The Republic of the Marshall Islands (RMI) comprises 29 coral atolls and is situated slightly west of the International Date Line. It lies east of the Federated States of Micronesia, northeast of Kiribati, north of Nauru and south of Wake Island.

Land area (km²) 181

2020 mid-year population estimate 54,600

Population growth rate (%) -0.1
OVERVIEW

This civil registration and vital statistics (CRVS) country profile for the Republic of the Marshall islands is part of a series of country profiles for the Pacific Island region. The CRVS profiles consolidate knowledge shared by countries on the status of their CRVS systems in the recent past, including through government websites, published reports, media releases and presentations, and direct engagement between the authors of these profiles and in-country civil registration offices and health information offices. The objective of these CRVS country profiles is to provide a living resource (updated every 2-3 years) and quick reference point on the status and developments in CRVS systems in the Pacific Island region. The profiles provide an overview of the legislative, organisational and management frameworks of CRVS systems, registration processes, levels of completeness of birth and death registration, and the most recent developments towards improving CRVS systems. Whilst civil registration covers many vital events, these profiles focus on the registration of births and deaths, and collation of cause of death information. It is envisaged that these country profiles will serve as a fundamental tool in advocating for further investment in strengthening the coverage and completeness of CRVS systems across the Pacific Island region.

SOURCE OF BIRTH AND DEATH DATA

The source of figures in Table 1 (births) and Table 2 (deaths) is outlined below each table, with the full citation given in the Reference section at the end of the document. All figures were obtained from published sources or through direct contact with in-country civil registration offices and health information offices. The date figures were obtained through direct in-country contact is stated below the tables, and indicates when those figures were extracted from in-country databases.

SUGGESTED CITATION


FURTHER INFORMATION

For further information please contact the Statistics for Development Division (SDD) – Pacific Community at: contact-sdd@spc.int; https://sdd.spc.int/

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CRVS LEGISLATION, ORGANIZATION AND MANAGEMENT

Current legal framework governing birth and death registration
The recording and registration of births and deaths in the Republic of the Marshall islands (RMI) is governed by the Births, Deaths and Marriages Registration Act of 1988; the Births, Deaths and Marriages (and missing persons amendment) Act of 2007; the Births, Deaths and Marriages Registration Act of 2012; and the Births, Deaths and Marriages Registration (amendment) Act of 2016.

Agencies responsible for birth and death recording and registration
The recording of births and deaths in health facilities and the community is the responsibility of the Ministry of Health and Human Services, with collation of these records at the national level undertaken by the Vital Statistics Office. Registration of births and deaths is undertaken by the national Civil Registry Office, which sits under the Ministry of Culture and Internal Affairs. The system requires families to come to the office, either in Majuro or on Ebeye, to complete the registration process.

National CRVS committee and CRVS action plan
In 2011, a CRVS Committee was formed, comprised of the Ministry of Health and Human Services, the Ministry of Cultural and Internal Affairs, the Economic Policy Planning and Statistics Office, the Public-School Systems and the Social Security Administration. The committee has not met recently, but there are plans to restore a regular meeting schedule. In 2011 a rapid assessment of the CRVS system was undertaken with assistance from SPC and the Brisbane Accord Group (BAG) partners. A National CRVS Improvement Plan 2016–2020 was drafted, but it did not progress to national endorsement and publication.

National ID systems
The Republic of the Marshall Islands has no current plans to implement a national ID system.

REPORTING AND REGISTRATION OF BIRTHS

Recording births at health facilities and registering births at the civil registry
The law places the primary responsibility for reporting births on the parents of the child and persons present during the birth, including the medical practitioner who oversees the delivery. To register a birth, the family must present to a registration office in Majuro or Ebeye. For families living in the outer islands the geographical and financial constraints are a barrier to completing the registration process.

Timeframes and costs
Registration of births should be conducted within three months of the birth. The law provides for late registration of births, i.e. registration within three months and 12 months of the birth, after which the informant is required to acquire a court affidavit to facilitate the registration.

Standard, on-time birth registration no charge
Late registration (> 3 months) 5.00 (USD)*
Birth certificate printed 1.00 (USD)
Change of name 5.00 (USD)*

*The cost for the court order

Tasks that require a birth certificate and incentives (financial or other) for completing the birth registration process
A birth certificate is required to access childhood immunisations, for school enrolment, and to obtain a passport, voter’s ID, driver’s license, and social security user application.

Registration process for births occurring overseas
Both the Ministry of Health and Human Services and the Ministry of Culture and Internal Affairs will accept and
manually file a paper copy of an overseas birth certificate, but these overseas births are not added to electronic birth databases or certified locally.

REPORTING AND REGISTRATION OF DEATHS

Recording deaths at health facilities and registering deaths at the civil registry
The law places the primary responsibility of reporting the occurrence of a death on the family of the deceased, or persons taking charge of the disposal of the body of the deceased. To register a death, the family must present to a registration office in Majuro or Ebeye. For families living in the outer islands the geographical and financial constraints are a barrier to completing the registration process.

Timeframes and costs
Registration of deaths should be conducted within twelve months of the death.

<table>
<thead>
<tr>
<th>Description</th>
<th>Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Standard, on-time death registration</td>
<td>no charge</td>
</tr>
<tr>
<td>Late registration (&gt; 12 months)</td>
<td>5.00 (USD)*</td>
</tr>
<tr>
<td>Death certificate printed</td>
<td>1.00 (USD)</td>
</tr>
</tbody>
</table>

*The cost for the court order

Tasks that require a death certificate and incentives (financial or other) for completing the death registration process
A death certificate is required for inheritance of land, property and estates of deceased persons. It is also a requirement to process Marshall Islands Social Security Administration (MISSA) benefits for family members.

Registration process for deaths occurring overseas
Both the Ministry of Health and Human Services and the Ministry of Culture and Internal Affairs will accept and manually file a paper copy of an overseas death certificate, but these overseas deaths are not added to electronic death databases or certified locally.

COLLATION AND CLASSIFICATION OF CAUSE OF DEATH

Process for coding death certificates
RMI uses the standard WHO International Form of Medical Certificate of Cause of Death for recording causes of death. Allocation of mortality codes to death certificates is done manually at the national level by trained coders using ICD-10.

Training and resources for cause of death certification and coding
Previous assessments of the CRVS system in RMI have identified that ICD coding requires strengthening, despite extensive training conducted in this area. Problems are noted in relation to certification quality, medical terminology requirements, and the relatively low volume of deaths per year that make retaining a robust coding process difficult. Options such as regional support and automated coding systems have been proposed as an alternative to establishing a system locally. Through WHO funding, ICD-10 training was conducted on 14–25 October 2019 for medical physicians, nurse practitioners and/or health information staff in Majuro. The WHO Collaborating Centre, Ministry of Health, Sri Lanka was contracted to conduct the training.

COMPLETENESS OF CIVIL REGISTRATION DATA

The completeness of birth and death registration can be estimated by comparing the number of births and deaths in the civil registry with the number of births and deaths recorded by the health system, enumerated during national censuses, and estimated by international agencies. For RMI, an assessment of completeness cannot be done by this method at the present time because we are unable to confirm if annual births and deaths in the civil registry are tabulated by year of registration, or year of occurrence (e.g. date of birth, date of
death). To be able to estimate completeness, the figures for births and deaths need to be available by year of occurrence in order to be comparable to health, census and SPC projections. Therefore, Tables 1 and 2 below do not contain figures for births or deaths from the civil registry. It has, however, been noted that duplicate records are an issue in the civil registry, as searching for previously issued certificates is difficult and it is not uncommon for people to simply ask for a new registration when a formal certificate is needed (UNESCAP 2019).

The completeness of birth registration in RMI has been estimated by periodic population sample surveys, including an Integrated child health and nutrition survey (ICHNS) in 2017 and a demographic and health survey (DHS) in 2007. These surveys ask the mother or caregiver of children aged under five years whether their child’s birth has been registered with a civil authority, and the DHS also asks if their child possesses a birth certificate. The 2017 ICHNS undertaken by UNICEF found that, of the 698 children aged under five years included in the survey, 83.8% were reported to have had their births registered (MoHHS, PPSO and UNICEF 2017). Whilst the most recent DHS undertaken in RMI was over a decade ago in 2007, it provides some context to the history of birth registration completeness. Based on the 1,277 children aged under five years included in that survey, 95.9% were reported to have had their births registered, and 93.8% were reported to possess a birth certificate (EPPSO, SPC and Macro International 2008).

### Table 1. Completeness of birth registration data

<table>
<thead>
<tr>
<th>Year</th>
<th>Civil Registry</th>
<th>Source of births</th>
<th>Completeness of birth registration</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Health</td>
<td>SPC projection</td>
</tr>
<tr>
<td>2018</td>
<td></td>
<td>1,040</td>
<td>1,372</td>
</tr>
<tr>
<td>2017</td>
<td></td>
<td>998</td>
<td>-</td>
</tr>
<tr>
<td>2016</td>
<td></td>
<td>1,121</td>
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<td>1,344</td>
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</tr>
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<td>2012</td>
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<td>1,307</td>
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</tr>
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<td></td>
<td>1,394</td>
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</tr>
<tr>
<td>2010</td>
<td></td>
<td>1,414</td>
<td>-</td>
</tr>
</tbody>
</table>

Sources: a Not available. b Obtained directly from the Ministry of Health and Human Services 08.04.2021. c Calculated from 2018 crude birth rate (Pacific Community 2018a) and 2018 population projection (Pacific Community 2018b). d The most recent census in 2011 asked women aged 15–49 years to report births in the 12 months prior to the census (EPPSO and SPC 2012). Completeness could not be calculated without figures from civil registry.

### Table 2. Completeness of death registration data

<table>
<thead>
<tr>
<th>Year</th>
<th>Civil Registry</th>
<th>Source of deaths</th>
<th>Completeness of death registration</th>
</tr>
</thead>
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<td></td>
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<td>SPC projection</td>
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<tr>
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<tr>
<td>2010</td>
<td></td>
<td>322</td>
<td>-</td>
</tr>
</tbody>
</table>

Sources: a Not available. b Obtained directly from the Ministry of Health and Human Services 08.04.2021. c Calculated from 2018 crude death rate (Pacific Community 2018a) and 2018 population projection (Pacific Community 2018b). d The most recent census in 2011 did not ask questions on all-age mortality, and therefore could not be used to estimate the completeness of death registration. Completeness could not be calculated without figures from civil registry.
RECENT INITIATIVES AND PLANS TO STRENGTHEN CRVS

1. A group chaired by Micronesian Legal Services Corporation (MLSC) on improving birth registration was established in 2019. Members are MOHandHS, MOCIA, MOJ-ID Department, Social Security, the Public School System and the Attorney General’s Office.

2. RMI is being supported by BAG to review the quality of medical certification and coding of causes of death for the period 2010–2020.

3. RMI is being supported by SPC to analyse mortality and cause of death records for the period 2010–2020.

REFERENCES


Pacific Community. 2018b. Population estimates and projections. Available at: https://sdd.spc.int/topic/population-estimates-and-projections

