TECHNICAL BRIEF

Maintaining civil registration resilience amid the COVID-19 crisis: **Tanzania's one-step birth and death registration processes**

INTRODUCTION

The first case of COVID-19 in Tanzania was recorded on 16 March 2020. This prompted the Tanzanian government to introduce, the very next day, a range of measures to contain and slow the spread of the virus. The government banned all public gatherings and sports activities and closed schools for 30 days. Civil registration and vital statistics (CRVS) services were also affected; they had to be modified to respond to new circumstances. Over the past six years, the civil registration system has been reformed: registration and certification were decentralized and some business processes were digitized.

Thanks to these redesigned CRVS systems, government lockdown measures did not have a dramatic impact on service delivery. The effects of these measures were most evident in the Ruvuma region: at that time, the decentralization campaign run by the Registration, Insolvency and Trusteeship Agency (RITA) aimed to clear the backlog of unregistered children under age 5. The campaign had to be postponed as services focused on registering newborns at health facilities. The emerging imperative to maintain social distancing sped up plans to expand the range of options for registering vital events: people were now able to apply online to register births and deaths at RITA headquarters.

This brief underscores the value of the one-step, decentralized, and digitized birth and death registration and certification business processes that Tanzania introduced in 2013. These redesigned processes require only a single visit to a registration agent. Many of these agents are found at health facilities, which remained in operation even as the government's COVID-19 measures were introduced. This brief further underlines that CRVS resilience can be strengthened by expanding the range of options for communicating vital events information electronically. This includes allowing online applications to register vital events and making it possible for these to be replicated at district registrar offices.



CENTRE OF EXCELLENCE for CRVS Systems





TANZANIA'S CRVS SYSTEM

Until 2012, birth registration in Tanzania involved a familiar three-step process: notification, registration, and certification. The process was cumbersome: people had to make several long visits to district registration offices, which many families saw as an obstacle and deterrent for registering vital events. As a result, Tanzania had one of the lowest rates of birth registration and certification on the African continent – 10 to 15 percent – before decentralized registration was rolled out. To put this figure in perspective, Tanzania accounted for 16.4 percent of unregistered children under age 5 in Eastern and Southern Africa, 8.3 percent in sub-Saharan Africa, and 4.1 percent across the world.¹

RITA, the national authority in charge of civil registration, developed a five-year Under-Five Birth Registration Strategy (U5BRS, 2011–2015). This strategy resulted in an agreement between RITA, the Ministry of Health, and the Ministry for Regional Administration and Local Government that was formalized in a memorandum of understanding (MOU). The MOU lists the responsibilities of the three actors in the registration process. When the *Births and Deaths Registration Act* was amended in September 2019, the MOU was subsumed into the Act. Previously, registration and certification had been done only by the district registrar and only at the district office. The new system expanded the number of registrars by introducing registration assistants. These agents are appointed by RITA and trained at the district council level. Registration assistants were placed in ward (local community) executive offices and in hospitals and health clinics; this enabled children to be registered at birth or during scheduled immunizations for delayed registrations.

The new decentralized registration process addresses the three most important bottlenecks of the previous system:

- Long distances to registration centres;
- The need for a second visit to the centre to get the certificate (or a third visit for children born at home); and
- Paper-based processing and keeping of registered information.

The process has been further simplified by enabling registration agents to register the births of children and issue birth certificates. This one-step process takes place during one visit to the registration agent. A first birth certificate for children under age 5 is now free of charge. Registration agents use a paper form: the top part is the registration form and the bottom part is the birth certificate that is issued during the same visit. The registration agent completes both parts of the form at the same time. Personal information about the parents is taken from the mother and child's health cards or ID cards, which are used mandatorily in bordering district councils for at least one parent.

With financial support from the Government of Canada, UNICEF Tanzania designed, with RITA and other stakeholders, a gradual rollout of a decentralized birth registration system. This has greatly expanded the number of registration agents. As of 2020, this new system has been implemented in 18 regions: birth registration has been done in 4,774 health facilities and 2,669 ward offices. The system will be rolled out in the remaining eight regions by the end of 2022.

¹ UNICEF Tanzania, based on State of Women and Children figures (UNICEF 2012).

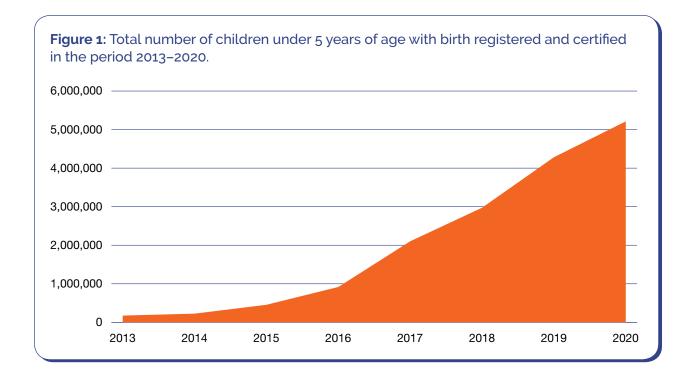
Decentralization, along with the one-step registration/certification process, has yielded very good results:

- Seven regions reached 95–100 percent birth registration/certification rates;
- Three regions reached 80–89 percent;
- Two regions reached 70–79 percent;
- Three regions reached 50–69 percent; and
- One region reached 29 percent.²

Table 1: Change in the rate of birth registration in the period 2012 to 2020 in the regions with decentralized and digitized birth registration.

Tanzania mainland – Decentralized birth registration system				
	Children under 5 with a birth certificate (%)			
Region	2012	2020	Month and year of launch	
Mbeya (including Songwe)	11.0	76.0	July 2013	
Mwanza	12.1	29.4	July 2015	
Iringa	11.4	99.9	Sept. 2016	
Njombe	8.7	100.0		
Geita	8.6	58.0	March 2017	
Shinyanga	9.4	57.8		
Lindi	11.4	87.3	Sept. 2017	
Mtwara	9.4	84.8		
Mara	7.0	78.3	March 2018	
Simiyu	5.0	68.2		
Dodoma	7.7	87.1	March 2019	
Singida	9.3	84.3		
Morogoro	10.8	93.1	Dec. 2019	
Pwani	17.0	100.0		
Ruvuma	6.0	92.7	March 2020	
Kilimanjaro	25.5	100.0	August 2020	
Tanga	9.9	97.9		
Remaining 8 regions by 2022				

² RITA. 2020. Towards Universal Birth Registration in Africa: Challenges and Opportunities during COVID-19, An Experience from Tanzania. Presentation made to the Virtual High Level Political Dialogue in Africa, organized by the African Union, 19 November 2020.



Since the rollout of the decentralized birth registration process,

- registration points have increased from 97 to 7,433;
- the number of registration officers grew from 97 to 15,568; and
- the average distance to the nearest registration point was reduced from 80–140 km to 5–6 km.

By 2020, the decision to make registration free means savings of US\$8.7 million for families in Tanzania. Introducing the one-step process is estimated to have saved them another US\$45.3 million – money that families across Tanzania would have otherwise cumulatively spent to register vital events.

TANZANIA'S CRVS SYSTEM IN A TIME OF CRISIS

The measures protecting against the spread of COVID-19 did not affect health facilities. Health remained an essential service and operational. This allowed for birth registrations to continue in 18 out of 26 regions where decentralized birth registration has already been rolled out. Other measures were introduced to prevent the disease from spreading into these facilities. As a result, civil registration continued uninterrupted in 4,774 health facilities. With one-step registration, a child is issued a birth certificate at the health facility right after registration is completed. Registration is provided not only for babies born in health facilities, but also for unregistered children born in the community when they come for immunization. In regions where the decentralized model is not yet in place, health facilities continue to issue birth and death notifications; informants later use these to register these events at district registration offices.

The general population's preference to avoid seeking non-essential services is evident: the number of requests for a second copy of a birth or death certificate or late registration services has dropped. Also, many women stopped visiting health facilities to give birth to avoid the risk of

contracting COVID-19. At many health facilities, health staff were diverted to combat COVID-19, which also slowed birth registration services to varying degrees. The number of registered marriages is lower, as large gatherings have been prohibited. Registration services are continuing for community-based events, as community leaders are still carrying out their duties, but the number of children being registered per day has been limited to ensure social distancing rules that the Ministry of Health has set.

The strategic decision to digitize business processes for registering vital events has been reinforced by allowing people to apply to register births and deaths online for the first time in 2020. Online registration, branded as E-Huduma, allows anyone to submit an online application to register vital events by supplying scanned versions of required documents. Applicants must print the submitted application and required documents, and submit these to the district registration office using an expedited procedure. Once the documents have been reviewed and confirmed to contain the evidence needed, the event is registered. The applicant is notified that the certificate is available for pickup at the local district registration office.

The E-Huduma also makes it possible to verify, from any Internet-enabled computer, whether previously issued certificates are valid. This service is designed to prevent fraud and the use of fabricated or falsified certificates, which some people may use to access services they are not entitled to. Those interested in verification services must register on the E-Huduma platform; they can verify whether a certificate is valid by uploading a scanned copy of the registration certificate.

Birth registration as a one-step process

Parents can register their child right after birth, either at the health facility or at their closest ward registration office (for births that take place outside of health facilities). If a child is not registered right after birth, registration can be done during an immunization visit or a later visit to a ward executive office.

Birth registration was greatly streamlined by introducing the two-part form (birth registration and birth certificate). A serial number that is unique to each form is printed on both parts; it is used as an identifier to track down each part if follow-up is needed. The number is also stored in RITA's central register, so that data there can be cross-checked against data on the form; this makes it easier to spot attempts to forge or fabricate identity data. If a registration assistant makes a mistake in any of the fields on either part of the form, the entire form is scrapped. This measure ensures that no form will be accepted if any fields seem to have been corrected. (Minor corrections are allowed in the birth registration form, however.)

After registration forms are completed and the registration certificate is given to the parent(s), registration agents deliver these forms to the district registration office, where they are scanned. Digital copies are sent to RITA headquarters and stored in the central database.

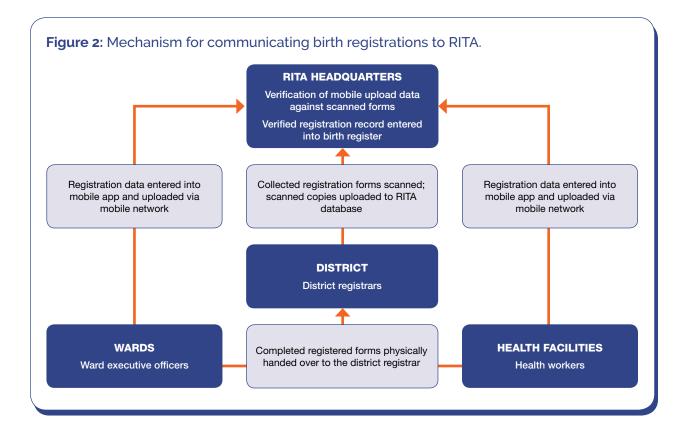
Also, a notification of each event registered using the registration forms in the community or health facility is sent digitally to RITA's central database right away. Registered data are digitized using custom-built android applications on smartphones that are distributed to all registration points. The mobile app provides a user-friendly interface that registration assistants

use to enter and digitize data from the registration form. The application enables instant transmission of collected data to RITA headquarters using GSM data transfer protocols. Where mobile network coverage is not available, the app allows the collected data to be stored. Once the mobile device is within the range of a GSM signal, data can be transmitted. An online data entry application that can run on any computer connected to the internet can also be used.

The use of mobile technologies is important for the decentralization project to succeed. It enables electronic data to be captured right after the registration form is completed and then transferred almost instantly to the RITA-operated electronic civil register. This comes with two important benefits. First, the digital birth register is automatically prepopulated with registration data as the information is received via the mobile network. Second, based on the received data, real-time monitoring of the registration process is possible.

If digitization could not take place in the field, RITA would need to put in place a mass-scale data entry operation at its headquarters. This would be involve a logistical challenge and a timeconsuming process. Due to the likely long delays in receiving paper registration books from the field, reliable tracking of the registration process would not be possible.

Given the generally underdeveloped infrastructure, especially in remote areas, mobile devices provide a distinct advantage: the general population is mostly familiar with mobile devices, and mobile networks are already readily available in rural areas. Also, devices can be recharged using solar panels, a technology that local communities are already familiar with. This makes mobile platforms the least costly way of introducing digital data processing in most parts of the country.



One of the gold standards of civil registration is the requirement to receive the same information from two independent sources to complete the registration record. Traditionally, this two-step process safeguarded against the fabrication of registration records. That is why obtaining information from informants and registration upon request by parents are designed as two distinct processes. In Tanzania, this two-step process is combined into one. RITA can crosscheck information received digitally against information written on scanned versions of registration forms.

Characteristics of the event	Characteristics of the mother	Characteristics of the father
 First name Second name Last name Other name Sex Date of birth Type of birth (single, twin, triplet, quadruplet, or higher-multiple delivery) Place of birth Title of place of birth Country of birth District of birth Village/residential location Residential region Residential county Country of origin 	 Date of birth First name Second name Last name Other name Residential region Residential district Residential county Usual occupation Village/residential location Country of origin Mobile phone number 	 Date of birth First name Second name Last name Other name Residential region Residential district Economic activity status Usual occupation Village/residential location Country of origin Mobile phone number

Table 2: Birth data captured on the birth registration form and in the central civil register
database.

Death registration

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According to RITA's 2017 projections, death registration completeness is estimated at 26 percent in Tanzania. Death registration is expected to be decentralized, as birth registration has been. The decentralized death registration system is already operating in two regions; notification is done by village executive officers. These notification forms are sent to ward executive officers for registration and certification. The Ministry of Health is working on developing capacity at the district level to have enough health executive officers to conduct verbal autopsies after the notification of death to accurately codify cause of death. The decentralized death registration system is designed to provide data on all fields recommended by the UN Statistics Division and to generate tables on mortality, including infant and maternal mortality. As this business process has yet to be rolled out fully and addressed systemically, the registration rate remains low. Until this rate improves, the CRVS system will be able to provide only a limited amount of data on death – and, in particular, cause of death – which means that comprehensive death statistics will not be possible.

Characteristics of the event	Characteristics of the decedent
 Locality of occurrence Place of death County where death occurred District where death occurred Region where death occurred Natural/non-natural death Cause of death 	 Identity number First name Second name Last name Another name Gender Age on date of death Date of birth Country of origin Last occupation Village/street of residence Residence region County of residence

Table 3: Death data captured on the death registration form and in the civil register database.

ONLINE BIRTH AND DEATH REGISTRATION

Creating new opportunities for birth and death registration by expanding the ways in which these events can be registered shows RITA's intention to make registration services more accessible. Its goals are to further facilitate access to registration; as efforts to limit human-to-human contact continue, RITA offers the tech-savvy population the opportunity to register births and deaths by applying online. In this process, the applicants bypass several traditional steps of notification and registration. After submitting an application, they can collect the certificate once RITA has processed it. Applicants must print their submitted application and applicable documents and submit them at the district registration office as part of an expedited process. This new service enables the applicant to complete an electronic birth or death application form from anywhere by registering and logging in to the E-Huduma platform at online.rita.go.tz.

Each application must be supported by scanned versions of documentary evidence. For birth registration, the applicant must submit the parents' identification documents and at least two documents from among the following:

- Medical facility birth notifications;
- Clinic card;
- Baptism certificate;
- Passport;
- Leaving certificate of primary or secondary school; and
- Parents' national identity or voting card.

The request for death registration must be documented by a medical certificate for a death occurring at a health facility. For a death that occurred at home or a late death registration, the applicant must attach the following documents:

- Identity proof a letter of identification from the ward/village executive officer where the death occurred. The letter should state the full names of the deceased, date of death, place of death, and cause of death. A photo of the applicant should be attached to the letter and stamped.
- A document by all relatives of the deceased that records the decision to appoint a trustee who will be legally recognized to apply for and follow up on the death certificate. These relatives must list their names and indicate their relationship with the deceased.
- A sworn affidavit from a court or attorney, issued by the applicant (administrator of the inheritance), stating details about the deceased, such as full names, date of death, place of death, and cause of death.

Birth and Death Certificate Verification is a new service that enables the applicant to submit an application for verification of a birth or death certificate electronically from anywhere. The applicant must upload a scanned version of the certificate and then send it electronically for verification. A dedicated messaging service is part of the platform: it allows the applicant to receive a notification of the results.

This service is not free of charge. Applicants must present proof that they have paid the fee.

LESSONS LEARNED FROM THE OVERHAULED CRVS BUSINESS PROCESSES

While the gradual rollout of the decentralized and digitized CRVS system in Tanzania was successful and resulted in high birth registration rates, the COVID-19 pandemic put the system to the test. Was it resilient and able to sustain operations in a crisis situation? The experience so far suggests that the system can operate with limited capacities to respond to needs for birth registration in the communities. Registration at health facilities was largely unaffected, as the operation of these facilities is a priority.

Because of the pandemic, the general population is applying less for registration to avoid contact and gathering in public. The one-step registration processes, requiring only one visit, provide greater incentives to approach authorities for registration than in the past, when more steps were needed.

Finally, digitizing the system moves away from a paper-based process to a fully digitized one. Information is now shared in an automated environment, requiring less human intervention. The decision to introduce online applications for birth and death registration is a sign that the authorities intend to reduce the number of administrative steps in the future and fully shift registration services to the digital realm.

ABOUT THIS SERIES

This country brief for Tanzania is part of the technical paper series: Documenting the role of notification systems in capturing vital data about births and deaths for health surveillance amid a health crisis.

The United Nations Economic Commission for Africa, the APAI-CRVS Secretariat, and the Centre of Excellence for CRVS Systems have partnered to support the development of this technical brief series on innovative, good practices facilitating the continuous and universal registration of vital

events in Africa. This includes the generation of data for health surveillance during a health crisis, which has consequently mitigated the impact of COVID-19 on the performance of the civil registration systems. The overarching purpose of this technical paper series is to provide inspiration and policy guidance for CRVS programming in the African region in the midst of a global health crisis, such as the COVID-19 pandemic.

This article was developed by Zoran Đoković and Bhaskar Mishra. It is based on information reports published on RITA's official website and the UNICEF document, Review of Civil Registration and Vital Statistics Innovations in Eastern and Southern Africa Region: Digitization, Processes, and Strategies (2019). It is supplemented by information published in IDRC's Snapshot of Civil Registration and Vital Statistics Systems of Tanzania (Centre of Excellence for CRVS Systems, IDRC, 2019) and the presentation, High-Level Dialogue on Birth Registration – Towards Universal Birth Registration in Africa: Challenges and Opportunities during COVID-19, An Experience from Tanzania (RITA, 2020).

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