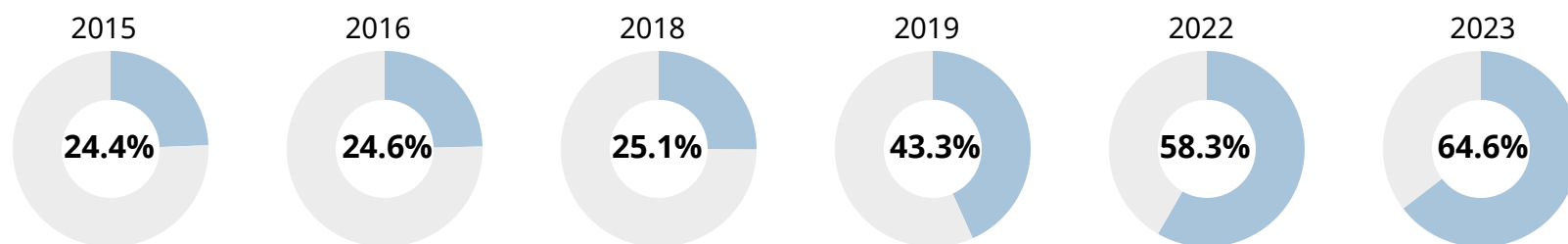
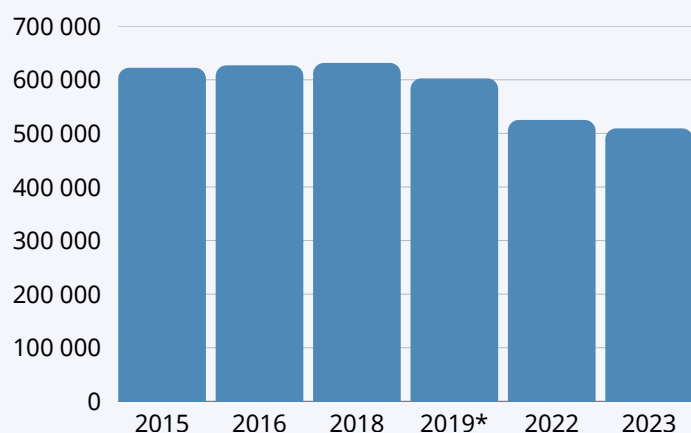


BIRTH REGISTRATION

1A. Percentage of births in the territory and jurisdiction that are registered within one year of occurrence (Target 2024: 99.0%)

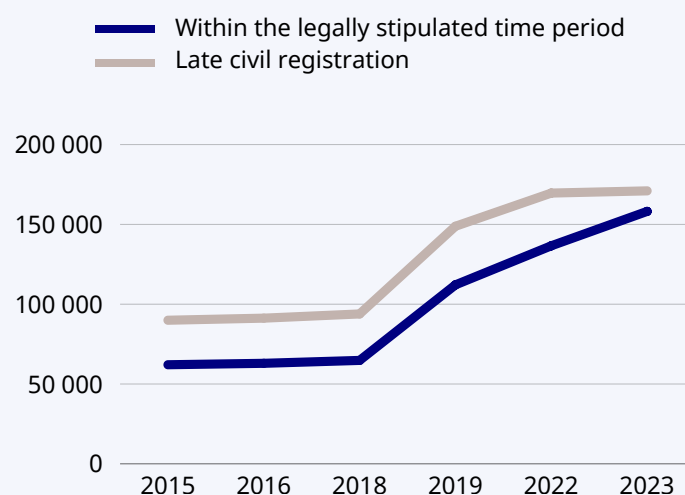


Total number of births in the territory and jurisdiction of the country or area

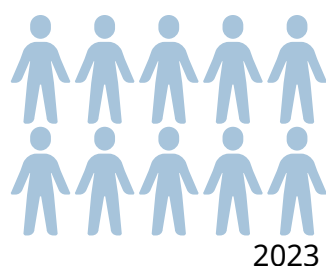


*United Nations Population Division World Population Prospect 2022 Estimates

Number of births registered by the civil registration system



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

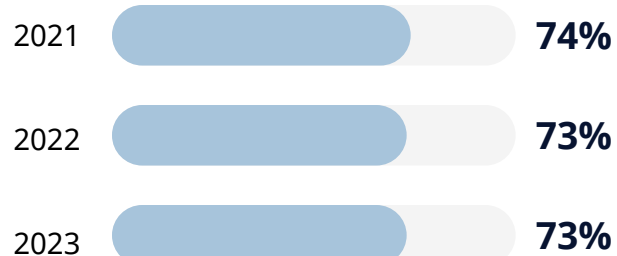


100%

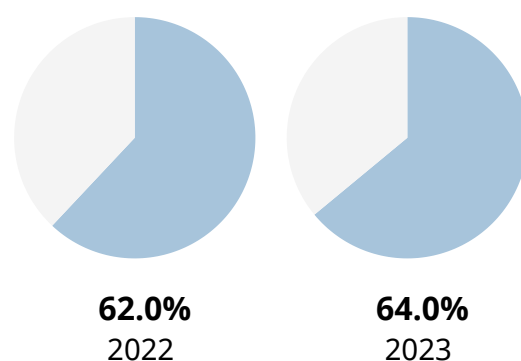
The certificate is issued at the time of registration.

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

1B. Percentage of children under 5 years who have had their birth registered (Target 2024: 90.0%)

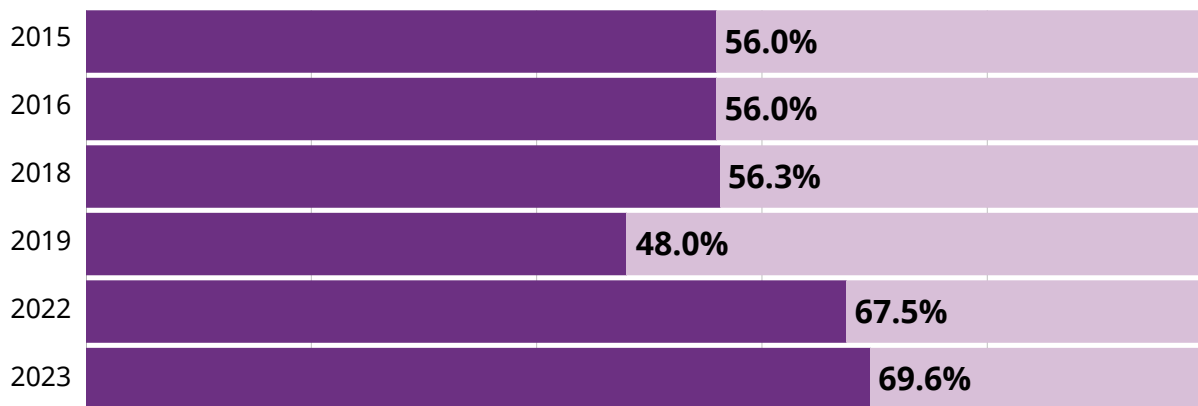


1C. Percentage of individuals who have had their birth registered (Target 2024: 80.0%)

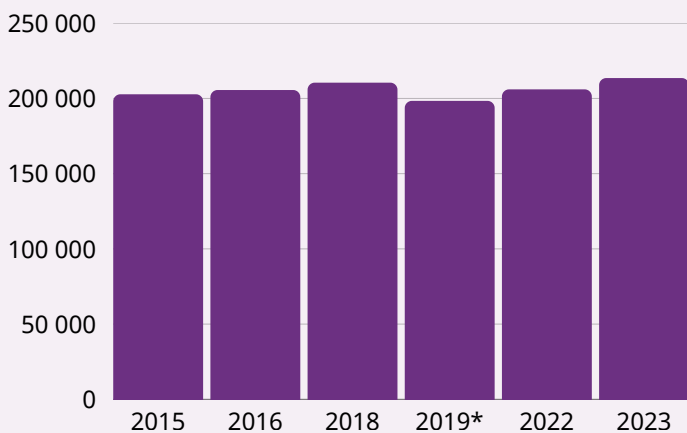


DEATH REGISTRATION

1D. Percentage of all deaths that are registered within one year of occurrence (**Target 2024: 80.0%**)



Number of deaths registered by the civil registration system

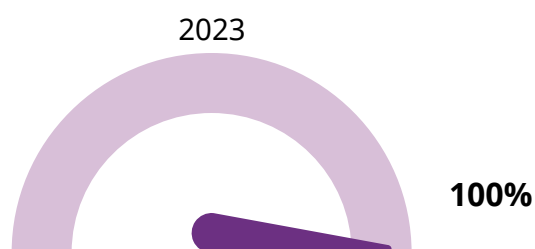


*United Nations Population Division World Population Prospect 2022 Estimates

Number of deaths registered by the civil registration system

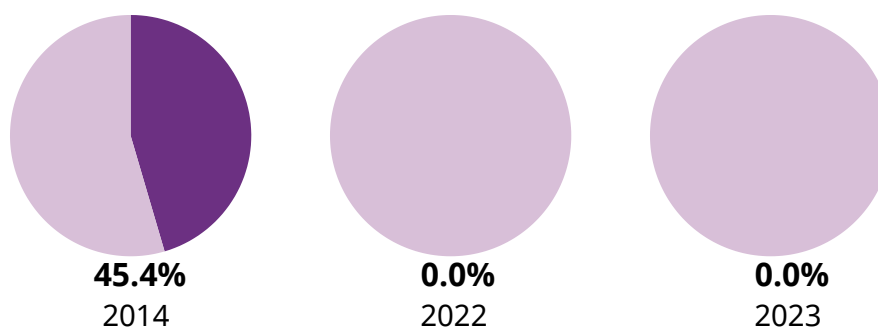


2B. Percentage of deaths registered accompanied with the issuance of an official death certificate with minimum information* within one year of occurrence (**Target 2024: 100%**)



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

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: --**)



Medical certification of cause of death (MCCD) is not yet established in hospitals. Deaths in the hospitals are recorded using discharge report and reported in HMIS using ICD-11. However, the standard form for medical certificate of cause of death is not used. Deaths are under-reported in HMIS and cannot be used for reporting purpose. The SOP for MCCD is drafted by MoHP and is planned to implement for phased implementation. Capacity building of medical coders and doctors remain a major challenge.

VITAL STATISTICS

● YES ● NO ● NOT REPORTED

Variable	Baseline (2015)	Mid-term (2019)	2025 review (2024)
Target 3A. Production of birth statistics			
Nationally representative statistics on births are produced from registration records or other valid administrative data sources (Target year: 2024 Target achieved in 2023)	●	●	●
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: 2024 Target achieved in 2023)	●	●	●
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: 2024)	●	●	●
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: 2024)	●	●	●
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			
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: 2024)	●	●	●
Registration records are used as the primary source	●	●	●
Information is available for the previous two years	●	●	●
Tabulations are available in the public domain	●	●	●

ACTION AREAS (REGIONAL ACTION FRAMEWORK)

POLITICAL COMMITMENT

The 16th Periodic Plan (2024/2025–2028/2029) includes a national target of achieving 100% civil registration coverage for children under five years of age by the end of the Plan period, underscoring the government's prioritization of CRVS within its broader development strategy. Furthermore, a dedicated budget has been allocated through the annual fiscal framework to support implementation of the national CRVS strategy. This includes a wide range of activities such as operationalizing online civil registration, enhancing institutional capacity, conducting training and capacity development initiatives, and strengthening communication and outreach efforts.

PUBLIC ENGAGEMENT, PARTICIPATION AND GENERATING DEMAND

Gender inclusivity is explicitly addressed in the national CRVS strategy, ensuring that the system is responsive to the needs of all individuals, including women and marginalized groups. To improve registration rates, financial and non-financial incentives have been introduced, along with stricter penalties for late registration, especially targeting hard-to-reach and vulnerable populations, even during crises. Community health workers and other health staff actively support registration, while nongovernmental groups representing women, persons with disabilities and indigenous communities help raise awareness and assist with the process. National and subnational campaigns have also been conducted to promote timely and accurate registration across diverse groups.

COORDINATION

CRVS is included in Nepal's Voluntary National Review (VNR), underscoring its significance in national development and SDG monitoring. Civil registration data are regularly shared with the NSO and other relevant government entities through formal procedures and protocols, supporting integrated and evidence-based policymaking. The civil registration database is also linked with several key administrative systems, including the Department of Consular Services, Immigration Office, Social Security, National Identity Management System, Citizenship Information Management System, NSO, birthing centres, health facilities, and the Personnel Information System (PIS), thereby facilitating cross-sectoral data use and improved service delivery.

POLICIES, LEGISLATION AND IMPLEMENTATION OF REGULATIONS

A comprehensive review of the legal framework has been conducted, resulting in several amendments since 2015 to enhance inclusivity and efficiency. These include provisions for registering vital events at the local registrar's office based on place of birth, the introduction of adoption, stillbirth and neonatal death registration, as well as enabling electronic registration and registration through diplomatic missions. Nepal has also developed a population register and identity management system where birth and death records play a critical role in establishing and retiring individual identities. A unique identification number is issued during birth registration, which is also used as the national identification number. Nepal ensures that timely registration of births and deaths, along with the issuance of corresponding certificates, is free of charge. Penalty is incurred for late or delayed registrations.

INFRASTRUCTURE AND RESOURCES

Information on the registration process is available in English to support broader accessibility beyond official national languages. Registration centres have been adapted to provide disability-friendly services, ensuring that persons with disabilities can access civil registration without barriers. Nepal has also conducted a thorough review of its CRVS business processes, employing a structured methodology that maps and visualizes both the existing ("as-is") and desired ("as-desired") workflows. This analysis has informed the development of a comprehensive business improvement plan, with findings actively used to enhance system performance, streamline operations, and guide future investments in CRVS infrastructure.

OPERATIONAL PROCEDURES, PRACTICES AND INNOVATIONS

Nepal has established and disseminated SOPs for birth and death registration, ensuring consistency across civil registration offices. Since 2015, registration forms have been reviewed and updated to improve data quality and usability. To enhance access, especially for hard-to-reach and vulnerable populations, mobile registration services have been deployed, alongside the development of an online platform and mobile application for vital event registration. Additionally, Nepal has conducted studies to identify gender gaps in CRVS and implemented targeted measures to address these disparities, further reinforcing its commitment to inclusive and innovative CRVS practices.

PRODUCTION, DISSEMINATION AND USE OF VITAL STATISTICS

Nepal has taken important steps to strengthen the production, dissemination and use of vital statistics. Government staff have received training in the production, analysis and dissemination of vital statistics, enhancing national capacity to generate reliable and timely data. Nepal promotes the use of vital statistics to inform and improve policies and programmes, reinforcing the role of CRVS data in evidence-based decision-making and national development planning.