BIRTH REGISTRATION AND ITS IMPLICATIONS IN THE FEDERAL CAPITAL TERRITORY, ABUJA, NIGERIA

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Abstract

The availability of accurate birth registration data is a source of concern for researchers and the government. Making use of data from the Federal Capital Territory (FCT) Abuja, this paper examined the extent of completeness of birth registration and issues associated with this process. Primary (questionnaires and interviews) and secondary (documents and records) data from FCT Administration and National Population Commission (NPC) were utilized. This paper adopts the Functionalist perspective in examining the level of awareness and the extent of compliance to registration of births. Findings reveal that 100% of the respondents are aware of the birth registration process, however, only 78.6% registered the birth of their children. Out of the six Area Councils in the FCT, Abuja Municipal Area Council has the highest registered births with a total of 308,642 and Kwali with the least registered births at 55,507. The extent of compliance to birth registration in Abuja was highest in the year 2017 at 229,868 and lowest in 2020 at 13,450. Poor compliance on the part of the parent(s), inadequate monitoring of the process by government officials and some non-documentation of births by Traditional Birth Attendants are some contributory factors to low registration figures. Birth registration is useful for various forms of planning, health care delivery services and relevant infrastructure for better quality of life for citizens. It is recommended that the NPC should enhance publicity, improve accessibility to registration centre and improve on their logistics to ensure that all births are registered and captured in a database.

Keywords: Birth Registration, Population, Children, Federal Capital Territory, Abuja

1. Introduction

In all jurisdictions birth registration is expected to be an ongoing process where births are registered by designated authorities. In Nigeria the birth registrars of the National Population Commission (NPC) are updated periodically. It is within the mandate of the NPC to record births amongst other vital statistics. It is expected that live births are registered within the first 60 days and a Birth Certificate issued after the documentation, and this process is free by law. However, when the birth of a child is registered after the child has attained 18 years of age, the individual is expected to pay a fine and the document given by the NPC is no longer the Birth Certificate but Attestation of Birth, after the person must have presented a sworn affidavit. The information gotten from the registration of births is used to update the records from previous census, this is because census is conducted once every 10 years. To enhance our understanding of this phenomenon in Nigeria generally, and in addition to the importance and significance of data on registered births, this paper examines the extent of compliance

and completeness, and issues associated with the registration process in a part of Nigeria – the Federal Capital Territory, Abuja.

Nigeria is a signatory to the United Nation's convention that demands obligatory registration of births and deaths - The Convention on the Rights of the Child stipulates that the child shall be registered immediately after birth and shall have the right from birth to a name, the right to be taken care of by his or her parents and the right to acquire a nationality. African Charter on the Rights and Welfare of the Child which was adopted in 1990 and came into force in 1999 did not leave out the need to register births. Article 6 of the African Charter on the Rights and Welfare of the Child stressed that every child has the right to be named and should be registered at birth. Also, the National Population Commission Act 67 of the Federation of Nigeria mandates the commission to establish and maintain a continuous universal registration of births and deaths in the country. The National Population Commission (NPC) established in 1988 by the Federal Government of Nigeria has the statutory powers to collect, analyze and disseminate population and demographic data in the country. It is also required to undertake demographic sample surveys, assemble, collate and publish migration and civil registration statistics and also monitor the country's population policy.

Birth registration in Nigeria is compulsory even when a baby is born outside a formal hospital or in a rural area where the NPC office is not within reach. It is the responsibility of the parents or guardian to take the birth certificate issued at the time of birth to the NPC registration center to validate the document and issuance of government birth certificate. This means that the only recognized birth certificate is the one issued by the National Population Commission and this guarantees the identity of the child.

A birth certificate not only guarantees the identity of an individual but it is also used to determine the eligibility of an individual into school, without a birth certificate, children may be denied educational opportunities. In Abuja, some school authorities have made it mandatory that wards must present their birth certificate before they are admitted into the schools. Also, students must present their birth certificates before they can be enrolled to seat for Junior Secondary School Certificate Examination (Junior WAEC) and Senior Secondary School Certificate Examination (SSCE). For children who were issued birth certificates by Traditional birth attendants, Area council authorities, and churches (baptismal certificate) were not admitted into school unless with a birth certificate issued by the National Population Commission (NPC). Ojo, *et al.* (2020), corroborates this assertion and noted that every country needs to have detailed information on its vital statistics. This means that every government needs to know the total number of citizens and in their various categories for planning on how to meet their needs.

Civil registration and birth registration in particular represent a fundamental tool for good governance. Good governance entails improving a lot of local populations (Ukoji, 2019). Good governance is a multi-faceted responsibility of both the market, citizens and state to promote public decisions and mobilize resources towards the public good. Therefore, several development plans, both at the national, regional and global levels have been put together to entrench good governance. The aspect of data critical to good governance is demographic data which is used to perform the dual purpose of either informing effective development planning or are employed to monitor development interventions (Brolan, Gouda, AbouZahr & Lopez, 2017). Amangwai (2016) argued that without detailed and extensive population data and vital statistics, it would be difficult to



undertake any meaningful economic planning. With relevant data the government can adequately undertake economic planning that suits the peculiarities of certain populations. Civil registration in general and birth registration in particular, represent an essential means for reliable governance. For adequate planning at the national and sub-national levels, countries need detailed information about the demographic features of its population (Amangwai, 2016).

Africa is yet to record a complete routine registration of events-births and death, in most parts of the continent. The United Nations Children's Fund (UNICEF, 2013) estimates that only 44% of children in Sub-Saharan Africa have had their births registered. Only two countries (South Africa and Egypt) in sub-Saharan Africa are known to have achieved completeness in the registration of births. While birth registration in other African countries is still abysmally low at 3% in Somalia, 4% in Liberia, 7% in Ethiopia, 16% in Tanzania to a high of 95% in South Africa (UNICEF, 2013).

Demographic data is at the heart of development plans nationwide, despite the importance of the continuous birth registration process there exist lack of compliance in achieving universal registration. The aim of this paper is to examine the awareness level and actual practice of the birth registration process amongst residents of the Federal Capital City as an example. Thus, contributing to the body of knowledge to fill the gap that exist in the literature. This is significant because existing studies have not sufficiently explored birth registration and its implication in the Federal Capital Territory, Abuja in particular. This study helps to fill the gap that exist in the study area. In Nigeria, the process of getting this demographic data is through census and vital registration. Census is designed to be conducted once every 10 years while Vital Registration is designed to be a continuous process to update the information gotten during the census (Ojo, Akinde & Tokunbo-Cole, 2020). Nigeria's last census was conducted in 2006. This is an indication that demographic data will not be accurate. Hence, the need for continuous birth registration. Registered births will always complement the data when a census is eventually conducted. It is against this background that this paper examines the state of birth registration in the Federal Capital Territory, Abuja.

2. Literature Review and Theory

2.1 Public Awareness and the Process of Birth Registration

Awareness can be regarded the familiarity and appreciation that something is occurring or exists. Giving the enormous importance of birth registration the citizens' compliance is important. Ekaete, Andrew and Essy (2003) found that awareness of birth registration was high in the community they studied, where the primary source of information was the healthcare worker at 123 (43.3%), 83 (29.2%) the mass media, 47 (16.5%) a family member, and 4 (1.4%) the church. Also, the primary reason for birth registration as suggested by respondents included for purposes of declaration of age 52 (18.3%), self-identification 52 (18.3%), employment requirement 40 (14.1%), child education 32 (11.3%), government planning 19 (6.7%), medical/government records 4 (1.4%), and welfare/social benefits 27 (9.5%). 58 (20.4%) of 284 respondents did not know the reason for birth registration.

Okereke (2015) highlighted those factors militating against effective and efficient Vital Civic Registration System as a veritable means of obtaining census data. He identified the lack of conscientization of citizens through publicity as the major factor that impedes the possible measures of improving the process of the Vital Civic Registration System. Adeline and Eme (2006)



noted that Nigeria's developmental problems are intertwined with census politics as observed in the 2006 population census and it's largely dependent on the information available. They further stated that States with limited access to natural resources tend to see population exercise as the only available means for them to bridge the gap created by an absence or inadequate resources. In the case of Nigeria, the awareness and knowledge are viewed from the prism of a misconception arising from the colonial era on population census and vital registration which has kept the country in confusion on how to harmonize census administration and utilize population information in meeting with the socio-economic and political needs of her citizens.

In emphasizing the need for awareness of the birth registration process, Adebime and Akptamu (2019) found out that in Akure (Ondo State Nigeria) the majority of the participants were not aware that the NPC is the body responsible for the registration of birth. They observed that the reason for the lack of awareness could be misinformation from other sources and not the conventional media. Likewise, Atkinson (2017), in a study in a rural region in Kenya discovered that out of the study population 30% of the respondent didn't register their birth because of lack of awareness and financial constraints.

2.2 An Overview of the Extent of Birth Registration in Selected Countries

Bhatia et. al. (2019) observed that studies have shown that the extent of birth registration differs globally, and that generally, birth registration coverage has improved from 58% to 71% among children under five; although, an estimated 230 million children do not have identification documents. In addition, to ensure that births are registered, the Sustainable Development Goal 16 Target 9 emphasizes the need for a legal identity for all, including free birth registration. Indicator 1 (one) for birth registration, is the percentage of children under age 5 whose births have been registered with a civil authority.

According to Garene *et. al.* (2016), in 2012, only around 60 percent of all children born were registered at birth globally. The rates fluctuate considerably across regions, with the smallest levels of birth registration located in Sub-Saharan Africa and South Asia, while the industrialized nations recorded complete vital registration in the early nineties (Garene, et al. 2016). UNICEF (2013) stated that the ten (10) countries with the lowest birth registration levels are Somalia (3%), Liberia (4%), Ethiopia (7%), Zambia (14%), Chad (16%), United Republic of Tanzania (16%), Yemen (17%), Guinea-Bissau (24%), Pakistan (27%) and the Democratic Republic of the Congo (28%).

In South Africa for instance, Garene et. al. (2016), observed that a total of 42,977 recorded births in Agincourt, a rural area in South Africa between 1992 and 2014. In the years presiding their study, there was very low registration of birth particularly for the black population but there was an increment of registration from 21.2% in 1991 to 84.1% in 1992. Among the recorded live births, 49.3% were registered. However, in South Africa, the completeness of birth registration in South Africa (excluding late registration) varied greatly over the years - in the first two years, it was only 6.2% (1992 - 1993), but reached 89.1% in 2014.

The apathy in the registration of birth in Ghana is quite similar to the situation in South Africa. Although some of the reasons for non-registration were the cost of registration, lack of awareness and distance of people from the registration centers (Farnegas & Odeme, 2013). They also



observed that in spite of the birth registration process having legal backing and registration centers located in the premises of the health facility or in close proximity, there was a shortage of registration staff and a lack of registration centers in the rural areas. In Ghana, there was also the mistaken belief that all births take place in health facilities. Compliance trends also vary. For instance, there was an increment of birth registration for children below the age of 5 between 2003 and 2008 from 44% to 71% (Nyonator *et al.* 2005).

As the need for universal birth registration in Africa or certain African countries continues to gain momentum, Nigeria is not left behind. According to a UNICEF assessment in 2001, Nigeria's total birth coverage was 28.2% as against 78.6% in Cameroon, 61.7% in the Republic of Benin and 81.2% in Togo (UNICEF, 2002). As of 2007, the vital registration of births in Nigeria was the lowest in Africa with about 30% completion with 21.2% and 50.3% in rural and urban areas respectively (UNICEF, 2007). This suggests a breach of the child's undeniable human right to be given an identity at birth and to be considered as a member of society. A slight increase of about 2% from 28.2% in 2001 to 30.2% in 2006 is observed over 5 years in the registration of births in Nigeria. Generally, these estimates show that a large number of births in the country are not registered. This could be attributed to poor publicity of its importance and the inadequate number of registration centers (Okereke, 2015). The 2008 Nigerian Demographic Health Survey (NDHS) (NPC, 2009); National Bureau of Statistics (1999); and UNICEF (2007) examined the extent of birth registration in Nigeria and all observed that it was incomplete.

According to a UNICEF (2013) survey on the number of children under 5 whose births were not registered indicated that out of 10 countries with the largest number of unregistered births, India had the highest with 71 million followed by Nigeria with 17million. In a Nigerian example for instance, Williams (2014) found that there is a huge gap in the birth and death registration of infants under the age of 5(five) in Makola, a semi-urban community in Oyo State.

Makinde, Olapeju, Ogbuoji and Babalola (2016) observed that in Nigeria only 6 (six) out of 36 (thirty-six) states and the Federal Capital Territory had completeness rates above the NPC's 60% 2010 target. Records from some other states were - Anambra (68%), Edo (65%), Ekiti (72%), Imo (66%), Lagos (68%), and Osun (68%). Zamfara State lagged noticeably with a completeness rate of 9%. They noted that these results show that the completeness rate in the South West was above 60% for the three years preceding 2010. Also, that the positive trend in the South-East zone is commendable, rising from 38% in 2002 to 62% in 2008.

To sum up, certain observations stand out where planning and implementation were done differently to suit peculiar needs, resulting in high or complete birth registration. For instance, the South African government made some concerted efforts to achieve the success that was recorded by registering all births in both the rural and urban centers. According to UNICEF (2013), South Africa recorded a 95% completeness of birth registration. The hospitals and clinics where births occur were fully computerized with an internet connection to allow for digital registration. There was also massive advocacy for the need to register birth and death partly because a birth certificate was needed to obtain Identity Cards (ID) for voting and Driver's Licence. Lastly, in South Africa the Birth Certificate is a prerequisite for accessing some social grants like the Child Support Grant (Garene, *et al.*, 2016).

2.3 Lessons from other Countries

Several factors influence birth registration levels. These include completeness and compliance, government commitment to a legislative framework and whether or not existing infrastructure can support the logistical aspects of birth registration, especially in diverse geographical areas. For example, in South Africa improved vital registration was as a result of concerted efforts of the government to register all births and deaths for all population groups especially in remote areas. This was achieved by the reorganization of the Centre for Excellence for Civil Registration and Vital Statistics Systems CRVS to accommodate the whole population (CRVS, 2019). Other strategies involved developing a full-scale population register with a single ID number, developing the infrastructure for registration (fixed points and mobile teams), by working closely with the hospitals and clinics where these events occur, by developing a fully computerized system with Internet connections, and by large-scale information and advocacy campaigns in the whole country (Garene, *et al.* 2016). In Ghana, to improve birth registration the government in mid-2013 extended the legal free period for registration from 21 days to 1 year in addition to an intensive public education while community health workers were trained to register births in the community health clinics and on a mobile basis (Afele, 2011).

Niger Republic achieve improved universal registration in 2006. It recorded a slight increment in the number of registered births from 24 to 32%. This was achieved as a result of the introduction of the auxiliary notification offices in healthcare facilities where these vital events occur. In the following years, there was a massive campaign and the introduction of automatic registration to reduce leakages (Wodon & Yedan, 2019). In Senegal, the percentage of children under five whose births were registered increased from 55% to 75% between 2005 and 2010-2011. Schemes launched by the Senegalese government and its affiliates during the period include mass campaigns on the significance of birth registration, the slashing of fees to obtain a birth certificate, and the establishment of new registration offices in many locations in the country.

The successes recorded from the three countries above were possible to a large extent because their governments took some proactive and positive logistics decisions. Child friendly organizations also offered services to eligible households with certain conditions. In Zimbabwe, possession of a birth certificate for the deserving child was one of the conditions households had to meet to qualify for continued access to targeted social protection benefits. The government of Zimbabwe collaborated with UNICEF on several conditional cash-transfer programmes which explicitly aimed to improve birth registration for orphaned and vulnerable children under the age of five years (Chereni, 2017).

The importance that individuals and families place on registering a child is equally vital, along with the barriers they may face in doing so. These barriers could be the costs incurred during birth registration under the pretext of registration fees, travel time to registration facilities, and lack of awareness or information. Registration of birth, therefore, becomes more likely as a child grows older when the child is not able to access some services because he or she does not have a birth certificate.

In Nigeria, since the National Population Commission (NPC) was established in 1988, there have been differing reports on the level of completeness of birth registration. A report on live births, deaths and still births registration in Nigeria (1994–2007) claimed that the birth registration rate



was 0.01% in 1994 and improved to 23.93% in 2007 (NPC, Federal Republic of Nigeria 2008). Authors that have examined the completeness of birth registration in a number of communities in Nigeria observed that the completeness rate was above 65% in the studied communities, while some were always above the aggregate rates reported by the NPC (Akande & Sekoni 2005; Tobin, Obi, & Isah 2013; Williams 2014).

In a bid to improve registration efforts, the NPC in 2008 set a target for 2010 of 60% completeness, and universal registration (100%) by 2015. To achieve this, the NPC in collaboration with its implementing partners like UNICEF, put in place various strategies intended to improve birth registration. These strategies included relaxing the fine for late registration and encouraging the registration of all children under 5 years old using the Rapid SMS channel. According to the Bureau of Statistics, in 2016, nationally, 7,742,488 births were registered. Improvements can be attributed to enhanced registration procedures and the requirement of having birth certificates for services such as school enrolment.

2.4 Theoretical Framework

This paper is situated within the Functionalist theoretical perspective. In the field of sociology functionalists view society as a system that is made up of interconnected parts which make up the whole (Haralambos & Holborn, 2013). This theory likened society to the human body that is made up of different parts that function differently but are interconnected for the maintenance of the whole. Likewise, society is made up of social institutions that meet the social needs of the society through the functions that the social institutions are set up to execute for the society to continue to exist. These basic societal needs are known as functional prerequisites. According to Ritzer (2010) prominent functionalist theorists include Auguste Comte, who pointed out the need for society to be united. Emile Durkheim was concerned with how society maintains internal solidarity and survives over time. Talcott Parsons saw society as a system that has four basic functional prerequisites - Adaptation, Goal attainment, Integration and Latency- which is termed the AGIL model - to address the problems, solutions must be organized in the form of social institutions that persist over time. (Ritzer, 2010).

In meeting society's need for the documentation of births and deaths, in Nigeria the National Population Commission (NPC) was established in 1988 by the Federal Government with the authority to carry out demographic sample surveys, accumulate, collate and broadcast migration and civil registration statistics and also supervise the country's population policy (Ukoji, et al. 2019). The commission among other functions is empowered to engage in the enumeration of the population through periodic censuses ad sample surveys, create and sustain the machinery continuous and compulsory registration of births and deaths, give factual advice to the President and stakeholders on population issues, and provide data on the population to facilitate economic and development planning.

A functional birth and death registration structure is an important component of the system. NPC has offices in all the administrative levels of the country: Federal, State and Local Government Areas (LGAs). Abuja is treated as a state so it has an office that is headed by the Territorial Director, while the Headquarter of the Commission is headed by a chairman and a 37-member representing each state of the Federation and the FCT (Centre for Excellence for CRVS, 2019).



One of the processes through which the commission carries out its function is through censuses and registration of vital events. PAI (2017) proposed three types of approaches in registering vital events; visitation of household by registration staff, persons associated with the events visit the registration centers and reliance on informants to report the occurrence of the events. When a child is born, the parents, relative, or the head of the household when the event occurred could register the birth of the child. For Mouravieff (2001) the responsibility for civil registration is essentially the role of governments, their national structures and services, while the birth registration process depends also on other actors such as hospitals, health and community centers, midwives and traditional birth attendants.

Events of births occurring outside government or registered hospitals could be missed due to lack of reporting. To prevent this, Nurses, Midwives, Traditional Birth Attendants (TBAs) and Community Health Extension Workers (CHEW), who are called Notifiers are required by law to report events that they are knowledgeable about in the Notification of Births Form (B4). When such events have been reported, the registrar carries out some confirmatory checks and ensures that a FORM (B1) is completed. After the events have been entered in the Register of Birth, a certificate of birth is then issued. It is only the registrar at the registration centers that are authorized to fill registration forms, issue and sign the certificate. Importantly, no registrar is allowed to sign any certificate in advance but only at the point of the issuance (NPC, 2004). From the functionalist perspective, structures, institutions and personnel working simultaneously, need to be deliberately designed to meet the requirements of the birth registration process and documentation.

3. Methodology

The Federal Capital Territory (FCT) is the capital of Nigeria and is administered by the Federal Capital Territory Administration headed by a Minister appointed by the President. The FCT has a landmass of approximately 7,315km with an estimated population of 3,464,123 (NPC, 2020). It is bounded on the north by Kaduna State, the West by Niger State, the East and South East by Nasarawa State and the South West by Kogi State. FCT's natural endowment such as its rolling hills, isolated highlands and other endearing features make it a delight. The FCT is made up of six (6) Area Councils namely: AMAC, Kuje, Bwari, Gwagwalada, Kwali and Abaji. Each Council is further subdivided into wards headed by Councils.

The methodology employed in this study involved two sources of data - primary and secondary. This paper relies on the use of questionnaire to elicit information from respondents. Disproportionate stratified sampling technique is used to arrive at a sample size of 400 which is drawn from an estimated population of 3,464,123 using the 1992 Isreal determinant sample size. This study made use of secondary data on total live births in the FCT for five years as recorded by the Department of Health Planning Research and Statistics of the Health and Human Services Secretariat under the Federal Capital Territory Administration (FCTA), Abuja. The data on recorded births from the Department of Health Planning Research and Statistics were adopted for the total number of live births that occurred each year in the FCT. In addition, the collated data on registered births in the six (6) Area Councils in the Federal Capital Territory were obtained from the office of the National Population Commission (NPC), who is the only recognized body to register births.

4. Data Presentation and Analysis

This study compared the registered births in each preceding year to ascertain the trends of registration in the FCT. This analysis is based on the data gotten from the National Population Commission and the Department of Health, Planning, Research and Statistics in the Health and Human Services Secretariat under the Federal Capital Territory Administration, Abuja. First, it is important to note that all respondents in this study (387) indicated that they are aware of that births need to be registered, but responses varied with regard to where to do the registration as indicated in Table 1 below.

Table 1: Responses on the Awareness of Birth Registration in the F.C.T

Location of birth registration	Frequency	Percentage
Hospital	125	32
Court	12	3
National Population Commission (NPC)	250	65
Total	387	100

Source: Field Survey, 2021

Table 1 indicates that large percent of the respondents are aware of birth registration in the Federal Capital Territory with an affirmation of 65 percent of the respondents in the study area. This implies that National Population Commission is doing well in create awareness about birth registration in FCT.

Table 2: Source of Information on the need for Birth Registration

Source of knowledge	Frequency	Percentage
National population Commission (NPC)	119	31
Religious Centre	31	8
Family	39	10
Media	13	3
Hospital	185	48
Total	387	100

Source: Field Survey, 2021

Table 2 shows that the majority of respondents (48%) got information on the need to register births from a hospital. Thus, public-awareness campaigns can be doubled in this location with a view to increasing the extent of birth registration.

Table 3: Responses on the Location of where they gave Birth

Place of child birth	Frequency	Percentage
Hospital	289	75
Religious Centre	6	2
Residential home	25	6
Not applicable	67	17
Total	387	100

Source: Field Survey, 2021



Table 3 demonstrates the location where respondents gave birth in the study area. The data established that overwhelming proportion of the respondents with 72 percent of the total respondents gave birth in the Hospital. This implies that hospital is the common location for child birth in FCT

Table 4: Responses on the extent of Birth Registration

Was birth registered with National Population Commission?	Frequency	Percentage
Yes	304	79
No	16	4
Not applicable	67	17
Total	387	100

Source: Field Survey, 2021

Most respondents with children gave birth in a hospital as indicated in Table 3. The possible implication they must have been informed about registration of births in that setting. Table 4 reveals that more than three-quarter of the respondents (79%) had their births registered, an indication that home births are not 'popular,' and is a sign of the utilization of maternal and child health services by families. Though not a significantly impressive number, in Table 4 about 67% of the respondents reported that their births were registered with NPC within the first 50 days after birth.

Table 5: Registered births in the six (6) Area Councils in the F.C.T

Councils	Registered births from the year 2015 to 2020						
	2015	2016	2017	2018	2019	2020	Total
Abaji	7631	6668	69762	4114	4678	468	93321
AMAC	61909	65954	66667	41367	65867	6878	308642
Bwari	33500	30282	27998	17806	25131	2589	137306
Gwagwalada	16780	17823	45635	16909	18560	1965	117672
Kuje	11314	13550	12578	46200	10514	748	94904
Kwali	25356	7874	7228	7471	6776	802	55507
Total	156490	142151	229868	133867	131526	13450	807352

Source: Field Survey, 2021

Table 5 shows the trend of birth registration between 2015 and 2020 in the FCT. In 2016 the registered births reduced with a difference of 14,339 but increased in 2017 by 87,717. The percentage increment was highest in the year 2017 at 61.7%. Explanations for this include the fluctuation in the number of registered births and the number of available registration centers. In 2015, the registration centres in the FCT were 123 but reduced in 2016 from 115 to 112 in 2019 but, increased to 120 centres in the year 2020. However, the year 2020 had the highest percentage decrease. This could be attributed to the COVID-19 pandemic restrictions on movement. The reason for increased birth registration may be attributed to the NPC's collaboration with the National Primary Health Care Development Agency (NPCHDA) during its health schemes like Immunization Plus Days (IPDs), the Midwives Service Scheme (MSS). This cooperation is aimed at integrating birth registration in the Health Delivery System as a means of increasing birth registration coverage. Figure 1 is a graphical representation of data showing that generally most



births in Abuja Municipal Area Council were registered, unlike Kwali Area council that has the least registrations – This may be attributed to awareness and proximity of registration offices to parents.

Registered births in the Six Area Councils in the F.C.T. from the year 2015 to 2020

80000
40000
20000
2015
2016
2017
2018
Ewari G/lada Kuje Kwali

Figure 1. Registered Births in the FCT

Source: Field Survey, 2021

Table 6: Number of Live Births in the Federal Capital Territory (FCT)

	Live births in the Federal Capital Territory, Abuja		
Yea	r Live births		
201	7 33,217		
201	8 35,014		
201	9 33,430		
202	0 34,620		
Total	136,281		

Source: Health Planning, Research and Statistics Department of the Health and Human Services Secretariat, FCTA, Abuja

Finally, the figures in Table 4 represent available data on live births in the FCT. The Department of Health Planning Research and Statistics of the Health and Human Secretariat deployed a platform (District Health Information System) where all health facilities in the six area councils both general and private hospitals report data of birth delivered in their hospitals. However, the births delivered by the Traditional Births Attendants were not captured on the platform. Also, there was no data on live birth in 2015 and 2016. The researchers were unable to get the percentage of live births that were registered because the number of registered births exceeds the number of livebirths which ideally should be the other way round. Thus, it can be concluded that there are likely more births each year that are not aggregated, recorded and reported to be accessed by the public. These findings, therefore, underscore the significance of this study and the need for reliable data.

5. Conclusions and Recommendations

It is crucial for federal and local authorities in Nigeria to take birth registration seriously. Without birth registration, the FCT administration cannot account for the number of children within its



jurisdiction, and as such children affected may not benefit from their fundamental human rights, some of which include access to health care and education. With the introduction of several health care schemes in Nigeria, this is the best time to document children. Schemes include the National Health Insurance Scheme (NHIS) and the National Immunization Coverage Scheme (NICS). Birth Certificates aids documentation during immunization (though no child should be left out if no certificate or evidence of registration is produced). In the FCT evidence of Birth Registration is required by government schools for children. Some social significance of this documentation can be crucial for inheritance purposes and other social benefits that may be introduced. More so, concerning immunization and education in particular, birth registration will certainly assist the FCT administration in budgeting planning and implementation of targeted services for children. Reliable and accurate population data is a mechanism that helps the different sectors of government to make projections and plan towards achieving its goal. To achieve compliance in birth registration, the government should make conscious efforts to see that the citizenry understands what the concept is and the benefits they will enjoy when they subscribe to the process. In addition, it appears that there is no synergy between government agencies in the generation and dissemination of public data. This study therefore concludes that the awareness level on the need for birth registration is high, but compliance levels are not impressive. Given the importance of birth registration and the need to acquire a universal birth registration locally, nationally and internationally, the following recommendations have been put forward:

- i. The Federal Capital Territory Administration should reach out to Traditional Birth Attendants and encourage them (if possible, with any form of incentives) to ensure that births are registered and captured in the database of the FCTA.
- ii. National Population Commission should adopt a more proactive approach in ensuring completeness of birth registration. This should include ongoing publicity and campaigns particularly targeted at parent and all those associated with birth deliveries.
- iii. The National Population Commission should work towards encouraging residents in Kuje, Kwali and Abaji to register the births of their children.
- iv. Finally, there should be massive sensitization on the need or importance to register births, while ensuring that birth registration centers are accessible to all.

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