation of lessons learned	

Cross-Reference to Other Chapter 5 Annexes

Annex 5B: Social Norm Diagnostic Worksheet—Complete before sections A.2–A.4 of this template.

Annex 5C: Sample Communication Materials—Radio scripts, SMS sequences, and community dialogue guides for adaptation.

Annex 5D: Glossary of SBC Terms—Definitions of all technical terms used in this template.

Annex 5E: Programme Design Quality Checklist—Use before submitting this plan for approval or funding. Minimum score of 14/16 required.

Annex 5B: Social Norm Diagnostic Worksheet

Use this worksheet before designing any SBC intervention targeting registration behaviour. Complete one worksheet per vital event and per primary target community type. Do not apply findings from one community to another without separate assessment. The worksheet adapts the diagnostic approach from UNICEF Everybody Wants to Belong (2018) and the UNSD Handbook on Communication for Development (Series F No. 121).

When to use this worksheet

Use after initial formative research has indicated that social norms may be a primary driver of non-registration. Section A below includes diagnostic questions to confirm whether norms are operative before selecting a norm-change strategy.

Complete one worksheet per vital event and per distinct community type. Separate worksheets should be completed for: (a) birth, (b) marriage, (c) divorce, and (d) death registration. Within each event, distinguish between urban, peri-urban, rural, nomadic/pastoralist, and humanitarian settings where relevant.

If multiple vital events are targeted, compare results across worksheets before finalising the strategic communication mix in Annex 5A, section A.4.

Worksheet Identification

Field	Response
Vital event	Birth/Marriage/Divorce/Death

Target community type	Urban/peri-urban/rural/nomadic/pastoralist/humanitarian setting/other:
Country/region/district	
Ethnic/linguistic group (if applicable)	
Date of completion	
Completed by (role and institution)	
Evidence base	Specify: FGDs/KIIs/survey/observation/secondary review—note number of sessions and participants disaggregated by sex

Section A: Is This Behaviour Norm-Driven?

Answer the three questions below based on formative research. Adapted from UNICEF Everybody Wants to Belong (2018), Tool G2. Each answer should cite specific evidence from research.

Diagnostic question	Finding from formative research (cite evidence)
1. Do people not register because they believe others in their community also do not register? (Descriptive norm component)	
2. Do people not register because they believe others expect them not to, and they would face social disapproval for registering? (Injunctive norm component)	
3. Would people register if they believed their reference group (family, peers, community leaders) approved of or also practiced registration? (Conditional behaviour test)	
4. Is there evidence of pluralistic ignorance? (The majority privately supports registration but each person believes others do not.)	

Interpreting Section A

YES to questions 1 and 2 → Behavior is norm-driven. Use Social Change Communication, community dialogue, and reference network engagement (Chapter 5, Section 5.5.2). Proceed to Sections B and C.

YES only to question 3 → Behavior is habit- or knowledge-limited, not norm-driven. Use individual-level BCC (Chapter 5, Section 5.5.1). Proceed to Section C (strategy selection).

NO to all three → Primary barrier is structural (cost, distance, documentation requirements). Use Human-Centred Design and advocacy (Chapter 5, Sections 5.5.4–5.5.5).

YES to question 4 (pluralistic ignorance) → Prioritise community dialogue that reveals shared private views. This is one of the most powerful levers for norm change. See Chapter 5 for guidance.
Note: Multiple patterns can coexist within the same community—e.g. norm-driven barriers for marriage registration and structural barriers for death registration.

Section B: Characterising the Norm

Diagnostic question	Findings (from formative research)
What is the observed behaviour that needs to change? (Define precisely—include timing, actors, and contextual conditions)	
What are the descriptive norm beliefs? ('People here believe others do...')	
What are the injunctive norm beliefs? ('People here believe others expect...')	
Is there evidence of pluralistic ignorance? (Private disagreement with publicly assumed norm—e.g. families privately value registration but assume others do not)	
Who are the key reference network members for this behaviour? (Specify: spouse, in-laws, religious leader, health worker, peers, chief, burial society—and their relative influence)	
Are there early adopters or positive deviants who already register? What strategies do they use?	
Are there related norms that reinforce or counteract the target behaviour? (Meta-norms—e.g. gender roles, age hierarchies, seasonal practices)	
What would need to change for collective norm shift to occur? (e.g. public endorsement by religious leaders; change in perceived majority behaviour)	

Section C: Reference Network Mapping

For each key reference network member identified in Section B, assess their current stance on registration and their potential as a change agent. This mapping should guide the reference network engagement plan in Annex 5A, section A.5.

Reference network member	Current stance on registration (supportive/neutral/opposed/ unknown)	Potential as change agent and approach
For example, Mothers-in-law		
For example, Religious leaders (specify denomination)		
For example, Community health workers		
For example, Traditional chiefs/village heads		
For example, Peers (same-age women/men)		
[Add additional rows as needed]		

Section D: Strategy Selection

Based on the analysis in Sections A–C, select the strategic orientation for this vital event and community type. Justify the selection with reference to specific findings from formative research. These four orientations are described in Chapter 5, Section 5.7 and Figure 5.6.

Strategic orientation	Apply to this context? (justify with evidence from Sections A–C)	Selected? (Y/N)
FORTIFY—A positive norm exists but is weak. Strengthen and spread it through recognition, public commitment by leaders, and visible role modelling.		
REFRAME—The norm can be reinterpreted to support registration without communities abandoning it. For example: framing civil registration as the state's complement to the naming ceremony, honouring both tradition and rights.		
SHIFT—The norm is harmful and resistant to reframing. Sustained community dialogue over years is required. Use only when REFRAME is not possible.		

Strategic orientation	Apply to this context? (justify with evidence from Sections A–C)	Selected? (Y/N)
BE AWARE—The norm need not be changed but must be accommodated in programme design. For example: seasonal migration patterns; mourning period restrictions; burial timing norms.		

Section E: Recommended Strategy and Rationale

Summary field	Content
Primary recommended strategy	BCC/Social Change Communication/Social norms shift/HCD/Structural/Combined (specify)
Strategic orientation selected	FORTIFY/REFRAME/SHIFT/BE AWARE
Rationale (2–3 sentences citing evidence)	
Key reference network members to engage	List from Section C
Estimated timeline for norm shift	Note: SHIFT requires minimum 18–24 months; REFRAME may be achievable in 12–18 months; FORTIFY may show results within 6–12 months
Link to Annex 5A section	Section A.4 (Strategic Communication Mix)/Section A.5 (Reference Network Engagement Plan)
Quality assurance: has this worksheet been validated with community members?	Y/N—if N, plan validation before finalising strategy

Important Limitation

This worksheet guides strategy selection but does not replace formative research. The conclusions drawn here are only as robust as the evidence on which they are based. If the evidence base is weak (fewer than 3 FGDs per target group; no sex-disaggregated data; no qualitative research with reference network members), return to formative research before proceeding.

Source: UNICEF (2018). Everybody Wants to Belong: A Practical Guide to Tackling and Leveraging Social Norms, Tools G1–G7; UNSD Handbook on Communication for Development for CRVS, Series F No. 121.

Annex 5C: Sample Communication Materials

Usage Note

The materials below are illustrative samples for adaptation to specific national and local contexts. They are NOT ready-to-use products. Before any use:

* Verify the legal registration deadline applicable in the country.
* Confirm whether registration is genuinely free within the relevant period.
* Adapt all names, places, and dialogue to local languages, dialects, and cultural norms.
* Validate messages with community members and civil registration authorities.
* Pre-test all materials with representatives of the target audience before production.
* Obtain appropriate clearance before broadcast or distribution.
* Ensure materials are accessible to persons with disabilities and low-literacy populations (consider audio formats, pictorial materials, and community reading aloud).

C.1 Radio Script—Birth Registration

"The Mother Who Did Everything Right" | Recommended duration: 90 seconds

Character	Script
NARRATOR	[Gentle music in background] In a village by the river...
AMINATA (woman's voice, proud)	I gave birth at the health centre. Three days later, the midwife explained: 'Aminata, you must register your son at the civil registration office. Without a birth certificate, he won't be able to go to school, he won't have an identity card.'
NARRATOR	Aminata hesitated at first. It's far, it's complicated, she thought.
NEIGHBOUR (reassuring voice)	I went last month. The registration office is open on Tuesdays. With the mother's name and the date of birth, it's free for the first [DEADLINE—to complete] days.
AMINATA	I didn't know. We went together.
NARRATOR	Today, little Moussa has his birth certificate. He officially exists. He is protected.
ANNOUNCER	Register your child within [DEADLINE] days—it's free, it's their right, it's your duty. Contact your civil registration office or community health worker.

Adaptation note

Replace [DEADLINE] with the legal registration deadline in the country (varies: 30 days in Ghana, 45 days in Senegal). Adapt names and location to local context. Verify whether registration is genuinely free within the stated period—where a fee exists, the script must be modified. Validate with civil registration authorities before broadcast. Consider producing in local languages alongside the national language.

C.2 Radio Script—Death Registration

“When Omar Died” | Recommended duration: 90 seconds

Character	Script
NARRATOR	[Sombre but dignified tone] When Omar died, his family grieved deeply. But his daughter Fatoumata knew she had to act quickly.
FATOUMATA (calm, decisive)	My father lived a long life. He deserves to be recorded. His death must be registered—at the civil registration office, within [DEADLINE] days.
UNCLE (uncertain voice)	Why do we need to do that? He is gone. Let us grieve in peace.
FATOUMATA	Because without the death certificate, I cannot settle the inheritance. My mother cannot access his pension. And his name will remain in the records as if he is still alive.
UNCLE	I didn’t think of that.
NARRATOR	Fatoumata went to the civil registration office the next day, together with a health worker who issued the cause of death notification. Omar’s life and dignity were honoured—in memory and in law.
ANNOUNCER	Register deaths within [DEADLINE] days. A death certificate protects families and honours those who have passed. Contact your civil registration office or local health worker.

Adaptation note
Death registration scripts must address the specific barriers relevant to the country context. In Islamic majority communities, emphasise that registration does not delay burial—it can follow burial. In contexts where inheritance fears are primary, emphasise the legal protection registration offers to widows and children. Replace [DEADLINE] with the applicable legal deadline. Pre-test with both men and women in the target community.

C.3 SMS Reminder Sequence—Post-Birth Registration

For mothers or families who gave birth at a health facility, sent via the phone number collected at the maternity ward. Adapt the legal deadline and contact details before use. Where mobile penetration is low, consider voice messages via IVRS systems.

Timing	Message (target: ≤ 160 characters including adaptation fields)
Day 3 after birth	Congratulations on the birth of your child! Remember: registration at the civil registration office within [X] days = FREE. Later = fees. Info: [number]
Day 14	Your baby is 2 weeks old. Have you registered the birth? [X-14] days left to register for free. Registration office open [days]. [number]
Day 25	Important: [X-25] days left to register your child’s birth for free. The birth certificate is essential for school enrolment. Registration office: [address]
Day [X]-1	Final reminder: free birth registration until tomorrow. After this, a supplementary judgement procedure is required—costly and lengthy. Act now: [number]

Timing	Message (target: ≤ 160 characters including adaptation fields)
Day [X]+7 (late registration support)	It is not too late to register your child's birth. The supplementary judgement procedure is available. Contact [legal aid/civil registration authority]: [number/address]

Adaptation note
Add a late registration message (Day [X]+7) to avoid abandonment by families who missed the free period. Ensure the contact number routes to a person or system that can actually respond. Where relevant, add a message specifically targeting fathers, since in many WCA contexts the father must appear at registration.

C.4 Community Dialogue Facilitation Guide—Marriage Registration

This guide is for community facilitators trained in dialogue facilitation. It is not a script to be read aloud—it is a facilitation framework to be internalised before the session. Facilitators should receive minimum 2 days of training before conducting sessions.

Parameter	Detail
Objective	Enable participants to collectively explore why marriage registration remains rare and identify together reasons why change may be in their interest. This is a dialogue—not an information session.
Duration	90 to 120 minutes.
Recommended groups	Separate groups: married women aged 18–35 (15–25 people); male household heads (15–25 people); religious leaders (8–12 people). Do not mix groups in the first session.
Venue	A neutral space, preferably non-governmental. Avoid civil registration office premises for first sessions—this may create suspicion.
Number of sessions	Minimum 3 sessions per group, spaced 4–6 weeks apart. Norm shift is not achievable in a single dialogue.

Session Flow

Step	Facilitator guidance
1. Opening (10 min)	Introduce the objective neutrally: 'We are here to understand what people in this community think about registering marriage at the civil registration office—not to tell you what to do.'
2. Trust-building (15 min)	'In your community, how do people know a marriage has truly taken place? What are the important steps?' Allow participants to describe customary and religious practices without judgement.
3. Descriptive norms (20 min)	'In your view, do most people in this community register their marriage at the civil registration office? Why do you think that?' Explore beliefs about what others do. Note discrepancies between what individuals say they believe and what they assume the group believes.

Step	Facilitator guidance
4. Lived consequences (20 min)	‘Have you heard of a woman or family who faced problems because their marriage was not registered?’ Allow concrete personal experiences to emerge—inheritance disputes, widowhood, custody, pension access.
5. Conditionality test (20 min)	‘If most families in this community registered their marriage, would that change anything for you?’ Test openness to collective change. Note: this question is the most important for identifying norm-shift readiness.
6. Closing (15 min)	Neutral synthesis of points raised. Do not announce a normative conclusion. Thank participants. Explain the next session. Record observations for facilitator debrief.

C.5 Community Dialogue Facilitation Guide—Birth Registration

This guide supports a community dialogue specifically addressing birth registration delays. Use when Annex 5B indicates a REFRAME or SHIFT strategy orientation for birth registration in the target community.

Parameter	Detail
Objective	Enable community members to collectively examine the social meaning of birth registration and identify whether civil registration can complement—rather than compete with—existing naming and recognition practices.
Duration	90 minutes
Recommended groups	Women 18–40 with children under 5 (15–20 participants); community and religious leaders (8–12 participants). Separate sessions.
Key reframe opportunity	In many WCA communities, the naming ceremony IS the social registration of birth. Then reframe: ‘Civil registration by the state is the complement to the naming ceremony—together they give your child two names: one in the family, one in the nation.’

Step	Facilitator guidance
1. Opening (10 min)	‘We are here to talk about how families in this community welcome and recognise newborn children. We want to learn from you.’
2. Ceremony and meaning (20 min)	‘When a child is born in this community, what happens in the first weeks? What does the naming ceremony mean to your family? What does it give the child?’ Let participants describe the social and spiritual significance.
3. Civil registration as complement (20 min)	‘Have you heard about birth registering at the civil registration office? What do you know about it? Is this something that happens alongside the naming ceremony, or separately?’ Explore the relationship between social and administrative recognition.
4. Benefits and concerns (20 min)	‘What benefits do you think a birth certificate gives a child? What concerns or barriers do you see?’ Invite both positive and negative views without steering.

Step	Facilitator guidance
5. Collective reflection (15 min)	‘Do you think most families in this community believe birth registration is important for their children? Do you think their actions match what they believe?’ Probe for pluralistic ignorance.
6. Closing (5 min)	Neutral synthesis. Thank participants. Invite them to share what they discussed with family members before the next session.

Cross-Reference

All materials in this annex should be used in conjunction with:

* Annex 5A, section A.4 (Strategic Communication Mix)—to situate these materials within the programme strategy

* Annex 5B (Social Norm Diagnostic Worksheet)—to ensure materials match the norm-type and strategic orientation identified through formative research

* Annex 5E (Programme Design Quality Checklist)—criterion 5 (Strategy Selection) requires that communication materials be matched to the determinant analysis

Annex 5D: Glossary of SBC Terms

This glossary defines key Social and Behaviour Change terms as used in Chapter 5 and Annexes 5A–5E of these Regional Guidelines. Definitions draw on the UNSD Handbook on Communication for Development (Series F No. 121), UNICEF Social and Behaviour Change Programme Guidance (2022), and UNICEF Everybody Wants to Belong (2018), as indicated. Where terms have been adapted for the CRVS context, this is noted.

Terms are listed in alphabetical order. Cross-references to Chapter 5 sections and to other annexes are provided where relevant. The glossary should be read alongside Annex 5B (Social Norm Diagnostic Worksheet) and Annex 5A (Communication Plan Template).

Term	Definition and CRVS application
Advocacy	Actions aimed at influencing the policy environment, elevating community voices, and developing or changing laws, policies, and administrative practices. In CRVS, advocacy targets: elimination of registration fees and penalties; policy changes to simplify procedures; budget allocations for SBC; and legislative reforms. One of four core communication strategies in the UNSD Handbook (Series F No. 121). See Chapter 5, Section 5.5.4.
Behaviour Change Communication (BCC)	Individual and interpersonal communication activities designed to promote specific behaviour changes through knowledge, attitude, and skill development. Addresses the Agency domain of the Behavioural Drivers Model. In CRVS: informing families about registration requirements and benefits; counselling by health workers; addressing misconceptions. BCC is necessary but insufficient when social norms are the primary driver of non-registration. Source: UNSD Handbook, Series F No. 121.
Behavioural Drivers Model (BDM)	A framework used in UNICEF SBC programming that organises the determinants of behaviour into three domains: Agency (psychological factors: intent, self-efficacy, attitude, emotion, cognitive biases); Social Norms (sociological factors: descriptive and injunctive norms, reference network pressure, meta-norms); and Context (environmental factors: structural barriers, access, governing entities, communication environment). In CRVS, all three domains must be addressed for registration behaviour to occur consistently. Source: UNICEF SBC Programme Guidance (2022), sbcguidance.org.
C4D—Communication for Development	A participatory communication process combining social psychology and marketing principles to produce behaviour and social change with long-term effects. C4D moves beyond information-sharing to address the structural and normative determinants of behaviour. Remains the widely-used term in Francophone West and Central Africa. Largely synonymous with Social and Behaviour Change Communication (SBCC). Source: UNSD Handbook, Series F No. 121.
Collective Change	An SBC approach recognising that some behaviours cannot or should not change in isolation—coordinated collective action is needed either because the behaviour is interdependent or because changing alone creates stigma or sanctions. In CRVS: community-wide commitments to register all vital events; public declarations by traditional and religious leaders creating joint accountability; collective abandonment

Term	Definition and CRVS application
	of practices that delay registration. Differs from social mobilisation in that collective change involves the entire community in a coordinated shift. See Chapter 5, Section 5.5.3.
Descriptive norm	A belief about what others in a group actually do (empirical expectation). In CRVS: 'Most people in my community do not register marriages.' Descriptive norms are a primary target for community dialogue because revealing that others privately support registration (when pluralistic ignorance exists) can shift the perceived norm rapidly. Source: UNICEF Everybody Wants to Belong (2018).
Formative research	Evidence-gathering conducted before programme design to understand the context, behaviours, and their determinants. Must include both quantitative data (registration rates, survey data) and qualitative data (FGDs, KIIs, observation). In SBC for CRVS, formative research must explicitly address social norms—not only knowledge and awareness. Criterion 1 in Annex 5E is MANDATORY: no programme should be designed without prior formative research. Source: UNSD Handbook, Series F No. 121, Chapter II.
Human-Centred Design (HCD)	A design approach placing end-users at the centre of solution development. In CRVS: co-designing service improvements (mobile units, simplified forms, evening hours, integration with naming ceremonies or market days) to reduce contextual barriers. HCD does not require specialised expertise—any programme team can apply basic HCD principles by involving communities as co-designers. The UNICEF Demand Strategy Builder (Common Thread/UNICEF ROSA, 2021) provides a structured HCD process applicable to CRVS. See Chapter 5, Section 5.5.4.
IEC—Information, Education and Communication	Traditional approach to public communication characterised by one-way message dissemination, expert-driven design, and a focus on individual awareness. Predecessor to SBCC and SBC. IEC alone has proven insufficient to achieve sustainable behaviour change at scale, particularly where social norms are the primary barrier. Still used in some national contexts as a synonym for public communication—programme teams should distinguish IEC from evidence-based SBC when communicating with national counterparts.
Injunctive norm	A belief about what others in a group approve of or expect (normative expectation). In CRVS: 'People here think a religious ceremony is sufficient—registering at the civil registration office is unnecessary.' Injunctive norms are maintained through social approval and disapproval. Changing injunctive norms requires engaging reference network members—not just the primary target group. Source: UNICEF Everybody Wants to Belong (2018).
Meta-norms	Deeply embedded norms that reinforce or underlie other norms—particularly gender roles, age hierarchies, and power dynamics. In CRVS: the meta-norm that 'only men can register vital events' underlies many barriers to women's independent registration. Meta-norms are the most resistant to change and require SHIFT strategies over extended timeframes.

Term	Definition and CRVS application
Pluralistic ignorance	A situation where the majority of group members privately reject a norm but each assumes others accept it—maintaining behaviour no one actually endorses. In CRVS: families privately value birth certificates for their children but assume their community considers them unnecessary—and so delay registration. Revealing pluralistic ignorance through facilitated community dialogue is one of the most effective mechanisms for rapid norm change. Source: UNICEF Everybody Wants to Belong (2018).
Positive deviance (PD)	The observation that in every community, some individuals or families facing the same constraints as peers achieve better outcomes through uncommon behaviours or strategies. Positive deviance programming identifies these individuals and facilitates peer learning at community level. In CRVS: PD inquiry identifies families who register consistently despite barriers—and amplifies their strategies. See Chapter 5, Section 5.5.3.
Reference network	The specific group of people whose behaviour and approval/disapproval matter to an individual when making a decision. The reference network—not the individual—is the unit of analysis for social norm change. In CRVS: for birth registration, the reference network typically includes midwives, mothers-in-law, and community health workers; for marriage registration, religious leaders and mothers-in-law; for death registration, household heads and clan elders. SBC programmes targeting only registration offices rather than reference network members consistently underperform. Source: UNICEF Everybody Wants to Belong (2018), Tools G6 and G7.
Social and Behaviour Change (SBC)	The current programmatic framework for behaviour change programming, extending beyond communication to incorporate Human-Centred Design, Positive Deviance, Collective Change, behavioural insights, systems strengthening, and structural approaches. Applies a human rights framing—communities are co-designers of solutions, not passive recipients of messages. SBC organises its toolkit into seven programmatic approaches: Community Engagement; Social and Behaviour Change Communication; Applied Behavioural Science; Supportive Public Policies; Systems Strengthening; Service Improvements; and Social Movements. Source: UNICEF SBC Programme Guidance (2022), sbcguidance.org.
Social Change Communication (SCC)	Community-level dialogue and group processes that shift shared norms and build collective support for behaviour change. Targets the community level of the Socio-Ecological Model. Differs from BCC in that SCC does not target individuals but rather the collective—norms, expectations, and reference networks. MANDATORY strategy when social norm diagnosis (Annex 5B) results in a SHIFT or REFRAME orientation. Source: UNSD Handbook, Series F No. 121.
Social mobilisation	Coordinating multiple sectors, organisations, and community actors toward a shared social goal. In CRVS: uniting health workers, teachers, religious leaders, civil society, and government around universal registration. Social mobilisation creates the enabling environment for individual behaviour change and community norm shift. Source: UNSD Handbook, Series F No. 121.

Term	Definition and CRVS application
Socio-Ecological Model (SEM)	Analytical and design framework recognising that behaviour is influenced simultaneously at individual, interpersonal, community, and societal levels. Effective CRVS SBC interventions address all four levels—interventions addressing only the individual level while leaving community and societal barriers unchanged produce limited and unsustainable results.
Theory of Change (ToC)	A structured description of how and why activities are expected to produce desired outcomes, including the causal assumptions and intermediate steps in the change pathway. Must be derived from formative research—generic templates are insufficient. Should articulate the specific causal mechanism linking SBC activities to registration behaviour change (e.g. through norm shift, knowledge change, or service improvement). Review and update annually.

Acronyms Used in Chapter 5 and Annexes

BCC—Behaviour Change Communication
BDM—Behavioural Drivers Model
C4D—Communication for Development
CRVS—Civil Registration and Vital Statistics
FGD—Focus Group Discussion
HCD—Human-Centred Design
IEC—Information, Education and Communication
KII—Key Informant Interview
M&E—Monitoring and Evaluation
PD—Positive Deviance
SBC—Social and Behaviour Change
SBCC—Social and Behaviour Change Communication
SCC—Social Change Communication
SDG—Sustainable Development Goal
SEM—Socio-Ecological Model
ToC—Theory of Change
WCARO—West and Central Africa Regional Office (UNFPA)

Annex 5E: Programme Design Quality Checklist

Use this checklist to assess an SBC programme design before submission for approval or funding. Score each criterion: 0 = not met, 1 = partially met, 2 = fully met. Minimum score of 14/16 required for approval. Programmes scoring below 14 should return to the design phase.

This checklist applies findings from the UNICEF SBC Community of Practice review of 533 SBC strategies (2022), which found that only 17% discussed formative research, only 4% explicitly addressed social norms, and 43% had no conceptual model. These gaps directly informed the mandatory criteria below.

Mandatory Criteria

Formative research (criterion 1) and Social norm diagnosis (criterion 3) are MANDATORY prerequisites.

A score of 0 on either of these criteria requires immediate return to the design phase, regardless of the total score.

This rule reflects the evidence from 533 SBC strategy reviews: programmes designed without formative research or without social norm diagnosis consistently fail to achieve sustainable change (UNICEF SBC Community of Practice, 2022).

★ = Mandatory criterion.

Part 1: Core Design Criteria (16 points)

Design element	Quality criteria	Score 0/1/2
1. Formative research ★ MANDATORY ★ MANDATORY	Completed before design; include FGDs and/or interviews with primary target communities; addressed social norms (not just knowledge/awareness); findings explicitly inform strategy selection; conducted with sex-disaggregated samples; documented and referenced in programme design.	0 / 1 / 2
2. Determinant analysis	Completed for each vital event targeted; distinguishes norm-driven from structural and knowledge-based barriers; includes gender analysis; mapped to both SEM levels (individual/interpersonal/community/societal) and BDM domains (Agency/Social Norms/Context).	0 / 1 / 2
3. Social norm diagnosis ★ MANDATORY ★ MANDATORY	Annex 5B worksheet completed for each vital event and target community type; pluralistic ignorance assessed; reference networks identified and mapped; strategic orientation	0 / 1 / 2

Design element	Quality criteria	Score 0/1/2
	(FORTIFY/REFRAME/SHIFT/BE AWARE) selected and justified with evidence.	
4. Theory of Change	Explicit ToC developed from formative research findings—not a generic template; causal pathway from activities to outcomes to impact is articulated; intermediate outcomes include norm indicators; assumptions and risks stated and monitored.	0 / 1 / 2
5. Strategy selection	Strategies matched to determinant analysis: BCC for knowledge/self-efficacy gaps; SCC/norms strategy for collective barriers; HCD for structural/service barriers; advocacy for policy barriers. Multi-lever, multi-level approach explicitly designed. Social norm strategy is MANDATORY if norm diagnosis identifies norm-driven barriers.	0 / 1 / 2
6. Gender responsiveness	Gender analysis completed using disaggregated data; women's reference networks explicitly included in design; legal standing gaps addressed (e.g. women's independent registration rights); gender-disaggregated indicators in M&E framework; programme activities designed to address gender power dynamics.	0 / 1 / 2
7. Supply-demand integration	Supply-side capacity plan developed in parallel with demand-generation; registrar training included or planned; geographic coverage of services aligned with demand-generation activities. Demand is only generated where services can absorb it.	0 / 1 / 2
8. Phased timeline and sustainability	Minimum 18-month programme timeline; norm-shift phase explicitly planned with milestones; Phase 4 (Consolidation) included; sustainability strategy articulates how changes will be maintained after programme ends, including handover to national institutions and budget integration.	0 / 1 / 2

Total score (Part 1): _____/16

Part 2: Supplementary Criteria (8 additional points)

These criteria are not scored towards the mandatory minimum of 14/16 but are required for programmes of regional or national scale. Score for diagnostic and improvement purposes.

Design element	Quality criteria	Score 0/1/2
9. Vulnerable populations	Specific strategies designed for nomadic/pastoralist communities, refugees and stateless persons, populations in humanitarian settings, and persons with disabilities. These strategies are resourced and not generic add-ons.	0 / 1 / 2

Design element	Quality criteria	Score 0/1/2
10. Reference network engagement	Specific activities designed for each key reference network member group (specify: religious leaders, mothers-in-law, CHWs, etc.). Reference network engagement plan aligns with Annex 5B findings. Activities are distinct from general 'stakeholder engagement'.	0 / 1 / 2
11. Norm monitoring indicators	M&E framework includes norm indicators (not only registration rate outcomes): descriptive norm shift (% believing most others register); injunctive norm shift (% believing community approves of registration); women's awareness of independent registration rights. Indicators collected at baseline, midline, and endline.	0 / 1 / 2
12. Intersectoral coordination	Inter-agency SBC coordination mechanism documented; roles and responsibilities agreed across CRVS, Health, Education, Justice, and Women's Affairs sectors; meeting schedule and reporting lines established.	0 / 1 / 2

Total score (Part 2): _____/8

Scoring Guidance

Score range	Interpretation and recommended action
14–16	Programme design meets quality standards. Proceed to detailed implementation planning. Ensure supplementary criteria (Part 2) are addressed before scale-up.
10–13	Programme design partially meets standards. Address all criteria scoring 0 or 1 before finalisation. Particular attention to mandatory criteria (1 and 3) and gender responsiveness (criterion 6).
Below 10	Programme design requires significant revision. Return to formative research and strategy design phase. Submission not recommended.
0 on criterion 1 or 3	MANDATORY RETURN TO DESIGN PHASE regardless of total score. Formative research and social norm diagnosis are not optional.

How to Use This Checklist

Step 1: Complete this checklist after drafting the programme design document (Annex 5A) and before submission for approval or funding.

Step 2: Score each criterion independently based on the programme design document. Involve at least two reviewers and reconcile scores.

Step 3: For criteria scoring 0 or 1, document specific gaps and assign responsibility for addressing them before submission.

Step 4: Record the date of checklist completion and the names of reviewers. Attach to the programme design document.

Step 5: After programme launch, use this checklist again at mid-term review to assess implementation fidelity.
Cross-reference: Each criterion in this checklist maps to a section in Annex 5A (Communication Plan Template). Use the two tools together.

Reviewer Information

Field	
Programme title	
Country/region	
Reviewer 1 name and role	
Reviewer 2 name and role	
Date of review	
Version of programme design reviewed	

CHAPTER 6: DIGITISATION OF CIVIL REGISTRATION AND VITAL STATISTICS SYSTEMS

Chapter Purpose

This chapter provides comprehensive guidance on digitizing CRVS systems in West Africa (ECOWAS member states). It addresses: the current status of digitisation efforts across member states; key challenges; guiding principles; the four-phase implementation framework; interoperability requirements; data protection; sustainability; and financing. It draws on international standards, World Bank ID4D publications, APAI-CRVS frameworks, and documented country experiences—including the NEKKAL programme in Senegal, and other digital solutions.

6.1 Introduction

The digital transformation of Civil Registration and Vital Statistics (CRVS) systems represents a critical opportunity for West Africa to accelerate progress toward universal registration coverage, improve data quality, enhance service delivery, and establish CRVS as foundational digital public infrastructure (DPI). Digital CRVS systems can overcome many traditional barriers—geographic distance, limited human resources, manual processing delays, and fragmented data systems—while creating new pathways for integration with health, education, social protection, and national identification systems. They also enable the conservation and securing of the most sensitive biographical and personal data that civil registration produces [1].

As articulated in the United Nations Principles and Recommendations for a Vital Statistics System, Revision 3, digitisation is not simply about replacing paper forms with electronic ones. It requires fundamental rethinking of business processes, institutional arrangements, legal frameworks, and capacity development strategies to ensure that technology serves the core objectives of universal, continuous, permanent, and compulsory civil registration [2]. Critically, system resilience must be built in from the outset: CRVS digitisation must anticipate not only technical failures but also political disruptions, election periods, industrial strikes, humanitarian crises, limited participation from users, and insecurity—all of which can reduce coverage if contingency measures are not in place. More importantly, it needs buy-in and partnering with communities to improve the uptake of services in all zones, from urban to most remote settings, for all populations, including the most vulnerable, the overwhelming majority of whom are women and children.

The Africa Programme for Accelerated Improvement of Civil Registration and Vital Statistics (APAI-CRVS) has positioned digitisation as a key priority for achieving the continental vision of comprehensive CRVS systems [3]. The Lusaka Declaration of 2019 called upon African Ministers to strengthen investments in digitisation and facilitate interoperability between identity management and CRVS systems [4]. The designation of 10 August as Africa CRVS Day, with specific focus on digital transformation, underscores the continental commitment to leveraging technology for improved registration and vital statistics.

The digitisation of CRVS systems aligns directly with the African Union's Agenda 2063: *The Africa We Want*, which sets out a 50-year continental development vision calling for inclusive growth, sustainable development, and good governance anchored in accountable institutions and universal legal identity. The Agenda 2063 First Ten-Year Implementation Plan (2014–2023) explicitly includes CRVS strengthening as an enabling mechanism for achieving its goals. Equally,

the United Nations 2030 Agenda for Sustainable Development and its Sustainable Development Goals (SDGs)—particularly SDG 16.9 on universal legal identity—provide a global accountability framework within which African CRVS digitisation efforts must be embedded [3]. These two frameworks are complementary and mutually reinforcing: achieving SDG targets requires functioning civil registration systems, while the AU Vision for 2063 requires the digital and institutional infrastructure that modern CRVS digitisation provides. The boxes below summarise each framework's relevance for CRVS digitisation in West and Central Africa.

Digitalizing CRVS systems is key to the **ECOWAS Vision 2050**, particularly its pillars of **"Economic Integration and Interconnectivity"** and **"Transformation, Inclusive and Sustainable Development."** The transition to digital identity platforms can help to create a seamless regional space for citizen movement and service access, while supporting the development of a more integrated labour market. It also supports the vision's focus on **"Good Governance"** by providing real-time data for transparent resource allocation and human rights monitoring, ensuring every citizen is visible and helping to achieve a fully integrated community.

The ECOWAS Vision 2050 has been formally endorsed by the ECOWAS Authority of Heads of State and Government and it sets an ambitious agenda for a digitally integrated, prosperous, and people-centred West Africa by 2050. Under Pillar 3, "Governance and Peace", Vision 2050 explicitly identifies civil registration and digital identity as foundational enablers of inclusive governance and citizenship rights. The digitisation of CRVS systems directly supports this vision by ensuring that every birth, marriage, and death is recorded, that every citizen can prove their identity, and that population data is available to inform evidence-based policy across all ECOWAS member states.

CONTINENTAL FRAMEWORK: AFRICAN UNION AGENDA 2063—THE AFRICA WE WANT

Adopted by the African Union in 2013, Agenda 2063 is a 50-year strategic framework for transforming Africa into "the Africa we want". It is built around seven aspirations, of which Aspiration 1: "A Prosperous Africa based on Inclusive Growth and Sustainable Development" and Aspiration 3: "An Africa of Good Governance, Democracy, Respect for Human Rights, Justice and the Rule of Law" are most directly relevant to CRVS digitisation. The Agenda recognises that functional civil registration and vital statistics systems are foundational to realizing the vision of an integrated, prosperous, and peaceful Africa. Specifically, Goal 11 of Agenda 2063 calls for "democratic values, practices, universal principles of human rights, justice and the rule of law entrenched"—which requires registration of citizens and legal identity management as its operational basis.

Key implications for CRVS digitisation in West Africa (ECOWAS member states (a) The First Ten-Year Implementation Plan (2014–2023) included CRVS system strengthening as an enabling mechanism; (b) The Second Ten-Year Implementation Plan (2024–2033) continues this commitment, with an emphasis on digital transformation; (c) APAI-CRVS—the continent's primary CRVS technical programme—is explicitly aligned with and reports progress against Agenda 2063 targets; (d) The Continental CRVS Coordination Mechanism and its reporting requirements provide accountability for ECOWAS member states; (e) The AU Vision for 2063 provides the political legitimacy for national governments to prioritise CRVS investment as a continental obligation, not merely a technical preference

Source: African Union (2013, 2014, 2024) [A]; APAI-CRVS (ongoing) [B].

GLOBAL FRAMEWORK: UNITED NATIONS 2030 AGENDA FOR SUSTAINABLE DEVELOPMENT

Adopted by all United Nations Member States in September 2015, the 2030 Agenda for Sustainable Development comprises 17 Sustainable Development Goals (SDGs) and 169 targets. For CRVS systems in West Africa, three SDGs are directly and critically relevant: SDG 16.9 calls for universal legal identity, including birth registration, for all by 2030. SDG 17.18 requires capacity-building for data, monitoring and accountability systems. SDG 3.7 (universal health coverage) and SDG 5 (gender equality) depend on functioning vital statistics systems to track progress. The monitoring framework for the 2030 Agenda specifically requires disaggregated birth registration data as a Tier I indicator—meaning functioning CRVS systems are not optional but essential for countries to demonstrate compliance with the global development agenda.

Key implications for CRVS digitisation in West Africa: (a) ECOWAS member states have formally committed to achieving SDG 16.9—creating a political mandate for CRVS investment; (b) the APAI-CRVS continental scorecards track country progress against SDG targets, providing accountability and benchmarking; (c) digitisation is the only scalable path to achieving the birth registration rates required to meet SDG 16.9 in countries where coverage currently falls below 50%; (d) the 2030 deadline creates a strong impetus to accelerate digitisation timelines and scale up successful innovations such as NEKKAL (Senegal); (e) donor financing for CRVS digitisation is increasingly aligned with SDG reporting requirements, making 2030 Agenda compliance a prerequisite for accessing international development resources.

Source: United Nations (2015) [C]; United Nations Statistics Division (ongoing) [D]; APAI-CRVS (2018–2024) [B].

The World Bank's Identification for Development (ID4D) Initiative—which has conducted ID diagnostics in West African countries including Côte d'Ivoire, Guinea, Nigeria, Liberia, Sierra Leone— provides authoritative frameworks for the design and implementation of foundational identification systems that must be built upon or integrated with CRVS digitisation efforts [5]. As the ID4D Initiative emphasises, civil registration is the primary source of legal identity: it records the opening of legal identities at birth and their closure at death, making CRVS the universal, continuous, and permanent system that underpins all other identity management systems [6].

The West Africa region presents significant heterogeneity in its legal, cultural, institutional, and linguistic contexts. ECOWAS countries largely include common law (Ghana, Nigeria, Sierra Leone, Gambia, Liberia) and civil law (francophone and lusophone) traditions. Several countries share French civil law traditions but differ in their institutional capacity, security situations, and digital readiness. This chapter acknowledges these differences and presents approaches that can be adapted to specific national contexts, rather than prescribing uniform solutions.

This chapter draws upon international standards, regional frameworks, World Bank ID4D publications, and documented country experiences to provide practical guidance for CRVS digitisation in West Africa. It addresses: the current status of digitisation efforts, including local solutions developed within the region; key challenges; guiding principles; implementation processes; interoperability requirements; data protection frameworks; and sustainability considerations essential for successful digital transformation.

6.2 Current Status of CRVS Digitisation in West Africa

6.2.1 Regional Overview

ECOWAS member states have made significant strides in CRVS digitisation, though progress remains uneven. As documented in UNICEF's 2024 Landscape Analysis on Digitalisation of CRVS Systems presentation, the region exhibits a spectrum of digitisation maturity levels, ranging from countries with comprehensive digital systems covering all vital events to those still primarily relying on paper-based processes [7].

The ECOWAS Vision 2050 frames digital transformation as a regional imperative, not merely a national responsibility. The Vision's Flagship Programme on Digital Economy and e-Governance calls for the establishment of interoperable digital identity and civil registration systems across all member states by 2030, creating a common digital space in which citizens can access services regardless of their physical location.

Several countries have launched ambitious digitisation initiatives with support from development partners including UNFPA, UNICEF, WHO, and the World Bank. These efforts typically begin with birth registration digitisation in health facilities, given clear linkages with health information systems and the immediate benefits for maternal and child health programming [8]. However, comprehensive digitisation encompassing all vital events—births, deaths, marriages, and divorces—across all registration points remains limited across West Africa.

The World Bank ID4D Global Dataset 2021 estimated that approximately 850 million people globally lack official proof of identity, with Sub-Saharan Africa representing the largest share of those without identification—the vast majority being persons whose births were never registered or whose birth registration data was never digitised [9]. For West Africa specifically, digitisation of CRVS records is urgently needed both prospectively (registering new vital events digitally) and retrospectively (digitizing historical paper records that form the evidence base for legal identity).

Additionally, the reconstruction of paper registers lost, destroyed, or burned during conflicts and crises—particularly relevant for Sierra Leone, Liberia, Guinea-Bissau, and Nigeria—represents a specific dimension of digitisation work that must be addressed within the regional framework. This includes both the technical challenge of reconstructing damaged or destroyed records and the institutional challenge of establishing secure data centres and backup systems to prevent future losses [10].

6.2.2 ECOWAS Country Progress Examples

ECOWAS member states present varied but often innovative approaches to CRVS digitisation:

Ghana

Ghana achieved remarkable progress through World Bank-supported digitisation, reaching 93% birth registration coverage in 2022, up from 58% in 2015. The system included mobile registration units, digitisation of historical records (67% completed), and data transmission infrastructure linking registration points to central systems. Sustaining these gains requires embedding CRVS operations within national budget lines and permanent institutional frameworks. However, when World Bank project funding was subsequently withdrawn, birth registration coverage declined significantly—directly demonstrating the acute vulnerability of digitisation gains not anchored in domestic budget commitments and institutional ownership. This is the critical cautionary lesson for all countries in the region [11].

Nigeria

Nigeria launched an electronic CRVS (e-CRVS) system in 2022 through the National Population Commission (NPC) in partnership with technology providers. Using OpenCRVS as the digital platform, Phase 1 of the digital transformation commenced in April 2022, with field testing beginning in October 2022. The system operates across 36 states with federal-state coordination mechanisms, although implementation faces scale challenges given the population of over 220 million people [12]. A World Bank ID4D Diagnostic for Nigeria has assessed the foundational ID ecosystem, including CRVS linkage [13].

Senegal

Senegal and the European Union launched the NEKKAL programme in 2021, which aims to interconnect civil registration centres and digitise civil status records. The programme will digitise 15 million civil status records, create an index of 30 million records, and build 34 centres in the 14 regions. It will train 3,000 civil registration officers and managers and 600 archivists—recognizing that archiving is a frequently neglected component of digitisation. As of the launch date, only 62% of children aged 0 to 5 were registered at birth in Senegal, with double matriculation and file destruction being persistent problems [14]. The RapidPro platform has also been deployed for birth notification in health facilities, providing a low-technology entry point for digitisation.

Source: UNFPA WCARO (2023–2025) [I]; World Bank/ID4D (2024) [F]; UNICEF Data (2023–2025) [H]; Republic of Guinea (2023) [see endnote 15].

Guinea

Guinea has developed innovative legal frameworks (Laws L2023-0019-CNT and L2023-0020-CNT) addressing marriage registration and the transcription of customary marriages, with plans for digital implementation. The RapidPro platform was deployed in over 400 health centres for birth notification, although usage has been constrained by technical and resource limitations [15].

Sierra Leone

Sierra Leone has undertaken CRVS digitisation with support from multiple development partners, with particular attention paid to the restoration of records destroyed during the 1991-2002 civil war—a challenge with direct relevance to other post-conflict countries in the region [16].

The West Africa Unique Identification for Regional Integration and Inclusion (WURI) Programme is a US$395 million, 10-year World Bank IDA operation to build foundational digital identity (fID) systems across six ECOWAS countries: Côte d'Ivoire, Guinea, Benin, Burkina Faso (prior to its withdrawal from ECOWAS), Togo, and Niger (prior to its withdrawal from ECOWAS). Implemented in partnership with the ECOWAS Commission and the World Bank's Identification for Development (ID4D) Initiative, WURI directly links civil registration to foundational identity—making CRVS digitisation the operational basis for sustainable legal ID systems across the sub-region.

REGIONAL INITIATIVE: West Africa Unique Identification for Regional Integration and Inclusion (World Bank ID4D/ECOWAS): WURI

How it works: Each participating country develops its own foundational ID platform using a minimal set of biographic and biometric attributes that uniquely describe an individual. The

fID system is designed to sync with civil registration: birth registration triggers enrollment and issuance of a Unique National Identifier (UNI), while death registration automatically deactivates the UNI. WURI explicitly addresses interoperability across ECOWAS borders—recognizing that 70% of people in the ECOWAS region are mobile across borders and require portable, regionally recognised credentials.

Results in Benin: WURI-Benin achieved a breakthrough result: approximately 99% of Beninese citizens now hold a legal digital identity through the foundational identity certificate ("C'est moi"/Certificat NPI/fID), accessible via a mobile application with QR-code authentication. WURI-Benin enrolled 2.2 million additional people, including 4,000 Beninese living abroad. In 2024, 2,050 biometric mobile registration terminals were donated to Benin's National Agency for the Identification of Persons (ANIP) to strengthen civil registration operations.

Key design principles: (a) Inclusive coverage—designed to reach the most vulnerable populations first, regardless of nationality or legal status; (b) open standards to reduce costs and avoid vendor lock-in; (c) CRVS-ID integration by design—birth registration initiates a UNI; (d) regional interoperability across ECOWAS borders; (e) "first-mile" priority—reaching remote and nomadic populations who are hardest to register.

Relevance for CRVS digitisation: WURI demonstrates that regional ID systems must be grounded in functioning civil registration. Countries that have not yet digitised their CRVS systems cannot fully leverage WURI-type platforms. The programme creates strong incentives for ECOWAS member states to prioritise CRVS digitisation as the entry point to the broader digital identity ecosystem. The WURI-Benin results also demonstrate the potential of blended finance as a sustainability model: by combining World Bank IDA financing, government co-investment through the national identification agency (ANIP), and in-kind contributions from mobile registration operators, Benin achieved near-universal foundational identity coverage while building the domestic institutional capacity to sustain and expand the system beyond the project period. This blended finance approach—in which external capital is used to reach scale while government ownership and budget integration are secured from the outset—represents a replicable model for sustainable digital ID and CRVS integration across ECOWAS member states.

Source: World Bank (2018, 2020) [E]; World Bank/ID4D (2024) [F].

6.2.3 Common Digitisation Approaches

Countries in the region typically adopt one of three digitisation approaches, often in combination:

- **Facility-based systems**: Digital birth registration integrated into health facility workflows, often linked to health information systems (DHIS2, HMIS).
- **Office-based systems**: Digitisation of civil registration offices with electronic registration, certificate printing, and centralised databases, which is particularly suitable for urban areas with reliable infrastructure.
- **Hybrid approaches**: Combined strategies integrating facility-based birth notification with office-based registration completion, certificate issuance, and archive management. NEKKAL (Senegal) exemplifies this comprehensive approach.

As documented in the APAI-CRVS Practitioners Guide for Digital CRVS Systems, successful digitisation requires careful assessment of the country context, institutional capacity, infrastructure availability, and stakeholder readiness before selecting appropriate technological solutions. An African e-CRVS Shared Asset (ACSA) is currently under development by UNECA,

UNICEF, and partners, which would provide a common digital CRVS platform for African countries willing to adopt it, reducing the need for each country to develop bespoke systems [17] [18].

6.3 Key Challenges for CRVS Digitisation

Despite growing momentum for digital transformation, CRVS digitisation in West Africa faces substantial challenges that must be systematically addressed. The underlying reasons for these challenges and their fundamental causes warrant examination.

6.3.1 Infrastructure and Connectivity Constraints

A limited and unreliable electricity supply affects system availability, particularly in rural and peri-urban areas where registration needs are greatest. Intermittent internet connectivity disrupts real-time data transmission, requiring offline functionality and periodic synchronisation protocols. These infrastructure deficits are the principal reason why offline-first design approaches are not optional features but essential requirements for any CRVS digital system in the region. Systems designed assuming reliable connectivity will systematically fail in the areas with the lowest registration coverage.

6.3.2 Financial and Resource Limitations

High initial investment costs for hardware, software, and infrastructure create barriers to entry. Ongoing operational expenses such as Internet connectivity, system maintenance, technical support, and hardware replacement are often severely underestimated during project planning. Country experiences across the region show the pitfalls of treating digitisation as a time-bound project rather than an institutional transformation. Without dedicated domestic budget lines or the local technical skills necessary to maintain systems, these initiatives often fail after donor funding ceases [19].

The root cause is structural: CRVS digitisation is funded through time-limited donor projects rather than through domestic budget lines, creating inherent sustainability gaps. Countries must move from a “project logic” to a “programme logic” with multi-year budget commitments, cost projections for the total cost of ownership, and domestic revenue generation mechanisms.

6.3.3 Capacity and Change Management

Insufficient training of civil registrars, health workers, and other system users limits effective system utilisation. Resistance to change from staff accustomed to paper-based processes slows down the adoption of new working methods and processes. High staff turnover requiring continuous retraining strains institutional capacity. Weak ICT skills among registration personnel require simplified user interfaces—a lesson well-learned by countries in West Africa, which were designed to be operable by health workers with minimal digital literacy.

6.3.4 Legal and Regulatory Gaps

Outdated legal frameworks that do not recognise electronic records, digital signatures, or electronic certificates create legal uncertainty. The absence of data protection legislation exposes citizens to privacy risks. Lack of interoperability standards hinders data exchange between systems. These legal gaps must be addressed through legislative reforms aligned with international standards including the World Bank’s Principles on Identification for Sustainable Development and the African Union Convention on Cyber Security and Personal Data Protection.

6.3.5 Technical and System Design Issues

Inappropriate technology choices that do not match the country context, capacity, or infrastructure realities result in system failures. Vendor lock-in through proprietary systems creates dependency and limits future flexibility. A key recommendation from UNECA, UNICEF, and the ID4Africa

community is to consider open-source solutions such as OpenCRVS as the technical platform for digital CRVS systems, ensuring that countries maintain full ownership and control of their data without vendor lock-in [20].

6.3.6 Coordination and Governance Challenges

Weak coordination between civil registration authorities, health ministries, statistics offices, and ICT agencies fragments digitisation efforts. Competing digital initiatives across the government create duplicative systems and wasted resources. Contexts of countries such as Liberia, Sierra Leone, Guinea-Bissau, require adaptive governance approaches.

The ECOWAS Vision 2050 reinforces the importance of a rights-based, citizen-centred digital transformation. Principle 1 of Vision 2050's Digital Economy pillar states that 'no one should be left behind in the digital transition'—a commitment that translates directly into the universal coverage and inclusive design requirements articulated in the Eleven Guiding Principles below.

6.4 Guiding Principles for CRVS Digitisation

Successful CRVS digitisation requires adherence to fundamental principles that ensure systems are effective, sustainable, secure, and serve the needs of all stakeholders. These principles, drawn from the World Bank ID4D Principles on Identification for Sustainable Development, APAI-CRVS frameworks, and documented country experiences, should guide decision-making throughout the digitisation process.

Eleven Guiding Principles for CRVS Digitisation in West and Central Africa

1. Universal coverage first: Technology serves registration; registration does not serve technology. Every digitisation decision must be evaluated by whether it increases the registration coverage, including for the most vulnerable: nomadic populations, refugees, internally displaced persons, indigenous populations such as Tuareg and Fulani communities in Guinea, Senegal, Nigeria, persons with disabilities, and children born outside health facilities.

2. Offline-first design: In the ECOWAS country context, reliable Internet connectivity cannot be assumed. Systems must function effectively in offline or low-connectivity conditions, with periodic synchronisation when connectivity is available.

3. User-centred design: Systems must be designed with and for end users—civil registrars, health workers, citizens, statisticians. Interfaces must be intuitive, requiring minimal training, and must accommodate diverse users including those with limited digital literacy and those working in local languages.

4. Appropriate technology: Solutions must match the country context, infrastructure realities, and institutional capacity. They must also favour simplicity, reliability, and proven approaches over sophistication, advanced features, and experimental technologies.

5. Open standards and interoperability: Adopt international standards enabling integration with health systems, national ID, social protection, and statistics. Preferably choose open-source platforms to avoid vendor lock-in and ensure countries retain full data sovereignty.

6. Data security and privacy by design: Protection of personal data—the most sensitive biographical information about every citizen—must be fundamental to system design, not an afterthought. Multiple layers of technical, organisational, and legal safeguards are required.

7. Legal framework alignment: Digital systems must operate within legal frameworks recognizing electronic records, digital signatures, and electronic certificates as legally equivalent to paper documents. Legislative reform must accompany or precede digitisation.

8. Sustainability and local ownership: Systems must be financially and institutionally sustainable beyond initial project implementation, with government budget lines, local technical capacity, and strong institutional ownership. Domestic budget lines and institutional transition planning must precede donor exit.

9. Phased implementation and continuous improvement: Digitisation should proceed incrementally through pilots, learning, refinement, and gradual national rollout, starting with birth registration in health facilities as the proven entry point.

10. Resilience: Systems must be designed to function through political disruptions, elections, strikes, humanitarian crises, insecurity, and climate shocks. Backup procedures, paper-based fallback protocols, and continuity plans are essential.

11. Community partnership and demand generation: Registration systems succeed only when communities understand their rights, trust the system, and actively engage with it. Digitisation must be accompanied by social and behaviour change strategies co-designed with communities—including women's groups, traditional and religious leaders, health workers, and local civil society—that address barriers of social norms and practices, distance, cost, language, and mistrust of government data collection. In West Africa, where registration rates for births, marriages, and deaths remain low in part due to demand-side constraints, technology alone cannot close coverage gaps. Community feedback mechanisms should also be built into digital systems to enable continuous improvement based on user experience.

Source: APAI-CRVS (2023) [L]; Plan International and Jembi Health Systems (2015) [J]; World Bank (2018, updated) [K]; UNFPA WCARO (2023–2025) [I]; UNDP CRVS-DPI analysis (2024).

6.5 CRVS Digitisation Framework and Processes

The CRVS Digitisation Guidebook, developed for APAI-CRVS and the African Development Bank, provides a comprehensive methodology for planning, analysing, designing, and implementing digitised CRVS systems. This framework has been applied in multiple African countries and offers practical, field-tested guidance for ECOWAS countries.

The APAI-CRVS Practitioners Guide for Digital CRVS Systems (2023) complements the Digitisation Guidebook with updated guidance specific to African country contexts, including sections on the African e-CRVS Shared Asset (ACSA), open-source platform considerations, and sustainability financing.

The digitisation process comprises four sequential but iterative phases, each with distinct activities, deliverables, and decision points.

6.5.1 Phase 1: Planning and Preparation (2–4 months)

Objectives: Establish project governance, assess current situation, define scope, secure stakeholder commitment, and develop a detailed project charter. Key activities include forming a Project Steering Committee with multidisciplinary representation (civil registration authorities, ICT, health ministry, statistics office, finance, justice); conducting a comprehensive readiness assessment evaluating infrastructure, human capacity, legal frameworks, financial resources, and institutional arrangements; defining project scope specifying which vital events will be digitised, which registration points covered, and the geographic coverage; and developing an approved Project Charter.

ECOWAS Experience

One of the most common failures in CRVS digitisation is scope overreach—attempting to digitise all vital events across the entire country simultaneously. Evidence from the West Africa region strongly supports starting with birth registration in health facilities as the entry point, then

expanding systematically. The iCivil (Burkina Faso) model began with health-facility birth registration and demonstrated scale before expanding. Countries should resist donor or political pressure to achieve comprehensive digitisation rapidly without the institutional and financial foundations to sustain it.

Source: APAI-CRVS (2023) [L]; Plan International and Jembi Health Systems (2015) [J]; UNFPA WCARO field assessments (2023–2025) [I].

6.5.2 Phase 2: Business Process Analysis and Design (3–5 months)

Objectives: Understand current registration processes, identify inefficiencies and improvement opportunities, design optimised digital workflows, define system requirements. Key activities include mapping current business processes for each vital event; designing improved digital processes; defining functional requirements (data capture, validation, storage, retrieval, reporting, certificate generation, user management, security, backup); defining non-functional requirements (performance, scalability, security, usability, accessibility, interoperability); and developing data standards aligned with national and international requirements.

6.5.3 Phase 3: System Development and Implementation (6–12 months)

Objectives: Procure or develop system, configure according to requirements, test comprehensively, train users, pilot implementation, refine based on feedback. Technology selection is a critical decision point. Three main options exist for the region: (a) open-source platforms such as OpenCRVS, which is already deployed or being piloted in Nigeria, offers full ownership and control with no vendor lock-in; (b) home-grown local solutions such as iCivil, which is adapted to specific country contexts; and (c) commercial off-the-shelf solutions, which may offer faster deployment but carry vendor lock-in risks and ongoing license costs that undermine long-term sustainability.

A strategic priority valued within ECOWAS is digital sovereignty: the principle that African governments should own and control their civil registration data infrastructure, rather than depend on proprietary external systems that cannot be modified, audited, or sustained without vendor involvement. ECOWAS member states are strongly encouraged to prioritise continental and African-developed platforms. Three solutions merit particular attention: the African e-CRVS Shared Asset (ACSA), currently under development by UNECA and partners as a continental public good; iCivil, developed in Burkina Faso and adapted to West African institutional contexts; and OpenCRVS, co-developed with African country teams and endorsed as a Digital Public Good by the Digital Public Goods Alliance. Where national capacity permits, countries should also invest in developing local technical teams capable of configuring, maintaining, and extending these platforms without external dependency—both to reduce the long-term costs and to build the digital public-sector capability that digital sovereignty requires.

6.5.4 Phase 4: National Rollout and Sustainability (12–24 months)

Objectives: Scale implementation nationally, establish ongoing support mechanisms, ensure sustainable operations, transition from project to programme management. This phase is where most programmes fail if sustainability has not been built into the design from Phase 1. Key activities include phased national deployment; establishing help desk and field support infrastructure; institutionalising quality assurance; securing sustainable financing through government budget lines; enabling interoperability with health, ID, and statistics systems; and building continuous enhancement mechanisms.

The NEKKAL Model—Transitioning from Project to Programme

Senegal's NEKKAL programme, supported by the European Union, provides a model for structuring national digitisation as an institutional programme rather than a time-limited project.

By committing to digitise 15 million records, train 3,600 personnel, and build 34 regional centres under a government-led framework with EU backing, NEKKAL creates the institutional infrastructure that will outlast the donor contribution. The explicit inclusion of 600 archivist training positions—recognizing that archiving is a chronic weakness in civil registration digitisation—illustrates the kind of detailed sustainability thinking required.

Source: European Union/Government of Senegal—NEKKAL Programme (2021–2025) [N]; UNICEF MICS Senegal (2019) [H].

6.6 Interoperability and Integration with National Systems

Digital CRVS systems should not function as isolated data silos but rather as foundational digital public infrastructure (DPI) enabling seamless integration with other national systems. As emphasised in the UNDP's 2024 analysis of CRVS and Digital Public Infrastructure integration, civil registration serves as the primary source for identity information: it records the opening of legal identities through births and their closure through deaths, making CRVS the universal, continuous, and permanent system tracking every individual's legal existence.

6.6.1 Key Integration Points

Health Information Systems: Birth and death notifications from health facilities should flow automatically to CRVS systems. DHIS2 integration is particularly important for ECOWAS countries that have invested significantly in health data management. The NEKKAL programme in Senegal demonstrates how facility-based notification and civil registration can be integrated into a single workflow.

National Identification Systems: Birth registration should initiate national ID enrollment, and death registration should deactivate ID status. The World Bank's ID4D Practitioner's Guide emphasises that the CRVS-ID relationship is bidirectional: CRVS informs ID systems while ID enhances CRVS data quality through deduplication and verification.

Ghana's National Identification Authority (NIA) has developed interoperability protocols linking its biometric national ID database with birth registration records held by the Births and Deaths Registry (BDR). Under this framework, a child's birth registration automatically generates a unique identification number that feeds into the NIA system, eliminating the need for separate re-registration at adulthood. The World Bank ID4D programme supported the technical design of this linkage, which is documented as a replicable model for ECOWAS member states.

The Ghana experience demonstrates three key lessons for ECOWAS countries pursuing CRVS-to-ID interoperability: first, that legal frameworks must explicitly authorise data sharing between civil registration and national ID authorities; second, that technical standards (API design, unique identifiers, data formats) must be agreed before system development begins; and third, that a phased rollout—starting with new births before addressing backlog populations—is operationally more sustainable than attempting full population coverage immediately.

Vital Statistics Production: Registration data should automatically populate vital statistics databases enabling timely production of demographic indicators. In most countries in the region, the production of vital statistics is hampered by significant delays and inaccuracies stemming from the current manual compilation process. Digital systems present a viable solution by eliminating this manual stage.

Social Protection Systems: Birth registration enables child benefit enrolment; death registration triggers beneficiary updates and inheritance processing; marriage and divorce registration determines eligibility for various social programmes. Integration prevents fraud while improving service delivery efficiency.

6.6.2 Technical Interoperability Standards

Effective interoperability requires adoption of common technical standards. The following table summarises the key standards relevant for ECOWAS member states.

Table 6.1. Summary of key standards relevant for ECOWAS member states

Standard Type	Standard/Protocol	Application in CRVS Context
Data exchange formats	XML, JSON, FHIR (Fast Healthcare Interoperability Resources)	Health system integration; data transmission between facilities and registration offices
Unique identifiers	National ID numbers; birth registration numbers; ISO 3166 geographic codes	Linking civil registration records with health, ID, and social protection databases
Coding systems	ICD-11 (causes of death); standardised place name gazetteers	Mortality statistics; geographic analysis of registration coverage
Security protocols	TLS 1.3 (data transit); AES-256 (data at rest); OAuth 2.0 (authentication); PKI (digital signatures)	Protection of personal data; secure system access
Health information exchange	HL7; OpenHIE (Open Health Information Exchange) framework	Integration of birth/death notifications from health facilities
Open-source CRVS platforms	OpenCRVS; DHIS2 CRVS module; MOSIP integration	End-to-end digital CRVS management with ID system integration *Source: APAI-CRVS (2023) [L]; Plan International and Jembi Health Systems (2015) [J]; World Bank/ID4D (2024) [K]; UNDP CRVS-DPI analysis (2024) [see endnote 32].*

6.6.3 Data Governance for Interoperability

Technical interoperability alone is insufficient. Robust data governance frameworks must specify data ownership, sharing permissions, use restrictions, quality responsibilities, and dispute resolution mechanisms. Legal agreements between institutions should formalise data sharing arrangements. Countries should draw on existing models developed in the region including such as Senegal's NEKKAL coordination mechanisms and Ghana's NIA interoperability frameworks.

Memoranda of Understanding (MOUs) should be the standard legal instrument for formalising CRVS interoperability arrangements. Each MOU should specify at minimum: the scope of data to be shared; permitted uses and restrictions; confidentiality and data protection obligations; data quality responsibilities of each party; and mechanisms for dispute resolution and periodic review. The following systems represent the minimum recommended set of MOU partners for any ECOWAS member state undertaking CRVS digitisation: the health sector (including DHIS2 operators and facility networks); the national foundational identity authority (including WURI-linked systems); the justice sector (courts and civil status tribunals); and the national statistics office. Governments are encouraged to make these MOUs public documents, reinforcing transparency and civic trust in digital civil registration systems.

ECOWAS biometric data sharing protocols provide models for cross-border interoperability, which is particularly important for managing the vital event registrations of migrant populations, refugees, and pastoralist communities crossing borders.

6.7 Data Protection, Privacy, and Security

Civil registration data contains some of the most sensitive personal information—names, dates of birth, parentage, marriages, deaths—requiring the highest standards of data protection and privacy. Digital systems, while offering many benefits, create new vulnerabilities requiring comprehensive security frameworks. As emphasised in the World Bank's Principles on Identification for Sustainable Development, privacy and data protection must be foundational, not afterthoughts.

6.7.1 Legal Framework Requirements

Countries should enact comprehensive data protection legislation aligned with international standards including the African Union Convention on Cyber Security and Personal Data Protection (adopted 2014, also known as the Malabo Convention), applicable GDPR principles where relevant, and regional frameworks. As of 2025, several ECOWAS countries have adopted data protection laws—including Senegal (Law No. 2008-12), Côte d'Ivoire, and Nigeria (NDPA 2023)—while others are in legislative development processes

6.7.2 Technical Security Measures

Digital CRVS systems should implement multiple layers of technical security: (a) encryption—data at rest using AES-256 or equivalent; data in transit using TLS 1.3 or higher; end-to-end encryption for mobile applications used in field registration; (b) access control—role-based access control (RBAC); multi-factor authentication; automatic session timeouts; (c) audit trails—comprehensive logging of all system access, data views, modifications, and deletions, with tamper-proof audit logs retained for a minimum of five years; (d) network security—firewalls, intrusion detection systems, VPNs for remote access; (e) backup and recovery—regular automated backups, secure offsite storage, tested disaster recovery procedures; (f) vulnerability management—regular security assessments, timely patch application, security incident response procedures.

6.7.3 Organisational and Procedural Safeguards

All personnel with system access should sign confidentiality agreements and receive data protection training. Clear policies should govern data handling, sharing, retention, and disposal. Privacy impact assessments should evaluate proposed system changes. Data protection officers should oversee compliance. Incident response protocols should address data breaches, including notification procedures, containment measures, investigation processes, and remediation steps.

6.7.4 Transparency and Individual Rights

ECOWAS Vision 2050 identifies domestic resource mobilisation as a cornerstone of sustainable development. The Vision calls on member states to increase domestic financing for digital public goods—including civil registration infrastructure—as a foundation for accountable governance and service delivery. Countries that integrate CRVS digitisation into their medium-term expenditure frameworks and national development plans demonstrate stronger sustainability outcomes.

Citizens should understand what personal data is collected, how it is used, who has access, and what rights they possess. Systems should enable individuals to access their own registration records, request corrections of inaccurate data, and lodge complaints about data misuse. Transparent policies build public trust, which is essential for voluntary registration compliance.

Privacy notices should be provided in local languages and accessible formats. This is particularly important in ECOWAS contexts where scepticism about the government use of data can create barriers to registration uptake.

6.8 Sustainability and Financing Considerations

Digital CRVS system sustainability represents one of the most critical yet frequently underestimated challenges facing countries in West Africa. Documented country experiences across the region illustrate how donor-funded digital initiatives can face sustainability crises when transition planning and domestic budget commitments are absent. Operational guidance for budgeting, costing, donor transition, and continuity during crises remains insufficient in most regional CRVS frameworks.

6.8.1 Total Cost of Ownership

Countries frequently underestimate the total cost of ownership for digital CRVS systems, focusing on initial capital investments, while neglecting substantial recurring operational expenses. The CRVS Digitisation Guidebook emphasises that ongoing costs often equal or exceed initial implementation costs over the system lifetime.

Initial investment costs include hardware (servers, workstations, mobile devices, printers, scanners, network equipment, backup power systems), software (licenses or development), infrastructure deployment (data centres, power systems, network installations), initial configuration and customisation, and user training and change management. Additionally, budgets should be set aside for partnering with communities for social and behaviour change for increased uptake of services. It is important to note that in some regions for some vital registration events this remains a challenge.

Annual recurring costs include Internet connectivity (US$500–2,000 per site annually depending on the bandwidth and country); software license renewals or cloud hosting fees; technical support and help desk; system maintenance and updates; electricity (including backup systems); consumables (paper, ink for certificate printing); hardware replacement and repairs (budget 15–20% of hardware value annually); ongoing training for new staff and refresher courses; security assessments; and data backup and storage. These recurring costs are the principal reason for system deterioration after donor exit.

6.8.2 Financing Strategies

Five Financing Pathways for Sustainable CRVS Digitisation

1. Government budget integration: National budgets must include dedicated line items for CRVS digitisation covering both capital and recurrent costs. Multi-year budget commitments provide predictability. Medium-Term Expenditure Framework (MTEF)) integration is the most sustainable mechanism. By shifting the focus from a single-year, input-based budgeting approach to a three-to-five-year framework that links expenditure ceilings to strategic priorities and expected outcomes, the MTEF ensures greater fiscal discipline, predictability, and alignment.

2. Cost recovery mechanisms: Certificate fees—structured to be free for first birth certificates as per international standards but covering fees for certified copies, expedited services, or marriage certificates—can generate revenue to help with partial operational costs. Revenue retention by registration authorities (rather than general treasury deposits) incentivises quality service.

3. Public-private partnerships: Mobile network operators may subsidise connectivity in exchange for broader service delivery opportunities. Technology companies may provide

equipment or software at reduced costs. However, partnerships must protect data sovereignty and public interest.

4. Regional cost sharing (ECOWAS): Regional frameworks enable cost sharing for common components—software development, standards setting, capacity building, technical expertise. Regional procurement leverages economies of scale.

5. Blended finance with planned donor exit: Initial donor support for capital investments transitions explicitly and deliberately to government funding for operations. Grants cover development costs while governments assume recurrent expenses. This requires clear handover plans, capacity building, and political commitments secured before—not after—donor exit. Within ECOWAS, the regional biometric identity card initiative creates strong incentives for harmonised digital civil registration standards across member states.

Source: Plan International and Jembi Health Systems (2015) [J]; World Bank (2018, updated) [K]; APAI-CRVS (2023) [L]; UNFPA WCARO (2024–2025) [M].

6.8.3 Institutional Sustainability

Financial sustainability alone is insufficient without institutional sustainability ensuring systems are properly managed, maintained, and continuously improved:

- **Local Technical Capacity:** Building domestic expertise in system administration, software development, database management, network administration, and user support reduces external consultant dependency. University partnerships, vocational training programmes, and certification schemes develop a sustainable technical workforce. Documentation in local languages enables sustainable knowledge transfer.
- **Institutional Ownership:** Strong leadership from civil registration authorities ensures systems serve registration needs rather than becoming technology projects. Clear institutional mandates, adequate staffing, and decision-making authority enable effective system governance. To avoid the loss of institutional knowledge, project management units should transition into permanent organisational structures.
- **Knowledge Management:** Comprehensive documentation including system architecture, configuration details, operational procedures, troubleshooting guides, and modification history preserves institutional knowledge. To ensure documentation remains current, regular updates are essential. Preventing reliance on a single individual is achieved through comprehensive knowledge sharing among all staff members.
- **Continuous Improvement Culture:** Systems should evolve and respond to changing requirements, technological advances, user feedback, and identified problems. Regular review processes, user forums, and enhancement planning maintain system relevance and effectiveness.

6.9 Conclusion

The digital transformation of CRVS systems in West Africa offers tremendous opportunities to accelerate progress toward universal registration, improve data quality, enhance service delivery, and establish civil registration as foundational digital public infrastructure. However, realizing these opportunities requires strategic, well-planned approaches that address the full range of technical, financial, institutional, legal, and human dimensions of digitisation.

The local solutions documented in this chapter demonstrate that appropriate, scalable, and sustainable digitisation is possible within West African contexts. These solutions share common design principles: offline-first operation; integration with health facility workflows; simplified

interfaces for non-specialist users; local language support; government ownership; and planned sustainability mechanisms.

The ECOWAS Vision 2050 provides the overarching political mandate for this transformation. The Vision's commitment to a digitally integrated ECOWAS by 2050—where every citizen has a verified legal identity, where governments can deliver services efficiently across borders, and where no community is left behind—makes the digitisation of civil registration systems not merely a technical project but a strategic regional priority. Meeting the targets of Vision 2050 requires that all ECOWAS member states achieve a functional, interoperable, and sustainable digital CRVS infrastructure within this decade.

The World Bank ID4D framework, the APAI-CRVS Practitioners Guide for Digital CRVS Systems, and the CRVS Digitisation Guidebook together provide comprehensive technical guidance. The Lusaka Declaration and continental APAI-CRVS programme provide the political framework. The emerging African e-CRVS Shared Asset (ACSA) offers a potential common platform that could reduce the per-country development costs.

The evidence from ECOWAS member states is clear: countries that treat CRVS digitisation as a long-term institutional investment—rather than a short-term donor-funded project—achieve more durable results. Ghana's steady progress towards universal birth registration, Senegal's NEKKAL model of EU-government co-investment, and Nigeria's national e-CRVS deployment through the National Population Commission all demonstrate that political commitment, adequate resourcing, and phased implementation are the decisive success factors.

Key Success Factors for CRVS Digitisation

- Start with comprehensive readiness assessments and realistic scope definition.
- Invest in business process analysis and improvement before technology selection.
- Choose appropriate technologies matching the country context and capacity.
- Implement incrementally through well-supported pilot projects.
- Build local technical capacity and institutional ownership.
- Establish sustainable financing beyond donor project cycles.
- Adopt international standards enabling interoperability.
- Protect personal data through robust security and privacy frameworks.
- Engage users throughout design and implementation.
- Maintain focus on core civil registration objectives rather than technology for its own sake.
- Partner with communities for increased uptake of services.

Source: World Bank (2018, updated) [K]; Plan International and Jembi Health Systems (2015) [J]; APAI-CRVS (2023) [L]; UNDP CRVS-DPI analysis (2024) [see endnote 32]; UNFPA WCARO field data (2023–2025) [I].

Digitisation is not a quick fix or a simple technology deployment. It requires a fundamental transformation of institutional practices, legal frameworks, capacity, and financing arrangements. The process typically spans 5–10 years from initial planning to fully mature national systems. Countries should approach digitisation as long-term strategic investments, requiring sustained political commitment, adequate resourcing, and patient implementation. The question is not

whether to digitise, but how to digitise well—inclusively, sustainably, securely, and in ways that genuinely serve the populations CRVS systems are designed to register.

Building local technical capacity ensures systems can be maintained, updated, and enhanced without external dependency. University partnerships, vocational training programmes, and ICT certification schemes develop a sustainable domestic technical workforce. Documentation in official languages (French and English for ECOWAS) enables knowledge transfer. Comprehensive system documentation must be treated as a required project deliverable, not an optional addition. Beyond official languages, documentation and user interfaces could also be developed in major national languages: Wolof (Senegal), Hausa and Yoruba (Nigeria), Dioula (Côte d'Ivoire), among others, as relevant to the country context.

Strong institutional ownership from civil registration authorities—not ICT departments—ensures systems serve registration needs. The transition from project management units (PMUs) to permanent institutional structures prevents the loss of institutional knowledge that has undermined multiple CRVS digitisation investments in the region.

As articulated in SDG 16.9 and affirmed through continental commitments , universal legal identity through comprehensive CRVS systems by 2030 remains achievable. Digital transformation, implemented thoughtfully and sustainably, provides the pathway toward this vision for West and Central Africa.

Key Terms: *Digitisation: the process of converting paper-based civil registration processes to digital systems, including electronic data capture, digital record management, and electronic certificate issuance*

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Annex 6A

CRVS Digitisation Implementation Phases

This annex presents the four-phase CRVS digitisation implementation framework from Section 6.5 of Chapter 6 in a structured table form. It is intended for use by national project teams, technical advisers, and donor partners during planning and implementation.

Phase Overview

Phase	Title	Duration	Core Objectives	Key Activities
1	**Planning & Preparation**	2–4 months	Governance; baseline assessment; scope; stakeholder commitment; project charter.	Steering Committee; CRVS assessment; business case; M&E framework; scope decision.
2	**Business Process Analysis & Design**	3–5 months	Process mapping; gap analysis; digital workflow design; system requirements specification.	As-is mapping; bottleneck analysis; to-be workflows; data model; SRS document.
3	**System Development & Implementation**	6–12 months	Technology selection; configuration; comprehensive testing; staff training; district pilot.	OpenCRVS/MOSIP selection; UAT with frontline staff; training-of-trainers; pilot refinement.
4	**National Rollout & Sustainability**	12–24 months	National scale-up; support systems; domestic budget integration; institutional ownership.	Phased rollout; help-desk; domestic budget lines; authority handover; performance monitoring.

Indicative Programme Timeline

Total programme duration: approximately 23–45 months depending on country context, existing capacity, and scope. Phases may overlap.

Phase 1 2–4 months	Phase 2 3–5 months	Phase 3 6–12 months	Phase 4 12–24 months

Note: Phase 3 (System Development & Implementation) may run concurrently with parts of Phase 2 once requirements are sufficiently defined. Phase 4 begins at pilot completion but overlaps with national rollout activities.

Phase Detail Cards

Each card below shows the numbered objectives and key activities for each phase, with a regional context note.

Phase 1—Planning & Preparation Indicative duration: 2–4 months	
Objectives	**Key Activities**

1	Establish project governance and oversight	Form Project Steering Committee (multidisciplinary)
2	Assess current CRVS situation (baseline)	Conduct comprehensive CRVS baseline assessment
3	Define scope and select pilot area	Define geographic and event-type scope
4	Secure stakeholder commitment	Develop the business case for digitisation
5	Develop detailed project charter	Establish M&E framework and indicators

Phase 2—Business Process Analysis & Design
Indicative duration: 3–5 months

	Objectives	Key Activities
1	Map and understand existing registration processes	As-is process mapping for all vital events
2	Identify inefficiencies and improvement opportunities	Gap and bottleneck analysis
3	Design optimised digital workflows	Target (to-be) workflow design
4	Define system requirements fully	Data model and interoperability definitions
5		System Requirements Specification (SRS)

Phase 3—System Development & Implementation
Indicative duration: 6–12 months

	Objectives	Key Activities
1	Select and procure appropriate technology	Technology selection (OpenCRVS/MOSIP/bespoke)
2	Configure system to country requirements	System configuration (offline-capable mandatory)
3	Test comprehensively with real users	User Acceptance Testing (UAT) with frontline staff
4	Train all staff categories	Training-of-trainers and staff competency testing
5	Complete district pilot and refine	District pilot in 1–2 areas; lessons-learned review

Phase 4 — National Rollout & Sustainability
Indicative duration: 12–24 months

	Objectives	Key Activities
1	Scale implementation nationally	Phased geographic rollout using readiness criteria

2	Establish ongoing technical support mechanisms	Help-desk and second-line support setup
3	Ensure sustainable domestic financing	Integration of system costs into domestic budget
4	Transition from project to programme management	Institutional handover to civil registration authority
5		Performance monitoring and APAI-CRVS scorecard reporting

Critical Lesson—Scope and Sequencing (Phase 1)

Scope overreach—attempting to digitise all vital events nationally at once—is the primary cause of CRVS programme failure across ECOWAS. The recommended approach is to begin with birth registration in health facilities in a geographically bounded pilot of 1–3 districts, demonstrate success, and then expand. Both TASDJIL (Chad) and iCivil (Burkina Faso) used this phased approach and achieved stronger sustainability outcomes.

The NEKKAL Model—Programme not Project (Phase 4)

Senegal's NEKKAL programme, supported by the EU, illustrates the shift from project to programme management. By committing to digitise 15 million records and train 3,600 personnel within a defined institutional mandate—through the Agence Nationale de l'Etat Civil (ANEC)—NEKKAL embedded digitisation as a permanent function of the state, not a time-limited donor project. This should be the explicit target from Phase 1 planning.

Source: Chapter 6, Section 6.5—Implementation Roadmap for CRVS Digitisation (West and Central Africa Regional CRVS Guidelines, UNFPA WCARO/HISWACA, 2026). See also: CRVS Digitisation Guidebook (Plan International/APAI-CRVS, 2015), www.crvs-dgb.org.

Annex 6B

CRVS Digitisation Guidebook—Methodology Overview

This annex summarises the full methodology of the CRVS Digitisation Guidebook (CRVS-DGB), published by Plan International and Jembi Health Systems in collaboration with APAI-CRVS. The three guiding principles are presented first, followed by the complete activity inventory and a cross-reference to the Chapter 6 phase framework.

Section A—Three Guiding Principles

The CRVS-DGB methodology is built on three principles developed in response to the most common causes of failure in eGovernment and ICT projects in low-resource settings.

THREE GUIDING PRINCIPLES OF THE CRVS DIGITISATION GUIDEBOOK

Underpinning all activities in the CRVS-DGB methodology | www.crvs-dgb.org

01 ICT as an Enabler of CRVS	02 People-Centred Change	03 Sustainability by Design
Technology must serve the CRVS business domain—not drive it. Solutions must be grounded in thorough analysis of existing systems, infrastructure, legal frameworks, human capacity, and operational context. The CRVS business architecture, defined in the UN Principles and Recommendations for Vital Statistics, is the constant reference for all technical choices.	CRVS digitisation fundamentally changes how registration officers, health workers, and communities interact with civil registration. Change management, training, and community engagement are as important as technical quality. The most common cause of underused eCRVS systems is staff resistance—not technical failure.	Total Cost of Ownership, domestic financing, and institutional embedding must be addressed from the earliest planning stage—never as afterthoughts. Sustainability requires: domestic budget lines; institutional ownership by the civil registration authority; and a permanent technical support capacity, in-country or regional.

Source: CRVS Digitisation Guidebook, Plan International/Jembi Health Systems/APAI-CRVS (2015). Content paraphrased from www.crvs-dgb.org/en.

Section B—About the Guidebook

The **CRVS Digitisation Guidebook (CRVS-DGB)** is an open-access online resource at **www.crvs-dgb.org** in English, French, and Portuguese. Developed by Plan International and Jembi Health Systems in collaboration with APAI-CRVS and the African Development Bank (2015), it provides step-by-step guidance for planning, analysing, designing, and implementing digitised CRVS systems in low-resource settings.

The Guidebook applies an enterprise architecture methodology adapted for CRVS contexts, ensuring that ICT solutions are driven by CRVS business needs. It is an integral part of APAI-CRVS support to African countries and should be used alongside national CRVS strategic plans. Full content is downloadable as PDF.

Section C—Activity Inventory

The activities below are the complete CRVS-DGB methodology, organised by the Guidebook's three phases. Activities are intended to be completed sequentially.

PHASE 1—PREPARATION	
1.1	**Define a Long-Term Vision for CRVS Digitisation** Engage senior stakeholders to articulate a shared 10–15 year vision for what a fully digitised CRVS system will achieve. This includes political commitment mapping, vision documentation, and alignment with national development plans.
1.2	**Develop a Business Case for CRVS Digitisation** Quantify current CRVS costs and performance; project the costs and benefits of digitisation (coverage gains, cost savings, data quality); package findings for decision-makers and potential funders.

PHASE 2—ANALYSIS & DESIGN	
2.1	**Initiate the CRVS Digitisation Project** Establish project governance: Steering Committee, PMO, working groups. Define roles, responsibilities, reporting lines, and communication protocols.
2.2	**Define the CRVS Business Architecture** Map the full CRVS business domain—all vital events, actors, and data flows—using a standardised reference architecture aligned with the UN Principles and Recommendations for Vital Statistics.
2.3	**Conduct an As-Is Assessment of the CRVS Landscape** Document current CRVS processes, infrastructure, human capacity, legal framework, and existing digital systems. Identify gaps, duplication, bottlenecks, and risks.
2.4	**Identify Digitisation Opportunities & Limitations** Prioritise opportunities based on impact, feasibility, and cost. Identify constraints (connectivity, electricity, literacy, legal barriers) affecting system design and rollout.
2.5	**Document the Target CRVS Processes** Design optimised 'to-be' registration processes for each vital event: steps, actors, data inputs/outputs, and decision points. Becomes the functional specification for the system.
2.6	**Define the CRVS Information Requirements** Specify data elements to capture, store, and exchange for each vital event. Align with ICD classification, national legal requirements, and international vital statistics reporting standards.
2.7	**Define Target System Architecture** Specify the technical architecture: offline/online hybrid, mobile/desktop interfaces, database design, security architecture, and integration points with identity management, health, and statistics systems.
2.8	**Define System Requirements** Produce a formal System Requirements Specification (SRS) governing procurement or development. Includes functional, non-functional (performance, security, scalability), and interface requirements.

PHASE 3—IMPLEMENTATION PLANNING	
3.1	**Document the CRVS Digitisation Implementation Plan** Produce the master implementation plan: phasing, milestones, resource requirements, risk management, and monitoring framework. This governs all subsequent activities.
3.2	**Procure the Digital CRVS System** Design and conduct procurement—open tender, direct contracting, or open-source adoption—in accordance with national rules and standards for digital public goods.
3.3	**Define the Change Management Approach and Plan** Plan for the human dimensions of digitisation: staff redeployment, resistance management, incentive structures, and communication strategy for all user groups.
3.4	**Define the Deployment Approach and Plan** Design geographic and event-type rollout sequencing: pilot selection criteria, expansion readiness criteria, infrastructure preparation, and equipment deployment logistics.
3.5	**Define the Training Approach & Plan** Develop a training strategy for all user categories: training-of-trainers, materials development, refresher scheduling, competency assessment, and links to pre-service training.
3.6	**Define the Testing Approach and Plan** Plan for Unit Testing, Integration Testing, User Acceptance Testing (UAT), and Performance Testing. UAT must involve frontline users in realistic field conditions before any rollout begins.
3.7	**Define the Operations Approach and Plan** Establish the operational model: help-desk, second-line technical support, maintenance contracts, data backup, business continuity planning, and performance monitoring.

Section D—Cross-Reference to Chapter 6 Phases

The four-phase framework in Chapter 6 (Section 6.5) aligns with but extends the CRVS-DGB activity structure, integrating regional evidence from ECOWAS and an explicit sustainability financing dimension in Phase 4.

Chapter 6 Phase	CRVS-DGB Activities	Note
Phase 1: Planning & Preparation	DGB 1.1, 1.2, 2.1, 2.2	DGB Phase 1 + early Phase 2
Phase 2: Business Process Analysis & Design	DGB 2.3 – 2.8	Remainder of DGB Phase 2
Phase 3: System Dev. & Implementation	DGB 3.2, 3.5, 3.6 + development	DGB covers planning; development/UAT added in Ch. 6
Phase 4: National Rollout & Sustainability	DGB 3.1, 3.3, 3.4, 3.7	Ch. 6 extends DGB with sustainability financing emphasis

Source: CRVS Digitisation Guidebook (Plan International/Jembi Health Systems/APAI-CRVS, 2015). Available at www.crvs-dgb.org/en. Content summarised and adapted for the West and Central Africa Regional CRVS Guidelines, UNFPA WCARO/HISWACA (2026). Activity descriptions paraphrase the original Guidebook; readers are encouraged to consult the full online version for templates, tools, and worked examples.

Annex 6C

Terms of Reference Project Steering Committee for CRVS Digitisation

PURPOSE OF THIS TEMPLATE

This template provides model Terms of Reference (ToR) for the Project Steering Committee (PSC) established during Phase 1 of a national CRVS digitisation programme. It should be adapted to the legal, institutional, and governance context of each country. Bracketed fields [ ] require country-specific completion.

The PSC is the highest decision-making body of the CRVS digitisation programme. It provides strategic oversight, inter-institutional coordination, and political accountability. Its establishment is a prerequisite for all subsequent implementation phases.

1. Background and Context

[Country name] has committed to digitising its Civil Registration and Vital Statistics (CRVS) system as part of [national CRVS strategic plan/national digital transformation strategy]. The digitisation programme will be implemented over [indicative duration] across [geographic scope], beginning with [birth registration/all vital events] in [pilot districts].

To ensure effective multi-stakeholder governance, a Project Steering Committee is established in accordance with the CRVS Digitisation Guidebook methodology (Phase 1, Activity 2.1) and the West and Central Africa Regional CRVS Guidelines (Chapter 6, Section 6.5.1).

2. Mandate

The Project Steering Committee is mandated to:

- Provide strategic direction and high-level decision-making for the CRVS digitisation programme;
- Approve the programme work plan, budget, and major deliverables;
- Ensure inter-ministerial and inter-agency coordination and resolve institutional conflicts;
- Monitor overall programme performance against agreed targets and the M&E framework;
- Approve changes to programme scope, timeline, or budget above defined thresholds;
- Ensure the programme remains aligned with national development plans, digital strategies, and relevant legislation;
- Serve as the primary accountability body to government leadership and donor partners.

3. Composition

The PSC shall be chaired by [Minister/Director-General of the lead ministry—typically Ministry of Interior/Territorial Administration/Decentralisation]. It shall include the following members:

Institution/Role	Function on the PSC
[Lead Civil Registration Authority—Chair]	Strategic leadership; final decision authority
[Ministry of Health—Deputy Chair]	Health facility birth/death notification linkage
[Ministry of ICT/Digital Economy]	Technical oversight; ICT infrastructure policy
[National Statistical Office]	Vital statistics quality and dissemination
[Ministry of Finance]	Budget and domestic financing integration
[Ministry of Justice/Legal Affairs]	Legal and regulatory framework alignment
[National Identity/Population Register Authority]	Interoperability with national ID system
[UNFPA Country Office—Observer]	Technical assistance coordination
[UNICEF Country Office—Observer]	Child rights and birth registration priorities
[World Bank/Development Partners—Observer]	Financing and accountability
[Civil Society Representative—Observer]	Community and gender equity perspective

Note on Membership

Observer members participate in PSC meetings and receive all documentation but do not hold voting rights. The Chair may invite additional technical experts on an ad hoc basis. The programme's Project Manager attends all meetings in a non-voting secretariat capacity.

4. Roles and Responsibilities

4.1 Chair

– Convenes and chairs all PSC meetings;
– Approves the agenda and ensures quorum;
– Signs off on major programme decisions and escalations to government leadership;
– Represents the programme at the highest political level.

4.2 Members

– Attend meetings regularly (in person or by designated alternate);
– Review and approve programme documents submitted for decision;
– Escalate issues requiring inter-ministerial resolution;
– Champion the programme within their respective institutions.

4.3 Secretariat (Project Management Unit)

– Prepares the agenda, working documents, and minutes for each meeting;

– Distributes documents at least 5 working days before each meeting;
– Records decisions and action points; circulates minutes within 5 working days;
– Tracks implementation of PSC decisions and reports at subsequent meetings.

5. Meetings

Meeting Modality	Specification
Regular meetings	Quarterly (at minimum); additional meetings at Chair's discretion
Quorum	50% of voting members + Chair (or designated alternate)
Decision-making	Consensus preferred; majority vote where consensus not reached; Chair has casting vote
Documentation	Agenda circulated 5 working days in advance; minutes within 5 working days of meeting
Extraordinary meetings	Convened within 10 working days if Chair deems necessary (e.g., programme emergency, scope change)
Modality	In person preferred; hybrid/virtual acceptable with secure platform

6. Reporting

The PSC shall receive the following reports from the Project Management Unit:

Report	Frequency
Programme Progress Report (against M&E framework)	Quarterly—submitted 10 days before each PSC meeting
Budget and Expenditure Report	Quarterly
Risk Register and Issue Log	Quarterly
Milestone Completion Report	Upon completion of each major milestone
Annual Programme Review	Annually—submitted to government leadership and donors

7. Decision Thresholds

The following categories of decision require formal PSC approval:

Decision Category	Threshold/Condition
Budget reallocation	Any reallocation exceeding 10% of a budget line
Scope change	Any change to the geographic scope, event type coverage, or technology platform

Decision Category	Threshold/Condition
Timeline extension	Any extension exceeding 3 months from approved baseline
Procurement	All procurement above [national threshold] or involving a single-source justification
Partnership agreements	Any new MOU or cost-sharing arrangement with external partners
Escalation to government	Issues that cannot be resolved within the PSC

8. Relationship to Other Governance Bodies

Body	Relationship to PSC
Technical Working Group (TWG)	Reports to PSC; handles operational and technical decisions within approved parameters
Project Management Unit (PMU)	Day-to-day programme management; serves as PSC secretariat
Ministry of Finance (Budget authority)	PSC ensures budget submissions are aligned with government processes
Development Partners Coordination Group	PSC Chair or designate attends; PSC provides programme updates
National CRVS Coordination Committee (if existing)	PSC operates within the broader national CRVS governance framework

9. Duration and Review

These Terms of Reference take effect upon signature by the Chair and shall remain valid for the duration of the CRVS digitisation programme. They shall be reviewed annually and may be amended by consensus of the PSC. A final review shall be conducted at programme completion to inform the transition to sustainable institutional governance.

10. Signatures

Role	Signature/Date
Chair—[Lead Civil Registration Authority]	_____ Date: ____
[Ministry of Health]	_____ Date: ____
[Ministry of ICT]	_____ Date: ____
[National Statistical Office]	_____ Date: ____
[Ministry of Finance]	_____ Date: ____

Role	Signature/Date
[UNFPA Country Office—Observer]	_____ Date: ____

Template source: West and Central Africa Regional CRVS Guidelines, Chapter 6—Digitisation of CRVS Systems (UNFPA WCARO/HISWACA, 2026). Developed in alignment with: CRVS Digitisation Guidebook Activity 2.1—Initiate the CRVS Digitisation Project (Plan International/APAI-CRVS, 2015), www.crvs-dgb.org.

Annex 6D

Monitoring & Evaluation Framework CRVS Digitisation Implementation

PURPOSE AND SCOPE

This M&E framework provides a monitoring and evaluation structure for a national CRVS digitisation programme covering all four vital events: birth registration, death registration, marriage registration, and divorce/dissolution registration.

The framework is organised by the Results Level (Impact, Outcome, Output) and by the Implementation Phase (1–4). It tracks both programme implementation progress and vital statistics coverage outcomes for each event type. It should be adapted by each country's Project Management Unit during Phase 1 and approved by the Project Steering Committee before Phase 2 begins.

Indicator alignment: APAI-CRVS Continental Strategic Plan Monitoring Framework; SDG 16.9.1 (birth registration); SDG 17.18 (disaggregated data); UN Principles and Recommendations for a Vital Statistics System, Rev. 3 (UNSD, 2014).

1. Results Framework

Impact (Long-Term Goal)

IMPACT—Long-Term Goal

All births, deaths, marriages, and divorces occurring in [country] are registered, certified, and used to produce timely, complete, and accurate vital statistics that inform national development planning, rights-based service delivery, and international reporting.

SDG Alignment: SDG 16.9 (legal identity for all, including birth registration); SDG 17.18 (disaggregated, high-quality data); SDG 3.2 (reduce child and maternal mortality—requires complete death registration); SDG 5.3 (eliminate child marriage—requires marriage registration data).

Outcomes (Medium-Term, 3–5 years)

Outcomes are measured at the programme mid-term and end, and fed into APAI-CRVS as biennial scorecard submissions. Each outcome corresponds to one or more vital events.

Outcome	Indicator
OC1: Increased birth registration coverage	% of live births registered within the legal timeframe—annually, disaggregated by region, sex of child, place of birth (facility vs. community), and urban/rural
OC2: Increased death registration coverage	% of deaths registered with medically certified cause of death—annually, disaggregated by region, sex, age group, and place of death
OC3: Increased marriage registration coverage	% of marriages (civil, customary, and religious) registered in the civil register—annually, disaggregated by region, type of union, and sex

Outcome	Indicator
OC4: Increased divorce and dissolution registration coverage	% of court-ordered divorces and registered dissolutions recorded in the civil register—annually, disaggregated by region and sex
OC5: Improved completeness and quality of vital statistics	Overall completeness score on APAI-CRVS regional scorecard across all four vital events—biennial
OC6: System sustainability secured	% of recurrent system operating costs (maintenance, connectivity, staff) financed from domestic budget—annually
OC7: Interoperability with national ID, health, and justice systems	Number of active, operational data-sharing agreements: (1) civil register ↔ national ID; (2) health facility ↔ civil register; (3) court/justice system ↔ civil register for marriage/divorce—annually

Note—Marriage and Divorce Registration

Marriage and divorce registration coverage is systematically lower than birth and death registration across West and Central Africa, and is often absent from national M&E frameworks. This framework explicitly includes OC3 and OC4 to address this gap. Data on customary and religious unions requires coordination with justice ministries, religious affairs authorities, and community leaders, which should be planned from Phase 1.

Outputs (Short-Term—by Implementation Phase)

The table below tracks programme implementation outputs across all four phases. Each output row corresponds to a specific deliverable. Outputs are reported quarterly to the Project Steering Committee.

Phase	Output	Indicator	Means of Verification	Frequency
PHASE 1—Planning & Preparation				
1	Steering Committee (PSC) established	PSC ToR signed; first PSC meeting held and minutes approved	Signed ToR; PSC minutes	Once
2	Baseline assessment completed for all four vital events (birth, death, marriage, divorce)	Assessment report covering all four events; approved by PSC	Baseline assessment report	Once
3	Scope, event sequencing, and pilot area defined	PSC decision: events in scope per phase; geographic pilot area documented	PSC decision minutes	Once

Phase	Output	Indicator	Means of Verification	Frequency
4	Business case approved (including cost-benefit for each event type)	Business case document approved by PSC and Ministry of Finance	Signed business case	Once
5	M&E framework adopted with baselines for all four vital events	Framework approved; baseline values recorded for OC1–OC7	PSC approval minutes; baseline table	Once
PHASE 2—Business Process Analysis & Design				
6	As-is process map completed—Birth registration	All birth registration steps, actors, outputs, and bottlenecks documented for facility and community pathways	Process map document	Once
7	As-is process map completed—Death registration	All death registration and cause-of-death steps mapped, including facility, community, and medico-legal pathways	Process map document	Once
8	As-is process map completed—Marriage registration	All marriage registration steps mapped: civil, customary, religious, and mixed unions; gap between ceremony and registration documented	Process map document	Once
9	As-is process map completed—Divorce/dissolution registration	All dissolution steps mapped: court proceedings, notification to civil register, certificate issuance	Process map document	Once
10	Legal and regulatory gap analysis completed for all four vital events	Number of legal gaps identified per event type; gaps prioritised for legislative reform	Gap analysis report	Once

Phase	Output	Indicator	Means of Verification	Frequency
11	To-be workflows designed for all in-scope vital events	To-be process maps completed and validated by civil registration authority for each event	To-be process map documents	Once
12	System Requirements Specification (SRS) finalised—covering all four events	SRS document approved; requirements traceable to each vital event	Signed SRS	Once
13	Stakeholder consultations completed (including justice and religious institutions for marriage/divorce)	Number of consultations; participants by institution, gender, and event focus	Attendance registers	Once
PHASE 3—System Development & Implementation				
14	Technology platform selected and configured for all in-scope vital events	Configuration covers all event types in scope; offline capability verified	Contract; configuration document	Once
15	UAT completed for each vital event module	% test cases passed per event module: birth, death, marriage, divorce (target: >95% each)	UAT report per module	Once per module
16	Staff trained—civil registration officers across all event types	Number trained by event type and gender; % passing competency test per event module	Training reports	Once
17	Staff trained—health facility staff (birth and death notification)	Number of health workers trained (nurses, midwives, health information officers); % passing	Training reports	Once
18	Staff trained—justice/court liaison officers (marriage and divorce notification)	Number of court staff trained on notification obligations; % passing	Training reports	Once
19	Pilot completed and reviewed for each event type in scope	Pilot review report per event; registration rates in	Pilot review reports	Once per event

Phase	Output	Indicator	Means of Verification	Frequency
		pilot area vs. baseline		
PHASE 4—National Rollout & Sustainability				
20	System operational in [n] target districts—all event types	% of target districts operational; % with all four event modules active	Rollout log; system reports	Quarterly
21	Birth registration: coverage trend in rollout districts	% of births registered in rollout districts vs. baseline (target: +[x]pp within 12 months)	System registration data; BDR reports	Quarterly
22	Death registration: coverage and cause-of-death completeness	% of deaths registered; % with medically certified cause—in rollout districts vs. baseline	System registration data	Quarterly
23	Marriage registration: coverage in rollout districts	% of marriages (all types) registered vs. baseline; % reduction in unregistered customary unions	System registration data; civil register	Quarterly
24	Divorce registration: completeness of court-to-register notification	% of court divorce orders received by civil register within legal timeframe	Court records vs. civil register	Quarterly
25	Help-desk and technical support operational	Number of tickets resolved by event type; average resolution time (target: <48h)	Help-desk log	Monthly
26	Domestic budget lines secured for all system components	Annual maintenance, connectivity, and staff costs in national appropriations	National budget documents	Annually
27	APAI-CRVS scorecard submitted—all four vital events	Scorecard completed; scores for birth, death, marriage, divorce submitted on schedule	APAI-CRVS submission confirmation	Biennial

Phase	Output	Indicator	Means of Verification	Frequency
28	Vital statistics report published—covering all four vital events	Annual vital statistics bulletin published within 12 months of reference year	Published report	Annually

2. Baseline Data—All Four Vital Events

The PMU should collect baseline values for all indicators during Phase 1 (by end of month 3). Targets shall be set by the PSC before Phase 2 begins. The table below identifies recommended baseline sources for each vital event.

Vital Event/Indicator	Recommended Baseline Source	Notes
Birth registration coverage	Most recent MICS/DHS survey; APAI-CRVS scorecard; civil registration authority annual report	Disaggregate by region, sex, urban/rural, facility vs. community birth
Death registration coverage	APAI-CRVS scorecard; national vital statistics report; sample registration systems	Note % with medically certified cause of death separately
Marriage registration coverage	Civil registration authority records; justice ministry data; MICS if available	Distinguish civil, customary, and religious unions—coverage typically lowest for customary
Divorce/dissolution registration	Court records; civil registration authority; justice ministry data	In many countries, divorce records are held by courts and never transmitted to civil register—document this gap
APAI-CRVS scorecard overall score	Most recent completed scorecard (available from UNECA/APAI-CRVS secretariat)	Scores exist per event type—use event-specific scores as baselines
% operational costs from domestic budget	Ministry of Finance budget documents; current donor financing arrangements	Establish proportion currently financed domestically vs. donor-funded
Number of interoperability agreements	Civil registration authority; health ministry; justice ministry records	Identify existing linkages: health ↔ civil register; court ↔ civil register; ID ↔ civil register

Critical Gap—Baseline for Marriage and Divorce

In most ECOWAS countries, reliable administrative data on marriage and divorce registration coverage does not exist. Where no administrative baseline is available, household surveys (MICS, DHS) and qualitative key informant interviews with civil registrars and justice officials should be used to construct a proxy baseline estimate. This gap itself should be documented as a finding in the Phase 1 baseline assessment and flagged to the PSC.

3. Data Collection Responsibilities

Data collection spans multiple institutions. The table below maps each data stream to the responsible body. The PMU M&E officer is responsible for consolidating all streams into quarterly and annual reports.

Data/Activity	Responsible Body	Frequency
Programme outputs (PSC reports)	Project Management Unit (PMU)	Quarterly
Birth registration statistics	Civil Registration Authority/Births and Deaths Registry	Monthly → quarterly report
Death registration + cause-of-death data	Civil Registration Authority + Health Ministry (medical certification)	Monthly → quarterly report
Marriage registration statistics (all union types)	Civil Registration Authority + Justice/Religious Affairs Ministry	Quarterly
Divorce/dissolution registration statistics	Civil Registration Authority + Court Administration	Quarterly
System performance data (all event modules)	System administrator/ICT unit	Monthly
APAI-CRVS scorecard data (all four events)	National Statistical Office—coordinated submission	Biennial
Budget and expenditure	Ministry of Finance/PMU finance officer	Quarterly
Training completion and competency data	PMU capacity-building officer	Per training activity
Gender and geographic disaggregation	PMU M&E officer—all four event data streams	Quarterly
Legal gap analysis updates (marriage/divorce reform)	Ministry of Justice/Legal Affairs	Annual
Annual independent programme evaluation	External evaluator commissioned by PSC	Annual

4. Reporting Schedule

Report	Audience	Frequency	Responsible
Quarterly Progress Report—all four vital events	Project Steering Committee	Quarterly	PMU
Budget & Expenditure Report	PSC + Ministry of Finance	Quarterly	PMU Finance
Risk Register & Issue Log	PSC	Quarterly	PMU
Vital Statistics Flash Report (birth, death, marriage, divorce)	Civil Registration Authority + NSO	Monthly/Quarterly	CRA/NSO
Annual Programme Review—all event streams	PSC + Development Partners + Government	Annually	PMU + Independent evaluator
APAI-CRVS Regional Scorecard (all four events)	UNECA/APAI-CRVS	Biennial	NSO + CRA

Report	Audience	Frequency	Responsible
Marriage & Divorce Registration Status Report	PSC + Ministry of Justice + Religious Affairs	Annually	CRA + Justice Ministry
Donor/Partner Reports (if applicable)	As per grant or partnership agreements	Per schedule	PMU

5. Evaluation

Mid-term evaluation. An independent mid-term evaluation should be conducted at the end of Phase 3 (approximately month 18–20 of implementation). It should assess progress against all seven outcomes (OC1–OC7) for all four vital events, and make recommendations for Phase 4 implementation.

Final evaluation. A final evaluation should be conducted 6–12 months after the end of Phase 4. It shall assess whether the programme has achieved sustainable coverage improvement for all four vital events, and document lessons for replication or scale-up.

Evaluation Criteria—All Four Vital Events

The PSC should ensure that evaluation ToRs explicitly require assessors to disaggregate findings by vital event type—birth, death, marriage, divorce. Evaluations that report aggregate CRVS improvement without event-specific analysis are insufficient for programme learning and regional comparison.

Evaluators should additionally assess: (1) whether coverage gains for marriage and divorce registration have kept pace with birth and death; (2) whether the linkage between court/religious authorities and the civil register is functional for marriage and divorce; and (3) whether gender-disaggregated analysis reveals differential registration access for women and girls.

Template: Indicator alignment: APAI-CRVS Monitoring Framework; SDG 16.9.1, 17.18, 3.2, 5.3; UN Principles and Recommendations for a Vital Statistics System Rev. 3 (UNSD, 2014). For APAI-CRVS scorecard methodology covering all four vital events, see: UNECA, African Programme for the Accelerated Improvement of Civil Registration and Vital Statistics (www.apai-crvs.org).

CHAPTER 7: MONITORING AND EVALUATION FRAMEWORK FOR CIVIL REGISTRATION AND VITAL STATISTICS SYSTEMS

Chapter Purpose

This chapter outlines a monitoring and evaluation (M&E) framework for CRVS systems in West Africa. It supports stakeholders in establishing systematic tracking to identify challenges and drive performance improvements. Aligned with international standards and the Africa Programme on Accelerated Improvement of Civil Registration and Vital Statistics (APAI-CRVS), this framework helps countries achieve universal registration and reliable vital statistics to inform development planning and SDG monitoring, specifically SDG 16.9.

7.1 Introduction to CRVS Monitoring and Evaluation

A Monitoring and Evaluation (M&E) framework is critical for tracking the performance, quality, and impact of Civil Registration and Vital Statistics (CRVS) systems. This framework systematically establishes all the processes and flows for data collection, analysis, and use to improve service delivery, ensure accountability, and guide evidence-based decision-making at all levels of the CRVS system.

The M&E framework serves multiple purposes: it provides real-time feedback on system performance, identifies bottlenecks and challenges requiring attention and re-planning, demonstrates accountability to stakeholders and beneficiaries, and generates evidence for policy reforms and resource allocation. A well-designed M&E system is not merely a reporting mechanism but an integral part of continuous quality improvement and system strengthening.

7.2 What We Monitor in CRVS

The CRVS M&E framework monitors multiple dimensions of system performance across all vital events (births, deaths, marriages, divorces) and at all administrative levels. The framework addresses both the coverage and quality of civil registration services, as well as the functionality of the systems that support them.

7.2.1 Registration Coverage and Completeness

While coverage and completeness are distinct concepts, both are essential to assessing a civil registration system:

- **Coverage** defines the scope of the system. It encompasses **geographic coverage** (the share of the population with physical access to a registration center) and **demographic coverage** (whether events across all population groups, such as refugees, internally displaced persons, stateless individuals, and foreigners, are incorporated).
- **Completeness** evaluates the proportion of total estimated events that are officially registered.

Consequently, a system can achieve universal legal coverage while still exhibiting low practical completeness. Key completeness indicators include:

- **Birth registration completeness rate:** The percentage of births registered compared to the estimated total births occurring in a given period and geographic area
- **Death registration completeness rate:** The percentage of deaths registered compared to the estimated total deaths occurring in a given period and geographic area
- **Marriage and divorce registration completeness rates:** Coverage of marriages and divorces in the civil registration system

- **Completeness by demographic characteristics:** Registration rates disaggregated by sex, age, geographic location (urban/rural), socioeconomic status, and other relevant characteristics

These statistical indicators directly support the evaluation of progress toward Sustainable Development Goal (SDG) Target 16.9, which mandates the provision of legal identity for all individuals, including birth registration, by 2030.

7.2.2 Timeliness of Registration

Timeliness indicators measure how fast vital events are registered after their occurrence. This is particularly important for birth registration, where delays can create barriers to accessing services and exercising rights. Key timeliness indicators include:

- On-time birth registration rate (within legal deadline)
- Average delay between event occurrence and registration
- Proportion of late registrations requiring special procedures (e.g., court judgments)
- Processing time for issuing certificates

Similarly, timeliness is critical for death registration, as it can flag epidemics and support epidemic response, besides its most important function—closing the deceased person's legal identity—which prevents identity fraud, ensures the proper cessation or continuity of benefits, and supports grieving families in fulfilling legal obligations.

7.2.3 Data Quality

Data quality encompasses multiple dimensions including completeness, accuracy, consistency, and timeliness of information recorded in civil registration records/registers. Quality indicators include:

- Completeness rates for required data fields
- Error rates in registration records
- Consistency between civil registration data and other administrative data sources
- Adherence to legal and technical standards for record-keeping

7.2.4 Service Delivery Performance

Service delivery indicators assess how well the registration system serves the population, including:

- Accessibility of registration services (geographic and financial)
- Waiting times and processing times
- Cost of services (official fees and actual costs incurred by families)
- Service availability (hours of operation, days open)
- User satisfaction with services

7.2.5 System Functionality

System functionality indicators monitor the operational capacity and infrastructure supporting civil registration. These include:

- Availability and functionality of registration centres
- IT systems performance and reliability
- Stock levels of registration materials and certificates

- Inter-agency coordination and data sharing effectiveness

7.2.6 Human Resources Capacity

Human resources indicators track the workforce capacity to deliver quality registration services, and allow rapid interventions in places where registration has problems, including:

- Number and distribution of trained registration staff
- Staff retention and turnover rates
- Training completion and competency levels
- Staff workload and productivity

7.2.7 User Satisfaction and Rights Realisation

User-centred indicators assess the experience and outcomes for individuals using the registration system, including:

- Beneficiary satisfaction with registration services
- Perception of service quality
- Complaints and grievances received and resolved
- Community awareness of registration requirements and benefits
- Realisation of rights enabled by registration (access to education, health, social protection)

7.3 Baseline Data Collection

7.3.1 Establishing the Baseline

Before implementing improvements or reforms, it is essential to establish the baseline measurements for all key indicators. This baseline provides the reference point for measuring progress and assessing the impact of interventions. Baseline data collection should be comprehensive but realistic, focusing on priority indicators that can be reliably measured. Countries that have not yet conducted a comprehensive CRVS assessment should do so as a priority in order to establish solid baselines across all seven dimensions of the M&E framework before targeting specific areas for improvement.

Table 7.1. Summary of Baseline indicators

Type of progress to assess	Baseline indicators
Demographic and Coverage	• Current birth registration coverage rate at national and sub-national levels • Current death registration coverage rate • Marriage and divorce registration rates • Population distribution and vital statistics estimates from census or surveys • Gaps in registration by demographics and other social characteristics groups (sex, age, location, socioeconomic status)
Service Delivery	• Number, location, and geographic distribution of registration centres • Average distance and travel time to nearest registration centre

Type of progress to assess	Baseline indicators
	• Average processing time for registration and certificate issuance • Average cost per registration (official fees and actual costs including transport, lost wages) • Current service delivery hours and days of operation • Availability of mobile or outreach registration services
System Capacity	• Number of civil registration staff by level (commune, district, national) and location • Percentage of staff trained in current procedures and legal requirements • Infrastructure inventory (office space, equipment, furniture) • Current IT system functionality, coverage, and performance • Stock levels and supply chain for registers, forms, and certificates • Archival facilities and conditions

7.3.2 Baseline Data Sources

Establishing a comprehensive baseline requires triangulating data from multiple sources, for example:

Administrative Records:
- Civil registration office records and statistics
- Health facility birth and death notification records
- Court/tribunal records for marriages, divorces, and late registrations
- Budget and expenditure reports from relevant ministries

Population-Based Surveys:
- Demographic and Health Surveys (DHS) with birth registration module
- Multiple Indicator Cluster Surveys (MICS)
- Census data on population characteristics and vital events
- Specialised CRVS household surveys

7.4 Performance Monitoring for Training

Training is a critical investment in CRVS system strengthening, and systematic monitoring ensures that training activities achieve their intended outcomes. Training monitoring should encompass inputs, outputs, and outcomes to provide a complete picture of training effectiveness.

7.4.1 Training Input Indicators

Input indicators measure the resources invested in training activities, described in Table 7.2 below.

Table 7.2. Summary of training input indicators

Indicator	Baseline Example	Target Example	Data Source
Number of training sessions conducted	0 sessions	12 sessions per year	Training reports
Number of trainees having had at least 70% at the final evaluation	0	80%	Results of final tests
Number of trainers trained (ToT)	5 master trainers	20 master trainers	TOT certificates database
Training materials developed	Basic manual only	Complete package (manual, job aids, videos)	Materials inventory
Budget allocated to training	$10,000/year	$50,000/year	Budget reports
Geographic coverage of training	Capital city only	All district capitals	Training location records

Adapted from: United Nations Statistics Division (2021). Handbook on Civil Registration and Vital Statistics Systems: Management, Operation and Maintenance*, Revision 1.* New York: UNSD; and United Nations Statistics Division (2014). *Principles and Recommendations for a Vital Statistics System, Rev. 3.* New York: UNSD.

7.4.2 Training Output Indicators

Output indicators measure what the training activities have produced, as described in Table 7.3 below.

Table 7.3. Summary of training output indicators

Indicator	Baseline Example	Target Example	Data Source
Number of commune officers trained	120 officers (40%)	300 officers (100%)	Training registers
Health workers trained on notification	85 workers (25%)	340 workers (100%)	Training database
Traditional/religious leaders trained	0	200 leaders	Training completion records
Training completion rate	65%	≥95%	Certificates
Geographic coverage (% districts)	40%	100%	Location analysis

Adapted from: United Nations Statistics Division (2021). Handbook on Civil Registration and Vital Statistics Systems: Management, Operation and Maintenance*, Revision 1.* New York: UNSD; and United Nations Statistics Division (2014). *Principles and Recommendations for a Vital Statistics System, Rev. 3.* New York: UNSD.

7.4.3 Training Outcome Indicators

Outcome indicators assess whether the training has resulted in improved knowledge, skills, and performance, as described below in Table 7.4.

Table 7.4. Summary of training outcome indicators

Indicator	Baseline Example	Target Example	Data Source
Average pre-training score	45%	N/A (baseline)	Pre-test assessments
Average post-training score	N/A	≥80%	Post-test assessments
Knowledge gain	N/A	≥35 points	Score analysis
Skills demonstration pass rate	N/A	≥85%	Skills assessments
Error rate reduction (3 months post)	15% error rate	≤5% error rate	Quality audits
Staff confidence level (1-5 scale)	2.8	≥4.0	Follow-up surveys
Correct application of procedures	60% compliance	≥90% compliance	Supervisory observations

Adapted from: United Nations Statistics Division (2021). Handbook on Civil Registration and Vital Statistics Systems: Management, Operation and Maintenance*, Revision 1.* New York: UNSD; and United Nations Statistics Division (2014). *Principles and Recommendations for a Vital Statistics System, Rev. 3.* New York: UNSD.

7.4.4 Training Monitoring Tools

To systematically monitor the training, the following tools should be maintained:

- **Training attendance registers:** Record all participants, dates, topics, and completion status.
- **Pre- and post-training assessments:** Test knowledge before and after training.
- **Skills demonstration checklists:** Assess practical competencies during training.
- **Training completion certificates database:** Track who has completed which training modules.
- **Follow-up observation checklists:** Assess application of training during supervisory visits (30, 90, and 180 days post-training).
- **Quarterly training reports:** Compile training statistics and progress toward targets.
- **Training feedback forms:** Capture participant satisfaction and suggestions for improvement.

7.5 Birth Registration Monitoring Tools and Indicators

Birth registration is typically the highest priority for CRVS systems, as it establishes legal identity from the beginning of life and is often the entry point for accessing other rights and services.

7.5.1 Birth Registration Quantitative Indicators

Specific quantitative metrics must be tracked to evaluate the performance of the birth registration system. The following indicators provide a data-driven baseline and clear targets for improving registration coverage and efficiency in the region.

Table 7.5. Summary of birth registration indicators

Indicator	Baseline	Target	Frequency	Data Source
Birth registration coverage rate	62%	≥90%	Annual	Registration records vs population projections
% births registered within legal deadline (180 days)	38%	≥80%	Quarterly	Registration logbooks
Average days from birth to registration	245 days	≤90 days	Quarterly	Records analysis
Gap: health facility births vs registrations	35% gap	≤10% gap	Monthly	Health facility reports
Data completeness rate	72%	≥95%	Quarterly	Quality audits
Error rate in registers	12%	≤3%	Quarterly	Quality audits
Average cost per registration (family)	$8 (incl. transport)	≤$2 (legal fee)	Annual	Household surveys

Adapted from: United Nations Statistics Division (2014). *Principles and Recommendations for a Vital Statistics System, Rev. 3.* New York: UNSD; and APAI-CRVS (2015). *Comprehensive CRVS Assessment Guidelines and Tools.* Addis Ababa: UNECA.

7.5.2 Birth Registration Monitoring Tools

To ensure the integrity and efficiency of civil registration at the point of service, registration offices must utilise a standardised suite of monitoring tools. These instruments are designed to track the lifecycle of a registration—from the initial notification to the final issuance of a certificate—while maintaining strict administrative oversight:

At Registration Office Level:

- Birth registration logbook (daily record of all registrations)
- Birth notification tracking form (linking notifications to registrations)
- Monthly statistical summary form
- Simple client feedback register or exit interview form
- Stock inventory for birth certificates and registration forms

7.6 Marriage Registration Monitoring Tools and Indicators

Marriage registration presents unique challenges, particularly in contexts where religious or customary marriages are common and civil registration is seen as a separate step. The indicators are shown in Table 7.6 below.

Table 7.6. Summary of marriage registration performance indicators

Indicator	Baseline	Target	Frequency	Data Source
Marriage registration coverage rate	15%	≥85%	Annual	Registration records vs estimates
% religious/customary marriages transcribed	35%	≥70%	Quarterly	Religious records comparison
Average time: ceremony to transcription	180 days	≤30 days	Quarterly	Registration records

Indicator	Baseline	Target	Frequency	Data Source
Data completeness rate	68%	≥95%	Quarterly	Quality audits
Error rate in registers	14%	≤5%	Quarterly	Quality audits

Adapted from: United Nations Statistics Division (2014). *Principles and Recommendations for a Vital Statistics System, Rev. 3.* New York: UNSD; and APAI-CRVS (2015). *Comprehensive CRVS Assessment Guidelines and Tools.* Addis Ababa: UNECA.

7.7 Death Registration Monitoring Tools and Indicators

Death registration is often the weakest component of CRVS systems, yet it is critical for vital statistics, public health surveillance, and various administrative processes. The indicators are shown in Table 7.7.

Table 7.7. Death Registration Performance Indicators

Indicator	Baseline	Target	Frequency	Data Source
Crude death registration coverage	2%	≥85%	Annual	Records vs demographic estimates
% registered within legal deadline	15%	≥75%	Quarterly	Registration logbooks
Medical certification rate	28%	≥70%	Monthly	Death certificates, health records
Average days: death to registration	45 days	≤7 days	Quarterly	Registration analysis
Cause of death coding quality (ICD)	40%	≥80%	Bi-annual	Coding reviews

Adapted from: World Health Organisation (2016). *Medical Certification of Cause of Death,* 4th ed. Geneva: WHO; and United Nations Statistics Division (2014). *Principles and Recommendations for a Vital Statistics System, Rev. 3.* New York: UNSD.

7.8 Register Management and Archive Indicators

The quality of register management and archival practices directly affects the long-term reliability and usability of civil registration records. The indicators are shown in Table 7.8.

Table 7.8. Summary of Register Quality Indicators

Indicator	Baseline	Target	Frequency	Data Source
% registers compliant with legal standards	58%	≥95%	Quarterly	Inspection reports
% acts correctly signed by all parties	72%	≥98%	Quarterly	Quality audits
Error rate requiring corrections	8%	≤2%	Quarterly	Rectification records
% registers in chronological order	81%	≥98%	Quarterly	Audit reports

Adapted from: International Records Management Trust (2009). *Managing Records as Reliable Evidence for ICT Systems: Principles for Archives Management.* London: IRMT.
Alphabetical tables (indexes) are essential for efficient retrieval of civil registration records. Key indexing indicator: percentage of civil registers with a complete and up-to-date alphabetical index (target: ≥95%).

7.8.1 Archive Conservation Indicators

Protecting civil records is essential to safeguard the “legal identity” of citizens from both environmental and institutional threats. To improve the state of these archives and transition the region away from the current “fragmentation trap” towards robust, nationally-managed infrastructure, a number of conservation indicators have been established (Table 7.9).

Table 7.9. Summary of Archive Conservation Indicators

Indicator	Baseline	Target	Frequency	Data Source
% archives in compliant storage	32%	≥85%	Annual	Facility assessments
Document deterioration rate (5-year)	18%	≤5%	Bi-annual	Condition audits
% facilities meeting temp/humidity standards	25%	≥80%	Quarterly	Environmental monitoring
% documents digitised	5%	60% in 10 yrs	Annual	Digitisation database

Adapted from: International Records Management Trust (2009). *Managing Records as Reliable Evidence for ICT Systems: Principles for Archives Management.* London: IRMT.

7.9 Monitoring Frequency and Schedule

7.9.1 Monitoring Calendar

A clear monitoring schedule ensures that data collection and review activities happen consistently and that problems are identified promptly. A checklist is shown in Table 7.10 below.

Table 7.10. Overview of Monitoring Calendar

Activity	Daily	Weekly	Monthly	Quarterly	Annual
Registration transactions recorded	✓				
Equipment functionality checks		✓			
Statistical compilation at office level		✓			
Submission of monthly reports (commune to district)			✓		
Supervisory visits from district to commune				✓	
Quality assurance audits				✓	
District coordination meetings				✓	
Comprehensive annual system review					✓
Publication of vital statistics report					✓
Budget planning and allocation					✓

Adapted from: APAI-CRVS (2015). *Comprehensive CRVS Assessment Guidelines and Tools.* Addis Ababa: UNECA; and United Nations Statistics Division (2021). Handbook on Civil Registration and Vital Statistics Systems: Management, Operation and Maintenance, *Revision 1.* New York: UNSD.

7.9.2 Reporting Timelines

To maintain a responsive and accurate National Data Ecosystem, reporting must move beyond one-way data extraction toward a continuous loop of upward reporting and downward feedback. This ensures that vital events captured at the local level are translated into the “locally-owned evidence base” required for national policy and emergency response.

Upward Reporting Flow: From local to national
Data must migrate through administrative levels within strict timeframes to ensure the timeliness and completeness of the national database, including the following steps:

- Commune to District: Monthly statistical reports should be submitted by the 5th of the following month. Strict adherence to this timeline is vital, supported by routine reconciliation sessions between health centres and judicial bodies to verify and validate monthly data.
- Health Facilities to Civil Registration & Health Authority: Monthly notification reports
- Courts to Civil Registration & Justice Ministry: Quarterly marriage/divorce statistics
- National Statistics Office receives CRVS data: Quarterly for preliminary statistics, annually for comprehensive vital statistics

Feedback and Downward Communication: Closing the loop
Ownership of the data system is reinforced when local registrars and health workers receive actionable feedback on the data they provide:

- National to Districts: Quarterly performance bulletins, annual vital statistics report
- Districts to Communes: Quarterly performance feedback, annual performance review meetings
- Public Reporting: Annual vital statistics publication, periodic assessment reports

7.10 Feedback Mechanisms and Incorporation

Effective M&E systems not only collect data but also use it to drive continuous improvement through feedback loops. By institutionalizing these mechanisms, CRVS systems can move beyond mere data collection toward a model of continuous improvement that enhances service delivery.

7.10.1 Feedback Collection Channels

At Commune Level:
At the commune level, a diverse range of channels can be utilised to ensure that both the service provider and the citizen have a voice in the system’s evolution, including:

- Client satisfaction surveys and exit interviews at registration offices
- Complaint boxes with regular review (weekly)
- Community feedback during outreach and mobile registration activities
- Staff suggestion boxes and regular staff meetings

7.10.2 Closing the Feedback Loop: Eight-Step Process

To ensure that collected data leads to tangible system strengthening, the following eight-step cycle must be strictly followed. This eight-step feedback loop must be made mandatory and

operational at all levels. Communes should regularly receive quarterly performance bulletins to close the loop from national and district levels downward.

- **Collect:** Gather feedback systematically through multiple channels (complaints, surveys, observations, reports).
- **Compile:** Aggregate feedback by theme, location, frequency, and severity.
- **Analyse:** Identify patterns, root causes, and systemic versus isolated issues.
- **Prioritise:** Rank issues by impact (how many affected, severity of consequences), urgency, and feasibility of solutions.
- **Act:** Develop and implement specific action plans with clear responsibilities and timelines.
- **Communicate:** Inform stakeholders (staff, users, partners) about actions being taken and expected timeframes.
- **Monitor:** Track implementation of corrective actions and whether changes are achieving desired results.
- **Report:** Include feedback and responses in regular M&E reports, celebrate improvements, identify remaining challenges.

7.11 Indicator Selection Criteria

Not all indicators are equally useful or feasible. Selecting the right indicators is critical for an effective M&E system that produces actionable information without overwhelming data collectors.

7.11.1 SMART Criteria for Indicators

The indicators used to monitor CRVS systems must be robust and high-quality. The **SMART** criteria provide a rigorous framework to ensure that every metric used—from the commune to the national level—is actionable and serves as a reliable evidence base for decision-making.

Table 7.11. Overview of SMART criteria for CRVS M&E indicators

Criterion	Description	Good Example	Poor Example
Specific	Clearly defined with unambiguous meaning	Birth registration coverage rate: % of children under 5 with certificate	Better birth registration
Measurable	Can be quantified or assessed with clear methods	% of births registered within 180 days	Registration is improving
Achievable	Realistic given resources, capacity, timeframe	Increase from 60% to 75% in 3 years	100% registration in 6 months
Relevant	Directly linked to CRVS objectives	Timeliness of birth registration	Colour of office walls
Time-bound	Can be measured at defined intervals	Monthly birth registration rate	Birth registration sometime

Adapted from: United Nations Statistics Division (2021). Handbook on Civil Registration and Vital Statistics Systems: Management, Operation and Maintenance*, Revision 1.* New York: UNSD.

7.11.2 Balancing the Indicator Framework

A well-balanced M&E framework includes different types of indicators:

- **Coverage Indicators (30–40% of total indicators):** Measure extent to which vital events are registered
- **Quality Indicators (30–40% of total indicators):** Measure accuracy, completeness, and reliability of registration data
- **Process Indicators (20–30% of total indicators):** Measure how well the registration system is functioning
- **Outcome Indicators (10–20% of total indicators):** Measure results and impact of registration

7.12 Level-Specific Monitoring Responsibilities

Different levels of the CRVS system have distinct monitoring responsibilities based on their scope, authority, and resources. Monitoring a robust data ecosystem requires a clear division of labor across administrative tiers. Each level—from the local commune to the national centre—plays a distinct role in ensuring data sovereignty and system integrity.

- Commune Level Monitoring: The commune level (local registration office) is where vital events are registered and where most direct service delivery occurs. Monitoring at this level focuses on day-to-day operations and direct service quality.
- District Level Monitoring: The district level compiles data from multiple communes, conducts supervisory visits, provides support, and reports to the national level. Regular supervisory visits must be institutionalised and systematically linked to actionable feedback and decision-making, not merely to data collection.
- National Level Monitoring: The national level monitors the overall CRVS system, sets policies and standards, coordinates with other sectors, and reports on national and international commitments.

7.13 Data Collection and Management Tools

Effective monitoring requires practical, user-friendly tools that can be consistently applied by staff with varying levels of capacity. Data quality must be ensured at every stage of the monitoring process, including:

- Clear, legible handwriting or accurate data entry at point of collection.
- Completeness checks before finalizing registration.
- Logical consistency checks (e.g., date of birth before date of registration).
- Verification of arithmetic during compilation.
- Periodic quality audits of registration facilities.

7.14 Reporting and Data Use

Monitoring and Evaluation (M&E) data reaches its full potential only when it is systematically analysed and integrated into the decision-making process. This ensures that national data systems move beyond mere collection to become active tools for continuous improvement and regional data sovereignty. Specifically, the strategic use of data is categorised into operational management and high-level policy development.

Programme Management Uses:

- Identify weak areas and target resources
- Adjust strategies based on what works
- Plan training based on identified needs
- Monitor impact of interventions over time

Policy Development Uses:
- Evidence on barriers informs legal reforms
- Data on coverage gaps supports budget advocacy
- Identify areas for public awareness campaigns

7.15 Key Challenges and Mitigation Strategies

Implementing an M&E system in West Africa faces multiple challenges that must be anticipated and addressed.

7.15.1 Common M&E Challenges and Solutions

The following table outlines the primary challenges and the strategic mitigation efforts needed to build sustainable, nationally-owned data ecosystems.

Table 7.12. Overview of Common M&E Challenges and Mitigation Strategies

Challenge	Impact on M&E	Mitigation Strategy
Data collection burden on staff	Incomplete reporting, resistance	Simplify to essential indicators; integrate M&E into routine work; use technology where possible
Limited capacity for analysis	Data collected but not used	Training in analysis; provide simple tools (dashboards); assign M&E focal points; ongoing mentoring
Insufficient resources for supervision	Infrequent supervision, problems unidentified	Include M&E costs in budget; integrate into regular supervision; use technology for remote monitoring. M&E costs should be integrated into the national Medium-Term Expenditure Framework (MTEF) to reduce donor dependency and ensure long-term sustainability.
Weak feedback mechanisms	No response to problems; staff demotivation	Establish clear feedback protocols with timelines; always communicate back to reporters; create culture of appreciation
Poor coordination across levels	Gaps in reporting, duplication	Regular coordination meetings; written data-sharing protocols; joint planning and supervision
Lack of M&E culture	Seen as burden not management tool	Demonstrate value through examples; recognise good performance; leadership commitment; integrate M&E into job descriptions

7.15.2 Building M&E Capacity

Sustainable M&E requires capacity building at all levels through:
- Formal training workshops and courses

- On-the-job mentoring and learning by doing
- Job aids and step-by-step guides
- Peer learning through exchange visits
- Regular refresher training and skills reinforcement

7.16 Conclusion

This comprehensive Monitoring and Evaluation framework provides the foundation for tracking and improving CRVS system performance at all levels—from the commune registration office to national policymaking and international reporting. By systematically monitoring registration coverage, data quality, service delivery, and system functionality across all vital events (births, deaths, marriages, divorces), and by incorporating feedback from users and staff, the CRVS system can continuously improve its effectiveness and impact.

The following factors are essential for the long-term sustainability and impact of the M&E process for CRVS systems:

- **Start simple and build gradually:** Begin with core indicators and basic tools, then expand as capacity and resources grow.
- **Integrate M&E into routine work:** Make monitoring part of regular registration and supervision activities, not a separate burden.
- **Use data for decisions and action:** Ensure monitoring results inform management decisions and continuous improvement.
- **Always close the feedback loop:** Provide feedback to those who report data—acknowledge efforts and explain actions.
- **Build capacity at all levels:** Invest in training and mentoring on M&E concepts, methods, and tools.
- **Coordinate across levels and sectors:** Ensure all parts of the CRVS system work together and share data.
- **Celebrate success and learn from challenges:** Recognise good performance and treat challenges as opportunities for learning.
- **Ensure leadership commitment:** M&E succeeds when leaders champion it, use the data, and support the system.

The finalisation and deployment of digital M&E tools must be treated as a priority action. Equally, countries must establish systematic and regular mechanisms for publishing CRVS performance reports—ensuring that data does not simply accumulate in administrative systems but reaches planners, policymakers, and the public in a timely and accessible format.
By implementing this M&E framework systematically and adapting it to the local context, capacity, and needs, ECOWAS countries can leverage their CRVS systems to track progress towards universal civil registration, identify and address problems early, demonstrate results to stakeholders, and make evidence-based improvements. The ultimate goal is a complete, accurate, and timely CRVS system that ensures every birth, death, and marriage is registered, creating legal identity and vital statistics that serve the population and support national development.

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ANNEX 7-A

Minimum Core Indicator Set for CRVS Monitoring

Purpose and Scope

This annex presents a tiered indicator framework to guide routine CRVS monitoring in West and Central Africa. Based on feedback from regional reviewers (UNECA, and national experts), the framework distinguishes between CORE indicators—which every country should monitor at minimum—and EXPANDED indicators, which countries with greater capacity can adopt progressively.

This Minimum Core Indicator Set is aligned with SDG 16.9 (legal identity for all), SDG 17.19.2 (vital statistics quality), and the APAI-CRVS Decade Programme 2017–2026 monitoring framework. Countries are encouraged to start with the 10 CORE indicators and expand as capacity develops. All 10 minimum core indicators must be not only collected and calculated, but also systematically disaggregated (by sex, urban/rural, and administrative region), adjusted for incompleteness where applicable, and published in an annual public report on CRVS system performance.

How to Use This Indicator Set

- CORE indicators: Collect and report at all levels (commune, district, national). These are the non-negotiable minimum.
- EXPANDED indicators: Introduce progressively as systems strengthen. These provide deeper insights but require more data infrastructure.
- All indicators should be disaggregated by sex, urban/rural, and administrative region where possible.
- Detailed indicator definitions, baselines, and targets are provided in Sections 5–8 of Chapter 7.

Minimum Core Indicator Set—Summary Table

Domain	Indicator	Tier	Frequency	SDG Link
Birth Registration	Birth registration coverage rate (children under 5)	**CORE**	Annual	SDG 16.9.1
Birth Registration	% births registered within legal deadline	**CORE**	Quarterly	—
Birth Registration	Data completeness rate (required fields filled)	**CORE**	Quarterly	SDG 17.19.2
Death Registration	Death registration coverage rate	**CORE**	Annual	SDG 17.19.2
Death Registration	Medical certification of cause of death rate	**CORE**	Quarterly	SDG 3.4
Death Registration	% deaths registered within 7 days	**CORE**	Quarterly	—
Marriage Registration	Marriage registration coverage rate	**CORE**	Annual	—

Marriage Registration	% religious/customary marriages transcribed to civil register	EXPANDED	Annual	—
Divorce Registration	Divorce registration coverage rate	CORE	Annual	—
Data Quality	Error rate in registration records (sample audit)	CORE	Quarterly	SDG 17.19.2
Data Quality	% consistency between civil registration and health records	EXPANDED	Bi-annual	—
Service Delivery	Average cost to family per registration (incl. transport)	CORE	Annual	—
Service Delivery	Average processing time for certificate issuance	CORE	Quarterly	—
Service Delivery	User satisfaction rate with registration services	EXPANDED	Annual	—
Human Resources	% registration staff trained in current procedures	CORE	Annual	—
Human Resources	Staff-to-registration ratio (workload adequacy)	EXPANDED	Annual	—
System Capacity	% registration centres with functional IT systems (where applicable)	EXPANDED	Quarterly	—
System Capacity	% archives in compliant storage conditions	EXPANDED	Annual	—

Note: This indicator set is a minimum framework. For comprehensive CRVS evaluation, refer to Annex 7-C (Evaluation Quick Reference) which outlines periodic in-depth assessments every 3–5 years.

Source: Adapted from United Nations Statistics Division (2014). Principles and Recommendations for a Vital Statistics System, Rev. 3; UNECA/APAI-CRVS Comprehensive Assessment Guidelines (2015); SDG Global Indicator Framework.

ANNEX 7-B

CRVS Monitoring Quick Reference

What to Monitor in Civil Registration and Vital Statistics Systems

This quick reference summarises the key indicators and dimensions to monitor in a CRVS system. Monitoring provides real-time feedback on system performance and helps identify problems early for timely corrective action.
Key principle: Monitoring = continuous tracking (daily, monthly, quarterly). Evaluation = periodic in-depth assessment (annually, every 3–5 years). See Annex 7-C for evaluation guidance.

1. Registration Coverage and Completeness
    - Birth registration coverage rate: % of births registered vs. estimated births
    - Death registration coverage rate: % of deaths registered vs. estimated deaths
    - Marriage/divorce registration rates: Coverage of marriages and divorces
    - Disaggregated coverage: By sex, age, location (urban/rural), district, socioeconomic status

💡 Why Monitor This: Tracks progress toward SDG 16.9.1 (universal birth registration by 2030) and identifies geographic and demographic gaps.

2. Timeliness of Registration
    - On-time registration rate: % registered within legal deadline
    - Average delay: Days between event occurrence and registration
    - Late registrations: % requiring special procedures (court judgments)
    - Processing time: Time to issue certificates

💡 Why Monitor This: Delays create barriers to accessing rights and services. Timely death registration also supports epidemiological surveillance and epidemic response.

3. Data Quality
    - Completeness rates: % of required fields filled in registration records
    - Error rates: % of records with errors (through audits)
    - Consistency: Between civil registration and health/census data
    - Compliance: With legal and technical standards
    - Cause of death quality: Specificity and ICD coding accuracy

💡 Why Monitor This: High-quality data is essential for producing reliable vital statistics and supporting evidence-based policy.

4. Service Delivery Performance
    - Accessibility: Average distance/travel time to registration office; cost to families
    - Waiting times: Time spent at registration office
    - Service availability: Hours/days open, mobile registration frequency
    - User satisfaction: Client perception of service quality
    - Complaints: Number and type of grievances received and resolved

5. System Functionality and Infrastructure
    - Registration centres: Number, distribution, and functionality
    - IT systems: Uptime and performance for electronic systems (where applicable)
    - Stock levels: Registers, certificates, forms availability

- Coordination: Health–registration linkage, court coordination effectiveness
- Archive quality: Storage conditions, document preservation

6. Human Resources Capacity
   - Staffing levels: Number and distribution of registration officers
   - Training coverage: % of staff trained in current procedures
   - Turnover rates: Staff retention and stability
   - Workload: Registrations per officer, adequacy of staffing
   - Performance: Application of procedures, knowledge levels

7. Level-Specific Monitoring Focus

Commune/Local Level:
- Daily: Registrations, certificate issuance, service delivery, client feedback
- Weekly: Stock levels, equipment status, common problems
- Monthly: Statistical compilation, challenges encountered, outreach activities

District Level:
- Monthly: Compile commune data, identify performance variations
- Quarterly: Supervisory visits, quality audits, coordination meetings, consolidated reporting
- Annually: Performance review, planning, recognition of good performers

National Level:
- Quarterly: Review district reports, coordination committee, dashboard updates
- Annually: Vital statistics publication, comprehensive M&E review, SDG reporting
- Every 3–5 years: Comprehensive system assessment, legal/policy review

8. Monitoring Frequency Quick Reference

Activity	Daily	Weekly	Monthly	Quarterly	Annual +
Registration transactions recorded	✓				
Stock levels check	✓				
Equipment functionality check		✓			
Statistical compilation (office level)		✓			
Submission of monthly reports (commune→district)			✓		
Supervisory visits (district→commune)				✓	
Quality assurance audits				✓	
District coordination meetings				✓	
Vital statistics publication					Annual
Comprehensive CRVS assessment					Every 3–5 yrs

9. Key Success Factors for CRVS Monitoring
   - Start simple: Begin with the 10–15 CORE indicators from Annex 7-A, expand gradually.

- Integrate into routine work: M&E should be part of normal operations, not extra burden.
- Use data for action: Always convert monitoring findings into decisions and improvements.
- Close the feedback loop: Always report back to those who provided data.
- Build capacity: Train staff at all levels on monitoring methods and tools.
- Ensure quality: Regular verification and audits maintain data reliability.
- Coordinate across sectors: Link registration, health, justice, and statistics.
- Use appropriate technology: Where feasible, but maintain paper backups.

Source: Adapted from United Nations Statistics Division (2014). Principles and Recommendations for a Vital Statistics System, Revision 3; APAI-CRVS Monitoring Framework.

ANNEX 7-C

CRVS Evaluation Quick Reference

What to Evaluate in Civil Registration and Vital Statistics Systems

This quick reference outlines what to evaluate in a CRVS system and when. While monitoring tracks ongoing performance, evaluation assesses overall effectiveness, impact, and strategic direction at key intervals.

Key distinction: Monitoring = continuous tracking (daily, monthly, quarterly). Evaluation = periodic in-depth assessment (annually, every 3–5 years).

1. System-Wide Performance Evaluation

What to Evaluate:

- Overall coverage: Has birth/death/marriage/divorce registration coverage improved over time?
- Geographic equity: Are disparities between regions/districts decreasing?
- Demographic equity: Are gaps by sex, urban/rural, socioeconomic status closing?
- Trend analysis: Are we on track to meeting the targets (e.g., SDG 16.9.1)?

When: Annually (trend review); every 3–5 years (comprehensive assessment).

Methods: APAI-CRVS Comprehensive Assessment; comparison with census/survey data (DHS, MICS); coverage rate calculations using demographic methods.

2. Impact and Outcomes Evaluation

What to Evaluate:

- Rights realisation: Are more children accessing education, health, and social protection due to registration?
- Vital statistics production: Is the system producing complete, timely, and quality vital statistics for planning?
- Policy use: Are CRVS data being used for evidence-based policymaking?
- Public value: Do families and communities understand and value registration?
- Child protection: Has improved registration contributed to protection outcomes?

When: Annually (vital statistics quality); every 3–5 years (impact evaluation of CRVS strategic plan).

3. Legal and Policy Framework Evaluation

What to Evaluate:

- Legal completeness: Does CRVS law cover all vital events and procedures?
- Alignment: Is CRVS law consistent with international standards and human rights?
- Implementation: Are laws being enforced? Are there gaps between law and practice?
- Barriers: Do legal requirements (fees, deadlines, documents) create unnecessary obstacles?
- Policy coherence: Do CRVS policies support integration with health, justice, identification?

When: Every 3–5 years (comprehensive legal and policy review); before proposing any legal changes.

4. Service Delivery and Access Evaluation

What to Evaluate:

- Geographic accessibility: Are registration offices adequately distributed? How far do families travel?
- Financial accessibility: What does registration really cost families (fees, transport, lost wages)?
- Service quality: Are users satisfied? How long do they wait? Are staff courteous and competent?
- Barriers: What prevents families from registering? (awareness, cost, distance, procedures, documentation)
- Innovations: Are mobile registration, outreach, and digital services effective?
- Vulnerable populations: Are registration services reaching nomadic, indigenous, refugee, and displaced populations?

When: Annually (user satisfaction surveys, barrier analysis); every 2–3 years (comprehensive facility readiness assessment).

5. Training and Capacity Development Evaluation

What to Evaluate:

- Knowledge and skills: Did the trainees gain the required knowledge? Can they perform procedures correctly?
- Application: Are trained staff applying what they learned in their work?
- Performance impact: Did training reduce error rates and improve data quality?
- Training quality: Were the materials clear? Were the trainers effective?
- Coverage: What % of staff have been trained? Are there geographic or demographic gaps?
- Impact indicators: Has training improved registration rates in areas where trained staff work?

When: Immediately post-training (post-test and feedback); 3–6 months post-training (supervisory observations, quality audits); annually (overall programme effectiveness).

6. Inter-Sectoral Coordination Evaluation

What to Evaluate:

- Health–registration linkage: Is the birth/death notification system functioning? What % of notifications lead to registration?
- Court coordination: Are marriage and divorce data shared timely?
- Statistics production: Is data transfer to the statistics office smooth? Are data quality issues resolved collaboratively?
- Identity systems: Is there effective coordination/integration with national ID systems?
- Coordination mechanisms: Are coordination committees functional? Do they drive joint action?

7. Data Quality Evaluation

What to Evaluate:

- Completeness: What % of vital events are captured? What % of required fields are filled?
- Accuracy: Error rates in registration records (through audits)
- Consistency: Agreement between civil registration, health records, census data
- Timeliness: Speed of data availability for statistics production
- Cause of death quality: Medical certification rate, specificity, ICD coding accuracy

8. CRVS Strategic Plan Evaluation

What to Evaluate:

- Target achievement: Were strategic planning objectives and targets met?
- Strategy effectiveness: Which interventions worked well? Which did not?
- Resource efficiency: Were resources used efficiently? Was there value for money?
- Sustainability: Are improvements sustainable? Is there adequate domestic funding?
- Lessons learned: What worked, what did not, and why?

When: Mid-term (halfway point of strategic plan); end of plan (final evaluation).

9. Evaluation Schedule Summary

Frequency	What to Evaluate	Key Methods
Annually	• Progress against strategic plan targets • Vital statistics quality and use • User satisfaction • Training effectiveness • Coordination effectiveness	• Annual M&E review • User surveys • Budget/expenditure analysis
Every 2–3 years	• Service delivery and facility readiness • Training programme evaluation	• Facility assessments • User barrier studies • Training impact studies
Every 3–5 years	• Comprehensive system performance • Legal and policy framework • Impact and outcomes • Strategic plan evaluation (mid-term & final)	• APAI-CRVS comprehensive assessment • Legal gap analysis • Coverage rate calculations • Census/survey comparisons

10. Key Evaluation Questions Checklist

Type	Key Evaluation Question
Performance	Is registration coverage improving? Are we on track to meeting SDG 16.9.1?
Performance	Are geographic and demographic gaps closing?
Performance	Is data quality sufficient for producing reliable vital statistics?
Impact	Are more children accessing their rights due to registration?
Impact	Are CRVS data being used for evidence-based policymaking?
Impact	Has CRVS improvement contributed to child protection and development outcomes?
Process	Are services accessible and affordable for all populations, including vulnerable groups?
Process	Is coordination between sectors (health, justice, statistics, ID) effective?
Process	Are training investments producing measurable improvements in performance?
Sustainability	Is there adequate and sustainable domestic financing for CRVS?

Sustainability	Are institutional structures and capacity in place for continued improvement?
Sustainability	Are reforms embedded in legal and policy frameworks?

Source: Adapted from United Nations Statistics Division (2014). Principles and Recommendations for a Vital Statistics System, Revision 3; APAI-CRVS Comprehensive Assessment Guidelines (UNECA, 2015); WHO guidance on cause-of-death certification and ICD coding.

Annex 7D. Using Vital Statistic for Planning and Policy

A functional M&E system does not merely measure CRVS performance for its own sake: the vital statistics it generates must actively feed into national development planning, public health surveillance, and evidence-based policymaking. This section addresses how countries in West and Central Africa can strengthen the link between CRVS data collection and its use for planning. This annex should be further expanded with additional country examples illustrating how vital statistics are concretely used for sectoral planning—for instance, how death and cause-of-death data drive health resource allocation decisions at the district level.

Annex 7D.1 Vital Statistics as a Planning Tool

Vital statistics derived from civil registration—birth rates, death rates, causes of death, marriage and divorce rates—are indispensable inputs for national planning in at least four major domains:

- **Health and epidemiology:** Cause-of-death data guides resource allocation for disease prevention and health system strengthening. Countries such as Senegal and Ghana have used improved mortality data to prioritise maternal and neonatal health interventions.
- **Education and social protection:** Age-disaggregated birth registration data enables Ministries of Education to plan school construction and teacher deployment, and social protection agencies to identify eligible beneficiaries for child grants and elderly pensions.
- **Legal and justice administration:** Marriage and divorce statistics inform family law reform, judicial resource planning, and the monitoring of gender-based violence and child marriage trends.
- **SDG and international reporting:** CRVS-derived data directly feeds SDG indicators, particularly SDG 16.9.1 (birth registration coverage), SDG 17.19.2 (vital statistics quality), and health-related goals under SDG 3.

Annex 7D.2 Strengthening the Link Between M&E Data and Policy Action

In many West African countries, vital statistics are collected but not systematically analysed or used. To close this gap, national authorities should: (i) designate a focal unit within the National Statistics Office responsible for annual vital statistics reports; (ii) establish a formal data-sharing protocol between the civil registration authority and the NSO (see UNECA/APAI-CRVS data-sharing protocol template); (iii) present vital statistics findings to inter-ministerial CRVS coordination committees with specific follow-up action items; and (iv) publish an annual vital statistics bulletin accessible to all government planning departments, civil society, and the public.

Annex 7D.3 Key Planning Indicators from Vital Statistics

The following statistics, when produced with sufficient completeness and quality, have direct planning relevance for countries in the region: crude birth rate and total fertility rate (population projections, school planning); infant and under-5 mortality rates (child survival programming); maternal mortality ratio (health system investment); crude death rate by cause (public health priorities); crude marriage rate and divorce rate (family policy, gender equity monitoring); and registration coverage rate by district (targeting of CRVS investments). Countries should aim to produce these indicators annually, stratified by sex, age group, and administrative region, and to publish them in a standardised vital statistics report aligned with UNSD format recommendations.

CRVS EVALUATION CHEAT SHEET

What to Evaluate in Civil Registration and Vital Statistics Systems

This quick reference guide outlines what to evaluate in a CRVS system and when. While monitoring tracks ongoing performance, evaluation assesses overall effectiveness, impact, and strategic direction at key intervals.

Key Difference: Monitoring = continuous tracking (daily, monthly, quarterly). Evaluation = periodic in-depth assessment (annually, every 3-5 years).

1. System-Wide Performance Evaluation

What to Evaluate:

- Overall coverage: Has birth/death/marriage registration coverage improved over time?
- Geographic equity: Are disparities between regions/districts decreasing?
- Demographic equity: Are gaps by sex, urban/rural, socioeconomic status closing?
- Trend analysis: Are we on track to meeting targets (e.g., SDG 16.9.1)?

When to Evaluate:

- Annually: Review trends and progress against strategic plan targets.
- Every 3-5 years: Comprehensive CRVS system assessment.

Methods & Tools:

- APAI-CRVS Comprehensive Assessment (for African countries).
- CRVS Decade Assessment tools.
- Comparison with census and survey data (DHS, MICS).
- Coverage rate calculations using demographic methods.

2. Impact and Outcomes Evaluation

What to Evaluate:

- Rights realisation: Are more children accessing education, health, and social protection due to registration?
- Vital statistics production: Is the system producing complete, timely, and quality vital statistics?
- Policy use: Are CRVS data being used for evidence-based policymaking?
- Public value: Do families and communities understand and value registration?
- Child protection: Has improved registration contributed to protection outcomes?

When to Evaluate:

- Annually: Review vital statistics quality and use
- Every 3-5 years: Impact evaluation of CRVS strategic plan

Methods & Tools:

- Population-based surveys (DHS, MICS with CRVS modules)
- Qualitative studies (focus groups, case studies)
- Administrative data analysis (school enrollment, health service access)

- Policy document review and stakeholder interviews

3. Legal and Policy Framework Evaluation

What to Evaluate:
- Legal completeness: Does CRVS law cover all vital events and procedures?
- Alignment: Is CRVS law consistent with international standards and human rights?
- Implementation: Are laws being enforced? Are there gaps between law and practice?
- Barriers: Do legal requirements (fees, deadlines, documents) create unnecessary obstacles?
- Policy coherence: Do CRVS policies support integration with health, justice, identification?

When to Evaluate:
- Every 3-5 years: Comprehensive legal and policy review
- When reforms are planned: Before proposing legal changes

Methods & Tools:
- Legal gap analysis against international standards
- Stakeholder consultations (lawyers, civil society, rights groups)
- Review of barriers reported by users and registration officers
- Comparative analysis with regional best practices

4. Service Delivery and Access Evaluation

What to Evaluate:
- Geographic accessibility: Are registration offices adequately distributed? How far do families travel?
- Financial accessibility: What does registration really cost families (fees, transport, lost wages)?
- Service quality: Are users satisfied? How long do they wait? Are staff courteous?
- Barriers: What prevents families from registering? (awareness, cost, distance, procedures)
- Innovations: Are mobile registration, outreach, and digital services effective?

When to Evaluate:
- Annually: User satisfaction surveys, barrier analysis
- Every 2-3 years: Comprehensive facility readiness assessment

Methods & Tools:
- Exit interviews and user satisfaction surveys
- Focus group discussions with users and non-users
- Geographic accessibility mapping (GIS analysis)
- Mystery client assessments
- Household cost surveys

5. Training and Capacity Development Evaluation

What to Evaluate:

- Knowledge and skills: Did the trainees gain required knowledge? Can they perform procedures correctly?
- Application: Are trained staff applying what they learned in their work?
- Performance impact: Did training reduce error rates and improve data quality?
- Training quality: Were materials clear? Were trainers effective?
- Coverage: What % of staff have been trained? Are there gaps?

When to Evaluate:
- Immediately post-training: Post-test and participant feedback
- 3-6 months post-training: Supervisory observations, quality audits
- Annually: Review the overall training programme effectiveness

Methods & Tools:
- Pre- and post-training assessments (knowledge tests)
- Skills demonstration checklists
- Follow-up supervisory observations (30, 90, 180 days)
- Error rate analysis (compare trained vs. untrained staff)
- Participant satisfaction surveys

6. Inter-Sectoral Coordination Evaluation

What to Evaluate:
- Health-registration linkage: Is birth/death notification system functioning? What % of notifications lead to registration?
- Court coordination: Are marriage and divorce data shared in a timely fashion? Is late registration process efficient?
- Statistics production: Is data transfer to statistics office smooth? Are data quality issues resolved collaboratively?
- Identity systems: Is there effective coordination/integration with national ID systems?
- Coordination mechanisms: Are coordination committees functional? Do they drive joint action?

When to Evaluate:
- Quarterly: Review coordination meeting effectiveness
- Annually: Assess overall coordination effectiveness

Methods & Tools:
- Notification-registration tracking studies
- Data exchange audit (timeliness, completeness)
- Stakeholder interviews and surveys
- Review of coordination meeting minutes and action tracking

7. Data Quality Evaluation

What to Evaluate:
- Completeness: What % of vital events are captured? What % of required fields are filled?
- Accuracy: Error rates in registration records (through audits)
- Consistency: Agreement between civil registration, health records, census data
- Timeliness: Speed of data availability for statistics production

- Cause of death quality: Medical certification rate, specificity, ICD coding accuracy

When to Evaluate:
- Quarterly: Sample quality audits
- Annually: Comprehensive data quality assessment
- Every 3-5 years: In-depth evaluation with census/survey comparison

Methods & Tools:
- Record audits (sample review against standards)
- Completeness assessment methods (demographic analysis)
- Consistency checks with surveys (DHS, MICS) and census
- Cause of death certification quality review

8. CRVS Strategic Plan Evaluation

What to Evaluate:
- Target achievement: Were strategic plan objectives and targets met?
- Strategy effectiveness: Which interventions worked well? Which didn't?
- Resource efficiency: Were resources used efficiently? Was there value for money?
- Sustainability: Are improvements sustainable? Is there adequate domestic funding?
- Lessons learned: What worked, what didn't, and why?

When to Evaluate:
- Mid-term: At the halfway point of the strategic plan (usually year 2-3 of 5-year plan)
- End of plan: Final evaluation at the conclusion of the strategic plan period

Methods & Tools:
- Strategic plan results framework review
- Stakeholder consultations (government, partners, civil society)
- Budget and expenditure analysis
- Document review and data analysis
- Success story documentation and case studies

9. Evaluation Schedule Summary

Frequency	What to Evaluate	Key Methods
Annually	• Progress against strategic plan targets • Vital statistics quality and use • User satisfaction • Training effectiveness • Coordination effectiveness	• Annual M&E review • User surveys • Stakeholder consultations • Budget/expenditure analysis
Every 2-3 years	• Service delivery and facility readiness • Training programme evaluation	• Facility assessments • User barrier studies • Training impact studies

Every 3-5 years	• Comprehensive system performance • Legal and policy framework • Impact and outcomes • Strategic plan evaluation (mid-term & final)	• CRVS comprehensive assessment • Legal gap analysis • Coverage rate calculations • Census/survey comparisons • Impact studies

10. Key Evaluation Questions Checklist

Performance Questions:

1. Is registration coverage improving? Are we on track to meeting the targets?
2. Are geographic and demographic gaps closing?
3. Is data quality sufficient for producing reliable vital statistics?

Impact Questions:

4. Are more children accessing their rights due to registration?
5. Are CRVS data being used for evidence-based policymaking?
6. Has CRVS improvement contributed to child protection and development?

Process Questions:

7. Are services accessible and affordable for all populations?
8. Is coordination between sectors (health, justice, statistics) effective?
9. Are training investments producing measurable improvements in performance?

Sustainability Questions:

10. Is there adequate and sustainable domestic financing for CRVS?
11. Are institutional structures and capacity in place for continued improvement?
12. Are reforms embedded in legal and policy frameworks?

Source: Adapted United Nations Statistics Division (2014)

CRVS MONITORING CHEAT SHEET

What to Monitor in Civil Registration and Vital Statistics Systems

This quick reference guide summarises the key indicators and dimensions to monitor in a CRVS system. Monitoring provides real-time feedback on system performance and helps identify problems early for timely corrective action.

1. Registration Coverage and Completeness

Key Indicators:

- Birth registration coverage rate: % of births registered vs. estimated births
- Death registration coverage rate: % of deaths registered vs. estimated deaths
- Marriage/divorce registration rates: Coverage of marriages and divorces
- Disaggregated coverage: By sex, age, location (urban/rural), district, socioeconomic status

💡 *Why Monitor This: Tracks progress toward SDG 16.9.1 (universal birth registration by 2030) and identifies geographic and demographic gaps.*

2. Timeliness of Registration

Key Indicators:

- On-time registration rate: % registered within legal deadline
- Average delay: Days between event occurrence and registration
- Late registrations: % requiring special procedures (court judgments)
- Processing time: Time to issue certificates

💡 *Why Monitor This: Delays create barriers to accessing rights and services. Timely registration is critical for child protection.*

3. Data Quality

Key Indicators:

- Completeness rates: % of required fields filled in registration records
- Error rates: % of records with errors (through audits)
- Consistency: Between civil registration and health/census data
- Compliance: With legal and technical standards
- Cause of death quality: Specificity and ICD coding accuracy

💡 *Why Monitor This: High-quality data is essential for producing reliable vital statistics and supporting evidence-based policy.*

4. Service Delivery Performance

Key Indicators:

- Accessibility: Average distance/travel time to registration office; cost to families
- Waiting times: Time spent at registration office
- Service availability: Hours/days open, mobile registration frequency
- User satisfaction: Client perception of service quality
- Complaints: Number and type of grievances received

💡 *Why Monitor This: Service quality directly affects registration uptake and user experience. Poor service creates barriers.*

5. System Functionality and Infrastructure

Key Indicators:

- Registration centres: Number, distribution, and functionality
- IT systems: Uptime, performance, error rates for electronic systems
- Stock levels: Registers, certificates, forms availability
- Coordination: Health-registration linkage, court coordination effectiveness
- Archive quality: Storage conditions, document preservation

💡 *Why Monitor This: Infrastructure and coordination problems directly impact service delivery and data quality.*

6. Human Resources Capacity

Key Indicators:

- Staffing levels: Number and distribution of registration officers
- Training coverage: % of staff trained in current procedures
- Turnover rates: Staff retention and stability
- Workload: Registrations per officer, adequacy of staffing
- Performance: Application of procedures, knowledge levels

💡 *Why Monitor This: Adequately trained and supported staff are the foundation of a functional CRVS system.*

7. Level-Specific Monitoring Focus

Commune/Local Level:

- Daily: Registrations, certificate issuance, service delivery, client feedback
- Weekly: Stock levels, equipment status, common problems
- Monthly: Statistical compilation, challenges encountered, outreach activities

District Level:

- Monthly: Compile commune data, identify performance variations
- Quarterly: Supervisory visits, quality audits, coordination meetings, consolidated reporting
- Annually: Performance review, planning, recognition

National Level:

- Quarterly: Review district reports, coordination committee, dashboard updates
- Annually: Vital statistics publication, comprehensive M&E review, SDG reporting, strategic planning
- Every 3-5 years: Comprehensive system assessment, evaluation, legal/policy review

8. Quick Reference: Monitoring Frequency

Activity	Daily	Monthly	Quarterly	Annual
Registration transactions	✓			
Stock levels check	✓			
Statistical compilation		✓		

Supervisory visits			✓	
Quality audits			✓	
Coordination meetings			✓	
Vital statistics publication				✓
Comprehensive assessment				Every 3-5 yrs

9. Key Success Factors for Monitoring

- Start simple: Begin with 15-25 core indicators, expand gradually.
- Integrate into routine work: M&E should be part of normal operations, not extra burden.
- Use data for action: Always convert monitoring findings into decisions and improvements.
- Close the feedback loop: Always report back to those who provided data.
- Build capacity: Train staff at all levels on monitoring methods.
- Ensure quality: Regular verification and audits maintain data reliability.
- Coordinate across sectors: Link registration, health, justice, statistics.
- Use appropriate technology: Where feasible, but maintain paper backups.

Source: Adapted from United Nations Statistics Division (2014)

GENERAL CONCLUSION: CIVIL REGISTRATION AS A DRIVER OF ECOWAS INTEGRATION AND HUMAN DEVELOPMENT

The Economic Community of West African States (ECOWAS) unites twelve member states—Benin, Cabo Verde, Côte d'Ivoire, The Gambia, Ghana, Guinea, Guinea-Bissau, Liberia, Nigeria, Senegal, Sierra Leone, and Togo—in a regional integration project that goes far beyond just trade facilitation and monetary union. At its core, the ECOWAS vision is to establish a borderless community where the rights, identities, and welfare of all people are recognised across national boundaries. Achieving this vision hinges on an indispensable infrastructure: universal civil registration. Without the reliable registration of births, deaths, marriages, and divorces, the concept of free movement remains theoretical, regional identity documents lack a solid foundation, and the crucial demographic data needed for effective regional planning is unavailable. Civil registration is therefore essential to realizing a truly integrated ECOWAS community.

These guidelines for ECOWAS member states have been developed to support the realisation of that vision by providing a harmonised, rights-based, and technically rigorous framework for CRVS reform. They are predicated upon and extend the ECOWAS Protocol on Free Movement of Persons, the ECOWAS National Biometric Identity Card and Travel Certificate frameworks, and the regional identity management commitments established through the West Africa Unique Identification for Regional Integration and Inclusion (WURI) programme. They are conceived not merely as technical instruments but as critical tools for regional integration and human development.

1. The ECOWAS CRVS Landscape: Diversity Within a Common Agenda

West Africa exhibits a considerable diversity in CRVS systems performance. Ghana and Senegal are positioned as regional leaders, boasting birth registration rates exceeding 65 percent, operational national statistics offices, and, in the case of Ghana, an advanced legal and institutional framework underpinned by the Births and Deaths Registry Act and the 2025–2030 Strategic Plan. Nigeria, possessing the largest population on the continent, has undertaken significant investments through the National Population Commission and the state-level civil registration system. Nevertheless, it contends with profound coverage challenges, particularly in northern states and conflict-affected regions. Sierra Leone and Liberia, currently in recovery from the devastating CRVS impact of the 2014–2016 Ebola outbreak, have successfully rebuilt their registration capacity with support from UNICEF and UNFPA, incorporating digital solutions at the health facility level. Guinea, following the enactment of its landmark 2023 civil status legislation (Lois L/2023-0019 and L/2023-0020), is now poised to achieve a major legislative advancement, translating the new rights-based framework into operational reality. The Gambia, Guinea-Bissau, and Togo encounter severe resource constraints that impede coverage and data quality, despite possessing relatively clear legal frameworks.

This diversity is not an obstacle to regional harmonisation, it is its rationale. Common regional standards create a floor below which no member state should fall, a framework of comparability which enables regional monitoring, and a basis for peer learning through which the experience of leading countries can inform the reform trajectories of those further behind.

The ECOWAS Integration Dividend

Civil registration directly enables regional free movement. The ECOWAS Protocol on Free Movement requires that citizens be able to establish their identity—and identity documents rest on birth registration. The ECOWAS National Biometric Identity Card, anchored in civil registration records, is the tangible expression of the regional integration project at the level of individual citizens. Strengthening CRVS systems across ECOWAS is therefore not merely a development investment—it is a regional integration imperative.

2. Legal and Institutional Progress: Building on Recent Reforms

Recent years have seen major progress in CRVS governance across West Africa, marked by the adoption of transformative national laws and improved regional institutional alignment. Guinea's 2023 civil registration and marriage legislation is particularly exemplary, offering a model for other francophone ECOWAS nations due to its rights-based and gender-transformative approach. This new framework addresses key systemic obstacles to comprehensive registration coverage simultaneously by establishing universal, compulsory, and free registration, linking each event to a unique personal identification number, and granting customary and religious marriages the same legal recognition as civil marriages, while imposing clear notification requirements on religious and customary authorities.

Côte d'Ivoire's earlier legislative reforms, particularly the 2018 laws making death declaration free and compulsory, demonstrate that targeted legislative action can produce measurable results. Ghana's continuous legislative and institutional evolution, with a dedicated registry, a strategic plan, and sectoral integration with the Ghana Health Service and Ghana Statistical Service, illustrates the institutional depth that other ECOWAS members should aspire to develop.

At the regional institutional level, the ECOWAS Framework for CRVS creates a mechanism for regional coordination that should be fully activated. These guidelines recommend that the ECOWAS Commission establish a technical working group on CRVS harmonisation with a mandate to review member state CRVS legislation against the UN GOLF standards, develop model regional CRVS legislation adapted to the anglophone and francophone legal traditions of the member states, and produce annual regional CRVS progress reports.

3. Digital Transformation and the WURI Programme

West Africa is leveraging significant regional investment in digital identity, particularly through the World Bank-funded **WURI** (West Africa Unique Identification for Regional Integration and Inclusion) and **WARDIP** (West Africa Regional Digital Integration Programme) programmes.

WURI, in its first two phases, has provided foundational digital ID to millions of previously unregistered individuals across Benin, Burkina Faso, Côte d'Ivoire, Guinea, Niger, Sierra Leone, and Togo. This initiative is also building essential technical infrastructure which is crucial for the interoperability between Civil Registration and Vital Statistics (CRVS) systems and digital identity systems. Further opportunities for CRVS digitisation are being created by the **WARDIP** programme, which extends digital transformation investments to The Gambia, Guinea, Guinea-Bissau, and Mauritania. Within the region, practical models for scalable digital registration already exist, such as Ghana's OpenCRVS deployment and Senegal's electronic civil registration pilot.

The current investments offer a vital opportunity. Digital identity and robust civil registration (CRVS) are mutually reinforcing: strong CRVS forms the basis for digital ID systems, which in turn drives demand and infrastructure for ongoing registration. ECOWAS nations should create national, interoperable CRVS digitisation roadmaps, using open platforms aligned with Digital

Public Goods standards, and governed by data protection laws consistent with the African Union Malabo Convention. Chapter 6 of these guidelines provides the full technical framework for this digitisation agenda.

4. Vital Statistics for West African Development Planning

For ECOWAS member states, the value of robust vital statistics extends beyond individual country development planning to regional economic integration. The ECOWAS Common External Tariff, free movement protocols, regional health surveillance systems, and the ECOWAS Development Plan all depend on reliable demographic data. Yet the region's vital statistics base remains fragile. In most member states, civil registration data covers at best 40–60 percent of vital events, and is subject to quality limitations in cause-of-death coding, completeness of marriage and divorce registration, and the timeliness of data transmission.

The vital statistics framework established in Chapter 4 of these guidelines—with its standardised monthly statistical bulletins, ICD-11 coding pathway, model statistical tables, and indicator calculations aligned with SDG and Agenda 2063 monitoring—provides the technical basis for a regional vital statistics reporting system. ECOWAS member states are encouraged to adopt the standardised table structure, align their cause-of-death coding with ICD-11, and contribute annual vital statistics reports to an ECOWAS regional repository hosted by UNECA or the ECOWAS Commission.

Child Marriage and Adolescent Birth Monitoring

ECOWAS member states report some of the world's highest rates of child marriage and adolescent fertility. In Niger (prior to withdrawal), Burkina Faso, Mali, Sierra Leone, Guinea, and Nigeria, child marriage rates exceed 30 percent. Civil registration—particularly marriage registration with full enforcement of minimum age requirements and the recording of the age of each spouse—is the primary instrument for monitoring and enforcing child marriage elimination commitments. Adolescent Birth Rates calculated from civil registration data, combined with school enrolment and marriage registration data, provide an integrated evidence base for SDG 5.3.1 monitoring that survey-based estimates cannot match in timeliness or disaggregation.

5. Social and Behaviour Change in the West African Context

The SBC challenges concerning CRVS in ECOWAS member states encompass both shared and context-specific elements. Throughout the region, impediments such as the low perceived relevance of registration, geographical distance to registration offices, various cost barriers (both formal and informal), mistrust of governmental institutions, and deeply ingrained social norms that characterise registration as an external administrative mandate rather than a fundamental right and protection, collectively impede progress. Specifically, in francophone member states, particularly within rural environments, the historical association of civil registration with colonial administration engenders residual suspicion. Conversely, in anglophone member states, the principal impediment is the practical inaccessibility of registration services for rural and nomadic populations. Furthermore, in areas afflicted by conflict—notably in northern Nigeria—insecurity has severely disrupted registration services and necessitated the reconstitution of vital registers.

The SBC framework in Chapter 5 addresses these challenges through a combination of community dialogue, methodologies for changing social norms, health facility integration, and service quality improvement. In the West African context, particular emphasis should be placed

on: engaging traditional and religious authorities as registration advocates; integrating birth registration with newborn care protocols in health facilities; training community health workers as registration counsellors; and deploying the NEKKAL-style mobile registration model for hard-to-reach communities.

6. Priorities for ECOWAS Member States

On the basis of the analysis in all seven chapters, the following priority actions are recommended for ECOWAS member states:

- Harmonise national CRVS legislation with the UN GOLF standards by 2027, adopting the three core guarantees: universal free registration, gender-equitable provisions, and digital certification linked to unique personal identification numbers.
- Establish functional national CRVS coordination committees with a cross-ministerial composition and a minimum annual budget within the national budget cycle.
- Adopt ICD-11 for cause-of-death coding in all health facility death registrations by 2028, with interim verbal autopsy protocols for community deaths.
- Launch national digitisation roadmaps aligned with the WURI/WARDIP infrastructure, with a target of 80 percent digital registration coverage in urban areas by 2030.
- Develop and fund three-year Social and Behaviour Change plans for CRVS, with a specific focus on birth and marriage registration among the lowest-performing demographic and geographic groups.
- Establish commune-level vital statistics bulletins in all district or local government areas, feeding into national statistical systems through the monthly reporting cycle described in Chapter 4.
- Contribute annual vital statistics data to the ECOWAS regional repository and the APAI-CRVS monitoring framework.

7. Looking Forward: A West African CRVS Community of Practice

The implementation of these guidelines must be accompanied by a regional architecture for peer learning, technical exchange, and mutual accountability. UNFPA WCARO, through the HISWACA project, is committed to facilitating a West African CRVS community of practice that brings together national CRVS authorities, national statistics offices, civil society organisations, and development partners in regular technical exchange. Annual regional CRVS reviews, south-south technical missions, joint training through RIPS (Ghana) and IFORD (Cameroon), and the shared use of OpenCRVS infrastructure are the concrete mechanisms of this community of practice.

The ultimate aspiration of these guidelines is an ECOWAS zone in which every birth, every death, every marriage and every divorce—from the most remote rural community in Sierra Leone to the most densely populated urban neighbourhood in Lagos—is registered, certified, and counted. That aspiration is achievable. The experience of the region's leading countries proves it. What is required is the political will to match the technical capability that these guidelines provide.