



How Infant Biometrics Can Protect Refugee Children from Identity and Health Gaps

Reflecting on this recent World Refugee Day, we are reminded of the millions of displaced children who remain invisible—not just to society, but to the systems meant to protect them. Among the most pressing challenges these children face is the lack of a verifiable identity. Without it, access to healthcare, education, family reunification, and protection from exploitation becomes uncertain. Infant biometrics offer a bold, evolving solution. But they must be applied with clarity, care, and context.

The "Why" of Infant Biometrics

Bhaskar Mishra, the global technical lead on Civil Registration, Vital Statistics (CRVS), Legal Identity, and Statelessness at UNICEF, brings deep technical and operational expertise to the challenges of identity inclusion. With a background spanning roles at national and global levels, he has contributed to some of the most ambitious identity efforts in the world.



Mishra's global experience, including Africa, South Asia, and Latin America, has given him a firsthand view of the systemic gaps that leave millions of children unregistered—and therefore unprotected.



"Why biometrics?" Mishra asks. "Because in much of Africa, South Asia, and Latin America, we're dealing with a significant burden of unregistered children."

In refugee contexts especially, birth registration often fails—not because of lack of intent, but because of displacement, conflict, or disconnected systems. Parents may be forced to flee before reaching civil registration offices or may give birth in host countries with no formal recognition mechanisms.

In these situations, infant biometrics offer a critical alternative—a way to anchor a child's identity from day one, even when conventional documents are out of reach.

When a Child Doesn't Exist on Paper

According to [a recent UNHCR report](#), at the end of 2024, an estimated 123.2 million people were forcibly displaced worldwide. While children make up only 29% of the global population, they represent 40% of all forcibly displaced people—a stark indicator of how conflict and crisis disproportionately affect the youngest and most vulnerable.

Many of these children are born during displacement, without any formal proof of identity. Lacking legal documentation, they risk exclusion from vital services like healthcare, education, and protection systems.

In refugee camps and along migration routes, infant biometric data can provide a crucial anchor of identity. This can ensure more accurate health tracking (such as vaccinations), help prevent trafficking, and enable family reunification across borders.

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A Unique Opportunity for Refugee Response

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Where It’s Happening: Real-World Lessons from Early Use

Early efforts to use biometrics in refugee settings reveal both their potential and the need for careful, rights-based implementation.

In 2023, [biometric registration became mandatory for refugees aged five and older](#) in Bangladesh’s Kutupalong and Nayapara camps, with non-participation risking loss of essential services. While intended to improve identity systems and aid delivery, the effort raised concerns about consent, fairness, and exclusion. Though not applied to infants, it highlights the need for biometric systems to prioritize protection over pressure.

A [biometric pilot at Kinango Sub-County Hospital](#) in Kenya is improving infant vaccination in rural areas facing challenges similar to refugee camps. Since 2022, over 2,000 newborns have been registered—often within hours of birth—using fingerprints and caregiver voiceprints. With consent, caregivers receive automated vaccine reminders, boosting follow-up and record accuracy. These cases signal the future of biometric healthcare, underscoring that context, consent, and coordination are just as vital as the technology.



Beyond the Tech—How To Make Infant Biometrics Work

The ability to capture fingerprints from young children—even from birth—is a major breakthrough. It opens new possibilities for early identity, especially in refugee settings where paper documentation often fails. But as Mishra cautions, “Technology is just one part of the story. The real questions are political and logistical—who owns the data, what happens next?”

Tech opens the door—but what matters is what comes after. Without clear pathways for how biometric data supports efforts like vaccination tracking, school enrollment, or national ID inclusion, its long-term value fades. “If you collect the infant biometric, what happens after year one?” Mishra asks.

That’s why early efforts must go beyond deploying devices. Infant biometrics need to be part of a connected system that links health care, civil registration, and identity management. Too often, these operate in silos—leaving gaps that vulnerable children fall through.

Governments should define how infant biometrics fit into broader identity and protection strategies. Humanitarian and health agencies must ensure tools are used ethically and inclusively. Donors and development partners must invest in the full ecosystem: privacy safeguards, data standards, workforce training, and long-term research on biometric reliability from birth through early childhood.

Act Now to Build Identity Systems That Include Everyone

Scaling infant biometrics from pilot to policy takes more than technology. It requires coordination, investment, and a long-term vision. The potential is real—but achieving it demands more than innovation. It requires shared commitment, strategic investment, and the political will to ask the hard questions.

“The time has come to take infant biometrics seriously,” Mishra says. “But only if we ask: what happens next?”

Integrated Biometrics is answering that question—helping ensure every child, regardless of their immigration status, has a path to legal identity. The need doesn’t end with World Refugee Day. To learn more or explore partnership opportunities, reach out today. ●