

**UNIVERSITY OF GHANA
COLLEGE OF HUMANITIES**

**SOCIO-CULTURAL PRACTICES AND INSTITUTIONAL FACTORS
ASSOCIATED WITH BIRTH REGISTRATION IN GHANA**

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**THIS THESIS IS SUBMITTED TO THE UNIVERSITY OF GHANA,
LEGON IN PARTIAL FULFILLMENT OF THE REQUIREMENT FOR
THE AWARD OF A DOCTOR OF PHILOSOPHY IN POPULATION
STUDIES DEGREE**

REGIONAL INSTITUTE FOR POPULATION STUDIES

OCTOBER, 2024

INTEGRI PROCEDAMUS

DECLARATION

I, SETH BOSOMPEM KISSI, hereby declare that, except for references to other people's work, which have been duly acknowledged, this is the result of my own research, and it has neither in part nor whole been presented for another degree.



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DEDICATION

I dedicate this thesis to my parents for their decision to educate me. This most important step they took on my behalf has brought me this far. I also dedicate this work to my wife, Mrs. Cynthia Kissi and my children.

Finally, I dedicate this thesis to God for giving me life and good health and seeing me through the entire doctorate programme. I am eternally grateful to God for how far he has brought me.



ACKNOWLEDGEMENTS

I would like to seize this opportunity to extend my heartfelt thanks and gratitude to, first and foremost, my three supervisors: Prof Stephen Owusu Kwankye, the lead supervisor, Dr Mumuni Abu, and Dr Fidelia Akpene Ama Dake, all from the Regional Institute for Population Studies. Their guidance and supervision helped me to produce this study.

I also owe a debt of gratitude to all who supported me in the data collection exercise, especially the interview team, which was under the supervision of Dr. Martin Wiredu Agyekum. The teams' knowledge and expertise in asking questions during the individual interviews and the focus group discussions elicited the needed responses from participants.

Lastly, I would like to thank officers from the Births and Deaths Registry and the community members in the three geographical zones in the country for their participation and honest responses to the interview questions.



ABSTRACT

Birth registration is a fundamental human right and legal recognition of a child, and it is the first point of contact between individuals and their states, where rights and privileges are bestowed on individuals. Despite the Government of Ghana's interest and non-governmental agencies' support in promoting birth registration, coverage is incomplete and not universal. Several studies have been conducted in sub-Saharan Africa (SSA) and Ghana to ascertain the causes of low birth registration. Studies in Ghana that have examined the factors associated with birth registration placed more emphasis on the socio-demographic characteristics and economic factors to the neglect of institutional and cultural factors. These studies were also limited to quantitative methods. They could not assess the cultural and institutional factors affecting birth registration since the quantitative data used do not explore cultural and institutional factors. Hence, there is limited information on the socio-cultural and institutional factors affecting birth registration in Ghana. To understand this gap, this study examined social, cultural, and institutional factors affecting birth registration in Ghana. This study adopted an explanatory sequential mixed method, using both quantitative secondary data and qualitative data to examine the socio-cultural and institutional practices associated with birth registration in Ghana. The 2017/18 Multiple Indicator Cluster Survey data were used for the quantitative aspect, and the sample size was 8,217 children under five years old. A binary logistic regression was used to determine the socio-demographic factors associated with birth registration in Ghana. For the qualitative component, In-Depth Interviews (IDI) and Focus Group Discussions (FGDs) were conducted with Birth and Death Registration officers and parents/guardians of children under five years in Ghana, respectively. In all, 12 IDIs and 12 FGDs were conducted with both males and females. Data were analysed using thematic approach with the aid of Atlas ti.

The findings show that more than half (62.01%) of the respondents had registered and been issued birth certificates. The factors associated with birth registration were mothers' educational level wealth quintile, religion, ethnicity, mother's age, marital status, ecological zones, and child's age in months. The social factors that influence birth registration were accessibility to the registration office, relevance of birth registration to parents/guardians, family-related issues, mother and child health conditions, communication barriers, time constraints, economic factors, community influence, and customs associated with the naming of a child. The cultural factors that influence

birth registration were related to naming ceremony. The results show that fulfillment of rites and naming ceremonies were identified as factors that promote birth registration in Ghana. On the other hand, factors that delay the registration and possession of birth certificates include delay in outdoorings of the child, healing of child naval, rituals performed for twins before naming ceremony, waiting for the name of a child from leaders among Ahmadis, Christian mass naming of children and delay in performing of marriage rites. Some institutional factors that promote early birth registration include the non-complexity of filling out forms, access to information, and frequent public sensitization of birth registration to facilitate early registration for a birth certificate. In contrast, unreliable volunteers assisting registration officers, lack of capacity building for staff, late issuance of birth certificates, non-availability of materials, unavailability of registration officers at post, specific days for registration, bad attitude of staff, non-avenues for clients complaints, inadequate staff, few registration centers, distance to registration centers, transportation and coverage challenges, system breakdowns, delays in printing of birth certificate and the influence of middle men limit the ability of people to register for the birth certificate. The study concludes that individuals make a rational choice to register for a birth certificate. Still, there are delays at the decision stage, reaching the registration centres and receiving the birth certificate after registration. The factors influencing birth registration are complex or multifaceted and emanate from individual, social, structural, cultural, and institutional . Interventions should target individual, social, structural, and community factors to improve the birth registration of children. There is a need to sensitize the public on the relevance of early birth registration, adopt strategies that would reduce the distance for applicants to register and improve the technology for immediate printing of birth certificates at the local administrative level



LIST OF ABBREVIATION

ACERWC	African Charter on the Rights and Welfare of the Child
AMA	Accra Metropolitan Assembly
BDR	Births and Deaths Registry
BC	Birth Certificate
CHPS	Community-Based Health Planning and Services
CRC	Convention on the Rights of the Child
CRVS	Civil Registration and Vital Statistics
DHS	Demographic and Health Survey
ECH	Ethics Committee for the Humanities
ECOWAS	Economic Community of West Africa States
FGD	Focus Group Discussion
GDHS	Ghana Demographic and Health Survey
GSS	Ghana Statistical Service
ICCPR	International Covenant on Civil and Political Rights
IDI	In-depth Interviews
IHDS	India Human Development Survey
IWI	International Wealth Index
JSS	Junior Secondary School
KOICA	Korea International Corporation Agency
MICS	Multiple Indicator Cluster Survey
NFHS	National Family Health Survey
NIA	National Identification Authority
NPC	Nigerian Population Council
OR	Odds Ratio
PESTLE	Political, Economic, Social, Technological, Legal and Environmental factors
PH	Public Health

PPF	Population and Family Planning
SC	Scheduled Castes
SDG	Sustainable Development Goals
SRF-CF	Statistics for Results Facility – Catalytic Fund
SSS	Senior Secondary School
SSA	Sub-Saharan Africa
ST	Scheduled Tribes
SWOT	Strength Weakness Opportunities and Threats
TFR	Total Fertility Rate
UNDP	United Nations Development Programmme
UN	United Nations
UNICEF	United Nations Children's Fund



TABLE OF CONTENTS

Contents

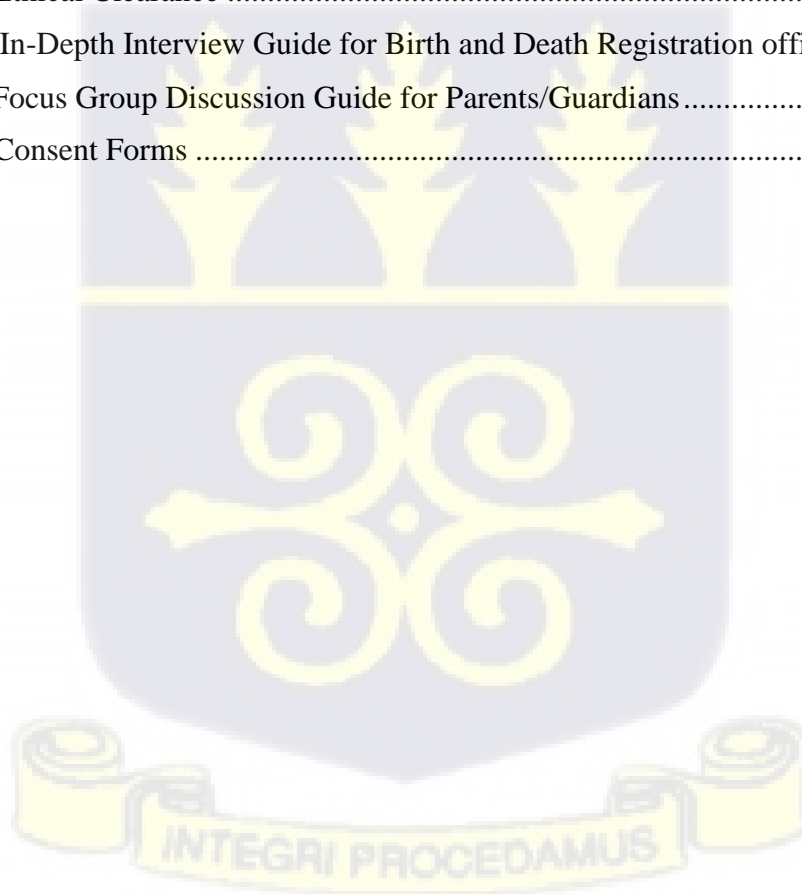
DECLARATION	i
DEDICATION	ii
ACKNOWLEDGEMENTS	iii
ABSTRACT	iv
LIST OF ABBREVIATION	vi
TABLE OF CONTENTS	viii
LIST OF TABLES	xiii
LIST OF FIGURES	xiv
CHAPTER ONE	1
INTRODUCTION	1
1.1 Introduction	1
1.2 Statement of the Problem	3
1.3 Research Questions	7
1.4 Rationale of the Study	8
1.5 Research Objectives	9
1.6 Operational definitions	9
1.7 Organisation of the Study	10
CHAPTER TWO	11
LITERATURE REVIEW	11
2.1. Introduction	11
2.2. Global Perspective and History of Civil and Birth Registration	11
2.3. Relevance of Civil and Birth Registration	17
2.4. Policies on Birth Registration	20
2.5. Factors Influencing Birth Registration	25
2.5.1 Institutional Factors and Birth Registration	25
2.5.2 Social Factors and Birth Registration	30
2.5.3. Cultural Factors and Birth Registration	34
2.6 Parental Demographic Factors and Birth Registration	36
2.6.1. Relationship between Parental Age and Birth Registration	36
2.6.2. Relationship between Parental Marital Status and Birth Registration	37
2.6.3. Relationship between Parental Place of Residence and Birth Registration	38

2.6.4 Place of Delivery and Birth Registration	40
2.6.5 Economic Factors and Birth Registration	41
2.6.6. Child Characteristics and Birth Registration.....	43
2.7. Theories of Birth Registration	46
2.7.1. Three Delays Model.....	46
2.7.2. Rational Choice Model	47
2.7.3. Social Behaviour Model.....	48
2.8 Conceptual Framework.....	51
2.8 Hypotheses	54
CHAPTER THREE	55
METHODOLOGY	55
3.1 Introduction.....	55
3.2 Study Design.....	55
3.3 Quantitative Data	56
3.3.1 Study Setting.....	56
3.3.2 Sources of Data	58
3.3.3 Sampling Design.....	58
3.3.4 Measurement of Variables	59
3.3.4.1 Dependent Variable.....	60
3.3.4.2 Independent variables	60
3.3.4.3 Control Variables	61
3.3.5 Method of Data Analysis	62
3.4 Qualitative Data	63
3.4.1 Research Design.....	63
3.4.2 Study Area	63
3.4.3 Sampling and Sampling Strategy.....	65
3.4.4 Data Collection	68
3.4.5 Data Analysis	69
CHAPTER FOUR.....	70
BACKGROUND CHARACTERISTICS AND DIFFERENCES IN POSSESSION OF BIRTH CERTIFICATES BY CHILDREN	70
4.1 Introduction.....	70
4.2 Possession of Birth Certificate.....	70

4.3 Maternal Social Characteristics	71
4.4 Child Characteristics.....	71
4.5 Maternal Characteristics	73
4.6 Association between background characteristics and possession of birth certificate by children	74
4.6.1 Maternal Social Characteristics and Birth Certificate Possession.	74
4.6.2 Child Characteristics and Possession of Birth Certificate.....	75
4.6.3 Maternal Characteristics and Possession of Birth Certificate for their Children.	76
4.7 Factors Associated with Possession of Birth Certificate	77
4.8 Discussion.....	83
CHAPTER FIVE	89
SOCIAL FACTORS ASSOCIATED WITH BIRTH REGISTRATION IN GHANA	89
5.1 Introduction.....	89
5.2 Background Characteristics of Qualitative Participants	89
5.3 Social Factors.....	90
5.3.1 Accessibility to registration centres	91
5.3.2 Relevance of the birth registration	93
5.3.3 Perception of under one-year birth Certificate.....	95
5.3.4 Family related issues.....	98
5.3.5 Health of the mother and child.....	99
5.3.6 Communication barrier	100
5.3.7 Time constraints.....	101
5.3.8 Community influence.....	102
5.3.9 Name of child related issues	102
5.3.10.1 <i>Delaying naming for travel opportunities</i>	103
5.3.10.2 <i>Use of technology enhances naming of a child</i>	104
5.3.10.3 <i>Change of name</i>	104
5.3.10.4 <i>Waiting for name from partner</i>	105
5.3.10.5 <i>Disagreement on the name of a child</i>	106
5.4 Discussion.....	106
CHAPTER SIX.....	112
CULTURAL FACTORS ASSOCIATED WITH BIRTH REGISTRATION IN GHANA	112
6.1 Introduction.....	112

6.2 Performing rituals before naming twins	112
6.3 Performing marriage rites	113
6.4 Waiting for the name of a child from leaders among Ahmadis	114
6.5 Material requirement for naming ceremony	115
6.4 Discussion	116
CHAPTER SEVEN	119
INSTITUTIONAL FACTORS ASSOCIATED WITH BIRTH REGISTRATION.....	119
7.1 Introduction.....	119
7.2 Birth registration process	120
7.2.1 Requirement for birth registration.....	120
7.2.2 Registration materials	121
7.2.3 Filling of forms	123
7.2.4 Issuance of birth certificate	125
7.2.5 Operation at the registration office	127
7.3 Customer service.....	128
7.3.1 Access to information	128
7.3.2 Attitude of staff towards applicants	129
7.3.3. Clients' complaints	131
7.4 Human Resources	132
7.4.1. Staff strength.....	132
7.4.2. Capacity building of staff.....	134
7.5 Material resource	135
7.5.1 Infrastructure.....	135
7.5.2 Distance to registration offices	137
7.6 Sensitisation on birth registration	138
7.5.1 <i>Sensitization carried out in the districts</i>	139
7.5.2 <i>No sensitization in the districts</i>	140
7.5.3 <i>Challenges of sensitization</i>	141
7.7 Technology for processing birth information	142
7.8 Influence of Middlemen.....	143
7.8.1 Availability of middlemen	144
7.8.2 Outcome of engaging middlemen	145
7.8.3 Reasons for preference of middlemen	147

7.8 Discussion.....	148
CHAPTER EIGHT	155
SUMMARY, CONCLUSION AND RECOMMENDATION.....	155
8.1 Introduction.....	155
8.2 Summary of findings.....	157
8.3 Theoretical implications of findings	159
8.4 Limitations of the study	160
8.5 Conclusion and contribution to knowledge	161
8.6 Recommendations.....	162
8.6.1 Policy recommendations.....	162
8.6.2 Future research.....	164
REFERENCES	166
APPENDIX A: Ethical Clearance	180
APPENDIX B : In-Depth Interview Guide for Birth and Death Registration officers	181
APPENDIX C: Focus Group Discussion Guide for Parents/Guardians.....	185
APPENDIX D: Consent Forms	188



LIST OF TABLES

Table 4.1: Percentage Distribution of Social Characteristics	71
Table 4.2: Percentage Distribution of Children by Selected Characteristics.....	72
Table 4.3: Percentage Distribution of Maternal Characteristics	73
Table 4.4: Percentage Distribution of the Association Between Maternal Social factors and Possession of Birth Certificate	74
Table 4.5: Percentage distribution of the Association Between Child Characteristics and Possession of Birth Certificate.....	75
Table 4.6: Percentage Distribution of Maternal Characteristics and Possession of Birth Certificate.....	77



LIST OF FIGURES

Figure 2.1: Framework Depicting the Social Behaviour Model 50

Figure 2.2: Conceptual framework showing the relationship between socio-cultural and institutional factors associated with birth registration in Ghana..... 52

Figure 3.1: Map of Ghana showing the sixteen (16) administrative regions..... 57

Figure 4.1: Pie chart showing birth certificate possession among children of respondents 70

Figure 5. 1: Thematic network showing social factors affecting birth registration..... 91

Figure 5. 2: Thematic network of name of child related issues 103

Figure 7. 1: Thematic network showing institutional factors associated with birth registration 119



CHAPTER ONE INTRODUCTION

1.1 Introduction

Civil registration is the “universal, continuous, permanent and compulsory recording of vital events by the legal requirement in a country” (UN, 2001). Civil registration systems (CRS) are vital for government policy and planning, monitoring health policy and programming, and are central to tracking the progress of the welfare of the population towards achieving the Sustainable Development Goals (SDGs) (Akomolafe et al., 2021; Pelowski et al., 2015). For instance, birth registration, which is a fundamental part of the civil registration system is not only relevant for national and international planning but is seen as the recognition of basic fundamental human rights and legal recognition of a child (Williams et al., 2018; Duff et al., 2016) and initial interactions between individuals and their respective governments where rights and privileges are bestowed on individuals (Makinde et al., 2016; Amo-Adjei & Annim, 2015). Due to this, the United Nations and the World Bank recognize civil registration, including the acquisition of a birth certificate, as a very important document for global development (Brumberg et al., 2012).

Birth registration is the official recording of an individual's birth characteristics by an administrative level of the State with a legal requirement (Akomolafe et al., 2021). This entails an official birth record of the characteristics of the child's birth given by the parents/guardians, registration of the child in the civil register by an administrative staff that coordinates the registration process, and the publication and circulation of an accompanying birth certification (Lieke Ebbers & Smits, 2020). Several laws and conventions have been passed to provide basic human rights through birth certificate acquisition. These laws provide the framework by which people can acquire a birth certificate. For instance, the Convention on the Rights of the Child (CRC) (UN, Article 7) is an international treaty passed in 1989 comprising fifty-four (54) articles.

The seventh article places more emphasis on children's right to have a birth certificate and emphasizes that all children should be registered immediately after birth (Kumar & Saikia, 2021; Reed et al., 2021; Lima et al., 2018; Makinde et al., 2016a). In addition, SDG 16.9 states that there should be a provision for legal identity, including birth registration for everyone by 2030; hence, the goal of achieving universal birth registration is included in the Sustainable Development Goals (Onagoruwa & Wodon, 2021; Wodon & Yedan, 2019; Williams et al., 2018). Also, the World Health Organisation, World Bank, and other agencies have developed a ten-year plan called "The Global Civil Registration and Vital Statistics Scaling Up Plan" to assist governments in improving birth registration (Makinde et al., 2016). All these laws, policies, and programmes are geared towards improving birth registration globally. Countries have subscribed to these laws and conventions and developed their Acts tailored to suit the needs of their population.

In Ghana, registration of vital events started in 1888, but only the deaths of persons belonging to the colonial government and mining merchandise companies were recorded. In 1912, the registration of vital events was expanded to include births (Mehta & Assie, 1979). A new ordinance was enacted in 1926 to improve the registration of births, deaths, and burials. In 1968, the 1965 Births and Deaths Act, often referred to as "Act 301 of 1965," which centralised birth and death registration, where district registration officers report directly to the National Birth and Death Registrar, was amended to decentralise births and deaths registration in 2020, Act 1027 (Parliament of Ghana, 2020). The new Act 1027 decentralised the registration of births and deaths, where district registration officers now report to the National Birth and Death Registrar through the District/Municipal/Metropolitan Assembly. Also, Ghana is a signatory to CRC, which establishes the child's rights. It was signed on 29th January 1990 and ratified on 5th February 1990. Despite the ratification of the CRC in Ghana, the birth of many children has not been registered for birth certificates (Amo-Adjei & Annim, 2015).

Evidence in sub-Saharan Africa shows that socio-demographic, economic, institutional, and socio-cultural factors account for the registration of births (Bennouna et al., 2016). Specifically, inadequate offices serving as birth registration centres, distance to birth registration centres, delays in processing birth certificates, and poor quality of service are established factors influencing birth registration (Reed et al., 2021; Al-Kaabi et al., 2019; Dake & Fuseini, 2018; Amo-Adjei & Annim, 2015). These factors limit many people in sub-Saharan African countries from registering and acquiring birth certificates. Evidence also shows that people register for the birth certificate but do not get it due to institutional or individual factors (Williams et al., 2018; Pelowski et al., 2015). Pelowski et al., (2015) argued that some people who register and are unable to go for the certificates mostly do not attach importance to the certificate. Other people also wait to register for birth and acquire a certificate only when it is needed for school enrollment, acquisition of a passport, and access to health facilities, among others.

Despite Ghana signing treaties to ensure every child acquires a birth certificate, socio-cultural, institutional and economic factors could limit the acquisition of a birth certificate. Ghanaians who do not have birth certificates stand the risk of being denied access to social, health, and educational services in the country. Unfavourable factors for birth registration, such as long distances to the registration centres, lack of interest in birth registration, cultural-related factors, and institutional challenges, including low staff numbers and inadequate material for birth registration, could increase the number of people without a birth certificate. In light of this, this study examines socio-cultural practices and institutional factors associated with birth registration in Ghana.

1.2 Statement of the Problem

Achieving legal identity under the Sustainable Development Goal (SDG) Target 16.9, which states that “there should be a provision of legal identity, including birth registration for everyone by

2030,” is essential for the global community (Bhatia et al., 2019; Kumar & Saikia, 2021). This can be achieved through all-inclusive Civil Registration and Vital Statistics (CRVS) systems. Unfortunately, most children or adults in many countries have not had their birth registered, especially in sub-Saharan Africa, where less importance is attached to the birth registration and acquisition of birth certificates (Wodon & Yedan, 2019). Also, there are concerns about the quality of vital registration system data due to poor records and the inability of persons to register in most developing countries. However, the high quality of vital registration systems is crucial for planning, designing and evaluating health and social interventions and achieving the Sustainable Development Goals (Lima et al., 2018). To ensure this, every child must be registered immediately after birth and have a name as indicated by the UN International Covenant on Civil and Political Rights (ICCPR) Article 24 (2) (Amo-Adjei & Annim, 2015).

Globally, there has been a rise in birth registration rates from 58 percent to 71 percent among children under five years. However, about a quarter of the world’s population is unregistered (Bhatia et al., 2019). Approximately 230 million children under five years and one billion adults have not had their births registered and are without a birth certificate (Bhatia et al., 2019). Like the other global challenges, the majority of children without birth certificates are found in sub-Saharan Africa, where compliance with birth registration is below 50% (Ebbers & Smiths., 2022). The low compliance can be attributed to insufficient understanding of the significance of birth registration, institutional, social and cultural factors that demotivate people to register their birth (Reed et al., 2021). Evidence indicates that the ramifications of lacking a birth certificate are substantial (Lieke Ebbers & Smits, 2020; Bhatia et al., 2019; Lima et al., 2018; Pelowski et al., 2015). Children or adults without a birth certificate may experience difficulty in accessing social, health, political, and other benefits that the state bestows (Williams et al., 2018). The registration of children, therefore, provides entitlement to children as unregistered children are denied their identity in early

childhood because their guardians fail to register their birth (Makinde et al., 2016). Hence, a birth certificate is an essential intervention for childhood development as its impacts go beyond childhood (Onagoruwa and Wodon, 2020).

In Ghana, the fee for birth registration for children within the first 12 months after birth has been waived to improve the registration of births. Birth and death registration centres have also been situated within some selected health facilities to encourage the registration of children after birth (Amo-Adjei & Annim, 2015). Ghana has also signed up for international conventions and implemented other treaties and laws to help improve the registration of births. In addition, some other programmes and interventions have been rolled out to ensure increased birth registration after delivery. One key intervention is the introduction of a mobile mass registration exercise where the civil authority responsible for birth registration has a dedicated mobile van with a public address system fixed on top of a vehicle, airing recorded messages on the importance and process of birth registration in a language understood by the community (Fagernas and Odame 2013). Mothers with children less than a year old whose births are not registered converge at an agreed location in the community for such births to be registered and certificated. This activity is done regularly to increase registration officers' visibility within some selected communities in Ghana.

Despite the Government of Ghana's interest and non-governmental agencies' support in promoting birth registration, coverage is incomplete and not universal. According to the 2017/2018 Ghana Multiple Indicator Cluster Survey, 62 percent of children under five years have birth certificate while 9 percent even though have registered do not have (GSS et al., 2018). Similarly, the 2014 Ghana Demographic and Health Survey indicated that 55 percent of children under five years had birth certificates, while 16 percent do not have, in spite of being registered (GSS et al., 2015)

Globally, studies have examined the underlying cause of low birth registration. In Ghana, Dake and Fuseini., (2018) examined differentials in the registration of births. They found that factors such as children born to young adolescents, mothers with no formal education, and children whose mothers live in rural areas were less likely to register the birth of their children. Amo-Adjei and Annim (2015) examined socioeconomic determinants of birth registration and found that mothers who are educated, wealthy and those living in urban areas were more likely to register for a birth certificate. Fagernas and Odame (2013) examined birth registration campaigns such as mobile registration activities and incorporation of birth registration into community health care initiated by Plan International and the United Nations Children Fund between 2004 and 2005. The results show that campaign strategies improved the registration of births in Ghana. These studies have also established that there are inequalities in birth registration coverage, and they are linked to socio-demographic and economic factors. However, these previous studies did not examine how socio-cultural practices, beliefs, and institutional factors affect birth registration and acquisition of a birth certificate in Ghana.

Anecdotal evidence shows that socio-cultural practices and beliefs influence birth registration, mostly in sub-Saharan Africa, including Ghana. For instance, there is sometimes a delay in naming a child where the naming takes place a week or months after delivery. Consequently, this may result in a delay in registering the child for a birth certificate. In addition, some mothers are unable to register their children for birth certificates if the husband has not approved child's name, whereas in other societies, unmarried mothers face greater difficulties in registering their children for birth certificates due to the stigma and shame attached to having a child without a father present (Corbacho Rivas, 2012). Also, institutional factors such as distance to registration centres, limited staff strength, lack of information on the importance of birth registration, birth registration cost, and delay in the registration and certification process limit the ability of parents/guardians to

register the birth of their children. Nonetheless, there are few studies on socio-cultural practices and institutional factors affecting birth registration in SSA and Ghana (Abay & Gebre-Egziabher., 2020; Reed et al., 2021; Fabregas and Odame., 2013).

Studies in Ghana that have examined the factors associated with birth registration (Dake & Fuseini, 2018; Amo-Adjei & Annim, 2015) placed more emphasis on the socio-demographic characteristics, economic and some social and cultural factors to the neglect of institutional factors. These studies were limited to only quantitative data and could not assess other dimensions of socio-cultural and institutional factors affecting birth registration (Dake & Fuseini, 2018; Amo-Adjei & Annim, 2015). However, using a qualitative method would help unearth some of the socio-cultural factors not examined in the quantitative studies and help understand the institutional factors that either motivate or demotivate people to register the birth of their children. Consequently, there has not been a study using a mixed-method approach to examine how social, cultural and institutional factors influence birth registration in Ghana. Hence, there is a lack of systematic research examining socio-cultural and institutional factors affecting birth registration in Ghana. Therefore, it is timely to conduct this study to understand how socio-cultural and institutional factors affect birth registration in Ghana.

1.3 Research Questions

- i. How do social factors influence birth registration in Ghana?
- ii. What cultural factors influence birth registration in Ghana?
- iii. What institutional factors affect birth registration in Ghana?

1.4 Rationale of the Study

Though there are numerous studies on factors associated with birth registration in Ghana, the available studies mainly focus on socio-demographic and economic factors, neglecting other factors, such as socio-cultural and institutional factors that affect birth registration. Therefore, the findings of this current study will contribute to the literature on socio-cultural and institutional factors that affect birth registration. Understanding these factors is essential since it would help strengthen the institutions mandated to register births and point out other socio-cultural factors that enhance the acquisition process of a birth certificate in Ghana.

Additionally, timely birth registration is crucial for producing a country's current and dependable vital statistics. The study is timely since Ghana is developing its national identification system. A birth certificate is one of the main documents needed to acquire a Ghana National Identification Card. Given that birth registration has been uneven and incomplete in the past decade, it would be impossible for all Ghanaians to have a birth certificate, as it is a prerequisite to acquiring a Ghana National Identification Card. Hence, the results of this study could help policymakers adopt measures to improve the registration of births and the process of acquiring a birth certificate, which will further result in the acquisition of the Ghana National Identification Card.

Again, data on birth registration are very important in measuring the various indicators of Sustainable Development Goal 16 (SDGs) in Ghana. The findings of the study have significant policy implications for the attainment of Sustainable Development Goal 16. Specifically, Target 16.9 aims to provide legal identity for all, including birth registration, by 2030. Birth registration facilitates the collection of continuous demographic information, which is crucial for a country's programming and planning efforts to accomplish the SDG Goal.

Furthermore, this study adopts a mixed-methods approach to add context and depth and provide an understanding of the socio-cultural, contextual and institutional factors affecting birth registration in Ghana. Previous studies in Ghana have used quantitative methods to examine factors associated with birth registration and certificate issuance. These studies were limited in their analysis since the quantitative approach does not allow exploring other factors. Hence, the qualitative method will provide a holistic understanding of factors associated with birth registration in Ghana, as it will unearth other socio-cultural and institutional factors that affect birth registration.

1.5 Research Objectives

The study's general objective is to examine socio-cultural and institutional factors affecting birth registration in Ghana. The specific objectives of the study are:

- i. To examine the relationship between social factors and birth registration in Ghana.
- ii. To examine the relationship between cultural factors and birth registration in Ghana.
- iii. To analyse how institutional factors affect birth registration in Ghana.

1.6 Operational definitions

Social factors include the interactions and relationships between individuals and groups that hinder or facilitate birth registration.

Culture refers to shared values, traditions, norms, and practices that influence or guide human behavior to hinder or facilitate birth registration.

An institution is an established organisation with systems, such as the Births and Deaths Registry and the family both of which have systems including their structure which could influence or affect the birth registration process.

The Births and Deaths Registry and the family as institutions could affect birth registration based on their structure, governance and other related factors for example the extended family plays a key role in naming a child and facilitating birth registration. This is unique in that in most families in Ghana, names given to newborn children come from extended families, which is not always the case, especially in the developed world.

1.7 Organisation of the Study

This study is organised into eight chapters. Chapter One is the introduction and includes the study background, statement of the problem, research questions, the study's rationale, and objectives. Chapter Two focuses on the literature review. It reviews extensively the relevant literature on factors affecting birth registration. Chapter Two also presents the theories of birth registration and the study's conceptual framework. Chapter Three presents the methodology of the study. Chapter Four presents the data analysis by examining the relationship between social factors affecting birth registration in Ghana. Chapter Five discusses the relationship between cultural factors and birth registration. Chapter Six explores the socio-demographic factors associated with birth registration in Ghana. Chapter Seven focuses on the institutional factors affecting birth registration in Ghana, while Chapter Eight presents the study's summary, conclusion, and recommendations.

CHAPTER TWO

LITERATURE REVIEW

2.1. Introduction

This chapter reviews the theoretical and empirical related literature on factors that influence birth registration in both developed and developing countries. The review focuses on the history of civil and birth registration, the perspective of birth registration in both developed and developing countries, the relevance of birth registration and policies of birth registration. In addition, the review highlights the institutional, social, cultural and demographic factors that influence birth registration. Also, the review elucidates both the theories and the conceptual framework employed in the study.

2.2. Global Perspective and History of Civil and Birth Registration

Vital registration date back to the ancient time before the birth of Jesus Christ when counting of people was undertaken in the Old Testament of the Bible in Egypt, Persia, Greece and Rome. The counting was for taxing purposes and assessing the availability of military personnel (Brumberg et al., 2012). In addition to this, data for births were recorded in the church register as early as 1500 (Brumberg et al., 2012). The registration of births continues and was recorded in the church registers in England as early as the 1500s. In 1632, there was a grand Assembly in Virginia which translated into recording births to ensure individual rights are primarily protected. This has undergone various forms of modifications due to changing nature of demographic indicators and technology (Brumberg et al., 2012; Kpedekpo & Arya, 1981).

The United Nations defines civil registration as “the continuous, permanent, compulsory and universal recording of the occurrence and characteristics of vital events pertaining to the population, as provided through decree or regulation in accordance with the legal requirements”

(United Nations Department of Economic and Social Affairs, 2014; page 65). Vital event is also defined as “the occurrence of a live birth, death, fetal death, marriage, divorce, annulment, judicial separation, adoption, legitimation, or recognition of parenthood” (Wodon & Yedan, 2019; Mohanty & Gebremedhin, 2018; Bennouna et al., 2016) According to UN (2019), civil registration of vital events should be continuous, permanent, compulsory and universal. The Civil Registration System is the foundation for the identity management system of a country. An individual’s legal identity is established through civil registration as this makes provision for evidence of their identity in the form of a birth certificate (UN, 2019). Legal identity as defined by the UN (2015), “is the basic characteristics of an individual’s identity. e.g., name, sex, place and date of birth conferred through registration and the issuance of a certificate by an authorized civil registration authority following the occurrence of birth.” Civil registration is carried out to establish a legal identity. This is accomplished by documenting personal biographical information, including name, date of birth, place of birth, and parent names, in addition to vital event characteristics, which are primarily gathered for statistical purposes. Like the census and any other source of demographic data, for example the vital registration system consists of continuous registration of births, deaths, marriages and so on (Brumberg et al., 2012; Kpedekpo & Arya, 1981). Vital registration is concerned with the recording of key life cycles or vital events.

In search of an alternative to census exercise, birth registration is the first legal recognition of a child, and it is a fundamental human right (Duff et al., 2016). The right to birth registration is enshrined in the United Nations Convention on the Rights of the Child, which states that “every child shall be registered immediately after birth and shall have the right from birth to a name and a nationality.” Birth registration is a permanent and official recording of a child’s existence and provides formal acknowledgement by the state of a child’s birth (UNICEF, 2013). The significance of birth registration rights is now well-documented in Target 16.9 of the 2030 Agenda for

Sustainable Development, which aims to “provide legal identity to all, including birth registration by 2030 (Mills et al., 2019).

In developed countries, civil registration dates back to the 18th century but was formalized in the 19th century. Vital registration systems are generally well-organized units in developed countries (UN 1982). They have well-established civil administrative organizations with trained officials, local offices as well as central ones. The main responsibility of the local offices is to gather information, but both the local and central offices handle the information for statistical reasons (UN, 2019). Recent vital statistics are most accurate in advanced economic development countries that can register children to prevent curtailing of their rights (Adedini & Odimegwu, 2011).

Despite birth registration being a fundamental right of every child, registration levels remain critically low worldwide (UNICEF, 2013) although it is the obligation of governments to register all births. Children who have not been registered for birth certificate become vulnerable and may be denied access to health care, education or any other essential services in their states (Lieke Ebbers & Smits, 2020; Lima et al., 2018). In the later lives of these children, they may end up entering into marriage or the labour market before the legal age. Laws on child marriage and labour cannot, therefore, be enforced when the ages of these children cannot be verified. Emergency situations, such as natural disasters and conflicts, can exacerbate challenges by stalling birth registration services, destroying individual birth certificates, or entire archives. This even puts refugees without birth certificates at risk of becoming stateless (UNICEF, 2013).

According to UNICEF, a significant percentage of children under five years in 19 countries, including China, lack a birth certificate, with estimates ranging from 26% to 60%. (Deen, 2002). Li, et al., (2010), reported that birth registration in China is low especially in rural areas and among marginalized children. The main reason accounting for these differences is the extent of economic

development status among the rural and urban families, as well as among the marginalized and normal groups of children in China. The presence of both the dual birth registration system and the interference from the Department of Population and Family Planning give rise to considerable administrative obstacles.

Brumberg et al., (2012) argued that civil registration in the United States of America and England became more standardized in the 1930s. However, in 1989 the US adopted a uniform birth registration format to include checkboxes to improve data quality completeness. From 1915 to 1933, there was an increase in the coverage of birth registration from 10 States to almost all the districts with the exception of Alaska and Hawaii where birth registration started in 1959. Birth registration during the First World War was very relevant as it became a document for proof of citizenship and employment. The content of birth registration has undergone more ramifications in the United States, which now includes smoking, obesity, infertility, nutrition and other questions.

In developing countries, AbouZahr et al, (2015) reported that the birth registration system is ineffective though it is considered one of the means of data collection for national disbursement. This results in the computation of erroneous data to depict the population and renders it unfeasible to effectively strategize in light of the finite resources at hand. The lack of efficiency in the system necessitates alternative methods of data collection, such as conducting censuses, surveys, and surveillance. This is due to the imperfect nature of birth registration systems in many countries, both in terms of content and coverage. Therefore, statistics data from such countries can be rendered ineffective at times (AbouZhar et al., 2015; Owusu-Agyei et al, 2012).

According to Adedini and Odimegwu (2011), assert that the vital registration system in developing countries is rudimentary, incomplete, and often unreliable. Consequently, these countries seldom

utilise it for demographic study. This is especially accurate for nations located in sub-Saharan Africa. Several of these countries have previously had incomplete and sporadic vital registration. The lack of precise statistical data for the purpose of social and economic planning is considered a significant factor contributing to the underdevelopment of sub-Saharan African countries (Adedeni & Odimegwu, 2011). According to Lucas (2003), due to the significant expenses and challenges associated with implementing a comprehensive registration system, it is highly uncertain whether many developing nations can establish an accurate, complete, and comprehensive vital registration system within the next few decades.

The initial endeavour to collect birth data in Nigeria dates back to 1863 when ordinance No. 21 was enacted in the Lagos Colony. A more extensive registration system was then implemented nationwide in 1917. (NPC, 1998). During the colonial era and subsequent years, the implementation of vital registration systems in the country exhibited a lack of consistency in their functioning. Furthermore, the coverage was deficient in both scope and accuracy, and the primary objectives at that time were primarily focused on fulfilling the colonial requirements for tax assessment and ensuring security (NPC, 2010). The comprehensive civil registration and vital statistics system is the optimal data source for assessing the majority of the indicators related to Sustainable Development Goals. Nevertheless, civil registration does not encompass migration data, which are crucial for determining the precise population count and demographic attributes such as age and gender within a certain region.

Also, in 1960, Ethiopia established a civil registration system through the Civil Code of Ethiopia (Civil Code of the Empire of Ethiopia, 1960). This was aimed at recording the births, deaths and marriages of people living in Ethiopia. However, the Office of Civil Status was not established hence the recording of the civil events was not effective. Notwithstanding, births were recorded at

hospitals and churches. An effective system of registration of births has been enhanced after deliberation and conscious efforts of the authorities in Ethiopia through a committee on the rights of the child with regulation number 278/2012, where now births and deaths are recorded (Tarekegn, 2017).

In Ghana, around 50% of all births are unregistered annually, even though registering the birth of a child is a crucial requirement. About 30% of children have never had their births registered in Ghana. There is also a higher rate of late registration rather than early registration of birth and a propensity of birth to be registered but not issued with a certificate (UNICEF, 2013). Birth registration and certification rates are significantly low for children born to adolescent mothers aged 15 to 19, children whose mothers lack formal education, mothers residing in rural areas, and economically disadvantaged mothers (Fagernas & Odame, 2013).

The Constitution of Ghana mandates that all births and deaths that transpire in Ghana are registered according to the Registration of Births and Deaths Act 2020 (Act 1027). The registration of births in Ghana has exhibited a fluctuating trend in recent years, characterised by periods of growth and fall. However, the involvement of non-governmental organisations like UNICEF and Plan International has played a crucial role in achieving stability. Despite the aforementioned accomplishment, an estimated 1.2 million children in Ghana who are below the age of five remain unregistered in any official documentation (Birth and Death Registration Act 2020; Dake and Fuseini, 2018).

The Civil Registration System in Ghana has seen several alterations since 1888, with the rules governing civil registration in the country being revised multiple times. Vital event registration in Ghana commenced in 1888 with the objective of documenting the deaths of foreign labourers employed by the colonial administration at that time. The Cemeteries Ordinance of 1888 was the

inaugural civil registration statute implemented in the former Gold Coast. In 1891, it was revised and later renamed as the Births, Deaths, and Burials Ordinance in 1912. The Registration of Births and Deaths Act of 1926 was changed once more in 1965, and subsequently replaced by the Registration of Births and Deaths Act 301 of 1965 (Mehta and Assie, 1979). This Act, after operating for over six (6) decades has been repealed and replaced with the Registration of Birth and Death Act, 2020 (Act 1027) which is currently the Act regulating births and deaths registration in Ghana.

The Government Department responsible for registration of births and deaths in Ghana is the Birth and Death Registry. Just as the various ordinances and Acts regulating births and deaths in Ghana have gone through series of amendments, the Ministries under which the Registry operates have experienced similar changes. First, after the passage of Act 301 of 1965, the Registry was under the Central Bureau of Statistics, a division of the Ministry of Local Government. In 1972, the Registry was transferred from the Ministry of Local Government to the Ministry of Economic Planning in anticipation of the implementation of the births and deaths expansion programme (Mehta & Assie, 1979). Ever since Ghana implemented its decentralization programme in 1984, the Registry has been operating under the Ministry of Local Government Decentralization and Rural Development. The very duty of the Births and Deaths Registry is to provide accurate and reliable information on all births and deaths occurring within Ghana for socio-economic development of the country through their registration and certification (Dake & Fuseini, 2018).

2.3. Relevance of Civil and Birth Registration

Civil registration and vital statistics systems are very relevant in every nation of the world. Policy makers rely on accurate and timely statistics to inform their decision-making processes, monitor and evaluate programmes. Therefore, accurate and reliable vital statistics regarding the quantity

and geographical spread of births, marriages, divorces, deaths, and other related data are essential for informing social and economic planning in both the public and private sectors. Civil registration fulfils multiple functions, such as satisfying legal obligations by furnishing proof of identity, legal status, and entitlements, enabling the enjoyment of age-dependent privileges like enrollment in educational institutions, participation in elections, and receipt of retirement benefits, and facilitating the lawful transfer of assets, succession, and social protection (WHO, 2013).

Birth registration is seen as one of the fundamental human rights as it provides individuals with the documentary evidence required to secure recognition of legal identity, family relationships and nationality which authorizes them to access health, education, social protection from child marriage, child labour, trafficking, illegal detention among others (UNICEF, 2020a).

Birth registration is also a tool to gain access to various forms of services provided by a state. It provides the first form of legal identity upon which other identification systems are built such as Identity Card Register. These foundational registers provide the identification services necessary to access public and private services such as registering land, getting a driver's license, voting, travelling, getting a passport, gaining formal employment, health care, opening a bank account, getting a mobile number among others (Apland et al., 2014).

Recording vital events such as births and deaths is fundamental information for smart planning and decision-making. It is part of a Civil Registration and Vital Statistics (CRVS) system for governments (Duff et al., 2016). The process of civil registration is essential for strategizing educational institutions, healthcare facilities, and infrastructure development, while also facilitating the computation of health and socioeconomic metrics. It aids in the identification of individuals requiring medical attention and enables policymakers to provide necessary services to everyone, especially marginalised populations. Precise recording of births, deaths, and reasons of

death generates crucial data, allowing governments to evaluate disparities, distribute resources effectively, comprehend population trends, strategize and oversee advancements, and gauge progress towards Sustainable Development Goals (Duff et al., 2016; Fauveau, 2006).

By allocating distinct identification numbers to individuals, such as during the process of birth registration, and subsequently utilising these numbers to connect the individuals' information from civil registration, national identification, and other operational registers, including registers for migration and healthcare, it is possible to acquire more precise and disaggregated population information (Mills, Lee & Rassekh 2019). Additionally, this is a crucial factor in enhancing the efficiency and availability of social services, including education, healthcare, social welfare, and financial services. When the civil registration system in a country is integrated with its national identification system, it yields advantages for both the government and its citizens. The government benefits from having reliable and up-to-date vital events data about its citizens, as it aids in developing well-informed programming and policy choices, assuring the precise allocation of finances, and monitoring development initiatives at every level. Birth registration facilitates the verification of one's identity and facilitates access to governmental services for citizens (Mills, Lee & Rassekh 2019). For instance, Mackenzie (2008) reported that, for children to be able to access medical care in Peru, they require birth certificates and caregivers in Columbia too cannot enroll their wards in schools without valid birth certificates. In addition to the above, a Dominican Republic child cannot access high school after completing eighth grade all because of a lack of birth certificates. This implies that there is a possibility of scraping off the welfare of a child in Latin America all because of the absence of a birth certificate (Dunning et al., 2014).

It is one of the ultimate functions of governments to keep records and document life events such as birth, marriage, divorce, adoption, and death into a civil registration and vital statistics (CRVS)

system. This permits the production of statistics on population dynamics, health, and inequities in service delivery on a continuous basis for a country as a whole and for local administrative subdivisions (WHO & World Bank Group, 2014).

2.4. Policies on Birth Registration

As part of the Sustainable Development Goals (SDGs) Agenda, the United Nations made it a target to provide legal identity to all, including birth registration by 2030. The achievement of universal birth registration is therefore a key to actualising the SDGs' pledge to "leave no one behind." According to Dahan and Gelb (2015), the prioritization of birth registration by the SDGs is because the registration of births provides individuals with the first and most fundamental form of their legal identity which is defined before the law as the recognition of one's personhood. Civil registration also provides pertinent data and vital statistics to governments for decision-making, planning and resource allocation purposes among others (Abouzahr et al., 2015; Jackson et al., 2018). Setel et al., (2007) also stated in their study that, the expansion of access to registering of births is a means of officially providing recognition to people and that encourages the political, social, and economic integration of the marginalized or disenfranchised populations (UNICEF, 2020a).

In tracking trends, a birth which is considered an event must be registered. This aids in minimizing errors in the data collected (Isara & Atimati, 2015). There are variations in birth registration globally, based on the laid-down procedures and policies in each country (Bequele, 2005). The implementation of civil registration is essential for efficient identity management and should be compulsory, universal, continuous, and permanent. The sensitive nature of the information housed in the system necessitates its confidentiality. Interactions with external entities should only occur with the explicit consent of the individuals involved or in compliance with the legal regulations of

the respective jurisdiction. These principles are relevant to the registration of national identification, however the requirement for national identity cards or population register entries to be compulsory should not always be enforced. Hence, it is imperative for the civil registration system and identity management system to uphold the strict secrecy of individuals' personal information (UN, 2019).

According to Duff, Kusumaningrum and Stark (2016), Indonesia's Civil Registration and Vital Statistics System (CRVS) is complex and also serves as an impediment and discourages unmarried couples from registering their children. According to the authors, obtaining the necessary documents, such as parents' marriage certificates, significantly enhances the likelihood of a child having a birth certificate by 90%. Additionally, this also adds to the financial costs associated with applying for a birth certificate. A certificate of parental marriage is one of the six documents that are mandatory to gain access to a birth certificate and it is expensive and complicated to obtain. This is a result of pressure in the region such as Nusa Tenggara Timur, compounded by cultural expectations for expensive religious weddings. This prevents couples from entering into both religious and civil marriages and hence many marriages remain unregistered by the state. Without a marriage certificate, children are issued birth certificates specifically made for children who are born out of wedlock. This document, however, is defaming and further deters unmarried couples from registering their children.

The China Birth Registration System has seen significant changes since the 1950s, transitioning from primarily urban birth registration to giving equal importance to birth registration in rural areas. It has also desisted from ignoring the rights of children to caring for them. The Hukou and birth registration systems have been undergoing simultaneous changes due to their interdependence and susceptibility to measures aligned with varying government goals over time.

The first document regarding birth registration in China, titled 'Regulations on Hukou Registration for Urban Citizens', was issued in 1951 during the period of economic recovery from 1949 to 1957. It stated that “each newborn baby must be registered at the local police station by his/her parents or guardians within one month after its birth”. Birth registration in rural regions was implemented in 1953 following the initial national census of that year. The responsibility for managing this process was assigned to local administrations. The dual Hukou administrative system, comprising both urban and rural areas, was implemented and remained in place for approximately four decades (Li, Zhang & Feldman, 2010). The birth registration system was established with the objectives of providing vital statistics, enhancing public security, and assisting in addressing identified dangers. Nevertheless, the regulations exhibited deficiencies, resulting in diminished rates of birth registration during specific time frames. Applicants must provide Medical Birth Certificates, Birth Certificates, and either parents' Hukou booklets or identity cards (Wang, 2002).

Currently, in China, the birth registration procedure is still very complex according to Li, Zhang and Feldman (2010). Three documents are required in the birth registration application. The couple first applies for the birth certificate from the Population and Family Planning Department during the period of pregnancy and then the Maternal Birth Certificate is taken from the Public Health Department after birth. It is only these two documents that can facilitate birth registration for the child at their local police station with their Hukou booklets. For adopted children, the foster parents can only register Hukou for them after receiving adoption documentation following special adopting procedures that are very strict. The government bureaus however make these procedures simpler during national and local censuses.

African leaders in various African states have also implemented various policies in an attempt to avoid statelessness (Kidane, 2014). African Ministers in charge of civil registration have been

sensitized in recent times on the need to register all births in their countries which has been captured in Article 6 of the African Children's Charter by the African Board on the Rights and Welfare of Children who are responsible for the monitoring and execution of international laws on nationalities. Article 6 of the African Children's Charter states that "every child has the right to a name and registration in order to acquire nationality immediately after birth" (Kidane, 2014).

The African Charter on the Rights and Welfare of the Child (ACERWC) also held a conference in Cote d'Ivoire for ECOWAS members to make sure that, their constitutional legislation "recognizes the principles of conferring a child the nationality of the State in which the child is born, if at the time of the child's birth he is not granted nationality by any other State in conformity with its laws" (Lloyd, 2016).

In addition to the above, the African Union, the African Development Bank and UN Economic Commission for Africa teamed up with other international organizations with the aim of developing measures that can help increase the rate of birth registration in Africa (Manby, 2016). Nevertheless, a study carried out by the Committee of Experts of the African Commission on Human and Peoples' Rights unveiled that only a limited number of African nations have integrated this principle into their respective national constitutions and legal frameworks. For example, Gambia has explicitly enshrined the right to nationality for all children in their constitution, whereas countries like Cape Verde have not yet implemented this concept (Manby, 2016).

Recently, several developing countries, such as Kenya achieved a 98 percent coverage rate in counting children, as they are temporarily included in the census right after birth. Subsequently, the medical expert issues a yellow coupon, which is subsequently forwarded to the Registry for the purpose of obtaining an official document that confirms registration. (Apland et al., 2014). However, issues arise when individuals misplace the voucher and are unable to register at the

Registry, while they have already been accounted for. If children are not born in hospitals, witnesses, elders, or village leaders may accompany a family member or compose a letter to the Registry in order to register the child (UNICEF, 2013).

The type of document issued sometimes confuses the citizens as some mistake it to be a birth certificate (Makinde et al., 2016). In Ghana, infants registered at birth are issued with a pink birth certificate which is free. However, a certified copy of entry in the register of births, must later be acquired by the individual which goes with a fee. This deters a significant number of individuals from enrolling in advance to obtain their birth certificates. Consequently, most individuals would choose to postpone their application and opt for a certified copy. This leads to a delay in registration of birth and also adds to inaccurate statistics information in Ghana (Fagernas & Odame, 2013; Owusu-Agyei et al., 2012).

The laws of Ghana mandate that all births and deaths that occur in Ghana are registered according to the Registration of Births and Deaths Act, 2020 (Act 1027). The Births and Deaths Registry is the governmental organisation tasked with the registration of births and deaths. The system functions in a decentralised manner, with the national head office in Accra functioning as the central coordination and administrative hub. The Registry has 16 regional offices, each corresponding to one of the sixteen administrative regions in the country. These offices are equipped with registration facilities that are available at nearly all district levels. While not all districts have a working Registry, the personnel at the District Registration Offices regularly send all registration forms to the Regional Office on a monthly basis. These forms are then processed and sent to the national head office for the compilation of national statistics. The registration records are maintained to safeguard the information for developmental activities across all three levels. As per the terms of legislation 1027, the responsibility for registering births resides with

the parents and, by extension, the family. The prerequisites and characteristics for registration are outlined in the same legislation. Medical officers, midwives, and traditional birth attendants are obligated to report the births they witness to the Civil Registry for official registration.

However, the Ghana Statistical Service (2015) has reported that there is a lack of well-defined policies for national and civil registration. These policies would help to coordinate the roles and responsibilities of institutions involved in registration, as well as those institutions whose mandates are related to civil registration and vital statistics. The majority of these institutions were established following the enactment of the Acts, and they do not have any legally assigned responsibilities in the registration procedures.

2.5. Factors Influencing Birth Registration

This section discusses the various factors that influence birth registration. The factors examined included institutional, social and cultural factors that influence birth registration.

2.5.1 Institutional Factors and Birth Registration

In a qualitative study, Bennouna et al., (2016) used a focus group discussion and adopted the three-delays model to examine the civil registration system in Indonesia. They identified the three delays as deciding to apply for birth certificates, identifying and reaching civil registration offices, submitting the application, and receiving documents. They found that the cost of the registration, distance to the registration centres, application information, and a complex application form obstruct the process of acquiring a birth certificate. In addition, a lack of information about registration procedures also serves as a barrier to birth registration. In terms of the first delay which they term as deciding to apply for a birth certificate, factors such as access to the requirement, access to quality information, and socio-demographic factors were identified to influence birth registration. Distance to registration centres, infrastructure, and transportation also affect birth

registration and this represents the second phase of the three delays where the individual has to identify the office and also decide how to reach the office. The third delay phase focuses on quality of services including time waiting, availability of registration forms at the district office, complexity of procedures and requirements and possession of error-free applications which were identified to influence birth registration.

In an intervention study in Qatar, Al-Kaabi et al., (2019) used a PESTLE and SWOT model to identify factors that influence the birth registration process. In their methodology, birth and death staff were engaged and equipped with the needed information to enable them to work hard to increase efficiency by reducing the length of time used to process a birth certificate. The result of the study shows that there was an improvement in the process of birth registration. For instance, three minutes were spent on data entry instead of the usual 1 day that is used to enter data and verify that all information entered is correct. In addition, most of the clients were satisfied with the changes and the short awaiting time for birth certificates.

In a study conducted by Anaduaka (2016), children in Nigeria were less likely to have their births registered and certified as they near school-going age (6 years) as a result of distance-related barriers. This invariably goes against the mandate of the 2003 Child Rights Act. The inequality in access to public facilities is a major contributing factor as there are few registration centres across the country and as such parents have to travel long distances to have their children registered. In order to mitigate disparities in accessibility, it is crucial to augment the number of registration facilities throughout countries. This will aid in minimising the travel distance for parents when registering their children. Nevertheless, enhancing the accessibility of registration sites necessitates a resolute determination and collaborative endeavours from the Nigerian Government, involving administrative assistance and financial mechanisms. The study not only identified the

inequality in accessing public facilities, but also emphasised the important influence of health service utilisation and socioeconomic status on birth registration in Nigeria. The writers suggest that one effective method to enhance birth registration and certification rates in Nigeria is to incorporate birth registration within educational institutions or non-formal organisations like religious and community groups. This approach would ensure that parents are well-informed on the procedure and advantages of birth registration.

Pelowski et al. (2015), also discovered in a related study in Niger that, although many of the parents are knowledgeable about birth registration, few of the parents get their children registered. This can be attributed to institutional barriers such as distance to and knowledge of registration centres, the cost involved, and the bureaucratic procedures involved in getting a child registered. Some parents hinted that after six months of birth without registering their child meant you are late for registration and had to pay a fine. Due to the cost involved, many parents become discouraged and do not get their children registered. The same issues arose regarding travelling to the registration sites as some parents mentioned not being knowledgeable about where these offices are and the cost of transportation to the offices is also huge for them to bear. This challenge was noted among the rural residents mainly. One of the requirements for registering a child is an identification card for both parents which was also a notable bureaucratic hurdle. Nearly half of these parents hinted at not possessing these identification cards and this was mostly among parents from rural communities who were mostly farmers and some unemployed. Many of these parents had never before needed identification cards and hence there would be an additional cost to acquire one. One major requirement for obtaining these identification cards in Niger ironically is being in possession of a valid birth certificate. This presumably leads to some parents resigning to register the birth of their children altogether because of the fear of paying a fine for their own lack of certification. The lack of clarity surrounding the registration process was also a hindrance to birth registration as

some households claim not to know the requirements and the registration processes involved in registering their births.

In Ghana, Fagernas and Odame (2013) reported that accessibility is a barrier to birth registration, and it has many facets such as the awareness level of parents, distance to and knowledge of registration centres, and the cost involved in getting to the registration centres. These factors have the potential of playing a major role in the determination of birth registration. They further argued that there is a direct connection between health facilities and registration when registration offices are located within the health facilities. Health workers are able to provide information on birth registration and recommend parents or guardians to register their birth.

In Tanzania, Reed et al., (2021) used a mixed-method approach to explore the gap between hospital birth and birth registration in Dar es Salaam. The findings of the study identified some of the barriers to birth registration. Most people viewed the birth registration process as complicated, and confusing and offices are under-resourced to undertake such an exercise. There were few birth registration staff registering people and that undermined the effectiveness and efficiency of their work. In addition, using paper for registration by health workers increased the burden on staff and sometimes there are potential errors and missing files. Lack of training opportunities, distance to registration centres and no formal job descriptions to support birth registration were also identified as barriers to birth registration. They also found some people were not clear on where to get birth registration-related information.

Similarly, in Kenya, using a mixed method design, Mathenge et al., (2013) examined factors associated with low levels of registration of births and deaths in the Kieni East District. The results of the study show that most of the respondents knew that birth registration is only complete upon the acquisition of a certificate. In addition, most people acquire a birth certificate for school

enrollment, and this was followed by the acquisition of identity documents and knowing the date of birth of a child. Despite all the knowledge, respondents indicated that inadequate staff that are unable to serve large clientele at the district level further limits the ability of people to register their births. Also, inadequately trained staff who are not motivated enough to perform their duties, lack of well-established health facility, low demand for registration documents, and registration of births not seen as very urgent hence postponement of registration and the cost of registration of births were cited as the reasons for failure to register a birth. Consequently, these negatively impact the efficiency and delivery of registration services.

According to Ebbers and Smits (2022), the decentralisation of birth registration centres plays a crucial role in facilitating birth registration in sub-Saharan Africa. This allows for more people especially in remote and rural areas to register for their births. Decentralisation is flexible and accessible for the majority of people compared with a centralised system. For instance, they reported that Kenya, Tanzania and Bangladesh have achieved higher registration rates by implementing decentralisation. This approach involves establishing more local registration stations and reducing the number of steps required to complete the birth registration process. In addition, travelling distance to the nearest registry office also affects the cost and information flow of birth registration. The long distances sometimes prevent people from travelling to far areas for registration.

In addition, a study by Abay and Gebre-Egziabher (2020) in Ethiopia found that inaccessibility of the registration offices, thus distance between residence and the office, lack of relevant manpower and political will of the government were the major reasons for gaps in birth registration. In addition, less value attached to birth registration, the existence of insufficient infrastructure and

the number of barriers families encounter during the registration were identified as factors impeding birth registration.

2.5.2 Social Factors and Birth Registration

Evidence shows that social factors such as education and wealth influence birth registration in both developed and developing countries. The social caste system in India has been recognised as a major obstacle to the socioeconomic progress of minority groups since gaining freedom in 1947. Despite the government's efforts to empower lower caste groups and minorities, there are still huge gaps in all measures of development. Children from Scheduled Castes (SC), Scheduled Tribes (ST), or other castes have a reduced likelihood of being registered compared to children from Forward or General castes. Studies have also shown that the social hierarchy in India, known as the caste system, is a strong indicator of the likelihood of receiving safe delivery and post-natal care. Women belonging to the Scheduled Castes (SC) and Scheduled Tribes (ST) are less likely to have access to these services compared to women from the Forward or General Castes. Therefore, it is unsurprising to observe that women belonging to these minority groups are less prone to officially enrol their infants due to their reduced likelihood of utilising post-natal and other related services. This phenomenon can be ascribed to certain cultural customs and a deficiency of adequate knowledge or awareness within some societies (Mohanty & Gebremedhin 2018).

Nomura et al., (2018) reported that wealth has a significant influence on birth registration in Lao PDR. Households with higher wealth were likely to accelerate the registration of a child's birth. They are able to travel far or afford the cost involved in registration of birth. Similarly, Ebberts and Smits (2022) assessed household and context-level determinants of birth registration in sub-Saharan Africa. Household wealth was measured using the International Wealth Index (IWI) which measures the standard of living of households based on durable goods and access to basic

services. The findings of the study show that households with more wealth had increased odds of having a birth registration.

Onagoruwa and Wodon (2021) examined the correlates of birth registrations in East and Southern Africa and the implications for civil registration and vital statistics systems. The findings of the study show that people with a lower wealth quintile were less likely to register their birth than those in a higher wealth quintile. This implies that most people with lower wealth quintiles may find it difficult to register births due to financial constraints. Hence there is a need for an intervention to reduce the out-of-pocket costs and introduce cash incentives to enable people to register their births.

Similarly, Ebbers and Smits's (2022) study using the Demographic and Health Survey (DHS) and Multiple Indicator Cluster Survey (MICS) found that people with higher wealth were more likely to register their births than those with lower wealth quintile in sub-Saharan Africa. In addition, Dake and Fuseini (2018) examined the factors that influence birth registration in Ghana. They reported that the likelihood of births not being registered or without a birth certificate was found to decline with higher household wealth status. This implies that poverty serves as an obstacle for people to register their births in Ghana. Despite the fact that birth registration is free for children under one year after delivery, most people are unable to register.

Moreover, Kumar and Saikia, (2021) examined the determinants of birth registration in India using National Family Health Survey (NFHS-4), 2015. They found that children belonging to a wealthy family were more likely to have birth certificates than those belonging to a poor family.

Also, Bupe Bwalya et al., (2021) examined the demographic and socioeconomic correlates of birth registration and having birth certificates in Zambia, and produced results to show that wealth was associated with birth registration. Children from wealthier families were more likely to

register their children and have birth certificates compared with children from poorer families. They argued that children born to parents who are working may have the means, thus, wealth to register their children for a birth certificate. Most of the parents in their study were working and that could explain the reasons why children from wealthy parents were more likely to register.

Studies conducted on the relationship between parental education and birth registration show that parental education has an influence on birth registration (Mohanty & Gebremedhin 2018; Davis-Kean, 2005). Using data from non-Hispanic European Americans and Africa Americans, Davis-Kean (2005) opined that a mother's education is an underpinning factor that enhances the probability of birth registration. Hence, educated mothers had a higher likelihood to register their children than mothers with no formal education. Also, mothers with some forms of education are likely to be gainfully employed and therefore will have higher household incomes. Maternal education, therefore, increases the purchasing power of women and their service-seeking behaviours. Hence, parental levels of education are closely linked to birth registration outcomes (Elo, 1992; Andrabi et al, 2012). Likewise, studies in Costa Rica found that mothers with some level of education were more likely to register their children compared to mothers with no formal education (Pais, 2009).

Mohanty and Gebremedhin's (2018) study in India found that parental education is positively associated with the likelihood of birth registration. A unit increase in the mother's years of schooling increases the probability of a child been registered by a factor of 1.05 (1.03).

In developing countries, Pelowski et al. (2015), identified that maternal education actually improves the likelihood of children being registered in Kenya. The educational level of mothers was identified as one of the relevant factors that can determine the probability of mothers registering her child. Mothers with some level of education were more likely to register and get

birth certificates for their children than those who had no formal education. They further explain that education has the power to enlighten hence, well-educated women are cognizant of the significance of birth registration for their children. Furthermore, their educational attainment influences their level of awareness and the relevance they attribute to birth registration. Consequently, mothers with a high level of education are more inclined to officially register their children and acquire birth certificates for them. In other related studies, Makinde et al (2016) indicated that education actually enlightens people to acknowledge the relevance of civil registration and hence educated parents are likely to engage in civil registrations in Nigeria.

In Ghana, Dake and Fuseini (2018), reported that mothers with a higher level of education are more likely to have their births registered and issued with birth certificates than mothers with lower levels of education. According to the authors, the education level of women has a significant impact on birth registration in various ways. One such way is that education increases knowledge about the importance of birth registration, which is why educated mothers are more inclined to register the births of their children compared to uneducated mothers. Education has the capacity to enhance the socio-economic standing of mothers and alleviate the economic difficulties linked to registering their children. Some parents face financial difficulties that prevent them from registering their child(ren) for a birth certificate.

Similarly, Amo-Adjei and Annim (2015), reported that parents with some level of education know the relevance of birth registration and would not hesitate to register their children in Ghana. In addition, Ameyibor's (2018) study reported that maternal education in recent years is the principal factor that influences the registration of birth. The findings show that education enlightens mothers to be able to decipher between the advantages and disadvantages of services such as birth registration. Educated mothers, therefore, access these formal services which include antenatal and

delivery services because of the perceived benefits they are likely to derive from them. Most of the educated mothers get information from the health personnel during their encounter at the health facilities. Some health personnel have been trained to register children for birth certificate. In the same way, there are birth and death registration offices located in some of these health facilities, which has increased the chances of children being registered when accessing vaccination and weighing services from the health facilities.

2.5.3. Cultural Factors and Birth Registration

In both developed and developing countries, empirical evidence available shows that cultural factors such as ethnicity and religion are significantly related to birth registration.

Nomura et al. (2018) used data from the Lao Social Indicator Survey and found that ethnicity is a significant predictor of birth registration. This is due to the fact that some ethnic groups are likely to live in mountainous areas, mostly the nomadic populations who are mainly herdsmen who may live far away from social communities with amenities and services, and in routine trek in search of pastures for their cattle may not have any sense of importance attached to the registration of their births. Due to the displacement of these nomads, the likelihood of them registering their children is, therefore, very low (Nomura et al, 2018).

In other related studies, Corbacho and Rivas (2012) also identified in their study in Latin America and the Caribbean, Bolivia, that it is mandatory for the mother and the child to stay indoors for 5-30 days until a family member from the father's side arrives. It is also the grandfather of the child who has the authority to name a child. Hence, as custom demands, they have to wait for his arrival before the child is named. The hairpiece of the child is then cut and shown to the world for the very first time. In situations where there is no father, the family of the child comes together and discusses how to handle the situation. This may stretch the whole process of naming the child by

which time the legal period for birth registration may have passed. Kumar and Saikia (2021) argued that due to the highest preference placed on traditional norms such as naming ceremonies, birth registration tends to be low in some societies.

Agyekum (2006) opinionated that, the cultural settings of people have the potential of influencing their perception in Ghana. Traditionally, children are given names in Ghana during their naming ceremonies and cannot be registered immediately after birth without their names being given at that time. Due to the geographical distance between family and acquaintances, it can often take over a month to arrange a naming ceremony in contemporary society.

With regard to religion, evidence shows that Muslim children are more likely to be registered by their parents than Christian children. In Ethiopia, it is identified that Muslim children have higher chances of being registered and acquiring birth certificates than their Christian counterparts (Wodon & Yedan, 2019). The absence of a functional official registration system for births and other vital events throughout Ethiopia's history, despite the existence of laws and legal frameworks, may explain this situation. With the dominant group and its followers being Orthodox Christianity, their policies on birth registration normally become the norm for registering the birth of children by many of their followers. According to the church doctrine, regardless of the baby's sex, baptism is required for them to be recognised as a member of the Christian community. Christian adherents obtain cards or documents for their children from their church on the day of baptism. These cards are often erroneously assumed to be authentic birth certificates. Owing to this ingrained custom, parents associated with the Christian faith often regard the cards received from churches during baptism as the authoritative birth certificate. Consequently, they fail to comply with the official protocols for registering the birth of their children, despite the existence of established policies and procedures for birth registration (Wodon & Yedan, 2019).

2.6 Parental Demographic Factors and Birth Registration

Several studies have reported the influence of paternal characteristics on their children's birth registration and receive a certificate after the registration (Mohanty & Gebremedhin, 2018). Among these factors, parental age, parental marital status and parental place of residence are the various parental demographic factors that have been examined in this study.

2.6.1. Relationship between Parental Age and Birth Registration

Evidence shows that parental age has an influence on a child's birth registration. The ages of mothers are contributory factors to timely birth registrations. Studies in developing countries show that mothers within the age group of 30-39 are more likely to register the births of their children than those within the age groups 45 years and older (Makinde et al, 2016; Frah, 2015). The probable reason is that mothers in such age groups may be very educated, and this may enhance their awareness of birth registration. Nevertheless, Vietnamese teenage parents are not allowed to register their children in conformity with the laws in Vietnam (Apland et al, 2014). This implies that most teenagers are unlikely to register the birth of their children compared to non-teenagers. Similarly, Atama et al, (2020) conducted a study to analyze the contextual factors that affect the practice of vital registration in Nigeria and discovered that the likelihood of vital registration increases with the age of the parents. This may be because older parents may see the need for it as they have more experiences in life than the younger ones. Also, maternal age was a significant factor for birth registration in the study conducted by Wodon and Yedan (2019). The probability of birth registration was higher among mothers aged 24–28 years and 29–33 years compared to mothers aged less than 24 years. In Ghana, Dake and Fuseini (2018) reported that birth registration is lowest among mothers aged 15-19 years and the lowest registration could be as a result of teenage pregnancy. In addition, less importance attached to birth registration may also limit the ability of teenage mothers to register. Most of these teenage mothers are not married and may

delay in naming their child, which may also affect the registration of their child for a birth certificate.

Similarly, in Ethiopia, Abay et al., (2020) reported that the age of the mother is a very contributory factor in birth registration. Mothers who were 24 years and above were more likely to register their births than those below 24 years. This is because most of the births that occur before 24 years are premarital in nature and mothers do not want to register the birth of their children as their father's name will be required. They, therefore, conceal the father of their children by not registering.

2.6.2. Relationship between Parental Marital Status and Birth Registration

In Nigeria, using a cross-sectional descriptive design among mothers in an urban East Local Government in Edo State, Isara and Atimati (2015) opined that, parents who have married or have ever been married before are more likely to engage in birth registration than parents who have never been married before. This is because, marriage enables information sharing, and as such, parents who have not been married before may not always have someone close to educate them on the benefits derived from birth registrations and hence motivate them to register their birth, therefore, marriage is a predictor of birth registration.

In contrast, a study conducted in Niger by Wodon and Yedan (2019), shows that most women who are not married and have given birth out of wedlock prefer not to register the birth of their children due to the fact that, it is seen traditionally as a taboo to give birth without being married. Hence, most of these women who give birth without being married do not register their births in order not to officially publicize the paternity of their children.

Conversely, Nomura et al (2018) identified in their study that marital status was not a significant indicator of birth registration among parents. This implies that there was no difference in marital status categories with regard to birth registration.

2.6.3. Relationship between Parental Place of Residence and Birth Registration

Empirical evidence available shows that place of residence influences birth registration in developed and developing countries. A study by Mohanty and Gebremedhin (2018), shows that there are notable variations in both geographical and socio-cultural aspects of women's empowerment throughout different regions of India. It has been contended that women in South India possess greater agency in family life, enjoy more autonomy in their mobility, and have more opportunities for exposure to the external world compared to their counterparts in North India. The mobility of mothers is essential for various activities that can improve the well-being of children, including immunisation, health check-ups, and potentially birth registration. A mother who possesses independent mobility can also independently document the birth of her children, without relying on her spouse.

The findings of the study also found that a mother's exposure to the outside world, i.e., whether the mother had travelled abroad and whether she had gone out on family outings are significant determinants of birth registration. In particular, a mother travelling to another state or going on family outings shows that she enjoys more autonomy in the household and hence can undertake such travels and as such interacts with various people and come across different ideas that could enhance the well-being of children. This also indicates a mother who already has significant authority and influence within the household, have influence on decisions regarding her children, such as registering their births.

Conversely, Gupta and Yesudian (2006) found that states situated in the central part of India such as Uttar Pradesh, Rajasthan, Madhya Pradesh, Bihar and Orissa had low empowerment of women and hence women had no say in the birth registration of their children. The findings emphasised the need for initiatives to enhance birth registration and promote women's autonomy in India, taking into account the country's spatial and socio-cultural variations. As such, the writers encouraged that district and regional idiosyncrasies must be taken into account in the design of such policies.

In Nigeria, Atama et al. (2020) found that the place of residence of the parents was significantly associated with civil registrations and that urban dwellers are more likely to register their births than rural dwellers. This is because urban dwellers are better exposed to information and relevance of civil registrations than rural dwellers. Also, rural dwellers may find it difficult to register their births due to the constraint of the financial commitment involved as the rate of poverty is higher in rural areas than in urban communities. Hence, the place of residence of parents can affect the registration of all births in Nigeria.

Furthermore, the place of residence of mothers was also found by Wodon and Yedan (2019) to be a significant indicator of the birth registration of children in Niger. Mothers living in urban areas were found to be 1.5 times more likely to register the birth of their children compared to mothers living in rural areas in Niger. In other words, mothers in urban areas are more likely to register their children and obtain birth certificates for their children than their rural counterparts. This could be due to the fact that urban communities are more aware of the uses and relevance of identity registration, registration offices and the procedures and requirements of birth registration compared to those in rural communities.

Similarly, Dake and Fuseini, (2018) reported that there are spatial variations in birth registration status along a north-south divide in Ghana. There are lower levels of birth registration in the southern part of Ghana as compared to the northern part of the country. The reason is that there are interventions and research efforts in the Northern part of the country by numerous organizations including UNICEF, Plan International and the Community-based Health Planning Services (CHPS) Programme than there are in other areas of the country. This may therefore lead to higher levels of birth registration in the northern part of Ghana compared to the southern.

Ameyibor (2018) also identifies the place of residence of the parents as one of the major influencers of birth registration in Ghana. The Greater Accra Region had the highest number of parents who have registered their births with the Western Region having the lowest record of birth registration. This was a result of several factors such as inaccessibility to health facilities and the Births and Deaths Registry Offices. The Upper West Region had the second highest number of parents who had registered their newborns and it could be attributed to the numerous intervention packages from non-governmental organizations such as UNICEF and the Plan international as has earlier been explained.

2.6.4 Place of Delivery and Birth Registration

There is a high probability that the place of residence of the parents influences the place of delivery of children. The place of delivery has also been identified as having the potential to increase the likelihood of children being registered. When children are delivered in hospitals, there is an availability of health personnel who are knowledgeable and have also been trained to register births (Adi et al, 2015; Fagernas & Odame, 2013; Pais, 2009). On the other hand, for indigenous women, home delivery is preferred as a result of it being part of their traditional practices such as staying by the fire during the perinatal period. Such people are not knowledgeable about birth registration

and hence will not register their live births immediately (Nomura et al., 2018). In some traditional communities also, women are obligated to deliver in their homes according to indigenous rituals. This ultimately prevents such mothers from utilizing health facilities and getting their newborns registered immediately after birth (Corbacho & Rivas, 2012).

2.6.5 Economic Factors and Birth Registration

Evidence shows that the economic situation of parents and caregivers affects birth registration. In most sub-Saharan African countries, registration of births involves a fee that sometimes deters people from registering. Aside from the direct cost, there is an indirect cost of travelling to register a birth mostly in rural areas (Lieke et al., 2020). Both the direct and indirect costs are higher for the poor as they are disadvantaged and are located far away from registration offices. The mother's socioeconomic status such as her ability to move around independently and her exposure to the outside world significantly raises the probability of birth registration. However, the marginal effects of the maternal autonomy indicators i.e., the mother's ability to move around freely and her control over resources, on birth registration vary across districts in India. Also, a mother with a greater degree of autonomy in the house such as having a higher decision-making power on issues such as the purchase of property/land, wedding expenses, what to do if a child falls sick and whom the child should marry have greater access and control over economic resources in the household which could motivate her to register her child for a birth certificate. Hence, mothers with autonomy could allocate more resources towards their children and would be more likely to register their children by bearing the direct and indirect costs that might come with it (Mohanty & Gebremedhin, 2018).

In a related study, Anaduaka (2016) identified that children from average and rich households in Nigeria have higher odds of their births being certified than those from poor households. In

addition, the age of the child, higher birth order, longer birth intervals, polygyny, having at least two dead siblings, father being employed in a low-skilled job, living far from a registration center and in a poor community are all risk factors that can affect birth certification. Maternal and paternal age at birth has non-linear, notwithstanding weak effects on birth certification.

Furthermore, evidence shows that economic hardships experienced by parents prevent them from having their newborns registered. In the midst of severe poverty, some parents even abandon their children on the streets with no documents. Some parents may even end up developing addiction problems (alcoholics), thereby even forgetting their very own children and their details due to their circumstances (MHAI, 2010; Bhatia et al., 2017).

On the other hand, registration of birth also involves monetary commitment which sometimes serves as a barrier and hence, most individuals with lower income are not able to get their children registered (Dake & Fuseini, 2018; Adi et al, 2015). Although most countries have legal time frames for registering their newborns which is cost-free, citizens are not able to take advantage of it due to barriers such as accessibility to the registration centres, which may involve the cost of transportation. People, therefore, most of the time end up paying penalties for the same service they would have enjoyed for free (UNICEF, 2013; Makannah, 1981).

According to Pelowski et al., (2015), the majority of the people who do not register their births hail largely from the rural regions in Kenya. Most of these people were also predominantly farmers as opposed to professionals or other skilled workers. In addition, a large number of these people also had no or only a primary level of education. Most of them were also likely to have given birth at home as opposed to hospitals. Other socioeconomic factors that affected parents and hindered them from registering the birth of their children were financial constraints, distance to the

registration centre, lack of awareness about the importance of birth registration and bureaucracy associated with the registration process.

Similarly, Amo-Adjei and Annim (2015), reported that almost half of all Ghanaian children born between 2001 and 2006 had not been registered. This could be a result of the cost of registration of children and a lack of knowledge about the need and relevance of getting children registered. The discrete choice modelling analysis in the study also showed that these children had higher chances of not being registered at all if their parents and heads of household are affiliated with traditional religion and are residing in rural communities that are poorer and also less educated.

2.6.6. Child Characteristics and Birth Registration

According to Wang (2002), less than 50% of rural children are registered within a year and less than 20% within a month after birth. This is much lower than birth registrations among children born in urban centres comparatively. In China, due to the fact that rural children form a large percentage of all children, the current deficiency in birth registrations could be attributed to the low registration of births in these rural communities. Similarly, Kumar and Saikia (2021) explained that there is low registration of births in rural areas in India due to the distance to the registration centres. There are few registration centres in the rural areas, and this makes parents or rural dwellers cover more distance to register births. Comparatively, in urban areas, most births are registered at the health facilities, and this reduces the burden of people covering the distance for birth registration.

Furthermore, birth registration is lower in girls than in boys in China. In a study conducted to examine the extent of the unregistered population over the previous ten years, it was discovered that 70–80% were females. Many regions in China face this same problem but to different extents. It is even far worse in the case of migrant workers' children, out-of-wedlock or out of plan children,

and adopted children. With economic development and increment in the rate of migration as the years go by, the number of migrant workers will increase, and the problem of birth registration of their children will become increasingly serious, as long as effective measures are not implemented to help curb this situation (Li et al., 2010). In contrast, Kumar and Saikia (2021) found that in India, the registration of females is higher than males and this could be attributed to financial schemes such as Balika Samridhi Yojna towards the registration of females. Females are entitled to 500 rupees post-birth and a scholarship from the government to complete certain years of schooling.

Anaduaka (2016) opined that a child under five years who had a skilled attendant at birth, underwent vaccination, and had maternal access to prenatal visits at the hospital have higher odds of having their births certified. Also, children that are born to educated parents have higher chances of birth registration than their counterparts that are born to parents with no education. Children that are from average and rich households also have higher odds of their birth being registered than those from poor families in Nigeria.

Dake and Fuseini (2018), identified that the sex of a child does not determine whether or not the child's birth is registered in Ghana as has been reported in earlier studies conducted in China, South Africa and India. They however identified that children are less likely to be registered in the first year of their lives. This indicates that most birth registration and certification in Ghana are not carried out for children rather than the desired ideal early registration. This is because to most people, birth certificates become useful as the child grows older and accesses social services such as enrolling in school or acquiring a passport. This, however, has the tendency of negatively affecting the chances of birth being registered early as it is the accepted practice than to register it later in life.

Similarly, Kumar and Saikia (2021) reported that children who are 1-3 years have a higher likelihood of birth registration than children below one year. Parents do not register their children after birth, but the likelihood of registration increases when the children seek school admission or start to enjoy the social and health amenities that require registration of birth.

2.6 Gaps in the literature

Despite the extensive amount of literature on birth registration, this review reveals important gaps that still exist in the literature. The first major gap is that there is paucity of literature on the socio-cultural factors affecting birth registration. Most of the studies on social factors are quantitative in nature in sub-Saharan Africa, including Ghana. Hence, there are no qualitative studies exploring the social and cultural factors affecting birth registration using qualitative method.

In addition, there are few studies on the institutional factors affecting birth registration in sub-Saharan Africa. In Ghana, there is no study examining the institutional factors affecting birth registration. Yet, understanding and addressing institutional factors affecting birth registration is very important to improve access and registration of births for birth certificate.

Finally, few studies have used mixed methods to examine the social cultural factors affecting birth registration in SSA and Ghana. This study therefore seeks to use mixed methods to holistically understand the social, cultural and institutional factors affecting birth registration in Ghana.

2.7. Theories of Birth Registration

For the purpose of this study, the following theories on birth registrations are discussed: the three delays model, rational choice and the social behaviour model. The major propositions of these theories and their relation to the present study are discussed in the subsequent section.

2.7.1. Three Delays Model

The Three Delays Model detects three crucial phases during which delays may occur in the health care delivery process. The model was propounded by Thaddeus and Maine in 1994. The model outlines relevant factors that contribute to maternal deaths. The first phase of the delay is the delay in deciding to seek care on the part of the individual, the family, or both the individual and the family. Phase II delay is the delay caused when the individual fails to reach an adequate healthcare facility on time. The final phase is a delay caused as a result of failure to receive prompt adequate care at the health facility.

For the purpose of this study, health care is substituted with birth registration (Cheong & Baltazar 2021). The model has been adopted to use in examining civil registration. For instance, Bennouna et al., (2016) and Cheong & Baltazar (2021) have used the three-delay method to examine factors associated with birth registration.

In this study, the first delay could be related to the delay from the individual, regarding the person's decision to register his/her child for a birth certificate. There are several factors that could account for this including delay in the naming of the child and other personal factors such as the education, marital status, religion, culture, age of the child and others.

The second delay is caused after an individual has decided to register the birth of a child but fails to reach the registration centre on time. In this study, we identify household wealth, distance to

registration centres, access to registration centres and other macro and micro factors to account for the delay in the person not being able to reach the registration centre.

The final delay could be the failure of an individual to either register or receive the birth certificate of his/her child. This could be the result of institutional delays such as delays in registering clients, delays in processing client information, technology, policy and other factors. It is therefore conceptualized that all these factors such as demographic, institutional, sociocultural, economic and others account for the delays for a person to register or receive a birth certificate.

2.7.2. Rational Choice Model

The Rational Choice Theory is a classical crime theory opined by Cesare Beccaria in 1764. The theory assumes that criminal laws reflect the terms of a social contract between members of society and the State, and it is based on the assumption that individuals are rational and free of will and hence completely responsible for their own actions. Crime is therefore seen as the consequence of the free and rational choices of the perpetrator. The core idea behind classical criminal theory is the proportionality of the punishments assigned to the preceding crime. The level of the sanctions therefore must be based on the crime caused and not the acting individuals. The theory was to promote equity in the classical periods where sanctions could be meted out equally and only the deed itself sets apart criminals from the non-criminals (Matsueda, 2009). Equal crimes, therefore, must receive equal punishments consistently which must also be guided by precise written criminal regulations. Hence, the arbitrary use of justice and overly harsh and inappropriate punishment must hence be banned. The writing of Beccaria was an attempt to reform the unjust and brutal legal system in the eighteenth century in Europe by developing a rational system in which laws are specified clearly so that individuals have full information about the consequences of their acts. The rational choice theory was instigated in the late classical century with the work of Cesare Beccaria

but since then has been adopted in studies of economics and law (Muth, 1961; Merton, 1973; Ellickson, 1989).

According to Green and Fox (2007), individuals are rational and have reasoning faculties to make decisions based on the benefits and cost as well as the means and ends based on three actors. The actors comprise interest, consequence and alternatives. To start with, when an individual wants to register the birth of a child, he/she will consider the consequences of registering the birth and make a choice whether to register or not. Matsueda (2009) also argued that happiness is a composite of maximum pleasure and minimum pain, so when parents consider gaining maximum benefits from registering the birth of their children, they go ahead to do so.

Similarly, Corbacho and Rivas (2012) considered parents' rationality as a determinant of birth registration. In their writing, they stated that parents make comparisons of the means and ends when deciding to register a child's birth. They also identified in their study that, rational parents being aware of the benefits of birth registration, would bear the cost of registering their children when the costs are lower.

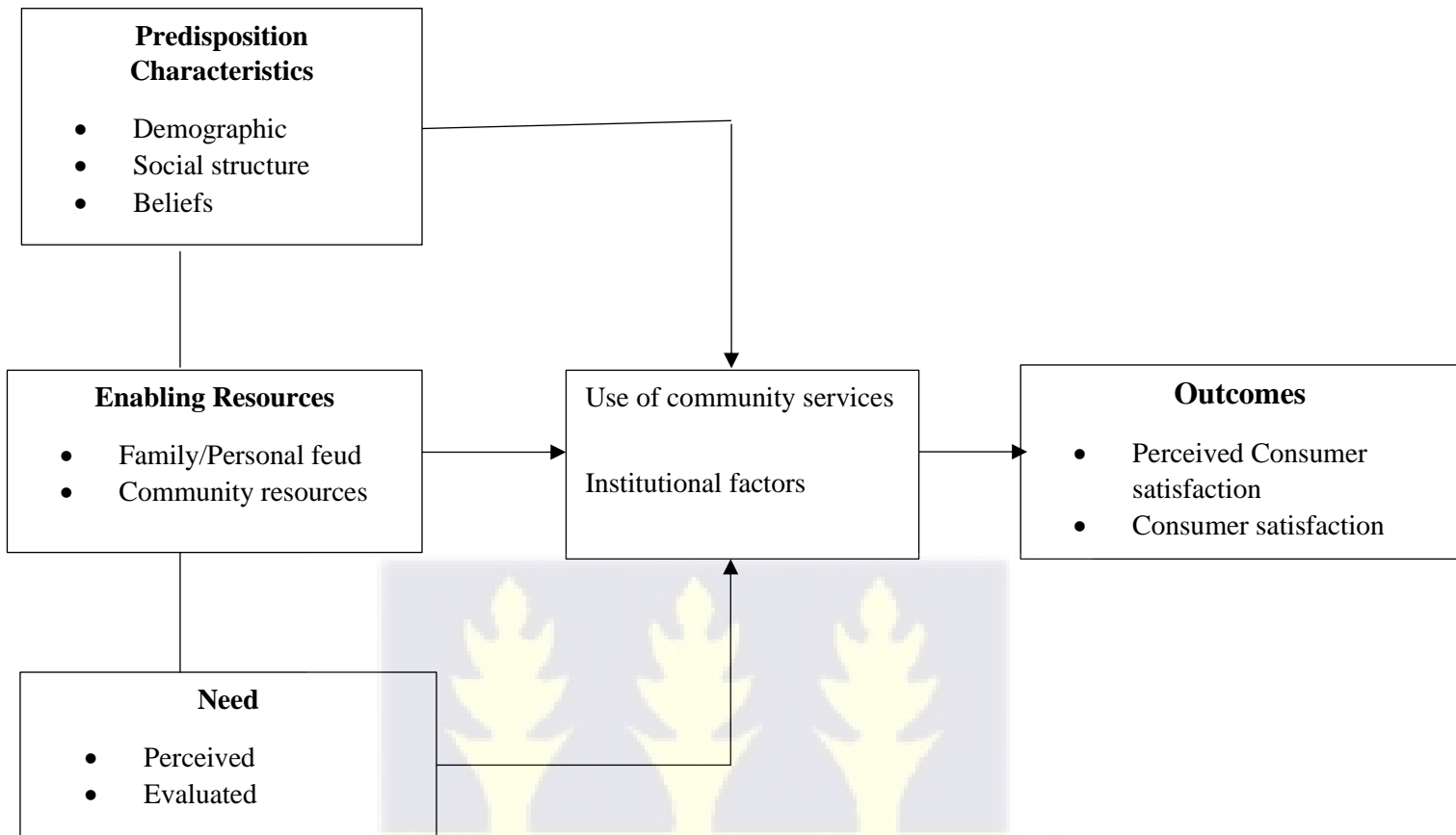
2.7.3. Social Behaviour Model

The Andersen–Newman Behavioral Model of Health Service Use was instigated by Andersen and Newman in 1973 (Bradley et al., 2002). It is believed that this conceptual model has an appropriate conceptual basis for examining and understanding human behaviour, specifically that of the patient within the patient-physician relationship. In contrast to other theories, the Andersen–Newman Behavioral Model of Health Service Use is appropriate to identify the factors that have an influence on birth registration. Consequently, the predisposition of the individual such as the level of education among others may influence them to register the birth of their children. This is because

education enlightens and enhances an individual's ability to understand concepts facilitating birth registration. Over time the model has been updated from concentrating on the family as the unit of analysis to focusing on the individual as the unit of analysis (Andersen & Newman, 2005).

The model is categorized into three factors that influence a person's behaviour, namely, the predisposing, the enabling, and the need factors, of which the concept of the predisposing factors was adopted in the study as shown in Figure 2.1 below (Anderson, 1995; Anderson & Newman, 1973). The predisposing factors specify that individuals are more disposed to access services based on their personal characteristics such as experiences, marital status and education (Wacker, Roberto & Piper, 2007). From Figure 2.1, the concept of predisposing factors consists of demographic factors and social structure characteristics such as ethnicity, marital status and education. Hence an educated person who might have used a birth certificate in his/her schooling process will consider birth registration as a necessity as a result of his/her personal experiences. Also, a woman may become aware of the birth registration system because she delivers at a health facility (Adi et al., 2015; Brito et al., 2012; Petrovic & Blank, 2015). Similarly, when individuals wish to register their births, they rationally consider the consequences of registering their births timely if only they understand the alternatives before them and make their decision based on it (Green & Fox, 2007). Although this is a process of rationality, (Quackenbush, 2004), it is influenced by the personal characteristics of the individual such as education, age and marital status. These characteristics would lead the individual to arrive at a decision based on beliefs, personal resources and many others (Anderson, 1995).

Figure 2.1: Framework Depicting the Social Behaviour Model



Source: Adapted from Anderson (1995)

The Three Delays Model focuses primarily on barriers related to the birth registration process, such as delays in deciding to seek registration, reaching the registration facility, and receiving adequate services. However, it does not consider the decision-making process and the underlying factors contributing to these barriers.

Rational Choice Theory complements the Three Delays Model by elaborating on the decision-making process. It explains how individuals weigh the costs and benefits of registering a birth which in turn influences the barriers encountered during the registration process.

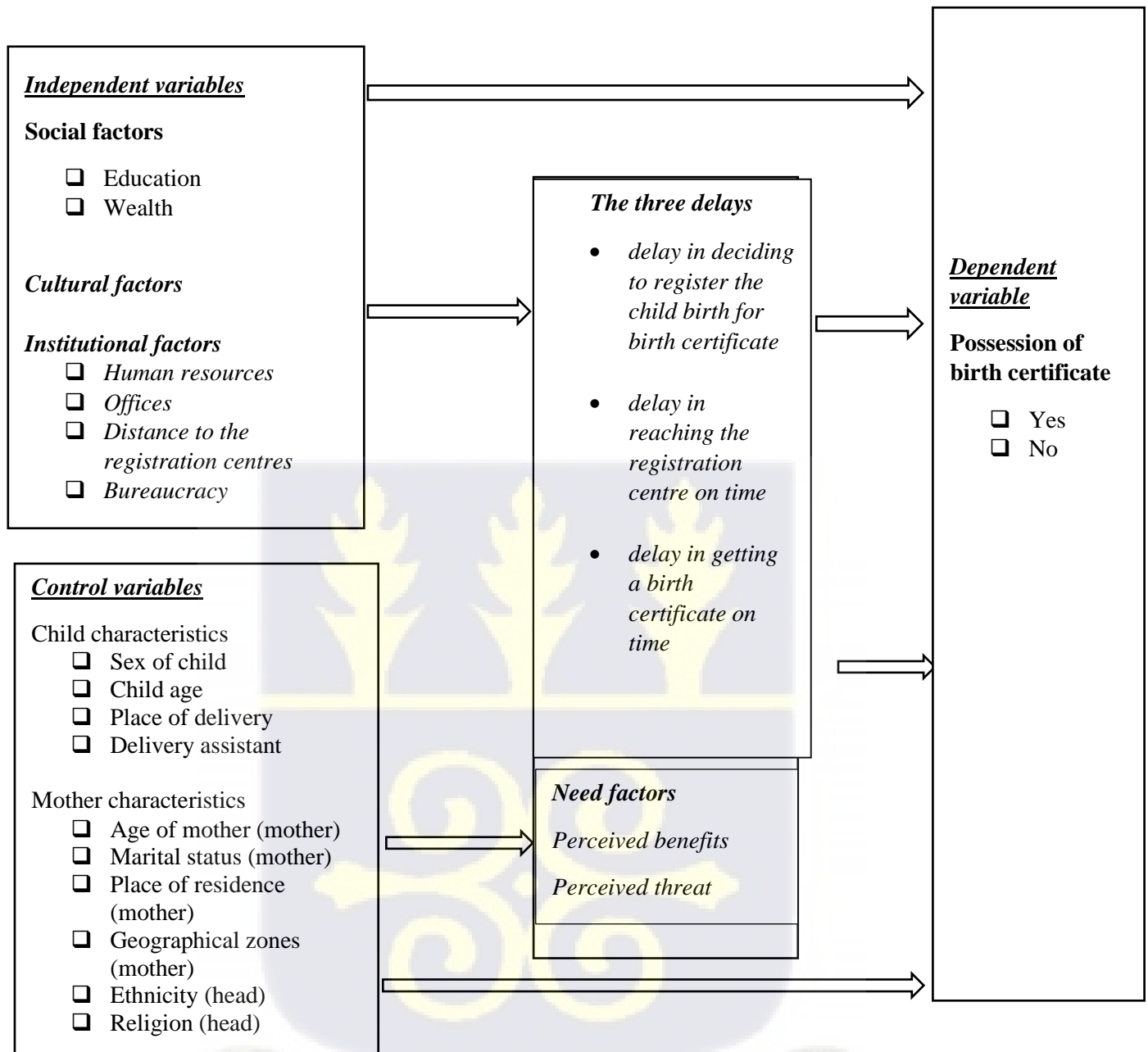
Social Behaviour Theory explores the predisposition and enabling factors that affect birth registration. These factors include background characteristics such as social norms, cultural beliefs, and interactions within social networks. This theory examines how social norms and interactions shape behaviours and decisions related to birth registration

The theories contribute to the framing of the research questions. These integrated approaches provide an understanding of the social and cultural factors influencing birth registration. For instance, the three delays help to understand where and why delays in birth registration occur. The rational choice theory helps to understand some of the social factors related to birth registration, while the social behaviour theory explores the social norms and interactions that shape behaviour towards birth registration

2.8 Conceptual Framework

The conceptual framework for this study is adapted from the three delays model, social behavioural model and rational choice model. The integration of these models provides a holistic approach to the understanding of socio-cultural and institutional factors contributing to birth registration in Ghana. From Figure 2.2, independent variables (social, cultural, institutional) have an influence on the dependent variable, birth registration. Also, there are other variables that have an influence on a birth registration, which are also controlled for. These variables are the age of the mother, marital status, region of residence, place of residence and place of delivery. In addition, there are other variables (the three delays and need factor) that mediate between the independent and dependent variables. Aside the cultural, institutional factors and mediating variables which will be examined solely with qualitative methods, all other variables will be examined using both the qualitative and quantitative methods.

Figure 2.2: Conceptual framework showing the relationship between socio-cultural and institutional factors associated with birth registration in Ghana.



Source: Adopted from Anderson (1995)

The framework posits that there is an interaction between factors at each level of the model which could influence possession of a birth certificate directly or indirectly. The independent and control variables could exert an influence on possession of birth certificate through the three delays and

need factors. There is also a recognition that there could be a direct influence of the independent and control variables on possession of birth certificate without the recognition of the three delays and need factors.

Social factors have been shown to influence birth registration. Parents or guardians with some form of education are more likely to reduce delays and obtain birth certificates for their children than others with no education. This is because education makes it easier for women to access and understand information about the importance of birth registration, which enables them to make informed decisions to register the birth of their children. In addition, wealth has been noted to have an influence on birth registration. Parents or guardians belonging to the rich household wealth quintile are more likely to be able to afford the processing fees for birth certificates. On the other hand, evidence shows that individuals with no education and people from poor households are less likely to register their child (ren) for a birth certificate. Persons with no education may not see the relevance of registering their children for birth certificate while poor people may be limited by financial constraints to register their children for birth certificates (Ebbers & Smits, 2022; Mohanty and Gebremedhin 2018). Though these associations have been investigated previously, there is a tendency that there could be divergence from previous studies because of the changing nature of society. Again, the context of these studies could account for the variance or divergence.

Cultural factors such as religion and ethnicity have an influence on birth registration. For instance, sociocultural factors like the early naming of a child and religious activities influence the registration of births (Kumar & Saikia, 2021; Wodon & Yedan, 2019; Nomura et al, 2018).

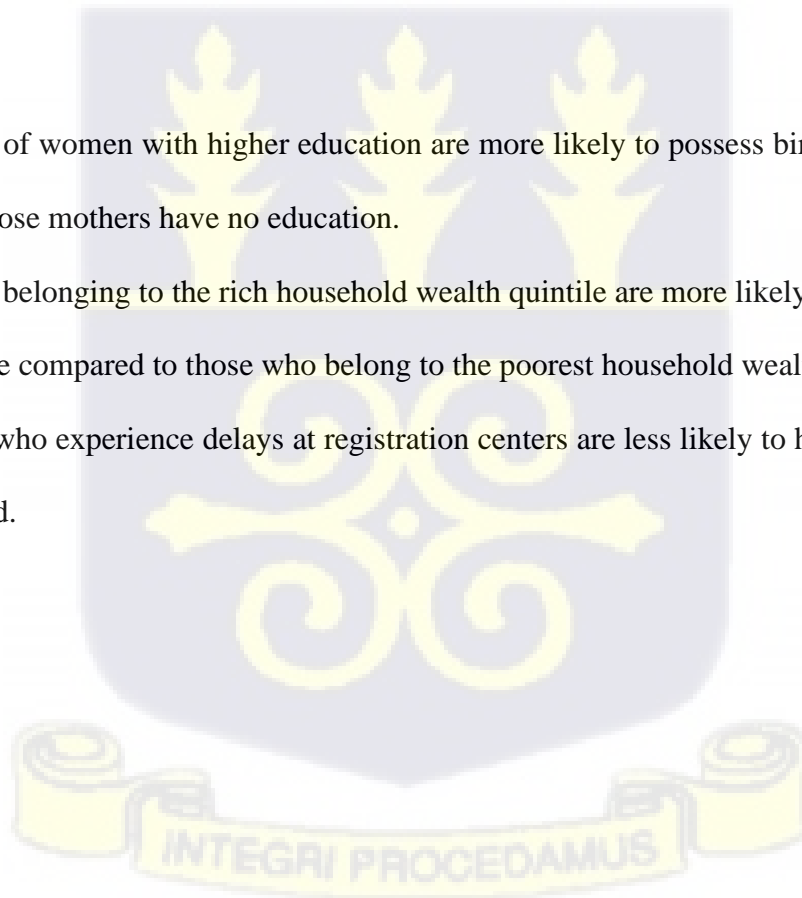
Evidence from the literature has shown that institutional factors such as human resources, offices, distance to the registration centres and bureaucracy have been noted to have an influence on birth registration. Favourable factors such as closeness to registration centres, technological

improvement, human resources and reduction of bottlenecks to parents or guardians would enable them to register than unfavourable factors (Reed et al., 2021; Abay & Gebre-Egziabher, 2020; Mathenge et al., 2013).

In addition, the study recognizes the relevance of other factors that were not of main interest, hence, these factors have been controlled for in the study. Evidence from the literature shows that the age of the mother, marital status, region of residence, place of residence and place of delivery have an influence on birth registration. These factors may either increase or decrease the likelihood of someone registering the child (ren) for a birth certificate (Anaduaka 2016; Mohanty & Gebremedhin., 2018; Nomura et al., 2018; Li et al., 2010).

2.8 Hypotheses

- i. Children of women with higher education are more likely to possess birth certificate than those whose mothers have no education.
- ii. Children belonging to the rich household wealth quintile are more likely to possess a birth certificate compared to those who belong to the poorest household wealth quintile.
- iii. Women who experience delays at registration centers are less likely to have their children registered.



CHAPTER THREE

METHODOLOGY

3.1 Introduction

This chapter details the study's methodology, including the study area, study design, source of data, method of sampling, and methods of data analysis. The quantitative methodology is discussed first, and the qualitative methodology follows this.

3.2 Study Design

This study adopted an explanatory sequential mixed method, using both quantitative secondary data and qualitative data to examine the socio-cultural and institutional practices associated with birth registration in Ghana. An explanatory sequential mixed method starts with a quantitative method, where the data are collected, analysed and explored in detail to identify the pattern of responses. Qualitative data are then collected to explain patterns identified in the quantitative results (Cresswell, 2003). In this study, the quantitative data were first analysed to examine the pattern of responses, after which the qualitative interview guide was designed based on the quantitative results to solicit responses to explain the quantitative findings. The quantitative part of the study used the 2017/18 Multiple Indicator Cluster Survey (MICS). The qualitative part of the study used primary data from interviews conducted in three regions in Ghana. The country was zoned into three geographical zones: Coastal, Middle and Northern. After which, two districts/municipals/metropolitans, one with a high and the other with a low birth registration coverage, were selected from each region based on the 2021 birth registration report (BDR, 2021).

3.3 Quantitative Data

3.3.1 Study Setting

The setting for the entire study is Ghana. Ghana is located in West Africa on the Gulf of Guinea. It shares borders with Togo, Cote d'Ivoire and Burkina Faso. Ghana lies on latitude 7.9465 North and Longitude 1.0232 West. The 2021 Population and Housing Census report shows that Ghana had a population of 30,832,019 in 2021 (GSS, 2021). The report further shows that there were more females (50.7%) than males (49.3%), with a sex ratio of 97 males for 100 females. Ghana currently has 16 administrative regions (Greater Accra, Central, Eastern, Volta, Oti, Northern, North East, Upper East, Upper West, Savannah, Bono East, Bono, Ahafo, Ashanti, Western North and Western region). Less than one-fifth of the population of Ghana live in the Greater Accra Region (17.7%) or Ashanti Region (17.6%), with the Ahafo Region (1.8%) having the least share of the population. Moreover, more than half (56.7%) of the population lives in urban areas (GSS, 2021). In terms of ethnicity, about 45.7% of the population were Akans, 18.5% were Mole Dagbani, 12.8% were Ewe, 7.1% were Ga-Dangme, and the rest belonged to the other ethnic groups. In terms of economic activity, about 50.3% of the active population were employed. Specifically, about 32.0% were engaged in skilled agriculture forestry and fishery, 26.4% were engaged in service and sales, 16.1% in craft and related works, 8.4% were in professional work, 6.2% in the plant and machine operators and a small proportion into elementary occupations, clerical support workers, managers and technicians (GSS, 2021). According to the 2021 Population and Housing Census, 69.8% of the population is literate. Also, 39.8% of the population had attended school in the past, 39.4% are attending school now, and 20.8% have never attended school (GSS, 2021). Figure 3.1 is a map of Ghana showing the geographical location of the sixteen regions in the country.

Figure 3.1: Map of Ghana showing the sixteen (16) administrative regions.



Source: Ghana Statistical Service, (2021)

According to the 2022 Ghana Demographic and Health Survey, the fertility rate (TFR) was 3.9 children per woman (GSS et al., 2023). The under-five mortality rate was estimated at 40 deaths per 1000 live births, while neonatal mortality was estimated at 17 deaths per 1000 live births.

According to the 2017 Maternal and Health Survey, about 98% of women between the reproductive ages of 15 and 49 years attended antenatal care clinics, while almost eight out of ten women deliver at a health facility (GSS et al., 2018).

3.3.2 Sources of Data

The 2017/2018 Ghana Multiple Indicator Cluster Survey (MICS), a nationally representative data, was used for this study. The 2017/2018 Multiple Cluster Survey is the sixth round of the MICS in a series of data collected by the Ghana Statistical Service in collaboration with other governmental agencies such as the Ministry of Health, Ministry of Education, Ministry of Sanitation and Water Resources, Ministry of Gender, Children and Social Protection and Ghana Health Service with government funding and financial support from UNICEF, KOICA, UNDP, USAID and the World Bank through the Statistics for Results Facility – Catalytic Fund (SRF-CF) (GSS et al., 2018). The survey collected information on household characteristics, water quality, reproductive health behaviour, child labour, child functioning, substance abuse, birth registration and early childhood development. MICS data set was considered the most appropriate for its comprehensiveness in collecting data on birth registration and also being the most recent at the time of the thesis

3.3.3 Sampling Design

The 2017/2018 Multiple Indicator Cluster Survey (MICS) used a two-stage sampling design to select households. The 2010 Population and Housing Census frame was used to select enumeration areas with probability proportional to the size of the enumeration area. The primary sampling units were the enumeration areas defined for the 2010 Population and Housing Census enumeration areas. The selection of the enumeration areas was stratified by the then ten (10) administrative

regions (Ashanti, Brong Ahafo, Central, Eastern, Greater Accra, Northern, Upper East, Upper West, Volta, and Western) and type of locality (urban/rural). In each region, rural and urban enumeration areas (EAs) were selected (GSS et al., 2018).

The first stage involved selecting clusters of EAs and listing households in the selected EAs. In all, a total of 660 clusters, 318 in urban areas and 342 from rural areas, were selected for the study. A household listing was done within the selected EAs and the listed households were divided into two strata households with and without women aged 20-24 (GSS et al., 2018).

After the household listing, households were selected at the second stage. Sampling was done in the EAs. Separate households with and without women aged 20-24 were selected from each strata using systematic sampling in each EA. About 20 households were sampled in each cluster of an EA; a total of eight households with women aged 20-24 years were listed from each cluster and 12 households without women aged 20-24 years were selected from other strata. In all, 20 households were selected from 660 clusters, resulting in 13,202 households (GSS et al., 2018).

Interviews were conducted in the selected households with women aged 15-49 and men aged 15-59. Standardized training was provided for interviewers. The questionnaire which was first written in English was translated into local languages during the interviews. Out of the 13,200 eligible households selected, 12,886 households were successfully interviewed. Hence, the interview response rate was 99.4%. The unit of analysis for this study is children under five years old. All under five years children from the 2017/18 Multiple Indicator Cluster Survey dataset were used in the analyses.

3.3.4 Measurement of Variables

The selection of the dependent, independent and control variables for this study was based on the literature review and their measurement is subsequently presented below.

3.3.4.1 Dependent Variable

The dependent variable for this study is the possession of a birth certificate. This was generated from the question, “Does (NAME) have a birth certificate? Responses to this question included three categories: (a) Yes, seen (b) Yes, not seen (C) No. The responses were re-categorized into two: Yes and No. Respondents who indicated Yes, seen and Yes, not seen were put together as “Yes, having a birth certificate,” while those who indicated No were classified as “No”, not having a birth certificate.

3.3.4.2 Independent variables

The independent variables for this study are social, cultural and institutional factors.

Social factors were measured using the education of mothers and the household wealth quintile. With regard to education, mothers were asked about the highest level of school they have attended. The responses were no education, early childhood education, primary, middle, Junior High School (JHS), secondary/technical/vocation/commercial. Education was recategorized as “no education,” “primary,” “secondary” (secondary/technical/vocation/commercial and senior high school/technical/vocation/commercial) and “Higher”.

In terms of household wealth status, respondents were asked about possession of some household assets, including having a refrigerator, freezer, black and white television, colour television, LCD/LED/PLASMA or SMART TV, electric generator, washing machine, audio player/deck, DVD/VCD/VER/Blue-ray, Water cooler, Water pump, electric fan, air cooler, food processor/blender and air conditioner. A factor analysis was used to create a wealth status and was classified as “poorest”, “poor”, “middle”, “rich” and “richest”.

The cultural factors were measured qualitatively. Participants were asked about the cultural practices and beliefs prohibiting or enabling them to register their children for birth certificates.

Institutional factors were also measured qualitatively. Some factors considered include human resources, offices for birth registration, distance to the registration offices/centres, and bureaucracy in processing documents, among others.

3.3.4.3 Control Variables

The study controlled for variables that influence birth registration in Ghana. These variables were selected based on the literature review: child and mother characteristics.

The child's characteristics include the age and sex of the child, place of delivery, delivery assistant, place of residence, and geographical location of the child. The child's sex was categorized as “male” and “female”. The age of the child in years was categorized as “0-11 months”, “12-23 months”, “24-35 months”, “36-47 months” and “48-59 months”. Place of delivery was categorized as “private health facility”, “government health facility” and “home”. The personnel who assisted with delivery were classified as “medical officer”, “nurses”, “traditional birth attendant”, “no one” and “other”. In addition, place of residence of the child was categorized as “urban” and “rural”. The region of residence of the child was categorized into three geographical locations namely, “Coastal zone (Greater Accra, Central, Western, Volta)”, “Middle zone” (Eastern, Ashanti, Brong Ahafo) and “Northern zone” (Northern, Upper East and Upper West).

The mothers' characteristics include age, marital status, ethnicity and religion. The age of the mother was categorized as "15-19", "20-24", "25-29", "30-34", "35-39", "40-44" and "45-49". Mothers were asked about their marital status, and this was categorized as "ever married", "currently married," and "never married". For ethnicity, the mothers were asked, "what ethnic group they belong?" The responses were Akan, Ga/Adangbe, Ewe, Guan, Gruma, Mole Dagbani, Grussi, Mande and others. The responses were recategorized into Akan, Ga/Adangbe, Ewes, Guan, Gruma, Mole Dagbani, Grusi and others comprising Mande and other smaller ethnic groups. Also, mothers were asked about their religious affiliation. The responses were Catholic, Anglican, Methodist, Presbyterian, Pentecostal/Charismatic, other Christians, Islam, Traditional/spiritual and No Religion. This was categorized as "Protestant" (Methodist and Presbyterian), "Orthodox" (Anglican and Catholic), Pentecostal/Charismatic, Islam, Other Christians and other (traditional/spiritual and no religion).

3.3.5 Method of Data Analysis

Descriptive statistics such as frequencies and tables were used to describe the variables at the univariate level. Cross-tabulation and chi-square tests were used at the bivariate level to determine the association between birth registration and the independent and control variables. Lastly, binary logistic regression was used to examine the factors associated with birth registration. A binary logistic regression was chosen because the dependent variable was dichotomous. The study, therefore, predicts the factors associated with birth registration in Ghana. The analysis was conducted at a significance level of 0.05 (95% confidence interval).

3.4 Qualitative Data

3.4.1 Research Design

Based on the quantitative findings, individual interviews were conducted to explore the factors associated with birth registration. The interviews focused on social, cultural, and institutional factors that influence birth registration. In-depth interviews were conducted with parents/guardians with children less than five years old in the three selected regions. The cultural and institutional factors were mainly examined using the qualitative approach. However, social factors examined using the quantitative approach needed further explanation and necessitated using the qualitative approach to explore further. In addition, only wealth and education were examined as social factors. The qualitative research aided in exploring other social factors aside from education and wealth that influence birth registration

3.4.2 Study Area

The qualitative data for this study are from three regions in Ghana. Greater Accra is currently the most populous region in Ghana. It is the administrative capital of Ghana. It is located in the southern part of the country. The selection of the regions and districts was guided by data from the Birth and Death report (BRD, 2021). Within the region, Accra Metropolitan Assembly and Shai Osudoku District were selected for the study based on data from Births and Deaths Registry.

Accra Metropolitan Assembly is bounded to the north by Ga West Municipal, West by Ga South Municipal, the south by the Gulf of Guinea and the East by La Dadekotopon Municipal (GSS 2013). It covers a total land area of 139.647 km². According to the 2021 Population and Housing Census, the Metropolis had a population of 284,124, representing 5.2% of the total population in the region (GSS., 2021). The Metropolis is entirely urbanized. The total fertility rate is 2.2 which is lower than the regional average of 2.6. The report further showed that

accident/violence/homicide/suicide accounts for 12% of all deaths while other factors account for 88%. In terms of population distribution, children constitute about 35.5% (GSS 2014a). The average household size is 3.7 persons per household. The 2010 Population and Housing Census showed that about 36.3% of the population aged 12 years and above were married, 48.5% were never married, 5.6% were in consensual unions, 3% were divorced and 2.6% were separated (GSS 2014a). In addition, about 89% of the population aged 11 years and above were literate while 11% were non-literate. Regarding economic activity, 70.1% of the population aged 15 years and older were economically active while 29% were not. Also, 3.2% of the households were engaged in agriculture (GSS 2014a).

Shai-Osudoku District is located in the South-Eastern part of the Greater Accra Region (GSS 2014b). The district covers a total land area of about 968.361 square km. The capital town of the district is Dodowa. The district shares boundaries with the North Tongu District to the North-East, Yilo and Lower Manya districts to the North-West, Akwapim North District to the West, Kpone Kantamanso District to the South-West, Ningo Prampram District to the South and the Ada West District to the East (GSS 2013). According to the 2021 Population and Housing Census, the district had a population of 105,610, with less females (49.7%) than males (50.3%) (GSS 2021). The total fertility rate is 3.0 births per woman.

Sunyani Municipal is located in the Brong Ahafo Region. Sunyani is the Municipal capital town. The Municipality shares a boundary with Sunyani West District to the North, Dormaa East District to the west, the south by Asutifi District and east by Tano North District (GSS, 2014c). The Municipality has a population of 193,595 (GSS, 2021). There are about the same proportions of males (49.8%) and females (50.2%) in the Municipality (GSS, 2021). The Municipality has a

dependency ratio of 54.0%. The total fertility rate for the Municipality is 2.61 children per woman, below the regional average of 3.58 per 1000 live births.

Berekum West District is located in the Brong Ahafo Region. The district's capital town is Jinijini. The district shares boundaries with the Dormaa East District in the south-west, north-east by Jaman South Municipal and north-west by the Tain District. The district has a population of 49,464 with more females (52.3%) than males (47.7) (GSS, 2021).

Buipe is the municipal capital of Central Gonja. The Municipality shares a boundary with the Kintampo District in the Brong Ahafo, West Gonja to the east, Tolon District to the north-west and East Gonja to the east. According to the 2021 Population and Housing Census, the district had a population of 142,762, representing 21.9% of the region's population. There were slightly more males (50.2%) than females (49.8%) (GSS, 2021).

West Gonja Municipality is located in the Savanna Region, and the capital town is Damongo. The municipality lies on longitude $1^{\circ} 51'$ and $2^{\circ} 58'$ West and Latitude $8^{\circ} 32'$ and $10^{\circ} 21'$ North. It shares boundaries in the south with Central Gonja District, Bole and Sawla-Tuna-Kalba Districts in the West and North Gonja District to the North. It has a total land area of 4,715.9 km². The predominant economic activity is agriculture, where most of the people cultivate cereals and tuber crops. According to the 2021 Population and Housing Census, the district had a population of 63,449, with more males (50.9%) than females (49.1%) (GSS, 2021).

3.4.3 Sampling and Sampling Strategy

Purposive sampling was used to select participants for the qualitative study. The six (6) Districts/Municipalities/Metropolitan were selected based on birth registration coverage. These are regions and districts with high and low registration of birth certificates. A high and low birth registration district/municipal was selected within each region. The selection of the regions and

districts was guided by data from the Birth and Death Report (BDR, 2021). Regions with the highest and lowest birth registration rates were selected and further explored to understand the factors affecting birth registration. As a result, two regions (Greater Accra and Bono Region) with the highest birth registration and one region (Savannah) with the lowest birth registration were selected for the study. The information that was derived from the BDR included birth registration rates in the selected regions and districts for the study. The focus was to explore why some districts in each selected region had either high or low birth registration rates. The choice of the study sites were also guided by differences in birth registration by regions

Table 3.1: Description of Geographical Regions, and Districts/Municipal/Metropolitan

Geographical Zones	Region	Districts/Municipal/Metropolitan
Coastal zone	Greater Accra	Accra Metropolitan Assembly Shai Osudoku District Assembly
Middle zone	Bono Region	Sunyani Municipal Brekum West district
Northern zone	Savanna Region	Central Gonja Municipal West Gonja Municipal

Purposive sampling was used to recruit participants from the six Districts/Municipalities/Metropolitan assemblies to be part of this study. In all, twelve (12) focus group discussions (FGDs) and twelve (12) in-depth interviews were conducted. Specifically, two (2) FGDs were conducted in each district with parents/guardians and two (2) in-depth interviews were conducted with birth and death registration officers. For the FGDs, 8-10 male and female participants were selected in each district. Male and female FGDs were done separately in each district. They were selected for the study based on the following criteria:

- i. Participants must be a guardian (a guardian is a person who is either the biological parent of the child or he/she is taking care of the child) who has registered or not registered his/her child (ren) for a birth certificate.
- ii. A guardian must have a child who is less than five years old.

In addition, twelve (12) birth and death registration officers, including both males and females, were recruited based on the following criteria:

- i. Must be a permanent worker of the Births and Deaths Registry
- ii. Must have worked for at least five years with the Registry, not necessarily at the current place.

Table 3.2: Sampling, inclusion and exclusion criteria for selecting participants

Participants	Mode of data collection	Number of interviews and FGDs	Inclusion and exclusion criteria
Guardian	FGD (at least 6 including both males and females in a group)	1 in each district	Participants must be a guardian who has registered or not registered his child (ren) for a birth certificate A guardian must have a child less than one year old
Birth and Death Registration officers	IDI	2 in each district	Must be a staff of Births and Deaths Registry Must have worked for at least five years with the Registry and not necessarily at the current place of work

3.4.4 Data Collection

The data collection was carried out between February and April 2023. A structured interview guide was used to solicit information on the social, cultural and institutional factors associated with birth registration. In-depth interviews were conducted because they offered the opportunity for an interviewer to ask respondents questions and further ask follow-up questions based on their responses. The focus group discussions helped tap into the participants' social milieu.

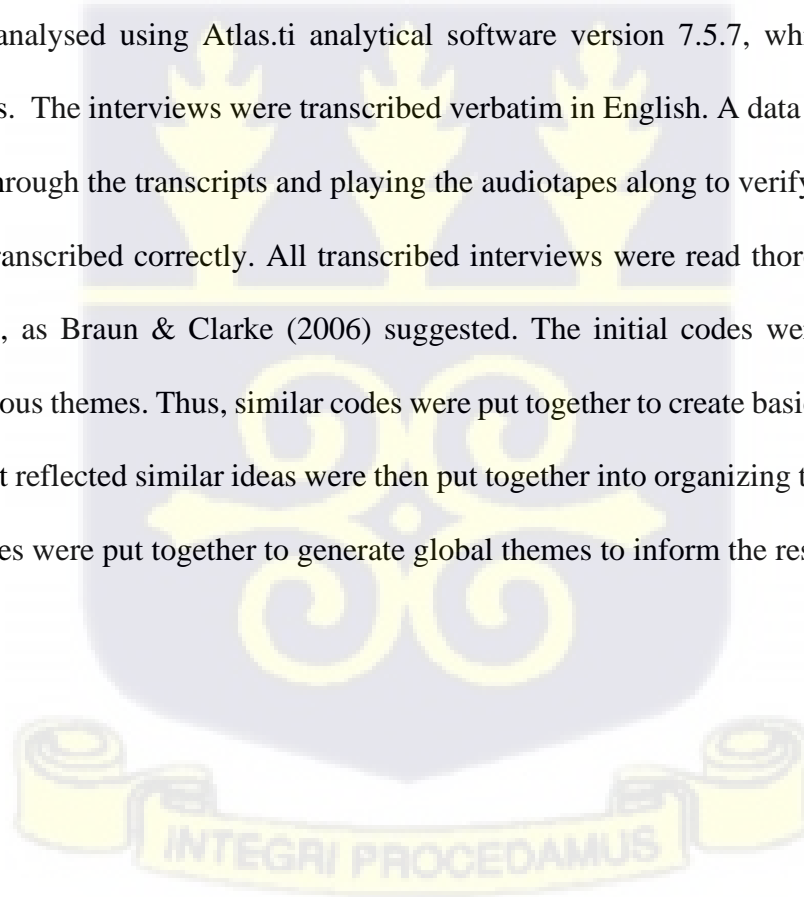
Four interviewers were recruited as field workers to conduct the interviews. These people have at least five years of experience in qualitative data collection. The interviewers were trained on the skills involved in data collection, ethical issues and the interview guide. They were trained in English and four local languages: Twi, Ga, Gonja and Dagomba. There was a need to train the interviewers in these languages because they are the dominant languages spoken by the six districts. Ga is spoken by the people in Accra Metropolitan Assembly and Shai Osudoku District, Twi is widely spoken in Sunyani Municipal and Berekum West, and Dagomba and Gonja are spoken among the people in Central Gonja and West Gonja. Pretesting of the survey instrument was carried out in one district in the Eastern Region. The questions were reviewed during the training and after the pre-testing.

Guardians/parents, birth and death registration officers and stakeholders were recruited to be part of either the focus group discussions or in-depth interviews. After approaching a participant, the purpose of the study, including the general objectives, benefits, and risks of taking part in the study, were explained to them. Consent was obtained from those who agreed to be part of the study. Literate participants signed an informed consent form and, those who could not read or write, provided a thumbprint or verbal consent to participate in the study. In addition, participants were informed about the strict confidentiality and anonymity of the information they provided.

The focus group discussions and interviews were conducted in birth and death registration offices in each district and the participants' preferred language. The interviews lasted an average of between 30 and 45 minutes, while the FGD lasted between 45 minutes and 1 hour. The in-depth interviews were done in English, while Twi, Ga Dangbe, and English were used for the FGDs. The FGDs in Greater Accra were all conducted in Twi and Ga Dangbe. In the Bono Region, only Twi was used but in the Savannah Region English and Gonja were used. Permission was sought from the participants to record the interviews. The Ethics Committee for the Humanities granted ethical approval for the study at the University of Ghana with clearance number ECH 114/22-23.

3.4.5 Data Analysis

The data were analysed using Atlas.ti analytical software version 7.5.7, which was based on emerging themes. The interviews were transcribed verbatim in English. A data quality check was done by going through the transcripts and playing the audiotapes along to verify that all the audio files had been transcribed correctly. All transcribed interviews were read thoroughly to identify the initial codes, as Braun & Clarke (2006) suggested. The initial codes were put together to generate the various themes. Thus, similar codes were put together to create basic themes. Various basic themes that reflected similar ideas were then put together into organizing themes, and all the organizing themes were put together to generate global themes to inform the results.



CHAPTER FOUR

BACKGROUND CHARACTERISTICS AND DIFFERENCES IN POSSESSION OF BIRTH CERTIFICATES BY CHILDREN

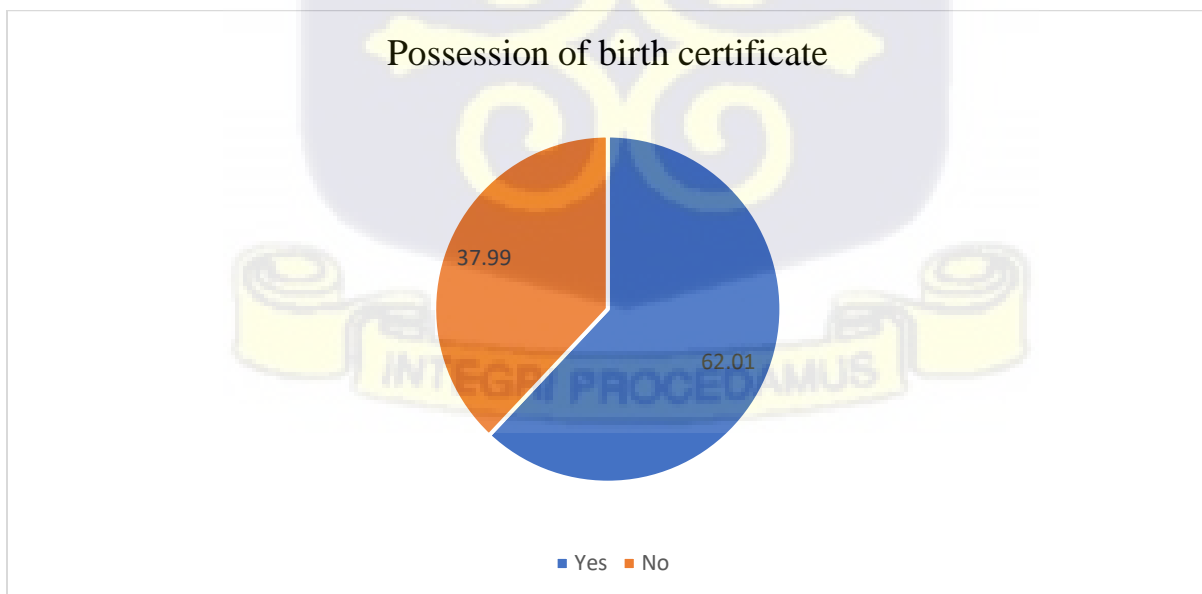
4.1 Introduction

This chapter presents the background characteristics of respondents in the quantitative study. The background characteristics include household, child and mother characteristics. The chapter further examines the association between background characteristics and possession of birth certificates in the quantitative data using the Pearson chi-square test to determine the significance of the variables.

4.2 Possession of Birth Certificate

Figure 4.1 shows the distribution of possession of a birth certificate. The results show that more than half (62.01%) of the children had a birth certificate, while about 38.0 percent had no birth certificate

Figure 4.1: Pie chart showing birth certificate possession among children of respondents



Source: Generated from the 2017/18 Ghana Multiple Indicator Cluster Survey Data

4.3 Maternal Social Characteristics

Table 4.1 shows the distribution of the mother's social characteristics. The results show that about 7 out of 10 mothers (68.9%) had at least primary school education, while three out of ten had no education. Specifically, slightly more than one-third (34.0%) of the mothers had completed JSS/Middle school, about 19.1 percent had primary education, and the least proportion, 5.0 percent had higher education. With regard to the household wealth quintile, one out of three mothers belonged to the poorest (30.3%) category, followed by poorer (19.6%), Middle (18.3%) and the least proportion belonged to the richest (15.8%) wealth quintile.

Table 4.1: Percentage Distribution of Social Characteristics

Social Characteristics	Frequency	Percentage
Educational level		
No education	2556	31.1
Primary	1565	19.1
JSS/Middle	2796	34.0
SSS	892	10.8
Higher	408	5.0
Wealth quintile		
Poorest	2487	30.3
Poorer	1615	19.6
Middle	1501	18.3
Rich	1319	16.0
Richest	1295	15.8

Source: Generated from the 2017/18 Ghana Multiple Indicator Cluster Survey Data.

4.4 Child Characteristics

According to Table 4.2, slightly more than half of the children under five years were females (50.7%). With regard to the age of the child, the highest proportion of the children (21.7%) were less than 12 months old, followed by one-fifth (20.2%), who were 36-47 months old, about 20.0

percent were 12-23 months old, and the least proportion (18.8%) were 48-59 months. In terms of place of delivery, eight out of ten (80.1%) children were delivered at a public health facility, 14.4 percent were delivered at home, and 5.5 percent were delivered at a private health facility. Also, eight out of ten of the deliveries were assisted by a medical professional and 5.3 percent by traditional birth attendants. Also, six out of ten (60.5%) respondents lived in rural areas, and more than one-third (37.2%) lived in the coastal zone.

Table 4.2: Percentage Distribution of Children by Selected Characteristics

Child Characteristics	Frequency	Percentage
Sex of child		
Male	4048	49.3
Female	4169	50.7
Child age		
0-11 months	1779	21.7
12-23 months	1642	20.0
24-35 months	1583	19.3
36-47 months	1665	20.2
48-59 months	1548	18.8
Place of delivery		
Public health facility	6584	80.1
Private health facility	452	5.5
Home	1181	14.4
Delivery Assistant		
Medical Practitioner	7002	85.2
Traditional Birth Attendant	434	5.3
Other	781	9.5
Child's place of residence		
Urban	3248	39.5
Rural	4969	60.5
Geographical Zones of child		
Coastal zone	3054	37.2
Middle zone	2560	31.1
Northern zone	2603	31.7
Total	8217	100

Source: Generated from the 2017/18 Ghana Multiple Indicator Cluster Survey Data.

4.5 Maternal Characteristics

From Table 4.3, more than one-fifth of the mothers (22.6%) were in the age group 25-29 years, 21.8 percent were in the age group 30-34 years, and the least proportion (4.5%) were in the age group 45-49. The results show that eight out of ten mothers (84.1%) were currently married, more than one-fourth (27.5%) were Pentecostals/Charismatic, 23.7 percent were Muslims, and the least proportion (9.4%) were protestants. A little over one-third (35.8%) of the mothers were Akan, slightly more than one-tenth (10.6%) were Ewe and the least proportion (4.1%) were Guans.

Table 4.3: Percentage Distribution of Maternal Characteristics

Maternal Characteristics	Frequency	Percentage
Age of mother		
15-19	394	4.8
20-24	1615	19.7
25-29	1855	22.6
30-34	1789	21.8
35-39	1442	17.5
40-44	752	9.1
45-49	370	4.5
Marital status of mother		
Currently married	6907	84.1
Never married	783	9.5
Ever married	527	6.4
Religion of mother		
Orthodox	1071	13.0
Protestant	769	9.4
Pentecostal/Charismatic	2263	27.5
Other Christians	1181	14.4
Islam	1949	23.7
Other religion	984	12.0
Ethnicity of mother		
Akan	2945	35.8
Ga/Dangme	534	6.5
Ewe	870	10.6
Guan	339	4.1
Gruma	398	4.8
Mole/Dagbani	2043	24.9
Grusi	351	4.3
Other	737	9.0
Total	8217	100

Source: Generated from the 2017/18 Ghana Multiple Indicator Cluster Survey Data.

4.6 Association between background characteristics and possession of birth certificate by children

This section presents the factors associated with having a birth certificate. Factors examined include socio-cultural factors, child characteristics and maternal characteristics. The chi-square test was used to examine the associations at a 95 percent confidence interval (p-value < 0.05).

4.6.1 Maternal Social Characteristics and Birth Certificate Possession.

From Table 4.4, educational level and wealth quintile were significantly associated with having a birth certificate. In terms of education, a higher proportion of mothers with tertiary education (84.3%), senior secondary school (SSS) education (69.7%), JSS/Middle (64.2%), primary (57.2%) and no education (56.3%) had registered their children and been issued a birth certificate. With regards to wealth, 50.5 percent of respondents belonging to the poorest household wealth had a birth certificate for their children, while 79.0 percent of respondents belonging to the richest household wealth quintile had a birth certificate for their children.

Table 4.4: Percentage Distribution of the Association Between Maternal Social factors and Possession of Birth Certificate

Category	Possession of Birth Certificate			Chi-square value	P-value
	Yes	No	Total		
Social Characteristics					
Educational level					
No education	56.3 (1439)	43.7 (1117)	2556	164.7	0.000
Primary	57.2 (896)	42.8 (669)	1565		
JSS/Middle	64.2 (1794)	35.8 (1002)	2796		
SSS	69.7 (622)	30.3 (270)	892		
Higher	84.3 (344)	15.7 (64)	408		
Wealth quintile					
Poorest	50.5 (1257)	49.5 (1230)	2487	350.5	0.000
Poorer	58.1 (938)	41.9 (677)	1615		
Middle	63.0 (945)	37.0 (556)	1501		
Rich	70.7 (932)	29.3 (387)	1319		
Richest	79.0 (1023)	21.0 (272)	1295		

Total

Source: Generated from the 2017/18 Ghana Multiple Indicator Cluster Survey Data.

4.6.2 Child Characteristics and Possession of Birth Certificate

From Table 4.5, the child's age, place of delivery, delivery assistance, place of residence, and geographical location were associated with the possession of a birth certificate. For child's age, 67.9 percent of children aged 12-23 months possess a birth certificate, followed by children aged 36-47 months (67.3%) and 65.0 percent of children aged 48-59 months. In terms of place of delivery, six out of ten infants who were delivered at a public health facility (64.3%) possess birth certificates while 66.8 percent of children delivered at a private health facility possess birth certificates. In addition, a higher proportion of infants assisted by a medical practitioner (64.55%) during delivery had a birth certificate, while less than half of the children assisted during deliveries by a traditional birth attendant (48.85%) and other (46.48%) had a birth certificate. With regards to place of residence, more than half (72.32%) of the mothers living in the urban areas had a birth certificate for their children under five years. Also, a higher proportion of mothers living in the coastal zone (64.21%) had birth certificates for children under five years old.

Table 4.5: Percentage distribution of the Association Between Child Characteristics and Possession of Birth Certificate.

Category	Birth certificate		Total	Chi-square value	P-value
	Yes	No			
Child Characteristics					
Sex of child					
Male	62.9 (2545)	37.1 (1503)	4048	2.5	0.111
Female	61.2 (2550)	38.8 (1619)	4169		
Child age					
0-11 months	44.9 (799)	55.1 (980)	1779	284.0	0.000
12-23 months	67.9 (1115)	32.1 (527)	1642		
24-35 months	66.0 (1045)	34.0 (538)	1583		
36-47 months	67.3 (1121)	32.7 (544)	1665		
48-59 months	65.6 (1015)	34.4 (533)	1548		
Place of delivery					

Public health facility	64.3 (4232)	35.7 (2352)	6584	124.3	0.000
Private health facility	66.8 (302)	33.2 (150)	452		
Home	47.5 (561)	52.5 (620)	1181		
Delivery Assistant					
Medical Practitioner	64.5 (4520)	35.5 (2482)	7002	131.1	0.000
Traditional Birth					
Attendant	48.9 (212)	51.1 (222)	434		
Other	46.5 (363)	53.5 (418)	781		
Child's Place of residence					
Urban	72.3 (2349)	27.7 (899)	3248	242.6	0.000
Rural	55.3 (2746)	44.7 (2223)	4969		
Geographical Zones					
Coastal zone	64.2 (1961)	35.8 (1093)	3054	50.5	0.000
Middle zone	56.4 (1443)	43.6 (1117)	2560		
Northern zone	65.0 (1691)	35.0 (912)	2603		

Source: Generated from the 2017/18 Ghana Multiple Indicator Cluster Survey Data.

4.6.3 Maternal Characteristics and Possession of Birth Certificate for their Children.

Table 4.6 shows the association between maternal characteristics and possession of a birth certificate for their children. The possession of a birth certificate among children varied significantly by the mother age, marital status, ethnicity and religion. With regard to age, maternal/guardian who were 20-49 years had more than half of their children under five years possessing a birth certificate. However, less than half (42.4%) of the children of mothers who were 15-19 years possess a birth certificate. Regarding marital status, the proportion of children having a birth certificate was highest among mothers who were currently married (63.2%) and lowest among those who had never been married (51.1%). In terms of religion, with the exception of mothers belonging to other religions (48.58%), more than half of the guardians affiliated with other religions category possessed birth certificates for their children. Similarly, the mothers' ethnicity was associated with having a birth certificate. With regards to ethnicity, 63.6 percent of children of mothers affiliated with the Akan ethnic group possess birth certificates, while 42.2 percent of mothers affiliated with Gruma ethnic group had their children possessing birth certificates.

Table 4.6: Percentage Distribution of Maternal Characteristics and Possession of Birth Certificate.

Maternal Characteristics	Yes	No	Total	Chi-square value	P-value
Age of mother					
15-19	42.4 (167)	57.6 (227)	394	114.4	0.000
20-24	56.6 (914)	43.4 (701)	1615		
25-29	61.8 (1146)	38.2 (709)	1855		
30-34	66.1 (1182)	33.9 (607)	1789		
35-39	66.7 (962)	33.3 (480)	1442		
40-44	65.4 (492)	34.6 (260)	752		
45-49	62.7 (232)	37.3 (138)	370		
Mother's Marital status					
Currently married	63.2 (4365)	36.8 (2542)	6907	43.9	0.000
Never married	51.1 (400)	48.9 (383)	783		
Ever married	62.6 (330)	37.4 (197)	527		
Mother's religion					
Orthodox	61.5 (659)	38.5 (412)	1071	120.8	0.000
Protestant	59.4 (457)	40.6 (312)	769		
Pentecostal/Charismatic	63.2 (1429)	36.8 (834)	2263		
Other Christians	61.4 (725)	38.6 (456)	1181		
Islam	69.1 (1347)	30.9 (602)	1949		
Other religion	48.6 (478)	51.4 (506)	984		
Mother's ethnicity					
Akan	63.6 (1874)	36.4 (1071)	2945	120.4	0.000
Ga/Dangme	62.7 (335)	37.3 (199)	534		
Ewe	58.2 (506)	41.8 (364)	870		
Guan	55.2 (187)	44.8 (152)	339		
Gruma	42.2 (168)	57.8 (230)	398		
Mole/Dagbani	68.0 (1389)	32.0 (654)	2043		
Grusi	61.3 (215)	38.7 (136)	351		
Other	57.1 (421)	42.9 (316)	737		

Source: Generated from the 2017/18 Ghana Multiple Indicator Cluster Survey Data.

4.7 Factors Associated with Possession of Birth Certificate

Two logistic regression models were carried out to examine the social factors that affect birth registration. Model 1 examined the independent effect of social factors such as education and

wealth quintile on possession of a birth certificate. A full model (Model 2) was generated, incorporating socio-cultural factors and controlled variables.

From Table 4.7. the results from Model 1 show that possession of a birth certificate was statistically associated with educational level and wealth quintile. Mothers with tertiary education were more likely to possess a birth certificate for their children under five years than those with no education (OR=1.940; CI =1.433-2.626). Mothers belonging to the poorer wealth quintile were more likely to have a child under five years of birth registered and issued a birth certificate than those belonging to the poorest household wealth quintile (OR=1.350; 95% CI = 1.167-1.536). Similarly, mothers belonging to the middle, rich and richest household wealth quintile were more likely to have a child registered and issued a birth certificate than those belonging to the poorest household wealth quintile.

In model 2, where other variables were controlled for, the child's age in months and mother characteristics such as educational level, wealth quintile, religion, age, ethnicity, marital status and geographical zones were significantly associated with birth registration. Educational level is significantly associated with children's possession of a birth certificate. The results show that the odds ratio for the possession of a birth certificate increases when the mother's educational level increases compared with those with no education. In the qualitative analysis, most participants were of the view that those who are educated have knowledge on the relevance of birth certificates than those who are not educated. This mostly motivates them to register their children for birth certificates.

“I think those who are educated know the importance of birth registration, but those who do not have any education do not see the importance of it. They feel it's nothing serious, so there is no need to register their children often” (Female, FGD, Dodowa, Greater Accra).

“The one who is educated knows about it because they can read. So, when they pick it up, they can read. If they have not registered for their child and they see somebody’s own, they will know that this thing is very important. I have to go and register for one for my child before they lose an opportunity. The one who is a bit educated can also make enquiries. When they make enquiries and are told about it, because they are a bit educated, they will also go and register for their child. But the one who is not educated does not know about it at all. Even if you tell her, she will tell you that when the child grows, they will go and register for themselves. Meanwhile, you are to register for the child at infancy before they grow, so that when the child grows, it will be there” (Male, FGD, Brekum, Bono Region).

For household wealth, the results are similar to what was found in models 1 and 2. The odds of registering for a child for a birth certificate increase on the ladder of wealth quintile from poorer to richest. Mothers belonging to poorer middle, rich and household wealth quintile were more likely to have a child under five years with a birth certificate than those who belong to the poorest household wealth quintile. This finding is supported by the qualitative studies where participants explained that people from poor homes consider several things before deciding to register their children for birth certificate. This mostly happens when they fail to register the child under one year, where there is no cost.

“The poor person will weigh options before deciding whether to register their child for a birth certificate because of the payment, especially when the child is more than one year old, and they miss the non-payment period. A rich person does not think about a lot of things since they can pay” (Female, FGD, AMA, Greater Accra).

“The rich person, because of the money, will go and register earlier than the one who is poor” (Female, FGD, Sunyani, Bono Region)

With regards to religion, Muslim mothers were more likely to have a child (ren) registered and issued a birth certificate than Orthodox mothers (OR=1.330; 95% CI = 1.116-1.584). Also, mothers belonging to other religions were less likely to have a child (ren) with a birth certificate than children from orthodox mother/guardian (OR=0.801; 95% CI=0.662-0.971).

Also, children with mothers belonging to the Gruma ethnic group were less likely to possess a birth certificate compared with children whose mothers were Akan. Similarly, children with mothers belonging to other ethnic groups were less likely to possess a birth certificate compared with children from Akan mothers.

Child's age in months was found to be associated with birth registration. From Table 5.1, children between 12-23 months were more likely to have a birth certificate than those who were less than 12 months (OR=2.955; 95% CI=2.545-3.432). Similarly, children aged less than 24-35 months, 36-47 months, and 48-59 months were more likely to have a birth certificate than those who were less than 12 months.

With regards to the age of mothers, mothers aged 20-49 years were more likely to have a child (ren) under five years to possess a birth certificate compared to mothers aged 15-19 years. Children of mothers who were never married were less likely to possess a birth certificate than those who were currently married (OR=0.752; 95% CI=0.621-0.897).

Children living in rural areas were less likely to possess a birth certificate compared to those living in urban areas (OR=0.733; 95% CI=0.647-0.830).

Lastly, geographical zone was found to be associated with having a birth certificate. Children from the middle zone had a lower likelihood (OR=0.690; 95% CI=0.612-0.779) of having a birth certificate compared with those from a Coastal zone, while those in the northern zone were more

likely (OR=1.697; 95% CI=1.410-2.041) to possess a birth certificate than children from the coastal zone.



Table 4.7: Factors associated with birth registration in Ghana.

Variables	Model 1 Social factors			Model 2 Full model		
	Odds Ratio	95% Confidence Interval	P-value	Odds Ratio	95% Confidence Interval	P-value
Educational level						
No education (RC)						
Primary	0.900	0.789-1.026	0.114	1.272	1.098-1.474	0.001
JSS/Middle	1.018	0.903-1.148	0.772	1.641	1.415-1.903	0.000
SSS	1.079	0.903-1.290	0.403	1.700	1.387-2.084	0.000
Higher	1.940	1.433-2.626	0.000	2.725	1.973-3.765	0.000
Wealth quintile						
Poorest (RC)						
Poorer	1.350	1.167-1.536	0.000	1.427	1.236-1.648	0.000
Middle	1.641	1.431-1.882	0.000	1.739	1.479-2.043	0.000
Rich	2.264	1.947-2.632	0.000	2.117	1.759-2.548	0.000
Richest	3.111	2.606-3.713	0.000	2.711	2.181-3.370	0.000
Sex of child						
Male (RC)						
Female				0.946	0.859-1.041	0.256
Child age						
0-11 months (RC)						
12-23 months				2.955	2.545-3.432	0.000
24-35 months				2.458	2.112-2.859	0.000
36-47 months				2.656	2.284-3.089	0.000
48-59 months				2.436	2.089-2.842	0.000
Place of delivery of child						
Home (RC)						
Public health facility				1.002	0.798-1.259	0.984
Private health facility				1.102	0.722-1.684	0.652
Delivery Assistant of child						
Medical Practitioner (RC)						
Traditional Birth Attendant				0.711	0.449-1.124	0.144
Other				0.662	0.435-1.007	0.054
Child's Place of residence						
Urban (RC)						
Rural				0.733	0.647-0.830	0.000
Child's Geographical Zones						
Coastal zone (RC)						
Middle zone				0.690	0.612-0.779	0.000
Northern zone				1.697	1.410-2.041	0.000

Age of mother			
15-19 (RC)			
20-24	1.286	1.012-1.634	0.040
25-29	1.352	1.057-1.728	0.016
30-34	1.518	1.179-1.954	0.001
35-39	1.684	1.301-2.179	0.000
40-44	1.606	1.211-2.130	0.001
45-49	1.453	1.049-2.011	0.024
Mother's Marital status			
Currently married (RC)			
Never married	0.752	0.631-0.897	0.001
Ever married	0.981	0.805-1.195	0.849
Mother's religion			
Orthodox (RC)			
Protestant	0.840	0.678-1.040	0.109
Pentecostal/Charismatic	1.007	0.851-1.193	0.931
Other Christians	1.012	0.834-1.226	0.906
Islam	1.330	1.116-1.584	0.001
Other religion	0.801	0.662-0.971	0.023
Mother's ethnicity			
Akan (RC)			
Ga/Dangme	0.983	0.799-1.209	0.872
Ewe	0.905	0.762-1.075	0.257
Guan	0.787	0.611-1.013	0.063
Gruma	0.545	0.419-0.709	0.000
Mole/Dagbani	1.192	0.972-2.462	0.092
Grusi	0.942	0.709-1.253	0.684
Other religion	0.810	0.657-0.998	0.048

Source: MICS 2017/18

4.8 Discussion

This chapter aimed to describe the background characteristics associated with the possession of birth certificates among children under-five years. The findings show that possession of a birth certificate by children was associated with the education level of mother, household wealth quintile, the child's age, place of residence, geographical zone, age of mother, marital status and religion of the mother.

The results of the analysis show that the mother's education was associated with the possession of the child's birth certificate, and a positive relationship was found as the mother's education

increases, the odds of their children possessing birth certificate also increase. The findings of this study are similar to other studies conducted in Nigeria (Atama et al., 2020), Ghana (Dake and Fuseini., 2018) and Niger (Wodon and Yedon., 2019). These studies reported that possession of birth certificates among children under five years increases with the educational level of the mother. The probable reason could be that education exposes people to the importance of birth certificates; hence, mothers can make informed choices and register their children to ensure that they acquire birth certificates. Consequently, educated mothers receive valuable information and advice on various aspects of a child's life, including the advantages of birth registration (Harding et al., 2015). Moreover, they can make enquiries and register their children for birth certificates. Therefore, they are more likely to go the extra mile trying to overcome all barriers to registering their births (Atama et al., 2020). On the other hand, people with little or no education may have heard about the birth certificate and not necessarily know its relevance. This may reduce their chances of acquiring a birth certificate for their children.

The household wealth quintile was associated with children's possession of birth certificates. The odds of children possessing a birth certificate increase with an increase in the quintile ladder of household wealth. The results from this study corroborate the results of other studies that found that children from rich households are more likely to possess birth certificates than those from poor households (Nomura et al., 2018; Onagoruwa and Wooden., 2021). The probable reason could be that households of higher wealth status can accelerate the registration of their children since they may have purchasing power and control of resources. Hence, they are able to travel far to places where they can get registration offices to register their children. In addition, paying the cost of late registration or certified copy is not a problem since they can easily afford than those who belong to poorer household wealth quintiles. The cost of paying for the certificate and transportation to registration offices may hinder those belonging to the poor household wealth

quintile. Hence, poverty may serve as an obstacle preventing people from registering their children.

Furthermore, the study results show that a child's age is associated with possessing a birth certificate. Children 12 months and above are more likely to possess birth certificates than those less than 12 months. This result is similar to a study by Kumar and Saika (2021), who reported that children aged 2-3 years are more likely to possess a birth certificate than those less than one year. It is very difficult to understand this situation in Ghana, given that birth registration for children less than one year is free. Yet, few people register their children during this period. The probable reason could be that there is a notion that free early birth registration for children under one year is fake because it is not recognised in most places in Ghana, and it has to be replaced with a certified copy when the child is above one year. Other factors such as delay in naming of the child, delay in performing marriage rites after birth (when births precede marriages), and related issues such as geographic, economic, and language, among others, affect why births are not registered for children under age one to five years. Hence, most mothers perceive that the under-one-year certificate is fake and do not see the need to register for it, even though it is free. They would rather wait for the child to be above one year and register for the certified copy.

Place of residence was significantly related to the possession of birth certificates among children. The results show that children living in rural areas were less likely to possess a birth certificate compared to those living in urban areas. This is consistent with findings from other studies (Atama et al., 2020). Living in urban areas is sometimes associated with exposure to information on birth certificates and easy access to birth registration offices. These factors enable mothers in urban areas to register their children earlier than those in rural areas. In Ghana, almost all the registration offices are situated in the urban areas or the district capitals. Some volunteers assist in registering

for a birth certificate, mostly in rural areas (Fabregas and Odame., 2013). The government does not pay these volunteers since they voluntarily join to work with the Registry for free. Hence, they are not fully committed to the work, are unreliable and can stop at any point. Mass registration exercises are sometimes carried out in rural areas, but not all people in rural areas take advantage of them to register their children. In addition, some people living in rural areas do not have the means of traveling to urban areas to register their children for the birth certificate. These conditions, therefore, limit the ability of mothers to register their children for birth certificates in rural areas.

Moreover, children in the northern zones are more likely to possess birth certificates than those in the coastal areas. The probable reason could be that several health and social interventions have been carried out and are still ongoing in the northern sector. Also, the introduction of Community-Based Health Planning and Services (CHPS) has helped improve access to child care, mostly in Northern Ghana and other social services such as birth certificates. Mothers in the Northern region have access to skilled health workers, which was not the case in the past, and they are currently educated on the need to register their children for birth certificates due to the outreach programmes being carried out in the Northern region.

The mother's age is a significant factor in children's possession of birth certificates. This result is similar to other studies (Abay., 2020; Makinde et al., 2016; Apland et al., 2015). Children of mothers above 19 years were more likely to possess birth certificates than those below 19 years (Abay., 2020; Makinde et al., 2016). Abay (2020) reported that children of mothers who are below 19 years are teenage mothers, and some of them do not have partners, while others do not know the name of their child's father. Hence, they do not want to register the birth of their children as their father's name would be required in the registration. The avoidance of the embarrassment of

being asked the name of the father of their children when they are not in a position to disclose prevents them from registering for birth certificates for their children. Another probable reason could be that most of these children are teenagers and they do not know the relevance of their children having birth certificates. On the other hand, mothers who are 20 years and above are old, and they may see the need to register their children for birth certificate more than younger parents.

With regard to marital status, children of mothers who were never married were less likely to possess a birth certificate than those who were currently married. The findings of this study corroborate other studies (Nomura et al., 2018; Isara and Atimati., 2015), which found that married women register the births of their children more than those who are unmarried. Isara and Atimati., (2015) argue that marriage enables information sharing, and as such, parents who have not been married before may not always have someone close to educate them on the benefits derived from birth registrations and hence motivate them to register their birth, therefore, marriage is a predictor of birth registration. Also, Wodon and Yedan (2019) explained that most women who are not married and have given birth out of wedlock prefer not to register the birth of their children since it is seen traditionally as taboo to give birth without being married.

Religion plays a significant role in birth registration. Muslims were more likely to have a child (ren) registered and issued with a birth certificate than those belonging to the orthodox religion. The finding from the current study is similar to that of Wodon and Yedan (2019), who reported that Muslims are more likely to register than Christians. In Ghana, the practice of Muslims is that they name their children a week after birth, and this could influence their decision to register their children earlier than Christians. However, most Christians do not name their children early. Anecdotal evidence shows that the practice is that among Christians, naming is mostly done three

months after birth, and this, therefore, delays the registration of children and acquisition of birth certificate

In conclusion, the findings show that social factors, maternal characteristics and child characteristics were associated with children's possession of birth certificates. Social factors such as education and wealth quintile were associated with children's possession of birth certificates. In addition, child characteristics such as child's age, place of residence and geographical zone were associated with the possession of a birth certificate. The mother's age, marital status, religion, and ethnicity are maternal characteristics associated with the possession of a birth certificate by children below age 5.



CHAPTER FIVE

SOCIAL FACTORS ASSOCIATED WITH BIRTH REGISTRATION IN GHANA

5.1 Introduction

This chapter focuses on the social factors affecting birth registration in Ghana. The analysis is presented based on themes from the qualitative data. The first section describes the background characteristics of the participants, while the second section presents the social factors affecting birth registration.

5.2 Background Characteristics of Qualitative Participants

Table 5.1 presents the background characteristics of the qualitative participants. More than half (50.9%) of the participants were males, 37.0 percent (40 participants) were 21-30 years and 25 percent (26 participants) were 41-45 years old. Thirty-seven of the participants had JHS education and 25.0 percent had tertiary education. Regarding marital status, about 70 percent were married and 34.4 percent had one child.

Table 5.1 Background characteristics of respondents

Characteristics	IDI (N =12)	FGD (N=96)	Total (N=108)
Sex			
Male	8	47	55
Female	4	49	53
Age			
Below 20	-	3	3
21-30	2	38	40
31-40	8	31	37
41-45	2	24	26
Educational level			
No education	-	8	8
Primary	-	4	4
JHS	-	37	37
Secondary/Middle	2	30	32
Tertiary	10	17	27
Marital status			

Currently married	7	68	75
Never married	5	26	31
Ever married	-	2	2
No of children			
1	-	33	33
2	-	16	16
3	-	18	18
4	-	13	13
5+	-	16	16
Occupation			
Unemployed	-	11	11
Sales and service	-	31	31
Agriculture	-	13	13
Students	-	5	5
Craftmanship	-	18	18
Professionals	-	5	5
Other	-	13	13
Total	12	96	108

Source: Field work, 2023

5.3 Social Factors

The main themes identified include accessibility-related issues, the relevance of birth registration, under one year birth certificate, family-related issues, health, communication barriers, time constraints, economic, community influence and name-related factors. The themes are shown in Figure 5.1.

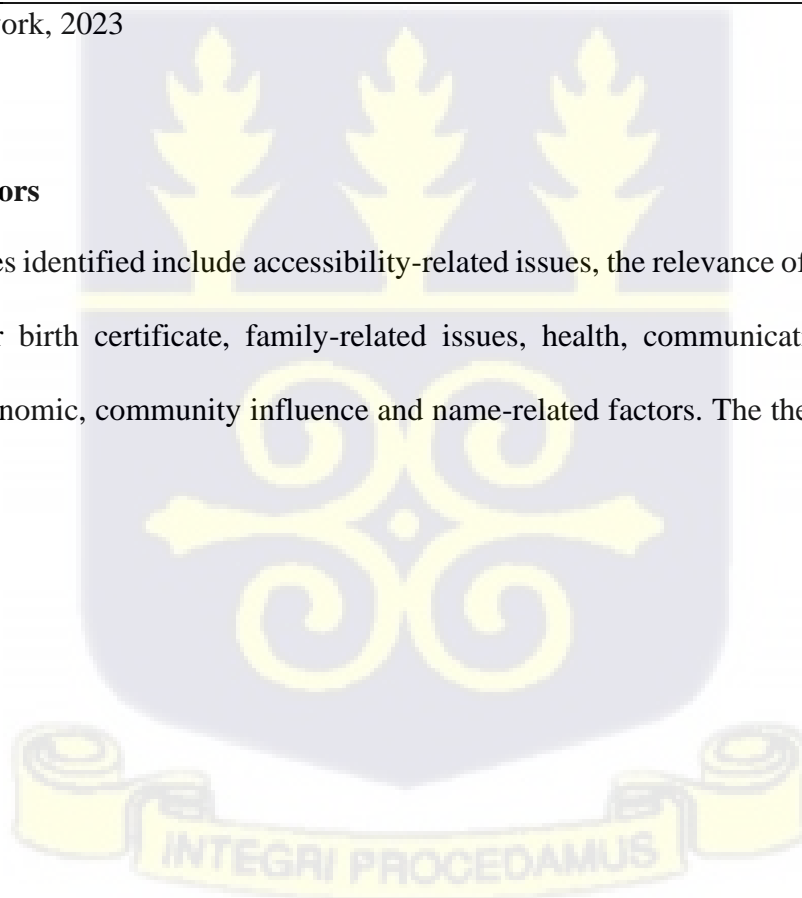
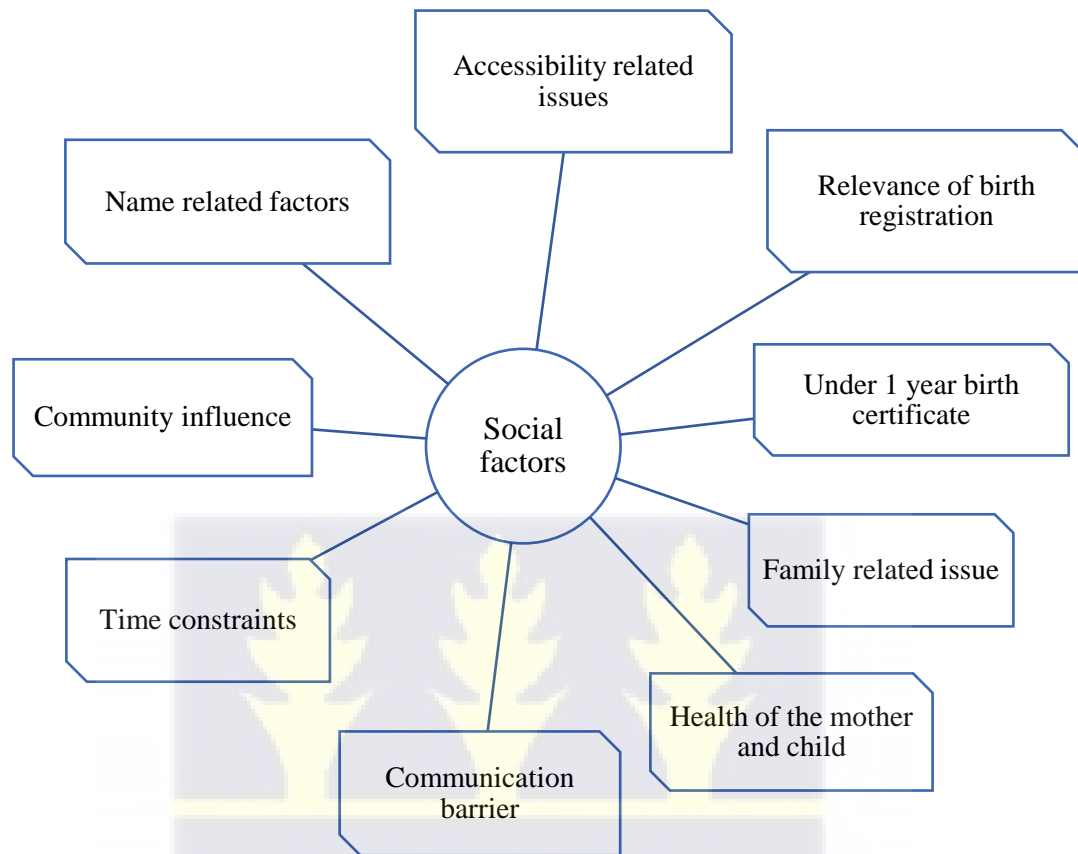


Figure 5. 1: Thematic network showing social factors affecting birth registration



5.3.1 Accessibility to registration centres

Accessibility could influence early or late registration of birth. Two main themes identified include distance to registration centres and scattered population.

Some participants narrated that accessibility to registration offices is a factor that affects birth registration. This could either hinder or facilitate the registration process. A participant indicated that registration officers come around to their district to register them for early registration. Still, late registration is a problem, and applicants must travel to the registration office to register. Due to the distance, it becomes very difficult for people from remote areas to visit the district registration office to register their births.

“I will say accessibility is also a factor. Somebody might be far away, and it will be difficult for the person to go to the registration office. They used to have volunteers who assisted us in registering for the under-one year birth registration. However, the process of a certified copy is not simple unless you travel to the birth and death registration office to provide your details for the registration. The distance from the remote areas to the district registration office delays the registration” (FGD, male, Sunyani-Bono Region).

“The officers are from Bole, but because of the fuel and other issues, they are unable to come. At times when they are not able to come, and you also get something small to register, it will be hard for you to register. But if they can get a means for them to come to our town, then it will help us here” (FGD, male, Bole-Savanna Region)

Another participant explained that many people are not aware of the existence of the registration office in some districts. Even when they are aware of the location, they do not know exactly where the office is located. Hence, most people are unable to access the registration office.

“Many are unaware that Bole has a birth and death registration office. They do not know where the office is. They are supposed to publicize the registration office. I know where they are, but others do not know. How will they know this is the office” (FGD, male, Bole-Savanna Region)

A key informant indicated that most people live in very far and remote areas where transportation from the registration office to such places is difficult. To reach such people, they organise and go to the various communities to register them. This was often done when the district had support from a non-governmental organization that arranged transport and paid registration officers' accommodation fees for some days for mass registration in the scattered areas. Currently, the NGO has stopped offering assistance to the district registration officers. It is, therefore, very difficult for the district to reach out to such people as the applicants are unable to travel to the district office for the registration.

“It is sometimes difficult for a scattered population to register for a birth certificate. For instance, in Asutsuare, going from one community to another is far, and if you are paying for transport, it's a big deal. So even if you get closer to them, it is also a big deal for those around you who come to the registration center to do the registration. What we

normally do is draw a timetable and strictly follow in order to register births in the scattered communities . When the NGO was around, it was done often. Currently, we do not have such support, so we are unable to go ” (IDI, male, registration officer, Dodowa-Greater Accra)

5.3.2 Relevance of the birth registration

Relevance of birth registration is essential to facilitate early registration for a birth certificate. Less importance attached to birth certificates, and ignorance were identified under this theme.

Some participants narrated that most people do not know the importance of a birth certificate. This is because they do not know what the birth certificate is used for, and because some do not have it, they do not see why they are supposed to register their children for the birth certificate. The less importance attached to a birth certificate was also reiterated by a registration officer who attributed low registration of a birth certificate to the less importance.

“Some people will say this is just a paper, so I will not register for the birth certificate, and if I should register, what is its importance? She will say that when she was born, her mother did not register for her, so why should she register for her child? She does not know the importance of this, so she will not think about registering for the birth certificate for the child” (FGD, female, AMA-Greater Accra).

“Some of them do not know the importance of the birth certificate. So, at times when we meet them, we educate them. Sometimes, they will come, but the coming is not encouraging. They will come, but it is not encouraging” (IDI, male registration officer, Damongo-Savanna Region).

Another participant expressed that because some people do not know the importance of birth registration, they do not want to waste time going to the registration office to register. This is mostly the case for people in rural areas, as they do not have much education on the relevance of a birth certificate.

“Some people are not going there to register because they do not know the importance of the birth certificate. So, rather than wasting their time there registering for the child, they would rather be somewhere else. That is my own (FGD, female, Dodowa-Greater Accra).

“What can help people register for a birth certificate early is that we are not all educated in Ghana. Some will hear of the birth certificate but do not know its importance. Especially those who live in the various villages. I do not know if they do that, but they have to send out officers just like you are doing to go to the information centres or FM stations to educate them on the birth certificate. So that somebody who might be listening or is in that town will know its importance. That will motivate a lot of them to know that if they do not register, these are the repercussions” (FGD, male, Sunyani-Bono Region).

Furthermore, a lack of sensitization emerged as a reason why most people do not know the importance. This was narrated by the caregivers/parents.

“They do not know the importance. So, as for the announcement, it has not come. We know from age that the birth certificate is there for us to register. However, some parents do not know the importance of this, and there is no program to educate us. That is why we do not see the need to register” (FGD, female, Jinijini-Bono Region)

“They should be visiting communities, engaging them, educating them on the importance of birth registration. So, if you ask out of 10-20 of the people in the community if they really know a Birth and Death Registry office in Damongo Municipality. They do not know of the office's existence unless they ask other people. The office should be known to people, but here it does not happen that way. It is sometimes difficult, and that is because they do not connect or relate with the people” (FGD, Man, Damongo-Savanna Region)

Participants from the FGD explained that most people do not register their children for a birth certificate because they are ignorant about using the certificate. This is because they are not educated on the relevance of a birth certificate.

“Sometimes it is ignorance. Some people, because they do not know its importance, do not take it seriously. Sometimes ignorance is also one of the factors” (FGD, female, Bole-Savanna Region).

“The most important one is ignorance. They do not know because we do not educate them on the importance of the birth certificate. And then another one also is that people do not

know that a birth certificate is important for them, especially the children. When they are in school, they need a birth certificate. They do not know, so I think the people need more education. They do not know that is why they are not doing it. Some people are also doing it but the others do not know” (FGD, female, Damongo-Savanna Region).

In addition, some caregivers/parents indicated that a lack of knowledge hinders people registering for the birth certificate.

“I see it as a lack of knowledge. Some people do not have any knowledge. They do not know that if they do not register, the child will have to come and register when they grow. I see it as a lack of knowledge preventing many people from registering” (FGD, female, Sunyani-Bono Region).

“Education is very important because some people are unaware that they are supposed to do something like that. Because during , our fathers’ time, they did not take it seriously after birth. But in our time, we are a bit educated. We know that when you are born, they must register your birth and a birth certificate will be issued. So, for education, it is very important. So, we will plead with the stakeholders to educate some of the parents. Those who will come and deliver. If the nurses will educate them for them to know the benefits and how important it is that one should register for their child after birth” (FGD, male, Jiniini, Bono-Region).

5.3.3 Perception of under one-year birth Certificate

Three main themes emerged, namely: non-recognition/misunderstanding of the issuance of birth certificates for children under one-year-old, under-one-year certificates seen as a fake certificate by most people, and expiry of under one year birth certificate

Some participants indicated that the non-recognition of birth certificates for under one year at various institutions affects registration. They indicated that some institutions, such as Ghana Education Service, do not accept under one year birth certificates for children starting school. When parents send the under one-year birth certificate to schools as evidence for their children’s birth registration, they are rejected, and this serves as a challenge for some parents to register early for their children.

“When the child starts going to school, they will ask for the certified copy, which many call the original one. What this means is that the smaller one is not important. But it is good that you do the smaller one before requesting the certified copy, but some people will say that because she has gotten the smaller one, she will not go for the other one, and when that happens, it will worry you” (FGD, female, AMA-Greater Accra).

In order to help institutions to accept the under one-year birth certificate, a key informant indicated that there are plans to convince schools and other institutions to accept the under one year birth certificate.

“Another factor is that some institutions do not recognize the infant birth certificate. It is affecting the registration process. If I give birth, I come and register the child. An institution like a school is requesting a birth certificate, and most, especially government schools, do not accept the under one year birth certificate. We are pushing the agenda of making it compulsory for all headmasters, proprietors, or schools in charge to request a child’s birth certificate, especially the under one-year certificate, before they give them admission. It will help improve birth registration” (IDI, male, registration officer, Sunyani-Bono Region).

Some participants explained that they see under one-year birth certificate as fake because one has to register for a certified copy after one year, and this was the feeling in almost all the districts. As a result, most people do not want to register for the early birth certificate, although it is free. The use of fake for under one year birth certificate was also confirmed by some registration officers.

“I understand that what we are even doing here in Damango is not the original certificate. The original certificate is white and blue. But what we are doing is small and red. So, this one is not the original one. So, it is better we go far away and register the original one” (FGD, female, Damongo-Savanna Region).

“You can even tell them to do the under one year for the kids, which is free, they will tell you I do not need the fake one. I want the original one. Meanwhile, they do not know that this is the original one, so that’s the illiteracy aspect I am talking about” (IDI, male registration officer, Dodowa-Greater Accra)

Another participant indicated that the issue of under one year birth certificate being fake is always discussed among people when they meet. This has spread, and many people believe that it is true.

“They continuously say that the one we register at birth is not good. It is our people who are spreading the news. When we meet, and we start discussing, as we share our views, then they tell us that it is fake, so we have also kept it in mind” (FGD, female, Jinijini-Bono Region)

A registration officer indicated that even those who are educated continue to spread rumours that under one year birth certificate is fake. This is a major problem as most uneducated people get convinced because the educated among them are spreading the news of a fake certificate.

“Sometimes, the educated people tell the neighbours that the pink birth certificate, which is the under one year certificate, is fake, so they should not register for it. (IDI, female registration officer, Dodowa-Greater Accra).

Another issue that affects the issuance of under one year birth certificate is the misconception that they expire. A key informant explained that because the birth certificate has inscription which reads the certificate is for children under 12 months, most people have the understanding that even if a child under one year is registered and issued with a birth certificate, as soon as that child is two years, the under one year certificate automatically becomes irrelevant. Therefore, some people do not see the need to register their children when they give birth. The registration officer further explained that most embassies have started requesting birth certificate for those under one year, which has necessitated the need for people to register, especially those intending to travel outside the country.

“The news or the information we are getting is that the pink birth certificate is not original. As for that, it is the number one factor of delayed registration. Some even say after 12 months, it is not relevant because we have written from 0-12 months. The English is ambiguous to some people. They think that after 12 months, the certificate has expired. It is of no use so why should they come and waste their time, for something that will expire

after 12 months. One thing that is helping us most recently is that the embassies will ask prospective travellers to bring their infant birth certificate before some particular visas are issued. The major issue here is the originality” (IDI, male registration officer, Sunyani-Bono Region).

5.3.4 Family related issues

The main themes under family related issues that were identified include broken homes and out-of-wedlock births. These factors account for the delay in the early registration for birth certificate.

Broken homes were considered as one of the reasons for not registering for a birth certificate in most districts. A registration officer explained that whenever there are broken homes, it becomes very difficult for people to register as there is a shift of responsibility as to who to register the child for a birth certificate. A caregiver/parent’s view was similar to that of a registration officer and reiterated that in broken marriages or homes, the child is always with one of the parents, and this sometimes serves as a hindrance to birth registration.

“I think it may be a social factor, a broken home. The mother will expect the father to register the child for a birth certificate, while the father will expect the mother to do that, too. Even getting a name for the child is an issue. They will tell you my husband has not agreed to this name yet. Before you know, the child is one year old and has not been registered” (IDI, Male registration officer, Dodowa-Greater Accra).

“Like my brother said, it may be marriage issues. For instance, as the child is born, there may be little marriage issues that result in a broken marriage and the mother has taken the child away, with something like this, you will not be able to register the child because the child is not with you” (FGD, male, AMA-Greater Accra).

There were issues of out-of-wedlock births affecting birth registration, and this was mostly the case for unmarried people. Some participants explained that in situations where the man failed to accept the pregnancy, it becomes difficult for them to register the child as there will be no father’s name for the registration.

“Sometimes, when a man impregnates a woman and denies the pregnancy. It creates a

problem. So, you will have to wait until you find the child's father before you can do anything. This can delay the registration of the child's birth certificate” (FGD, female, Sunyani-Bono Region).

“There are some who gave birth outside wedlock, and the family is not accepting the father of the child. It will be very difficult for the mother to go and register the birth for a certificate” (FGD, male, Sunyani-Bono Region).

“With the naming ceremony for teenage pregnancy, when the partner denies the pregnancy and has not come to claim the child. The mother would not know the name to use for the registration. That one can also delay it” (FGD, male, Dodowa-Greater Accra).

5.3.5 Health of the mother and child

From the narratives, the health condition of the child and mother sometimes keeps them at the health facility or home for long, which makes it difficult for the child to be outdoored and the mother to take care of the child.

A participant mentioned that sickness affects the naming of a child and, consequently, birth registration. When the child is not feeling well, the parents may postpone the child's naming until the child is well. Consequently, this affects the registration of the child for birth certificate. Early naming of the child could influence the mother to register the child for a birth certificate. On the other hand, the naming ceremony is done early for children without any health complications.

“It may be that the child who is born is also sick and has been admitted at the hospital for more than a year, and when they finally come home and name the child, all these things you forget” (FGD, male, AMA-Greater Accra).

Health complication from mothers was also noted to affect birth registration. Both caregivers/parents and registration officers explained that the ill-health of a mother may delay the process of registering children for a birth certificate. However, a participant indicated that

sometimes the nurses do the registration for the mother when they realise that they are not feeling well or are not in the capacity to present themselves at the registration point.

“Probably someone might deliver today, and there may be complications from the delivery. Sometimes they will tell you, when this person delivered, it looks like she is not mentally sound, and there is no way the person will be able to register the child early” (IDI, male registration officer, AMA-Greater Accra).

“When you deliver, and you have any health issues or something, you cannot go there to register for the birth certificate, so at times the nurses when they realize that you are sick, they will do it for you but some also forget to record it for you. That is why most of us we do not get the chance to do it” (FGD, female, AMA-Greater Accra)

5.3.6 Communication barrier

A participant mentioned that language barrier serves as a hindrance to registering applicants. For instance, there were issues of registration officers not understanding the language of some applicants. These applicants are unable to communicate in the language that the registration officers understand, and there are no people who understand, speak and translate the Fulani language. This has prevented these people from registering for a birth certificate.

“Language is also a barrier. Sometimes, some people who go there cannot speak Gonja or English. So, it is difficult for them to communicate with the registration officer. For instance, we have a lot of Fulanis around. When they go, how to communicate is a problem. So that one also prevents some people from going to register for a birth certificate as there is no interpreter”. (FGD, male, Damongo-Savanna Region)

Another participant narrated that sometimes, the registration officers speak of technicality as they communicate in languages that confuse applicants.

“Sometimes technicalities or communication barriers are also other factors. I remember it, although it was not from this town. Back somewhere, my wife went to the office, and the explanation given to her was different, and she became confused about how to do it. We plead that they communicate well and reduce the technicalities. It will help people to be able to approach the offices for a birth certificate.” (FGD, male, Damongo-Savanna Region).

5.3.7 Time constraints

The narratives identified time constraints, lack of patience and procrastination as the main themes.

Some participants narrated that they do not have time to join queues and wait to get to their turn to register their children for birth certificate. This is because they are in a hurry due to their work schedules or their daily activities.

“When they go for weighing, they are asked to wait. Sometimes, they tell them to be patient because it is a queue, and they will be attended to one after the other. Then they will be like, “I am in a hurry to go and do something else so do not waste my time”. She will be doing that till the child turns one year when they have not even registered for the smaller one for them” (FGD, female, Jinijini-Bono Region).

“Maybe it is your work and you do not have time. For instance, the woman will have to wake up at dawn to go and sell and leave her child to be sent for the weighing because she does not have time. Whether it has been registered or not, all that matters to her is going to the market, so she does not have the time to register for the child” (FGD, female, AMA-Greater Accra).

Participants mentioned issues of procrastination. Some participants indicated that most applicants postpone their children's registration because they keep giving excuses each day and hope for another day. Consequently, this delays the registration for the birth certificate.

“I see that at times with most people it is laziness. Instead of the person to do it the next or two days, they will start procrastinating till they forget” (FGD, male, AMA-Greater Accra).

“Most people keep procrastinating. It delays birth registration. Some are closer to them, but crossing the road to the office is a problem. That is also part” (FGD, female, Sunyani-Bono Region).

5.3.8 Community influence

There were instances where the community members influenced the registration of birth. Some participants explained that community members who have not registered for a birth certificate negatively influence those with the intention of registering for the birth certificate not to register. Consequently, they failed to register for the certificate.

“Some people have not registered. The people in the community have polluted their minds from registering. So, they do not want to register” (FGD, female, Jinijini-Bono Region).

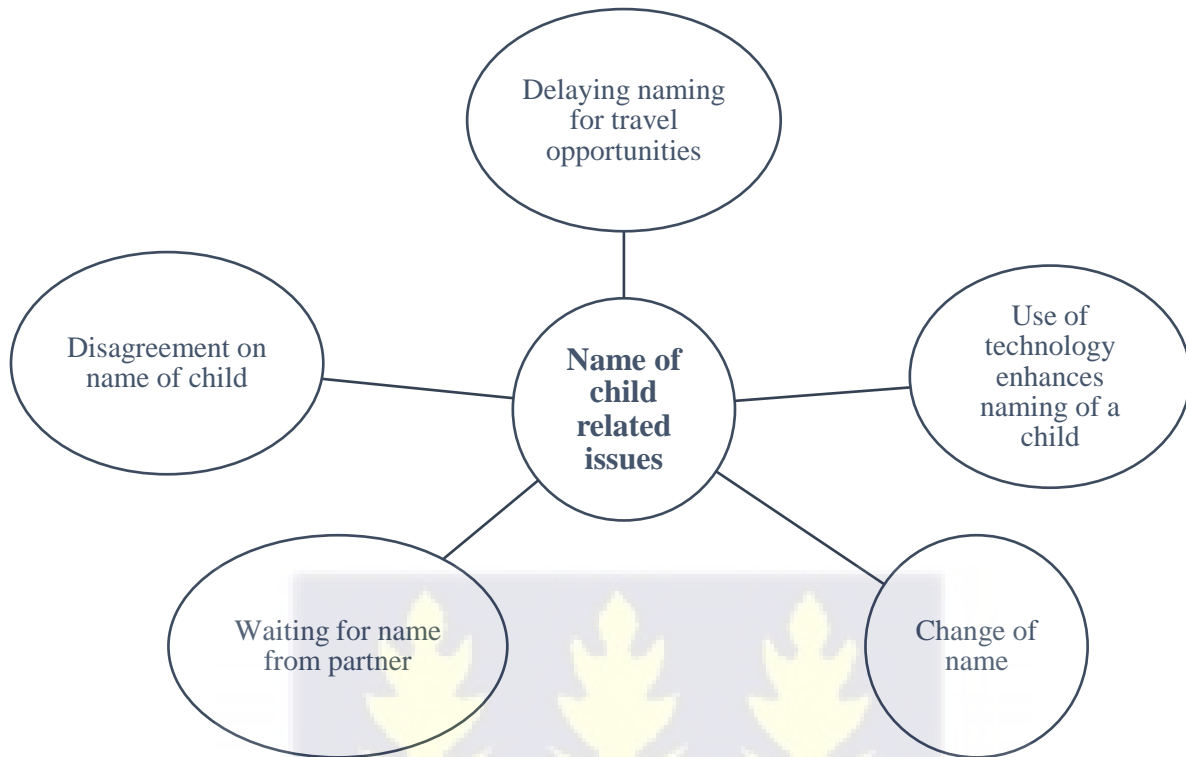
Another participant indicated most men are easily influenced in the Northern Region not to register their children in cases where the mother is not around. Their peers sometimes influence them not to perform this activity as they see it to be the duty of women. This situation has changed the perception of men towards the birth registration of their children.

“When the woman is still in doors, the man can register. But here, some of them, it is peer group influence. When you are going to register the birth of your child, they will say it is your woman who is controlling you. Sometimes, they will ask you where you are going, and the man will respond, I am going to do my child's birth certificate. They mostly follow up with, but where is the mother? Let her come out and go and do the registration. These things discourage men from helping their children to get a birth certificate.” (FGD, female, Damongo-Savanna Region).

5.3.9 Name of child related issues

Social factors related to names that influence registration of births were delaying the naming of a child for travel opportunities, technology to enhance the naming of a child, perceiving change of name in future, preference of names when growing up, waiting for a name from partner and disagreement on the name of a child were identified. These factors negatively and positively impact the naming and subsequently influence the registration of a child for a birth certificate.

Figure 5. 2: Thematic network of name of child related issues



5.3.10.1 Delaying naming for travel opportunities

Some participants narrated that the desire for people to travel in future hinders them from registering for birth certificate early. This is because they sometimes wait for the “ middlemen” and change the child's name to reflect the name given by them to process their document. This delays them in registering for a birth certificate.

“In Ghana, some people think that the only way to travel outside is through a middleman or an agent . Some people want to add other names to their child’s name but they will do so if the middleman tells them which name to use. That is what causes the delay because he knows that when he uses the right information to register the child’s birth, he will not be able to change it later. When that happens, he will start to procrastinate, and that causes the delay”. (FGD, male, Sunyani-Bono Region).

5.3.10.2 Use of technology enhances naming of a child

There were issues with the early registration of names due to the advancement of technology to detect the sex of a child. Parents nowadays look for the name of the child before the child is born. This hastens the process of naming and birth registration.

“What also helps in naming the child early is the use of technology. Because of technology, we know whether the child is a girl or a boy before delivery occurs. So sometimes you may have been able to check the gender and also look for the child's name before birth. So, by the time they come for postnatal care which is 40 days after delivery, they may have the name of the newborn, and that also helps in registering their birth early” (FGD, male, Sunyani-Bono Region).

5.3.10.3 Change of name

The narratives revealed concerns about change of name, mostly for children whose parents are not married. This mostly happens when the man refuses to take responsibility for the child when he/she is born and later comes back to claim custody of the child. When the customary rites are performed, the father has the right to name the child again. The name change sometimes thwarts naming a child whose father failed to take responsibility for the pregnancy.

“The issue is the naming of the people in this area. Apart from that, for instance, if the lady is not married to the man but they give birth, and he hasn't engaged her, they won't allow her to name the child. Sometimes, the woman names the child, and as soon as they are done with the birth certificate, they come and explain that the father has named the child again, so they are here to change it; meanwhile, we have already loaded it into the computer system. In that case, they have to swear an affidavit before they can change the name of the child” (IDI, female registration officer, Dodowa-Greater Accra)

A participant indicated that she had to change her name when she was going to write her Basic Education Certificate Examination (BECE) because her father performed the marriage rite late, so her name was changed.

“It has happened to me. When I was going to write the BECE, the name I had used before was Lois. When I was a kid, they used Lois on my birth certificate. Now, I had to go and change it at the birth certificate office before I could register with Rebecca. Because Lois

was my name when I was a kid, but my father named me Rebecca” (FGD, female, Dodowa-Greater Accra).

5.3.10.4 Waiting for name from partner

Some participants narrated that some people wait for their children's names from their partners, especially those who have travelled outside or within the country. This was prevalent in the Bono Region. The participants and the registration officers attested to the waiting for names from partners.

“I do not understand that the child will be born, and then they will delay till four months or six months before they have the naming. For some, when you ask them, they will tell you their husbands have travelled outside. They will even tell you the name is on the sea coming. How can the name be on the sea coming? If you name him Kofi Nti, Kofi Nti, it will be. So, why are we waiting so long and wasting time registering the child” (FGD, male, Sunyani-Bono Region).

“They have travelled outside; that is the analysis we have done. That is the analysis, and most of them are their firstborn. It takes time for them to organize names. It happens. They have to wait for the partner to give a name before the naming ceremony is performed” (IDI, male registration officer, Sunyani-Bono Region).

A registration officer narrated that the issue of waiting for a name from the partner was not only for those outside the country but also for those in the country and more for those not married. Sometimes, they wait for names from family members, religious leaders and others.

“Factors that delay? As for this place, I do not know what delays them before they do the naming, but I feel that most of them are not married, so to get a name for the child, it is like they have to wait for the child’s father or the uncle to bring the name. I recently got one. I think she registered after seven months or something like that with a long name; she had to wait for the pastor, the father of the child, and the uncle, so all of them had to add a name before the mother came to register the child’s birth, so I made sure that I did not even leave one of the names out. Yes. because most of them are not married, the naming of the child delays” (IDI, female registration officer, Jinijini-Bono Region).

5.3.10.5 Disagreement on the name of a child

Both the mothers/caregivers and the registration officers believed that disagreement on a child's name sometimes delays the child's naming and processing of a birth certificate. Parents sometimes argue about a child's name before agreeing on a particular name. This mostly happens as to who the child is to be named after.

“Sometimes there is a disagreement on the name to be used. This person wants to use this name, and the other person also wants to use this. I wanted to name my lastborn after my father. But my husband told me that our two daughters named one after the father and the other after the mother, and now that this is a boy, he will not allow me to name him after my father. He has named him after his uncle. And we argued this, and it took three months before I could get the name to go and register the birth for a certificate” (FGD, female, Jinijini-Bono Region).

“So usually, it is a back and forth between the mother and father where they want to take a certain name for the child, and they have not agreed yet. Maybe the mother wants to name the child after their grandparents, the father too wants to name the same child after his parents that becomes a struggle till they both settle” (IDI, male registration officer, Sunyani-Bono Region)

5.4 Discussion

The findings of this chapter present a diverse and complex social reason for birth registration in Ghana. Among the reasons identified are accessibility-related issues, the relevance of birth registration, perception of under one year birth certificate, family-related issues, health of mother and child, communication barrier, time constraints, economic issues, community influence and name-related factors affecting birth registration.

Accessibility to registration centres was identified as a major factor for birth registration. Most participants stated they could not access the registration centres due to their distance from their residence. They were living in far places that were not near the registration centres. The finding

of this study is similar to a study by Fagernas and Odame (2013), who reported that accessibility is a barrier to birth registration. The probable reason for this finding could be that, in Ghana, almost all registration centres are located in the district capital towns, making it very difficult for those living far from the district registration office to register. While some hospitals provide birth registration services in Ghana to help improve the timely registration of births, others do not. This could be attributed to the fact that Ghana's health sector is not legally obliged to facilitate birth registration. Sometimes, there are selected hospitals where registration officials are stationed or healthcare workers provide these services.

Consequently, most people living in rural areas do not have access to registration centres, which makes it very difficult for them to register. In addition, some participants recounted the difficulty of being reached by the registration officers due to transportation challenges and poor road network. Accessibility is linked to the second delay in “the three delays model”, which delays an individual in getting to the registration centres.

Though birth registration is regarded as one of the civil registration events and is very important for statistics, planning and policy purposes, few participants reiterated that they know the relevance of the birth certificate. This is because many people do not see the need for the acquisition of a birth certificate as some do not know what the certificate is purposively used for and this demotivates them to register their children. The results show that most people do not know the importance of a birth certificate as they are ignorant of its usage. This attitude, therefore, limits the ability of some people to register their children. Pelowski et al., (2015) explained that in Niger, people do not register for birth certificate because they do not know the relevance of it. In this study, the probable reason could be that though people are aware that it is their responsibility to register their children for birth certificate, they do not know the essence of the

acquisition of the birth certificate. This could result from low sensitization on birth registration by the births and deaths registration officers and the National Commission for Civic Education (NCCE) on the need to register a child for a birth certificate and understanding the relevance of birth certificate. The relevance of the birth registration could be related to the first delay of “the three-delay model”. The reasons for an individual to decide to register for a birth certificate depend on their knowledge and relevance. To broaden the knowledge and understanding of people on the relevance of birth certificate, there is the need to increase sensitization through community engagements, radio talk shows and other programmes that will educate people on the need and relevance of birth certificate. These programmes could be initiated by the Births and Deaths Registry and done monthly in each district targeting different communities to help create awareness and improve people's understanding of the relevance of a birth certificate.

There were instances where some people explained that the birth certificate issued for the under-one year births is fake, so there is no need to register for the certificate. This misconception was found in all the districts where the data were collected. This was because the under-one-year birth certificate has an inscription on top of the certificate which reads to be issued for children from age zero to twelve months. Hence, getting a certified copy of a birth certificate after one year was seen as more relevant than the under one-year certificate. In addition, some participants had concerns that under one-year certificate was not accepted in most places such as schools where a certified copy is required. This therefore limits the desire to register for the under one year birth certificate. Again, the birth certificate for under one year is issued without any fee. Therefore, parents/caregivers are expected to register their births as soon as they are delivered, enabling the country to know the total number of births in each locality. One of the principles of birth registration is that every birth has to be registered within the same year of birth or before the child attains age one hence the Registry needs to have data on all births registered within a particular

year of its occurrence (Registration of Births and Deaths Act, 2020). In addition, under one year birth certificate is very relevant as the birth details of new-borns are captured which enables the Births and Deaths Registry to facilitate the process of generating a certified copy of entry in the register of births on request. It sometimes helps the Registry estimate the potential applicants of under one year births whose parents may be in need of a certified copy.

Family-related issues were identified as a factor causing delays in birth registration. The findings show that most people were unable to register their children early due to broken homes and out-of-wedlock births. Regarding broken homes, sometimes the responsibility of who to register the child is shifted by both the mother and father. In such situations, it becomes very challenging as to who to register the child.

The findings also show that the health of the mother and child is very important towards the naming and registration of children. In a situation where the child is not feeling well or the mother is also not feeling well, the child cannot be named for the processing of the Birth certificate. When such unfortunate development happens, nothing can be done by the family or parents of the child to register their children. The focus of the family will be on restoring the health of both mother and child rather than the child's birth registration. This reinforces the need to ensure that both mother and child are healthy after birth so that the naming can be performed and the subsequent acquisition of the birth certificate.

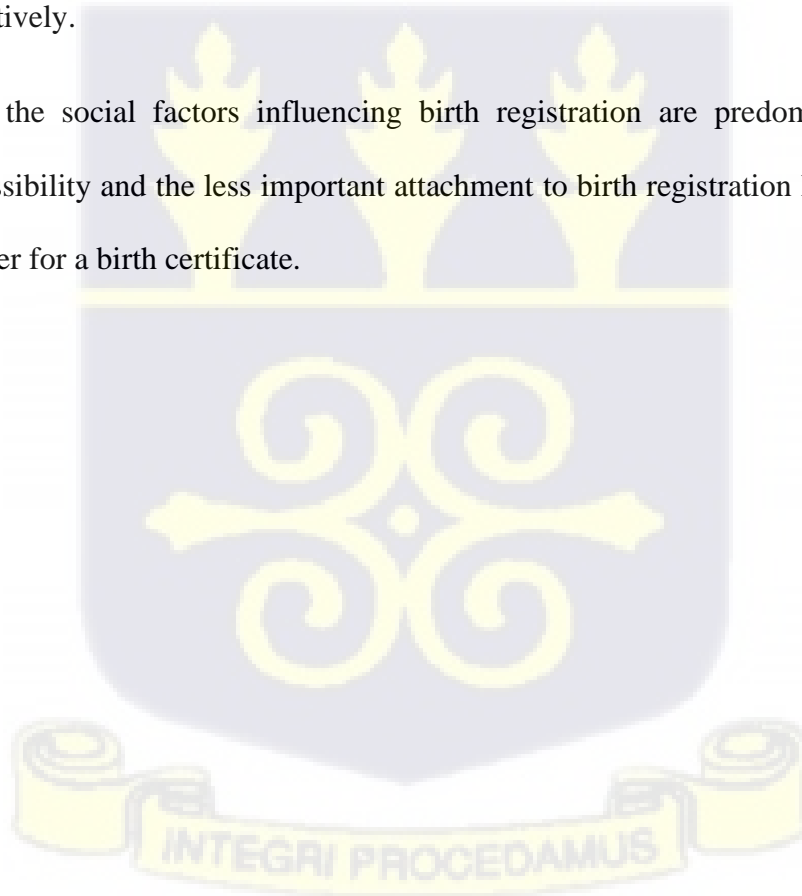
The communication barrier limits people's ability to register for a birth certificate. There were issues of registration officers not understanding the language of some applicants. This was because these applicants were unable to communicate in the language of the registration officers and there were no people who understand, can speak or translate the “Fulani” language. Moreover, sharing birth registration details must be between the registration officer and the

informant and not through a third party. This is because birth information could be distorted. The communication barrier was only identified in northern Ghana. Similar findings have been reported by other studies in Malaysia (Razali et al. 2022; Cheong et al., 2021). These studies reported that some people are unable to communicate in the language of the registration officers, and these difficulties serve as a demotivating factor for people to register. In this study, there was a language barrier for some people communicating with registration officers in northern Ghana. Many languages are spoken in northern Ghana. Because they share border with Burkina Faso and Cote D’voire, many people migrate, especially the herdsmen with their cattle to the northern part of Ghana. Some come to stay and speak foreign languages that are sometimes difficult for others to understand. They, therefore find it very difficult to communicate with registration officers to register their children since they do not understand their language. This difficulty could deter people from registering or delay their decision to register for a birth certificate. This could be related to the first and second delays in “the three-delays model”. It could also influence their choices in their decision-making.

Another social factor that was identified was procrastination. The study results show that procrastination demotivates people to register for birth certificates. Similar factors were reported by Cheong et al., (2021). The probable reason for the procrastination could be that most of the caregivers/parents were into sales and services and working for others, making it very difficult for them to get time to register their children’s birth. In addition, their busy schedules could also account for their procrastination. The results further indicate that to overcome this problem, which is mostly human nature, there is the need to echo the relevance of timely birth registration and the consequences of procrastination when it has to do with late registration of births.

Community influence served as a demotivating factor for people to register. Some participants narrated that community members who have not registered for birth certificates negatively influence those willing to register for the birth certificate not to register. Mostly, the negative influence emanates from the experiences of the people and their interaction with others. The community members discourage others from registering their children for birth certificates. Kumar et al., (2022) reported that inadequate knowledge and attitude of community members limit the registration for birth certificates. Some people do not know much about the birth certificate's relevance and the processes involved in acquiring a birth certificate. In addition, other people have bad attitudes, and they use this attitude to influence people not to register for the birth certificate negatively.

In conclusion, the social factors influencing birth registration are predominantly personal. However, accessibility and the less important attachment to birth registration limit the ability of people to register for a birth certificate.



CHAPTER SIX

CULTURAL FACTORS ASSOCIATED WITH BIRTH REGISTRATION IN GHANA

6.1 Introduction

Cultural factors have the potential to influence birth registration in Ghana. This section analyses the various themes that elucidate the influence of cultural factors on birth registration practices in Ghana. Four themes emerged under cultural factors influencing birth registration: (a) performing rituals before naming twins, (b) performing marriage rites (c) Waiting for the name of a child from leaders among Ahmadis, and (d) material requirement for a naming ceremony.

6.2 Performing rituals before naming twins

Respondents highlighted that rituals are performed for twins at the shrine when they are given birth, which may influence the timing of naming and their birth registration. They indicated that the performance of rituals for twins is common among the Ga ethnic group. Parents perform these rituals for their twins to ensure that their children have come to stay and also inquire about the future of the children, specifically on what the children have to do to ensure their destined future is achieved. However, respondents explained that parents who are Christians do not subscribe to the rituals at the shrine; rather, they pray for God's guidance.

“You know, sometimes twins, for some of the Gas, some are afraid that, if you give birth to twins, they want to find out where the twins are from. They perform some rituals, especially among those who are not Christians. They will consult a fetish priest to ask them if there are some rituals and other things to be performed before the naming of the child. They go to the shrine to see the fetish priest who then call the gods to enquire of the destiny of the children” (IDI, male, AMA-Greater Accra)

“The other tradition there has to do with somebody who gives birth to twins. The people will have to sit and discuss the customs and traditions regarding twins' naming. They will welcome them; they will first call for their spirits and show them what they want to be done. Some parents will say they want to be sent to the church, and some will also ask

that they be welcomed and, for some years, should celebrate them three times before they stop celebrating them. They are going to ask of them from where yes, some churches do that” (FGD, female, AMA-Greater Accra)

According to a respondent, the ritual is not done once but repeated several times to ensure that the right information is ascertained. This, therefore, involves consulting several fetish priests for the rituals to be done. After the first priest, a second priest is consulted to either confirm or reject what the first priest said. In case of rejection, another priest is consulted to confirm what previous priests have said. Respondents acknowledged that these rituals are still practised to date, though they are not as prevalent as in the past. The consultation of varied fetish priests delays the naming of the children and, consequently, the birth registration of the children.

“Maybe, when they go to call the spirits of the children and the children come and they say what they want to be done for them, the children may ask that all these customs and traditions be done within three days, and after that is done the next day, they can name them. It’s not like when they call them here, and they answer, they go to another place to do the same, so if what the first call said confirms the second call, then they will go to a third place, and if the third call also confirms the first and second then it means that what they said is true” (FGD, female, AMA-Greater Accra)

6.3 Performing marriage rites

The performance of marriage rites was identified as a major factor that inhibits the naming and birth registration of a child. This mostly happens to unmarried women who give birth. Culturally, when unmarried women give birth, it is expected that the father of the child steps in or will step in to perform a marriage rite after delivery. In a situation where the father delays performing the rites, the child's naming and birth registration will also be delayed. The performance of the marriage rites makes him the father of the child. In some cultures, the father presents a drink and other items to perform the marriage rites.

“It is tradition that if the man is not married to you and gives birth with you, he cannot name the child unless he marries you. Or unless he comes to see the family so they can see that he is with you, then after the naming, he can do the birth certificate. When that happens, it will change the other name. If he has not done all this for the child to bear his name, then in future that child does not belong to him” (FGD, female, Dodowa-Greater Accra)

“If you have not done the needful rite, then you cannot name the child. You have to perform rites for the woman’s pregnancy before you will be allowed to name the child. Apart from that, they will not allow you to do anything. If the man fails to perform the marriage rites, he cannot name the child. They will name the child after the woman’s father. But you can call the child-like Kwame, Kojo, but with the surname, you cannot use it that is the father’s name” (FGD, male, Dodowa-Greater Accra)

A respondent indicated that the preparation for marriage rites sometimes causes delays in the naming and birth registration of the child. There are instances in which some people want to perform customary and ordinance marriages together, mostly in the northern part of the country. It takes them more time to prepare for the ordinance marriage and therefore delays the naming and registration of the child.

“Yeah, because some naming ceremonies will take up to a week before they will do the naming ceremony. For some, it will take up to 40 days. In such a situation , they will combine everything. They want to do the naming ceremony plus the wedding together. So that one will delay the registration. The person will wait till they do everything before the person comes and registers the child. Because by then, the child's name would not have been given. The person will wait till they do the naming ceremony before the person comes and does the registration” (IDI, female, Damongo-Savanna Region).

6.4 Waiting for the name of a child from leaders among Ahmadis

There was an instance where some participants narrated that Ahmadi Muslims wait for a name from London before they name a child. This is common among the Ahmadis, especially for those who want their child to be prominent, such as doctors and lawyers. The child's mother will write to the leader in London for a name for the child. Sometimes, it takes more time for the leader in

London to send the name to the mother. For instance, a participant indicated that it's been six months since his brother gave birth, and they are waiting for a name from the leader.

“The Ahmadis, when you give birth or before you give birth, we have a leader in London, UK, who brings the name. Muslims who named their children and want them to grow and become doctors or nurses and prominent people must wait for the name from London. So, if you want to offer your child that calling, you will have to write a letter to the UK for our leader to send the name to you. An example is my brother, who has delivered, and the child is 6 months old. The process they take in writing from here to there, and when they are to name the child, the name is not back from the UK to Ghana. Because of that, we must hold on to the name for the name to come. Due to this factor, the naming will be delayed” (FGD, male, Sunyani-Bono Region)

6.5 Material requirement for naming ceremony

Participants narrated that the material requirement for the naming ceremony sometimes delays the naming process, which also impacts the processing of birth certificates. For instance, traditionalists name their children early compared to other religious groups because they do not need a big occasion or ceremony to name their children. They name them anytime without requiring more material or resources for the ceremony, unlike Christians and Muslims. Doing this pave the way for them to register their children early for a birth certificate.

“The traditionalists are faster than the Christians. With the traditionalists, they meet to discuss, and it is time-bound. It is almost like that of the Muslims. They deal with drinks; all they need is their alcohol or schnapps to dip on the tongue of the child, and then they are done. It is also almost like the Muslim tradition. Some of the baby's navel might not have healed. You must wait for it to heal before you can put honey or water in her mouth” (FGD, male, Sunyani-Bono Region).

“I think somebody who does not go to church when they give birth on a day, and you are called Kojo or Akwasi, that is the name they will call you. When it comes to registering, they will not have to delay. All that they need to do is to go and register the birth of the child. But for someone who attends church, the pastor might have set a date to come, like after 40 days before you can bring the child for naming. However, the other person does not attend church, so if he says his child is Akwasi, he will be called. So, if it will be a day for him to name his child and go for the birth certificate, he will do that. That is my

opinion” (FGD, male, Jinijini, Bono Region).

6.4 Discussion

Rituals for twins before naming were identified as a factor causing a delay in naming. This practice was common among the Ga ethnic group in Greater Accra. Participants expressed that the rituals are done for the child to ascertain whether they will live for long or not. Marion (1973) documented similar practices among the Ga ethnic group and reported that twins are regarded as desirable anomalies from unusual reproductive powers and are associated with certain spirits. Due to this, some rituals are performed for the twins to invoke their spirit to ascertain who they are. The process involved in this consultation sometimes delayed, making it impossible for a naming ceremony to be conducted in time. Mtaku, (2016) reported similar rituals performed for twins in Yuroba before a naming ceremony is performed. In Nigeria, there is a belief that twins are born with supernatural powers, and they can die and be reborn by another woman. The rituals, therefore, suppress their supernatural powers. One probable reason for the delay in the naming ceremony of twins in this study could be attributed to the continuation of invoking the spirit of twins to ascertain who they are. Though in modern times, the practices may have been reduced, but are still performed by those affiliated with the traditional religion due to the advancement of religion and technology. Likewise, Yalley (2015) reported that in the Western region of Ghana, “Abam” is a sacred ritual performed to show gratitude to the divinities for giving special babies or twins to certain individuals in the society. Its observance is characterized by pump and pageantry. It is celebrated among the people of Sekondi and other Ahanta communities in the Western Region and also among the Gas, the Krobos, the Ewes, and the Fantes. In recent times, the advancement of Christianity has reduced the practice among the people. Notwithstanding, it is still practised.

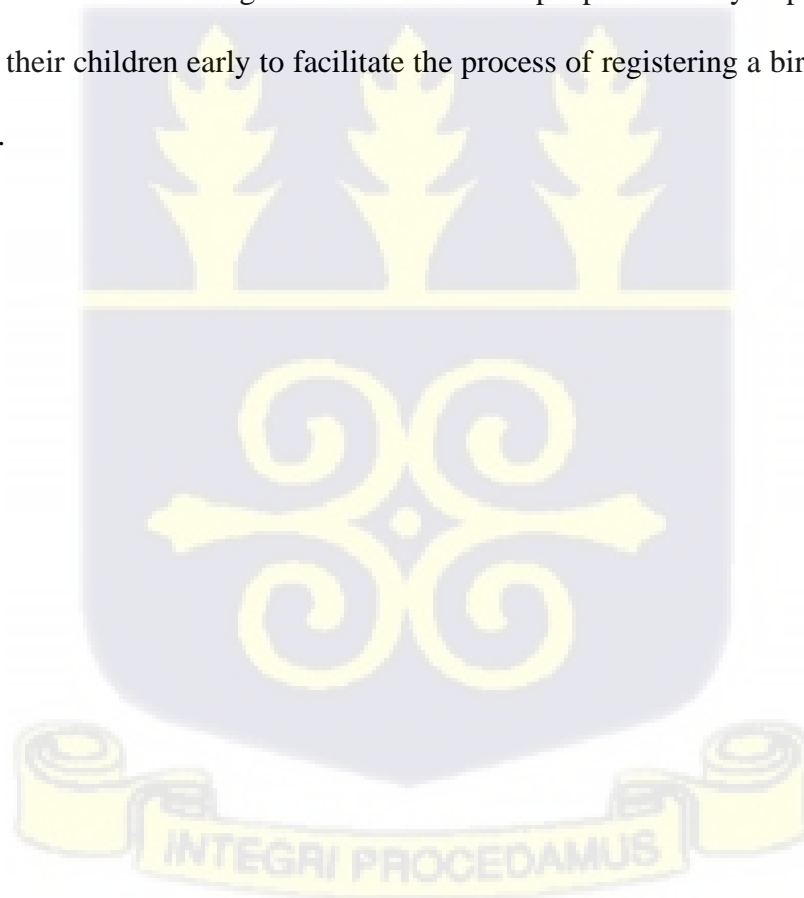
The performance of marriage rites before the father takes the custodian of a baby for a naming ceremony is very significant in Ghana. For unmarried women, the father of the baby is expected to perform a marriage rite to show that he has taken full responsibility for the child. Sometimes the preparation for the marriage delays, which also delays the naming ceremony. Afful and Nantwi (2018) reported that among the Krobos in Ghana, preparation towards a naming ceremony sometimes delays as the man takes time to prepare for the ceremony. This indirectly delays the naming ceremony. The probable reason for the delay in marriage ceremony could be finances and other things needed for the ceremony, as the man may not be adequately prepared for the marriage rites (Onyima, 2014). Another reason could be that the man may be contemplating whether to marry the woman or not. This could also cause a delay. However, without the performance of marriage rites, the findings of this study show that the man will be denied the right to name the child, which will subsequently affect birth registration and the acquisition of birth certificate.

In addition, among the Ahmadis, children who want to become prominent and follow the doctrine are named by the Ahmadis headquarters. A similar finding was reported by Balzani, (2010), who argued that among the Ahmadis, the institution of Waqf-e-Nau established by the fourth Ahmadi Khalifa is very relevant for the Ahmadis community. Hence, parents are encouraged to sacrifice their children to the cause of Ahmadiyyat, often when they are born. When parents decide to make such sacrifices, they wait for a name from the headquarters for the child in order to make the child prominent. Waiting for a child's name among the Ahmadis mostly delays the naming of a child. The waiting period takes a long time, consequently affecting the child's naming day. In this study, the probable reason for this practice could be that the Ahmadis strongly believe that following this process of naming a child will make him/her prominent in future. Their belief could also emanate from experiential knowledge or what they have seen among their friends and families

who followed the practice of naming their children. It is, therefore, very difficult for them to disassociate themselves from this practice, which stresses entrenched behaviour.

The cultural factors could be linked to the first delay of “the three-delay model” related to the factors that could delay an individual registering their child for a birth certificate. These delays directly influence the naming of a child; without the naming, it would be difficult to register for a birth certificate.

In conclusion, several cultural factors relating to the delay in a naming ceremony account for the delay in birth registration. These factors are beyond individual levels, and they are entrenched beliefs and norms that control or regulate the behaviour of people. It is very important we sensitize people to name their children early to facilitate the process of registering a birth and acquiring a birth certificate.



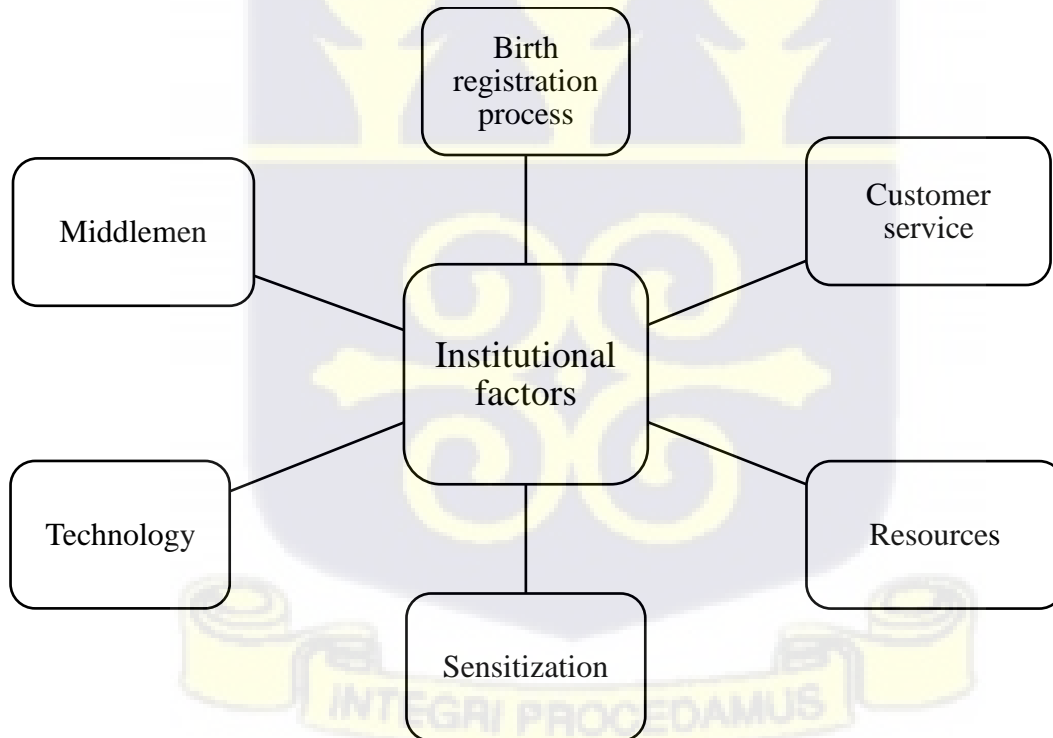
CHAPTER SEVEN

INSTITUTIONAL FACTORS ASSOCIATED WITH BIRTH REGISTRATION

7.1 Introduction

This chapter examines the institutional factors affecting birth registration in Ghana. The institutional factors are presented in six organising themes: (i) birth registration process (ii) customer service (iii) resources (iv) sensitization (v) technology, and (vi) middlemen. Basic themes and sample quotes from the participants are presented in an elaborate form. The organizing themes are shown in Figure 7.1.

Figure 7. 1: Thematic network showing institutional factors associated with birth registration



7.2 Birth registration process

This organising theme is concerned with the birth registration process. The underlying basic themes are requirements for birth registration, registration materials, filling of forms, issuance of a birth certificate and operation at the registration office.

7.2.1 Requirement for birth registration

Every registration has some basic requirements for the process. From the narratives, the sub-basic themes that were identified are weighing card or the maternal and child health record book, birth record book, and certified copy of entry in the register of births.

Participants from the in-depth interviews and focus group discussions had knowledge of the requirement for birth registration, and they expressed that a weighing card or maternal health and child record book and a birth record book are used for registration of a birth certificate in Ghana for both under one year certificate and the certified copy. Almost all participants from the various regions were aware of the requirement for birth registration.

***I:** What are the requirements for registration?*

***R:** Yes, it is weighing card and then birth record book” (IDI, male registration officer, Sunyani – Bono Region)*

“When you go there to register, they ask for the weighing card. Having it makes it easy because they have to look in the weighing card to record some background information. It makes it easy, but if you do not have the weighing card, it makes you suffer before you register” (FGD, female, Dodowa-Greater Accra).

In addition, some registration officers emphasized that they ask for a weighing card as proof of birth of the newly born children. It also enables registration officers to reference other demographic details of the child and that of the parents.

“First, we ask for identification for the proof of the birth of the child. We ask something like the weighing card If the person has a weighing card or baptismal certificate” (IDI, male registration officer, AMA-Greater Accra).

“For the birth registration, yes, I need the weighing book of the child and I check where we normally write the birth registration number. Then, I asked for the parents’ names. Sometimes, I make sure they write it because the spellings may be different sometimes, how I know it might be different and where exactly they gave birth to the child. So those are the things” (IDI, female registration officer, Jinijini – Bono Region)

For the processing of a certified copy of the entry, a registration officer explained that, first, a birth certificate is required. This enables the registration officers to trace their records for the preparation of the certified copy. In a situation where the informant does not have the under one-year birth certificate and a weighing book or the maternal health and child record book, questions are asked to enable the registration officers to process a certified copy of a birth certificate.

“The certified copy, normally, I ask them whether they have a birth certificate or whether they have registered the birth before. So, if they had registered before , I take a copy and conduct a search . If they do not have one, I make a new registration. So, if you have a Ghana card, I just take your Ghana card to make sure everything you are saying is the truth” (IDI, female registration officer, Jinijini – Bono Region).

7.2.2 Registration materials

Registration materials are very essential for the continuous registration of births. Two main sub-basic themes were identified from the narratives, and these are availability and non-availability of materials.

The registration officers explained that the materials or logistics for registering births are always available. Most of the registration officers reiterated that they have enough materials for the registration of births, and they hardly run out of stock.

“Yes, I would say there are enough materials. Basically, a lot of A4 sheets, black pens and red pens. We hardly run out of those things. We are always stocked with computers. We do not run out of any other thing” (IDI, female registration officer, Jinijini, Bono Region)

“In my district, all the time there are materials available for the work, so we do not really have any challenges” (IDI, male registration officer, AMA, Greater Accra)

Though there were availability of registration materials, a registration officer in the northern part of Ghana indicated that the district registration office used to run out of stock, but at the moment, they do not run out of stock.

“For now, I think it’s better. I have to be sincere. We have enough forms. But those days there were times you had to run photocopies. You have to use your own money and run photocopies (IDI, male registration officer, Bole, Savanna Region)

On the other hand, a registration officer explained that, at times, there is a shortage of registration materials because they always register applicants for a birth certificate.

“With materials, we are sometimes in shortage, I will say Form 4 and sometimes Form 5 but the Form 4, you know we are always doing the registration with Form 4” (IDI, female registration officer, Dodowa, Greater Accra).

Some parents/caregivers narrated that sometimes they visit the birth and death registration office only to be told that they do not have registration materials. This discourages them from going to the office again for the registration. Another parent/caregiver mentioned that she went to Berekum office several times and was consistently told that the tablet used for the birth registration had been taken to Sunyani. That demotivated her to go back to the office again for the registration.

“Another reason is the lack of materials. It may be that the day they were asked to come, the forms that they needed to fill were finished, so they should go and come another week. They come after another week, and they will be told that the forms are still not in, and when these continue, they tend to forget or get discouraged and stop going” (FGD, male, AMA, Greater Accra).

“I travelled to Berekum thrice, and they told me the machine. I do not know what machine it is. I do not know anything about their work. So, when I went thrice, and all the time, they told me the machines were not there and that it has been taken to Sunyani. ...then it was not necessary for me to come back again, you see. So that is what made me stop going there” (FGD, female, Jinijini-Bono Region)

7.2.3 Filling of forms

Four main themes were identified under the filling of forms. They include easy filling of forms, joining queues, documentation challenges and use of paper to collect information. These themes negatively impact the registration process for a birth certificate.

Participants from the FGD and the registration officers mentioned that filling out the forms for a birth certificate is not difficult. The FGD participants narrated that the registration officers ask for some basic information and the filling of forms does not go beyond 10 minutes.

“I believe the process is not anything difficult. They just ask for what is needed, and then you provide it for them, that is all. So, it is not any long thing” (FGD, male, Dodowa-Greater Accra)

“I last went there with a friend; they will just take your information. They will write everything down and will not even take you about 10 minutes” (FGD, male, Damongo-Savannah Region).

In addition, participants recounted their ordeal in joining queues to register for a birth certificate. In Dodowa, some FGD participants indicated that people from nearby districts apply for birth certificates in their district, which sometimes leads to long queues.

“It is something that disturbs a lot. If there is anything that they ask us to do here in Dodowa and we are supposed to go to the office, those from Madina and Koforidua will all be here. You will go and join a queue till you break down and go back home” (FGD, male, AMA-Greater Accra).

Other participants mentioned that because they do not have registration officers stationed in some parts of the district, registration officers from different districts come to register them during mass registration. Due to this, applicants get to the registration centre early in the morning and leave there late in the evening due to limited number of registration officers, thereby resulting in queues. Hence, most people are unable to wait to get to their turn and register. They go back home without registering.

“It is very true we delay there. If you are not somebody who needs it very urgently, then you will even leave the place. You can wake up around 6 o’clock in the morning, and they may not be in, but you are going to join a queue. By the time you get there somebody also needs it urgently, and they may have gone there at dawn waiting. You will be waiting, and it will never reach your turn” (FGD, male, Jinijini-Bono Region).

“That is the more reason we do not register for the birth certificate. The registration officers are not many so it does not move fast. You know, the birth certificate is not something that when you get there, you will go and register and be done with. They will ask you questions and put them down” (FGD, female, Jinijini-Bono Region).

Moreover, some participants expressed concern in relation to providing particulars for the filling of the birth registration form. A key informant indicated that some applicants are sometimes skeptical about the surname of their children. They do not know the spelling of the surname and sometimes the first name. This makes it very difficult for the registration officers to write the name.

“The challenge I have is with the name spelling because some of them come in they do not know how to spell the name. Sometimes you write the name, and they come back and tell you that what you spelt is wrong” (IDI, female registration officer, Jinijini- Bono Region)

However, some FGD participants highlighted that there are avenues for correction of names. Applicants have to pay a fee before a name is corrected.

“We have a place to go, but if you have a problem and go there. they will request money before they correct the name for you” (FGD, female, Damongo-Savanna Region).

A registration officer complained about the use of paper for data collection. He indicated that fatigue set in when using paper to collect information from applicants, which consequently leads to mistakes in writing some of the details.

“When we are writing, and we write a lot, there is a tendency for human error. Because the more you write, the more you will miss certain things. Yes. And sometimes you might put information where you should not put it because you are writing a lot. And as fatigue comes in, your concentration drops and these are vital information that you cannot rule out. So, when you write a lot, these are some of the issues it causes” (IDI, male registration officer, Sunyani-Bono Region).

7.2.4 Issuance of birth certificate

One major factor that negatively impacts birth registration is the issuance of birth certificates. Under this theme, two main sub-themes were identified: non-delay and delay in issuance of a birth certificate.

Most FGD participants indicated that with early birth registration, thus the infant registration, the process and issuance of the under one-year birth certificate does not delay. The birth certificate is issued on the same day.

“When you come, you will not even spend 5 minutes there, then they register for you because it is free. You will not pay any money. Aside from the rubber that they will sell for you, even with that, it is not expensive, 5 cedis. Then you pay, and they put the child’s certificate in. It is not mandatory that you should buy the rubber if you do not want it. You can take the certificate like that, then you leave” (FGD, female, Sunyani-Bono Region).

Though most FGD participants accounted that there is a delay in the issuance of a certified copy, few participants reiterated that it does not delay. Some were of the view that they got their birth certificate within the time that the registration officers gave them.

“When you register for the computer-generated certificate unofficially called biometric, they will ask you to come for it after two months. When the date is due, you will get a call that your birth certificate has arrived at the office. They sometimes bring them to the health centres. They will ask you to go to this health centre, and that your birth certificate has been sent there, go there for it” (FGD, male, Bole-Savanna)

“When I registered for a certified copy, it did not delay. When I registered, they asked me to come after three months, and when I went there after three months, it was ready. It does not delay. I see it as when there is a breakdown in the system, then it delays, but if it does not, then it will not delay” (FGD, female, Sunyani-Bono Region)

In contrast, both registration officers and caregivers/parents expressed their dissatisfaction with the delay in the issuance of a certified copy of a birth certificate. The delay was attributed to the process of processing a certified copy of a birth certificate. The printing of the certificate is done mostly in Accra, and each district sends its information to the central point, Accra, for printing, and that is where the delay comes from.

“It delays after we submit it for processing. When you keep tossing people, after six or seven months, they tend to complain and ask what machine we use over here because someone went to Accra for the registration, and it’s been done” (IDI, female registration officer, Dodowa, Greater Accra)

In addition, some FGD participants expressed that the delay is attributed to a system shutdown and an inadequate number of machines to process the information to Accra. These factors prevent people from registering their children for a birth certificate. Some participants after going through this delay, do not come again to register their child.

“Please, I see it as when you come to the office to register. They make you understand they upload it onto the system then it goes to Accra. When you ask them, they say it is the system. Also, they will tell you while registering, the system has broken down. So, they are not able to continue for you. All these things can delay the birth certificate. It makes people give up. They give up and will not come and register the birth certificate for their children. When it even comes, they will not go for it yes please” (FGD, female, Sunyani, Bono Region).

A participant narrated that sometimes they tell people their experiences regarding the delay in the issuance of the birth certificate. This at times, influences others by discouraging them from registering their children.

“The main problem there is the machines. If you get there, the machines are not there. They will have to write everything down and say they have to forward it to Tamale. It will pass through some process before it comes. Before you will have it, it will even take more than three months before you get it. Due to that, when you go, they will be asking you to go and come, go and come. If you were a victim and you went to register, and your colleague asked you to give that scenario of "go and come,". That will also discourage the person from going to register. So, I think the office needs to fix that machine there so that it will make the work easier for us here and around” (FGD, msale, Damongo, Savanna Region).

7.2.5 Operation at the registration office

In terms of operation at the registration office, the unavailability of registration officers at post and registration on specific days were identified.

Operation at the registration offices is very crucial towards registering births. Some parents/caregivers mostly in the Northern zone, expressed their concerns about not meeting the registration officer at the office, though the office is opened often. At times, they have to call the registration officer to come and register them for a birth certificate.

“I am a victim. When I gave birth to my child, I went there. The office was opened but nobody was there. So, I quickly called the assembly man of my electoral area. Do you have the contact of this person. He said he would find out and give it to me. So, I went home and went to the office again around 3 pm. It was still opened and the man was not there” (FGD,

male, Damongo-Savanna).

Another parent/caregiver expressed that sometimes their registration office is closed during working hours.

The office is always locked; you will go there for about one week, and the office is not opened. So, if you continue going and coming, 5 cedis, 10 cedis for five days how much is that for one week? (FGD, female, Damongo-Savanna).

On the other hand, because some districts did not have offices, registration for birth certificates is done by registration officers from nearby districts. Due to this, the registration was done on specific days, which limited the ability of many people to register their births.

“They used to come from Berekum to this place. I do not know about it now, but from the previous information that I had, they were coming from somewhere to organize the registration for us on Tuesdays and Thursdays. So, when it comes to their staff, there are some challenges there” (FGD, male, Jini-jini- Bono Region).

7.3 Customer service

This organizing theme examined the relationship between clients and registration officers. Among the themes that were identified include access to information by applicants, attitudes of staff towards clients and clients’ complaints.

7.3.1 Access to information

Participants expressed their views on access to information and there were mixed views. Most parents/caregivers narrated that they have access to information. They do this by asking for clarification anytime they go to the registration office(s), and the registration officers respond to them very well.

“Yes, when they come, they ask questions. It's not something difficult. We brief them on the questions they ask, and we give them information” (IDI, male registration officer, AMA-Greater Accra)

“When they come here to register, and you have questions, you can ask them. When you ask them, they will explain it well to you. The things that you do not understand will be explained to you well. When you ask anything, they will answer you” (FGD, male, Bole-Savanna Region)

However, some FGD participants, mostly in the northern region also recounted that they do not have access to information and sometimes find it very difficult meeting the registration officers at the office to ask them questions.

“Actually, accessing information is very difficult. Because most often you go to the office and you will not even meet a staff, a single staff. So, in that case, how do you access information? That is a challenge actually” (FGD, male, Damongo-Savanna Region).

“Yes, they have an office at Damango that you can go and workers are there. But it is not always that you will go and meet them. Sometimes you have the problem, but you will feel like, “Will I even go and meet these people?”. Because it is not every time that they are there” (FGD, female, Damongo-Savanna Region).

7.3.2 Attitude of staff towards applicants

With regard to the attitude of registration officers towards clients, participants indicated bad and good attitudes.

A few participants expressed that the attitude of the registration officers is very good. They explained that the officers have time for applicants, speak to them politely, and take their time to explain the birth registration process to them.

“When you go to the office, they will tell you whatever concern you have about the birth certificate you come to them. They do not want any request that you want it early than the scheduled waiting period. They explain for you to understand that if you want the certified copy unofficially called biometric, it takes two months for you to get it. When the two

months is due, you will receive your certificate. They will talk to you very well” (FGD, male, Bole-Savanna Region)

“As for the relation, the man that is in charge now is a good man. When you go, he takes his time, talks nicely to you and asks you all the necessary questions about what he needs to know and subsequently prepares a birth certificate for you” (FGD, male, Damongo-Savanna Region).

One registration officer expressed that the attitude of registration officers is very good. He disagreed with the view that most registration officers fidget with their phones by explaining that they sometimes receive information on their phones to process birth certificates for applicants.

“The attitude is always positive. They are the reason why we are here to serve. Because there have been times that people also complain that when they come to the offices, some are there fidgeting with their phones and then when it's time for them to work, even when the network is on, they will not work and they will delay them, they will be there and come back and tell them the network is gone. Sometimes, we work with our phones. Someone has sent information we have to copy them on Form 4” (IDI, male, Dodowa-Greater Accra)

On the other hand, most FGD participants indicated that the attitude of the registration officers is very bad. They narrated that sometimes it is difficult for applicants to interact with them. They become bossy and express themselves anyhow.

“When I went to register for my birth certificate, the person I met there if I tell you that he/she spoke with me politely, then I am lying. The way they will talk to you is as if they have gotten some big position, so they do not even consider you. They have to know that it is service to man, and it is not on their will that they are seated there. If nobody were coming there, then they would not be having any work to do. So as for the politeness, they are not polite with us, and that is the truth” (FGD, male, Jinijini-Bono Region)

7.3.3. Clients' complaints

In terms of clients' complaints, few FGD participants indicated that there are avenues for clients to lodge their complaints. However, they indicated that the registration officers do not listen and address their concerns when they lodge complaints.

“If you have a concern and you tell the person and they do not take it, you have nothing to do about it because that is the work he/she is doing. When you have a concern, and you tell them they will not consider it, they will do what they think is okay for them. They are not going to mind you” (FGD, male, Jinijini-Bono Region).

Also, most FGD participants indicated that there are no avenues for them to lodge complaints. A registration officer also expressed that there are no avenues for clients, such as a place designated for clients to lodge complaints.

“We do not have anywhere to lodge our complaints, and the issue is the registration officer is already angry with you and will not allow you to say anything, so they will ask you to leave” (FGD, male, AMA-Greater Accra)

“We do not have a desk designated for complaints” (IDI, female registration officer, Dodowa-Greater Accra)

A participant mentioned that in a situation where there is a mistake on the issued birth certificate, there are no proper avenues for clients to lodge complaints. Sometimes, the registration officer may not get time to attend to you because of the number of people they are attending to.

“Another one is after registering and you realize there are some mistakes, and you inform the person. Because there are many people there and they want to finish their registration for them, they will not even have the time to take yours and go through to correct the mistakes. There was a day it happened to me that there was a mistake on mine. When it happens like that you have disturbed me. Because there is pressure on him/her due to the number of people there, he/she would not want to attend to you again, . So, this is also something that worries us a lot” (FGD, male, Jinijini-Bono Region)

7.4 Human Resources

With regard to human resources, staff strength and capacity building were identified.

7.4.1. Staff strength

Participants were asked about the staff strength in the various registration offices and how that affects the birth registration process. Both registration officers and parents/caregivers identified that the staff is adequate, while others explained that the staff in some of the districts are inadequate. Due to the inadequacy of the staff, some volunteers assist in the registration of clients.

Parents/caregivers and registration officers were of the view that the registration officers were adequate in some districts. Others narrated that currently there has been an improvement in the staff strength compared to the previous years.

“Yeah, we have enough staff” (IDI, male registration officer, Dodowa- Greater Accra)

“Yeah, it has improved; it has improved. Within Sunyani municipality, two officers are quite good. I have other supporting staff, the nurses and other people helping out to get the firsthand information, so it is quite well. The staff is okay and is better than what it used to be” (IDI, male registration officer, Sunyani-Bono Region).

“We are enough, and the work is never more than the staff” (IDI, male registration officer, AMA-Greater Accra)

Most FGD participants indicated that the number of staff (birth and death registration staff) are inadequate, and that has affected the work of birth and death registration officers. A registration officer also accounted that registration has stalled because the workers are few, so they are unable to reach out to scattered populations in the districts. To some extent, the registration officers are sometimes overwhelmed with the workload at the office.

“I will say those who work over here are not many because our community is scattered, that is why the registration stalls. Our staff strength is less” (IDI, female registration officer)

officer, Dodowa- Greater Accra).

“As for the staff, they are not many. There may be only 2 or 3 officers and the people over there may be over 100 clients, and they all need the birth of their children to be registered.” (FGD, male, Jinijini-Bono Region)

Another participant expressed that inadequate registration officers consequently lead to delays in registration for birth certificates as one staff may have to attend to many clients which also causes delays in serving them.

“You can just imagine one person being there in the office. When you go there and assume you meet ten people there, it will take time. It can take the whole day, and you will not be able to fill in your information. So, because of that it will not even motivate you to go there. Because it is only one person that is there and the equipment that they are using there are not available” (FGD, male, Damongo-Savanna Region)

Due to the number of inadequate registration officers, some volunteers work in the various districts. These volunteers assist in the process of birth registration. They mostly move around, collect data or information and process them for a birth certificate. These volunteers are not enough, according to some FGD participants.

“We had one volunteer, when you give birth you can give it to him, and he will go and register for you. We do not need only one if we could get more. Some of us here we do not have any work doing. If we could get more in addition, we can go to the various villages and assist in birth registration. When they come then we give it to them to go and register and bring it back” (FGD, female, Bole -Savanna Region)

Because the volunteers are not permanent staff of the Registry, they are not paid by the government. However, the District Registration officers motivate them by giving them part of their monthly salary. In contrast, others are motivated by the proceeds they get from infant registration, that is, selling files and covers that are used to protect the birth certificate from being damaged.

“You know, at times, when you receive your monthly salary. You can give the volunteer something to buy things, such as soap to wash their things and also food. And then, at times when someone comes, to register, some people can even appreciate you by given you some

money . ” (IDI, female registration officer, Damongo -Savanna Region).

7.4.2. Capacity building of staff

From the narratives, two main themes emerged from the capacity building. These are building the capacity of staff and not building the capacity of staff.

Registration officers were asked how often they build the capacity of their staff. Most participants were of the view that they frequently organize workshops and training to build the capacity of their staff. This is mostly done for new staff and whenever there is an introduction of something new regarding birth and death registration.

“It's done frequently. It's something my boss always stresses on all the time we go through, anytime a new person join us. Anything new thing comes up she takes us through it” (IDI, male registration officer, Dodowa-Greater Accra)

“For me as a district officer, I mostly organize my guys anytime there is a new development. When there was the introduction of the M- birth that is the software developed to register only infant births, although the region organized a training, the district office will also have to train the officers regularly because it is not everything that they will get from the Region” (IDI, male registration officer, Sunyani-Bono Region)

In addition, the training is not done only for permanent staff of the various district officers. Rather, it includes volunteers, service personnel and those who work for the Registry.

“We do call them once in a while to train them so when we call them sometimes, we have to buy like marker, pen and other things. If you allow them, they will be doing certain things that are not permitted or its not allowed, so we do organise training for them. When they come, especially the service personnel, once in a while, we add them to the volunteers just to take them through an in-service training and after that you have to get something small for them” (IDI, male registration officer, Bole-Savanna Region).

Few participants emphasized that capacity building for workers is not done frequently in some districts.

“They sometimes have training for us. It’s been 12 years since I joined the service, and we have had three training programmes” (IDI, female registration officer, Dodowa- Greater Accra)

“I would not say so because most of the work is very routine. It does not really come with too many changes to the fact that we need to be having in-service training from time to time as basically the same thing over and over again 90% of the time. So, I would not see that as a challenge, yes” (IDI, male registration officer, Sunyani-Bono Region)

On the other hand, a registration officer emphasized that he does not remember when training and workshops to build the capacity of staff were done.

“We do not have capacity building training for a worker. I cannot remember the last day we organized an in-service training. I don’t remember the last time” (IDI, male registration officer, AMA-Greater Accra)

7.5 Material resource

Regarding the material resources, infrastructure, distance to registration offices and logistics were identified as the main themes.

7.5.1 Infrastructure

From the narratives, few parents/caregivers and the registration officers expressed that there is enough infrastructure, while others were of the view that there are few infrastructures.

Few parents/caregivers expressed that they have enough infrastructure or office for birth registration. The infrastructure includes the main registration offices, weighing centres and hospitals.

“We have registration centres. We have weighing centres that we all go to. The centres are there, every hospital that we have a centre we are supposed to go there to register newborn babies” (IDI, male registration officer, Dodowa-Greater Accra).

“I think here in Sunyani, we have three centres. There is one in the Sunyani town, there is one at the Regional Hospital, Municipal, and the Regional Office. So, when you go to the Regional Office and you decide to register, they will register the birth for you. When you

come to the Municipal Hospital also, they will equally register the birth . The information they need from you is the same everywhere. So, I think it is okay” (FGD, female, Sunyani-Bono Region)

Most registration officers were of the view that they did not have enough offices, and this, therefore, affected the registration of applicants for birth certificates. There are instances where registration officers share an office with other departments in the districts, which limits their ability to operate.

“The location of the office is one and then the office itself. Sometimes, you know this is birth or death to be registered . When you are registering an applicant, it is not good for someone to hear what the applicant is saying. Due to lack of office, sometimes we do pair with another department. As I am talking now, I am sharing an office with another department” (IDI, male registration officer, Damongo-Savanna Region)

“Yes, the district office, I think, is also shared with other people,. I think is the local assembly that gave us that office. Because it is not at the roadside, the people do not come there to do their birth registration. The distance to the registration office inconvenience most parents and caregivers” (IDI, female registration officer, Jinijini-Bono Region)

A parent/caregiver stated that the offices are not many, and they do not have satellite offices at the hospitals. Consequently, some people do not know where to go and register.

“It is not many, it is only one and is also in Bole. They come here to register births for us occasionally. When they come, they only register free for newborn babies. Those who do not have newborn babies will have to board a car to Bole to go and register” (FGD, female, Bole-Savanna Region)

Most district officers have registration centres at the health facilities to enable them to capture early births for registration. These offices do not have enough space to accommodate only birth and death registration officers and store registration materials. In some districts, because the main registration office is far from the community, there have been steps to get an office at the health facility to facilitate early registration of births.

“Some of the institutional problems we have are the lack of offices, especially for some of the registries. The nature of our work is such a way that you need to be closer to the hospitals to be able to register the births. Most of our officers have to, for lack of a better word, perch with some units within the health facility, and that hinders our work because we are not able to store files. And since the work is primarily data collection, it is very important that we have a very good storage facility, which can only come under our own office. Because the problem with perching is that at any time, they can come and sack you from the place since it does not belong to us, and they are only helping us”. (IDI, male registration officer, Sunyani-Bono Region).

“What I want the district assembly to do for us is to get an office for us at the hospital, the main hospital. I even went and met the director to get an office for us so that those who can not come to the assembly could go there. ” (IDI, male registration officer, Bole-Savanna Region)

7.5.2 Distance to registration offices

Two main themes, such as short and far distances, were identified. Due to the lack of enough health facilities, most parents/caregivers and registration officers recounted that the distance to the registration office is very far. Most applicants were dissatisfied with the distance to the registration offices. In Dodowa, a parent/caregiver mentioned that the district is very large, and there are few registration centres. This makes it very difficult for people to travel to the registration centres to register.

“Another challenge is that the distance to the Chemu3naa, for instance, and we are here, is too far, so if we can get an office here, another at T Garden, then that will help” (FGD, female, AMA-Greater Accra)

“First, I said it is not far because of where I stay. But if we take the Osudoku and the Asutware side that you were saying, it is far from the office and that can become a hindrance for not registering early. It is not only Asutware but other villages. If someone is coming from the village to this place, it is like two miles. When they give birth to the child over there, if the mother is going to the hospital or not coming for weighing, she will not be going there because it is far” (FGD, male, Dodowa-Greater Accra)

“The distance will be a problem because those inside, I do not think they will be willing just to come here and do birth certificate and just go back. I mean times are hard, transport is a factor. So just to come here and do a birth certificate and just to go back” (IDI, female registration officer, Jinijini-Bono Region)

There are instances where both registration officers and FGD participants indicated that distance to the registration office affects registration as people living in far places do not have access to transportation such as cars and motorbikes, to the registration centres.

“The distance from where some people are coming from... somebody may be coming from Mbosua and will stop at Bakoniaba. Walking from Mbosua to Bakoniaba, the person might be tired. There are no vehicles or motorbikes there to be given to you for you to go on an outreach to help people” (FGD, male, Sunyani-Bono Region)

“The distance is another problem. For someone who is staying at Number 1, how to trace the town and do the registration is another problem. The transportation to come there and then to come and pay again. The person will be complaining that it is better for me to stop” (IDI, female registration officer, Damongo-Savanna Region).

On the other hand, a few participants, including both registration officers and parents/caregivers, reiterated that the distance from their locality or place of residence to the registration office is short. Some were of the view that within some districts, the registration points are far, especially for those in remote areas.

“Within this district, we have two Registries, the Dodowa Registry and then the Asutsuare Registry. For the Dodowa Registry, the distance is manageable, but with the Asutsuare Registry is scattered” (IDI, male registration officer, Dodowa-Greater Accra).

7.6 Sensitisation on birth registration

Sensitisation of the public on the activities of birth registration is essential to create demand and awareness of the process of birth registration. The findings of the study show that sensitization was not done in all the districts. However, in some districts, it was frequently done. From the

narratives, almost all registration officers emphasized that they carried out sensitization programs, while parents/caregivers recounted that sensitization is not done in their districts.

7.5.1 Sensitization carried out in the districts

Most registration officers were of the view that sensitisation is done frequently in their districts. It is done at the radio stations, health centres and information centres.

“What we do is that even recently, we had to go on a radio station to educate people on the importance of infant birth registration. And when we go to the weighing centres, this is what we need to tell the mothers. We know their major point of registration is the weighing centres. There are so many communities around Sunyani municipality, so when I go to the community, that is where they have the information centres. We organize and go there. We give them prior notice” (IDI, male registration officer, Sunyani-Bono Region)

In addition, sensitization is also carried out in the various districts with the help of assembly men who do the mobilization of the people.

“Yes, that one, as I said, because of the assembly members, we do organise some, especially when we go for community birth registration visitation. When we go to one particular community, they announce for them to come together for the sensitization on the importance of birth and death registration” (IDI, male registration officer, Bole-Savanna Region)

In terms of the frequency, sensitisation is done weekly, monthly and quarterly at the weighing centres/child welfare clinics.

“So, as much as possible, on a weekly basis, we have our volunteers that go out to the hospitals, and seek out for new mothers and organize small durbars or meetings, to sensitize them on how important it is that you have to register your newly born child.” (IDI, Male registration officer, Sunyani-Bono Region)

“It is done quarterly, every quarter. We use the public address system” (IDI, male registration officer, AMA-Greater Accra).

In order to promote sensitisation, some registration officers reiterated that they get support from key stakeholders such as assemblyman and NGOs. A participant explained that the NGO's support was in the past, but currently, they do not get any support from the NGO.

“The assemblyman helped us. I contacted the assemblyman in my area for the sensitization. He brought a van, and I bought the fuel for the sensitization around Chorkor and ended at the Police station” (IDI, male registration officer, AMA-Greater Accra)

“I: We do it through the focal persons in the various districts, especially the other Registry, Asutuare. All those places are scattered. We had some NGO group that used to help us by transporting us to far places to do mass registration. Before we get there, we do the announcement through the community announcements centres. And then through the focal persons, we use motorbikes to go into the villages to sensitize them how important it is for their babies to get registered” (IDI, male registration officer, Dodowa-Greater Accra)

7.5.2 No sensitization in the districts

In as much as there has been sensitization in some places and districts, caregivers/parents reported that there has not been any sensitization in their districts.

“The birth certificate has been there since I started giving birth. But to announce that these people should go and register for a birth certificate because it is important, I have never heard of it” (FGD, female, Jinijini-Bono Region).

“You people are the first people that we have seen here talking about something like this. We have never heard anything about this. The only thing they tell you is when you give birth, they will tell you at the hospital, “go and register your child”. We have never heard an announcement saying we should go and register our children” (FGD, female, Damongo-Savanna)

A participant indicated that because there is no sensitization on birth and death activities, most people are unaware that there is a Births and Deaths Registry in their districts. Those who are aware do not know where the office is located. Consequently, this makes it very difficult for them to register for birth certificates.

“I think the people are not aware. Some will also see it and be asking if it is Tamale or in

Accra that they register? They do not know that in this Municipality, they can even register for a birth certificate. I am speaking from experience as a unit committee member. They ask me a lot, where will I go to get my birth certificate? If you are able to approach me then I give you guidance and even assist you to get it” (FGD, male, Damongo-Savanna)

7.5.3 Challenges of sensitization

There were challenges associated with the sensitization, and these include transportation and coverage.

Some registration officers emphasized that transportation to the various localities and communities serves as a hindrance which prevents them from reaching out to all communities. For instance, the communities in the Shai Osudoku district are scattered, so they find it very difficult to reach out to people due to the poor road network.

“The place is far, and the community is scattered from one community to another; even when you board a motorbike, you can pay about 20 or 15 cedis before you get to the community. So, for Shai, we are able to capture a lot. Asutsuare is our main problem, so over there, transportation is the problem” (IDI, female registration officer, Dodowa-Greater Accra).

“That is another problem. The resources are another problem because, at times no transportation. The source of transportation is another problem. When you are going to the village, and you do not have the source of transportation, it will be difficult to come back” (IDI, female registration officer, Damongo-Savanna Region)

In communities where sensitization is done, some parents/caregivers complained that it does not cover the whole town. It covers a few people. This happens because the Births and Deaths Registry use a vehicle for the sensitization, and they mostly move along the main roads. Settlements not close to the main roads do not get the message of the sensitization.

“Also, when they are announcing mass registrations, they use the main roads. If you are not close to the main road and live elsewhere, you will not be part of the registration that day. Because there is no way you will hear because the vehicle announcing uses the main

road. Those by the main road will be aware and, in our town, also the houses by the main road are few” (FGD, male, Jinijini-Bono Region)

7.7 Technology for processing birth information

Technology is one of the pivots in birth registration as it serves as a medium for registration, and transferring of data from one registration centre to the central point in Accra for the processing of the birth certificate. Two main themes were identified under technology. These are processing applicants’ information/data to the headquarters and challenges associated with the processing.

With regard to the processing of applicant’s information, a registration officer recounted that after registering applicants, the data are entered and shared with the district office. The registration officers will then process the data and send them to the region for onward submission to the national level (headquarters) for the certificate to be printed. Within this process, there are delays and challenges that prolong the time applicants get the birth certificate.

“When the person who does the entry submits it, they send the data at the district level to the region and Accra. It will come back to the system, and the district will provide an entry number in the system, then, receipts are printed and sent back to the region and then to Accra. Sometimes, when you make the entry at the District Authority, you can wait for about two weeks before the regional one return” (IDI, Woman, Dodowa-Greater Accra)

“You have to buy credit, and because of that, we have a router in the office, so the office buys credit onto it, and we connect it to the tablet, so when you come, then you load it and submit” (IDI, female registration officer, Dodowa-Greater Accra).

Some participants reiterated that they are confronted with technological issues such as system breakdowns and delays in processing data and printing the certified copies of birth certificates. They further indicated that the network for sending data is unreliable, and applicants do not have the avenue to lodge complaints.

“When you complain, they will tell you it is the system, so there is no one to complain to. You will talk, but nothing will be done” (FGD, female, Dodowa-Greater Accra)

“I would say our network system. Yes. Well, we used to process the data that we collect. It has been highly unreliable for a while now, which causes a lot of delays in delivering our services. Yes, so recently, it has been worked on a bit because now we have been scheduled to work on specific days” (IDI, male registration officer, Sunyani-Bono Region).

Another participant explained that because of the load on the system, each region has been assigned days to submit or process their data to the national office. This sometimes makes it very difficult for the processing of applicant details on time.

“So, for the system, for the late registration system, I think that the new technology we have is not really helping. It is making it day by day; every region has a day, and sometimes the system is very slow. You know, some people come, and they need it for a passport because they are travelling soon. I feel like the system should be very strong that if someone needs a birth certificate, any region you are if someone needs birth certificate in two weeks or a week, it should be accessible for the person because” (IDI, female registration officer, Jiniini-Bono Region)

“It is affecting us because you will register, now that they have even grouped us that schedule... they just grouped so this day these people will be working this day... now it's better. But those days you will come and sit down, then you will not get. You cannot do anything because the system will be down, so I think...” (IDI, male registration officer, Bole-Savanna Region).

7.8 Influence of Middlemen

From the narratives, three main sub-themes, such as availability of middlemen, reasons for prioritization and outcome of using the middlemen to facilitate birth registration process, were identified under the influence of middlemen.

7.8.1 Availability of middlemen

With regard to the availability of middlemen in the various districts, there were mixed results. Some participants indicated that there is availability of middlemen while others indicated that there is no availability of middlemen.

Some participants expressed that there is an availability of middlemen in the various districts. A key informant indicated that most applicants subscribe to the middlemen for assistance in getting birth certificates.

“Someone may bring a birth certificate application to be processed for them and that they gave their documents to a registration officer, after one or two, the person will come and tell you they went to meet someone right now, and after you ask the name for verification, you will even know that that person is not a staff. You see that person is not even a staff. The person too has taken money from the applicant. an amount, so they are there, they are there, you will hear it” (IDI, male registration officer, AMA-Greater Accra).

A participant indicated that though he has not contracted middlemen before, he shared his friends’ experience of engaging middlemen to show that there are middlemen or connection men¹ in the various districts.

“Some people do that, but for me, I have not experienced that. It is my friend who experienced that. When he was going to register, they did not do it for him, and when he was standing in front of the office somebody called him and told him that if he is ready to pay something big, it would be done for him. My friend also needed it urgently for a passport. He needed it to travel. So, because he was in a hurry, he paid the money to the person, and it was not up to 1 hour when he received the certificate. So, for the middlemen they are there, that is what they do for a living” (FGD, male, AMA-Greater Accra)

¹ Connection men are middlemen who mediate between clients and the Births and Deaths Registry

Some participants expressed dissatisfaction with the amount of money they paid to middlemen.

An applicant indicated that they paid almost 3,500 Ghana cedis for a birth certificate.

There are times when you need it for an emergency; they will tell you that they have somebody in Accra, but you will pay 2,000 or 5,000 Ghana cedis. And if you need it today, you will get it, there are people like that there” (FGD, female, Sunyani-Bono Region).

In as much as there are middlemen in some districts, few participants expressed that there are no middlemen in their districts. They emphasized that there are only agents or volunteers in their districts.

“No, we don’t have middlemen here. I can’t talk much about it. Because I don’t even know that we have middlemen here” (IDI, male registration officer, Dodowa-Greater Accra)

“There is nothing like that, even the agents helping the district registration officers; we are talking about only one person. He also does not do anything. He goes to the farm. If somebody does not come to meet him, then they put it down, that is it” (FGD, female, Bole-Savanna Region).

7.8.2 Outcome of engaging middlemen

In terms of the outcome of engaging middlemen, participants indicated disappointment, cost and mistakes.

Some FGD participants expressed their disappointment in engaging middlemen. They indicated that some middlemen defrauded them and failed to give them their birth certificates.

“You will go and meet the person outside then they fraud you. It will not come, and then you will later end up cursing them. Then you will come and put your frustrations on the office that you were outside, and they said they would register for you, but it is not in. The best thing is for you to come to the office to register, not somewhere else. They do not register the birth certificate outside” (FGD, female, Sunyani-Bono Region).

“Because there are some who will fraud you. They will take your details promising to register for you but will not” (FGD, female, Dodowa-Greater Accra)

A participant indicated that his friend paid 3,500 Ghana Cedis for a birth certificate, which they needed to travel. The middleman failed to deliver it.

“There are times when you need it for emergency (cries of a baby), they will tell you that they have somebody in Accra, but you will pay 2,000 or 5,000 Ghana cedis. I have not paid for some before, but my friend paid 3,500 Ghana cedis. They were told the next morning. When they took 3,500 cedis, they did not get my friend the birth certificate” (FGD, female, Sunyani-Bono Region)

“When one of my brothers was going to register, he had prepared himself for 400 Ghana cedis. The person said he should bring 400 Ghana cedis. When he got there, the man said he had increased it, and he should add 100 Ghana cedis to it. He also needed it urgently because he was about to travel. So, I sent it, and he went to withdraw. After paying, he was giving excuses of, today, tomorrow” (FGD, male, Jinijini-Bono Region).

In addition, a few participants mentioned that sometimes there are mistakes in the birth certificate delivered by the middlemen.

“As for middlemen, if you do not take care, they will take the money, and the birth certificate will not come. And even when it comes, it will have some mistakes. Where are you going to meet him to tell him he should go and correct it for you? You will not meet him anywhere” (FGD, male, Jinijini-Bono Region)

A participant mentioned that there are some questions that some middlemen may not be able to answer. This happens in a situation where the information provided by the applicant is not clear, and they need clarification. They are sometimes tempted to provide any information for the Birth certificate to be processed.

“I see that with middlemen when you use them, there can be a change in things. Because the middleman is not the right person to register the birth, there might be some information that the Birth and Death registration officer might need from the middleman that was omitted during the processing of the certificate. They will put anything there and sometimes come with mistakes. If you had gone there yourself, then they take it from you” (FGD, male, Sunyani-Bono Region)

“When the middlemen are involved, it creates problems on the birth certificate for you. For instance, when they are registering for a certified copy of the birth certificate, they will need you in person for an interview. But when you give it to a middleman, he does not know how it works. What you will give to him is what he will bring to you. When they bring it, there might be mistakes. Maybe you sent it somewhere, and they saw the mistake... Maybe if he/she had gone in person, then there would not have been mistakes” (FGD, male, Sunyani-Bono Region).

7.8.3 Reasons for preference of middlemen

Participants indicated their reasons of preference for middlemen. This includes delays at the Births and Deaths Registry, middlemen being fast in delivering and inadequate offices of the Births and Deaths registry.

Most parents/caregivers engage middlemen because there are delays in the processing of certified copies of birth certificates at the district office. Some participants indicated that it takes more than a month for the office to issue a certified copy of a birth certificate, while middlemen deliver within two weeks.

“What I heard was that there are middlemen; some end well, and others do not. The reason for going in for the middlemen is that they feel that there is a delay in issuing the birth certificate. That is why the middleman will tell you to give him two weeks, and it will be ready. So, for instance, the middleman who will take up the work, if you are lucky, will use the two weeks for the work. Some also even over one year and you would not have gotten it, and they will be spending your money too. So that is what I have heard” (FGD, male, Dodowa-Greater Accra)

A key informant indicated that the delay is attributed to administrative lapses where more data is collated monthly and submitted to the regional and national offices.

“So, with that, it is not something that I would say does not happen. But it is a result of the problems I mentioned above. We have to wait for a month to collect all the data and send it to Accra for printing. That causes a delay and sort of complication for the applicant because maybe the applicant needs his or her certificate in two or three weeks. And the

middleman does not have to wait for a month to gather any data. So, it makes it look like he is fast” (IDI, male registration officer, Bono-Sunyani Region)

On the other hand, some participants indicated that middlemen are able to get the certified copy to them on time. It takes less than a week and sometimes a month for applicants to get a certified copy. They are the preferred go-to people when a client is urgently in need of a certified copy.

“The middlemen help a lot. For instance, you are in a hurry, and you need this certificate urgently to do something, so if the middleman is not there, then it means you will have to go and join the queue. The middlemen have made it easy” (FGD, male, AMA-Greater Accra)

“When I went to register this biometric by then, I had applied for one of these forces and they were demanding it urgently. I paid 3.50 Ghana cedis to my friend, and for exactly three days, the biometric birth certificate came straight from Cape Coast” (FGD, male, Damongo-Savanna Region).

“Some time ago I was in need of the biometric birth certificate urgently in Accra. I went to the office, and I was told it would take me two weeks. Then, a middleman told me that he could do it in three days. Actually, he charged me. I paid, and exactly three days, he brought it. I cannot remember, but it was more than 300 Ghana cedis” (FGD, male, Damongo-Savanna Region)

Another reason why some applicants prefer middlemen is due to the unavailability of birth and death registration offices in the communities. They find it difficult to reach out to the nearest registration centre, hence prefer using middlemen to get birth certificates on time.

“Because you know that there is no office here and the officers are few, when they send it, they do it quickly for you”. (FGD, male, Jinijini-Bono Region)

7.8 Discussion

This section discusses the institutional factors associated with birth registration. The study identified that most participants were aware of the birth registration process and were able to mention the requirement for a birth registration. The finding of this study is similar to other studies

(Mathenge et al., 2013; Pelowski et al., 2015; Kumar et al., 2022), which reported on participants' knowledge of registration procedures. In this study, the awareness of the registration process and the requirement for registration could be attributed to the sensitization and high level of education among participants. In addition, the role of the health workers during antenatal and postnatal clinics could also account for the awareness creation (Fabregas and Odame., 2013). Some health facilities have birth and death registration offices attached, and the registration officers use these opportunities to educate people especially women on birth registration and certification. The healthcare workers also educate women during antenatal and post-natal clinics on birth registration and also encourage them to register their children early. Another reason could be that there is clarity on the registration process which is why most people were aware of the registration process.

The study further found mixed results on the availability of birth registration materials. While most participants mentioned that registration materials are always available, few participants indicated the shortage of these materials at times. For instance, some registration officers mentioned that they do not experience a shortage of registration forms, papers, pens and other materials that are needed for the registration. The findings of the study contradict the results of other studies that reported a shortage of registration materials in Indonesia (Bennouna et al., 2016). The availability of forms could help facilitate the registration process. The probable reason why most registration offices had access to the registration materials could be because the printing of certified copies of birth certificates is done at the national level, anytime the district officers come to the national headquarters to print their certificates, they go back to the district office with registration materials, and this could account for the non-shortage.

Issuance of a certificate was identified as a major setback in the registration process. The parents/caregivers and registration officers attested to the delay in the issuance of the birth

certificate, especially the certified copy for late registration of births, which negatively impacts the birth registration process, thereby preventing people from registering. The findings of this study contradict a study by Anaduaka (2016) in Nigeria, who reported early issuance of a birth certificate. In Ghana, the processes involved in the printing of a certified copy of birth certificate cause the delay. All printing is done at a centralized point, the national office, and sometimes there are system breakdowns which delays the process. This finding could be related to the third delay model, where there is a delay in a person getting his/her birth certificate. Such delays could prevent people from going to the registration offices to register.

One important factor that facilitates the registration process is the filling of forms. Less concerns were raised on this theme as participants were of the view that the process of registration is not complex, and they spend less time filling out the forms. This is also similar to a study that reported that filling out birth registration forms is not complex, where participants spend less than three minutes filling out a form (Al-Kaabi et al., 2019). This, therefore, would motivate people in the acquisition of a birth certificate. However, there were concerns about the use of paper to collect information. Some participants expressed their dissatisfaction as this leads to delays in the processing of documents. Hence, there is a need to use an electronic system for capturing and transferring data to the national office because the use of paper for registration increases the burden on staff, and sometimes there are potential errors and missing files.

Access to information was identified as a significant factor in the birth registration process. The findings of this study show that access to information was not difficult. However, there was no desk at the registration offices designated for clients to make enquiries on birth registration. All registration officers, when approached, provide assistance or the needed information to clients. Compared to the results of other studies, Bennouna et al. (2016) reported a lack of information

about registration procedures, which serves as a barrier to birth registration. The non-delay in access to information could help applicants to clarify things and register easily and early. Another probable reason for the access to information could be a result of mass sensitization of the birth registration process. The Births and Deaths Registry carry out annual mass registration and sensitization programmes and this could also account for the access to the information.

Regarding human resources, most registration offices were understaffed to the extent that the work sometimes overwhelmed them. This undermines the effectiveness and efficiency of their work, thereby leading to long queues and waiting times. A similar finding of this study was reported in Dar es Salaam (Reed et al., 2021; Wakibi and Ngunjiri, 2021). One possible explanation of this finding is that, in each district, there is one district registration officer and few permanent workers. Because most of the districts' registration offices are understaffed, there is a heavy reliance on volunteers. Due to this, Ghana has adopted the volunteer system where volunteers have been trained to extract and forward birth details to the local or district offices (Afele, 2011). In almost all districts, these volunteers assist in processing a birth certificate. Consequently, the inadequate staff are unable to serve large clientele at the district level which further limits the ability of people to register their births (Mathenge et al., 2013). The shortage of staff and its impact on the birth registration process could be linked to the third delay model (delay in applicants getting their birth certificate), where processing of birth certificate could lead to a delay.

The results of the study show that in-service training are carried out often to build the capacity of registration officers. The training takes the form of workshops and is done frequently for the staff. The findings of this study are in contrast with a study by Kumar et al., (2022), who reported on less training for birth and death registration officers. The continuous capacity building for registration officers would help to broaden their knowledge, enhance their skills and improve their

delivery, thereby, helping more applicants to register for the birth certificate. Reed (2021) argued that the lack of training opportunities for registration officers makes it sometimes difficult for them to learn new things to enhance their productivity.

The study further shows that there is less infrastructure for registration officers in almost all the regions. Similar findings of this study have been reported in Nigeria by Anaduka (2016). In addition, Abay et al., (2020) reported on the shortage of infrastructure in Ethiopia. In this study, the probable reason for few infrastructures could be attributed to one office per district. Almost all the districts have one office in the district capital town, with few having satellite offices attached to a health facility or located in other communities in the district. Even for the districts with space at the health facilities, there were complaints that the offices were too small and could not accommodate all registration officers. These satellite offices were not found in all the study areas, and this probably explains why many people do not have access to registration offices to register for a birth certificate. To reduce the inequalities of accessibility, it is important to increase the number of registration centres across districts or attach a registration office to all public health facilities.

Consistent with other studies (Mathenge et al., 2023; Ebbers and Smits, 2022; Abay and Gebre-Egzibher, 2020), distance to registration centres was a major challenge affecting the registration of clients. In this study, most of the registration offices were located in the district capital towns, and this makes it very difficult for those living outside the district capital towns to access the registration centres. The long distance is also associated with the cost of transportation, which sometimes makes it very difficult for people to travel from far areas to register (Ebbers and Smits., 2022). Those who do not have the means of transport are likely not to register their children.

Distance affects birth registration, and this represents the second phase of the three delays, where the individual has to identify the office after making up their mind to register.

The findings show that sensitization is done frequently, but the coverage is low. This was mostly done in cities and towns, leaving out those residing in the villages. Participants mentioned that it was mostly done on radio stations, health facilities during antenatal and postnatal care, and information centres. In Ghana, the National Birth and Death registration office organized periodic sensitization in selected communities where members are educated on the relevance of early birth registration. During this period, community members are given the opportunity to register their births especially parents or guardians with children under one for free. Continuous sensitization could help to increase awareness of birth registration and help to overcome any myths surrounding the issuance of the under one year birth certificates. However, transportation and coverage were identified as major challenges of the sensitization programme. Most of the registration officers do not get the needed support to cover the communities in the district. Some of the communities are not reached because of poor road networks and no means of transportation.

Technology failure was a major concern which delayed the application of a birth certificate. Similar findings of the study were reported by Kumar et al., (2022) as technological failure was due to irregular electricity supply, inadequate modern electronic systems and internet connectivity challenges, technical failure, such as system breakdown and poor internet connectivity, makes it very difficult for people to work, thereby delaying the printing of the certified copies of the birth certificates. This finding is associated with the third delay (delay in receiving the birth certificate) of the three delays thereby delaying applicants to get their certificate. In addition, it could also influence potential applicants' decision to register for a birth certificate by accounting for the first delay (delay in deciding to register for a birth certificate). The findings suggest that the failure of

technology could prevent or delay people in registering for a birth certificate, and there is a need to improve technological services.

The findings of this study were similar to other studies that reported the use of informal middlemen in birth applications (Williams et al., 2018). However, the use of middlemen in some communities does not mean harm as they are considered community assets in every village in Indonesia. Notwithstanding, there are instances of extortion where people pay middlemen to navigate the system thereby increasing overall birth certificate cost (Duff et al., 2016). Most of the reasons cited for the use of middlemen were related to inadequate offices and delay in processing of a birth certificate by the district registration offices. However, continued use of middlemen could have a negative impact on birth registration since they charge higher fees and, at times, do not deliver.

In conclusion, the results presented in this chapter suggest complex institutional factors that inhibit and promote birth registration. For instance, frequent sensitization, attachment of registration centres to health facilities, access to information, awareness of registration and non-complexity of filling out forms help to promote registration of births. In contrast, less importance is attached to birth registration, inadequate human resources, system breakdowns, long distances to registration centres, delays in the issuance of a birth certificate and extortion by middlemen hinder the process of birth registration. It is very important to overcome these institutional challenges to help improve birth registration in Ghana.



CHAPTER EIGHT

SUMMARY, CONCLUSION AND RECOMMENDATION

8.1 Introduction

Birth registration is the official recording of the characteristics of the birth of an individual by an administrative level of the state with a legal requirement. It is not only relevant for national and international planning but is seen as the recognition of basic fundamental human rights and legal recognition of a child and the first point of contact between individuals and their states where rights and privileges are bestowed on individuals. Several laws and conventions have been passed to provide basic fundamental human rights through the acquisition of a birth certificate. These laws provide the framework by which people can acquire a birth certificate. Like the other global challenges, majority of children without birth certificates are found in sub-Saharan Africa, where compliance with birth registration is below 50 percent. In Ghana, the fee for birth registration for children within the first 12 months after birth has been waived to improve the registration. Also, birth and death registration centres have been situated within some selected health facilities aside from the district registration offices, which encourages the registration of children after birth. Despite the Government of Ghana's interest and non-governmental agencies' support in promoting birth registration, coverage is incomplete and not universal.

Several studies have been conducted globally and in Ghana to ascertain the cause of low birth registration. Studies in Ghana that have examined the factors associated with birth registration placed emphasis on the socio-demographic characteristics and economic factors to the neglect of institutional and cultural factors. These studies were limited to quantitative data and could not examine cultural and institutional factors affecting birth registration due to data limitations. Consequently, there has not been any study using a mixed-method approach to examine how

social, cultural and institutional factors influence birth registration in Ghana. In addition, the cultural and institutional factors that affect birth registration are not known in Ghana. Hence, there is a lack of systematic research examining socio-cultural and institutional factors affecting birth registration in Ghana. This study, therefore, sought to understand how cultural, social and institutional factors affect birth registration in Ghana. The study relied on the three delays model, rationale choice and the social behaviour model.

This study contributes theoretically to the literature by providing evidence on how social, cultural and institutional factors affect birth registration. In addition, this study is timely as birth registration is very essential for generating up-to-date and reliable vital statistics for the Ghana National Identification Card acquisition. Furthermore, the findings of the study provide continuous demographic information on socio-cultural and institutional factors affecting birth registration. The use of mixed-methods approach added context and depth as well as provided an understanding of the socio-cultural, contextual and institutional factors affecting birth registration in Ghana.

In order to fill the gap, this study sought to investigate the relationship between socio-cultural and institutional factors affecting birth registration in Ghana. A mixed-method approach using both qualitative and quantitative methods were adopted to achieve the objectives of the study. The quantitative method examined the socio-demographic factors affecting birth registration using the data from the 2017/18 Ghana Multiple Indicator Cluster Survey. The qualitative data provided more explanation of the social, cultural and institutional factors affecting birth registration. Descriptive statistics based on results from cross-tabulations were used in presenting the associations among relevant variables. A binary logistic regression model was run to examine the factors associated with birth registration. With regard to the qualitative data, in-depth interviews

and FGDs were conducted with parents/caregivers and birth and death registration officers. The qualitative data analysis was done using the thematic analysis technique.

8.2 Summary of findings

This study shows that more than half (62.0%) of the children under five years in this study had a birth certificate. Regarding child characteristics, slightly more than half of the children under five years were females (50.7%). One-fifth of the children (21.7%) were less than 12 months old, and eight out of ten (80.1%) children were delivered at a public health facility. Six out of ten (60.5%) children were living in rural areas, and more than one-third (37.2%) were living in the coastal zone. For maternal characteristics, more than one-fifth of the mothers were in the age group 25-29 years. One-fourth (27.6%) were affiliated with Pentecostals/Charismatic, and 23.7% were Muslims. About 36 percent were Akan, and one-fourth (24.9%) belonged to the Mole/Dagbani ethnic group. For the qualitative study, more than half (50.9) of the participants were males, and 37.0 percent (40 participants) were 21-30 years. In addition, 34.3 percent of the participants had a JHS education, 70 percent were married and 34.4 percent had one child.

The findings of the study show that educational level, wealth quintile, religion, ethnicity, child's age in months, age of mother, marital status and ecological zones were significantly associated with birth registration.

The first objective sought to examine the social factors influencing birth registration in Ghana. Results from the qualitative data showed that accessibility to the registration office, relevance of birth registration, perception of under one-year birth certificate, health conditions, communication barriers, time constraints, economic activity, community influence and name-related factors were social factors that delayed the registration of a birth certificate. Some participants expressed concern that the distance to registration centres was very far, which limits their ability to register

for a birth certificate. The findings further show that less importance is attached to a birth certificate, and ignorance about the registration process also hinders the registration for a birth certificate. In addition, most participants were of the view that non-recognition and misconception of under-one-year certificates as fake also make it very difficult for the registration of children in that age group. Moreover, the results show that some applicants were unable to communicate in the language of the registration officers, and this limited their ability to register their children for a birth certificate.

The second objective examined the cultural factors influencing birth registration in Ghana. The main cultural factors were rituals for twin naming, performing marriage rites, waiting for the name of a child from leaders among Ahmadis and material requirements for naming ceremony. All these factors mostly delay the registration of a child for a birth certificate.

The third objective investigated institutional factors that influence birth registration in Ghana. Several institutional factors, such as the birth registration process, customer service, resources, sensitization, technology and middlemen, were identified to have an influence on birth registration. The findings of the study show that participants' awareness of the birth registration process and the non-complexity of the filling of forms enhance the registration of birth certificates. In contrast, late issuance of birth certificates, non-availability of materials, unavailability of registration officers at post, and specific days for registration were factors identified under the birth registration process that hindered birth registration. Regarding customer service, factors such as access to information promote birth registration, whereas bad attitude of staff and lack of avenues for clients' complaints hinder the registration for a birth certificate. In terms of resources, inadequate staff, few registration centres and far distance to the registration offices were identified as factors that influence birth registration, while volunteers, capacity building of staff, and non-availability of

logistics negatively impact birth registration. On sensitization, frequent public sensitization on birth registration is very significant towards the registration of birth and acquisition of certificate. However, transportation and coverage challenges were identified to limit sensitization. Furthermore, system breakdowns, delays in printing birth certificates and the influence of middlemen limit the ability of people to register births and receive birth certificates.

8.3 Theoretical implications of findings

The study drew on the three delays, the rational choice model and the social behaviour model. The findings of the study have relevance in the application of these theories. In terms of the three delays model, the findings of the study showed that different level factors cause the delay in the registering and issuance of a birth certificate. The delay theories explain that there is a delay in the decision making to register for a birth certificate, delay in getting to the registration centre to register and delay in getting a birth certificate after the registration.

In this study, among the first delays include delay in naming a child, economic access, and misconception about early birth registration. Participants were of the view that they were confronted with the delay in getting the birth certificate. In addition, there were concerns on the non-availability of registration offices which makes it very difficult for people to access the registration offices for the registration.

The second delay factors are accessibility, distance to the registration office, poor health conditions and where to register. Most participants indicated that due to the location of the registration offices, participants have to travel far for registration. In addition, some participants narrated that after deciding to register their children, they fell sick and were unable to proceed to the registration office for the registration.

In addition, in this study, centralized printing of certificates, queues at the registration centres, registration process, system failure, uncomfortable waiting place and delay in the issuance of birth certificate were identified as the third delay. Among the factors, the delay in the issuance of the birth certificate was frequently mentioned, which was followed by a system breakdown.

The findings of the study support the rational model theory. The theory postulates that individuals will make the right choice to register for a birth certificate by taking into consideration the relevance of the birth certificate. In this study, most participants indicated that they considered the benefit of birth registration and mentioned that the relevance of the acquisition of the birth certificate outweighs not having the birth certificate. The relevance includes statistical purposes, requirements for entering school, passport and accessing other social and health services. These factors influenced their desire to register for a birth certificate.

Integrating these three theories provides a holistic view of birth registration in Ghana. These theories help to capture the barriers and facilitate underlying social, cultural, and institutional factors influencing birth registration. Understanding the multifaceted barriers and facilitators would help to develop more effective and targeted interventions. It also offers a framework for analyzing and addressing birth registration issues, which can be applied in various contexts and therefore contribute to the literature

8.4 Limitations of the study

The findings from this study may have been influenced by some limitations that are worth noting. Firstly, there is a possibility of over reporting of the proportions of births that are registered with a birth certificate as not all the certificates were seen by the interviewer during the data collection.

Secondly, the quantitative data is a cross-sectional data and that reduces the potential for causal inference. Hence, causality cannot be established among the variables. Also, the findings from the

qualitative data cannot be generalized. However, these findings provided in-depth understanding of socio-cultural and institutional factors associated with birth registration in Ghana.

In addition, this study could not measure other cultural and institutional factors using quantitative data due to data limitation. There was no variable in the data that measured cultural and institutional factors. Hence, these variables were measured using the qualitative method.

The above limitations however do not significantly affect the findings and interpretations made in this study which have implications for further research and policy

8.5 Conclusion and contribution to knowledge

The study showed that more than half of the children under five years had a birth certificate in Ghana. The findings of the study demonstrate birth registration is a complex factor influenced by social, institutional and cultural factors. The results of the study showed that educational level, wealth quintile, and child's age in months were positively related to birth registration. In addition, mothers who belong to the muslim religion and the age of the mother increase the likelihood of registering for a birth certificate while living in rural areas and middle zones, and being never married reduces the likelihood of registering for a birth certificate.

The study further concludes that cultural factors that influence birth registration are mostly linked to the naming of the child. Early and delayed naming of a child respectively promotes and hinders birth registration of children under five years. Finally, the study concludes that complex factors such as individual, context, social and institutional factors influence registration for a birth certificate. This enforces dynamic and different factors at various levels that hinder or promote the registration of birth. In addition, most of the factors identified were factors limiting the registration of a birth certificate.

The findings of the study contribute significantly to knowledge. It is among the few studies in sub-Saharan Africa and the first in Ghana that examine the social, cultural and institutional factors affecting birth registration using a mixed-method approach. The findings of the study highlight the naming of a child and practices associated with religious and ethnic groups as cultural factors impacting birth registration in Ghana. In addition, accessibility, communication barriers, community perception, ignorance and relevance of a birth certificate were social factors identified. In contrast, delays in issuance of birth certificates, inadequate staff, system breakdown, use of middlemen, sensitization and capacity building were identified as institutional factors that also contribute to the literature. The findings, therefore, have relevance for the development of a comprehensive and integrated framework for other related studies and policy frameworks on birth registration and certification, as it can serve as the basis for other studies to be conducted or built on.

Moreover, the use of qualitative methods together with the quantitative method helps to complement the weaknesses of each other. This provided an in-depth understanding of factors affecting birth registration from the perspectives of mothers, guidance, caregivers and birth registration officers. Mixed methods combine the strengths of both methods as well as offsetting the weaknesses of each other.

8.6 Recommendations

8.6.1 Policy recommendations

Since the birth registration centres in the three geographical zones across the country are not many to serve all applicants, this study recommends the need to attach birth registration offices to every health facility to facilitate easy registration of births and the acquisition of birth certificates. To

ensure that this becomes an integral feature within the health delivery system, the heads of the Births and Deaths Registry, Ministry of Health and Ghana Health Service must commit to the signing of an MoU to guide this collaboration. The Births and Deaths Registry should develop the MoU, and the signing of the MoU could help the Registry secure space in almost all health facilities for registration of applicants. This would help to register early births for birth certificates.

In terms of infrastructure, the study alluded to the fact that most of the participants reported small office space or sharing of office space with other departments.. This situation makes it difficult for birth registration interviews to be conducted in an atmosphere that does not breach confidentiality.

In this regard, the policy recommendation here is that the Births and Deaths Registry and other stakeholders should collaborate and build container offices that will serve as registration points in some communities across the country to help improve early registration for birth certificates.

Even though sensitizing the general public on the importance and benefits associated with birth registration undoubtedly increases the awareness of the need to register birth. This study shows that sensitization is done frequently, but the coverage of birth registration was low. The policy recommendation here is that since birth registration is a decentralised activity, the Registry should leverage on the emergence of community information centres within the communities to continuously spread the message about the relevance of birth registration and where birth registration centres are located in the communities.

In this study, the results show that middlemen extort people by charging a higher fee for a birth certificate and sometimes applicants not getting the certificate after payment. The study also reported that most people use middlemen because they do not have access to registration centres and officers. It is recommended, therefore, that unit committee members and other opinion leaders within the communities should be trained by the Births and Deaths Registry to understand the birth

registration process and, in turn serve as registration agents to support the birth registration process.

Even though every child is entitled to a name after birth as per Article Seven (UN, Article 7) of the rights of the child, international law affords the child both legal status and an identity and sense of self. It is indeed the case that not every child will have a name during birth registration, but in order not to miss the event, other facts of the birth could be registered, and later, when the child is officially named, the new name given to the child could be inserted. It is also recommended that parents and caregivers should be encouraged to name their children early to forestall any delay in the birth registration process.

Technology failure was a major concern among respondents. It is recommended that improved and modern technology should be deployed by the Births and Deaths Registry at all the registration centres. In addition, the printing and signing of birth certificates especially late births should be decentralised.

Births and Deaths Registry should sensitise Traditional and spiritual leaders involved in performing specific rituals that precede the naming of a child after birth to avoid delay as it will affect the birth registration process and for that matter the right of the child to identity.

8.6.2 Future research

The current study is one of the few studies to investigate social, cultural and institutional factors affecting birth registration in Ghana and SSA. The findings from this study, therefore, provide several opportunities for further research on birth registration. Firstly, this study limited the definition of birth registration and certification to only children under five years. It is therefore very important for future studies to examine the factors prohibiting and facilitating the acquisition of a birth certificate among adolescents and adults who ideally should have had their births

registered before turning age one. Such an expanded scope would definitely provide new knowledge on the factors influencing birth registration.

This study examined the social, cultural and institutional factors affecting birth registration in Ghana from the perspectives of birth registration officers and parents or guardians or caregivers. In order to comprehensively understand the birth registration process, future studies should examine this from the perspective of policy makers and other stakeholders such as UNICEF and World Bank who have been supporting Births and Deaths Registry.



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APPENDIX A: Ethical Clearance



**UNIVERSITY OF GHANA
ETHICS COMMITTEE FOR THE HUMANITIES (ECH)**

P. O. Box LG 74, Legon, Accra, Ghana

My Ref. No...ECH 114/ 22-23

January 10, 2023

Seth Bosompem Kissi
Regional Institute for Population Studies
University of Ghana
Legon.

**ETHICAL CLEARANCE
(ECH 114/ 22-23)**

The Ethics Committee for the Humanities (ECH) conducted a full board review and approved your protocol titled:

**SOCIO-CULTURAL AND INSTITUTIONAL PRACTICES ASSOCIATED WITH BIRTH
REGISTRATION: RURAL AND URBAN DIFFERENTIALS IN GHANA.**

PRINCIPAL INVESTIGATOR: SETH BOSOMPEM KISSI

Please note that the final review report must be submitted to the Committee at the completion of the study. Your research records may be audited at any time during or after the implementation. Any modification of this research project must be submitted to ECH for review and approval prior to implementation.

Please report all serious adverse events related to this study to ECH within seven (7) days verbally and in writing within fourteen (14) days.

This certificate is valid till January 9, 2024. You are required to submit annual reports for continuing review.

Please accept my congratulations.

Yours Sincerely,

Professor C. Charles Mate-Kole

ECH Chair

Cc: Prof Stephen Owusu Kwankye, Regional Institute for Population Studies,
UG Dr. Abu Mumuni, Regional Institute for Population Studies, UG
Dr. Fidelia Dake, Regional Institute for Population Studies, UG

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APPENDIX B : In-Depth Interview Guide for Birth and Death Registration officers



UNIVERSITY OF GHANA
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**COLLEGE OF HUMANITIES
REGIONAL INSTITUTE FOR POPULATION STUDIES**

Socio-Cultural and Institutional Practices Associated with Birth Registration in Ghana

Seth Bosompem Kissi
PhD Candidate (Population Studies)

QUALITATIVE IN-DEPT INTERVIEW GUIDE FOR INDIVIDUALS

My name is Seth Bosompem Kissi, a PhD student at the Regional Institute for Population Studies (RIPS), University of Ghana. I am conducting research on the topic: “**Socio-Cultural and Institutional Practices Associated with Birth Registration in Ghana**” for my PhD thesis. The purpose of this study is to examine how institutional and socio-cultural practices affect birth registration in Ghana, specifically the differentials between rural and urban areas. I would be grateful if you could grant me an interview. If you decide to participate in the study, the interview will take about 40 minutes. Please note that it is for academic purposes only. Your confidentiality is assured under the ethical clearance given me by the Institutional Review Board of the University of Ghana.

SECTION A: SOCIO-DEMOGRAPHIC BACKGROUND

1. Age
2. Sex
3. Highest educational level
4. Occupation
5. Region
6. District/Municipal of residence.....
7. Number of children
8. Marital status

SECTION B: INSTITUTIONAL AND RELATED FACTORS AFFECTING BIRTH REGISTRATION

1. What institutional and related factors affect birth registration in Ghana?

- ❑ Human resource and capacity building (*Probe for the following*):
 - Qualification of staff
 - Strength of staff for each department (IT, records, statistics, project unit, client service and public relations, administration and accounts).
 - Inservice training and capacity building
 - The attitude of staff towards clients

- ❑ Birth registration process (*Probe for the following*):
 - Access to registration requirements, e.g., weighing card
 - Possession of error-free application requirements
 - Manual entry/paperwork
 - Complexity of procedures and requirements
 - Availability of forms at the district office

- ❑ Infrastructure and adequacy of resources for registration of births (*Probe for the following*):
 - Adequacy of infrastructure (building, equipment)
 - Distance to registration office by clients
 - Infrastructure and transportation options by clients

- ❑ Technology (*Probe for the following*):
 - Which method (paper or tablet) is used for the registration of births?
 - How does the method (either paper or tablet) affect the registration process?
 - How can we improve the method of registration?
 - Are the various district offices networked to the Headquarters?
 - If yes, is the network consistent or reliable?
 - If not, how do you connect or send registration data to the Headquarters?
 - Are there challenges in printing birth certificates on time?
 - If yes, what are the challenges, and how can they be resolved?
 - If no, is there a way we can improve on the printing of certificates?
 - Do you think the printing of Birth certificates should be decentralized to either the regions or districts, and why?

- ❑ Policies and Acts
 - Is the new Births and Deaths Registration Act addressing all the concerns regarding birth registration?
 - What is your view on the decentralization of staff?

- ❑ Sensitization and publication of birth registration (*Probe for the following*):
 - How often is sensitization of birth registration done?
 - What medium is used for the sensitization?
 - What do you think can be done to ensure that birth registration is published?

- ❑ What are the barriers to the registration of births? (*Probe for the following*):
 - There is a widespread perception that the registration process is complicated because of the phenomenon of bribery and the use of connections to acquire a Birth certificate. What is your opinion on this issue?
 - Do middlemen influence birth registration, and how?
 - Experiences of using a middleman
 - Was the outcome positive or negative?
 - If you have ever paid for the services of middlemen, how much did you pay?
 - Confidence in middlemen

SECTION C: SOCIAL AND CULTURAL FACTORS ASSOCIATED WITH BIRTH REGISTRATION OF CHILDREN

2a. What social factors affect birth registration in Ghana?

Probe for the following:

- Perceived value of the document/benefit of the Birth certificate
- The cost of application for a Birth certificate
- Influence of wealth and education on possession of Birth certificate
- Influence of maternal characteristics, namely
 - Marital status of the parent(s)
 - Age of mother
 - Religion
 - Ethnicity
- Influence of child's age on the possession of Birth certificate,

2b. What cultural factors affect birth registration in Ghana?

Probe for the following:

- Naming practices that affect birth registration (*Probe for situations practices that require that the naming cannot be done soon after birth*).
- Any cultural prohibitions on acquiring a Birth certificate
- Any other social factors prohibiting possession of Birth certificate

SECTION D: CUSTOMER SERVICE AND RELATED FACTORS

3. What are your views about the following?

- Perceived quality of registration services
- Access to quality information
- Satisfaction with waiting time
- Friendliness, helpfulness and competence of human resources
- Are there opportunities for clients to lodge complaints?

4. Describe the strengths, weaknesses, opportunities and threats (SWOT) of the birth and death registry towards improving customer service:

- Strengths (supportive management, funded organization)
- Weaknesses (staff, process, customers)
- Opportunities (IT, Good cooperation between BDR and Government)
- Threats (manual entry, shortage of staff, clients complaining)

5. How do you think we can improve the process of birth registration in Ghana?



APPENDIX C: Focus Group Discussion Guide for Parents/Guardians



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**COLLEGE OF HUMANITIES
REGIONAL INSTITUTE FOR POPULATION STUDIES**

Socio-Cultural and Institutional Practices Associated with Birth Registration in Ghana

Seth Bosompem Kissi
PhD Candidate (Population Studies)

GUIDE FOR FOCUS GROUP DISCUSSIONS

My name is Seth Bosompem Kissi, a PhD student at the Regional Institute for Population Studies (RIPS), University of Ghana. I am conducting research on the topic: **“Socio-Cultural and Institutional Practices Associated with Birth Registration in Ghana”** for my PhD thesis. The purpose of this study is to examine how institutional and socio-cultural practices affect birth registration in Ghana, specifically the differentials between rural and urban areas. I would be grateful if you could grant me an interview. If you decide to participate in the study, the interview will take about 40 minutes. Please note that it is for academic purposes only. Your confidentiality is assured under the ethical clearance given to me by the Institutional Review Board of the University of Ghana.

Thank you for your understanding.

SECTION A: SOCIO-DEMOGRAPHIC BACKGROUND

1. Age
2. Sex
3. Highest educational level
4. Occupation
5. Number of children
6. Marital status

SECTION B: BIRTH REGISTRATION OF CHILDREN AND EXPERIENCES OF PARENTS

1. Have you registered your child(ren) for a Birth certificate?

Probe:

- Registered all your children for a Birth certificate and why?
- Registered your last child or children (if multiple births) for a Birth certificate and why?
- When was the registration done (immediately after birth or later)? If later the duration before registration was done after the child was born.
- If there was a delay, what caused the delay in registration?

2. Whose responsibility is it to register a child's birth and acquire a Birth certificate, and why?

3. How will (do) you feel as a parent when your child has no Birth certificate?

4. What factors motivate parents to register a child's birth? (*Probe for issues on convenience and the absence of incentives to use the Birth certificate*).

5. What factors demotivate/discourage parents from applying for birth registration and certification?

- Limited use of Birth certificates in the lives of young children demotivates parents to register their births.
- The relevance or value of the Birth certificate.

6. Some people believe that the use of middlemen simplifies the birth registration process. What is your view about this?

- Have you ever used any middlemen before, and how do you feel about them?
- Have you heard about any informal channels for acquiring a Birth certificate apart from middlemen? Have you used any before, and why?

SECTION B: INSTITUTIONAL, SOCIAL AND CULTURAL FACTORS ASSOCIATED WITH BIRTH REGISTRATION OF CHILDREN

1a. What social factors affect birth registration in Ghana?

Probe for the following:

- Perceived value of the document/benefit of the Birth certificate
- The cost of application for a Birth certificate
- Influence of wealth and education on possession of Birth certificate
- Influence of maternal characteristics, namely

- Marital status of the parent(s)
- Age of mother
- Religion
- Ethnicity
- Influence of child's age on the possession of Birth certificate.

1b. What cultural factors affect birth registration in Ghana?

Probe for the following:

- Naming practices that affect birth registration (***Probe for situations practices that require that the naming cannot be done soon after birth.***)
- Any cultural prohibitions on acquiring a Birth certificate
- Any other social factors prohibiting possession of Birth certificate

2. How do you find the process of registration and why? ***Probe for the following:***

- Possession of error-free application requirements
 - Manual entry/paperwork
- Complexity of procedures and requirements
- Un/availability of forms at the district office

3. How do you find the infrastructure and resources available for registration, and why? What about the following?

- Access to registration offices by clients
- Adequacy of infrastructure (building, equipment)
- Distance to registration office by clients
- Infrastructure and transportation options by clients

4. How is the customer service and why? ***Probe for the following:***

- Perceived quality of registration services
- Access to quality information
- Satisfaction with waiting time
- Friendliness, helpfulness and competence of human resources
- Opportunities for clients to lodge complaints

5. How do you think we can improve the process of birth registration?

APPENDIX D: Consent Forms

UNIVERSITY OF GHANA



Official Use only
Protocol number

Ethics Committee for Humanities (ECH)

PROTOCOL CONSENT FORM

Section A- BACKGROUND INFORMATION

Title of Study:	Socio-cultural and Institutional practices associated with birth registration: rural and urban differentials in Ghana
Principal Investigator:	Seth Bosompem Kissi
Certified Protocol Number	(ECH 114/ 22-23)

Section B- CONSENT TO PARTICIPATE IN RESEARCH

General Information about Research

Globally, birth registration has improved among children under five years. However, about a quarter of the world’s population does not have a Birth certificate. In Ghana, the fee for birth registration for children within the first 12 months after birth has been waived to improve birth registration. Yet most parents/guardians have not registered their child(ren) for a Birth certificate. Previous studies in developed and developing countries have established the influence of sociocultural and institutional factors on low birth registration. However, studies on birth registration in Ghana are quantitative with emphasis on the socio-demographic and economic characteristics, neglecting institutional and cultural factors.

Consequently, there has not been a study using a mixed-method approach to examine how sociocultural and institutional factors influence birth registration in both rural and urban areas in Ghana. Convenient and purposive sample techniques will be used to recruit participants for the study. The study is expected to take five months.

Participants are expected to take part in the in-depth interview and the Focus Group Discussion voluntarily and respond to the questions. With the exception of the stakeholders' interviews, the in-depth interviews with the registration officers and the Focus Group Discussions will take place at the various district birth and death registration offices. The stakeholders' interviews will take place at their offices or at a preferred location of the participants. The in-depth interview and the Focus Group Discussion will last between 45 minutes to 1 hour. With permission from the participants, all in-depth interviews and Focus Group Discussions will be recorded with an audio recorder.

Benefits/Risks of the study

There are no anticipated serious risks from participating in this study. However, participants may feel tired during the interview guide and focus group discussions. To reduce participant fatigue, the interview guide has been made short to reduce the amount of time for discussions or responding to the questions.

Participants will not benefit directly from this study, but the results will be useful to further efforts to improve birth registration in Ghana. Thus, the risk-benefit ratio is favourable.

We anticipate that there will be no hazards to participants. However, there will be a counsellor on standby where participants who will be affected during the discussions or responding to questions will be referred.

Confidentiality

The interviews will be recorded with audio recorders. All data of participants will be stored on password-protected computers and files. Only the Principal Investigator will get access to the data. No participant will be granted access to the data.

Compensation

Participants will be compensated for taking part in this study. They will be provided with snacks (water, drink and meat pie)

Withdrawal from Study

Participation in this study is entirely voluntary. Participants can decide not to participate in the study during the Focus Group Discussions or the interview and may withdraw at any time without penalty. Participants who withdraw from the study may not be adversely affected.

Contact for Additional Information

If you have any questions about the study, you are welcome to call Seth Bosompem Kissi, the Principal Investigator in charge of this study, on 00233-244-642-817 or via email: sbkissi@st.ug.edu.gh between the hours of 9:00 am to 4:00 pm. He is a PhD Candidate at the Regional Institute for Population Studies, University of Ghana.

Your rights as a Participant

Suppose you have any questions about your rights as a research participant in this study. In that case, you may contact the Administrator of the Ethics Committee for Humanities, ISSER, the University of Ghana at ech@ug.edu.gh or 00233- 303-933-866.

Section C- PARTICIPANT AGREEMENT

"I have read or have had someone read all of the above-asked questions, received answers regarding participation in this study, and am willing to give consent for me, my child/ward to participate in this study. I will not have waived any of my rights by signing this consent form. Upon signing this consent form, I will receive a copy for my records."

Name of Participant

Signature or mark of Participant

Date

If a participant cannot read and or understand the form themselves, a witness must sign here:

I was present while the benefits, risks and procedures were read to the volunteer. All questions were answered, and the volunteer has agreed to take part in the research.

Name of witness

Signature of witness / Mark

Date

I certify that the nature and purpose, the potential benefits, and possible risks associated with participating in this research have been explained to the above individual.

Name of Person who Obtained Consent

Signature of Person Who Obtained Consent

Date

