

**FORMATIVE EVALUATION FOR BIRTHS AND DEATHS
REGISTRATION AT THE COMMUNITY, KILOSA**

**FORMATIVE EVALUATION FOR BIRTHS AND DEATHS
REGISTRATION AT THE COMMUNITY, KILOSA DISTRICT**

By

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A dissertation Submitted in Partial/fulfillment of the requirement for the Degree of
Master of Health Monitoring and Evaluation.

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CERTIFICATION

We, the undersigned, certify that we have read and hereby recommend for acceptance by the Mzumbe University, an evaluation entitled “**FORMATIVE EVALUATION FOR BIRTHS AND DEATHS REGISTRATION AT THE COMMUNITY, KILOSA DISTRICT**”, in partial fulfillment of the requirements for award of the degree of Masters of Health Monitoring and Evaluation of Mzumbe University.

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DEDICATION

This work is dedicated to my mother, Mwajuma bint Omari. At the age of ninety four years she still have intact memory and courage to guide and provide moral support.

ABBREVIATIONS

CO	-	Clinical Officer
DAS	-	District Administrative Officer
DED	-	District Executive Director
FGD	-	Focus Group Discussion
MoHSW	-	Ministry of Health and Social Welfare
NBS	-	National Bureau of statistics
NIDA	-	National Identification Authority
NIMR	-	National Institute for Medical Research
RITA	-	Registration Insolvency Trusteeship Agency
SMS	-	Short Message Service
UN	-	United Nations
UNICEF	-	United Nations Children's Fund
VHW	-	Village health workers
WHO	-	World Health Organization
VEO	-	Village Executive Officer

ABSTRACT

Background: Registration of births and deaths is vital for the proper planning and development of the country but the global and local records show that there is more than 40 million births and deaths that goes unrecorded worldwide.

Methodology: Formative evaluation using qualitative research methods was applied to try to establish why the registration is low in Tanzania, the country with centralized government structure and that enjoyed peace for most of the time.

Eleven key informant interviews (n=11) and three focus group discussions (n=28) were conducted in three villages that were purposively sampled.

Findings: People with birth certificates were very few regardless of being provided with notification and the reason for not having certificates ranged from low level of knowledge on importance, distance to the registration office and costs associated with registration.

Death registration was found to be nonexistent at the community and few registered were those affiliated to legal/police issues and of deceased who left wealth.

Overall accountability for the Village Executive Officers (VEO) to the Registration Insolvency Trusteeship Agency (RITA) office was totally missing as the evaluation villages had not registered any births or deaths for years and no one asked or made a follow up.

Conclusion: The overall awareness on the importance of registration of births and deaths was low not only to the community but even to those assigned to conduct this work. The state agency (RITA) needs to conduct continuous sensitization especially at the communities and bring the services closer to people. The government and other stakeholders are missing important data for planning.

TABLE OF CONTENTS

CERTIFICATION	i
DECLARATION AND COPYRIGHT	ii
ACKNOWLEDGEMENTS	iii
DEDICATION	iv
ABBREVIATIONS	v
ABSTRACT	vi
TABLE OF CONTENTS.....	vii
LIST OF TABLES	x
LIST OF FIGURES	xi
CHAPTER ONE	1
PROBLEM SETTING.....	1
1.1: Introduction.....	1
1.2: Description of Registration Insolvency Trusteeship Agency (RITA).....	1
1.3: Major strategies.....	2
1.4: Program activities and resources	3
1.5: Logic model	4
1.6. Stakeholder analysis.....	5
1.7: Statement of the problem	8
1.8: Evaluation question.....	9
1.9: Objectives	9
1.9.1: General objective	9
1.9.2:Specific objectives	9
1.10: Scope of evaluation.....	10
1.11: Rationale/justification for this evaluation	10
CHAPTER TWO	12
LITERATURE REVIEW	12
2.1: Introduction.....	12
2.2: Global situation on civil registration.....	12
2.3: Regional context on civil registration	12

2.4: Tanzania situation on civil registration.....	13
2.5: Challenges with civil registration	14
2.6 Conceptual framework.....	14
CHAPTER THREE	16
EVALUATION METHODOLOGY	16
3.1. Introduction.....	16
3.2. Evaluation approach.....	16
3.3: Evaluation design.....	16
3.4: Evaluation Period.....	16
3.5: Evaluation area	17
3.6: Evaluation population	20
3.7:Unit of analysis	20
3.8:Variables and their measurement.....	20
3.9: Sample size and sampling techniques.....	21
3.10:Types and sources of data	21
3.11: Data Collection methods.....	21
3.11.1:Focus group discussions	22
3.11.2:Interviews with key informants	22
3.12: Data Management and Analysis	23
3.13: Data analysis.....	23
3.14: Ethical Issues	24
CHAPTER FOUR.....	24
PRESENTATION OF FINDINGS	25
4.1: Introduction.....	25
4.2: Demographic information of the participants.	25
4.3: The trend of vital events registration (Births and deaths)	26
4.4: Public awareness on the roles of RITA on registration of vital events (births and deaths) ..	28
4.5: The presence and feasibility of using modern technology on births and deaths registration	31
4.6: Challenges and way of improving of births and deaths registration at the community.	31
4.6.1: Challenges linked to registration of births and deaths	31

4.6.2: Ways of improving the registration of births and deaths at the community	34
CHAPTER FIVE	36
DISCUSSION OF THE FINDINGS.....	36
5.1:Introduction.....	36
5.2: The trend of vital events registration (births and deaths).....	36
5.3: Public awareness on roles of RITA on registration of vital events (births and deaths)	37
5.4: The presence and feasibility of using modern technology on births and deaths registration	37
5.5: Challenges and way of improving registration of births and deaths at the community.	38
5.6 :Evaluation dissemination plan	39
CHAPTER SIX.....	40
SUMMARY, CONCLUSIONS AND IMPLICATIONS	40
6.1: Introduction.....	40
6.2: Summary	40
6.3:Conclusion	41
6.4: Policy implications	41
6.5:Programmatic implication and use of findings for strategic planning	42
6.6:Limitation.....	42
6.7: Areas for further research/evaluation.....	42
REFERENCES.....	44
APPENDICES	46
Appendix 1.Focus group discussion guideline for community members	46
Appendix 2: Interview guideline for key informant (Village leaders/Health facilities personnel/village health workers	48
Appendix: 3 Interview guidelines for Key informants (RITA staff)	49

LIST OF TABLES

Table 1.1: Stakeholder analysis	7
Table 3.1: Evaluation village profile.....	20
Table 4.1: Focus group participants.....	25
Table 4.2: Key informant interview participants	26
Table 4.3: Notifications for births and deaths for year 2015	28
Table 4.4: Death notification from the communities	28

LIST OF FIGURES

Figure 1.1: Logic model.....	5
Figure 2.1: Conceptual framework for RITA on births and deaths registration	15
Figure 3.1 Evaluation area	18
Figure 4.1 : Birth certificates issued in 2015	27

CHAPTER ONE

PROBLEM SETTING

1.1: Introduction

This chapter gives an overview of the Agency being evaluated and on the already known problem of under registration of births and deaths. The evaluation question, objectives and rationale that justify carrying out this formative evaluation are all discussed in this chapter.

1.2: Description of Registration Insolvency Trusteeship Agency (RITA)

Civil registration is under the Ministry of Justice and Constitution and the responsible agency is Registration Insolvency Trusteeship Agency (RITA) with its headquarters in Dar es Salaam.

The mission of RITA is on ensuring justice through provision of effective and efficient management of information on key life events (births, deaths, and marriages), insolvency and trusteeship with expectation that this will contribute to the national development.

By being the sole responsible organ for these information RITA gives room for justice to take its course especially on insolvency and trusteeship (RITA, 2011). The main objectives of RITA are seven (RITA, 2011) but only two are relevant to this particular evaluation and these are:

- i. Information of key life events properly managed.
- ii. Public awareness on RITA's roles, functions and services improved.

Key life events that are dealt by RITA include registration of births, deaths, marriages and divorces but this evaluation focused mainly on births and deaths only.

The importance of collecting data on vital events is high as there are other government organization that depends on these data for fulfillment of their roles. National Identification Authority (NIDA) depends on data from RITA for age proofing of the

citizen, immigration department on validation of passport. Others are various government ministries that depends on data from RITA to assist on evaluating targets set such as millennium development goals. Even the National Electoral Commission (NEC) that becomes more active before and during elections depends on these data for verification of the would be voters (RITA, 2011).

1.3: Major strategies

Major strategies set by RITA are in accordance with the objectives of the Agency. On the first objective that aims on proper management of vital events (births and deaths in this particular evaluation) the following strategies are in place:

- i. Work with NIDA to validate the dates and places of births for adults;
- ii. Introduction of modern technology (ICT based technology) to manage the capturing and management Information on Key Life Events;
- iii. Work with Ministry of Education and Vocational Training, to register between 6 and 18 years old; and
- iv. Introduction of New-Births Registration System.

On the first objective the evaluation was on the feasibility of introducing modern technology on capturing and management of life key events (births and deaths) and on the introduction of new births registration system.

On the second objective that looks on making sure that the public is aware on RITA's roles and functions the organization decided to put in place the following strategies.

- i. Implement and monitor client service charter;
- ii. Develop and implement Information, Education and Communication (IEC) Strategy;
- iii. Sensitize customers and stakeholders on procedures, roles and functions of RITA; and
- iv. Improve skills of employees on customer services.

All the four strategies of this objective were evaluated and the interviews and focus group discussions yielded enough information that showed the status quo for the above strategies.

1.4: Program activities and resources

Through RITA system there are three stages involved in civil registration (births and deaths), these are notification, registration and certification. Notification occurs at the community or health facility and the notification card is supposed to be brought to the RITA office where registration and certification can be processed.

Administratively the lowest level of RITA is at the district headquarters. This office is the one that supplies notification books to the village executive officers and health facilities for recording of births and deaths that occur in their locality. The notification book for births carry the same code B1 for both health facility deliveries and those occurring at home.

For deaths, the notification book for health facility is D1 and it is used to notify all deaths occurring at the health facilities. Notification book coded D2 is used to record deaths occurring at the communities and usually it is the responsibility of Village Executive Officer (VEO) and in some places the Ward Executive Officers (WEO) (<http://www.rita.go.tz>). Another process for recording deaths and births is for the ones that occurred more than 30 days; these are recorded on separate forms and usually it is done at the RITA district office.

Ideally the health facilities are supposed to be the primary point for notification of both births and deaths but the real situation is that almost 48% of births occurs outside the facilities (Kruk et al, 2009). In occurrence of deaths at the rural community the bereaved family is supposed to report to the village executive officer where the burial permit will be provided. Within 30 days the family members are supposed to register the deaths with the district registrar. In most of the areas with exception of urban areas this was not happening and most deaths goes unrecorded (RITA, 2011). At the end of the month

RITA district office compile a report through notifications provided at the health facilities and villages. The reports from the facilities and villages are accompanied with duplicates of the notification.

There had been efforts to improve registration of births and the United Nations Children's Fund (UNICEF) is in forefront on this (Henriksen, 2014). The increasing requirement for births certificates as in joining schools, university and as a pre requisite for employment has significantly enhanced the births registration though this needs scientific approach to come out with reliable data.

RITA on its side had decided to put emphasis on making sure that number of children with births certificates increases. There is pilot project being carried out at Mbeya and Mwanza region where a hand written births certificates are issued by village executive officers and one can only go to the district if he/she wants a computer issued certificate (<http://www.rita.go.tz>).

On funding of the agency, RITA strategic plan (2011-2016) listed three sources of funds for the Agency's operations and these are:

- i. Government subvention;
- ii. Internally generated funds from fees for various services being offered; and
- iii. The funds from development partners.

There are challenges with these sources of funds as most the time they are not enough and some of the development partners do not consider the priorities of RITA.

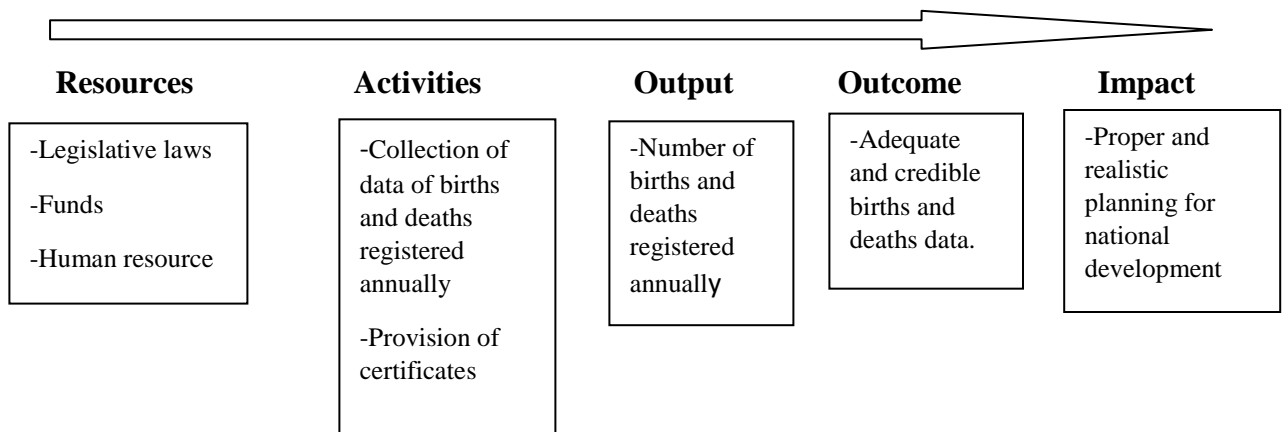
On human resources, the Agency had 162 staff against 199 as per establishment creating a deficit of 37 staff of different cadres (RITA, 2011).

1.5: Logic model

Logical model is a visual and systematic way to present the relationship between the intervention and effects including needed resources to make the programme operational, planned activities and changes or effects that the program intends to achieve. Therefore the logic model is the basis for convincing story of the program's expected performance.

Registration Insolvency Trusteeship Agency is mandated to perform various activities including civil registration (birth, death, marriages, and divorces), insolvency (during bankruptcy, liquidation of companies) to being custodian of wills. The logic model below took into account the main aim of this evaluation i.e. registration of births and deaths. It was assumed that with availability of the listed resources the activities could be performed and desired outcome and impact be observed in the country.

Figure 1.1: Logic model



Source: Evaluator, 2016.

1.6. Stakeholder analysis

Stakeholder analysis is defined as a process of systematically gathering and analyzing qualitative information to determine whose interest should be taken into account when developing or implementing a programme (Schmeer,K, 2013, pp. 2–1). This means that all those who have an impact or are affected by the program are stakeholder.

Importance of stakeholder analysis is increasing as not only ministries but even non-profit organization apply this process on making sure that their programmes become a successful one through identifying and assessing the power, influence and interest on the programme (Bryson,J., 2004).

There were various stakeholders in vital events registration working together with RITA at the national level. The affiliation of identified stakeholder at the National level with

the district of evaluation was not found. The following stakeholders were listed in the website of RITA (<http://www.rita.go.tz>) but no more information was provided,

- National Identification Agency (NIDA)
- E-Government agency
- United Nations Children's Fund (UNICEF)
- United Nations High Commission for Refugees (UNHCR)
- National Electoral Commission
- Immigration Department
- Tanzania Revenue Authority
- World Bank

In this evaluation the stakeholder were classified as, primary, secondary and external stakeholders. Primary stakeholders i.e. those who will ultimately benefit from improvement of RITA performance included individuals, Rita staffs, village leaders and health facilities.

Government ministries were considered as secondary stakeholders as they were affected positively or negatively. When RITA performance is excellent the ministries would be able to plan and budget realistically and the opposite is true when the performance of the agency is below standard.

International organization such as World Bank, International Monetary Fund and World Health Organization were all considered as external stakeholders as they had interest on the outcome of civil registration. These international organizations such as International monetary agencies (IMF/WB) will invest or lend money to countries but these will be of beneficial if the data on civil registration especially death and birth are accurate.

For an individual birth registration legalizes the citizenship and allows the person to enjoy the benefits of being a citizen of Tanzania. It also allows for the age of the person to be known and this can be of use in school enrollment, legal issues and even retirement.

Death certificates provide smooth process of inheritance of property. During the loss of the member of the family the legal process can only take place when there is a confirmation of death. For the country, mortality data are of use on policy formulation, on creating indicators and also during monitoring and evaluation of various interventions ((National Bureau of Statistics, et al)

As the level of stakeholder analysis was a local one the stakeholders available at the district were taken on board in this formative evaluation for RITA and these included individuals, RITA and other government and village/ward officials.

The matrix below shows the grouped stakeholders for civil events registration and the three criteria of their role in the program and evaluation, means of communication and level of interest in the programme are used to show their impact on civil registration and how they can influence changes.

Table 1.1: Stakeholder analysis

	STAKEHOLDER	ROLE IN THE PROGRAM	ROLE IN EVALUATION	MEANS OF COMMUNICATION	LEVEL OF INTEREST
1.	Individual	Implementation	Interviewee	Face to face interview	Low
2.	RITA staffs	Implementation	Interview/review of data	Face to face interview/Review of data	High
3.	Health facilities staff	Implementation	Interviewee/review of data	Face to face interview	High
4.	Ward/village leaders	Implementation	Interviewee/review of data	Face to face interview	Low

Source: Evaluator, 2016

1.7: Statement of the problem

Information on regard to health related events are of vital importance in providing evidence based decision making. World Health Organization reports that there are almost 40 million deaths/births that go unrecorded worldwide, with low income countries who are already overwhelmed with health problems being mostly affected, Tanzania being one of them (June, 2010).

The importance of registering births and deaths ranges according to the country. Births certificate is a useful confirmation for citizenship and is used as legal document for proving the identity of the person (Mahapatra,P, 2007) and in that case can be used during passport obtaining process, joining school and controlling in-migration. It can also be used to curb human trafficking and child labour.

The level of mortality (deaths records) reflects the country's conditions of morbidity and related factors including prevalence of diseases, environmental and nutritional factors as well as the functioning of the health care systems. Maternal and child mortality are two important parameters on assessing the wellbeing of the population in the country. .

Deaths registration and certification is crucial in solving legal disputes such as inheritance of properties and insurance claims for a deceased member of the insurance company (Makannah,T, 1981).

Current information on mortality in Tanzania heavily depends on indices technique due to lack of robust vital events registration that could have provided accurate data (National Bureau of Statistics et al, 2015).

The government structure in Tanzania is one that goes down to the grassroots and with decentralization the communities are all represented in government process (Njunwa, M, 2005). The lowest level of administration is the hamlet and this is under the elected hamlet leader. Hamlet leaders with other members are the ones who make village government. Several villages make a ward and the ward is represented by an elected

councilor who becomes a member of district council, a mandated organ to oversee all development activities in the respective district.

Births and deaths records are of importance during planning and execution of health programmes. Data on these two events can be used to evaluate the achievements obtained from health interventions or introduction of a new programmes. When births and deaths records are collected accurately it gives a clear picture of population trend in the country

Lack of credible data including those from civil events (births and deaths) have consequences such as hampering effective policy making and delaying development (Setel, W.et al, 2007).

1.8: Evaluation question

The main aim of this formative evaluation was to answer the following question:

Why civil registration (births and deaths) through Registration Insolvency Trusteeship Agency (RITA) is still low regardless of availability of proper administrative organs and laws?

1.9: Objectives

1.9.1: General objective

The main objective of this activity was to evaluate registration of births and deaths at Kilosa district.

1.9.2: Specific objectives

- i. To determine the trend of vital events registration (births and deaths) at Kilosa district;
- ii. To examine public awareness on roles of RITA on registration of vital events (births and deaths);
- iii. To investigate the presence and feasibility of using modern technology on births and deaths registration for Kilosa district; and

- iv. To explore challenges and ways of improving the registration of births and deaths at the community.

1.10: Scope of evaluation

The scope of this evaluation was to have insight on activities being carried by Registration Insolvency Trusteeship Agency (RITA) at the community level. The evaluation looked on how important data on births and deaths from the community are picked and recorded. It aimed on knowing behaviors, attitudes and other social factors for having low records on the specified civil events by using social science research methods.

Kilosa district was purposively selected due to conveniences to the evaluator and by being one of the oldest districts in Tanzania. The district was established during British colonial rule and this gave it more upper hand in comparison to new districts. It was assumed that being an old district most of the Government machinery and system were in place and working effectively.

1.11: Rationale/justification for this evaluation

This formative evaluation was conducted so as to assess the situation at the ground, identify gaps and provide recommendations for actions to be taken to address the observed shortcomings in order to enable RITA record all data of importance from the community.

The results from this evaluation provide a possibility of taking active civil registration to the grass root through identifying barriers and other associated factors.

There are very few researches and evaluation done on registration of births and deaths in Tanzania, available information showed that less than 30% of population were aware of RITA's role in civil event registration(RITA, 2011).This evaluation report provides an insight on the possibility of taking wider area and population for the consequent researches/evaluations.

Another important rationale for conduction of this evaluation was that it will lead to an award of Master's degree on Health Monitoring and evaluation (MSc HME) to the evaluator.

CHAPTER TWO

LITERATURE REVIEW

2.1: Introduction

This section gives an overview on civil registrations (births and deaths) globally, at region and on the country level. It also provides some insight on what is already known, some of the identified challenges and efforts being carried out at various levels on dealing with civil registration. The last part provides a conceptual framework on what is considered as the right path for effective civil registration in the country.

2.2: Global situation on civil registration.

Gaps on collection of vital statistics are a well-known phenomenon and some studies had been conducted on this. While Philip (2007) mention about almost 50 million births being not registered worldwide and the cause of deaths not recorded for most of deaths that occur at the third world, the international organization on health, WHO, mentions about 40 million births and deaths that are not registered anywhere (World Health Organization, n.d.)

World Health Organization considers the country to have a complete civil registration when that country was capable of registering at least 90% of births and deaths occurring in that particular country. Up to 2007 it was Europe only that was able to be considered as having a complete civil registration on births and deaths. For the period ranging from 1997-2004 it was 92% for births and 86% for deaths (Mahapatra, 2007).

2.3: Regional context on civil registration

On regarding to African continent beside South Africa, north African countries and few small countries of west Africa most of the sub Saharan African countries are lagging behind on civil registration though there was a marked upward trend on births registration (United Nations, statistics division,2014).

Historically civil registration was compulsory to whites during colonial era and inclusion of natives came early in French ruled countries than on British colonies and this was the

reason for French speaking countries such as Algeria, Madagascar, Tunisia, Reunion and Sao Tome to perform better (Makannah, T, 1981).

2.4: Tanzania situation on civil registration

The evolving of laws concerned with civil registration and the creation of an independent organ on dealing with civil registration signifies the importance of the data and the determination of Tanzanian government on making improvements.

Civil registration started during colonial German era and was mandatory for whites who were living in Tanganyika. The British Government enacted a law in 1920 that had been reviewed several times with the latest one being in 2002 that became “birth and death registration act 108 of 2002”. (“Birth and death registration act,” n.d.)

One of the study conducted at Rufiji district showed that only 29% and 2.1% of births and deaths respectively are reported (Kabadi,G,et al, 2013).The district where this study was done was involved in demographic sentinel survey and the study was on comparing the civil registration using sentinel survey system and the introduction of information and technology system by using mobile phones. Its main aim was to look on the impact of introducing short message services (SMS) in notification and registration of civil event (births and deaths). In another pilot study carried out by UNICEF in one of the urban districts the registration of births rose from 8.9% to 30.34%,this signifies that the registration was still low countrywide (Henriksen,B, 2014).

The national mortality rate was 9 per 1000 persons and this was collected through survey and census although the credibility was in doubt due to factors such as over reporting and unwillingness to provide information on deaths by family members ((National Bureau of Statistics et al, 2015).

Failure of having accurate and up to date data for civil events necessitate the government to incur extra ordinary expenses for conducting population census at every tenth year (RITA, 2011)

2.5: Challenges with civil registration

Civil registration in particular births and deaths do have benefits as mentioned in chapter one, it also carries some risks. Information on civil registration can be used as a guide to exterminate other people like what happened during second world war where millions of Jews were tortured and killed by the NAZI regime (Setel, W.et al, 2007)

The paper “Innovations in monitoring vital events” (Kabadi et al, 2013) provided some information on the reasons behind failure to notification and registration of these vital events. Some of the mentioned reasons were financial constraints, no obvious reason, unwilling of the household and transport issues.

While writing for Economic Commission for Africa, Toma narrated the challenges that are facing the civil registration in Africa and listed the five common one as ((Makannah,T, 1981)

- i. Allocation of insufficient funds for the activities;
- ii. Lack of motivation on the part of public;
- iii. Problems connected with officials for civil registration;
- iv. Administrative problems; and
- v. Problems of the rural areas due long neglect from the central government

From all the explanations in this section it was vivid that registration of vital events (births and deaths) was still low in the world but more in third world, Tanzania inclusive. It was also clear that there had been various efforts on establishing the cause of the current situation. Though Makannah J, (1981) mentioned on five factors that could probably be a cause of low registration, thirty five years had already elapsed and the current situation needs to be re-assessed.

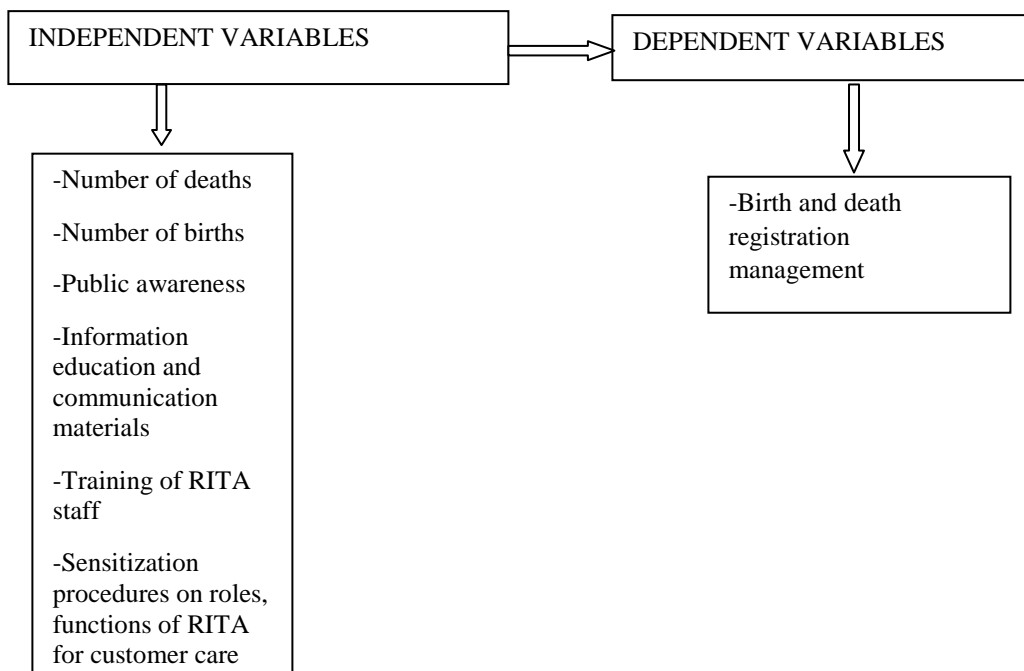
2:6 Conceptual framework

Conceptual framework is a tool used to show how the programme was supposed to work and delivers the expected results. It was used in wide range of disciplines including traditional research, social sciences and operational researches and can be used in

planning stages to assess and potentially influence factors that may enhance research (Görgens, 2009, p. 399).

In this evaluation the management of data on births and deaths was our dependent variable that can be influenced by other factors. All factors that were perceived as having ability to alter the births and deaths data had been categorized as independent variables and some of them are as shown on figure 2.1 below.

Figure 2.1: Conceptual framework for RITA on births and deaths registration



Source: Evaluator, 2016

CHAPTER THREE

EVALUATION METHODOLOGY

3.1. Introduction

Chapter three describes in detail the whole process that was used in this evaluation from approach, information on the district involved, the villages and how the data were collected and managed.

3.2. Evaluation approach

Formative evaluation using qualitative approach was applied in conduction of this evaluation due its ability on assessing attitudes, opinions and behaviors(Kothari,C, 2004, p. 5).Use of qualitative approach enabled collection of information directly from those involved or affected and this valuable information can be used during designing or planning for improvement.

3.3: Evaluation design

Case study design was used on evaluating registration of births and deaths at the community in which there were key informant interviews and focus group discussions.

Creswel (2007) defined a case study as a qualitative approach in which the investigator explores a bounded case system (a case) or multi bounded systems (cases) over time through detailed in depth data collection involving multiple sources of information and report a case description and case based themes (Creswel,J, 2007). Advantages of case study design are that it stimulate new researches, contradict to already established theory and in that case invite for more research/evaluation.

In this particular evaluation, registration of births and deaths at Kilosa district was our case under evaluation.

3.4: Evaluation Period

Evaluation of civil registration for Kilosa district was conducted in April 2016 and took almost three weeks. The introductory letter from the University was submitted to

Regional Administrative Secretary, Morogoro region who introduced the evaluator to the Kilosa district authority.

At the district level RITA office is under the District Administrative Secretary (DAS) and he was the one who provided two letters of introduction, one to the RITA office and the second one to District Executive Director. A letter to the DED was important as all the village leaders and health facilities (potential evaluation participants) are under the local government authority with the DED being the chief executive.

3.5: Evaluation area

Kilosa District council is one of the nine councils of Morogoro Region. The other ones are Ifakara, Malinyi, Mvomero, Ulanga, Gairo, Morogoro and Morogoro municipal council. It is located in East Central Tanzania at an average distance of 300km west of Dar es Salaam and bounded by latitude 5°55' and 7°53' south and Longitude 36°30' and 37°30' East.

Kilosa district borders Mvomero to the east, Kilombero and Kilolo districts to the south, Kiteto and Kilindi districts to the north, Gairo and Mpwapwa district to the west.

The district occupies an area of 1,426,540 hectares, with the length of 180km (North to south) and the width of 80km West to East.

The population of Kilosa is 438,175, male being 218,378 and 219,797 females. Total households in the district were 103,509 (NBS, 2012 census)

Administratively Kilosa is divided into nine divisions with 37 wards, 164 registered villages and 1010 hamlets. The district has two electoral constituencies namely, Kilosa and Mikumi. Of recently the Council has established two minor township authorities namely Kilosa and Mikumi.

The villages involved in this evaluation were Madoto, Malangali and Gongoni. The population of Madoto was 1654 (2012 census) and it is situated 25kilometers from the district headquarters. There is one primary school and it does not have a health facility. The nearest health facility is Kimamba health centre that is four kilometers from the village.

Residents of Madoto village are multi ethnic due to the village being surrounded by once a sisal plantations that attracted people from all sides of the country.

Malangali village is on the lowlands area with paddy farming as the main activity. The distance to district headquarters is around 10 kilometres and the area is frequently faced with floods from Mkondoa River. The village is served by Muungano dispensary and during heavy rains sometimes it is cut off from other parts.

The village of Gongoni is almost 35 kilometers from the Kilosa town and was populated with 4560 (2012 census) inhabitants most of them being farmers. The residents got health services from Batini dispensary situated three Kilometres from the village. The villages have a primary school.

On telecommunication all the three villages involved in the evaluation were covered with reliable mobile phone connection from the main four mobile service provider that are VODACOM, AIRTEL, TIGO and the recent one HALOTEL. The villages of Gongoni and Madoto access a 3G internet connection through HALOTEL.

The profile of the villages involved in the evaluation is illustrated in table 3.1 below and the information on individual villages were provided by the respective village executive officers.

Table 3.1: Evaluation village profile

Ward	Village	Population	Distance to H/F	Distance to district headquarter
Madoto	Madoto	1654	5	25
Mabwrebwere	Malangali	4500	5	12
Rudewa	Gongoni	4560	4	30

Source: Village executive officers, 2016

3.6: Evaluation population

These were residents of the three villages involved in this evaluation. The villages are Malangali, Madoto and Gongoni. Also the civil servants within the district who were perceived as having reasonable information on regard to the evaluation being conducted.

3.7:Unit of analysis

In qualitative method there are five approaches named ethnographic, case study, narrative, phenomenology and grounded theory. Unit of analysis differs with the approach being used (Creswel,J, 2007, p. 143). This evaluation used case study approach in which the unit of analysis are the individuals who participated in interviews and discussions held.

3.8:Variables and their measurement

Different authors have defined and categorized variables in different ways. Rwegoshora (2006) defined variable as something that varies.

In this evaluation the independent variables were all those factors that altered the records of births and deaths at RITA registers (dependent variable).Some of the assumed independent variables includes,

- i. Number of births
- ii. Number of deaths
- iii. Public awareness on importance of vital event registration (birth and death)
- iv. Information, education and communication materials
- v. Training of RITA staffs
- vi. Sensitization procedures on roles and functions of RITA for customer

When the number of records increased consequently the overall registration of these vital event will also increase. Any alteration on the above independent variables had impact on overall registration of births and deaths at the communities.

Besides the first and second independent variables that was measured as discrete variables the remaining others took measurement depending on the objectives or evaluation question.

3.9: Sample size and sampling techniques

This evaluation used qualitative approach and in that case there was no sample size calculated but through non probability sampling three villages were involved.

Non probability sampling was applied as it allowed for selection of sites and participants that best helps the researcher understand the problem and get information for the evaluation question (Creswel,J, 2007, p. 185).The wards and villages that participated in the evaluation were easily reachable and the local leaders were ready to cooperate.

3.10:Types and sources of data

There were two types of data used in this evaluation and these are primary and secondary data. Primary data were obtained from the interviews and discussion and were all collected by the evaluator himself. Secondary data were retrieved from the Kilosa RITA office from the monthly records for the year 2015.

3.11: Data Collection methods

The approach for data collection at the villages was to interview the village executive officer first, then the village health worker before conduction of focus group discussion in the afternoon hours. Health facility personnel were interviewed differently and the last but not least in priority were RITA staff and the District Administrative secretary

Secondary data were monthly reports for the year 2015 and the aggregation was done by the evaluator and these were used in this evaluation on showing the trend of registration and certificates issued.

3.11.1:Focus group discussions

Focus group discussions are an approach that brings together people who can share ideas without many barriers. It is considered as a social gathering where through interaction respondents attitudes, feelings, experiences and reaction can be more feasible comparing to other methods. (Rwegoshora,M, 2006, p. 179).

As the evaluation was about civil registration, its current situation and factors that may influence its success/failure in communities, focus group discussion participants were people with knowledge of the culture and beliefs of the community and in this case mature and responsible natives and those perceived as having experience on conditions that necessitate registrations (births and deaths).

The village health workers for each participating village were the ones who organized the FGD after being given the criteria for selecting participants that included residence, having children and some experience on bereavement.

Each focus group was attended by an average of nine people although the invitation was for twelve people and there was no reason given for the no show. One session took an average of one hour duration. Although village health workers assisted on conducting FGD but they did not take active participation during the discussions as they were already interviewed and if allowed they could have influenced the discussion.

3.11.2:Interviews with key informants

Key informant are defined as participants with whom the researcher begins with in data collection as they are believed that they are well informed, are accessible and they can provide a lead on subject under study/evaluation (Creswel,J, 2007, p. 243).For this evaluation the identified key informants were all those affiliated with registration of births and deaths as one of their duties. At the district and local levels these were employees in RITA office, the District administrative office, Village executive officers, health facility personnel and the village health workers.

Appointment for interviews were done physically by visiting the village/office and interviews conducted at the convenient time of the interviewee. The intention was to interview two village health worker for each village but the participating villages had only one active VHW.

Political leaders such as Village Chairpersons and Ward Councilors were not included after being found that they are not active participants of births and deaths registration and it was assumed that the FGD with participants having wide experience on births and deaths can yield significant information.

3.12: Data Management and Analysis

Tecno mobile smartphone type Y6 was used to record all the interviews and focus group discussion proceedings. At the end of the working day the audio clips were transferred to the personal computer and a backup was also made on the flash disc.

Using the personal computer the verbatim transcription of individual interviews was the first to be done in Kiswahili followed with the focus group discussions. In a process of cleaning the data for very few sound/word that was not clearly audible the evaluator sought the second opinion while using the speakers of the PC and also earphone.

Literal translation from Kiswahili to English was done by the evaluator and care was taken to maintain the meaning.

3.13: Data analysis

Different authors propose different strategies on analyzing data from qualitative studies and for this particular evaluation content data analysis was used.

Content qualitative analysis was preferred as it allows the evaluator to read and re read the transcript from interview and allows the patterns and themes to emerge. By using content analysis the unanticipated themes are given room to emerge from the data and no undue weight was given to pre conceived themes (Trace,C, 2001)

The collected information was uploaded in the software produced by Atlas ti, GmbH, Berlin. The approach advocated by Creswel (2007) was applied whereby there was reading and re reading of the collected information and getting senses out of it. Important segments were assigned codes and these codes were reduced into themes or patterns (Creswel,J, 2007, p. 151) while being guided by the evaluation question and objectives of the evaluation. There were few pre-determined codes but the majority were created while reading the texts in both focus group discussions and interviewees.

Illustrative approach was used whereby all the important identified pattern/themes were supported by insertion of the quotes from participants.

Beside creation of tables the secondary data obtained from RITA records at Kilosa were not subjected to any statistical manipulation as this was an evaluation that used qualitative research approach.

3.14: Ethical Issues

For focus group discussions the collective consent was sought verbally and the participants listed and signed against their names.

The issue of non-payment for participation was discussed before commencement of the discussion and there was no one who withdrew. Refreshment that was a one bottle of carbonated soft drinks was given to each participants at the mid of the discussion.

All individual interviews were done after signing the consent form. The evaluator read the consent form and invited questions for clarification and provided some enough time for the interviewee to go through the consent on his/her own before signing.

The part that seeks permission for sound recording was an obstacle for the RITA staff and she agreed to participate after seeking consultation from RITA Headquarters in Dar es Salaam and taking copies of university identity card and evaluator's employment card.

CHAPTER FOUR

PRESENTATION OF FINDINGS

4.1: Introduction

This evaluation was conducted using qualitative method whereas interviews and discussion were carried with sample from study population. Content data analysis used enabled the evaluator to have a pattern of useful information that will be presented in detail in this chapter.

Information from this evaluation gave an insight on why registration of vital events (births and deaths) was still low especially at the community levels. The evaluation question, main objectives and specific objectives set in chapter one were used as guide on developing guidelines for data collection.

4.2: Demographic information of the participants.

The participants for focus group discussions were grown up resident with age range from 27-58years and all of them had experience with child bearing and bereavement of close relatives. Among the FGD participants males were 11 and females 17 and participation of those who are culturally seen as not able to participate actively due to presence of one of them was discouraged (e.g. Husband and wife, mother and son).Table 4.1 below shows the FGD participants as per their respective villages.

Table 4.1: Focus group participants

Village	N	Male	Female
Madoto	10	6	4
Gongoni	9	3	6
Malangali	9	4	5
Total	28	13	15

Source: evaluator, 2016

Key informants were 11 and among them 7 were males while 4 were females as shown on table 4.2 below. The age of participants ranged from 27 to 51 years with different education backgrounds.

Table 4.2: Key informant interview participants

Institution/cadre	N	Male	Female
RITA Office	1	-	1
DAS office	1	1	-
Rudewa dispensary	1	1	-
Kimamba Health Centre	1	-	1
Muongano dispensary	1	-	1
VEO	3	3	-
VHW	3	2	1
Total	11	7	4

Source: evaluator, 2016

4.3: The trend of vital events registration (Births and deaths)

Civil events registration (births and deaths) was still low at Kilosa as in many parts of Tanzania. The high number of notification that was not followed by registration signifies the magnitude of the problem.

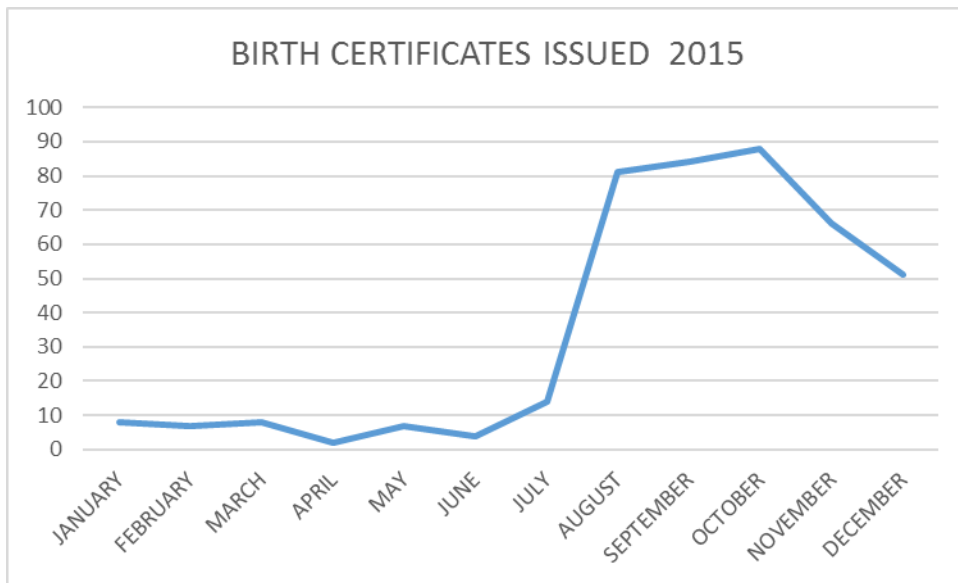
The assumed low level of registration was clearly confirmed with registration data for the year 2015 where the overall births notification was 4927 and deaths were 859. Most of the notifications were from the health facilities in both births and deaths.

While the crude death rate for the country stands at 9/1000 persons (National Bureau of Statistics et al, 2015) the deaths that were recorded by RITA were 859, almost quarter of what was supposed to be registered. In the same group only 38 deaths were recorded at the community using form D2 (The one used by village executive officer) as displayed on table 4.4.

General trend of certificates issued showed that it was only very few people who came for certificates. In 2015 the RITA district office issued a total of 420 and 68 births and deaths certificates respectively. The attitude of looking for certificates as a consequence of external pressure was difficult to validate but the months that showed higher number

of certificates issued coincide with the months of preparation and opening of higher learning institutes academic year (July-December) as displayed on figure 4.1.

Figure 4.1 : Birth certificates issued in 2015



Source- RITA office Kilosa

This low trend is also mentioned by the District Administrative Secretary who is a signatory on civil events certificates issued at the district. He had this to say “*What I can say is that the registration is very low because RITA themselves have not done enough sensitization*”

The low registration was vivid from the response given by RITA staff when asked on the factors that motivated people to register, “*What really motivates people to register is events. When the parent is asked about birth certificates during school enrolment and when the child joins higher education...*”. This clearly shows that there was no uniform continuity on registration as it depends on other demands.

Table 4.3: Notifications for births and deaths for year 2015

MONTH	BIRTH	DEATH
JANUARY	169	15
FEBRUARY	392	50
MARCH	283	55
APRIL	996	186
MAY	777	30
JUNE	237	58
JULY	1017	153
AUGUST	381	158
SEPTEMBER	89	18
OCTOBER	171	31
NOVEMBER	54	39
DECEMBER	358	66
Total	4927	859

Source: Evaluator, 2016

Table 4.4: Death notification from the communities

Month	Death from D2
JANUARY	2
FEBRUARY	2
MARCH	0
APRIL	0
MAY	3
JUNE	3
JULY	11
AUGUST	5
SEPTEMBER	5
OCTOBER	0
NOVEMBER	2
DECEMBER	5
TOTAL	38

Source: RITA office, Kilosa.

4.4: Public awareness on the roles of RITA on registration of vital events (births and deaths)

The registration of births and deaths involves three stages that are notification, registration and certifications(RITA, 2011). Although no one mentioned the name RITA but majority of those interviewed and participated in focus group discussions were aware of the notification on births and some of them went further to admit that they were instructed to proceed to *Bomani* for registration, “*After giving births for my first born at Kilosa I was told that I should go back to Bomani for birth certificate within three*

months.” FGD participant, Gongoni village.

That was an instruction given to the woman who gave birth at the district hospital but even some of those who gave births at homes had almost the same instructions *“I had a home delivery and I was given a paper to take to the hospital where I was instructed to go to Kilosa and on reaching there I was given birth certificate.”* FGD participant, Madoto village.

In the same communities there were few who categorically denied having been told anything post-delivery. They were from not only home deliveries group but also those who delivered at the health facilities, *“On traditional births attendants they do not give instructions that “the child had already been born, let me give you birth notification, no they never told us.”* FGD participant, Malangali village. The lady who gave birth at the health facility denied being given any instruction, *“for me I was not given any instruction. I was only told that “God has assisted you”.* FGD participant, Madoto village.

There was a group of people who were instructed to go back to the health facility not for registration but for other services such as vaccination and weighing. *“We are instructed to go to the health facilities where we are given drops and told to stay for one month before coming back for weighing. You are given a card and come back for weighing.* FGD participant, Malangali village.

The service providers from the serving health facilities interviewed all insisted that on deliveries that occur at their health facilities the mothers are given notification and instructions on what to do, *“After delivery we write on this book to show that the child was born here and also we provide a notification that she will take to the district headquarters for births certificate”* Nurse, Rudewa dispensary.

The clinical officer in charge for Muungano dispensary that serves Malangali village had almost the same words as other health service providers, *“There is a form that we fill for each child.”* CO, Muungano dispensary.

When probed for the deliveries that occurs at homes the health service providers from the government health facilities insisted that these were also given notification, *“Even those who delivers at home when they come here we register them.”* Rudewa dispensary nurse.

On death registration the communities and to some of the village executive officer had differing understanding, *“For our village we have never heard of it”* FGD participant, Malangali village.

From the same village another participant had this to say, *“The experience for deaths that occurs at home is that when we are informed that the sick person is dead we just get prepared for burial. No other procedures, people convene and bury the dead body. That is my experience”*.

The village executive officer for Gongoni village who previously admitted that registering births and deaths is one of his duties when asked on death registration he had this to say, *“The procedure is burial. Here we have a community leadership and when someone dies the community join together to bury him/her”*. VEO, Gongoni village.

The only deaths at the communities that draw attention of authorities and sometimes be recorded are those which are not natural and are associated with suspicious on its cause. The villager of Malangali mentioned this, *“What I know is that death that we get paper are the sudden ones or someone found dead. On these types of death usually the doctor is called to confirm the death and it is when the certificate can be given.”* FGD participant, Malangali village.

During the discussions there are those who were aware of death notification but for the deaths that occurred at the health facilities, *“At the hospital is where papers are given. Deaths that occur at home usually leaves no records as someone gets ill at home, nursed and dies and there is no records.”* FGD participant, Malangali village.

4.5: The presence and feasibility of using modern technology on births and deaths registration

The technology being used at the office was an antiquated one and not supposed to be used in government office in this 21st century. There was no computer or printer and the old typewriter was the one being used. The RITA registrar complained about this, *“Nowadays people are up to date and they consider me as a left behind person. Sometimes they ask but I fail to respond as I cannot bring a new technology in this office on my own. The most important thing is for the government to be up to date”*. RITA register at Kilosa.

When asked about challenges of using the old typewriter she said, *“The challenges are there like when it breaks there are very few technicians who can repair it, nowadays and even when the ribbon is worn out you cannot get it here at the district you have to travel to town”*.

While probed on the possibilities of using modern technology such as the computers for births and deaths registration she confidently responded by saying, *“I am capable as I went to college.”*

4.6: Challenges and way of improving of births and deaths registration at the community.

During this evaluation there were challenges that were noted and also the participants provided suggestions they perceived as having impact on registration of births and deaths if implemented.

4.6.1: Challenges linked to registration of births and deaths

The Kilosa RITA office is housed within the district headquarters and it is a two roomed office manned by a single person who was trained as a personal secretary. *“Besides being a personal secretary I am also working as a registrar for births and deaths in collaboration with the DAS”* Registrar, Kilosa district. This clearly gives a picture of the office that served only those who managed to reach there.

Absence of clear information on what transpires at the RITA office gave room for residents to acquire information from relatives. *“One of my relative who we gave births together, she told me that when you go to Kilosa they tell you that you are late and you are given another date and she was living in Dar. I am sure she did not make any further follow up.”* FGD participant, Malangali village.

There was a striking comment made by one of the health service provider while discussing the factors that prevent people from registration of births. This comment is closely associated with social component of the society and needs to be considered during community sensitization, *“There are those who have babies with someone’s husband. Usually they do not want to be exposed and they want to keep everything as a top secret. They can even refuse to provide the name of the father of the child and it becomes difficult to fill the forms properly”*. CO, Muungano dispensary.

Within the participating communities no taboos or beliefs were mentioned as a probable cause of low registration and this was a positive finding that could be used to guide the intervention process for improvement.

Another significant challenge found in this evaluation was the link between the district registration office, villages and health facilities that was found not to be working properly. The district Registrar and DAS both mentioned about the notification process being conducted at the lower level of the villages/dispensaries but when asked about the villages that had not registered births and deaths for years the responses were not the same. The district registrar mentioned of a period when register books were not available,

“Shortage of registers was a problem for a short time and the headquarters informed us on that but those who do not have registers completely probably they are new to the work, they need to be educated on that. It is my duty to ask the headquarters so that they can authorize for me to visit those villages and educate them” RITA staff, Kilosa.

From the health facilities it was only at Rudewa dispensary where the problem of shortage of register was mentioned, *“Yes. Sometimes we run on shortage and people come to ask for notification and we instruct them to come at a certain time”* Nurse, Rudewa dispensary.

The District administrative while he was an overall overseer of RITA activities put the accountability issue at the hands of RITA, *“As I mentioned earlier the follow up on activities is solely under RITA. When there is any shortcoming they make follow up themselves”* DAS, Kilosa district.

Although the village executive officer (VEO) admitted as being the ones who are supposed to register births and deaths all of them had not registered anyone for years without being asked or followed up.

“On births and deaths registration actually I am a new comer here and on arrival I did not find the registration books but in reality when someone dies there is a register where it is documented on date of death and what caused it. We send this information to the district headquarters” VEO Gongoni village.

At the same village the VHW recalls that the registration especially on births ceased many years ago, *“After finishing no other registers were brought here. We were registering them here, the VEO and I.I personally registered many children and some went to the district headquarters for their certificates”*

In all the villages that were involved in this evaluation the leaders (VEO and VHW) were aware of the registration and the process involved. Although they had not registered births/deaths the RITA and DAS offices had not taken any action of even writing a letter of reminder. The VEO from Malangali village when asked about receiving a letter reminding him for not sending births and deaths report he denied, *“No. That one they don’t do.”*

4.6.2: Ways of improving the registration of births and deaths at the community

The communities at the villages involved volunteered suggestions they perceived as having ability to improve the situation. In general the suggested ideas were, to bring registration closer to the people, mass education on importance of registering births and deaths, and provision of posters that will be displayed at the villages, *“What I can add is to ask the government to relax a bit the conditions attached to births registration and for the process to be closer to people, at least at the ward level.”* VHW, Malangali village.

There were those who suggested that instead of notifications the births certificates should be given soon after delivery, *“The easy way is to provide the birth certificates during delivery. After giving birth straight away the birth certificate should be provided”* FGD participant Madoto. Taking the registration services to health facilities was also mentioned by one of the participant, *“Mmh, I think the registration should be close to people and if this is not possible then to the nearest health facility”* VHW, Malangali village.

On education most of the participants agreed that it was missing and they suggested that the villagers should be educated on the importance of registering births and deaths, *“I think the most important thing is education. Education should be provided and the services brought close to the communities. It will be an important thing”*. FGD participant, Gongoni village.

Others suggested that the posters can be of great help if they are displayed at the villages with messages on importance of registration, *“We need posters so that we can have more knowledge on that”*. FGD participant Malangali.

The district administrative officer had this suggestion while emphasizing on the importance of taking the services closer to people. *“.....but as I told you all this time RITA was working at the district and it is high time they go a bit down to the ward.”* DAS, Kilosa. He also went further to suggest employment of more people for better performance of RITA, *“Yes. Yes. It is important and they have to employ more staffs and with improved infrastructure and working with ward executive officer.”*

Geographical setup of the district and how difficult it was for some of residents to reach the district was mentioned. There was no proportionality between the office and the area of the district, *“Distance and geographical locations contributes a lot on low registration. As I told you that the area for the whole district is twelve thousand kilometres and some areas one have to travel 160 kilometers to be here, these are challenges.”* DAS, Kilosa district.

Though the only RITA staff did not give a direct request for improvement but her statement on technology used showed that she was in desperate need for new technology that can improve the registration, *“Sometimes they ask but I fail to respond as I cannot bring a new technology in office on my own. The most important thing is for the government to be up to date.”* RITA staff, Kilosa.

CHAPTER FIVE

DISCUSSION OF THE FINDINGS

5.1: Introduction

Chapter five deliberates on the findings from this formative evaluation with the main aim of putting into light what is already known, the real situation at the ground and the reflection of the findings on the aim of the evaluation.

The formative evaluation was conducted so as to answer the main question of why registration of births and deaths at communities through RITA is still low regardless of favorable administrative structure and laws.

5.2: The trend of vital events registration (births and deaths)

The trend of vital registration at the community level was very low especially for deaths. The importance of the notifications given soon after delivery was also low and this made people to keep the notifications at home without completing the registration by obtaining the certificate. Introduction of having birth certificates as a pre requisite for school enrolment can improve registration although this will be those few who go for higher education.

Death registration process in the community was not done and the importance of these data was not well understood by majority of the people at the rural areas leaders inclusive.

In 2014 the global trend on civil registration (births and deaths) was still with 38 million deaths out of 56 million not recorded anywhere. On birth registration half of the world children especially from third world not are not registered (World Health Organization, 2014).

Taking Tanzania context on the trend of civil registration there was no available data from RITA but the situation is extensively discussed in chapter 2.4 of this report.

5.3: Public awareness on roles of RITA on registration of vital events (births and deaths)

From the findings there was awareness on birth registration at the communities and to some extent there are community members who were able to acquire birth certificates for their children. The findings shows that the difference of having notification and obtaining certificates was not well understood among community members.

There was lack of uniformity on information given to mothers soon after deliveries on regard to registration although all the health service providers mentioned this but members of the communities differed in the instructions given.

On regard to death registration that occur at the communities, it was clear that this was not well known and not be given the weight it deserved probably due to low level of awareness on its importance to the national data.

Death notification at the community carries a title of “**Kibali cha mazishi**” in Kiswahili literally meaning burial permit. By not having notification for deaths occurring at the communities meant that people died and buried without permits from the local authorities.

5.4: The presence and feasibility of using modern technology on births and deaths registration

This evaluation provides an insight on feasibility of using modern technology as an effort to increase registration of vital events (births and deaths) at the rural communities. All the participating villages were under coverage of mobile phone service providers and two of them were receiving 3G internet signal.

Kabadi, Mwanyika and Savigny (2013) in their paper “innovation in monitoring vital events” while using short message service (SMS) from mobile phones were able to demonstrate that this can increase the registration of vital events and this feasibility was also being observed at Kilosa district where mobile phone service coverage is good.

The other positive finding is from the available records indicated the rise in use of mobile phone in Tanzania from 0 to 67% by year 2014 (World Bank, 2014)

The presence of electricity power at the office and secretary capable of using modern technology such as computer made feasible any attempt to improve registration by using modern technology.

5.5: Challenges and way of improving registration of births and deaths at the community.

This evaluation identified various factors considered as hampering civil events registrations, these included knowledge, distance to registration centre, costs and mere negligence from the community side. From the agency (RITA) and the system involved there were shortage of manpower (office being manned by a single person), failure to provide due weight for death registration. Most of the suggestions provided were based on the above factors.

These findings on factors blocking registrations concurs with what was observed by Makannah (1981) when he mentioned the factors that were considered as blocking civil registration in Africa that to some extent do incorporate the above ones. While he mentioned of low motivation among public members this was not vivid in this evaluation as most of people talked of lack of knowledge on importance of registration.(Makannah,T, 1981)

The other finding is that the administrative structure in the district that appears to be potential on increasing births and deaths registration is not utilized accordingly. The health facilities personnel, the village executive officers and the village health workers who are all considered as the main data collector at the communities are all under the District Executive Director while the RITA office is under District Administrative Office. The disadvantage of this was clearly seen on failure to make initial registration for vital events at communities without follow or accountability.

The government structure provides manpower at the grassroots (VEO, VHW) if officially incorporated into RITA's system can yield the desired results.

5.6 :Evaluation dissemination plan

The evaluation report in Kiswahili will be presented personally to the RITA/DAS offices where clarification will be given. This will be after approval by the School of Public Administration and Management (SOPAM), Mzumbe University.

At the village level, the village government meeting calendars will be sought and utilized so as to have more representation during dissemination.

This evaluation is copyright beneficiary in that case those who will want to use it will be advised to consult the University.

CHAPTER SIX

SUMMARY, CONCLUSIONS AND IMPLICATIONS

6.1: Introduction

This chapter intends to put into nutshell the findings of this evaluation and provide the conclusion with the implications of the findings on RITA's roles. It also provides the limitations of this evaluation and gives clues on areas that may requires further evaluation/researches for the improvement on RITA's activities especially at the community level.

6.2: Summary

The main aim of the formative evaluation on registration of births and deaths at the community level was to try to look on why the registration was low regardless of the having laws and administrative structures. Through qualitative method a number of interviews and focus group discussions were held and collected data were managed and analyzed. The findings of the evaluation can be used for improvement on collection of these valuable data.

The registration of births and deaths at the communities was still low regardless of being favored by the administrative structure that goes down the villages. There are several factors that attributed to this low registration and those mostly mentioned by the participants were knowledge on the importance of registration, costs involved and the distances to the registration centres.

The non-existence of even notification on deaths that occur in the communities was something that required urgent action. This shortcoming signifies that the country does not have accurate data on population growth and mortality. The RITA strategies do not talk much on deaths registration and the mostly campaigned was the births registration.

The administrative structure of central and local government was another factor for low registration. The villages and rural health facilities are considered as the source of data for RITA and all of them are under local government through DED while RITA was

under the central government. Accountability becomes difficult and in this particular evaluation there were villages that had not registered any births or deaths for years yet no one asked about that or a follow up made.

6.3: Conclusion

Registration Insolvency Trusteeship Agency (RITA) was working in the rural communities through an inactive system. All the village executive officers interviewed mentioned the registration of births and deaths as being one of their duties but yet they were not active with years lapsing without registration.

The RITA strategic plan does not show much on death registration and most of the efforts are on birth registration as observed in two big pilots of Mbeya and Mwanza where there was campaign on registration of all under-fives. This indicates that even at RITA itself the importance of having current data on civil events is not given a deserved priority.

The communities and general population had very little knowledge on importance of registering births and deaths. The few who managed to complete registration did so due to external pressure such school, employment and inheritance demands.

This evaluation had established and responded accordingly to evaluation question that was looking on why the registration is low regardless of favorable administrative structure and laws. The obtained information concur with the findings of Mkanah (1981) and also that of Kabadi et al (2013) and this signifies that there must be a continuous sensitization to the rural communities on importance of registration of vital events in particular births and deaths.

6.4: Policy implications

The implication of not having updated data is that the country had to conduct a very expensive census after a certain interval. These costs could have been reduced if the registration were efficient at all levels.

Proper planning for development requires credible data and this evaluation shows that there are important data that goes unrecorded. There are people who are born and die without leaving any trace as they are not registered during births and also on deaths.

6.5: Programmatic implication and use of findings for strategic planning

The current strategic plan for RITA had already identified critical issues that needed intervention for improvement and one of them was marketing information for RITA services. On this issue the agency admitted to have few research information (RITA, 2011, p. 21). The result from this evaluation can provide a useful information that can be used during planning for intervention/improvement.

The observed communication potentials through mobile phone companies can be incorporated in the future plans for introduction of electronic registers at the communities, this will probably increase number of data collected for both births and deaths and it can remove the problem of distance to certification centre.

6.6: Limitation

The evaluation was conducted at Kilosa district and the 2011-16 strategic plan was the only document from RITA used. Besides one year records from Kilosa no data or other document was provided by the RITA headquarters regardless of visiting and communicating through mails.

Research/evaluation papers on RITA were not available and this limited the evaluator on knowing what other researchers/evaluators have done on the agency.

6.7: Areas for further research/evaluation

This evaluation involved three villages in only one district among the 139 districts all over Tanzania and to have a broad insight that would give a national picture a more extensive evaluation is required.

Areas for further evaluations/researches includes,

- Association between level of education and civil registration (births/deaths);

- Knowledge and perception on deaths registration;
- Feasibility on reviving/strengthening the link between village leaders (under DED) and RITA (under DAS); and
- Motivation for village workers as an intervention for improving the registration of births and deaths at the community.

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APPENDICES

Appendix 1. Focus group discussion guideline for community members

My name is **Omari Abdallah Kimbute**, a second year student from Mzumbe University, majoring in Master of Science in Health Monitoring and Evaluation currently undertaking a field project that focus on evaluating civil registration through Registration Insolvency Trusteeship Agency (RITA).

The aim of this discussion is to share our different views and experience on the subject matter and the active participation of everyone will highly be appreciated. No grunting or laughing when someone is talking and the discussion will be considered as confidential.

There will be no payment for this participation and as I will not be able to write as fast as you are speaking I will use a sound recording device.

Can we start?

Let us introduce ourselves?

-If not mentioned probe for-age, number of children, place of delivery

1. What happens after delivery of child?

-If not mentioned probe for card or papers given to the mother on regard to the child?

-Probe for any other instructions given to the mother

2. Can we share our experiences on registration of births?

-Is it a known procedure in this community?

-What facilitated those who managed to register their children?

-What was the factor behind failure to register?

3. Have you experienced losing a close relative and what transpired during that hard moment?

If not mentioned probe for-where it occurred, any document given by the unit or village office, any requirements before burial by the authority.

4. Do you have any document on regard to deaths or births that occurred in your household?

-Probe for-who gave you?

-any strings attached to the document?

-Managed to adhere/not to adhere to instructions givens and why?

Appendix 2: Interview guideline for key informant (Village leaders/Health facilities personnel/village health workers

Name code.....

Age.....

Sex.....

Occupation.....

Working Experience (yrs).....

1. What is your role in this office/health unit/village government?
2. What do you understand on regard to registration of births and deaths at the community?
3. What do you perceive as the facilitating or blocking factors for registration of births and deaths in your community? probe for tools used, its availability, remuneration, accountability
4. What cultural/religious beliefs on regards to registration of births and deaths are associated with this community?
5. What do you think can be applied to improve deaths and births registration

Appendix: 3 Interview guidelines for Key informants (RITA staff)

Name code.....

Age.....

Sex.....

Occupation.....

Working Experience (yrs).....

1. Can you explain on the routine works in this office in particular registration of births and deaths?
-Probe for records, target set, facilitating and limiting factors
2. What methods are you using to explain the role of RITA to the public?
- If not mentioned probe for radio/TV programs, leaflets, social media such as Facebook, internet.
3. What cultural/religious beliefs on regards to registration of births and deaths are associated with this community?
4. In this office what modern technologies are in place for registration of births and deaths? -Probe for ability to operate, challenges associated with.
5. What do you think should be done to improve the situation?

Appendix 4: Interview guideline for District administrative officer (DAS)

Name code.....

Age.....

Sex.....

Occupation.....

Working Experience (yrs).....

1. Can you explain your daily duties in this office especially those related to registration of births and deaths?
2. How are you accountable to the RITA?
-Any payment?
3. According to government structure you are under central government while most of those who collect data for RITA are under local government. How is accountability working in this situation? Probe
 - If no report received from the peripheral what actions are taken?
 - What about burials without permit?
 - Villages without registers for a long duration
4. What do you perceive as facilitating or blocking factors for births and deaths registration in your district?
5. What do you think should be done to improve the situation?

Appendix 5: Consent form

I, **Omari Abdallah Kimbute**, a second year student from Mzumbe University, majoring in Master of Science in Health Monitoring and Evaluation and currently undertaking a field project that focus on evaluating civil registration through Registration Insolvency Trusteeship Agency (RITA).

The main purpose of this evaluation is to make an assessment on performance of RITA on registration of births and deaths at the community. Worldwide it is a known phenomenon that the registration of the above two vital events is low especially in third world, Tanzania inclusive.

This evaluation research is using interviewing and discussion that will involve other members of the communities. Participation in this evaluation research is voluntary and there is no penalty from the evaluator or community leaders although maximum participation is very important. No payments will be made to the participants though refreshments especially for those participating in group discussions can be provided.

All information that will be collected will be considered as confidential and no name of the participant will be displayed.

For sake of clarity on the interview voice recording can be used when need arises.

If you agree sign on the below space,

Signature of participant

For any questions you can contact me through mobile phone number 0784595622 or my supervisor, Deo Mpenzi through mobile number 0755810450.