Agenda item 5: Vital statistics production, dissemination and usage: harnessing civil registration data for decision-making

Thank you Chair,

Maldives appreciates the work of Secretariat on the comprehensive report on the current status for this agenda item.

Birth and death registration in the Maldives started early 1960s and have evolved over the years. Further, the pivotal role for production and usage of vital statistics was strengthened with the enactment of Civil Registration law in 1992 which mandated that all births and deaths of Maldivians needs to be reported and registered. Under this act Ministry of Health was also mandated to record births and deaths including vital statistics and death coding.

As standardization of birth and death records had been a priority for Maldives, we ensured that the birth and death forms used across the country are aligned to relevant international standards, reflecting this in digital systems for vital statistics that had been rolled out as well. The current decentralized, online system continues to assist in streamlining the production of vital statistics for effective decision making. Such data is used to monitor national, international indicators including the global goals- SDGs and wider dissemination to national and international partners and stakeholder agencies.

Maldives is committed to routinely produce and disseminate vital statistics to the public. This is reflected in the series of Maldives Health Statistics and Maldives Health Profile which is an annual publication by the ministry. Apart from this, the recent years had observed a shift in the utilization of vital statistics by other stakeholders such as researchers, academia and donor agencies in producing academic publications. This had both enabled a platform for Maldives to showcase their vital statistics in the global academic arena and gave exposure to Maldives to share knowledge and experience with other countries.

Although Maldives have made progress in the production and dissemination of vital statistics, there are still gaps that we need to address in developing a comprehensive and integrated CRVS system such as incorporating marriage and divorce components in to the existing system. Apart from this, technical capacity to analyze vital statistics, responding to system changes such as transitioning from ICD-10 to ICD-11 and annual monitoring of completeness of birth and death registration are areas that we still need support.
Maldives appreciate UNESCAP and other donor agencies support in building capacity in this field and we do hope that we will continue to receive the support and work towards achieving our shared vision.

Thank you, Chair