



REPUBLIC OF LIBERIA

Ministry of Health

Birth and Death Registration

and

Certification Policy

November 2017



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ATLANTIC OCEAN





Foreword

The Birth and Death Registration and Certification Policy was developed under the guidance of the Department of Planning, Bureau of Vital and Health Statistics of the Ministry of Health (MoH), with technical and financial support provided by UNICEF.

The policy objectives include:

- To ensure continuous, compulsory, permanent and universal registration of vital events in Liberia;
- To provide a tool for ensuring that the Public Health Law provisions on Vital Statistics are uniformly applied;
- To ensure the acquisition of important national documents such as passports, drivers' licenses, national identification cards and marriage certificates through Birth Registration; and
- To provide accurate statistical data for national development planning and decision-making.

This policy aligns with critical laws and agendas of the country and beyond, to include the Public Health Law of 1976, the United Nations Conventions on the Rights of the Child, the African Charter on the Rights and Welfare of Children, Early Childhood Development Policy of 2008 and the Children's Law of 2011.

It is our hope and aspiration that this policy will guide birth and death registration services in Liberia and improve the current situation.

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List of Acronyms and Abbreviations

BR	Birth Registration
CDC	Centers for Disease Control and Prevention
CHT	County Health Team
CMI	Crisis Management Initiatives
CNDRA	Center for National Documents and Records Agency
CR	Civil Registration
CRC	Convention on the Right of the Child
CRVS	Civil Registration and Vital Statistics
DR	Death Registration
GOL	Government of Liberia
HIS	Health Information Systems
KII	Key Informant Interview
LDHS	Liberia Demographic and Health Survey
LISGIS	Liberia Institute for Statistics and Geo-Information Services
M&E	Monitoring and Evaluation
MDAs	Ministries, Departments, and Agencies
MOH	Ministry of Health
MOHSW	Ministry of Health and Social Welfare
NGOs	Non-Governmental Organizations
NHP	National Health Policy
NHPP	National Health and Social Welfare Policy and Plan
NIR	National Identification Registry
ToR	Terms of Reference
UBR	Universal Birth Registration
UNCRC	United Nations Convention on the Right of a Child
UNICEF	United Nations Children's Fund
WB	World Bank
WHO	World Health Organization

Chapter One: Introduction

1.1 Country context

The registration of birth was first acknowledged as a basic human right in 1948 in the Universal Declaration of Human Rights and in 1989 as a right of a Child in the United Nations Convention on the Right of a Child (UNCRC). Liberia has signed and ratified the UNCRC but the implementation of this instrument has been patchy due to the lack of political commitment and insufficient resources.

Since 1976, the conduct of birth and death registration has been determined as legal and mandatory in Liberia as per the Public Health Law. However, these registration systems have never been fully developed due to limited access, inadequate national budgetary allocation and lack of policy and standard operating procedure to guide the administration of the system.

Access to birth registration, as a right became an obligation of Liberia upon her accession to the UNCRC. The right was adopted by inclusion in the Early Childhood Development Policy of Liberia in 2008 and fully domesticated with the passage of the Children's Law in 2011.

The situation with death certification and registration is worse; it lags behind birth registration in terms of resources and practice, though it makes sense to integrate the two, particularly through resource sharing. In addition, while birth registration documents an individual official existence, death registration declares that an individual has ceased and without the two, it cannot be said that any national registry is accurate.

Rebuilding the birth registration system has taken several years, after the Liberian civil crisis. Investments by Liberian international partners including UNICEF, Plan-Liberia, Crisis Management Initiative, Global Alliance for Vaccines and Immunization (GAVI) and the World Bank facilitated the restoration of birth registration services and its decentralization to all counties with the exception of Montserrado. Birth registration services are more widely available than at any time in Liberia. However, this increase has not been able to improve coverage of birth registration as much as desired due on capacity challenges, limited education and awareness, and weak enforcement. Just as in the past, limited access and coverage are still the dominant impediments of the system.

The road to recovery in Liberia has necessitated a return to “normalcy,” but will require an increased commitment to rectifying systemic weaknesses in order to create a resilient health system capable of providing health security and social protection for the people of Liberia especially women and children. Liberia has taken the first steps in this long journey through its 2015 Investment Plan for Building a Resilient Health System in Liberia.

One of the most fundamental services to be revived is the provision of civil registration (CR) services, which include the registration of births, deaths (and certifying cause of deaths), marriages, divorces as well as the issuance of birth and death certificates. The CRVS Investment Case was developed to emphasize how important CRVS is viewed as a component of the health sector. It serves as the foundation for other civil registration processes in any state, be it the issuance of marriage and divorce licenses, passports, national identification cards, drivers’ licenses, social security cards, voters’ registration cards, etc.

One key area of challenge, overlooked in the past, has been the management of the system. Though birth registration services have been decentralized, there is no written policy to guide the day-to-day administration of birth and death registration services. Therefore, the development of a policy to implement the provisions of the Public Health Law is critical for consistency, improvement in services and realization of the birth and death registration goals and objectives.

1.2 Birth Registration Situation Analysis

1.2.1 Coverage of Birth Registration

Birth registration in Liberia has gradually improved after the breakdown in health services due to the fourteen years civil crises and the recent Ebola epidemic. The rate of birth registration has grown from 4% in 2007¹ when Liberia had the second lowest rate in the world to around 25% (DHS 2013) at present. Currently, a number of public health facilities, county service centers, vaccinators, certified midwives and health facility registrars carry out birth registration.

On the other hand, many people in rural Liberia are outside of the range of effective sensitization of the benefits of having a birth certificate or the services that would

¹ Liberia Demographic and Health Survey, 2007

enable them obtain same if sensitized, thus increasing the number of unregistered children in rural Liberia.

Birth Registration Trends in Liberia (2007-2016)

Year	Central	County	Total
2007	15,142		15,142
2008	20,511		20,511
2009	21,143		21,143
2010	22,246		22,246
2011	27,239	48,408	75,647
2012	30,915	57,085	88,000
2013	30,875	80,284	111,159
2014	31,005	53,031	84,036
2015	37,863	25,735	63,598
2016	36,179	127,379	163,558
Total	273,118	391,922	665,040

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1.2.2 Birth Registration Resources

The Ministry of Health has a Bureau of Vital Statistics headed by a Principal Registrar that reports to the Assistant Minister for Vital Statistics. This office has 24 staffers whose basic salaries are funded by the national budget under the Ministry of Health. Donors and partners also provide significant contributions to birth registration services.

The current number of birth registration service providers at the Bureau is limited in quantity and quality.

There are multiple gaps in the process of birth and death registration. There are no operational manuals at registration points or registration centers to guide registrars and others in carrying out their daily responsibilities and reporting. As a result, there is inadequate enforcement of the ‘free’ concept in “free” services, lack of availability of registration at every health center and district, lack of funding to support going to scale with BR, insufficient awareness of health care professionals as to their responsibility to birth registration. In addition, there is no formal regulation for governing the system and monitoring and controlling the different processes³. These gaps are aspects that this Policy is expected to fill.

² Wesseh, Chea Sanford. Asst. Minister for Health and Vital Statistics. 2017. *CRVS Overview & Birth Registration in Liberia*.

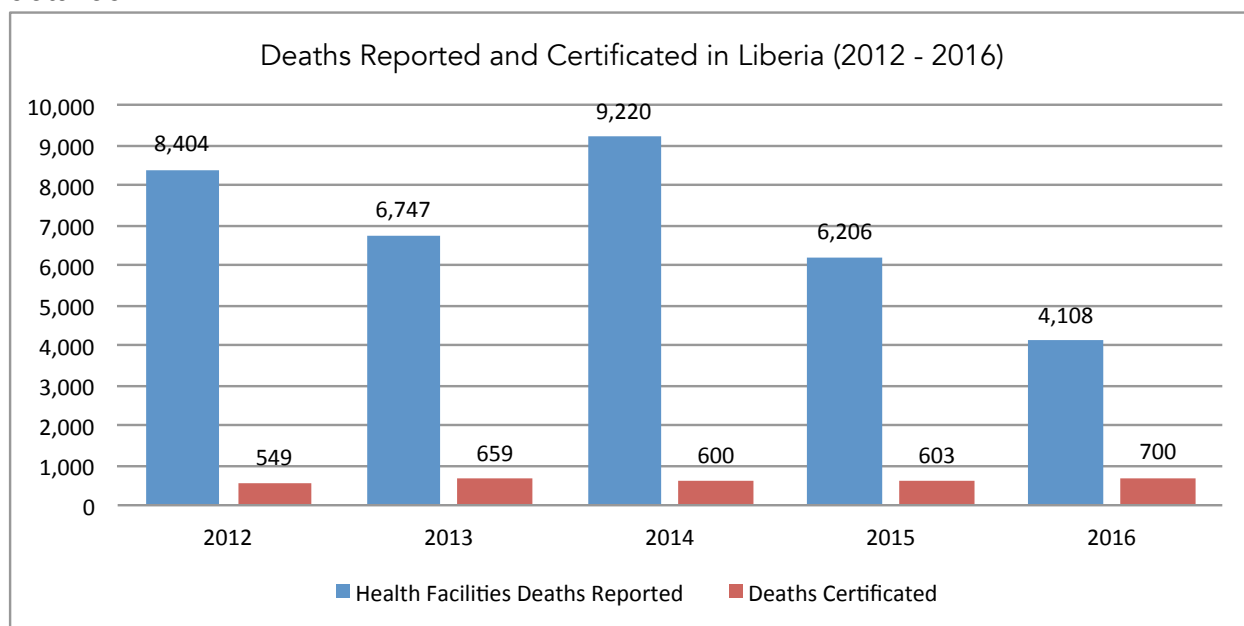
³ Republic of Liberia: Improving Civil Registration and Vital Statistics investment case (2016 – 2020)

Furthermore, the ministry needs to boost its health promotion programs to include education on birth registration, as many people in rural Liberia have no idea about the need for birth or death certificates. The capacity of health practitioners at health facilities needs to be enhanced in terms of new protocols for birth registration. Interviews carried out with people trying to obtain birth certificates indicate that the process is time consuming due to bureaucracy existing at the Office of Vital Statistics, which could be potentially streamlined.

1.3 Death Registration Situation Analysis

Section 51.31 of the Liberian Public Health Law of 1976 mandates the Ministry of Health, through the office of Vital Statistics, to register all deaths within twenty-four (24) hours, after their occurrence. Unfortunately, this provision has not been fully implemented by the Ministry because of inadequate number of personnel with responsibility on death registration and centers providing such services. Inadequate training of available personnel and poor dissemination of information about the significance and need for death registration is also a problem that needs to be resolved.

There is a huge disparity between the number of reported deaths in health facilities and the number registered. For instance, only 6.5% (549) deaths were registered in 2012 out of 8,404 reported deaths. Also from 2012 to 2016 34,685 deaths were documented but only 8.9% were registered and certificated. See figure below for detailed.



Additionally, traditional and religious beliefs and values are not heavily inclined towards death registration. Majority of persons seeking to register deaths and obtain death certificates, do so where it is required for insurance benefits or to settle inheritance problems instead of grounds of burial and cause of death as required by law.

1.3.1 INFORMATION FLOW ON DEATHS

However, to increase and improve the registration and certification of deaths, there is a need to increase public awareness in both the urban and rural areas through community engagement. Deaths that occur in communities go largely unreported. As a result, even though there is a provision by which information provided by health facilities (hospital, health centers, clinics, etc.) can be included in registers, it still constitutes a minute portion of the overall number of deaths that occur.

1.4 Legal Framework

The Public Health Law of 1976, Ministry of Health Act of 2017, the Interior Regulations of Liberia, the Domestic Relations Law and the National Public Health Institute of Liberia Act of 2017 shall guide this policy.

Chapter Two: Policy Development Process

The organization of the planning and the entire process of the development of Liberia's Birth and Death Registration Policy included the following steps:

1. Work schedule or roadmap for the policy development was developed, discussed and finalized by a core team at the MOH;
2. Case study (follow-up) of a person going through the process of getting a birth certificate, to ascertain actual process and how this differs from or applies to the ideal;
3. Conducted desk review of available literature on birth and death registration in Liberia;
4. Gathered inputs key stakeholders through circulation of draft policy outlines and specific inquiries;
5. Produced and circulated the draft policy with relevant stakeholders for inputs;
6. Organized multi-stakeholders' review and validation of the draft Policy;
7. Revised the draft Policy based on inputs from stakeholders;
8. Presented the final draft to the Ministry of Health and stakeholders for endorsement and implementation.

Chapter Three: Policy Foundation

3.1 Mission

The mission of the Policy is to provide guidance and a legal framework for the administration birth and death registration and certification services that will improve the national civil registration systems.

3.2 Vision

The vision of the policy is that every child counts and have a legal identity and all deaths registered.

3.3 Goal and Objectives

The main goal of the Policy is to create an efficient and complete registration and vital statistics system that provide legal identity to all persons, improved service delivery, and informed evidence-based planning and decision making.

Strong leadership, stakeholders' commitment, resources, and effort are needed to achieve the policy objectives:

1. Increase access to birth and death registration through the establishment of additional centers and the conduct of mobile birth registration,
2. Increase the demand of birth and death registration through the conduct of regular public awareness campaigns.
3. Build management and service provider competency to ensure an effective and comprehensive approach to service delivery.
4. Provide logistics and material resources to improve registration processes.
5. Maintain shared commitment among all stakeholders to adhere to this policy;
6. Produce annual vital statistics from the birth and death registration data for accurate planning and monitoring of national and sub-national programs.

3.4 Guiding Principles

This policy shall be guided by efficiency, customers centered services, equity, equality, non-discriminatory, accountability, transparency, sustainability and integration.

1. **Efficiency** - the services performed must add value to society and the CRVS systems in comparison to the level of investment done in them, meeting the utmost needs of those seeking the service regardless of socio-economic status and location.
2. **Customer centered services** - the process of birth and death registration is to help individuals fulfill the requirements of the law and the duty of personnel is to facilitate the process of them doing so, with emphasis on achieving lower turnaround time for persons eligible.
3. **Equity, equality and non-discrimination** - the application of the requirements of the policy to all should be in the spirit of fairness and without favor. Equal access must be provided to users of birth and death services irrespective of their condition, location and status.
4. **Accountability and transparency** - persons involved in the process must ensure that the process is explained, understood and accepted by every client, recognize their obligations to provide the service at all times, and give valid reasons why a particular action is taken or not taken in relation to the service desired.
5. **Sustainability** - the process should be directed towards eventually being fully supported by local/national resources and having minimal impact on the environment.
6. **Integration** - services, which are similar to each other, serve similar purposes and use similar skills should as much as possible, be conducted by the same personnel in the same location to reduce duplication of efforts and conserve resources. All individuals involved in the system, should see the performance of the services as an obligation of the system as a whole, and therefore contribute, rather than been restricted to that of others.

Chapter Four: Birth Registration

4.1 Definition of key terms

“Adult” means a person who is eighteen years of age or older.

“Child” means a person who is below eighteen years of age.

“Infant” means an individual that have not celebrated his/her first birthday. A child who is less than a year old.

“Birth Certificate” means an official document issued to record a person's birth, including such identifying data as name, gender, date of birth, place of birth, and parentage, and filed in the office of the Principal Registrar or Registrar;

“Birth Certification Center” means clinic, health center, hospital, district health office, county health office, county service center or any place designated by the Principal Registrar to issue birth certificate.

“Birth” means the complete expulsion or extraction from its mother, irrespective of the duration of pregnancy, of a fetus in which, after such expulsion or extraction, there is breathing, beating of the heart, pulsation of the umbilical cord, or unmistakable movement of voluntary muscle, whether or not the umbilical cord has been cut or the placenta is attached.

“Birth Notification” means a health facility based record of a newborn birth including date, place of birth, weight, name of mother and name of attending health worker.

“Birth Registration” is the process by which a child’s birth is recorded in the civil register by the responsible government authority.

“Delayed Birth Registration” is the process by which a child’s birth is recorded in the civil register by the responsible government authority after one year of the birth occurrence.

Late Birth Registration is the process by which a child’s or individual’s birth is recorded in the civil register by the responsible government authority after childhood period (adult registration).

“Birth Certification” the process in which an official document is issued to record a person's birth, including such identifying data as name, gender, date of birth, place of birth, and parentage and filed in the office of the Principal Registrar or Registrar.

“Birth Registration Center” means clinic, health center, hospital, district health office, county health office, county service center or any place designated by the Principal Registrar to officially registered births.

“County Service Center” refers to a building that houses offices of various ministries, agencies and commissions (MAC) of the Government of Liberia in a county to provide major documentary services to inhabitants;

“Health Facility” means a national referral hospital; county hospital; or other facility that is primarily intended to provide diagnosis, care, treatment, or rehabilitation of persons with medical conditions; and is designated by the Minister to receive patients.

“Mobile Birth Registration” means the registration of birth using short message service (SMS), mobile phone app or other web based application. It also refers to registration done by a teams that are moving rather than in a fixed center.

“Principal Registrar” means the Director of the Office of Vital Statistics. A Government official with the responsibilities for births and deaths registration and certification.

“Registrar” means a staff of the Office of Vital Statistics who works under the guidance of the Principal Registrar in the processing of birth registration and certification and supervises or coordinates the work of Registration Assistants and data officers.

“Registration Assistant” means any individual assign to assist the Principal Registrar or Registrar in the processing of birth registration and certification.

4.2 Who is entitled to Birth Registration and Certification

Every child born in Liberia is entitled to birth registration and certification, regardless of parents' nationality and socio-economic status. Children born to Liberian parents abroad are not entitled to registration and certification in Liberia but the country of their birth.

4.3 Who is exempt from Birth Registration and Certification

A child born outside of Liberia at a foreign embassy or consulate, UN mission and diplomatic mission station is exempted from Birth Registration and Certification administered by the Office of Vital Statistics of Liberia. Such child, upon the submission of a valid birth certificate issued by the nation where the birth occurred, is however entitled to a statement that the records have been examined and are to be considered a substitute for the registration and certification done by the office to facilitate the acquisition of other national documents (e.g.: passport, national ID card, etc).

4.4 Who should not be registered and certificated

The following individuals are not to be registered and certificated:

- a) Children not born in Liberia as required by Section 4.2;
- b) Children born in areas deemed outside of Liberia's territorial control as per the determination of international law, specifically diplomatic missions and areas granted equivalent territoriality, except where no provision exists for their registration in that extraterritorial jurisdiction;
- c) Children without given and family names, mother's name, age, date of birth and place of birth, except children who are wards of the state in which case the government will provide the needed information through a public welfare officer.

4.5 Birth Registration and Certification Process

- a) The birth of every child is to be registered with the health care facility, district or county in which the birth occurred.

- b) Every birth certificate must carry the full name of the child, parents, age, place of birth, date of birth and sex. Except in the case of as describe in section 4.4 C or where the mother is unable to determine the biological father of the child (e.g: in the case of rape).
- c) It is the duty of the physician, midwife or birth attendant to file a report of the birth of a child within fourteen days of the date of birth to the public health facility, district, county or principal registrar for registration.
- d) The birth of every child is to be registered with the health care facility, district or county registrar in which the birth occurred or the nearest location where it becomes possible to make use of said services.
- e) Every birth certificate must carry the full name of the child, mother, age, place of birth, date of birth and sex.
- f) In the absence of a physician, midwife or birth attendant, the following persons, each in order of status, are required to file a report of the birth of a child within fourteen days of the date of birth to the local public health facility/district/county/ Principal Registrar for registration:
 - 1) The father or mother of the child;
 - 2) The guardian of the child to furnish the required information for registration;
 - 3) The owner of the house or premises in which the child is born;
 - 4) The director or person in charge of the public/private institution in which the child is born;
- g) The informant will be required to produce evidence of birth as determined by section 4.6 of this policy.
- h) A Registration Assistant shall issue a questionnaire (the Birth Registration Form) to the informant. Information collected from the form is recorded in the Register of Births after which a Birth Certificate is issued within a month of the submission of the form.

- i) The birth should be registered free of charge if done before the completion of 12 (years) year after its occurrence. However, as of 2020, registration of a person older than one year, will incur a fee to be prescribed by regulation.

4.6 Birth Registration and Certification Process for deserted new-born child

- a) The birth of deserted newborn child is to be registered with the district or county registrar in which the newborn was found.
- b) If such child is afterwards identified and already has a filed birth report, then the mother and father names shall be entered on the birth certificate.
- c) It is the duty of the person that finds the child to report such child and finding to the nearest public welfare official who shall file a report of the birth of the child within fourteen days of the date of birth to the local, district or county or principal registrar for registration.
- d) The informant will be required to produce evidence of birth as determined by the Principal Registrar.
- e) A Registration Assistant shall issue a questionnaire (the Birth Registration Form) to the informant. Information collected from the form is recorded in the Register of Births.
- f) The birth should be registered free of charge within 12 years of occurrence. However, as of 2020, registration of a person older than one year, will incur a fee to be prescribed by regulation.

4.7 Birth Registration and Certification Process for Child born out of Wedlock

- a) The birth of every child is to be registered with the district registrar of the district in which the birth occurred.
- b) A birth certificate for a child born out of wedlock is expected to carry the name of the mother only. However, the name of the putative father shall be entered on the report and certificate with his written authorization. Particulars relating to the putative father, other than his name may be entered without authorization

- c) It is the duty of the physician, midwife or birth attendant to file a report of the birth of a child within fourteen days of the date of birth to the local, district or principal registrar for registration.
- d) In the absence of a physician, midwife or birth attendant, the following persons; each in order of names, are required to file a report of the birth of a child within fourteen days of the date of birth to the local/district Principal Registrar for registration.
 - 1) The mother of the child;
 - 2) The guardian of the child to furnish the required information for registration.
 - 3) The owner of the house or premises in which the child is born;
 - 4) The director or person in charge of the public/private institution in which the child is born;
- e) The informant will be required to produce evidence of birth as determined by the Principal Registrar.
- f) A Registration Assistant shall issue a questionnaire (the Birth Report Form) to the informant. Information collected from the form is recorded in the Register of Births after which a Birth Certificate is issued within three (3) working days of the submission of the form.
- g) The birth should be registered free of charge within 12 years of occurrence. However, as of 2020, registration of a person older than one year, will incur a fee to be prescribed by regulation.

4.8 Documents required for Birth Registration and Certification

The following documents are required for Birth Registration and Certification:

- a) One passport size photo (white background) of the child/applicant. This however, does not apply to newborns, infants and children below five years of age.

- b) One passport size photo of the parent, guardian or family member that will attest to the application;
- c) Valid identification card (where applicable); and
- d) Any other document as required by regulation or law.

4.9 Registration and Certification Fees for persons above Twelve Years

For persons aged 12 years or above, birth registration and certificate fees will be determined by administrative regulation by the Minister.

4.10 Registration Centers and Places

Registration centers will be located in every district in the counties. Government Service Centers located in regions and counties will also house registration centers. Registration places will be selected based on criteria set by the Minister. Hospitals, health centers and clinics will be selected as registration places to meet the government goal of 80% registered children by 2021.

4.11 Registration Personnel

Birth registration shall be carried out by local registrars, district registrars, immunization personnel and any person authorized by the Principal Registrar in the county, district, town and village to carryon birth registration.

4.12 Signatory of Certificate

The Principal registrar or his/her designated person shall be the signatory on birth and death certificates.

4.13 Replacing lost birth certificates

To replace a lost birth certificate, the following procedures shall be followed:

- a) Request for a replacement certificate by filling the required form;

- b) Attach a photocopy of the lost birth certificate or a copy of your valid ID (voter registration card, passport, etc.). Photocopy of lost certificate is optional.
- c) Attach a passport size picture
- d) A Registration Assistant reviews the form, search the registry for the original copy and print out a new copy of the certificate.
- e) A fee shall be prescribed by regulation to replace/reprint lost birth certificate.

4.14 Obtaining copies of birth certificates for persons living overseas

Persons living overseas wanting to obtain birth certificates shall make such request with the nearest Liberian consulate, provide the required documentation and pay the requisite fee charged by the consulate. The Ministry will then process the certificate, in collaboration with the consulate.

Where there is no consulate in the applicant's country of resident, a family member of the applicant shall follow the normal procedure describe in this policy. Interview with the applicant shall be done using the most effective and efficient medium.

4.15 Persons born at sea and on aircraft

Persons born at sea or on aircraft shall be registered in Liberia provided they are born in Liberian territorial waters or in Liberian air space.

Persons born at sea or on aircraft outside Liberian territorial waters or outside Liberian air space shall only be entitled to registration and certificate if the first port of call they encounter after the birth is in Liberia and there are facilities for birth registration in that location.

4.16 Birth not registered within statutory timeframe

All births not registered within the fourteen days stipulated by law shall be required to be registered with the Registrar by the father/mother within a year to avoid sanction. The interim provision which allows birth to be registered free of charge up till age 12, shall lapse as of January 1, 2020, after which fees as determined per regulation will be applied to registration of persons above one-year-old.

4.17 Delayed Birth Registration

Registration of a birth after one calendar year of its occurrence shall be considered as delayed registration. All delayed registration of birth shall follow the same process as the regular registration except that the form shall indicate "Delayed Registration" and a fee shall be charged therefor. Registration and issuance of certificates for children twelve (12) years or below is free until 2020, when fees determined by administrative regulations made by the Minister will be reintroduced.

4.18 Re-registration of births

Re-registration of birth is allowed for correction of birth records because of subsequently occurring events as listed under Chapter 51.24 of the Public Health Law of Liberia. Fee shall be charged as per regulation.

4.19 Details shown on birth certificate

Details to be shown on birth certificate shall be determined by administrative regulations.

4.20 System checks

The Principal Registrar for Vital Statistics shall counter check the operations and systems put in place for the various registrars and take further corrective actions to correct flaws. The Assistant Minister for Vital statistics will have oversight responsibility over the Principal Registrar and shall continuously review policies and systems put in place and implement corrective actions where possible.

4.21 Persons authorized to carry out Birth Registration

Health facility registrars, vaccinators, certified midwives, district registrars, County Health Registrars, and any person authorized by the Principal Registrar in the county, district, town and village to carry on birth registration shall be deemed birth registration personnel and subject to the application of this policy.

Chapter Five: Death Registration

5.1 Definition of key terms

“Coroner” a person whose standard role is to confirm and certify the death of an individual within a jurisdiction;

“Death” the irreversible cessation of all vital functions especially as indicated by permanent stoppage of the heart, respiration, and brain activity.

“Infant death” the death of a child before completing the first one year after birth (i.e. before the first birthday).

“Neonatal death” the death of a child before completing the first 28 days after birth⁴

“Under five death” the death of a child who has not attained the age of five years (0-59 months of age).

“Child death” the death of a person before their 18th birthday.

“Cause of death” an official determination of conditions resulting in a human's death⁵

“Death Certificate” means an official document issued with the cause of death of a person's, including such identifying data as name, gender, date of death, place of death, and filed in the office of the Principal Registrar or Registrar;

“Death Certification” the process in which an official document is produced with the cause of a person's death, including such identifying data as name, gender, date of death, place of death, and filed in the office of the Principal Registrar or Registrar;

“Still birth” (death) means any pregnancy terminated after the twentieth week in which the product of conception after complete separation from the mother does not show evidence or life, such as breathing, beating of the heart, pulsation of the umbilical cord or definite movement of voluntary muscles, regardless of whether the pregnancy terminates spontaneously or by surgical intervention or whether the termination was

⁴ <http://medical-dictionary.thefreedictionary.com/neonatal+death>

⁵ https://en.wikipedia.org/wiki/Cause_of_death

therapeutically or otherwise induced. A stillbirth is considered as a birth and as a death except that separate birth and death register entries are not required.

5.2 Registration and Certification of Death within a health facility

Death within a health facility shall be reported to the district or county registrar or the registrar at the nearest service center within twenty-four (24) hours of occurrence. The registrar in the district in which the death occurred shall record the death and issue the death certificate. The following processes shall be completed before the issuance of the certificate.

5.3 Registration and Certification of Death outside of health facility

Death outside a health facility shall be reported to the district registrar or the registrar at the nearest service center within twenty-four (24) hours of occurrence. The registrar in the district or at the service center in which the death occurred shall record the death and issue the death certificate.

5.4 Death Registration and Certification Process

1. The death of every person is to be registered with the district registrar of the district in which the death occurred.
2. It is the duty of the physician, health worker or the one pronouncing the death to file a report of the death of a person within twenty-four (24) hours of occurrence to the local, district or Principal Registrar for registration. In the absence of a physician or health worker, the following persons; each in order of names, are required to file a report of the death within twenty-four (24) hours of occurrence to the local/district principal registrar for registration:
 - a. The relatives (father, mother, brother, sister, aunty, uncle, etc.) of the deceased present at the death;
 - b. Any other person present;
 - c. The house owner or the premises owner in which the death occurred;
 - d. The person in charge or owner of the vehicle in which the death occurred;
 - e. The person that found the unattended body shall report it immediately.
3. The informant will be required to produce evidence of death as determined by Section 5.5 including (Physician Medical Report, Coroner's report, etc.).

4. A Registration Assistant shall issue a questionnaire (the death Report Form) to the informant. Information collected from the form shall be recorded in the Register of Death after which a death Certificate is issued within three (3) working days.

5. The death should be registered, at a fee prescribed by regulation.

5.5 Documents require for Death Registration and Certification

- a. Application form
- b. Original Physician Medical Report
- c. Original Coroner Medical Report (optional)
- d. One Passport Size Photo of Informant/Relative
- e. Cause of death certificate or medical cause of death form signed by a licensed physician or health worker.

5.6 Registration and Certification Fees

Death registration and certificate fees will be determined by administrative regulation made by the Minister.

5.7 Registration Centers and Places

Registration centers will be located in every district in the counties. Government Service Centers located in regions will house registration and certification centers. Registration places will be selected based on certain criteria set by the Minister. Public Hospitals, Public Health centers and Public clinics will be selected as registration places.

5.8 Registration Personnel

Local registrar, district registrar, county health registrar, officers in charge of health facilities and any person authorized by the Principal Registrar in the county, district, town and village to carry on death registration.

5.9 Certificate Signatory

The Principal registrar or his/her designate shall be the signatory on death certificates.

5.10 Replacing lost death certificates

To replace a lost death certificate, the following procedures shall be followed:

1. Request for a replacement of certificate by filling the required form;
2. Attach a photocopy of the lost death certificate or a copy of the individual official ID (voter registration card, passport, valid Identification (ID) card or a copy of the physician's or coroner's report); Copy of the lost death certificate is optional;
3. Attach a passport size picture of the deceased;
4. A Registration Assistant reviews the form, search the registry for the original copy and print out a new copy of the certificate for principal registrar's signature.
5. Pay the required fee;
6. Copy of the medical cause of death form signed by physician or licensed health worker.

A fee shall be prescribed by regulation to replace/reprint lost birth certificate.

5.11 Persons dead at sea and on aircraft

Persons dead at sea or on aircraft shall be registered in line with the relevant laws of Liberia, or administrative regulation by the Minister.

5.12 Deaths not registered

All deaths not registered within the twenty-four hour stipulated by law shall be registered with the registrar by the responsible party in charge within a year to avoid sanction.

5.13 Late registration of deaths

Registration of deaths after twenty-four hours is considered as late registration. All late registration of death shall follow the same process as the regular registration with the exception of the form. The cost and requirements for late registration of death is subject to administrative regulation.

5.14 Re-registration of deaths

Re-registration of death is allowed for correction of death records because of subsequently occurring events (modified physician's report or modified coroner's report).

5.15 Details shown on death certificate

Details to be shown on birth certificate shall be determined by administrative regulations.

5.16 System checks

The Principal Registrar for Vital Statistics shall counter check the operations and systems put in place for the various registrars and take further corrective actions to correct flaws/loopholes. The Assistant Minister for Vital statistics will have oversight over the Principal Registrar; continuously review, and update policies and systems put in place.

Chapter Six: Implementation Arrangements

This policy shall be implemented by the Ministry of Health through the Department of Planning; headed by the Deputy Minister through the Principal Registrar, as provided under Section 51 of the Public Health Law of Liberia (Title 33). It shall be implemented at all levels in partnership and collaboration with multiple stakeholders including development partners and civil society organizations.

6.1 National Level

The Ministry of Health shall serve as the lead institution for the implementation of this document. The Assistant Minister for Vital Statistics shall supervise the Principal Registrar who shall administer the day-to-day affairs of the system. Deputy directors, coordinators, county and district health registrars shall assist the principal registrar across Liberia.

The realization of the policy vision, goal and objectives shall be accomplished through partnership and collaboration with other line ministries, agencies and development partners.

6.2 County, District and Community Levels

The full decentralization of birth and death registration services shall be fulfilled by the creation of county, district and community levels structures to effectively manage the system.

There shall be county and district registrars that will be assisted by data officers at the county and district levels to register and certificate births and deaths. At the health facility level, vaccinators, certified midwives and health facilities registrars shall support the registration of children especially infants and newborn.

Community health workers shall promote the uptake of birth registration, track and notify community-based events that includes deaths and births.

6.3 Partnership and Coordination

Partnership and strong collaboration with development partners and stakeholders at all levels shall be built to improve birth and death registration services. The MOH shall

foster collaboration with other line ministries and agencies for better coordination and improvement of services.

6.4 Financing Birth and Death Registration

The financing of birth and death registration services are critical for effective delivery and management of the system. The MOH shall mobilize financial resources from the national Government and partners to increase access and utilization of birth and death registration and certification services.

6.5 Monitoring and Evaluation

Monitoring and evaluation will happen throughout the year and culminate in the annual review of common work plan. MOH shall assign a M&E officer to monitor the implementation of the various outputs of activities by each partner according to the agreed work plan and coordination arrangements.

Monitoring of the policy shall take place through the following mechanisms:

- Monitoring will be conducted through the overall management of the implementation process in order to ensure that all aspects of the policy are efficiently and effectively implemented and in a well-coordinated manner. This will also allow for early detection of any problems and for the necessary corrective measures to be taken on a timely basis. Every effort will be made to ensure that there is a mechanism to get feedback directly from beneficiaries and service providers in the monitoring phase.
- There shall be joint quarterly monitoring during the early stages of implementation to ensure rapid start up and address any hitches that may arise. This could be followed with annual monitoring when the policy is well disseminated.
- Regular monitoring of specific indicators will be done through annual statistical reports generated from the BR and DR databases. These databases shall be the key tools for daily, monthly and quarterly monitoring of county, districts and national assessment of birth and death registration services.

- The Ministry shall ensure the participation of key partners and stakeholders including civil societies to conduct joint monitoring visits of birth registration services nationwide.
- Regular supportive supervision shall be conducted at all levels to ensure quality of services and increase in the numbers of registration and reporting.

The MOH has a monitoring framework (available in the CRVS and BR Improvement Plans) with selected indicators that reflect the Policy goal and objectives. These indicators cover a variety of aspects, including registration status, outputs and coverage. Other reflect the wider BR goal of access, and gender sensitivity. The remaining indicators, most of which can be calculated at county level, reflect the system's performance and functionality.

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