

# Governance and Policy Coordination The Case of Birth Registration in Ghana

B. Guy Peters and Andrew Mawson

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## Correspondence should be addressed to:

UNICEF Office of Research - Innocenti Piazza SS. Annunziata, 12 50122 Florence, Italy Tel: (+39) 055 20 330

Fax: (+39) 055 20 330 Fax: (+39) 055 2033 220 florence@unicef.org www.unicef-irc.org

#### GOVERNANCE AND POLICY COORDINATION: THE CASE OF BIRTH REGISTRATION IN GHANA

B. Guy Peters<sup>1</sup> and Andrew Mawson<sup>2</sup>

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<sup>&</sup>lt;sup>1</sup> University of Pittsburgh

<sup>&</sup>lt;sup>2</sup> UNICEF Office of Research

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#### **FOREWORD**

Establishing "what works under what conditions" is becoming a mantra in the development context, both in academia and among international development organizations. This, however, is not an issue of the technical modalities of service provision alone. Just as important is their contextual framing, including analyzing real time governance factors. It is necessary to understand and address bottlenecks that impede the success of an intervention, or that make an intervention that works well in one context unrealistic or inappropriate in another. This means having an analysis of institutions and the power relations within and between them, as well as the incentives motivating both elites and the behaviour of service users (or non-users, as the case may be).

Coordination is a critical governance issue. UNICEF's Monitoring Results for Equity approach identifies coordination as a determinant of results for children, alongside other governance issues such as budgeting, management and legislation. This is why the Office of Research has partnered with Guy Peters, Professor of American Governance at the University of Pittsburgh, to carry out two case studies on bottlenecks in coordination, of which this study in Ghana is the first.

Why the focus on civil (birth) registration? Birth registration is a fundamental right of the child, instrumental in the realization of many other rights. Indeed, recognition of the practical utility of civil registration and vital statistics in support of health in particular is giving a huge international boost to efforts to improve birth (and death) registration. Interestingly, too, the clear outputs and necessary interaction inherent in birth registration have led the development theorist Matt Andrews to posit that birth registration rates are a strong governance indicator with implications wider than birth registration itself.

We have set out to analyze coordination as primarily a set of processes, rather than a series of mechanisms. The research starts at the point of service delivery and works back from there, an innovative bottom-up approach which has not been common in the study of coordination, but which grounds the issue in what people actually do, rather than in what they might claim or aspire to do. This method is easy to repeat and rapidly gets to real interactions, generating a "three-dimensional" view of coordination.

While the entry point selected for this investigation of coordination is civil (birth) registration, we believe the governance issues it addresses are likely to resonate more widely.

#### INTRODUCTION

Coordination is a significant issue for the study of governance. Policy and practice in even the most specialized area often have implications or involve relationships beyond the sector, let alone relationships between different units or tiers of administration within the policy area itself. Enhancing and strengthening coordination can seem to be the answer, or at least <u>an</u> answer, to improving the translation of policy into practice, strengthening service delivery and, ultimately, getting results for money spent.

UNICEF, for example, identifies coordination as a determinant of results for children, alongside other governance issues such as budgeting, management and legislation. As part of wider analysis of barriers and bottlenecks impeding results, UNICEF Country Offices are encouraged to identify where significant impediments to coordination exist, and to analyze what can be done to address them (and the relative importance of doing so, compared to addressing other issues).¹ Developing a situation analysis of the relevance of coordination processes and mechanisms is a necessary requirement for supporting, promoting and advocating for effective interventions. Identifying where enhanced coordination may improve results – and how to overcome the barriers to achieving this – is a core aspect of implementation science. The capacity to identify and analyze coordination processes and failures, understand what they are, or are not, contributing to results is therefore important.

But how does one identify and analyze coordination? What are it various components? How is it achieved? Looking at coordination from the perspective of the substantive analysis of a range of determinants of results, how can one assess its practical significance? What gets in its way?

This research explores coordination through the lens of civil registration and vital statistics, with particular reference to birth registration. This particular case study is on coordination in birth registration in Ghana, a low to middle income country with a total population of 24.66 million, including 9.45 million under the age of 14 years at the time of the last census in 2010.<sup>2</sup> Since 2007 the annual birth registration rate has fluctuated slightly above 60% (63% in 2007, 61.4% in 2009, and 65% in 2010).<sup>3</sup> These rates of registration mean that that one child in three is not being registered. Fewer than half of children (45%) are registered during their first year of life.<sup>4,5</sup> A sister study of coordination in birth registration in Peru, a high middle-income country with much higher birth registration rates, is under preparation.

#### THE MEANING OF COORDINATION

Coordination has been referred to as the "philosopher's stone" for public administration and policy, with the assumption that if governments and their partners can get this aspect of governing right, they

<sup>&</sup>lt;sup>1</sup> The Monitoring Results for Equity System (MoRES), developed by UNICEF as part of its focus on equity, includes analysis of determinants or essential conditions required to achieve results for children. Coordination is identified as one of 12 potential determinants.

<sup>&</sup>lt;sup>2</sup> Children under one year old numbered 731,201 and those aged between one and four 2,674,205. (Ghana Statistical Service, May 2012).

<sup>&</sup>lt;sup>3</sup> UNICEF and the Ministry of Women and Children's Affairs, 2011.

<sup>&</sup>lt;sup>4</sup> The basis on which these percentages are calculated, using out-of-date census figures and estimations of birth rates, means the figures should be treated with great caution.

<sup>&</sup>lt;sup>5</sup> Ghana Statistical Service, 2011.

could govern effectively. The term coordination is used commonly, but often without careful consideration of its meaning. One simple but useful definition of coordination is:

The extent to which organizations attempt to ensure that their activities take into account those of other organizations (Hall et al, 1976).

In other words, coordination is the relatively simple task of ensuring that all actors working in a policy area take account of what other actors in the area are doing. This is a negative definition of coordination, implying only that the actors involved will take notice of others, but not that they will attempt to cooperate and work together to provide better services to citizens, and to provide those services more efficiently. A positive definition of coordination (Scharpf, 1997) requires cooperation and collaboration among actors, and some agreement upon a common goal. Agreement on goals is generally less than complete, but there can be enough agreement to permit cooperation (Bardach, 1998), especially at the level of actual service delivery.

Lester Metcalfe (1994) has identified a scale of coordination (Table 1) that illustrates the possibilities for cooperation ranging from complete indifference among the actors through to the creation of a comprehensive government strategy for a policy area.

## Table 1 : Metcalfe's Policy Coordination Scale<sup>6</sup>

- 9. Government Strategy
- 8. Establishing Central Priorities
- 7. Setting Limits on Ministerial Action
- 6. Arbitration of Policy Differences
- 5. Search for Agreement among Ministers
- 4. Avoiding Divergences among Ministers
- 3. Consultation with other Ministers (Feedback)
- 2. Communication with other Ministers (Information Exchange)
- 1. Independent Decision-Making by Ministers

<sup>&</sup>lt;sup>6</sup> From Metcalfe, L., 1994.

This scale is useful for identifying levels of coordination, but tends to focus heavily on the role of public sector actors – and senior ones at that – whereas in many areas, including civil (birth) registration, non-governmental actors also play a significant role and must be included in any coordination activities, or study thereof. In low- and middle-income countries (LMICs) institutionally weak public sectors often lead to significant reliance on non-governmental actors in the delivery of services, either de facto filling a vacuum or through formal delegation and contracting. The latter tendency is, of course, also true in high-income countries where privatization policies mean non-governmental organizations and the private sector increasingly have a central role in service delivery.

Why do we care about coordination, other than to have a somewhat tidier way to provide public services (Peters, 2015)? In general, coordination can provide better public services, and do so at a lower cost. If it involves interoperability, in the sense of service access modalities such as "one-stop shops", it removes some of the burden from citizens, who no longer have to go from one office to another or one place to another in order to receive the services they need. Coordination can also remove the contradictions among programmes that waste money and again make the lives of citizens more difficult. Finally, coordination is logically necessary if non-governmental actors are to be effectively integrated into service delivery under government oversight.

Coordination is a worthy goal in providing public services, but how can it be achieved? Although governments have sought to function in a more coordinated manner for centuries, their general failure to do so is indicative of the many barriers that exist (see pp. 27 below), and we therefore need to consider the possible mechanisms for producing better coordination.<sup>7</sup>

The most commonly used instrument for coordination is *hierarchy*, meaning the use of authority within government or within an individual organization to produce actions. Hierarchy, of course, depends upon the ability of leaders within an organization, or within government as a whole, to command other actors to behave in certain ways, and that authority is not always available. In addition to hierarchy, coordination can be achieved through *networks*. Most policy areas are characterized by networks of actors, public and private, that are involved in some way or another with the policy and who interact because of their concern with the issues. These interactions are themselves a low level of coordination. The degree of coordination can be increased if there are some common goals and some leadership available.

Finally, coordination can be produced through what Eugene Bardach (1998) has called *collaboration*, meaning the framing of issues in ways that the actors involved can agree upon. Agreement on the nature of the problems and the possible solutions then facilitates coordination. The parties involved in coordinating can work together to address the problems more effectively if they agree on its fundamental characteristics. This process of framing, is central to the policy process in general (Schon and Rein, 1994) but is perhaps particularly important for coordination.

<sup>&</sup>lt;sup>7</sup> If coordination is the philosopher's stone for public administration, perhaps the search for it can be likened to the search for the Holy Grail.

As already noted, most efforts at coordination focus on the top of government and on formal organizations responsible for coordinating public sector action. While those organizations are certainly important, most governments have multiple organizations responsible for coordination from the centre. Difficulties may arise in coordinating the coordinators. Further, formal mechanisms may hinder informal mechanisms for coordination at the bottom of institutions, which may be effective in producing good cooperation among multiple organizations working in one area.

#### RESEARCHING COORDINATION

The two case studies in this series experiment with a relatively simple methodology for the analysis of coordination. Known as "backward mapping", this was originally developed to assist in determining what types of policies might be implemented most easily. The research expands the use of this approach, using it as a lens for examining overall patterns of policymaking and administration. The idea is to understand the functioning of an administrative system – in this case the system for birth registration – by beginning at the very bottom where the service is delivered and then following the chain of action backward toward the centre of the organization and the centre of government. The logic is that by understanding what is actually happening in the delivery of services, it is possible to develop a set of questions about the factors that shape the system of implementation from the centre. This approach also helps to identify other actors at the service delivery level, which contributes to understanding coordination among these various actors at all levels of government. By starting "at the bottom", the method quickly picks up informal interactions outside formal structures.

Taking a bottom-up perspective has not been common in the study of coordination. However, it provides insights that rapidly move beyond formal policy pronouncements and mechanisms to the texture of actual human interaction. The approach enables the identification of processes of actual implementation in context. It exposes institutional issues and governance constraints in the service delivery chain, analysis of which, David Booth and others have argued, is too often missing in the aid effectiveness agenda. On the service delivery chain, analysis of which, David Booth and others have argued, is too often missing in the aid effectiveness agenda.

There are a number of reasons for choosing birth registration as the focus for a study of coordination. One, from UNICEF's perspective, is its substantive strategic importance for the realization of children's rights. Birth registration is a fundamental right of the child. It is the first stage of establishing a child's legal identity, it is a passport to protection from exploitation and abuse and it opens doors to the realization of other human rights. From the perspective of this research, however, birth registration is also a relatively simple government service (compared, say, to health, education or justice and the rule of law) with a readily measurable output such that government and analysts can reasonably easily

<sup>&</sup>lt;sup>8</sup> Elmore, R. F., 1985.

<sup>&</sup>lt;sup>9</sup> Some, if not most, scholars of implementation focus more on a top-down perspective and the role of individual organizations in implementation (Winter, 2012).

<sup>&</sup>lt;sup>10</sup> See, for example, Tavakoli, H., R. Simson and H. Tilley with D. Booth, 2013.

<sup>&</sup>lt;sup>11</sup> UNICEF, 2013.

assess success or failure. In most government structures it is usually a "siloed" mandate, in the sense that the laws and structures supporting it do not tend to spread the responsibility across institutions.

Nevertheless, even in this relatively simple policy area effective implementation generally requires coordination and cooperation both vertically and horizontally with other branches of the public sector. Indeed, Matt Andrews argues that this combination – clear outputs, necessary interaction – makes birth registration rates a strong governance indicator with implications wider than birth registration itself. While the entry point selected for this investigation of coordination is birth registration, the principles explored are likely to be relevant to many policy areas. Most public policies require implementation at a local level, and therefore understanding what happens at the "street level" is important for understanding the overall success of policy.

## Methodology

Ghana was chosen as a country case study because of its low-middle income status and, as described above, the apparent stagnation of its birth registration performance over the past eight years.

Field research for this study took place in the administrative centres of Abokobi in Ga East district and Nungua in Ledzokuku-Krowor district in the Greater Accra Region. These two communities were selected to provide variation between urban and semi-rural, which, it was thought, might lead to somewhat different patterns of social networking around birth registration. By choosing two communities near Accra the study sought to control other factors that might otherwise have influenced the findings – perhaps most importantly, greater concentrations of population and better transportation resources remove some major barriers to birth registration. The two districts are not representative in any statistical sense of all communities in Ghana, and, indeed, Greater Accra is generally better resourced than other regions. Nevertheless, they provide substantial insights into patterns of coordination around the process.

Abokobi in Ga East is a densely populated community in the northern sector of the Greater Accra Region. It is populated primarily by Christians, many with continuing ties to the Teshe area of the country. Rapid urbanization in Abokobi has placed a great deal of pressure on public services, including health and social services. In particular, health services in this area appear strained and overloaded. One study of the district argues that lack of connection with the formal health system tends to lessen the probabilities of the children being registered. Nungua in Ledzokuku-Krowor lies near the coast with substantial natural areas nearby – forests and some marshland. The district, also populated predominantly by Christians, is less urbanized than Ga East. Population growth has not been as rapid as in Ga East, and the social infrastructure appears somewhat less stressed. With a new hospital

<sup>&</sup>lt;sup>12</sup> Andrews, M., 2012, Birth registration as a governance indicator, http://matthewandrews.typepad.com/mattandrews/2012/10/b.html.

<sup>&</sup>lt;sup>13</sup> The two communities were selected with the assistance of Rev. Kingsley Asare Addo, Principal Assistant Registrar, Births and Deaths Registry.

<sup>&</sup>lt;sup>14</sup> Esena, R. K. and Mary-Margaret Sappor, 2013 (citing the Ga East Annual Report 2010).

opened in 2010, health provision appears to be relatively more accessible than in Abokobi. In 2013 Ga East achieved 41% birth registration coverage and Ledzokuku-Krowor achieved 61%. <sup>15</sup>

As described, the basic methodological approach used in this study is referred to as backward mapping. The study conducted a series of interviews with informants selected through "snowball sampling", a method that supports identification of networks of relevant actors and the patterns of their interaction (see Atkinson and Flint, 2001). Interviews used a semi-structured interview protocol (see Appendix). The initial methodological assumption was that birth and death registration officers are at the centre of networks of actors who assist in the registration process, including through creating awareness among the population of the importance of the service for children. First stage interviews were with officials at the community level. They were asked to identify the other actors with whom they cooperated in the process of registering children, both horizontally in their area and vertically back up the chain to Accra. In turn, these actors were then located and interviewed.

While appropriate for the study of interactions, backward mapping does not generate information about levels of knowledge regarding birth registration in the wider community or government structures if these are not mentioned in the snowball sample. By definition, when there is no interaction the sampling chain stops. The sample is self-selecting, involving people with some link to birth registration and therefore presumably greater knowledge about it than parties not involved. Where necessary, information generated by fieldwork for this study has therefore been supplemented by information from other sources.

In addition, before the community level fieldwork, there was pre-consultation and discussion with UNICEF and senior managers of the Births and Deaths Registry, to officially introduce the research and to help prepare the fieldwork. These meetings identified the Ghana Health Service and the Ghana Education Service as actors in the registration process. Accordingly, the research team pre-scheduled interviews with local officials from these services, even before they were mentioned by registration officers. Senior officials in all the ministries and agencies that might have a stake in birth registration were also interviewed: the Ministry of Finance and Economic Development, the then Ministry of Women and Children's Affairs (now reorganized as the Ministry of Gender, Children and Social Protection), the Ministry of Education, the Ministry of Local Government and Rural Development, the Ghana Health Service, the Ghana Education Service, and the Ghana Statistical Service.

In Ledzokuku-Krowor 15 actors and in Ga East 17 actors were interviewed. All actors identified by other participants as relevant for registration in the community were interviewed. However, this sample size did not allow a clear picture to emerge about the differences in implementation patterns or coordination practices between the two districts, and this is a limitation of the study. No children were interviewed as, for the purposes of this research, their participation was not considered relevant.

The interviews at the community level were conducted by the Child Research and Resource Centre (CRRECENT), a research organization with substantial experience of work on children's rights in Ghana. The interviewers were experienced, but also received a one-day training on the research protocol (see

<sup>&</sup>lt;sup>15</sup> Government of Ghana (Births and Deaths Registry), 2014.

Annex 1). In addition, the interviewers did several practice interviews in another community, both to pre-test the protocol and to gain more experience in using it with officials and citizens working in this policy area.

The preliminary findings from these surveys, as well as that of a Bottleneck Analysis of Birth Registration (UNICEF Ghana Country Office, 2013) were discussed in a verification meeting on 23 and 24 April 2013. The meeting was attended by a number of officials from the BDR, including senior officials from the central office and some from regional and district offices. There were also representatives from the Ministry of Local Government and Rural Development, the Ministry of Finance and the then Ministry of Women and Children's Affairs, as well as from several faith-based organizations.

#### THE LEGAL AND INSTITUTIONAL FOUNDATIONS OF CIVIL REGISTRATION

## The Government System in Ghana

Ghana has an elected president and a unicameral legislature. The President appoints the ministers of the (now 24) ministries in the government. There are also several important executive agencies, such as the Ghana Health Service and the Ghana Education Service, that have a degree of autonomy from ministerial control. The country has a unitary constitution, although there is a process of decentralizing functions to the 10 Regions and now 170 Districts, each with a semi-appointed, semi-elected District Assembly. Indeed, birth registration is implemented in the context of the continuing decentralization of public administration.<sup>16</sup>

Despite decentralization, implementation for earmarked sectoral funds remains the responsibility of the line ministries through what are effectively de-concentrated district offices. While also reporting to District Assemblies, senior district officials responsible for particular policy programmes, including those in the Births and Deaths Registry (BDR), are appointed by their central ministry and report through regional offices to the centre. Even with decentralization, therefore, Regions and Districts are controlled from the centre through their reporting lines and the control of their finances.

The Ministry of Local Government and Rural Development, which is the institutional home of the Births and Deaths Registry (see below), and the National Development Planning Commission (NDPC) are jointly responsible for coordinating local government functions and linkages across the different levels of government. In addition, under the National Strategy for Implementation of the Convention on the Rights of the Child (overseen by the Ministry of Gender, Children and Social Protection), District Assemblies have the mandate to protect the welfare and promote the rights of children. They are required to coordinate the activities of government and NGOs relating to children.<sup>18</sup>

<sup>&</sup>lt;sup>16</sup> See Ahwoi, K., 2010.

 $<sup>^{17}</sup>$  United Nations Children's Fund and the Ministry of Women and Children's Affairs, 2011.

<sup>&</sup>lt;sup>18</sup> "Background to Ghana's reporting to the UN Committee on the Rights of the Child," presentation by Sylvester Kyei-Gyami of the Department for Children, MoWAC, July 2010.

#### The Formal Civil Registration System

Understanding civil registration in Ghana begins with the legal framework. With legal mandates understood, the question then becomes the extent to which the legal requirement for birth registration is implemented by government. A key issue is the way in which the institutional mechanism responsible for civil registration discharges its mandate, both the formal and non-formal processes involved and the role, nature and extent of coordination with other parties.

The legal requirement for civil registration, at least in relation to births and deaths, began in 1912 when Ghana was the British colony of the Gold Coast. The contemporary system was created in 1965 by the enactment of the Registration of Births and Deaths Act (Act 301). As the name suggests, this regulates two key aspects of civil registration: the registration of births and deaths. It does not cover other vital events, such as marriage, divorce or adoption.

Policy documents, studies and statements by officials describing the rationale in Ghana for birth registration identify it as having several purposes. In the foreword of a UNICEF bottleneck analysis of birth registration, the responsible minister, the Minister for Local Government and Rural Development, writes of birth registration as a fundamental human right, reducing vulnerability to abuse, trafficking and exploitation.<sup>19</sup> Birth registration establishes the child's legal identity and helps establish parentage. By so doing, it supports the realization of the child's rights to name and nationality, and contributes to establishing legal inheritance. It also opens the door to a number of civic possibilities and services. For example, a birth registration certificate facilitates getting a passport.<sup>20</sup> It can be used to define eligibility for the Livelihood Empowerment against Poverty (LEAP) cash transfer social protection programme (on the basis of being the caregiver of an orphan or vulnerable child).<sup>21</sup>

In addition, the Minister writes of the contribution of birth registration to the planning of social services.<sup>22</sup> This theme is amplified in a 2009-2013 BDR sector strategic plan for the development of statistics, which describes BDR's contribution to the generation of timely statistical and demographic information. The intention is that data produced by the registry will complement periodic census data, and facilitate policy formulation and development planning in the inter-census period.<sup>23</sup>

Birth registration should be done within the first year of the child's life, during which period it is free for the parents.<sup>24</sup> If registration takes place after this period it is deemed to be late; if it takes place when the child is between one and five years' old there is a fee of 10 Cedi (approximately \$5 US), and after five years' old a fee of 20 Cedi.<sup>25</sup> Certified copies of birth certificates that may be required for passports and visas also require a fee. While the law states that it is the obligation of the parents to

<sup>&</sup>lt;sup>19</sup> The Hon Julius Debrah, Minister for Local Government and Development, in UNICEF Ghana Country Office, 2013.

<sup>&</sup>lt;sup>20</sup> Government of Ghana (Births and Deaths Registry), 2008.

<sup>&</sup>lt;sup>21</sup> UNICEF and the Ministry of Women and Children's Affairs, 2011. As of early 2015, LEAP reached 90,800 households in all parts of the country and was extending targeting to pregnant women and women who are the mothers of children under one year old.

<sup>&</sup>lt;sup>22</sup> The Hon Julius Debrah, Minister for Local Government and Development, in UNICEF Ghana Country Office, 2013.

<sup>&</sup>lt;sup>23</sup> Government of Ghana (Births and Deaths Registry), 2008.

<sup>&</sup>lt;sup>24</sup> In the initial legislation the free period was only 21 days but it was subsequently extended to one year.

<sup>&</sup>lt;sup>25</sup> UNICEF Ghana Country Office, 2013.

register their children, there are no sanctions for failure to comply. The law also mandates that the registration occur within the district where the birth took place.<sup>26</sup>

Act 301 established the Births and Deaths Registry, now within the Ministry of Local Government and Rural Development, as the institution responsible for implementing birth registration. The activities of the Registry are coordinated from the Central Registry Office in Accra. Formally, the BDR has divided the country into registration regions coinciding with Ghana's administrative Regions, each having a Regional Registration Office. These are further sub-divided into registration districts, which coincide with administrative Districts. There are also some registry offices and centres within larger communities, but most of the activities are in the District office.<sup>27</sup> The Regional offices oversee the activities of the Districts, and also collect and process the data provided by them.

Funding is allocated centrally, from the Ministry of Finance and Economic Planning through the Ministry of Local Government and Rural Development. The funding for BDR is contained within the appropriations provided to the Ministry, with BDR having little direct chance to affect the allocation. The BDR does not have the right to retain fees paid for late registration but by law must submit payments received to the Consolidated Fund, controlled by the Ministry of Finance.

Significantly – and foreshadowing the focus of this research on coordination – birth and death registration is one of a number of registration and personal identification systems in Ghana. There is a separate marriage registration process, as well as an electoral roll and a national identity system. The National Health Insurance uses its own identification numbers assigned to individual members of the scheme. These multiple registration systems complicate the lives of citizens and also make it more difficult for organizations within government to manage interoperability when providing services to them.

#### THE SYSTEM IN PRACTICE

A theme that will be discussed in the rest of this report, and which was uncovered by the fieldwork, is the relationship between the formal system, described above, and what actually happens as the registry and staff within it set out to fulfil their mandate. In formal principle, the Births and Deaths Registry is tasked with implementing its legal mandate on its own. However, birth registration is an example of how an apparently "siloed" mandate actually requires coordination and cooperation with other branches of the public sector and civil society for its effective implementation. A formal description of the birth registration system as defined in law and statute in Ghana does not capture the actual system. The same is likely to be true for many other government functions organized in a "stove-pipe" or "silo" structure.

The system incorporates both centralized and decentralized elements. Registration is a decentralized function taking place at the district and local levels, but filling in and printing birth certificates is

<sup>&</sup>lt;sup>26</sup> Republic of Ghana, Registration of Births and Deaths Act, 1965 (ACT 301), <a href="http://www.jtighana.org/new/actdetails.php?id=121">http://www.jtighana.org/new/actdetails.php?id=121</a>, accessed 9 January 2015.

<sup>&</sup>lt;sup>27</sup> According to the BDR, these number 374: source, Government of Ghana (Births and Deaths Registry), 2008; according to UNICEF, they number "around 391": source, UNICEF Ghana Country Office, 2013.

centralized in Accra. As described, funding is allocated centrally. Higher-level offices have formal oversight over those lower down the hierarchy (and the BDR as a whole is supervised by the Ministry of Local Government). Registration information moves up the chain to Accra and birth certificates back down. All of this involves elements of vertical coordination.

At the highest level, complementing census information would require horizontal coordination with the Ghana Statistical Service, the government's bureau of statistics, and the planning departments of other ministries. Relations with the Ministry of Finance and Economic Planning are crucial for the allocation of resources. As will be described, at the local level the significance of horizontal coordination is particularly apparent – coordination between registry staff and staff from the Ghana Health Service is a key implementation strategy. With 84.3% of primary school age children enrolled in school,<sup>28</sup> the Ghana Education Service is also an ally in identifying unregistered children, at least in theory. Civil society institutions expressing an interest in supporting birth registration include churches, mosques and non-governmental organizations (NGOs) working in child welfare and child rights.

Furthermore, the registration system has become dependent upon unpaid community registration volunteers to augment staff, especially in registration offices and centres at the community level. Volunteers are often closely engaged with their communities and know about the births, deaths and other family changes taking place. This is a mixed story; for many this is an example of commitment to a public good, but with few resources to sustain volunteer engagement, turnover is reported to be high.<sup>29</sup> Also, lack of adequate funding and poor oversight within the BDR means some staff and volunteers charge for in-time registration and over-charge for late registration, creating "black revenues", some of which may be locally channeled back into supporting registration activities,<sup>30</sup> and some, presumably, which is channeled into pockets. A UNICEF report based on fieldwork in 37 districts states: "the practice of charging for birth registration is widespread".<sup>31</sup> Some community registration volunteers and former staff have effectively become "agents" or "middlemen" assisting citizens to register births for illegal fees.<sup>32</sup>

Looking back beyond 2007, between 2003 and 2007 birth registration rates rose dramatically in Ghana (37% to 63%). One study credits the introduction of a campaign style approach for the increase – in particular linking birth registration to immunization campaigns and community health care, as well as the deployment of community registry volunteers.<sup>33</sup> As described in the Introduction, since 2007 rates have flattened off.

It is possible to hypothesize that enhancing coordination with other actors may be an especially attractive strategy for apparently poorly resourced services (and we return to this towards the end of

<sup>&</sup>lt;sup>28</sup> UNICEF, Ghana: facts at a glance, <a href="http://www.unicef.org/infobycountry/ghana">http://www.unicef.org/infobycountry/ghana</a> statistics.html, accessed 8 June 2015.

<sup>&</sup>lt;sup>29</sup> UNICEF Ghana Country Office, 2008.

<sup>&</sup>lt;sup>30</sup> UNICEF Ghana Country Office, 2013.

<sup>&</sup>lt;sup>31</sup> UNICEF Ghana Country Office, 2013.

<sup>32</sup> Interviews with public sector staff and civil society actors for this report; reported comments of BDR staff in UNICEF Ghana Country Office,

<sup>33</sup> Fagernas, S and J. Odame, 2013.

the report). BDR staff and many other persons interviewed for this research (and other studies) reported that the institution is inadequately resourced, both in terms of staffing levels and funds and equipment to do the job. One 2008 study claims that employment in the birth registration function was then some 64% the BDR staffing complement.<sup>34</sup> While the Greater Accra Region is relatively better off than other Regions, having 24% of all BDR professional staff (figures as of 2008), it is still perceived to be below complement.<sup>35</sup> A more recent study, however, suggests that given low staff productivity and multiple other challenges facing the BDR it is actually difficult to determine whether staffing levels are inadequate or not.<sup>36</sup> As regards resources, interviewees said registry officers had inadequate transportation to reach people across the districts and the registry sometimes even lacked registration forms, and that birth certificates were slow in coming from Accra also because of inadequate resources.<sup>37</sup>

The parental experience of birth registration services is not universally positive. A UNICEF study reports that a significant proportion of parents of unregistered children cite inaccessibility of services as the reason, particularly in more remote parts of the country. With people moving for work, the requirement to register children in the district of birth is a constraint, as is the charging of fees, whether legal fees for late registration or illegal and inflated fees charged by officials or "agents". Parents describe having to make multiple visits to offices, with associated travel expenses, to secure birth certificates because forms are not available, or information is not passed up and down the chain in a timely fashion – and this is confirmed by registry staff.<sup>38</sup>

#### **BASIC FINDINGS FROM FIELDWORK**

## Patterns of Interaction at the Local Level

Actors at the local level noted that working with other relevant organizations might improve their performance. However, interviews with individuals involved in the registration of children did not reveal as much interaction among actors potentially involved in birth registration as expected. Unsurprisingly, officials in the BDR reported the most interactions concerning birth registration, and other actors reported fewer – for some only two or three interactions, generally with the registry (see Table 2). The BDR constitutes virtually the sole point of intersection among all stakeholders. However, while registry officials had some particularly important contacts with some actors, other potential partners were involved only tangentially or not at all.

<sup>34</sup> UNICEF Ghana Country Office, 2008.

<sup>35</sup> UNICEF Ghana Country Office, 2008.

<sup>&</sup>lt;sup>36</sup> UNICEF Ghana Country Office, 2013.

<sup>&</sup>lt;sup>37</sup> The most obvious cause for the inadequate resources are meagre budgets for supplies and almost no budget for transportation. Salaries in the two districts were funded for the full year, albeit for a smaller number of employees than the nominal complement of the organization.

38 UNICEF Ghana Country Office, 2013.

Table 2: Patterns of Interactions between BDR Officials and other Actors in Birth Registration (Average Number of Interactions Reported by Respondent)

		Abokobi				
BDR Officials	Community Nurses	Community	Education Officials	Faith leaders		
		Volunteers				
11	9	7	2	5		
Ledzokuku-Krowor						
BDR Officials	Community Nurses	Community	Education Officials	Faith leaders		
		Volunteers				
12	9	5	3	3		

Interactions between registry officers and other public sector actors are limited overall and primarily involve the Ghana Health Service, especially community health nurses. These interactions are important for two reasons. The first is that as more women give birth in health facilities or attended by a skilled birth attendant,<sup>39</sup> it is efficient to bring the BDR into close proximity. BDR officials may maintain a registration office in hospitals to make this interaction easier. The second factor is that community health nurses are responsible for following up with children for periodic health and development checks (known as "weighings"), which are moments when numbers of potentially unregistered children may be gathered in one place. BDR officers (and registry volunteers, see below) were reported to sometimes accompany nurses on community visits to make use of their transportation and their access to children. Community health nurses were reported to encourage mothers to register their children, and sometimes to assist BDR officers in registration. In many communities, including those where this fieldwork took place, the Ghana Health Service has a strong volunteer cadre that, according to interviewees, has also been active in promoting birth registration.

Traditional birth attendants (TBAs) remain important in rural areas and the BDR has also made some efforts to train these actors in the importance of birth registration. TBAs were also reported to sometimes encourage new mothers to register their children, although their involvement appears highly variable.

Coordination with community health personnel has no formal basis – there is no formalized framework for partnership and collaboration between the BDR and the Ghana Health Service, and the health service has no mandate to support birth registration per se.<sup>40</sup> While a significant interaction for the registry in both districts, and apparently widespread elsewhere in the country, the coordination is locally negotiated and dependent upon the goodwill of the actors involved.

As regards other public sector actors, there was some interaction with staff of the Ghana Education Service (which also has no mandate to support birth registration) but significantly less than that with staff of the Ghana Health Service. The principal pattern of interaction involved schools attempting to

<sup>&</sup>lt;sup>39</sup> Nationally, the percentage of births attended by skilled birth attendants is showing modest upward progress: 52.2% in 2011; 55.6% in 2012; 55.0% in 2013 (data supplied by UNICEF Ghana from the Ghana District Health Information Management System).

<sup>&</sup>lt;sup>40</sup> UNICEF Ghana Country Office, 2013.

identify children who are not registered when they enter the education system, and attempting to place the parents in contact with the birth registration officials. Given this occurs after the first year of life, parents have to pay for subsequent registration. Further, even with information about unregistered children, BDR officials were reported to be unlikely to pursue them actively but rather to wait for parents to make the contact.

Neither the Ministry of Women and Children's Affairs (now the Ministry of Gender, Children and Social Protection) nor the Ministry of Employment and Social Welfare appeared in the data. The Ministry of Gender, Children and Social Protection regulates the operation of children's homes and, as described, is responsible for coordinating services to children and families (but has a limited field presence). The Ministry of Employment and Social Welfare has an extensive network of field staff, and is responsible for the social integration of vulnerable, excluded and marginalized persons. Like the Ghana Health Service, these ministries do not have a mandate for birth registration per se, but their professional responsibilities ostensibly make them logical potential partners for the BDR, facilitated at the local level through district governance systems.

In both districts, interactions between BDR officials and actors outside the public sector were for the most part more extensive than with those within it. These interactions were most importantly with volunteers – both the registry volunteers and to an extent with those working with the Ghana Health Service – with faith leaders and other local leaders in the community. In each district there appeared to be a substantial level of support for birth registration from civil society, and indeed in many ways it appeared that civil society and local staff of the Ghana Health Service were leading the way in the pursuit of higher levels of birth registration. As previously described, registry volunteers are integral to the functioning of the registration system. They appear to be important for monitoring the number of children being born, collecting birth registration information from parents and taking it to their district office, directing parents toward registration processes, and encouraging BDR staff to contact parents when there was a need for registration.<sup>41</sup> Faith leaders, both Christian and Muslim, appeared interested in supporting the activities of the BDR, but were somewhat critical of the registry for not reaching out more to ask for their involvement.

One set of civil society individuals who hardly appeared at all in the discussions of interactions were local political leaders, the district assemblymen. <sup>42</sup> These officials have some resources for their activities in their local areas, allocated through the Ministry of Local Government – the same ministry in which the Births and Deaths Registry is located – but several respondents noted that they were not visible in supporting birth registration. As described, District Assemblies have the responsibility to coordinate the action of government and NGOs on behalf of children at the local level.

None of the actors interacting with the BDR at the local level had much practical incentive to engage in active coordination. In the case of public sector actors, not only do they not have a mandate, but they have their own responsibilities and resource constraints. The BDR has relatively little to immediately

<sup>&</sup>lt;sup>41</sup> This observation came more from interviews with two volunteers in other districts than it did from the survey data. However, these roles were implied in the survey responses, though not explicitly stated.

<sup>&</sup>lt;sup>42</sup> This fieldwork was carried out in two districts only, so the behaviour of these officials may be different in other parts of the country.

exchange with other organizations within the public sector, at least at the local level, and even relatively little that it can officially provide its own volunteers. Thus, cooperation and coordination depend heavily upon good will and commitment to making the lives of the children better.

In the context of poor oversight, however, some volunteers (and officials) have created their own unofficial and illegal incentives by charging parents for their services, either as "agents" or to "accelerate" the process. <sup>43</sup> Given the official system does not always work as it should, individuals find ways to make it work for them. In some cases, "agents" are effectively commissioned by parents to go to the Births and Deaths Registry to register and obtain the birth certificate, for a fee. This may provide a partial boost to registration, but on the other hand not only is it illegal but it creates a barrier to birth registration for those who cannot afford to pay.

The presence of agents involved with the registration of children for a fee is to an extent indicative of poor internal oversight and control within the BDR. There appear to be few mechanisms enforcing accountability of local or regional officials. The emphasis on decentralization in the government of Ghana tends to devalue oversight from the centre, and, along with continuing underfunding of the registry, this severely limits capacity for control. This is a negative spiral – lack of capacity within the registry facilitates petty corrupt practices which in turn reduce the legitimacy of the organization.

#### **Initiation of Interactions**

Paradoxically, although BDR officers constitute the central node of the birth registration process, they were not the ones initiating interactions. Interviewees described how interaction with BDR officers came about primarily when other actors sought them out. Although the responses were not always clear, it seems that much initiation of interaction came from civil society actors rather than from the public sector (with the exception of the active role played by community health nurses). Registration volunteers and "agents" appeared to be particularly key players in promoting the registration of births and linking parents with the registry. Although apparently less actively involved in the process, some faith leaders and their organizations promoted registration and motivated parents.

Following from the above observations, and although not necessarily emerging from any stringent quantitative data, it emerges in the statements of interviewees (and from our own observations) that officials in the Births and Deaths Registry were relatively passive, and were perceived as waiting for parents to come to them. Outreach activities were seemingly mostly associated with the *ad hoc* activities of volunteers and joining activities of the Ghana Health Service, such as "weighings" or biannual child health promotion weeks. The BDR itself has limited resources or personnel to mount its own campaigns for registration, especially continuous activities to create an environment in which registration is perceived to be a normal action by parents. The exception to this is an annual Births and Deaths Registration Day, held every year since 2004.<sup>44</sup>

<sup>&</sup>lt;sup>43</sup> This appears to be a reasonably common practice, and was reported in some of our interviews. See also UNICEF Ghana Country Office, 2013.

<sup>&</sup>lt;sup>44</sup> Also, see Addo, K. A. (Principal Assistant Registrar), 2009, The Civil Registration System in Ghana/Coordination among the Registration, Statistics and Health Sectors.

Given the apparent shortage of resources, local BDR officers not investing heavily in outreach activities is understandable. However, the passive attitude toward their role appears pervasive among local registry officers. Their behaviour is "formalistic", following the letter of the law in terms of filling out registration forms and filing them, but not fulfilling the spirit in actively ensuring that children are being registered. These officials appear, therefore, to be behaving in a rather traditional bureaucratic manner rather than focusing more directly on serving their clients and becoming agents for social change. The passivity of the registry officials to some extent explains the significance of "middle-men", "agents", and corruption in some aspects of service provision, a perversion of the community volunteers. This pattern of operation has become institutionalized, and may feed back into further low levels of direct activity by local officials.

#### Three Nodes of Interaction

What the research revealed was that the practical implementation of birth registration at the local level involved three major nodes of interaction. The main node was defined by the official role played by BDR officers, with all registrations actually coming through them. As might be expected, there was one actor in the centre and others connecting to that single node, in other words a "star" pattern, which in part reflects the formal mandate for registration. But what the mapping of interactions also revealed is that two other informal nodes are also important, even if the range of interactions was more limited. One was defined by the role of the community health nurses who interacted frequently not only with other public sector actors but also with the volunteers and ordinary citizens. The other node was that defined by the role of community volunteers, some of whom were "middlemen" or "agents" who used the inadequacies of the formal system for their own gain.

We might find a somewhat different pattern if the coordination process were visualized as centered on the child itself. In the first place, such a diagram would include the parents more centrally as to some extent controlling other interactions affecting the child. In addition, such a conception of interactions would emphasize that the ultimate purpose of the registration is to serve the child and not to serve the BDR. That said, after the first stages of the process the pattern would be virtually identical.

#### OTHER PATTERNS AT THE LOCAL LEVEL

In addition to the fundamental findings about interactions in local implementation, there were additional findings that help to illuminate information on interaction and coordination. These mainly concerned the quality of information held by actors in the process (including parents) and data concerning the perceived quality (and perceived changes in it) of the work of the Births and Deaths Registry.

http://siteresources.worldbank.org/INTHSD/Resources/376278-1114111154043/1011834-

<sup>1247677403598/060909</sup>TheCivilRegistrationSystemGhana.pdf, sourced 8 June 2015.

<sup>&</sup>lt;sup>45</sup> Several respondents to the survey expressed, albeit very politely, some frustration with the BDR officials because of this passivity. The sense was that BDR officials were mainly orientated towards registering those who walked through their doors but did little to go out to find children and parents who needed their services.

<sup>&</sup>lt;sup>46</sup> Interviews by Guy Peters in the area around Takoradi, albeit not systematic, support this conclusion.

## **Importance of Knowledge and Commitment**

One issue that numerous respondents in the two Districts argued inhibited higher levels of registration was the absence of information among the general public. While interviewees said that registration is important for the future life chances of the individual child, many commented that some parents did not understand this and that therefore did not ensure registration. The survey contained responses from some parents who were cognizant of the importance of registration, but who commented that they thought that many other parents in the community were unaware of its significance, while understanding the process of registration and the role of the Births and Deaths Registry.<sup>47</sup>

A number of respondents, notably leaders of faith-based organizations, traditional birth attendants and community health nurses, noted that they were disseminating knowledge about the need for birth registration to the public. However, in coordination terms there was relatively little direct effort on the part of BDR officials to support the activities of non-governmental actors nor, as described, could they provide any significant incentives to coordinate (except, it would seem, through tolerating malpractice). Neither did these interviewees see BDR employees as being active in spreading the word on the need for registration. The apparent passivity of the BDR in waiting for parents to come to them appears to represent a barrier to the effectiveness of the organization.

The clarity of the regulations for birth registration was another aspect of the information dimension. The interviewees, including parents and community activists, were in agreement that rules for registration were clear and seemed to be understood by the participants in the process. Thus, the major information task for BDR is to inform more of the population about the need for registration and to convince them it is significant for their children's future. The one group that was not as well informed on procedures for registration were traditional birth attendants, who could play a more important role. This is true especially in remoter rural communities outside urban areas where traditional birth attendants are likely to be assisting in a higher proportion of births and information and access is likely to be restricted.<sup>48</sup>

## The Practical Significance of Birth Registration in Ghana

This all, of course, raises the question of what precisely is the experienced practical significance of birth registration in Ghana. While a form of documentation that strongly contributes to child protection, the concept of protection in a formal sense may seem somewhat abstract to many parents, few of whom are likely, like parents in all countries, to perceive their children as being "at risk". With multiple registration and personal identification systems existing, the immediate practical significance of birth registration may appear somewhat limited. As described, a birth certificate can be used to get a national identity document, to register to vote in presidential, parliamentary and local elections, to

<sup>&</sup>lt;sup>47</sup> These observations came from a far from random sample of parents who were contacted in the local communities during the interviewing of the BDR officials. However, larger survey involving parents for the UNICEF Ghana Country Office bottleneck analysis reports that lack of awareness was only identified by 12% of parents as a reason for not registering children (UNICEF Ghana Country Office, 2013). The apparent contradiction may be that our informants distinguished between awareness of the birth registration process and awareness of the significance of birth registration.

<sup>&</sup>lt;sup>48</sup> Issues of Registry accessibility did not emerge significantly in the two Districts, but other studies (e.g. UNICEF Ghana Country Office 2013) suggest that in remoter areas this is a major issue.

access LEAP, or to obtain a driving license, but it is not absolutely required – other means of establishing identity, such as statements from traditional leaders in villages, are possible and legally valid.

As already noted, in principle birth registration is also important for society as a whole, not least for the contribution it can make to data for planning. However, in discussions with BDR officers and other officials at both community and national levels, there was virtually no mention of planning or the contribution BDR data could make to planning functions at both central and decentralized government levels, despite this being a stated objective of birth and death registration.<sup>49</sup>

The question is whether this is a problem of supply, demand or both. That is, do planners recognize that they need birth (and death) data on a closer to real-time basis than they are receiving, or has the BDR not been able to supply the necessary data on a reasonable basis in terms of timeliness or accuracy, undermining planner interest in birth and death data?

The utility of BDR data was recognized by the Ghana Statistical Service who reported that it has an interest in obtaining complete population information, describing itself as another potential conduit for information from the birth registration process into government decision-making. The GSS was interested in promoting more complete birth registration but did not have resources to invest in it.<sup>50</sup> However, the fact that other government departments were not forthcoming on the utility of BDR data suggests that in practice limited proactive coordination is taking place at high levels between the BDR and other government departments.

## **Perceived Quality of the Registration Work**

All interviewees in the study were asked to assess the quality of the birth registration process now in operation. Responses were not generally positive. Few respondents thought that the current performance of the Births and Deaths Registry was what it should be. Indeed, even members of the Registry itself did not have favourable opinions. These perceptions, of course, correspond with the fact that only two-thirds of Ghana's children are being registered, and even fewer in Ga East, one of the districts where fieldwork took place.

Although generally not positive about performance, many of the respondents (not just BDR officers) noted some improvement in services provided by the BDR. These were mainly in terms of cooperation with volunteers in the local communities and their role in pushing forward registration among the citizens with whom they interacted. As described, however, this perception was not sustained in relation to initiatives undertaken or cooperation with other potential partners.

#### **Reasons for Perceived Weaknesses in Registration Efforts**

Respondents were asked to identify what they considered the major problems in birth registration as the process now exists in Ghana. Even respondents who believed the process was improving identified

<sup>&</sup>lt;sup>49</sup> Government of Ghana (2008).

 $<sup>^{50}</sup>$  Interview with Dr Philomena Nyarko, Government Statistician, Ghana Statistical Service, Accra.

problems, most of which, they said, stemmed from inadequate resources. Some of the perceived failures had to do with performing the very basic functions of the office. Local registration officials described at times not having the forms necessary to register children, and having had to tell parents to come back on another day. Lack of transportation was said to cause delays in getting information to the Central Registry Office in nearby Accra in a timely fashion. This obviously impacts on the issuing of birth certificates and on the generation of useful data for planning purposes. Limited means of getting around within districts was said to create difficulties in working with others, even with registration volunteers. BDR officers described only being able to travel to events or locations supporting birth registration when there were places on buses or in vehicles being driven there by the Ghana Health Service. While the computerization of the registration system will eliminate some of the transportation needs, full implementation of a computerized system appears far in the future. Travel allowances and other small expenses for volunteers are not paid in a timely manner. The head office in Accra sometimes did not have sufficient blank birth certificates to issue them promptly.

#### **BACKWARD MAPPING IN COORDINATION OF BIRTH REGISTRATION**

These basic findings from the fieldwork indicate that while there is informal coordination and interaction between the BDR and other local actors, this is not as intensive or far-reaching as it could be. Local BDR officers are relatively passive and have limited contacts with other potentially relevant actors. As described, their most frequent coordination is with staff of the Ghana Health Service and community registration volunteers who appear to be the main initiators of practical interaction for specific instances of birth registration. There is some additional interaction with faith leaders. Virtually all the actors interviewed – both public and private – agree that more interaction and coordination would improve the level of birth registration of children, but so far do not seem to have managed to produce that interaction.

## **Identifying the Issues**

Several questions therefore emerge from the findings at the district and sub-district level. Backward mapping, looking further upward within the governing system, as well as outward to other organizations that have some influence over how the BDR performs its tasks, helps answer these questions. Some of the deficiencies in registration noted in the initial part of this report are very local and can be understood in that local context, but there were also five clusters of systemic issues that can be better identified and understood by examining the vertical and hierarchical connections between the local level and the centre of government, and by looking at horizontal coordination at the federal level.

#### **Planning**

How can economic and social planning be done effectively when inadequate (both in terms of timeliness and coverage) information on births (and deaths) is being produced through the BDR? At the national level, planning currently is mainly based on census data that is outdated and often

<sup>&</sup>lt;sup>51</sup> In a number of instances UNICEF has printed the necessary forms so that the process of registration could continue when budgets had been exhausted.

insufficiently fine-grained to function as a sound basis for planning. Planning in 2013, for example, used 2010 census data. In other words, the estimations on which planning, and the statistics on the percentage of children being registered, are often out of date and inaccurate.

Interviews with local and central government planners indicated that the absence of reliable information on births constitutes a barrier to being able to prepare either general economic plans or more targeted plans for localities. These respondents were clear that there was a demand for such demographic information from planners (including those in health and education) and that this demand had been expressed to the Births and Deaths Registry. Respondents at the Ministry of Education were concerned with the absence of information that they needed for planning for schools, but other organizations in government also expressed the need for information on births and other population changes.

However, respondents in the BDR, both at the local and the central level, could only be described as apparently indifferent to the data needs of other organizations. This is unfortunate from the perspective of a possible data contribution to national development planning. From the perspective of the BDR itself this seeming indifference is also unfortunate, because making important data available could improve the political position of the registry.

The consequences of indifference to the data needs of others are evident, but the causes of it are less apparent. It could be that information sharing might strain an already weak structure for information management. However, the most plausible reason derived from interviews at all levels is that staff of the BDR, from the top to the bottom, appear to believe that they have no real incentive to coordinate with planners. A number of interviews, as well as listening to participants in the validation meeting, made it clear that the majority of the employees were behaving in a stereotypically bureaucratic manner, following the rules but doing little beyond the formal requirements of the position.

#### Resourcing

The perception of inadequate resourcing appears to be based on reality, contributing to problems of both horizontal and vertical coordination. At the time of fieldwork the BDR had fewer than 400 employees, including support staff, against a complement of over 700. The seeming indifference to demands for information and to demands for improved service to parents and children may be related at least in part to the absence of adequate funding and staff.

The question therefore becomes why the Ministry of Finance, and the Government considered more generally, does not fund the Births and Deaths Registry adequately? Also, why does the registry not have the right to retain at least a part of the funds it collects, as some other organizations in the Ghanaian government are permitted? Again, these findings and the questions that they prompt require us to look backward into the rest of government to attempt to understand the priorities of actors.

The issue of the retention of fees is contentious. Some informants in the BDR argued that in some important ways the Ministry of Finance does not have a strong incentive to better fund the registry.

Given that funds coming from late registration go into the Consolidated Fund, promoting more effective registration in the first year would reduce government revenue. However, another perspective was that allowing the BDR to retain fees received for late registrations would provide it with an incentive not to register children in a timely manner. The right to retain fee money received was a resourcing solution suggested by many registry staff, but in the end this might produce negative results if introduced.

Another factor which arose in examining the financial basis of birth registration births was that performance measures for local government budgets are almost entirely process-based rather than outcome-based. That is, districts are assessed on whether they turn in their papers on time but not on the level of services provided. Thus, the incentives are not aligned in ways that might produce greater concern for the actual performance of government.<sup>52</sup> Although it would be difficult to penalize poorly performing districts, attempts at even modest reforms for district offices that could produce higher levels of registration might provide some incentive to improve performance. There may be means through which local governments could provide additional benefits for their local offices if performance is improved.

## Policy coordination

The level of policy coordination at the local level is low. The coordination that does exist is carried out primarily on the basis of personal rather than organizational linkages. When looking at the interactions of the major actors vertically, it is clear that the absence of coordination is systemic, rather than a peculiar feature of the service delivery level. There appears to be little central direction from government organizations that might be expected to attempt to coordinate action on behalf of children. This raises questions about the role of ministries and central agencies that should be pressing other organizations to provide more effective services for children. Perhaps most particularly, why is the Central Registry of BDR and the Ministry of Local Government and Regional Development not more active in promoting linkages with other government organizations?

One issue is that coordination in general in the government of Ghana is low. Many interviewees at all levels recognized that the government was managed within ministerial "stove pipes" and there was little collaboration across departments. The National Development Planning Commission was one of the few organizations encountered during the interviews that appeared directly concerned with enhancing coordination in social services and child protection. In particular, its Cross-Sectoral Planning Groups attempt to look broadly at policy issues that affect a range of different organizations within government. The Human Development Planning Group is especially relevant for children, and includes both State and non-State actors. Paradoxically, one thing that it lacks is adequate information, especially demographic data including birth rates, on which to base its plans.

Respondents at the Ministry of Education also expressed concern about their ability to coordinate with the BDR, pointing out that they collaborate effectively with other ministries such as Health, Labour (on

<sup>&</sup>lt;sup>52</sup> It must be noted, however, that measuring performance is difficult for many public programmes, and the measures used often create other perverse incentives for service providers (see Bouckaert and Peters, 2002).

child labour issues) and the Ministry of Gender, Children and Social Protection. One important collaborative initiative has been the implementation of a "Child Friendly Schools" initiative, but there has been little contribution of the BDR to the creation of this approach to improving the lives of children.

The specialized structure of government in Ghana (and in other countries), tends to make coordination and collaboration more challenging than it might otherwise be. One senior respondent at the Ministry of Education noted that Ghana's democratic structure and its accountability system tend to make coordination difficult. It appears that structures that should be coordinators within the system are not interested or effective. The Ministry of Finance, or its analogues, are often the most important coordinators in government. In Ghana, however, the ministry appears overloaded with tasks, including economic planning, that drive out coordination. Likewise, the Ministry of Gender, Children and Social Protection, which should play a major role in coordinating programmes for children, appears to be a relatively weak ministry in which the importance of the social protection function appears to overwhelm other tasks, so that issues such as birth registration appear to be of lesser importance,

The Ministry of Finance and the Ministry of Gender, Children and Social Protection have coordinating responsibilities in relation to children and/or development, but coordinating functions in the Ministry of Local Government (government and NGO activity), planning agencies, the District Assemblies and even the Cabinet appear to have potential to overlap. An issue is whether civil (birth) registration is identified as contributing to the wider issues on which these bodies lead coordination, and therefore whether it is affected by their activities. In the context of formal coordination, unless responsibilities are clearly defined having many institutions with coordination roles can create risk of contradiction. However, in Ghana it appears that birth registration is a relatively low priority for government. Paradoxically this may reduce risk of contradiction between formal coordination bodies.

#### Mechanical performance

Much of the discussion of birth registration in Ghana among local and regional BDR officials is done in terms of civil registration as an almost mechanical exercise rather than as an activity to promote the well-being of children. While staff clearly have essentially bureaucratic tasks to perform, the broader implications of their actions and its link with other aspects of family and children's policy appear absent. Why has this disjuncture among programmes developed and how can it be remedied? In particular, what factors in the structure of government and in the interactions of organizations and individuals produced this conception of birth registration? Why does this organization, one that should play an important role in the lives of children and families and for the economic planning and development efforts of the country, appear to have such low morale and to be poorly regarded by the rest of government?<sup>53</sup>

<sup>&</sup>lt;sup>53</sup> Low regard for the Births and Deaths Registry was evident among numerous respondents, both at the community level and at the higher levels within government.

As already noted, staff of the Registry are considered passive by other respondents at the community level, who wondered why they did not leave their offices to go where unregistered children might be found. One reason given by interviewees at the district and regional level is the eminently practical one that if staff leave their offices there is no one there to do a registration should a parent come in.<sup>54</sup> Further, as described, they do not have the vehicles or fuel necessary to go out into the districts, especially in more geographically dispersed areas. There may, therefore, be some very clear reasons for low levels of activity and morale within BDR. There is something of a negative spiral in which poor morale produces poor performance that produces a negative image and poor funding for the organization, which in turn accentuates the morale and performance problems.

When respondents at all levels of the BDR and in other organizations were asked about morale and performance issues, one common response was that there were leadership problems within the registry – seemingly from the top to the bottom (with a few notable exceptions). It was claimed that little had been done to motivate staff, especially in the face of other challenges affecting the BDR that could reduce morale. Recent changes at the top of the organization are hoped to auger well for improvements. In addition to leadership to promote morale, there is need for strong internal oversight to ensure adequate performance and to reduce petty corruption.

## Multiple personal registration systems

Looking backward into the administrative structure of the government also points to another coordination and redundancy problem – the existence of multiple identity and registration systems. While birth registration does provide one foundation for identity, there are a range of other registries such as a national identity card, social insurance, health insurance, and the electoral roll. While this is perhaps not directly a problem for birth registration *per se*, the multiple systems tend to devalue the birth registration system, as well as creating confusion and extra costs for citizens. Creating a single civil registration system, with birth and death registration at its core, would both facilitate the national identity system and enhance the practical significance of birth registration.

## **INCENTIVES FOR COORDINATION**

The above description of deficiencies in birth registration and coordination within the system leads to a very basic question about the incentives for actors involved to coordinate their activities. There is, of course, a moral incentive for all actors to coordinate on behalf of children, but beyond that are there any reasons why individuals and organizations involved in registering children should invest time, energy and resources to work together with others? Is birth registration sufficiently useful for parents, especially parents in remote parts of the country, to see it as an issue to which they should allocate time or money?

As has been noted throughout this case study, the BDR would logically seem to have multiple incentives to coordinate with other organizations in the public sector and with private sector actors.

<sup>&</sup>lt;sup>54</sup> This justification was also given a number of times when discussing issues concerning registration at the validation meeting in Accra on 23-24 April 2013.

For the organization to provide the service of birth registration to many children it must depend upon the assistance of other actors. But the need for coordination is deeper than this: the analysis of interaction shows that positive coordination with other actors, especially but not exclusively at the local level, is actually essential for birth registration performance to improve. Furthermore, weak coordination higher up the system creates barriers (through lack of formal agreements and support) that undermine implementation at lower levels.

However, the incentives for other actors who could assist in birth registration are much less clear. Coordination often involves exchange, and the BDR has relatively little to bring to the table that other organizations in government immediately need, especially at local and regional levels. As described, the principal exception to this is the need for accurate and timely information on the part of social and economic planning units that now have to rely largely on census figures. The Ghana Health Service and the Ghana Education Service could benefit from an effective registration system not only for accurate information but also as a means of determining eligibility for services. But having had to function without that information for years, they appear to see little to gain from coordination in other than very basic ways, such as providing locations for BDR in health facilities and in periodic events such as registration campaigns. The incompleteness of data from the BDR means its utility in planning is not as it should be.

As described, the system of birth registration also depends on coordination with and assistance from actors in civil society. Again, the moral incentives are crucial for many of these actors as the BDR has little else to provide. As described, many community registration volunteers are reported to "burn out" after several years of working on behalf of the BDR (and their local communities) but getting little in return. Charging illegal fees for services is an incentive for some, and this may give a superficial boost to birth registration. However, in the absence of other supporting processes, charges create disincentives especially for poor parents, undermining the system in more fundamental ways. Indeed, given the barriers to registration that exist and the absence of any really unique use for a birth certificate, it is actually difficult to see why many parents would bother to register the birth of their children.<sup>55</sup>

Although exhaustion of interest does not appear to be an issue for the faith-based organizations, they still have little to gain from coordination with the BDR. Traditional birth attendants cooperate more closely with the Ghana Health Service than with the registry, although they could be an excellent source of information about births in a community.

Vertical coordination within the BDR suffers from many of the same problems. There are few resources that the central or regional offices can use to promote more effective coordination with lower echelon officials. The only resource that the lower level officials have is the information gathered in their district. As this is the basic "product" of their activities, it is not a special resource that can be used to gain cooperation from above. However, as described, this is also an issue of

<sup>&</sup>lt;sup>55</sup> Issues like accessibility are worse in more remote areas than they are in Greater Accra and were found by a 2013 UNICEF study to be a major barrier (UNICEF Ghana Country Office, 2013).

effective management and oversight within the registry. At the moment, the organization tends to act in a rather formalistic manner, rather than developing internal patterns of exchange that could facilitate coordination.

#### **BARRIERS TO BIRTH REGISTRATION IN GHANA**

This research has also identified a series of barriers, or bottlenecks, limiting the effectiveness of the birth registration process in Ghana. Many of these are also barriers to effective coordination, or result from them. While identified in Ghana such constraints are likely to have relevance in other settings.

The most important barrier to effective coordination appears to be the inadequate resourcing of the Births and Deaths Registry. The organization responsible for registration lacks the resources to perform its tasks effectively. In particular it lacks the resources to engage in more active outreach efforts such as more regular registration campaigns that might be able to increase levels of registration more significantly.

A second major barrier arises with the management of the BDR and its use of the available resources, especially its employees. The employees of the BDR in general appear unmotivated and passive in dealing with the task of registering children. They seem willing to register a child if the parent(s) arrive at their office or at a "weighing", but do little to seek out children who should be registered. While some of this inertia can be explained by not having resources (for example, transportation) that could facilitate a more active approach, the generally low morale is also a factor in the lack of initiative in the exercise of these tasks. The lack of active efforts in registration provides more space for "middlemen" who facilitate birth registration for a fee.

The lack of motivation among the employees of the BDR can be linked in part to the low priority attached to this organization within the government. That low priority is reflected in the poor funding for the organization, but also in the failure to coordinate vertically and to integrate the activities of BDR with other organizations for which its information could be useful. The organization appears to be left on its own to perform its tasks without much involvement with other parts of government. In theory, the organization can produce useful information for the rest of government. However, at the moment that data is incomplete, which renders its utility to others limited.

Finally, although responsibility for many of the problems encountered in birth registration in Ghana can be assigned to government, there are also demand-side issues among the population that tend to hinder improving rates of birth registration. The most important of these is that it appears that many parents do not assign much importance to having the birth of their children registered, and can identify little benefit in going through with the process. This lack of awareness may be in part a function of the failure of government to spread information on the importance of birth registration. On the other hand, it may be a function of the fact that in immediate practical terms there is little that a birth certificate offers that cannot also be secured with other forms of evidence of identity. Should education and other public and private programmes begin to attach greater importance to birth registration that motivation for citizens may be increased, but at present motivation among the public in the two districts where fieldwork took place itself represents something of a barrier to improving

registration rates. Looking at this in another way, lack of immediate practical incentive is a barrier to the most basic element of all in coordination as related to birth registration – that between parents and the Registry.

#### **POLICY AND GOVERNANCE OBSERVATIONS**

The above findings indicate a number of difficult issues within the process of implementing birth registration. The fundamental finding is that there is a good deal of negative coordination among public sector actors around birth registration in the two communities, but little positive coordination. That is, the various actors involved seem to know what each other is doing and do not present obstacles to registration, but neither do they do much to positively assist in making this service more effective. There are numerous opportunities for greater cooperation among government and non-government actors that are not being taken up, with negative consequences for birth registration.

This general finding and the various policy and administrative issues associated with it generates several suggestions about restructuring processes and reforming other patterns of behaviour related to birth registration. While this research began by examining issues of coordination among actors at the local level, the findings range more broadly and relate to the operations of the entire Births and Deaths Registry.

- 1) Extra investment in the BDR and continuing and intensifying the campaign style of approach credited with increasing rates between 2003 and 2007 would enhance birth registration rates, especially if the BDR in remoter areas was better resourced. However, what this analysis suggests is that without other reforms relating to enhancing coordination possible gains would still not reach anywhere near 100% birth registration.
- 2) If the BDR is to be the centre of implementation structures, as it should be, then the members of the organization need to be energized and empowered to be more active in the process. Increased activity will involve improved oversight at all levels, cultural change within the organization and some substantial injection of resources. In particular, efforts should be made to ensure that funds make their way to the lower levels of the registry.
- 3) Linkages between the BDR and the planning activities of government are missing. Not only is BDR's demographic information potentially important for planning, but linkage may strengthen the registry politically and improve its fiscal bargaining position. It appears that much of government does not attach as much importance to birth registration as it might in theory merit, perhaps because at the moment the level of birth registration is not sufficient to give the data it generates real time utility for planners. Nevertheless, demonstrating the importance of birth registration for society as a whole as well as for individual children may build a support base for the registry.
- 4) Integrating the various actors involved in birth registration at the local level would contribute to effectiveness. The current arrangements depend heavily on the informal actions of numerous individuals, seemingly with little effort to organize their involvement. While it is never possible, or even desirable, to remove the individual dimension involved in interactions, more systematic

attempts to coordinate and to involve the local community would be desirable. The Central Registry Office should seek to establish formal protocols for coordination with the Ministry of Health and the Ministry of Education, and to explore the potential for coordination with the Ministry of Gender, Children and Social Protection and the Ministry of Employment and Labour Relations. While mandates are no guarantee of success, some legal backing might encourage greater cooperation. Such arrangements negotiated at the central level would also require mechanisms for implementation at lower levels of government.

- 5) There should be renewed emphasis on the registration of children in the first year of their lives. Paradoxically, there are currently distinct financial advantages to the BDR (and to the Ministry of Finance) not to invest heavily in registering newborns. However, there are advantages for parents and children if the registration is made as close to the time of birth as possible. There are also important societal benefits from being able to monitor population changes more effectively. The requirement to register children only in the district of their birth should be reassessed.
- 6) Some additional training of traditional birth attendants may help increase the level of birth registration. These actors are aware of the importance of birth registration but do not appear knowledgeable about the procedures for registration, or even the locations of registry offices. Training could pay dividends in increased registrations with a minimum investment of time and resources.
- 7) The process of birth registration appears cumbersome and centralized. Particularly with available information technology it should be possible either to remove some of the steps involved, or to decentralize the issuing of birth certificates to districts or regions. This could save money and reduce some of the delays that appear to provide fertile ground for "agents" and "middlemen" to make money from what should be a free public service.
- 8) From an international perspective, there is no single location in government systems for civil registration and vital statistics, nevertheless the location of the BDR in the Ministry of Local Government and Rural Development is relatively unusual. In some countries civil registration may be implemented by a free-standing constitutionally-enshrined body with autonomous status. In others it may be part of a Home Affairs Ministry, or located in the Ministry of Health or its equivalent. The health sector has a particularly strong need for functional CRVS systems, <sup>56</sup> giving Ministries of Health a powerful incentive to strengthen registration. In the Ghanaian context of growing numbers of women giving birth in health facilities and the successful regime of post-natal care, linking registry offices to health services makes practical supply sense. In the case of Ghana, the Ministry of Local Government and Rural Development is a relatively low status ministry, while other ministries appear to enjoy higher status and better funding. Moving the function within government might improve its capacity to perform.

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<sup>&</sup>lt;sup>56</sup> WHO, 2013.

9) The multiple forms of registration existing in Ghana – in addition to births and deaths separate systems for marriage, divorce, and adoption – and the fact that a birth certificate is not necessarily a requirement to obtain an identity card or to access other kinds of service does little to incentivize birth registration. These multiple systems raise two questions. The first is that the government should consider whether these various parallel systems can be better aligned in a way that could both facilitate service provision and reduce costs to government. Having a unique identity number would facilitate providing services, as well as integrating closely linked services. The second is that attempting to formally link some aspects of health care and perhaps education to birth registration may strengthen the position of the BDR and also promote greater coordination, even at the local level. This, however, is an issue fraught with dilemmas (and implications for children's rights). Is it appropriate to attempt to make birth registration more attractive by linking registration to the realization of other children's rights when, at the moment, the Registry is not reaching one third of children each year, and there remain significant barriers to registration especially for the poor or in remote areas?

## **CONCLUSION: BACKWARD MAPPING AND COORDINATION**

#### What does the backward mapping method bring to this study?

Beginning with behaviours and outputs at the lowest level of government and mapping backward from there uncovered patterns that have systemic consequences as well as systemic causes. The empirical identification of interactions at the local level gave a picture of the actual coordination involved in direct implementation. The method rapidly moved beyond issues of formal linkages to looking at what people actually do. Tracking back through higher levels in the administrative and policy hierarchy enabled analysis of how vertical and horizontal coordination at higher levels do or do not contribute to outcomes and to each other.

Findings at the local level helped to identify general patterns of inadequate coordination – both formal and informal – affecting birth registration at all levels of the government. Working backwards through the horizontal and vertical networks which start with local level registry officials quickly identified a lack of connections with potential allies and only informal connections with persons working with the registry.

While the significance of registry volunteers was clearly recognized before the study, backward mapping focused attention on the consequences of the failure of oversight and inadequate resourcing within the registry (petty corruption as both a facilitator and a barrier to birth registration). Moving up through the hierarchy indicated that lack of formalized coordination at high levels contributes to poor performance at the point of service delivery.

#### What does the focus on birth registration reveal about coordination?

One of the more important findings relative to coordination is that it does not happen simply because it is needed, or would be beneficial. Rather coordination, even at the local level, requires an investment of time and energy, and perhaps also more tangible resources. This tends to support Matt

Andrew's view that the clear outputs inherent in birth registration combined with the necessary interaction involved in making it happen make birth registration rates a powerful governance indicator.

Earlier, it was hypothesized that enhancing coordination with other actors may be an especially attractive strategy for poorly resourced services. What the findings of this study suggest is that after a certain point inadequate resourcing is a major barrier to effective coordination.

The point above leads on to the importance of leadership. Although a number of issues contribute to producing generally poor performance in birth registration in Ghana, the impact of absence of effective leadership within the organization at multiple levels is apparent. This is true in attempts to produce linkages with other organizations, but it is also apparent in the absence of internal coordination and control. As noted several times throughout the paper, no matter how valuable coordination may be, it does not occur on its own but requires active involvement of members of an organization, especially those in leadership positions.

Much of the study of coordination emphasizes hierarchy and the coordination that can be developed using the power of actors in the centre of government. The emphasis on scrutiny of coordination at the lowest level of government in this study demonstrates not only that this level can be effective in producing coordination but also that it can, if sufficiently well developed and empowered, overcome some (but not all) weaknesses at the centre. Having said this, weaknesses in coordination at higher levels impede the solution of operational difficulties at lower levels. Interactions do not necessarily lead to effective coordination, if there is absence of leadership in networks and the absence of resources to motivate actions. Therefore, to understand how coordination and service delivery actually function, sufficient attention must be paid to the structures and actions of all levels of government.

A key message for development practitioners is that analysis of formal coordination mechanisms involved in the implementation of programmes is only part of the story. Informal processes at the point of implementation are not only revealing but fundamentally important for understanding how a system works and how it can be strengthened or reformed.

## What does the study of coordination reveal about birth registration?

While the BDR is formally responsible for registration and is performing that task, focusing on coordination underlined that it cannot fulfil its mandate without coordinating with others. This is not just a description of the status quo, but a systemic issue facing the Registry in the quest for sufficient resources and opportunities to reach out to the public. Arguably, extra resources allocated to the BDR will not solve the challenges it faces to reach 100% birth registration unless these are linked to improved oversight (vertical coordination within the registry, leading to more effective coordination at the point of service delivery) and formal coordination with other major actual or potential players at higher levels (for example, the Ghana Health Service, the Ghana Statistical Services, and the Ghana Education Service), lending formal support to enhanced interaction at the local level.

The study identified a general lack of coordination and collaboration at all levels of government concerning birth registration. As indicated above, the Births and Deaths Registry is not well connected to other organizations such as the Ministry of Health and the Ministry of Education which could be important partners in performing its tasks. It does not appear to have any appreciable influence with the Ministry of Finance that could improve its funding. It seems that possible partners such as the Ghana Statistical Service would be willing to collaborate but are faced with an apparent lack of interest on the part of the BDR.

Considering the nature of informal as well as formal coordination revealed that actual action was largely initiated by actors other than the registry itself. Local registry officials were identified as largely passive, waiting for people to come to them. This reinforces the importance of civil society actors in the governance of birth registration, notwithstanding the current challenge of petty corruption involved in some of this.

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#### **APPENDIX 1**

## Research Protocol for Study of Coordination and Governance

We are interested in the manner in which births and deaths are registered in Ghana. Birth registration is a crucial first right for children, but at present in Ghana only approximately two thirds of all children are now registered during the first year of their life. We therefore need to understand what the barriers to effective birth registration are, and also what might be done to improve the outcomes for children.

This research is sponsored by UNICEF. We will not identify you by name, and the results will only be used for statistical purposes.
Name Position
I. What part do you play in the registration of children in this district? (Describe)
A. If respondent is a government official: (IF NOT GO TO B)
1. During the past two years do you think the process of registering newly born children has become more or less successful? Why?
Probe for examples, illustrations
2. (For BDR) What resources do you have available to do your job? Are they adequate?
(If not, what do you need?)
(If not BDR) Do you think that the Births and Deaths Registry has sufficient resources to do their job adequately?
3. Do you have clear guidelines on how to register children?
Probe for ease of implementing the guidelines and any practical revisions to existing guidelines
4. Who else do you work with in Registering Children? (get names and positions if possible)

a. In the public sector?

b. In other sectors of society?

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(For each individual or organizations named, how do you work together?)
(Also, how often do you interact?)
(Also, who initiates the interactions?)
(Do you have any difficulties cooperating with this individual/group?)
If so, what?
If not, then why does the cooperation work well?
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(*If faith-based organizations not mentioned ask specifically about them*)

- 5. What other individuals or institutions are you aware of who register births?
- 6. What do you think are the major problems now encountered in birth registration?

(Try to get answers about problems in the community as well as in government)

7. What is your opinion on the involvement of community actors in birth registration?

## B. If respondent is not a government official

- 1. What role do you play in early birth registration?
- 2. How do you interact with the Births and Deaths officials?
- 3. Who else do you think is important in registering children in your district? (*Get names and positions if possible*)

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(For each individual or organizations named, how do you work together?)
(Also, how often do you interact?)
(Who initiates the interactions?)
(Do you have any difficulties cooperating with this individual/group?)
If so, what?
If not, then why does the cooperation work well?
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4. How can non-government actors be more effectively involved in the process of registering children?

(If needed, probe with categories of parents, community groups, religious groups, local leaders, schools, etc.)

## C. For All, What Should be done to improve the process of birth registration?

(If they give answer about government, ask about role of parents and community, and vice versa)

# THANK YOU FOR YOUR COOPERATION

# To Interviewers:

After each interview ask yourself:

What did you learn from this interview?

What else do we need to know about this issue?