SOCIO-CULTURAL FACTORS AND BIRTH REGISTRATION OF CHILDREN IN GUCHA SUB-COUNTY, KISII COUNTY, KENYA

BY

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ABSTRACT

Children hold a unique and privileged position in society. One of the obligations that state parties assume upon assenting to the UN Convention on the Rights of the Child (UNCRC) and the African Charter on the Rights and Welfare of Children (ACRWC) is that of ensuring birth registration. The lack of trend data on birth registration in many countries makes it difficult to analyze progress at global and regional levels. However, in Kenya, the value of birth registration as a fundamental human right is often overlooked due to continuing lack of awareness that registration is a critical measure to secure the recognition of every person before the law, to safeguard his or her rights and to ensure that any violation of these rights does not go unnoticed. However, less is known about factors that influence low birth registration of children in Gucha Sub County. Thus, this study therefore, sought to examine social-cultural factors that influence low birth registration of children in Gucha Sub County. Specifically, the study examined social factors that influence low birth registration of children; explored cultural factors that influence low birth registration of children; and found out knowledge and attitude of parents towards birth registration in Gucha district. The study was guided by social exclusion theory by Jacques Delors (1955) and further advanced by other scholars. This theory helped in explaining why some parents and guardians failed to register their children despite the fact that there was international instrument's statement on children's right to identity. From a total population of 180,233 people aged 18 years and above in Gucha Sub County, 70 parents and guardians were simple randomly selected. Sixteen (16) key informants were purposively selected who included; 10 Local Chiefs, 4 Health Officers, 1Civil Registrar of Births, and 1Children Officer were interviewed. study population thus comprised parents or guardians or caregivers of Children who had registered or not registered births of their children and those that had acquired or not acquired birth certificates. The study used simple random sampling to get parents or guardians or caregivers from the twenty locations. Systematic random sampling was further used to get the sample size. The quantitative data was collected by the use of semi-structured questionnaires. Quantitative data were coded and analyzed using descriptive statistics by the help of Statistical Package for the Social Sciences (SPSS) version 12 and presented in tables of frequencies, and percentages. The qualitative data were collected using semi-structured questionnaires, key informant interviews and focus group discussions. Qualitative data were analyzed using content analysis. This involved going through the whole data collected, sentence by sentence, word by word, identifying recurring themes and coding them. From the study it emerged that the following have a bearing to low birth registration accessibility to health services, cost of birth registration, long distance to registration offices, cultural beliefs and practices, and level of education for parents/guardians. The study thus recommends that a mobile birth registration should be carried out through community mobilization to facilitate that of civil registration department. There is need to review existing birth registration system being implemented in the country with an aim of identifying areas where the system can be linked to better strategies to enable a timely and efficient birth registration process.

CHAPTER ONE

1.1 Background to the Study

The lack of trend data on birth registration in many countries makes it difficult to analyse progress at global and regional levels. At the country level, however, data indicates that birth registration has increased in several countries, including the Gambia, the Lao People's Democratic Republic and Viet Nam (UNICEF, 2009).

The right to a name and nationality is well established. However, around 51 million births remain unregistered every year in developing countries which translates to one in three children globally, despite government, Civil Society, and other international organizations efforts to universalize birth registration over the last 60 years (UNICEF, 2009). One out of every three developing countries has a birth registration rate of less than 50 per cent. South Asia, is the region with the largest number of unregistered children, this increases to more than one out of two, or over 24 million children not registered in 2007 (UNICEF, 2007). Birth registration, although just one key function in a complete civil registration system, has been at the core of the world community's concerns since the Universal Declaration of Human Rights in 1948. Birth registration for children is at the core of The United Nations Children's Fund's (UNICEF) concerns as it represents the starting point for the recognition and protection of every child's fundamental right to identity and existence (UNICEF, 1998). Nevertheless, some countries have made significant progress in increasing birth registration since 2000, notably Brazil, Cambodia, the Gambia, Haiti, India, Myanmar and Vietnam.

Sub-Saharan Africa (SSA) has the lowest birth registration rates in the world (WHO, 2012). On average, only 38 percent of children below the age of five have a birth certificate. However, there are some countries who have achieved high rates of birth registration: South Africa has one of the most sophisticated systems of birth and death registration in the world; Egypt has demonstrated that birth registration rates of 99 percent are achievable in the African context. Countries such as Djibouti, Burundi, Togo and Gabon all register well over 80 percent of new births (http://www.unicef.org/esaro/5440_UNICEF_giving_children_an_identity.html; UNICEF, 2005). In addition to being a human right, birth registration is crucial for the implementation of national policies and legislation establishing minimum ages for work, military conscription and marriage, and provides a valuable basis for tracing efforts when children are separated from their parents in emergencies. Birth and death registration can also prove to be a valuable source of data for planning services for children, such as planning and implementing immunization programmes and supporting education planning. Children whose births are not registered at birth

are not able to claim the services and protection to which they have a right on a full and equal basis with children who are registered at birth (UNICEF, 2009; UNICEF, 1998).

In Madagascar, where traditional naming practices are considered sacred, civil registration is not seen as crucial (UN Committee on the Rights of the Child, 1993). It is believed that names can affect a person's luck and the illness, accident or death of a person with the same name as a child may result in a child's name being changed. Nicknames are also common, and in practice can acquire the status of the name (UN Committee on the Rights of the Child, 1993). These customs can make it difficult to safeguard a child's identity. In some other African countries, including Cote d'Ivore, Ghana and Togo, there is a strong belief that a newborn child should be introduced into society only gradually (UNICEF, 1998).

In Kenya birth registration is done by the Department of Civil Registration, which derives its legal mandate from the Births and Deaths Registration Act, cap 149 of the Laws of Kenya enacted in 1928 (Annual Civil Registration Statistics Report, 2010). Kenya is a signatory to the Convention on the rights of the child, hence under obligation to ensure that every child's right to Birth Registration is met, as per Articles 7 and 8 of the United Convention on the Rights of the Child. Lack of birth registration has not only impacted on the enjoyment of rights to which all persons are entitled, but have also hindered access to a range of essential services, including health care. Moreover, without data on births, national governments such as Kenya will not have credible evidence as a basis for planning, implementing and monitoring public health policies and programmes, and the global community will have less facility in reaching internationallyagreed development goals. In many countries, proof of identity is essential for an individual to gain access to basic services and to exercise his or her fundamental human rights. A child without a birth certificate may face barriers to exercising his or her rights to education, health and claims to inheritance. Proof of age is also critical for the successful prosecution of perpetrators of crimes against children such as child trafficking, sexual offences, early recruitment into the armed forces, child marriage and child labour. It can also prevent children below the age of criminal responsibility being prosecuted and imprisoned with adults. As they age, unregistered young people may find it harder to get an identity card, driving licence or passport. This can prevent them from working legally or opening a bank account (WHO, 2012, UNICEF, 1998;).

In Kenya, Birth Registration (BR) currently stands at 57% (Department of Civil Registration, 2010) and 60% (Kenya National Bureau of Statistics, 2008) according to the Kenya

Demographic Health Survey (KDHS) with more registration taking place in the urban areas (76%) than rural areas (57%). This is very low compared to the African Union (AU) target of 90% by 2015. At provincial level, there are regional variations with Nairobi recording the highest coverage (data from both the DCR and KDHS) of 87% and 86% respectively. North Eastern province has the lowest levels of coverage (21%) according to the department's data but is higher according to KDHS at 48%. Nyanza province is the lowest according to KDHS at 42% while department's data places it at the same rate. Western region is 60% according to KDHS and 45% according to data at the Department of Civil Registration (DCR). The above is indicative of underlying challenges to BR in western and Nyanza region and worst still, possible low coverage of services due to lack of data. Review of birth certification reveals a dire situation with only 24% of the children in Kenya having a birth certificate (Kenya National Bureau of Statistics, 2008).

Moreover in Kenya, 790,937 births were registered in the year 2010 which was an increase of only 14.55% from the previous year 2009, which had recorded 698,447 births. The coverage rate for the whole country was 57.35% while regional coverage rates ranged from 21% to 86 %, Nairobi region recorded a coverage rate of 86.78%, Central 68.99%, Western 59.78%, Eastern 52.27% while Nyanza recorded a coverage rate of 41.75% with a total of 107,667 births registered. Gucha Sub- County recorded 1537 births which is only 8.52% coverage. (Annual civil Registration Statistics Report, 2010).

Obtaining a birth certificate is a further step in creating an individual's identity. This step can only occur once a birth is registered. A birth certificate is the 'instrument universally recognized as the fundamental evidentiary document establishing personal identification'. Without a birth certificate a person is unable to invoke their full rights as a citizen (UNICEF, 2007)

Both birth registration and birth certificates are fundamental to our existence as citizens in a developed society. It is often taken as given that these events occur routinely in a developed country. It is clearly noted that there is low birth registrations across regions in Kenya. Gucha Sub County is not devoid of such characteristics. Thus, it is critical to establish the socio-cultural factors that influence low birth registration for children in Gucha Sub County.

1.2 Statement of the Problem

Birth registration provides an official record of a child's existence and nationality, and is considered a fundamental human right under article 7 of the Convention on the Rights of the Child. Birth registration should be free and universal (UNICEF, 2009). Children and adults whose births have not been registered are effectively invisible in the eyes of the State. That often puts them beyond the reach of the protection and services to which they have a right, such as health care and education. It may also prevent them from exercising their rights as citizens later in life; they may, for example, be unable to travel using a passport, vote, open a bank account or inherit property (UNICEF, 2009). Despite the existence of international instruments that provide for the child's registration immediately after birth and the local laws and the Government policy that every child should be registered at birth, there is a huge gap between the law, policy and practice on the ground and the people's responsiveness to birth registration has remained low.

This hinders implementation of child protection activities and child support services such as cash transfer programmes, school bursaries, health care and protection of children from trafficking and disinheritance. Further, many parents don't know their children's date of birth and many do not have health clinic cards. Consequently, young people struggle to get identity cards when they are 18 years old, as they are required to produce their own birth certificate and their parent's national identity cards (UNICEF, 2005). Despite the government's policy of immediate birth registration of children after birth, the association between social and cultural factors and how they contribute to low birth registration turn out in Gucha Sub-County remains poorly understood since no studies have been conducted in this area to shed light on the same. Further, the value of birth registration as a fundamental human right is often overlooked due to continuing lack of awareness that registration is a critical measure to secure the recognition of every person before the law, to safeguard his or her rights and to ensure that any violation of these rights does not go unnoticed. In 2010 Gucha Sub-County recorded 1537 births but the coverage in terms of registration was only 8.52% compared to 57.35% national coverage (Annual Civil Registration Statistics Report 2010). Thus, there is a strong need to explore sociocultural factors and birth registration of children in Gucha Sub-County.

1.3 Objectives of the Study

The general objective was to examine socio-cultural factors and birth registration of children in Gucha Sub-County.

Specifically, the study intended to:

- i. Examine social factors that influence low birth registration of children in Gucha Sub-County.
- ii. Explore cultural factors that influence low birth registration of children in Gucha Sub-County.
- iii. Find out knowledge and attitude of parents towards birth registration in Gucha Sub-County.

1.4 Research Questions

This study was guided by the following research questions:

- i. What are the social factors that influence low birth registration of children in Gucha Sub-County?
- ii. What are the cultural factors that influence low birth registration of children in Gucha Sub-County?
- iii. What is the knowledge and attitude of parents towards birth registration in Gucha Sub-County?

1.5 Justification of the Study

Obtaining a birth certificate is a further step in creating an individual's identity. This step can only occur once a birth is registered. A birth certificate is the 'instrument universally recognized as the fundamental evidentiary document establishing personal identification'. Without a birth certificate a person is unable to invoke their full rights as a citizen. Gucha Sub-County has been selected for this study due to the fact that despite the requirements by the government policy on importance of birth registration, they fail to register their children in time. This may be the reason for low birth registration in the study area. In 2010 Gucha Sub-County recorded 1537 births but the coverage rate in terms of registration was only 8.52% compared to 57.35% national coverage (Annual Civil Registration Statistics Report, 2010). For intervention measures to be taken, importance of birth registration must be addressed. This requires that socio-cultural factors that act as barriers to access to birth registration must be understood. The outcome of the research may therefore provide baseline on how to take intervention measures. Information gathered from the study may help the policy makers in considering policies and programs that

may place emphasis on the importance of birth registration during birth. Scholars will also from the recommendations and findings carry out more research on this area of birth registration.

1.6 Scope and Limitation of the Study

The study was carried out in Gucha Sub-County. The study population was parents or guardians or caregivers of children who have registered or not registered births of their children and those that have acquired or not acquired birth certificates. Time constraints influenced the methodology applied.

One major challenge was that parents and guardians feared giving out the reasons for failure to register their children in time bearing in mind that the data collected could be used against them hence this might have affected validity of the data collected. However, the researcher explained to the respondent the importance of the study, build rapport which made the respondent open up and assured them that whatever they say was confidential and not be used against them. Further, the study used cluster sampling method to determine the sample size hence the results were less generalizable to the population.

1.7 Theoretical Framework

The study was guided by social exclusion theory. The concept of social exclusion originated from a sociologist, Jacques Delors from France in 1955 and further advanced by other scholars. He had advocated for equity- equitable access to resources, opportunities, services, goods and human rights. Social exclusion theory therefore refers to the processes in which individuals and communities are blocked from their rights, opportunities and resources (Burchardt, et al... 2006).

The social exclusion theory by Burchant et al (2006) explains how an individual can be socially excluded in participating in a society for reasons beyond his/her control while, he/she would like to participate. The areas of activities where one can be socially excluded constitute, accessing educational institutions, and social interactions with family, friends and community. Social exclusion has increasingly taken over from terms like poverty and deprivation as a term for describing social division. It is common to describe social division and inequality in terms of concepts like poverty, deprivation and disadvantaged. Most of these terms were used with the idea that poor or disadvantaged members of the society lacked adequate resources with which to

achieve acceptable standards of well being and with which to participate in the customary activities of society (Townsend, 1979).

In applying this theory, the social exclusion theory, helped in explain why some parents and guardians fail to register their children despite the fact that the international instrument's statement on children's right to identity stipulates so. Further, this theory helped explain the social and cultural factors that hinder birth registration of children in good time. In addition, this theory helped in explaining parents and guardians attitude and knowledge on birth registration and further enhances an understanding on the importance of integrating birth registration into social services, including health services and early child development programmes, to enhance increase in birth registration rates in rural areas.

CHAPTER TWO

LITERATURE REVIEW

2.1 Children's Birth Registration Situation in Kenya

In Kenya, Birth registration currently stands at 57% (Department of Civil Registration, MoSIRP, 2010) and 60% (KNBS, 2008) according to the Kenya Demographic Health Survey (KDHS) with more registration taking place in the urban areas (76%) than rural areas (57%). This is very low compared to the African Union (AU) target of 90% by 2015. At provincial level, there are regional variations with Nairobi recording the highest coverage (data from both the DCR and KDHS) of 87% and 86% respectively. North Eastern province has the lowest levels of coverage (21%) according to the department's data but is higher according to KDHS at 48%. Nyanza province is the lowest according to KDHS at 42% while department's data places it at the same rate. Western region is 60% according to KDHS and 45% according to data at the Department of Civil Registration (DCR). The above is indicative of underlying challenges to BR in western and Nyanza region and worst still, possible low coverage of services due to lack of data. Review of birth certification reveals a dire situation with only 24% of the children in Kenya having a birth certificate (KNBS, 2008).

The government of Kenya, in 2010 promulgated the Constitution of Kenya 2010. The new constitution clearly stipulated under Article 12(1) that:

- 12. (1) every citizen is entitled to:
- (a) The rights, privileges and benefits of citizenship, subject to the limits provided or permitted by this constitution; and
- (b) A Kenyan passport and any other document of registration or identification issued by the state to citizens.

Currently, the Births and Deaths Registration Act, Cap 149 of the laws of Kenya of 1928 has been consolidated with the identification and Registration of Citizens Act to the newly drafted National Registration and Identification Bill, 2012. The legislation environment will accord every citizen the right to:

Have all births registered 'at birth' (birth notification)



- 1. Acquire citizenship at birth (the clause of birth certificate is not proof of citizenship to be revised)
- 2. Acquire registration documents, the primary one being the birth certificate for free (birth certification)
- 3. The new proposal to Parliament to devolve registration services further to devolve levels demonstrates the government commitment to delivery of efficient services.

As part of the global efforts to increase BR and achieve universal BR, UNICEF is committed to work with the government to build efficient, timely and lasting system that will ensure that all children whose births are not registered are reached and the service and the system is able to maintain consistent registration of all births especially with the proposal to abolish late registration in Kenya.

2.2 Social Factors that Influence Birth Registration of Children

The main barrier to birth registration is that it is not universally perceived as a fundamental right and, as a result given low priority at every level. It is often seen as nothing more than a legal formality, with little relevance for development of the child, including access to health care and education services. The end result is a lack of support for birth registration from national and local authorities, and little demand from the general public, who remain unaware of its importance (UNDESASD, 1998). The registration procedure itself, may be too complex and bureaucratic, or the legislative framework may be inadequate or even nonexistent. It may be too costly for parents. In many countries, parents are charged for registration and/or the issuing of a certificate. Or there may simply be too many logistical hurdles, including the sheer difficulty and expense of travelling to the nearest registration office from a remote area, losing one or two day's work in the process and leaving other children unsupervised (Serrao, Arun and Sujatha 2004).

Currently, millions of people in Africa and Asia are born and die without leaving any trace in legal records or official statistics – because these systems have stagnated over the past 30 years. Civil Registration and Vital Statistics (CRVS) systems are not only a source of legal documentation and empowerment for individuals, but also generate crucial evidence for economic, social and health decision-making (WHO, 2012). However, according to UNICEF (2005), in many countries, the main reason for non-registration is a general lack of awareness among parents and guardians of the need for and importance of birth registration and certificates for their child's future, or, similarly, among family members of the importance of death registration.

In countries like Kenya, Eritrea, Madagascar, Mozambique, Namibia, Swaziland, Tanzania and Uganda, UNICEF is supporting the Governments to strengthen and expand birth registration services. In Angola, Botswana, Malawi and Uganda, efforts are being made to make birth registration compulsory and to remove bureaucratic and cost-related barriers. Ethiopia, Namibia, Madagascar, Malawi, Mozambique and Zambia are receiving capacity-building assistance to improve their birth registration systems. In addition, UNICEF promotes public awareness and demand for birth registration, to encourage parents to register their children (UNICEF, 2005).

In Côte d'Ivoire for instance, the country's armed conflict affected birth registration rates in the first half of this decade. This was accompanied by the usual causes for low birth registration rates, including distance to registrars, indirect and direct costs of registration, lack of awareness of the importance of birth registration and lack of information on birth registration procedures (UNICEF, 2007).

2.2.1 Geographical Barriers

A significant barrier to birth registration is the geographic distance to the nearest registration facility. Accessibility is influenced by location and terrain, infrastructure and the availability of transportation. The greater the distance to the registration centre, the higher the financial and opportunity costs for the family. Urban populations are less subject to such constraints, as indicated by the differentials in urban and rural registration rates for many countries. A few countries such as the Democratic Republic of the Congo, Guinea-Bissau, Lesotho and Rwanda have higher birth registration rates in rural areas than in urban areas as a result of birth registration campaigns and programmes targeting rural areas.

The Comoros and Gabon are the closest to achieving parity in registration rates between urban and rural children, while Guinea- Bissau and Lesotho favour rural children, and urban children in the United Republic of Tanzania and Uganda are significantly more likely to be registered than their rural counterparts (UNICEF, 2007; Dow, 1998). For example, in Guinea-Bissau, 47 per cent of rural children are registered compared to 32 per cent of urban children due to significant registration campaigns carried out in rural areas. In Niger, the highest levels of birth registration are concentrated in Ntamey, an area within a province with low registration levels.

Indeed, the most obvious geographic constraint to birth registration is the distance to the nearest birth registration facility. The greater the distance to the point of registration, the more the opportunity and travel costs rise for parents who may incur fines if the registration is late. Moreover parents may make a wasted trip, as offices often have inconvenient and irregular



opening hours, staff may be absent and there may be shortage of papers and other materials. Moreover, parents who live in rural areas and far away from the registration centers may fail to register their children in time due to distance and accessibility to the registration centres which is further influenced by terrain, the condition of infrastructure such as roads, and availability of public transport. Urban populations are less subjected to such constraints (Gucha District Development Plan 2008- 2012).

2.2.2 Mothers' Level of Education

The education level achieved by a child's mother has consistently been shown to have significant influence on the health and well-being of the family (Annan, 2001). To determine if information about birth registration is reaching mothers with little or no schooling, children who have been registered can be tabulated according to the level of education that their mothers received. A positive association is observed between birth registration and mothers' education level. The proportion of children with birth registration is highest among those whose mothers received secondary education. Data for Colombia demonstrate that 76 per cent of children whose mothers received no education, 86 per cent of children whose mothers received primary education, and 96 per cent of children whose mothers received secondary education are registered. Likewise, for Cambodia, the birth registration levels increase with the mother's education and are 16 per cent, 23 per cent and 34 per cent, respectively. In Zambia, where the national birth registration level is only 10 per cent, birth registration levels increase substantially as the mother's education level rises from none (5 per cent of children registered) to primary (9 per cent) to secondary or higher (16 per cent of children registered). Significant disparities in birth registration levels exist between children whose mothers received primary level education as compared to those whose mothers received no education (Annan, 2001; UNICEF, 2000).

2.3 Cultural Factors that Influence Birth Registration of children

2.3.1 Neglect of Cultural and Community Realities

Even an existing civil registration system, backed by relevant legislation, may be hampered by failure to recognize the culture and everyday realities of local communities. The lack of connection between central authorities and citizens, coupled with low awareness about the value of birth registration, contributes to poor demand for this service.

In Madagascar, where traditional naming practices are considered sacred, civil registration is not seen as crucial (UN Committee on the Rights of the Child, 1993). It is believed that names can affect a person's luck and the illness, accident or death of a person with the same name as a child

may result in child's name being changed. Nicknames are also common, and in practice can acquire the status of the name (UN Committee on the Rights of the Child, 1993). These customs can make it difficult to safeguard a child's identity. In some other African countries, including Cote d'Ivore, Ghana and Togo, there is a strong belief that a newborn child should be introduced into society only gradually. A great deal of thought is given to a suitable name for a child and this is not shared with the authorities until the traditional process is complete. By then, the legal time limit for registration may have elapsed.

In Kenya, registration has been seen by many as an alien concept inherited from the colonial era, rather than as an important service (UN, 2001). In addition, some communities are reported to be reluctant to reveal the birth of a baby to strangers because of fears of witchcraft and because it breaks a traditional taboo on counting of children (Dow, 1998). There can be serious language barriers to registration. In South Africa, where registration suffers from a legacy of distrust from the days of apartheid, birth registration forms are available only in Afrikaans and English and these tend to be the languages used by office personnel. Those speaking other languages were unable to communicate with registration staff and in some cases had to pay for help to complete the necessary forms (www.crin.org/docs/resources/treaties/crc.23/southafrica1NGOreport.pdf). Thus, the study explored the cultural factors affecting birth registration of children in Gucha Sub-County and highlight whether cultural factors affected children's birth registration positively or negatively.

2.4 Knowledge and Attitude of Parents towards Birth Registration

The reasons children are not registered can be complex, and barriers to registration occur at all levels of society. The centralization of registration services is a major factor for families with offices far from rural communities; families face a long journey and the loss of essential income to register their children hence negative attitude by most parents towards birth registration (Cordy, 2009). Lack of awareness, ethnic and social barriers, complex administration systems and economic pressures also contribute to low registration rates (Cordy, 2009). Further, Cordy (2009) argued that the main barrier to birth registration is that it is not universally perceived as a fundamental right and, as a result, is given low priority at every level.

Further, in many countries, the main reason for non-registration is simply the general lack of awareness among parents and guardians of the need for and importance of birth registration and certificates for their child's future. This lack of awareness and understanding leads in turn to a

low demand for registration, as the short- or long-term benefits are not clear (UNICEF, 2000; Cordy, 2009). A survey by Plan showed that the main causes of non-registration in Vietnam were poor awareness of child rights and birth registration, with individuals unaware of the benefits a birth certificate brings. (Ministry of Justice, UNICEF and Plan Timor-Leste, 2006) In Zambia, Plan found that one of the primary reasons for not registering children is that parents are able to use alternative documentation such as their own national identity cards to access services and therefore do not see the value of birth registration (UNICEF, 2000). In Sudan, many see it as purely another legal formality without any practical value (UNICEF, 2000). In addition to the general lack of awareness, high rates of illiteracy act as another barrier obstructing access to any information that is available. At the same time, minority groups and migrants are often isolated when information and documentation is presented in the national language or languages they do not understand. All of these aspects need to be taken into account when devising awareness-raising strategies (Dow, 1998).

In Kenya, birth registration is not a common practice at the community level. Understanding of birth registration as a child right with a corresponding duty on the side of the state (and other duty bearers) is low. The official meaning of birth registration is confused as most parents record names and date of birth of their children on notebooks hence believe to have registered their children. The fact that a child's birth date is written on vaccination cards is also considered as birth registration by most parents (Annual Civil Registration Report, 2010). Thus, the need to find out if this is the case in Gucha Sub-County to advice the parents on importance of having their children registered at the district civil registration offices.

CHAPTER THREE

RESEARCH METHODOLOGY

This section outlines the methodology that was used in this study. It gives a description of the study area, study design, population, sampling procedures, and methods of data collection. It also explains the methods of data analysis and presentation.

3.1 Study Area

The study area was Gucha Sub-County which is in Kisii County. According to the Gucha District development Plan (2008 – 2012), the Sub-County covers an area of 460.6 sq. km². The district is mainly inhabited by the Abagusii Community who are evenly spread across the entire district. The district is divided into five administrative divisions, twenty locations and fifty six sub-locations. The Sub-County shares common borders with Kisii Central to the east, South Gucha to the west, Kisii South to the west and Transmara to the South (Gucha District Development Plan 2008- 2012). The main economic activity in the study area is agriculture majorly dealing with cash crops such as tea and coffee. Apart from growing tea and coffee, the inhabitants also practice mixed farming where by all types of livestock are reared on small scale. Gucha Sub-County has been chosen for this study because according to the Nyanza Province Civil Registration statistics, Gucha Sub-County has recorded lowest live birth registration in the province hence a need for a scientific investigation (Annual Civil Registration Statistics Report, 2010).

3.2. Study Design

The study used descriptive research design. Descriptive research design is a scientific method which involves observing and describing the behavior of a subject without influencing it in any way (Shuttle, 2008). Fraenkel and Wallen (2000) define descriptive research design as a fact-finding research design that gives the opportunity to reach information in its natural setting. Secondary data was also collected and analyzed to help achieve the objectives of the research.

3.3. Study Population

The study population comprised parents or guardians or caregivers of Children who have registered or not registered births of their children and those that have acquired or not acquired birth certificates. The study population cut across the twenty locations. Gucha Sub-County has an estimated total population of 180,233 aged 18 year and above (Gucha District Development Plan 2008- 2012). The study population also included local chiefs who provided information on



social and cultural practices influencing birth registration of children in Gucha Sub-County, Sub-County health officers in the study area, and Gucha Sub-County civil registration officer was also targeted for key informant interviews.

3.3.1 Sample Size and Sampling Procedure

Gucha district consists of twenty locations. The study thus employed simple random sampling to get parents or guardians or caregivers from the twenty locations. Systematic random sampling was further used to get the sample size. Systematic random sampling relies on arranging the target population according to some ordering scheme and then selecting elements at regular intervals through that ordered list. Systematic sampling involves a random start and then proceeds with the selection of every k^{th} element from then onwards. In this case, k= (population size/sample size). The starting point for selection of parents was not automatically the first in the list, but instead was randomly chosen from within the first to the kth element in the list until the desired number is secured (Bhattacherjee, 2012, Nachmias and Nachmias, 1996). Gucha district has an estimated total population 180,233 aged 18 year and above (Gucha District Development Plan 2008- 2012). Thus, parents or guardians or caregivers from the twenty locations were selected systematically until the desired number was secured for the study.

3.4. Methods/ Instruments of Data Collection

3.4.1 Questionnaire Survey/Semi-Structured Questionnaires

Questionnaires (see appendix ii) were used to obtain quantitative and qualitative data from the sampled population. A questionnaire is a way of getting data about people by asking them rather than watching them behave (Tuckman, 1987). Questionnaires that have both closed ended and open ended questions were used to obtain data from the sampled parents or guardians or caregivers representing the entire population. The questionnaire covered the aspects of sociodemographic characteristics and information relating to the objectives of this study. Leeds (1980), notes that a questionnaire is preferred in data collection because it is easier to administer to a good number of respondents who respond in private settings

3.4.2 Key Informant Interviews

A key informant is defined as someone who is likely to have knowledge or experience that is relevant in relation to the topic under investigation (Bernard, 1995). Key informant interviews were used to collect data from local Chiefs, Sub-County health officers in the study area, Sub-County Children Officer and Gucha Sub-County civil registration officer. Interviews with the 10

CHAPTER FOUR

SOCIAL CULTURAL FACTORS THAT INFLUENCE BIRTH REGISTRATION FOR CHILDREN IN GUCHA SUB - COUNTY, KENYA

4.1 Introduction

This study investigated the social cultural factors that influence birth registration for children in Gucha Sub-County, Kenya. This chapter presents the findings of the study under thematic subsection in line with study objectives. Before handling the three objectives of the study age group of the respondent, marital status and level of education was tackled for it adds fertility to the subject matter of the study.

4.1 Socio-Demographic Characteristics of Respondents

Socio-demographic information was collected on the age, gender, level of education, and the nature of the group. The purpose of demographic information was to portray the nature and characteristics of the respondents in this study.

4.1.1 Distribution of Respondents by Age

The respondents were asked to indicate their ages. The findings are summarized in the table below:

Table 4.1 Age of the respondent (Parents/guardians)

		- Grand bad ne ha	a saked wa	Cumulative
Respondents	Frequency	Percent	Valid Percent	Percent
20-29	27	38.6	38.6	38.6
30-39	20	28.6	28.6	67.1
40-49	23	32.9	32.9	100.0
Total	70	100.0	100.0	

Source: Field data (2013)

The respondents were asked their age brackets. The results in table 4.1 above shows that majority of the parents/guardians interviewed were aged 20-29 years (38.6%) whereas 23 out of 70 parents/guardians an approximate of (32.9%) were aged 40-39 years while about 20 out of 70



(28.6%) parents were aged 30-39 years. From the results in table 4.1 above it is evident that majority of the parents/guardians sampled for this study were aged 20-29 years while minority were in age bracket 30-39 years.

4.1.2 Distribution of the Respondents by Marital Status

Table 4.2 Marital Status of the Parents/Guardians

			48.0	Cumulative
Respondents	Frequency	Percent	Valid Percent	Percent
Single	5	7.1	7.1	7.1
Married	51	72.9	72.9	80.0
Separated	14	20.0	20.0	100.0
Total	70	100.0	100.0	

Source: Field data (2013)

Table 4.2 above shows parents/guardians distribution by marital status. Majority of the respondents (72.9%) were married. About 21% of 70 respondents were separated while only about 7.1% of the respondents were single. The single parents had born their children out of wed lock and majority of those interviewed had not registered their children due to inability to get national identification cards from their boyfriends who sired the child with them. This was supported during key informant interviews with Sub-County Civil Registrar who argued that:

Sometimes a young girl gives birth but when asked whereabouts of the child's father...a times they do not even know where they can get them because immediately they conceive their boyfriends go into hiding away from the village (Key informant interview respondent, 2013).

4.1.3 Respondent distribution by Level of Education

Table 4.3: Parents/guardians Distribution by Level of Education

levinfor			run-County)	ealth officers, Sur	Cumulative
Respondent	S	Frequency	Percent	Valid Percent	Percent
Mills res	Primary	28	40.0	40.0	40.0
deduce1	Secondary	23	32.9	32.9	72.9
lmowled.	Tertiary	19	27.1	27.1	100.0
	Total	70	100.0	100.0	

Source: Field data (2013)

The respondents were asked about their level of education and the findings summarized in table 4.3 above. The findings indicated that majority of the respondents had acquired primary education; this was about 40.0% of the study population. About 23 out of 70 respondents had acquired secondary education a proportion that was approximately 32.9% of the study population. Out of 70 respondents only about 19 had acquired tertiary education, this was approximated to be 27.1% of the study population. It is evident from the study findings in table 4.3 above that due most of the parents and guardians had low level of education (primary level) and this concurs with a study done by Annan (2001) which explained that a positive association is observed between birth registration and mothers'/ parents' education level. The proportion of children with birth registration is highest among those whose mothers/parents received secondary education. Hence, low education level as a social factor contributed to low birth registration in Gucha Sub-County.

4.1.4 Knowledge about Birth Registration

Table 4.4: Parents/guardians Knowledge about Birth Registration

- UUIS				to for	Cumulative
opport		Frequency	Percent	Valid Percent	Percent
Valid	No	51	72.9	72.9	72.9
open	Yes	19	27.1	27.1	100.0
P.M.M.	Total	70	100.0	100.0	

Source: Field data (2013)



The results in table 4.4 above shows the responses from parents/guardians regarding their knowledge about birth registration. An estimate of 51 out of 70 parents and guardians did not know much about birth registration, this was about 72.9% of the study population while approximately 19 out of 70 parents/guardians had knowledge regarding birth registration. During key informant interviews with Chiefs, Sub-County health officers, Sub-County children officer and Sub-County Civil Registrar it also emerged that most parents do not know the importance of birth registration thus fail to register their children. From the findings in table 4.4 above it can be deduced that low birth registration in Gucha Sub-County can be attributed to inadequate knowledge of birth registration by parents/guardians.

4.1.5 Availability of any Birth Registration Office Nearby

Table 4.5: Respondents Responses on Availability of Birth Registration Offices Nearby

able 4.0	ahou		n reinspř		Cumulative
DIA S	leb-	Frequency	Percent	Valid Percent	Percent
Valid	No	60	85.7	85.7	85.7
anous f	Yes	10	14.3	14.3	100.0
cograph	Total	70	100.0	100.0	

Source: Field data (2013)

The respondents were asked about the availability of birth registration offices nearby. Out of 70 respondents, about 60 parents/guardians said there were no birth registration offices near their location this was about 85.7% while an estimate of 14.3% of the parents and guardians acknowledged the presence of birth registration offices nearby as shown in table 4.5 above. During key informant interviews, Chiefs, Sub-county Health Officers, Sub County Children Officer and Sub-County Civil Registrar confirmed that the distance to the birth registration centres has been a another major social problem that has led to low birth registration in Gucha Sub-County. The study findings are supported by a report by Gucha District Development Plan (2008- 2012) which stated that the greater the distance to the point of registration, the more the opportunity and travel costs rise for parents who may incur fines if the registration is late. Moreover, parents may make a wasted trip, as offices often have inconvenient and irregular opening hours, staff may be absent and there may be shortage of papers and other materials. Furthermore, parents who lived in rural areas and far away from the registration centers may fail to register their children in time due to distance and inaccessibility to the registration centres which is far influenced by terrain, the condition of infrastructure such as roads, and availability

of public transport. Urban populations are less subjected to such constraints (Gucha District Development Plan, 2008- 2012).

4.1.6 Accessibility to Health Services

Table 4.6: Accessibility of Health Services

					Cumulative
		Frequency	Percent	Valid Percent	Percent
Valid	Yes	57	81.4	81.4	81.4
	No	13	18.6	18.6	100.0
	Total	70	100.0	100.0	081 111

Source: Field data (2013)

Table 4.6 above shows responses from the respondents on accessibility of health services within Gucha Sub-County. An estimate of 81.4% agreed that the health services available were accessible while about 15.6% said that the health services available were not accessible due to various factors. Among the factors mentioned during focus group discussions, parents stated that geographical terrains and poor infrastructure acted as barriers towards access to health services in Gucha Sub-County. This could mean that there is low birth registration in Gucha Sub-County since accessibility is influenced by location and terrain, infrastructure and the availability of transportation. The greater the distance to the registration centre, the higher the financial and opportunity costs for the family. Urban populations are less subject to such constraints, as indicated by the differentials in urban and rural registration rates for many regions in Nyanza Province. The findings above corroborate UNICEF (2001) report which

4.1.7 Prioritizing Birth Registration

Table 4.7: Prioritizing Birth Registration

Priority of Birth				Cumulative
Registration	Frequency	Percent	Valid Percent	Percent
Very important	13	18.6	18.6	100.0
Important but not a must	57	81.4	81.4	81.4
Total	70	100.0	100.0	

Source: Field data (2013)

It is evident in table 4.7 above that most parents/guardians did not give child's birth registration priority this was about 81.4% which was about 57 out of 70 respondents. An estimate of 18.6% viewed children's birth registration as very important and to be given first priority. Low priority to birth registration could be due to low level of education of the parents/guardians as indicated in table 4.3 or as a result of inaccessibility to the registration centres and low availability of birth registration centres in rural areas (*See Table 4.6 and Table 4.5*).

According to Annual Civil Registration Report (2010) the official meaning of birth registration is confused as most parents/guardians record names and date of birth of their children on notebooks hence believe to have registered their children. The fact that a child's birth date is written on vaccination cards is also considered as birth registration by most parents. This has led to low birth registration of children in Gucha district as well. Key informants among local chiefs spoke about the low level of awareness of the public about the importance of birth registration. One key informant stated that;

Most parents do not know the difference between birth registration and birth notification given to them at the health centres, majorly they confuse hence fail to register their children in the district headquarters (Female Local Chief) (Field data 2013).

Further, there was an overriding lack of awareness on the importance and significance of birth registration and the issuance of birth certificate. Many people do not ascribe any direct benefit from immediate notification of birth and would wait until it is absolutely necessary to get the birth certificate. There is also a lack of awareness on the procedure and process of acquiring a birth certificate including when, where, how and who to see and obtain the documents from.

4.1.8 Cost of Birth Registration Considered Being High

Table 4.8: Cost of Birth Registration

Cost of birth				
registration being		. Ma g	and, and the	Cumulative
high	Frequency	Percent	Valid Percent	Percent
No	48	68.6	68.6	68.6
Yes	22	31.4	31.4	100.0
Total	70	100.0	100.0	***

Source: Field data (2013)

Table 4.8 above shows parents and guardians reactions towards the cost of birth registration. Most of the parents/guardians (68.6%) said that birth registration was not expensive and it was only some penalty fees that an individual had to pay for late registration. Thus, they argued that most of them do not register their children once they are late because they do not want to pay fees. An estimate of 31.4% parents/guardians said that the cost of birth registration is high due to distance and other physical and geographical barriers which made them spend a lot to access registration centres. During Focus Group Discussion(FGD) the participants stated that: fees on birth certificates and fines on late registration create a barrier for poor families to register their children or obtain a birth certificate hence low birth registration (30 years old Female, Discussant).

In the event that a birth has not been—thus registered, it is incumbent on the parent to apply to a magistrate', sign an affidavit in a special court and witnessed by two persons before proceeding to the Civil Registrar to obtain—both the registration and the certificate I felt bad because I did not have pesa (money) and went back home upto date my child has not been registered.

(35 Year old male, participant).

4.1.9 Birth Registration Going Against Culture

Table 4.9: Birth Registration going Against Culture

	emmenterininininininininininininininininininin		general and the deliterate and the second relative of the state of the state of the second energy and the second second entire of the second energy of the s	operation and the second and the sec	Cumulative
found		Frequency	Percent	Valid Percent	Percent
Valid	Yes	45	64.3	64.3	64.3
repart	No	25	35.7	35.7	100.0
distance	Total	70	100.0	100.0	, ,

Source: Field data (2013)

Table 4.9 above shows that most parents/guardians (64.3%) viewed birth registration to be against the society's cultural values and beliefs. These findings were supported by focus group discussions held by parents/guardians who viewed birth registration as an alien practice that distorted their cultural values and beliefs. Further, these findings concurs with Dow (1998) arguments which stated that most parents feared registering birth of their babies to strangers because of fears of witchcraft and because it breaks a traditional taboo on counting of children. An estimate of 35.7% of parents/guardians said that birth registration was not going against the society's culture. Out of 70 parents 25 viewed birth registration as a child's right requirement

which is stated by international instruments, these parents had acquired secondary education and above hence were much informed. Moreover, UNICEF 2007 report also indicated that customs can make it difficult to safeguard a child's identity. In some other African countries, including Cote d'Ivoire, Ghana and Togo, there is a strong belief that a newborn child should be introduced into society only gradually. A great deal of thought is given to a suitable name for a child and this is not shared with the authorities until the traditional process is complete. By then, the legal time limit for registration may have elapsed.

4.2.0 Availability of Cultural Barriers to Birth Registration

Table 5.0: Cultural Barriers to Birth Registration

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	yes	45	64.3	64.3	64.3
	No	25	35.7	35.7	100.0
	Total	70	100.0	100.0	(

Source: Field data (2013)

Table 5.0 above shows the study findings in relation to availability of cultural barriers to birth registration. An estimate of 64.3% parents/guardians agreed that there exist cultural barriers to birth registration and this led to low birth registration in Gucha Sub-Sub County. The study also found that due to societal prejudice unmarried mothers may not register births in time. Approximately 35.7% of the parents said that there are no available cultural barriers to birth registration; they argued that people do not register their children in time due to ignorance, long distance and inaccessibility to registration services.

The study findings above concurs with UNIEF (2000) report which stated that there existed some cultural practices, such as the requirement that a newly delivered mother stays in-doors for a period of 40 days, discourage notification due to curtailed physical movement but, most importantly, often result in incorrect data being given by the designated proxy notifiers in the absence of the father, the law allows a mother to designate a third party to send the notification. However this has often resulted in incorrect data such as using nicknames or misspelling of names. Some of the factors that the parents/ guardians mentioned during focus group discussions to support the study findings included: patriarchal attitudes which made it difficult, even impossible for women to register their child without the consent of their husband or other senior



members of the family; single mothers face even greater difficulties in registering births due to shame and stigma attached to their status in the society (UNICEF, 2000).

CHAPTER FIVE

5.0. SUMMARY, CONCLUSION AND RECOMMENDATIONS.

5.1 Summary

This chapter presents a summary of discussions, conclusion and recommendations from the study.

5.1.1 Social Factors that Influence Birth Registration of Children

Birth registration is the process by which a child's birth is recorded in a civil register by the applicable government authority. This step provides the first legal recognition of the child, and generally is required for the child to obtain a birth certificate. A child's birth record typically includes the name of the child, the names of his or her parents, the name of the attending healthcare professional or birth attendant, and the date and place of birth. Once this information is provided, the birth record is signed by the local registrar and filed with the relevant government agency for that region. The birth record may also include the name, address, and autonality of each parent. Such additional information, along with the child's place of birth, can ledp establish the nationality of the child. Although birth registration can be achieved in a variety of ways, the registration of a newborn child typically is facilitated by the local hospital where the wild is born or the community healthcare worker present at the birth.

the main barrier to birth registration according to the study findings is that it is not universally beceived as a fundamental right and, as a result given low priority at every level in the society. It is often seen as nothing more than a legal formality, with little relevance for development of the child, including access to health care and education services. The following social factors are ged as themes in relation to social factors influencing low birth registration in Gucha listrict;

11.1 Cost of Birth Registration Considered Being High

that parents/guardians argued that most of them do not register their children once they are late they do not want to pay fees. A medical doctor in the district hospital mentioned that are many barriers to birth registration in the area that include "low level of awareness" the public, lack of trained midwives at most of rural areas and the financial difficulties

facing local people in obtaining birth certificates". During Focus Group Discussion (FGD) the participants stated that:

Fees on birth certificates and fines on late registration create a barrier for poor families to register their children or obtain a birth certificate hence low birth registration (30 years old Female, Discussant).

In the event that a birth has not been thus registered, it is incumbent on the parent to apply to a magistrate', sign an affidavit in a special court and witnessed by two persons before proceeding to the civil registrar to obtain both the registration and the certificate..... I felt bad because I did not have *pesa* (Money) and went back home up tyo date my child has not been registered (35 Years old Male, participant).

5.1.1.2 Mothers' Education

The study findings indicated that most parents had acquired basic primary education of which some of them dropped on the way. There was a positive association is observed between birth registration and mothers' education level. The proportion of children with birth registration is highest among those whose mothers received secondary education. For instance in Cambodia, the birth registration levels increased with high level of the mother's education (Annan, 2001).

5.1.2 Cultural Factors that Influence Birth Registration of children

The study found out that some cultural practices, such as the requirement that a newly delivered mother stays in-doors for a period of 40 days, discourage notification due to curtailed physical movement but, most importantly, often result in incorrect data being given by the designated proxy notifiers in the absence of the father, the law allows a mother to designate a third party to send the notification. However this has often resulted in incorrect data such as using nicknames or misspelling of names. Some of the factors that the parents/guardians mentioned during focus group discussions to support the study findings included: patriarchal attitudes which made it difficult, even impossible, for women to register their child without the consent of their husband or other senior members of the family; single mothers face even greater difficulties in registering births due to shame and stigma attached to their status in the society. The study also found that due to societal prejudice unmarried mothers may not register births in time.

5.1.3 Knowledge and Attitude of Parents towards Birth Registration

Attitude can be defined as a predisposition or a tendency to respond positively or negatively towards a certain idea, object, person, or situation. Attitude influences an individual's choice of

action, and responses to challenges, incentives, and rewards (together calledstimuli) (Available at http://www.businessdictionary.com/definition/attitude.html#ixzz2ace2XOZP). Thus, most parents do not have adequate knowledge on issues of birth registration and its importance. The study findings concurs with Cordy (2009) study which found out that lack of awareness, ethnic and social barriers, complex administration systems and economic pressures also contribute to low registration rates. Further, Cordy (2009) argued that the main barrier to birth registration is that it is not universally perceived as a fundamental right and, as a result, is given low priority at every level due to negative attitude by the parents and guardians. According to Annual Civil Registration Report (2010) the official meaning of birth registration is confused as most parents/guardians record names and date of birth of their children on notebooks hence believe to have registered their children. The fact that a child's birth date is written on vaccination cards is also considered as birth registration by most parents. This has led to low birth registration of children in Gucha district as well. Key informant among local chiefs spoke about the low level of awareness of the public about the importance of birth registration. One key informant stated that;

Most parents do not know the difference between birth registration and birth notification given to them at the health centres, majorly they confuse hence fail to register their children in the district headquarters (Female Local Chief).

Further, there was an overriding lack of awareness of the importance and significance of birth registration and the issuance of birth certificate. Many people do not ascribe any direct benefit from immediate notification of birth and would wait until it is absolutely necessary to get the birth certificate. There is also a lack of awareness on the procedure and process of acquiring a birth certificate including when, where, how and who to see and obtain the documents.

5.1.4 Conclusion

This study concludes that there are a number of issues that contribute to low birth registration in Gucha district and if addressed, birth registration levels will improve in Gucha and in the whole country. Those issues include low level of awareness on birth registration, negative attitude towards birth registration centres, attitude of the parents or guardians, low levels of education, cultural factors, the attitude of the registration staff and the system used in the registration.

5.1.5 Recommendations

1. There is need to review existing birth registration system being implemented in the country with an aim of identifying areas where the system can be linked to better strategies to enable a timely and efficient birth registration process.

- 2. Explore possibility of utilizing innovations to ensure universal registration for all children that could include community health strategy, mobile phone technologies, computerization of the registration system.
- 3. Abolish the fee for birth registration. During the research, a substantial number of persons proposed these.
- 4. Create more awareness on birth registration by use of media campaigns via local radio/television stations.
- 5. Carry out mobile birth registration through community mobilization to facilitate that of civil registration department.
- 6. Mob up of all children who have not been registered through school enrollment system, religious organisations, and community health units to have them registered.

5.1.6 Areas for Further Research

From the finding of this study, it emerged that there are a number of issues related to birth registration method that require further research.

There is need to research on:

- 1. Capacity of the officers carrying out birth registration and the institutional arrangements.
- 2. Data collection methods and procedure.
- 3. Procedures to record diversity of birth registration.
- 4. The role of stakeholders in birth registration.



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