COUNT EVERYONE
Process Assessment of Birth and Death Notification and Registration at Public Sector Health Facilities in Bihar & Uttar Pradesh

Notification and registration of births and deaths in these facilities is synonymous, and hence similar coverages for both. Only the births and deaths for which the family demands a certificate are notified and registered. Tracking of neither the births nor deaths is possible between the facility registers and CRVS portal.

**What did we do?**
Process analysis in public sector health facilities in 18 districts of Bihar and 5 districts of UP

<table>
<thead>
<tr>
<th>TYPE OF FACILITY</th>
<th>BIHAR</th>
<th>UP</th>
</tr>
</thead>
<tbody>
<tr>
<td>District hospital</td>
<td>15</td>
<td>8</td>
</tr>
<tr>
<td>Sub-divisional hospital</td>
<td>14</td>
<td>0</td>
</tr>
<tr>
<td>Referral hospital</td>
<td>4</td>
<td>0</td>
</tr>
<tr>
<td>Community health centre</td>
<td>13</td>
<td>10</td>
</tr>
<tr>
<td>Primary health centre</td>
<td>23</td>
<td>7</td>
</tr>
</tbody>
</table>

**What did we find?**

1. **Notification**
   There is no active notification of birth/death in the CRVS portal by the health facility staff. In their understanding, it is to be done only when the family demands a birth/death certificate.

2. **Verification**
   Family of the newborn child or deceased is handed over a discharge slip as a proof of facility delivery or admission (and death). This slip is brought by the family when they desire birth/death certificate. The personnel verify birth/death across several registers to issue the required certificate.

3. **Registration and Certification**
   After the verification is complete, the personnel enter the birth or death data in the CRVS portal, and generates the birth/death registration certificate for the family. Notification, registration and certification happens at the same time.

4. **Individual tracking of facility births and deaths**
   Only 70% and 62% of births in Bihar and UP, and 13% and 30% deaths in Bihar and UP, respectively, could be tracked in the CRVS portal. Some vital events could not be fully matched.
Re-orientation of the facility staff is needed regarding the difference between notification of a vital event, and registration and certification of a vital event. Such an orientation will have an immediate effect on the notification of deaths, in particular.

Linkages between the CRVS portal and the routine data on births and deaths captured under the Health Management Information System are urgently needed to ensure that all facility births and deaths are notified in the CRVS portal.

A number of registers are maintained to document births and deaths in facilities. Consolidation of these data in a single register is needed for easy storage, access and monitoring.

A unique identifier is needed for every birth and death that could be used to individually track each vital event between the facility and the CRVS portal.

Supervision and monitoring of the data entered in the CRVS portal is a must.

**Way forward**

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**About COUNT EVERYONE**

The Public Health Foundation of India (Gurugram) was the technical lead of this study, which was done in collaboration with Sambodhi Research Pvt Ltd (Noida), CARE India (Patna) and Oxford Policy Management (New Delhi). COUNT EVERYONE was funded by the Bill & Melinda Gates Foundation, India office. The primary aim of this study was to generate information to improve birth and death registration, and cause of death documentation in Bihar & Uttar Pradesh.

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