Maximizing completeness of data and instilling trust in birth registration in Afghanistan: Findings from three provinces

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Abstract:

Objectives: This is a qualitative study conducted in urban settlement in the three Provinces of Afghanistan to identify enablers and barriers to birth registration.

Methods: Qualitative study design was conducted from October to December 2018, supplemented by a desk review. We included 21 key informant interviews and four focus group discussions representing healthcare providers, civil registration staff and other key stakeholders.

Results: The policy environment for national birth registration is quite good and that it has wide support from international and national stakeholders. Also, there is some coordination and communication among various stakeholders across the country. However, the public lacks trust in the vital registration system. Healthcare providers heard that the country has legislation on birth registration but were not familiar with it. Lack of public transportation between villages and the health facilities, poor management of birth registration at health facilities, especially in rural facilities were other barriers to incomplete registration. Poor community awareness about the importance and value of birth registration often blocks parents not to come to health facilities to register the birth of their children.

Conclusion: Birth registration needs to be complete for planning purpose, so additional efforts must target the expansion of birth registration of all children in Afghanistan. The study highlighted barriers to a high quality, complete birth registration system, which undermine the achievement of a satisfactory level of completeness and accuracy of birth data. Supporting a strong legal framework, improving capacities at various levels and raising public awareness and cooperation will strengthen the system that can generate reliable birth statistics.

Keywords: enablers 1; barriers 2; birth statistics 3; legislation 4; key informant 5

Introduction

Various international instruments such as the Convention on the Right of Child, and the Sustainable Development Goals, recognize children's right to birth registration as a basic human right, encouraging countries to ensure access to legal identity certificate and improve birth registration systems by 2030 (1). Universal civil registration is essential for safeguarding this human right. Documented evidence is often required to secure recognition of one's legal identity, family relationships, and nationality (2). Such legal documented proof is necessary to enable individuals to be protected from violence, abuse and exploitation, get access to education, health and other social services, seek employment, electoral rights, claim inheritance, transmit property, open bank accounts, access credits, and obtain passports and driving licenses (2). In addition to benefits to individuals, vital statistics provide important information on the population of a country that can help with planning of services and infrastructure. They should be collected through a comprehensive civil registration system that uses standardized administrative mechanisms by trained and skilled individuals (3). Globally, the proportion of the population who have birth registration is about 71%; The lowest levels of births are recorded in sub-Saharan Africa (44 percent) and South Asia (39 percent) (4).

Registration of vital events in Afghanistan was started in Kabul health centers in the early 1800s and extended to all provinces, under "The Registration of Births, Deaths and Marriages Act" in 1878 (5). Civil registration was started within the Ministry of Interior in 1977, with support from the United Nations. This involved the establishment of a section in the Central Statistics Office in 1978, specifically for analyzing and evaluating Civil Registration and Vital Statistics (5).

The 2013 Statistics law, which was endorsed by the Afghanistan president, comprises seven main articles (3). The new Standard Operating Procedure approved by Minister of Public Health in 2017, holds all local public health staff and hospital staff responsible for recording births, issuing certificates to families, and reporting to the National Statistics and Information Authority, the responsible agency for the national system of statistical information. Despite this commitment to vital statistics registration, and the fact that providing birth certificates to children is ensured by law, decades of conflict and limited government resources have left Afghanistan with a poorly functioning birth registration system. The 2015 Demographic and Health Survey shows that in Afghanistan only 42% of births are registered (6). Therefore, it is crucial to improve the quality of birth statistics and understand the current performance of the vital registration system. This study was designed to assess performance barriers of the Afghanistan vital registration system and make recommendations for improvements.

Methodology

There is no single public entity in Afghanistan responsible for ensuring birth registrations. This qualitative study consisted of 21 key informant interviews and four focus group discussions with key stakeholders in the process. Each focus group included six to twelve participants. One was conducted with implementing partners of the basic and essential health packages, one with Ministry provincial public staff, one with staff from the National Statistics and Information Authority, and one with midwives and vaccinators from a Maternal hospital in Kabul, who are responsible for vital registration. The interviews were conducted with managers of the basic and essential health packages in implementing organizations, officials from the Ministry of Public Health (MOPH), vital statistics director at the National Statistics and Information Authority, individuals from the expanded program of immunization, hospital managers, surveillance officers, and the deputy minister of policy and planning. Interviews and focus group discussions used a question guide, that included questions about participants' perceptions related to birth registration.

The study was conducted between October and December, 2018, in three Afghan provinces: Kabul, Panjshir and Nangarhar. Interviews and focus group discussions were in the local language. They were recorded and the recordings were transcribed, then translated to English for analysis. Thematic coding and structuring were done in the first stage and final analysis of qualitative data was performed by the researchers using a qualitative data analysis software.

Findings

A total of 21 respondents were interviewed, aged 34 to 58 years. Four were females and the rest males. Focus group participants were aged 30 to 63 years, and about half were female. The following table shows their professional affiliations:

Study participants	Focus group discussions	In-depth interviews
Ministry of health staff	7	8
Hospital or health-facility staff	11	7
Implementing partner staff	10	5
National Statistics and	12	1
Information Authority		

Overall, participants recognized the importance of birth registration. Most stated that these data are important for planning and setting strategies.

- -Afghan government will know the population existing in the country to determine the target and that how much resources are needed. Also, it can be used during election and vote casting (Implementing NGO Staff, Focus Group).
- -We need complete data of population for planning, social needs and building number of schools and hospitals (MOPH Health Professional, Interview).
- -It helps us to know the population growth to estimate the needs of community and health facility such as number of vaccines needed and number of school enrolments (Implementing NGO Staff, Interview).

These selected statements reflect a high level of knowledge about the importance of birth registration, and commitment to improving the system. And yet, respondents identified several key barriers to birth-registration coverage, including poor awareness of health workers, poor health system responsiveness, lack of money, transportation problems, and lack of parents' awareness.

Service barriers

Low awareness of health workers on birth registration policies

Most health workers who participated in the study, heard that the country has legislation on birth registration, but they did not read it, were not oriented to it, did not receive any policy guidance related to birth registration, and did not know what it involved.

- -MoPH has policy for births and deaths but we do not have it in written form (Health Care Provider, Interview).
- -There is no policy or strategy and if there were any, MoPH would share with us (EPI Staff, Interview).

Further, the majority of participants of focus group participants stated that they do not have information of any policy or strategy in this regards, however, they stated that they did receive training on forms and registers to complete.

- -I attended two days training on how to record/register births and deaths, but nobody talked about any policy (Midwife, Focus Group).
- -I want to say that we follow the MoPH's policy on birth registration and I heard about it, but I haven't read any specific policy in this regard (Hospital Director, Focus Group).
- -we do have a section of vaccination at the ministry level and they do have a policy that any neonate that receives vaccination should also be provided with birth registration card. We do have policy, but people are not aware of it and community doesn't have any information regarding it (Maternity Hospital Health Care Provider, Focus Group).

Poor health system responsiveness and management

The primary place for birth registration is the health facilities. Adequate behavior, cooperation, and commitment of health workers will encourage parents to register their children.

-due to lack of cooperation and disrespect to parents, and high workload in health facilities, could result in poor birth registration system at health facility level (Implementing NGO Staff, Focus Group).

In addition, many women in Afghanistan deliver their babies at home, and there is no system for getting them to a facility to register their babies.

-Even in Kabul there is no system for registering births those taking place at home (National Statistics and Information Authority, Focus Group).

Poor management of birth registration in health facilities is an obstacle, especially in rural areas.

-workload is a lot and every staff member says that it's not their responsibility to register a birth, but they will do this work if any incentives are given to them (Maternity Hospital Vaccinator, Focus Group).

Demand-side barriers:

Poor Parents' awareness and participation in birth registration

Parents are not aware of the importance and benefits of birth registration for their children. This is predominantly true for parents who are living in rural areas where women often deliver at home, and many do not come to health facilities for antenatal care.

- -I can say that awareness about birth registration is low among people (Health Director, Interview).
- -I would say that the awareness level of families is low, and they are not interested in getting the birth registration card or even national identity card (Implementing NGO Staff, Focus Group).
- -people do not know the importance of birth registration and some may even not have heard about it at all (National Statistics and Information Authority Staff, Focus Group).

Distance and Transportation cost

Given that for women who deliver at home birth registration means a special trip to a health facility, lack of public transportation between villages and health facilities is an important barrier to universal birth registration.

-lack of public transportation in rural areas, inconvenient road connectivity and travelling long distance to a health facility that could be time-consuming and expensive (Provincial Health Director, Interview).

-though birth registration in the health facility is free of charge, many parents simply lack the financial means to pay for the cost of travel in rural areas and mentioning about the opportunity costs for families who must travel long distances to a health facility for birth registration of their child (Implementing NGO Staff, Focus Group). -I would say that for some people the

transportation from home to a clinic is a problem, because the distance is a lot in rural areas (National Statistics and Information Authority Staff, Focus Group).

Discussion, Conclusion and Recommendations

Discussion:

Providing technical and financial support to the Vital Statistics department of the Ministry of Public Health is key for bridging the gaps identified by this study, and increasing access to birth registration in Afghanistan. This should include not only support for the Vital Statistics department, but also the design and implementation of well-organized co-ordination mechanisms among stakeholders at national and provincial levels. The goal should be to avoid over- or under-reporting of births and death events.

Few health workers in our study were aware of the purpose of birth registration, and the implication of the policy for the Ministry of Public Health. Furthermore, health workers were not aware of the importance of policy and convention on the rights of the child, which states that every child should be registered immediately after birth. Since birth registration is essential for national planning and it gives identity to a child and safeguards his/her rights to basic services, such as protection from violence, abuse and exploitation, the right to health care, nationality, schooling, and property ownership.

Apart from health worker's low awareness on birth registration, other systemic barriers may limit birth registration, these include training for healthcare staffs and wide orientation to all those involved in health service delivery, both at public and private sectors. The trained and motivated health workers may lead to higher demand for birth registration through increasing awareness to their clients that in turn may increase parents' access to registration.

Some parents must commute long distances to get to a health facility for child birth. More than half (59%) of births are delivered at home in rural areas (6). Poor road connectivity combined with lack of transportation makes it difficult for them to visit a health facility for birth registration. This is especially challenging for rural, poor or geographically marginalized populations, both in terms of opportunity such as loss of their daily earnings and travel costs. Due to long distance parents may decide or prefer that their child birth should take place at home where there is no procedure for the birth registration.

The low level of awareness is an important determinant of birth registration among rural communities. It is likely that less attention has been given to awareness creation of birth registration in rural communities. The benefits of birth registration are not well described to parents or to pregnant women during their antenatal care visits. In some cases, birth registration might be something new to rural communities, which may take time for people to get familiar with and know about the importance of early birth registration. The reasons behind this might be the poor communication between health workers and parents, lack of culturally appropriate birth registration services and/or may be lack of trust on health workers.

Conclusion:

This study has some limitations that should be noted. All individuals who participated, were from urban settings and the direct beneficiaries (parents) were not involved in this study. However, we attempted to include health workers, National Statistics and Information Authority staff and other relevant key stakeholders.

This qualitative study assessed the challenges of incomplete birth registration in Afghanistan. The study highlighted barriers to a complete birth registration system. These include poor awareness of health workers, poor health system responsiveness, societal ignorance, financial problems, and transportation difficulties. These challenges must be resolved in order to achieve a satisfactory level of birth data.

The current policy environment and existing policy documents, both national and international, pave the way to execute legitimate birth registration in Afghanistan. The constitution of Afghanistan, as well as Ministry of Public Health and National Statistics and Information Authority guidelines support vital statistics registration in the country.

Recommendations:

Enforce the existing civil and vital registration related law

Regulate the mandatory requirement of a birth certificate, as a condition for children to get admission in school

Make available of birth registration standard operating procedure and guidelines, which includes clear and adequate instructions, to all healthcare providers.

Add birth registration to health management information system (HMIS) and national monitoring checklist (NMC) and other monitoring mechanisms to improve the accountability of health workers for provision of the birth cards.

Raise public awareness about the importance of birth notification, and requirement of birth registration through wider community awareness campaigns such as Radio/TV spots.

Ensure adequate resource allocation to the health sector and National Statistics and Information Authority to be able to perform vital registration functions efficiently.

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