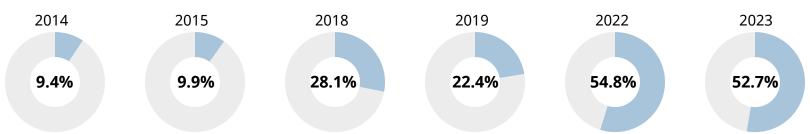
BANGLADESH

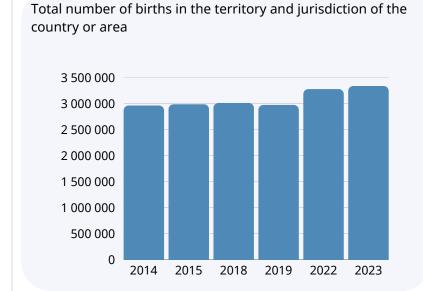
2025 Review of progress in implementing the Regional Action Framework (RAF) on civil registration and vital statistics (CRVS)

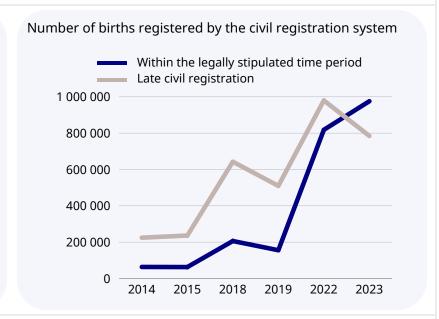
BIRTH REGISTRATION

1A. Percentage of births in the territory and jurisdiction that are registered within one year of occurrence **(Target 2024: 100%)**

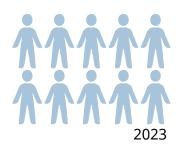


According to the Birth and Death Registration Act, 2004, births and deaths should be registered within 45 days of the event.





2A. Percentage of births registered accompanied with the issuance of an official birth certificate with minimum information* within one year of occurrence (**Target 2024: 100%**)

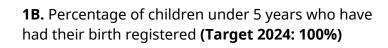


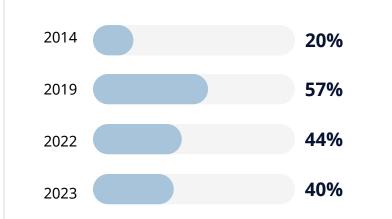
100%

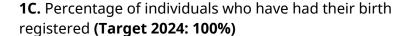
Whenever a birth is registered, the certificate is issued by default.

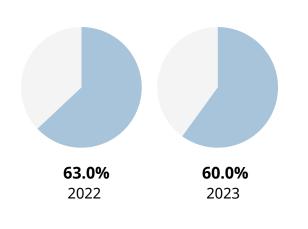
There is no separate procedure to get a birth certificate for registered birth.

*Minimum information includes the individual's name, sex, date, place of birth and name of parent(s) where known.



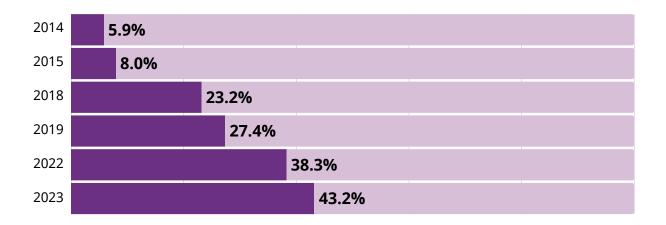


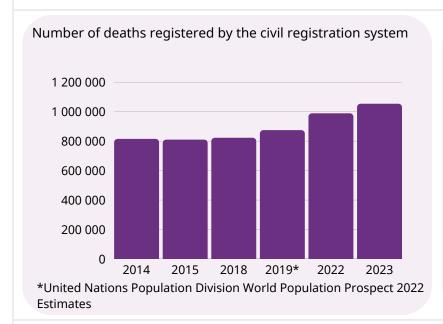


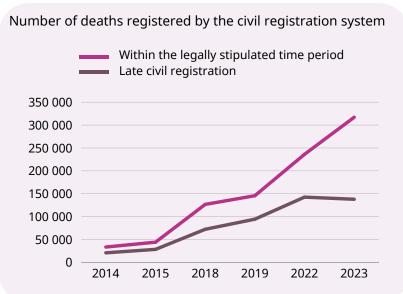


DEATH REGISTRATION

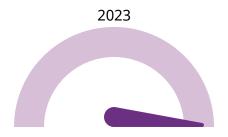
1D. Percentage of all deaths that are registered within one year of occurrence (Target 2024: 50%)







2B. Percentage of deaths registered accompanied with the issuance of an official death certificate with minimum information* within one year of occurrence (**Target 2024: 100%**)

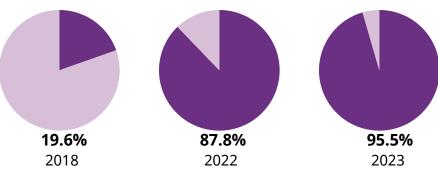


100%

The government has changed the target from 80% to 100%, as the issuance of death certificate is considered an integral part of the registration process.

When a registration happens the certificates are issued on the spot.

1E (adjusted). Percentage of all deaths occurring in health facilities or with the attention of a medical practitioner that have a medically certified cause of death recorded using the international form of the death certificate **(Target 2024: 80%)**



About 80–85% of total deaths take place at home and in the community. In Bangladesh, neither death registration nor a medical death certificate is required for burial. Introducing medical certification of death nationwide is currently not feasible due to severe shortage of medical doctors, particularly in the rural communities.

^{*}Minimum information includes the deceased's name, date of death, sex and age.

YES NO NOT REPORTED

Variable	Baseline (2015)	Mid-term	2025 review
Variable Target 3A. Production of birth statistics	(2015)	(2019)	(2024)
Nationally representative statistics on births are produced from			
registration records or other valid administrative data sources			
(Target year: 2021)			
Age of mother			
Sex of child			
Geographic area/administrative subdivision for place of birth (occurrence)	•		•
Geographic area/administrative subdivision for place of usual residence of the mother	•		•
Target 3B. Production of death statistics			
Nationally representative statistics on deaths are produced from			
registration records or other valid administrative data sources			
(Target year: 2021)			
Age			
Sex			
Geographic area/administrative subdivision for place of death (occurrence)		•	
Geographic area/administrative subdivision for place of usual residence of the deceased		•	•
Cause of death as defined by ICD			
Target 3F. Dissemination of birth and death statistics			
Key summary tabulations of vital statistics on births and deaths using			
registration or other administrative records as the primary source, are			
made available in the public domain in electronic format annually, and			
within one calendar year (Target year: 2021)			
Registration records are used as the primary source			
Tabulations are produced annually			
Tabulations are disseminated electronically			
Tabulations are available within one calendar year			
Target 3G. Dissemination of statistics on causes of death *			
Key summary tabulations of vital statistics on causes of death using			
registration or other administrative records as the primary source, are			
made available in the public domain in electronic format annually, and			
within two calendar years (Target year: 2021)			
Registration records are used as the primary source			
Tabulations are produced annually			
Tabulations are disseminated electronically			
Tabulations are available within two calendar year			
Target 3H. Reporting of birth and death statistics		1	
An accurate, complete and timely vital statistics report for the previous			
two years, using registration records or other routine administrative			
sources as the primary source, is made available in the public domain (Target year: 2021)			
Registration records are used as the primary source			
Information is available for the previous two years			
· · · · · · · · · · · · · · · · · · ·			
Tabulations are available in the public domain			

There are more than 7000 health care facilities in Bangladesh, of which over 5000 are in the private sector. This poses challenges in determine causes of desth (COD) from these facilities. In addition, there are more than 93000 registered physicians in the country. Face-to-face training on COD remains a key limitation. There is also a lack of reliable data on the number of deaths occurring in health facilities versus

POLITICAL COMMITMENT

CRVS is not explicitly mentioned in Bangladesh's National Development Strategy; however, it is implicitly supported through the Strategy's emphasis on achieving the Sustainable Development Goals (SDGs) within a defined timeframe. In terms of financing, various ministries and directorates have allocated their own budgets to implement the national CRVS strategy, reflecting a decentralized yet sectorally supported approach. Civil registration is also recognized as an essential service, including during times of crisis.

PUBLIC ENGAGEMENT, PARTICIPATION AND GENERATING DEMAND

In Bangladesh, gender-inclusive CRVS is mandated under the Birth and Death Registration Act, 2004, ensuring registration of all births and deaths regardless of gender. Public engagement and demand generation are promoted through national and local awareness campaigns, including the annual National Birth and Death Registration Observation Day. Non-financial incentives, such as public recognition of top performers, encourage community participation. Since 2014, community health workers and family planning staff are required to report vital events, supported by NGOs targeting vulnerable and hard-to reach populations. Revised fee structures under the 2018 Rules incentivize timely registration, with free registration within 45 days and modest fees thereafter. These measures continue even during crises, reinforcing consistent public participation.

COORDINATION

While CRVS is not yet reflected in Bangladesh's Voluntary National Review (VNR), efforts are under way to strengthen coordination and data integration. Although civil registration data-sharing with the National Statistics Office (NSO) is still under development, interoperability with several government entities has been established through application programming interface (APIs). The civil registration database is linked with key administrative systems, including those of the health ministry, national ID authority, passport office and NSO. Procedures for interagency data-sharing are in place; however, the national CRVS coordination mechanism currently lacks representation from civil society organizations and local communities, indicating the need for more inclusive stakeholder engagement moving forward.

POLICIES, LEGISLATION AND IMPLEMENTATION OF REGULATIONS

Bangladesh has implemented key legal and administrative reforms to strengthen its CRVS system. The framework, guided by the Birth and Death Registration Act, 2004 (amended 2013) and the 2018 Rules, has been reviewed and updated. The Bangladesh Birth and Death Registration Information System (BDRIS) enables digital record-keeping and identity management. Unique ID numbers are issued at birth and converted to national IDs at the age of 18 years. Timely registration and certification of births and deaths is free of charge. Penalties apply for late registration. Registration of vital events for non-citizens is not permitted.

INFRASTRUCTURE AND RESOURCES

Bangladesh has made notable strides in strengthening the infrastructure and resources that support its CRVS system. Most registration centres in the country are accessible to persons with disabilities, with ramps or flat surfaces facilitating entry. The government conducted a comprehensive review of CRVS business processes in 2023. The outcomes of this review have informed improvements in the system, including the establishment of birth and death notification mechanisms from health facilities and support from village police, family planning workers and health assistants in notifying events and assisting with application forms.

OPERATIONAL PROCEDURES, PRACTICES AND INNOVATIONS

Bangladesh has established strong operational procedures to enhance its CRVS system. Standard operating procedures are in place, registration forms have been updated since 2015, and the BDRIS online platform supports vital event registration. The country has implemented data protection, cybersecurity and business continuity plans, with data stored across multiple sites. To improve inclusivity, field-level campaigns supported by task forces – including journalists, NGOs and social workers – target unregistered and vulnerable populations. A national inequality assessment on birth registration has been drafted and is under review.

PRODUCTION, DISSEMINATION AND USE OF VITAL STATISTICS

Government officials, particularly from the Bangladesh Bureau of Statistics (BBS), have participated in both online and in-person training on the UN business process model for generating vital statistics from civil registration data. While foundational training has been completed, there is a recognized need for advanced training in data analysis and dissemination. Additionally, BBS is actively working to produce and utilize vital statistics to inform policy development and improve national programmes.