



DATA BRIEF

Barriers to and Facilitators of Female Death Registration in Bangladesh

Key Recommendations

Near-term: Simplify procedures by removing fees and reducing prerequisite documents for the deceased.

Mid-term: Prioritize system integration by establishing formal reporting linkages between health/burial systems and the registry, while expanding the mandatory requirement of death certificates for additional services.

Long-term: Transform social norms by mobilizing religious and community leaders to frame female death registration as a vital civic duty and a recognition of legal identity.

Key Study Highlights

Key Barrier

The primary barrier to female death registration is a "perceived lack of benefit," as women often have less property or fewer financial accounts in their names.

Key Facilitator

The strongest facilitator is "instrumental need," where registration is required for a legal or financial process (e.g., settling a loan, claiming inheritance).

Proactive local officials (e.g., village police) and simplified procedures emerged as critical practical facilitators that help families successfully navigate institutional barriers.

Background

Despite a long-standing legal mandate for timely death registration in Bangladesh, significant disparities persist due to pervasive gaps in gender equity. This gap makes women and girls invisible in national data, which is critical for achieving Sustainable Development Goal (SDG) 3 (health), SDG 5 (gender equality), and SDG 16.9 (legal identity for all). Registration of female deaths is crucial for women's rights and accurate statistics since it allows decision-makers within each country to measure and improve health quality, identify causes of death and leverage funding and resources to improve health and well-being of all populations. Female death registration also has the ability to protect survivor rights.¹

A 2021 study found that only 17% of the 571 deaths in the sample were registered with the Civil Registration and Vital Statistics (CRVS) system of Bangladesh. When disaggregated by gender, 26% of 320 male deaths were registered compared to only 5% of 251 female deaths.²

When female mortality is underreported, it hinders the development of gender-sensitive health policies and leads to inadequate resource allocation. This problem is driven by a combination of low public awareness, complex administrative processes, and "social norms that devalue the legal identity of women". To close this gap, a comprehensive understanding of the specific, on-the-ground challenges and enablers is essential.

Why Female Death Registration Matters?

Making Women Visible: Underreporting renders women "invisible" in national data, obscuring critical mortality trends.

Smart Policy & Allocation: Accurate data is required to design gender-sensitive health policies and allocate resources effectively, which is essential for achieving SDG 3 (Health).

Legal Identity: Registration ensures every woman is counted and valued by the state, fulfilling the global commitment to legal identity for all under SDG 16.9.

¹ How death registration supports the rights of women and girls. (2019, January 29). IDRC - International Development Research Centre.

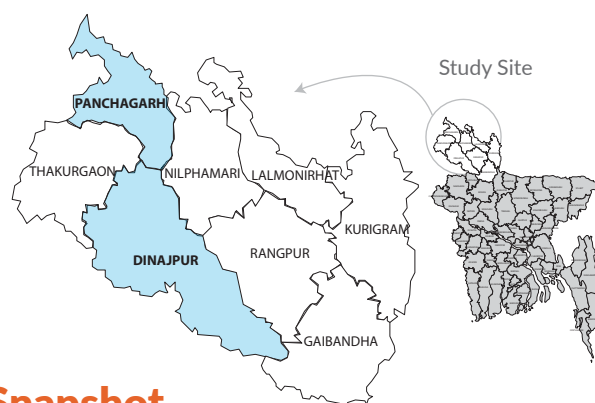
<https://idrc-crdi.ca/en/perspectives/how-death-registration-supports-rights-women-and-girls#:~:text=To%20save%20the%20lives%20of,of%20women%20and%20their%20children%20https://pmc.ncbi.nlm.nih.gov/articles/PMC12654884/>

² Haider MM, Alam N, Ibn Bashar M, HELLERINGER S. Adult death registration in Matlab, rural Bangladesh: completeness, correlates, and obstacles. *Genus*. 2021;77(1):13. doi: 10.1186/s41118-021-00125-7.

Objective

This study was guided by the following objectives:

1. To describe factors (barriers and facilitators) linked to female death registration in Bangladesh.
2. To explore potential mechanisms for improving female death registration.



Methodology Snapshot



WHAT (Approach)

- Cross-sectional Qualitative



WHERE (Site)

- Dinajpur & Panchagarh districts
- Reason: Compared high vs. low female death registration rates



HOW (Data Collection)

- Social Mapping
- 40 In-depth Interviews
- 35 Key Informant Interviews
- 12 Focus Group Discussions



WITH WHOM (Participants)

- Family members of deceased
- Community leaders
- Govt. registration officials
- Healthcare providers



ANALYSIS (Framework)

- Socioecological Model
- Thematic Analysis

Key Findings

Facilitators

Flexible Supporting Document

Loans and allowance requirements, Support from local officials

Property-lined cultural/religious norms, Proximity to Reg. office

Male support, Assistance from friends or local contacts

Prior Knowledge, Past experience, Legal awareness

Barriers

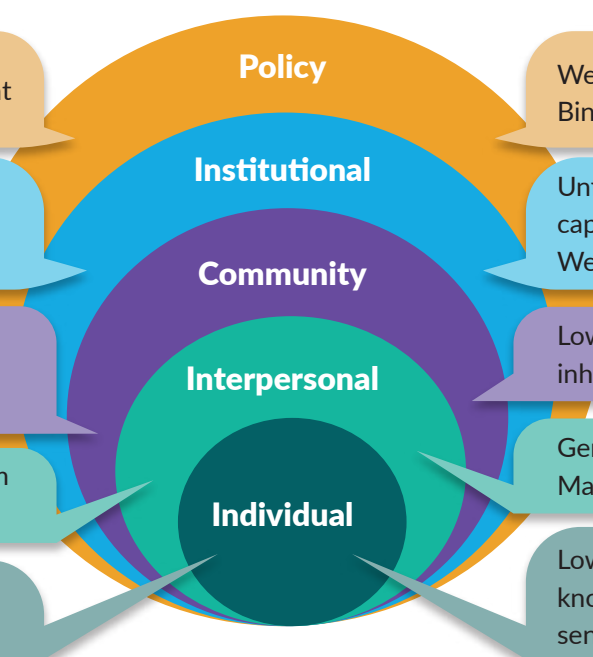
Weak Legal and Administrative Binding, 45-Day Deadline

Unfriendly service and low capacity, Document barriers
Weak health system linkages

Low social value, property and inheritance gaps

Gendered family roles, Male-driven decision making

Low awareness and knowledge, Poverty & cost sensitivity



Key Barriers

- **Perceived Lack of Benefit:** This is the primary driver of the gender gap. Families see registration as "reactive," and since women often own less property or have fewer bank accounts, there is "no immediate material benefit" to register their death. Families "cite seeing little value in documenting a woman's death" unless it's for a "legal or administrative process".

"For women, only those who have property involved go through the death registration process. Otherwise, there's no real purpose—one needs a woman's death certificate for anything." - National Stakeholder

- **Gendered Family Dynamics:** The responsibility to register a death "typically fell upon male family members". These male relatives might "deprioritize female deaths," while women in the household "seldom led the process" due to limited agency, further delaying or preventing registration.

"After going there (Registration Office) three times, they said they were busy...At that point, I stopped going because I was annoyed. I'm alone at home, and the men are always out, so it's not always possible to leave the cows and goats unattended." - Female Family Member

- **Socio-Cultural Norms:** Traditional perspectives "undervalued the importance of registering women's deaths". Community practices for women's mourning and burial "tended to be less public and formal," which "reduced external reminders to register deaths officially".

"Because of all the bureaucratic difficulties, people often don't want to do it. They feel: if it's not absolutely necessary, why go through the hassle?" - National Stakeholder

- **Institutional & Financial Hurdles:** The process itself is a barrier. Families face "complicated procedures," "chronic understaffing" in local offices, and the "Birth Certificate Prerequisite" (requiring a birth certificate for a deceased woman who never had one). Furthermore, low awareness of the 45-day free window and hidden costs (travel, bribes) discourage participation.

Key Facilitators

- **Legal & Financial Requirements:** The strongest motivators were "instrumental." Registration was completed when it was a "prerequisite" for a legal or financial process, such as "settling loans, closing bank accounts, claiming social protection allowances, or processing inheritance".
- **Prior Knowledge and Experience:** "Families with previous experience navigating registration... were better able to complete the process". This "prior exposure increased confidence and practical know-how".
- **Proactive Local Officials:** Where registration was successful, it was often due to proactive local staff. This includes "village police going door to door" and "Union Parishad secretaries... actively engaging" the community.
- **Interpersonal & Social Support:** Family and social networks played a key role. Facilitators included encouragement from male heads of household who "recognize the legal necessity" and "support from... community or local leaders" who helped families navigate the process.

Reasons for Registration and Non-Registration of Death

✓ Registered		⊗ Un-Registered	
Navigating Loans, Savings, and Credit Schemes	11*	Lack of Perceived Need	9*
Social Protection Allowances	5*	Limited Awareness or Understanding	5
Facilitating property transfer and Inheritance	3*	Administrative, Logistical and Accessibility Constraints	4*
Personal / Procedural Motivations	3	Emotional Distress and Grieving Process	2
		Alternative Documentation Considered Sufficient	1

*Mentioned by multiple participants

Implications of the Data

The study findings highlight several key areas for consideration

- **Value and Demand:** The data strongly links non-registration to a "perceived lack of benefit." Conversely, the primary driver for registration is "instrumental need" (e.g., loans, inheritance). This implies that demand for female death registration is not automatic and is tied almost exclusively to external legal or financial requirements.
- **Process and Access:** The findings identify significant procedural barriers, including complex documentation requirements (like the birth certificate prerequisite for the deceased), low awareness of the 45-day fee waiver, and chronic understaffing in local offices. This suggests that the complexity of the system itself is a key barrier to access.
- **Social and Cultural Norms:** The data points to deep-rooted social norms that devalue a

woman's legal identity, which are reinforced by awareness campaigns that focus almost entirely on birth registration. This suggests that technical solutions alone may be insufficient without addressing underlying social and gendered perceptions.

- **System Integration:** The study indicates missed opportunities for capturing vital statistics, particularly when deaths occur in health facilities or are handled by community religious leaders. This implies that formalizing reporting links between the health system, burial system, and the civil registration system could be an effective area for exploration.

Acknowledgement

This brief is a collaborative effort between the Gender Equity Unit of Johns Hopkins Bloomberg School of Public Health, BRAC James P Grant School of Public Health, BRAC University, and Vital Strategies.

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