



**APAI-CRVS**  
Everyone visible in Africa



Decade for Repositioning  
of Civil Registration and  
Vital Statistics in Africa  
**2017-2026**

**Fourth Conference of African Ministers  
Responsible for Civil Registration**  
4 – 8 December 2017, Nouakchott

## **The financing mechanisms and health sector engagement for strengthening CRVS systems in Africa: lessons learnt from GFF- supported countries**

### **Background**

The importance of a well-functioning civil registration and vital statistics (CRVS) system in providing real-time data at national and sub-nation level for measuring and monitoring health and other social programs is well recognized in Africa. Indicators such as maternal mortality ratio, infant and under-five mortality rates; and adolescent birth rate can be reliably determined on a regular basis at subnational levels from a well-functioning CRVS system. In addition, these health-related indicators of the Sustainable Development Goals (SDGs) require reliable and regular information to monitor progress.

The role of the health sector in CRVS was one of the six thematic areas identified as priorities in Africa during the Third Conference of African Ministers responsible for civil registration held in 2015. At the end of the conference, the Ministers declared the need to “*Establish strong working arrangements with health and other relevant sectors to improve registration service delivery at the most appropriate administrative level*”.

Progress has been made in some African countries to strengthen CRVS through collaboration with the health sector, for the mutual benefit of (i) increasing the number of births and deaths (including causes of death) registered and thereby protecting the rights of women, children and adolescents;

and (ii) for providing vital statistics for informed decision-making in health and other social services.

### **Financing for CRVS**

To take the CRVS agenda forward, many African countries have undertaken in-depth assessments of the state of national civil registration systems and developed strategic and action plans for improving CRVS. However, given the state of CRVS systems, the costed strategic plans prepared underscored substantial financial, technical and manpower resources gaps faced by many African countries to have functional CRVS systems. As such, there are considerable challenges in implementing priority areas identified due to limited funding.

CRVS is one of development areas that have not been adequately funded and it has been argued that the low level of investments to improve CRVS is the single most critical development over many years<sup>1</sup>. The WHO<sup>2</sup> has called for increased investments in CRVS systems through aligning partner actions with country and regional leaderships. Efforts are underway at country, regional and global levels to support the strengthening of CRVS in developing countries.

At the global level, the Global Financing Facility in support of every woman every child (GFF) has prioritized CRVS as one of the areas that have not been funded adequately in the past. CRVS has been prioritized as a component of a country's health information system through which progress made in ending preventable maternal, newborn, child and adolescent deaths can be monitored.

### **Objectives of the session**

The purpose of this session is to share information on progress made in several African countries in Africa in strengthening CRVS through collaborative work undertaken between the Ministries of Health and Ministries responsible for civil registration, under the auspices of the GFF and the International Development Association (IDA). The session will show how CRVS is prioritized within the health sector; provide information on project financed by IDA/GFF TF to strengthen CRVS in Africa; and showcase country-specific CRVS activities financed.

### **How the session will be undertaken**

To achieve this objective, a brief presentation will be made to outline how the GFF supports the strengthening of CRVS Africa and how countries can leverage support from the facility. This will be followed by highlights from three Ministers from GFF-supported countries representing South,

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<sup>1</sup> Setel et al. 2007

<sup>2</sup> WHO. 2017

East and West Africa to discuss experiences of their countries in securing financing for CRVS activities, aligned to investments in health through the GFF Trust Fund and/or lending from IDA and highlight the role of the health sector in CRVS. It is envisaged the information shared will provide opportunities for countries to explore alternative sources of financing; share knowledge on collaborating with Ministries of Health towards working together to strengthen CRVS systems.