SNAPSHOT OF CIVIL REGISTRATION AND VITAL STATISTICS SYSTEMS OF ETHIOPIA
Program Information

About the Centre of Excellence for CRVS Systems

Housed at the International Development Research Centre (IDRC), the Centre of Excellence for Civil Registration and Vital Statistics (CRVS) Systems is a global knowledge and resource hub that actively supports national efforts to develop, strengthen, and scale CRVS systems. It collaborates with organizations and experts to broker access to information and expertise, including global standards, tools, research evidence, and relevant good practice.

The Centre of Excellence was established with funding from Global Affairs Canada and IDRC and contributes directly to the work of the Global Financing Facility, a key financing platform of the UN Secretary General’s Global Strategy for Women’s, Children’s, and adolescents’ health.

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Part of Canada’s foreign affairs and development efforts, the IDRC invests in knowledge, innovation and solutions to improve the lives of people in the developing world. IDRC works with many stakeholders including civil society organizations, think tanks, regional organizations and government departments in the developing world to promote growth, reduce poverty, and drive large-scale positive change.
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Introduction

The purpose of this report is to provide a brief introduction to the civil registration and vital statistics (CRVS) systems in Ethiopia.

The information was collected through a questionnaire completed by the Federal Vital Events Registration Agency in December 2018, desk research and interviews conducted with key stakeholders in the country. The report presents country background, selected indicators relevant for CRVS improvement processes, stakeholders’ activities and resources available and needed to strengthen CRVS systems, coordination, among others.

Brief country profile

Ethiopia is a landlocked country in East Africa with a total surface area of 1.104 million square kilometres. It is bordered by Eritrea, Djibouti, Somalia, Kenya, South Sudan, and Sudan. The country’s topographic features range from 110 metres below sea level in the Afar Depression to the highest peak, the Ras Dashen, at 4,550 metres above sea level.¹

Ethiopia is the second most populous country in Africa, next to Nigeria, with an annual interpolated mid-year population of about 108 million in 2018 and a 2.43 percent average annual rate of population change.² About 84 percent of the population lives in rural areas. The main occupation of most of the rural sedentary population is farming. The population in the semi-arid and arid lowland zones is predominantly pastoralist.

- Capital city: Addis Ababa
- Official working languages: Amharic and English
- Ministry responsible for civil registration: Ministry of Peace

Disclaimer: The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.

- Civil registration agency: Federal Vital Events Registration Agency (FVERA)
- National statistical office: Central Statistics Agency (CSA)

The country is a federated state with nine autonomous regional states and two city administrations. The regional states, also called ከትሰቢይ (kilils) locally, and the city administrations are shown on the map. The government follows a decentralized administrative system where the regional states have legislative, executive and judicial powers. The organizational arrangement for vital events registration systems follows the decentralized administrative structure of the country. FVERA’s organizational given in the Annex is replicated to a large extent in the regions and city administrations.
## CRVS dimensions

### Births

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Completeness of birth registration</td>
<td>Not available</td>
</tr>
<tr>
<td>Children under 5 years of age whose births were reported as registered with a civil authority</td>
<td>3 % (2016)*</td>
</tr>
<tr>
<td>Births attended by skilled health professionals</td>
<td>28 % (2016)*</td>
</tr>
<tr>
<td>Women aged 15-49 who received antenatal care from a skilled provider</td>
<td>62 % (2016)*</td>
</tr>
<tr>
<td>DPT1 immunization coverage among 1-year-olds</td>
<td>86 % (2016)*</td>
</tr>
<tr>
<td>Crude birth rate (per 1,000 population)</td>
<td>31.8 (2016)*</td>
</tr>
<tr>
<td>Total fertility rate (live births per woman)</td>
<td>42 (2016)*</td>
</tr>
<tr>
<td>Adolescent fertility rate (per 1,000 girls aged 15-19 years)</td>
<td>64.9 (2016)*</td>
</tr>
<tr>
<td>Population under age 15</td>
<td>40.6 % (2017)*</td>
</tr>
</tbody>
</table>

### Deaths

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Completeness of death registration</td>
<td>Not available</td>
</tr>
<tr>
<td>Crude death rate (per 1,000 population)</td>
<td>6.8 (2016)*</td>
</tr>
<tr>
<td>Infant mortality rate (per 1,000 live births)</td>
<td>41 (2017)*</td>
</tr>
<tr>
<td>Under five mortality rate (per 1,000 live births)</td>
<td>59 (2017)*</td>
</tr>
<tr>
<td>Maternal mortality ratio (per 100,000 live births)</td>
<td>353 (2015)*</td>
</tr>
</tbody>
</table>

### Marriages and divorces

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marriage registration rate</td>
<td>Not available</td>
</tr>
<tr>
<td>Women aged 20-24 first married or in union before age 15</td>
<td>14 % (2016)*</td>
</tr>
<tr>
<td>Women aged 20-24 first married or in union before age 18</td>
<td>40 % (2016)*</td>
</tr>
<tr>
<td>Divorce registration rate</td>
<td>Not available</td>
</tr>
</tbody>
</table>

### Vital statistics including causes of death data

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Compilation and dissemination of civil registration-based statistics</td>
<td>Not available</td>
</tr>
<tr>
<td>Medically certified causes of death data</td>
<td>Not available</td>
</tr>
</tbody>
</table>
Civil registration system

Legislative framework

In August 2012, the Federal Democratic Republic of Ethiopia (FDRE) issued the Registration of Vital Events and National Identity Card Proclamation No. 760/2012, which was a comprehensive law that made registrations of vital events compulsory. The law states that the vital events to be registered are: birth, death, marriage, divorce, adoption, recognition and legitimation. It also requires cause of death to be recorded for both natural and unnatural deaths. The law came into force in mid-2016. However, this law was not universal in its coverage because registration was restricted to Ethiopian nationals. This was corrected by issuing an amended Proclamation No 1049/2017 that expanded the coverage of registration services to asylum seekers, refugees and non-nationals residing in Ethiopia, among others. Copies of the proclamations are available at https://data.unicef.org/country/eth/.

Management, organization and operations

National CRVS systems coordination mechanisms

The civil registration law required the establishment of a Vital Events Council and a Civil Registration Management Board at the national level. The Council oversees the improvement and functioning of the CRVS system while the Board manages its continuous operations. These two bodies started functioning in 2013. A coordination Technical Working Group, comprising of federal ministries and agencies and development partners, was also set up in the same year. FVERA is the secretary in the three bodies. The composition of these coordinating bodies are as follows:

Federal Vital Events Council: The Council comprises all Management Board members listed below, the nine regions and two city administrations representatives and heads of all regional vital events registration agencies.


Several government ministries and institutions have entered into a bilateral agreement to complement each other’s initiatives within the CRVS systems through formal and time-bound memorandum of understanding documents. Such bilateral agreements have been entered between FVERA and the Ministry of Health, Ministry of Education, Ministry of Women and Children Affairs, Central Statistics Agency. FVERA finds this to be a useful coordination tool.

Administration level registration centres

The regional states are administratively divided into zones, woredas or districts and the lowest level administrative units known as kebele. Registration of vital events takes place in kebeles. In December 2018, there were 18,617 kebeles of which 16,883 or about 90 percent had started to provide civil
registration services to the public. Out of those **kebeles** that are operational, 92 percent are in rural areas. Each **kebele** has a civil status or registration officer which is also in most cases the Kebele Manager.

Other civil registration sites are the Government of Ethiopia Administration for Refugees and Returnees Affairs offices nearest to the refugees’ sites; Ethiopian Ships for registration of births and deaths occurring at sea; Ethiopian missions for Ethiopian nationals residing in other countries; and the Ministry of National Defense for registration of births and deaths occurring in military camps.

**Accessibility of civil registration services**

One of the key features of most of the **kebele** registration offices is that they are accessible by foot for the majority of the population living within their boundaries in terms of walking distance, which is estimated to be less than 10 kilometres. The furthest household would be a walking distance of about 3 hours from the registration office, thus not incurring a high travel cost, if any.

It should be noted that in mountainous parts of the country, even if the distance to the nearest registration office is short, it usually takes more than 3 hours of walking to cover the distance because of the rugged terrain. Accessibility to civil registration services for the pastoralist population living in arid low lands is poor, mainly because many of the **kebele** territories are vast and require long hours of walking, in some cases up to 8 hours, to have occurrence of vital events recorded.

**Registration of vital events**

The civil registration law requires that the occurrence of a vital event be recorded in a bound booklet with four carbon copies for each vital event. The original copy remains in the **kebele** office where registration took place. The second, third and fourth copies are transmitted to the regional office, FVERA and Central Statistical Agency (CSA), respectively. Paper-based registration of vital events started in most parts of the country in mid-2016. The vital events currently covered by the civil registration system are birth, marriage, divorce, death and adoption. Figure 1 shows the registration process within the lowest administrative unit or **kebele**. The civil registration law requires that notifiers and informants report births within 90 days and the occurrence of other vital events within 30 days. Divorces and amendments have to be first processed through courts.

**Figure 1: Vital Events Registration Structure at **kebele** level**

Adopted from FVERA and UNFPA (2013)
There is no fee for registering vital events. A fee is charged for issuing vital events certificates by each regional state. The amount varies from one regional state to another. The available information is given in Table 1 and shows that certificates are provided for free in Tigray while the two city administrations (Addis Ababa and Dire Dawa) charge higher fees as compared to regional states.

**Backlog of unregistered births**

As the country-wide conventional registration of vital events started only in mid-2016, there are significant backlogs of unregistered current, late and delayed vital events. In some areas of the country, stocking out of registers and certificates happen from time to time due to high demand for delayed registration from those seeking documentary evidence of place of birth and proof of age to apply for passports, driver licenses and other similar services.

### Interface with other sectors and operations

FVERA and FMoH have an agreement to complement each other’s work through a time-bound signed memorandum of understanding. FMoH provides notifications of occurrence of births and deaths that occur in health facilities. The notification forms were prepared by FMoH in consultation with FVERA. The notification provides the minimum information needed to be recorded in the civil register.

Ethiopia does not have a national identification system. With the Formation of the Ministry of Peace, where FVERA is located, further administrative restructuring could merge or bring together civil registration and national identification management activities.

### Table 1: Direct costs associated with certification of vital events (in USD)

<table>
<thead>
<tr>
<th>No.</th>
<th>Regions</th>
<th>Birth</th>
<th>Marriage</th>
<th>Divorce</th>
<th>Death</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Tigray</td>
<td>Free</td>
<td>Free</td>
<td>Free</td>
<td>Free</td>
</tr>
<tr>
<td>2</td>
<td>Southern Nations, Nationalities &amp; Peoples</td>
<td>0.69</td>
<td>1.38</td>
<td>2.07</td>
<td>0.34</td>
</tr>
<tr>
<td>3</td>
<td>Dire Dawa</td>
<td>1.72</td>
<td>3.45</td>
<td>1.72</td>
<td>0.34</td>
</tr>
<tr>
<td>4</td>
<td>Amara</td>
<td>1.21</td>
<td>1.21</td>
<td>0.86</td>
<td>0.34</td>
</tr>
<tr>
<td>5</td>
<td>Addis Ababa</td>
<td>1.55</td>
<td>2.76</td>
<td>2.76</td>
<td>1.55</td>
</tr>
</tbody>
</table>

*Note: 1 USD is Birr 29 (exchange on 12 May 2019)*
Vital statistics system

Vital statistics

The Central Statistical Agency (CSA) is the main agency for collecting, compiling and disseminating official statistics, including vital statistics from population and housing censuses and household surveys. It is also charged by law to coordinate the country’s statistical activities to ensure the use of uniform statistical concepts, definitions and classifications nation-wide. According to the CR law of 2012, the information gathered by the vital events registration agencies on births, marriages, divorces and deaths are compiled for statistical purposes and disseminated by CSA.

The Federal Ministry of Health (FMoH) is responsible for notifying the concerned civil registration office of births and deaths, including cause of death information, occurring in health facilities. The kebeles record the events along with the particulars of the events in the civil registers. CSA is tasked with compiling vital statistics and cause of death information from the copies of registers they receive from the vital events registration agencies at federal and regional levels. CSA has setup a Vital Statistics Division in 2017 with 5 professionals as the core team that would process and disseminate vital events information. Although over 18,000 registration centres are operational, the registration is still slow since it started nation-wide in mid-2016, mainly because of low demand. It plans to expand the vital statistics activities in many of its branch offices in the regions as the registration coverage increases.

The civil registration law requires that three detachable copies of the registration forms reach the Regional Vital Events Registration Agencies (RVERAs) within 30 days after the date of registration. The RVERAs keep one copy and transmit the remaining two copies of the records to the federal organ within another 30 days. The federal agency in turn sends one set of the registration forms to CSA within 30 days. Taking these dates into account, the expected time it would take the registers to reach CSA, excluding late registers, would be as indicated in Table 2.

The time it would take for records emanating from Ethiopian embassies, Ethiopian ships, or the Ministry of National Defense to reach CSA is shorter than those indicated above.

In general, it could take up to 6 months for copies of the birth registration form to reach CSA. For the paper-based registration, it could take up to 3 months to code, edit and key-in data into computers. Compiling and tabulating the data at different administrative levels could take another 3 months. Given this, it is feasible to produce CR-based vital statistics annually.

<table>
<thead>
<tr>
<th>Vital events</th>
<th>Time for registering an event</th>
<th>Kebeles transmit records to RVERAs</th>
<th>RVERAs transmit records to VERAs</th>
<th>VERAs transmit records to CSA</th>
<th>Maximum number of days it takes to reach CSA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Birth</td>
<td>90 days</td>
<td>30 days</td>
<td>30 days</td>
<td>30 days</td>
<td>180 days</td>
</tr>
<tr>
<td>Death, marriage and divorce</td>
<td>30 days</td>
<td>30 days</td>
<td>30 days</td>
<td>30 days</td>
<td>120 days</td>
</tr>
</tbody>
</table>
Causes of death

Cause of death information is currently being collected only for deaths occurring in health facilities and coded according to the International Classification of Diseases (ICD) format. The Federal Ministry of Health is using a customized ICD 10. Federal and regional health bureaus are working on the improvement of death and cause of death notification. Ethiopia has been experimenting with the application of verbal autopsies for a long time but there is no formal application to date.

Digitization

Computerization

Ethiopia is looking into the possibility of automation using appropriate technology for the management and maintenance of an effective vital event registration system. Printing cost and the time required to transmit the completed copies of registers from the kebele civil status office up to the federal office and Central Statistical Agency is a serious challenge that can be resolved through automation of the CRVS system. Currently, only 100 kebele civil registration offices in the Addis Ababa City Administration are using computers to register vital events and issue certificates.

Mobile technology application

There is intent to introduce mobile phones for notification purposes. This is being looked at by FVERA within the general framework of digitization of the CRVS system.

Sample registration forms


Improvement initiatives and external support

While this section presents plans and budget for the federal office of the vital events registration agency, it is important to note that information was not readily available for registration agencies in the nine regions and two city administrations. The figure would be much higher if all regions were included.

Improvement plan and budget

Strategic plan

A costed 5-year strategic plan covering the period 2014 to 2018 sets the vision, mission and implementation framework for the establishment and strengthening of a CRVS system.

FVERA has started preparation for the 2019-2023 plan. It will conduct a comprehensive assessment in 2019 with support from UNICEF and other development partners.

Budgetary allocations and requirements

- Estimated total cost for the period 2014 to 2018: US$ 18 million
- Budget allocated by government for the period 2014 to 2018: US$ 77,000
- Support provided by development partners: US$ 2.5 million
Figure 2: Budgetary requirements and allocations, 2014-2018

### Activities identified as high priorities

<table>
<thead>
<tr>
<th>High priority areas in the strategic plan lacking funding</th>
<th>Estimated cost (USD)</th>
<th>Expected government allocation (USD)</th>
<th>Expected budget gaps (USD)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Automation of CR process</td>
<td>14,074,000</td>
<td>1,407,400</td>
<td>12,666,600</td>
</tr>
<tr>
<td>Upgrading skill of staff</td>
<td>2,500,000</td>
<td>250,000</td>
<td>2,250,000</td>
</tr>
<tr>
<td>Effective coordination mechanism and monitoring and evaluation</td>
<td>1,300,000</td>
<td>130,000</td>
<td>1,170,000</td>
</tr>
<tr>
<td>Total</td>
<td>17,874,000</td>
<td>1,787,400</td>
<td>16,086,600</td>
</tr>
</tbody>
</table>

Source: Federal Vital Events Registration Agency

### Support from development partners

<table>
<thead>
<tr>
<th>International organizations</th>
<th>Kind of support</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gavi, the Vaccine Alliance (GAVI) and the World Bank – Global Financing Facility (GFF)</td>
<td>Build a centralized electronic civil registration system; Procure civil registration office equipment (field vehicle, motor cycles, filing cabinets); advocacy and awareness campaigns; and capacity building</td>
</tr>
<tr>
<td>UNICEF</td>
<td>Financial and technical support</td>
</tr>
<tr>
<td>UNECA</td>
<td>Technical support (training, advisory service)</td>
</tr>
<tr>
<td>The Netherlands (through European Union and UNICEF)</td>
<td>Financial support</td>
</tr>
<tr>
<td>UNFPA</td>
<td>Drafting of the first strategic plan for the period 2013-2018; Vital statistics</td>
</tr>
</tbody>
</table>

Source: Federal Vital Events Registration Agency
Proposals to improve coordination

CRVS systems are multi-sectoral and it is key that the coordination among the major stakeholder institutions is effective and efficient. The time-bound memorandum of understanding that FVERA has signed with major national stakeholders has proved to be a useful instrument for pushing forward the CRVS improvement initiative in a setting where it did not exist before. In addition to this, FVERA proposes the following to achieve improved coordination within the national key stakeholders and with development partners.

**National CRVS stakeholders**

a. Sensitize key stakeholders on the importance of the civil registration system.

b. Continue entering into time-bound bilateral and multilateral agreements with more key stakeholders.

c. Train the staff of the key stakeholder institutions on the basics of a CRVS system to bring all on board to a certain desired level of understanding. Resources permitting, training should be conducted for health professionals, police, judges, religious leaders, etc.

**National institutes and development partners**

a. Build capacity through training of key CRVS stakeholders.

b. Technical advisory services on the functionality of interoperability of different systems.

c. Mobilize resources training of trainers in CRVS stakeholders institutions, regional states and city administrations.

Resources

**Websites**

- World Health Organization (WHO) - [https://www.who.int/countries/eth/en/](https://www.who.int/countries/eth/en/)

**Additional materials**


Conclusion

In the short period since Ethiopia embarked on the enormous initiative to establish a functional country wide CRVS system, 85 percent of the eighteen thousand local service centers or kebeles have started registration, thus ensuring physical accessibility of the centres for the majority of the population. Other major strengths of the CRVS system have been the comprehensive civil registration law of 2012 that is aligned to international principles and recommendations,14 (weaknesses of the law were addressed through an amendment issued in 2017); including government commitment expressed through issuance of regulations, amendments of laws, allocation of budget for registration operations and human resource development; the decentralized administrative arrangement of the country from the federal to the lowest administrative level or kebele – which is conducive for geographically accessible registration service delivery; health extension workers ready to be mobilized as notifiers of occurrence of events in each of the kebeles; and the Central Statistical Agency being operational for over 60 years. The agency has the mandate to collect, process and disseminate civil registration-based vital statistics. The agency has enough professionals and it is well equipped to produce vital statistics at least annually on a continuous basis.

The country faces several challenges in the improvement of CRVS systems. Some of the major challenges identified by FVERA were:

a. Paper based Registration: Proclamation 760/2012 requires the registration of vital events to be done manually in four copies. A copy to be left at the registration centres, a copy at regional level and the remaining two copies to be sent to the federal vital events registration agency and the central statistical agency. The cost of printing and the time and cost required to transfer the filled copies of registers at all hierarchies is a serious challenge requiring the automation of the system.

b. Notification of occurrence of births and deaths: The health sector is not yet well organized to notify births and deaths in all health facilities.

c. Lack of awareness of the importance of registering vital events: A significant number of the population either have not heard of or do not understand the importance of registering vital events.

d. Backlog of unregistered births - As the conventional registration of vital events started only a year ago, there are significant backlogs for all vital events. Currently, the request for delayed birth registration to get certificates that are required for obtaining passports, driving licenses and so on, is straining the young paper-based system by causing stock outs of registers and certificates.

e. Lack of field support and transport in rural areas for effective monitoring and evaluation of the performance of the system is a serious problem.
Annex: Organizational chart of the Federal Vital Events Registration Agency, December 2018

Note: Translated from Amharic, the official language of Ethiopia
Source: Federal Vital Events Registration Agency
Endnotes


3 Birth or death registration completeness means the actual number of registered births or deaths divided by the estimated number of births or deaths in a particular country or area, in a specified time period usually a year. For further reading refer to ECA, ESCAP and Statistics Norway (2016). http://www.getinthepicture.org/system/files/event/documents/


5 DPT1: Surviving infants who received the first dose of diphtheria, pertussis and tetanus (DPT) vaccine.


13 In the Ethiopian context, current registration is registration within 90 days for birth and 30 days for other vital events and late registration is up to years. Registration after one year is considered delayed which entails penalty payment.


15 The chart reflects the organizational structure on 15 December 2018. Restructuring of government offices was going at the time this report was prepared and FVERA's organigram could be affected by it.