

Consolidating the Gains of CRVS Through Integration, Decentralization, and Digitalization

Subtitle: Where We Were: The 2017 Baseline



Format

Paper-based & manual systems using an outdated legal framework.

Data Completeness

Low registration rates; 13.2% birth registration.

Access Limitations

Services highly concentrated in urban areas, requiring long travel distances for rural populations.

Coordination

Weak coordination and lack of interoperability among key government institutions.

Public Engagement

Low demand for services and limited public awareness on the importance of civil registration.

Analytics

Limited production and use of vital statistics for national planning and policy.

Where We Are Today (2026): Momentum & Digital Transformation



Birth Registration Surge

13.2% (2017) to **61%** (2025)

Death Registration

Maintained at **~60%**

Analytical Consistency

9 consecutive Annual Vital Statistics Reports produced since 2016

Access

Birth registration successfully rolled out into health facilities with maternity units

Legal & Strategy

National Civil Registration Act of 2023 enacted; 2022-2027 Strategy active.

Digital Transformation

NPR operational; capturing facility deaths via MCCOD & piloting Verbal Autopsy.



Partner Alignment

Strong collaboration with UNICEF, WHO, UNFPA, and the World Bank.

Data Sharing Hub

Active data sharing between MoHA, MoH, MoJCA, CSO, and Tinkhundla Administration.

Lessons Learned: Navigating the CRVS Journey



Diagnostic Balance Matrix

What Worked (Propellants)

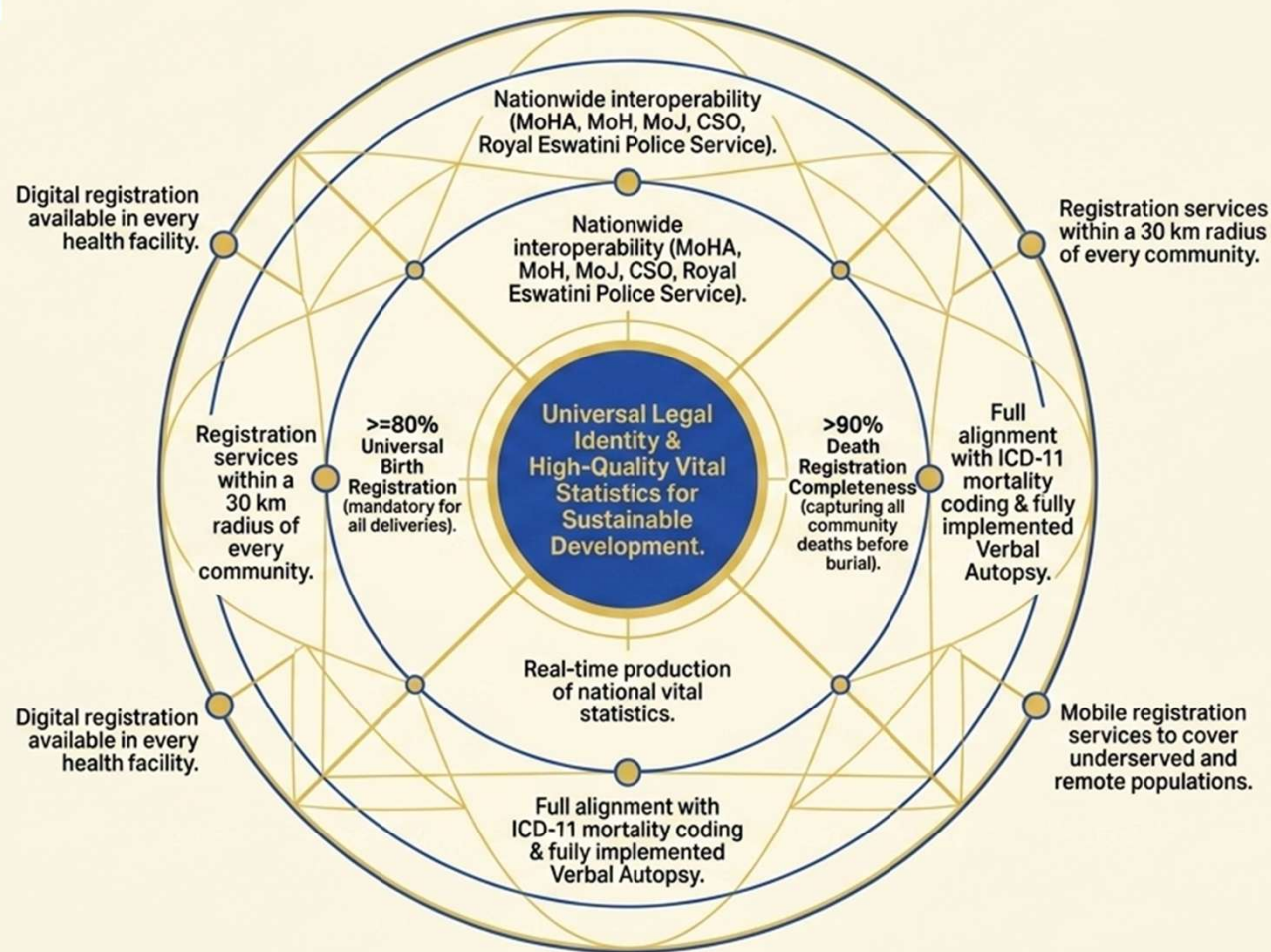
- ✓ High-level political commitment & multi-sectoral coordination.
- ✓ Integrating birth registration directly into health facilities.
- ✓ Continuous production of Annual Vital Statistics Reports.
- ✓ Consistent development partner support & targeted public awareness campaigns.

What Didn't Work (Friction Points)

- ✗ Slow CRVS system interoperability and continued manual reliance in some areas.
- ✗ Over-reliance on development partners and limited funding for nationwide rollout.
- ✗ Incomplete registration of community deaths and delayed birth registrations.
- ✗ Limited registration points and human resources for remote Tinkhundla centers.

Critical Success Factors: Sustainable progress relies heavily on a strong legal framework, robust digital identity infrastructure, continuous cross-sector leadership, and evidence-based planning.

Vision 2036: A Fully Integrated, People-Centered Ecosystem



Unlocking the Future: Critical Support Required



Vision 2036



Technical & System Support

Full interoperability with HMIS, Population registers, Social protection, and Immigration systems.

Digital identity integration (biometrics, electronic signatures).

Cybersecurity infrastructure for CRVS systems.

Advanced data analytics and business intelligence tools.



Financial Investment

Sustainable operational funding to reduce reliance on donor funds.

ICT Infrastructure scale-up (servers, tablets, connectivity for remote registration offices).

Expansion of physical registration centers and mobile registration services.

Advocacy and resource mobilization strategies.



Capacity Building

Targeted training for registrars, health workers, and marriage officers.

Specialized clinical/data skills: Cause-of-death certification, ICD-11 coding, and Verbal Autopsy implementation.

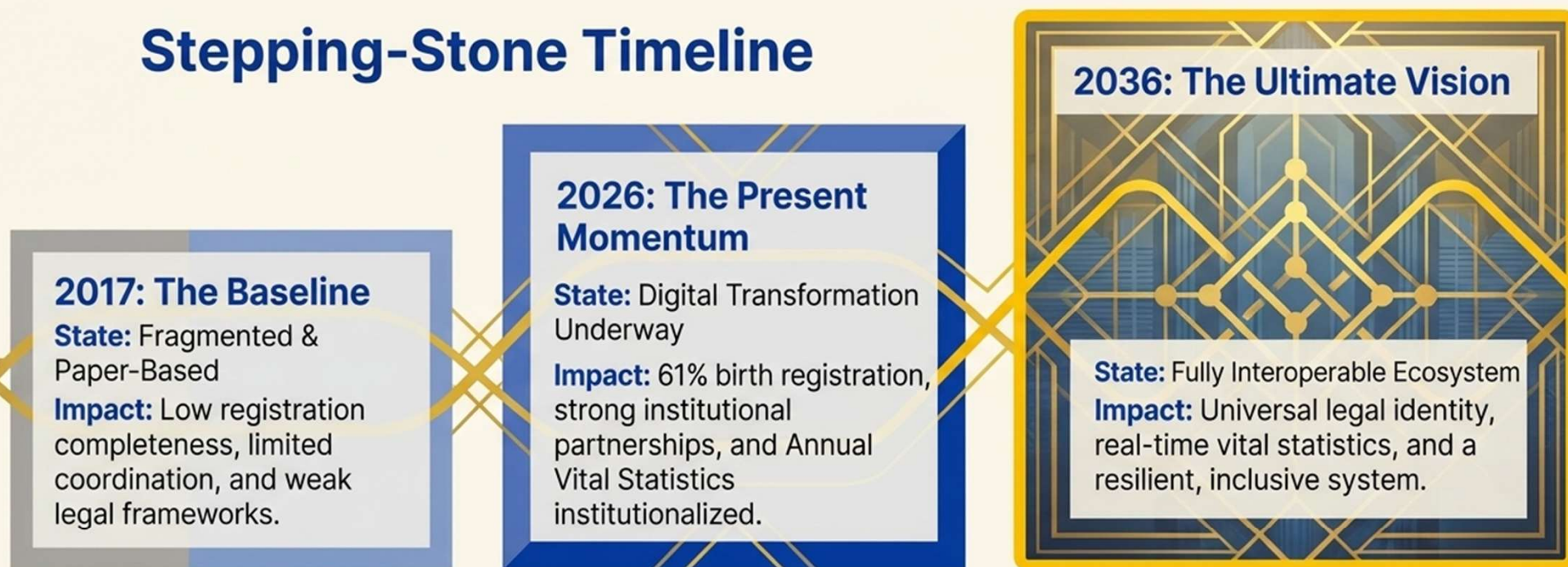
Statistical and demographic analysis for real-time data visualization.

Leadership, change management, and community awareness programs.

Key Message: Building the Future Together



Stepping-Stone Timeline



High-quality data is the engine of national development. We must consolidate these gains to drive the achievement of the SDGs and secure Eswatini's future.