

ASSESSMENT OF VITAL REGISTRATION SYSTEM IN NIGERIAN RURAL AREAS: A CASE OF KWARA STATE

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ABSTRACT

This paper examines Vital Registration System (VRS) in rural areas of Kwara State, Nigeria. Vital registration is one of the main sources of demographic data which has often been used for population estimation. However, it has often witnessed low patronage of people from the rural areas. In this study, data on vital registration were generated from respondents in the study area, using questionnaire administration. The data were analyzed with simple percentage and presented in tables as well as figures. From the analysis, 77% of the rural people registered their births, while 78% of their deaths were not registered. The study also revealed that most (86%) respondents registered in hospital against the primary registration centres-National Population Commission offices nation-wide. In addition, the study observed that 76% of rural people are aware of vital registration. Despite this, the area has low death registration. Thus, the study recommended that vital registration especially on deaths should be made free and compulsory.

Keywords: Population Data, Vital Registration and Rural Area

INTRODUCTION

The importance of population data for planning has often been stressed by demographers, economists, geographers and other users of population data. In many countries, especially the developed countries of Sweden, Germany, Japan and United States of America, among others, population data are usually collected through the direct (census) and indirect methods. However, in many developing countries, collecting population data through the census has remained a difficult task. It is common in some of the developing countries not to collect population data through the direct method for more than 50 years. A case of this transpired in Lebanon where the last census in the country was carried out in 1932. Until the country was divided in 1982, there was no census. Lebanon had irregular censuses. In Nigeria, the situation would appear similar. While head count is expected decennially, Nigeria, from her amalgamation in 1914 had censuses in

1921, 1931, 1952/53, 1963, 1991, and 2006. There were no censuses in 1941, 1971, 1981 and 2001.

Emanating from infrequent census in Nigeria, the indirect method of data generation has been suggested and used to estimate the country's population data needed for development planning (Mba, 2007; Fashagba, et al, 2014; Olorunfemi 2005; 1984 and 1982, Akanbi 2006; Pursell and Olusanya, 1983 and Ekanem, 1972). Indeed, data from civil registration has widely been used to estimate population for planning in Nigeria. Ayeni (1980) developed a model from data generated through birth and death registration and used it to estimate the population of Katsina State.

The earliest attempt to generate data from vital registration in Lagos dates back to 1869. The idea was later legally backed up in 1908 in Lagos. Attempts to generate vital events in other parts of Nigeria using this method were not successful (Orubuloye, and

Oyeneye, 1983) until law on vital registration was promulgated in 1948. The law made it compulsory for all Nigerians to register their vital events (FGN, 1979).

Attempt made by the government to encourage registration of births, deaths and marriages among others, a number of centres were created at the National Population Commission (NPC) offices nation-wide. Apart from the NPC Centres, several bodies such as Government Hospitals, Maternity Homes, Clinics and other Medical Centres as well as Court of law were authorized to register vital events. Besides, NPC often carries out a periodic registration of vital events at every five years in Nigeria in order to strengthen the quality of population data generated from this source. Despite these efforts, there is low registration of vital events, particularly in rural areas where about 70% of Nigerians reside (NPC, 2006). As a matter of fact, in many States of the Federation including Kwara State, the percentage of vital events registered appears to be far from the actual. Many at times, the percentages of vital registration revealed as being registered are mere guess figures. Consequently, the population figures estimated from the source are at variance with those collected through censuses. Data from the two sources often appear incomparable. Thus, this paper examines the coverage of vital registration in rural areas of Kwara State. This would help us to determine the comparability of data collected through the vital registration and consequently reveal the reliability of population data estimated through the registration of vital events.

REVIEW OF RELEVANT LITERATURE

Population data have been generated using several indirect techniques in Nigeria. The most common methods are: (i) vital registration; (ii) population register; and (iii) periodic survey. These methods would be revealed in the next section.

VITAL REGISTRATION

Several vital registration had been carried out in Nigeria. Vital registration is carried out to collect necessary population data that are needed for planning. Orubuloye and Oyeneye (1983) observed that even though the survey for population data was not purely for collection of most demographic data, one of the objectives has relatively made possible to generate information on various demographic parameters from the source. Through this source, the demographic statistics as well as the total population of various parts of Nigeria has been estimated (Ubah 2009). However, the coverage of vital registration, particularly in rural areas is low in Nigeria.

POPULATION REGISTER

The second method of generating vital events is through population register. This contains the statistical record of demographic events, such as births, deaths, marriages and divorces. In the developed countries, population registers have served as a source of a reliable and dependable demographic data especially, during the inter-censal periods (Basorun, 2003; p.87 and Bhende and Karitkar, 2003; p. 56). Registration of vital events is compulsory in the developed countries. The exercise is legally backed up. Therefore, it is difficult for an individual to avoid being registered. In India, the method of population data generation has extensively been used to generate the necessary population data required from the rural areas (Bhende and Karitkar, 2003; p .57). In many developing countries, population register is not popular. According to Basorun (2003), more than one-quarter of the population of the developing countries including Nigeria avoids regular registration.

PERIODIC SURVEY

The method of data collection is used to generate population data. In this technique,

the National Health and Demographic Survey NDHS usually embarks on collection of demographic data every five years in Nigeria. This source has often provided necessary data used to estimate population for national planning as recommended by Ubah (2009). On the contrary, many people, particularly from rural areas are hostile to the field staff because of poor awareness of the intention of the exercise. Many a time, they provide inadequate data of vital events particularly, on births, deaths and marriages. In some parts of Africa, Sisterhood method is used to generate their vital events. However, this is not used in Nigeria. Thus, the data collected through survey are insufficient for estimating the total population of areas, state, region and/or Nigeria at large.

STUDY AREA

The rural areas of Kwara State are the focus of this study (Figure 1). The study was carried out between October 2012 and April 2013. Kwara State is located on latitudes of 8° and 10° N of the Equator and Longitudes of 3° and 6° E. The State's total population was put at 2,365, 353 (NPC, 2006). Of this population, over 70% of them lives in rural settlements (NPC, 2014). In fact, only Ilorin metropolis, the state capital and other Local Government headquarters with few other settlements are urban centres. Emanating from the substantial percentage of people that are living in rural areas today, several attempts have been made by the state government to improve on the registration of vital events. From all indications, it appears the efforts have not yielded any significant result. As a matter of fact, many of the rural dwellers seem to avoid birth and death registrations.

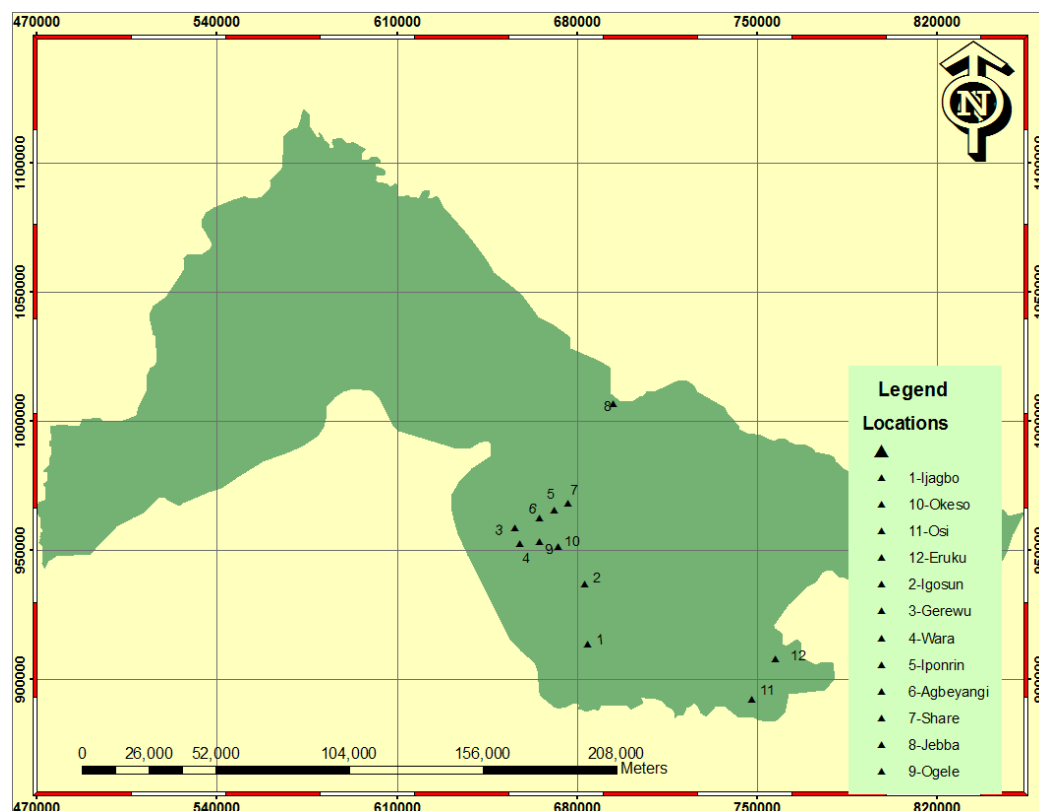


Figure 1: Map of Kwara State Showing the Selected Rural Settlements

MATERIALS AND METHODS

The data used for the study were obtained through questionnaire administration. The study employed multi stage sampling technique. In the first stage, Six Local Government Areas of Asa, Ekiti, Ifelodun, Ilorin East, Ilorin West and Offa in Kwara State were randomly selected from the 16 Local government Areas in Kwara State. From the Six LGAs, two rural settlements each were chosen using purposive, none probability technique. This technique was employed because, the selected areas have more population than others. Thus, Alapa and Ogele were selected from Asa Local Government, while Osi and Eruku from Ekiti Local Government, Jabba and Share from Ifelodun Local Government, Agbeyangi and Iponrin from Ilorin-East, Wara and Gerewu from Ilorin West Local Government, and Ijagbo and Igosun from Offa. In the second stage, Ten per cent of houses in the study areas were selected and 140 copies of a questionnaire were sampled using systematic technique. The 10% of the houses sampled was best in this instance, because the available population of the settlements was that of 1991. From all indications, this is far from the actual. Furthermore, in the study area, the rural settlements have compound/traditional houses, each containing several households. Of the 140 total questionnaire administered, 120 copies were returned valid in the order of 20, 18, 22, 17, 21 and 22 from Asa, Ekiti, Ifelodun, Ilorin-West Ilorin-East and Offa LGAs respectively.

The data generated were summarized into manageable size using simple percentage and

cross-tabulation. The analyses were graphically presented to show the pattern of birth and death registrations.

RESULTS AND DISCUSSION

Pattern of Vital Registration in Rural areas

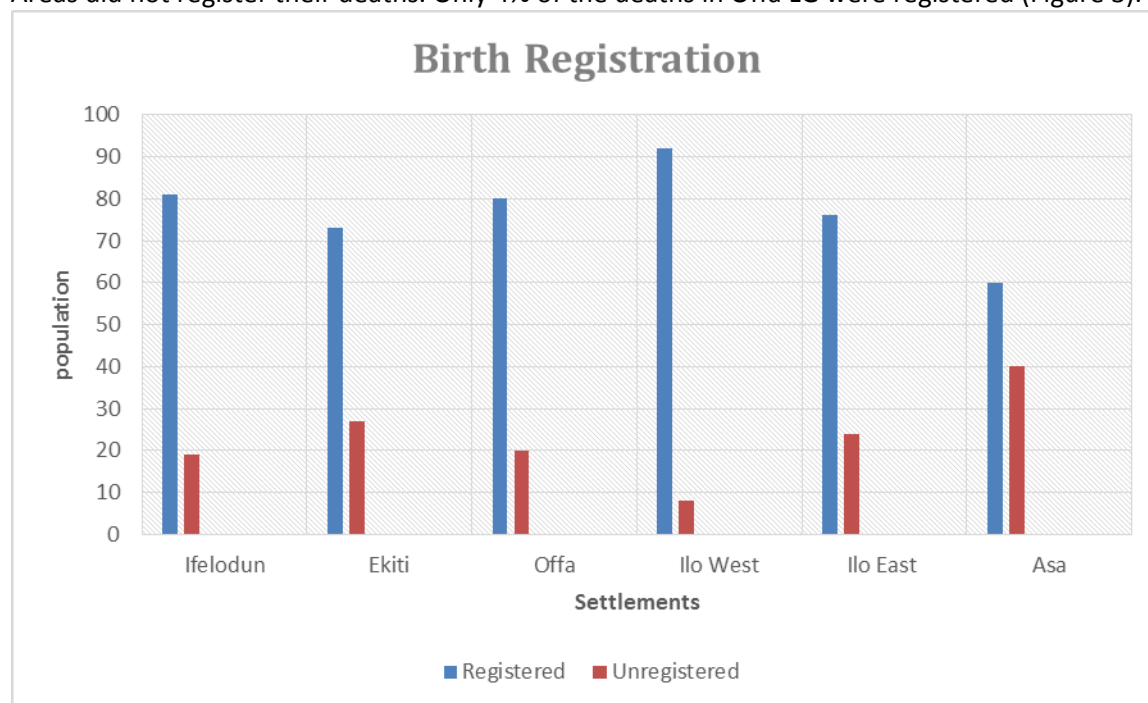
In this study, efforts were made to examine the birth and death coverage of Kwara State rural areas. The data collected through questionnaire are presented in this section. As presented in Table1, 77% of the children registered at birth, while 23% did not register. Among the settlements sampled, the percentage of births registered differs from one rural area to another. The selected rural settlements in Ilorin-West Local Government have the highest birth registration of 92%, while the settlements from Asa Local Government have the lowest birth registration with 60%. There are variations in vital registration among the rural areas. (Figure 2). Table1 also shows that the death registration is low. As a matter of fact, about 78% of the deaths were not registered. Not only that, 21% of the people claimed they had no idea of death registration. From the table, only 1% of all the deaths were registered. In all, about 99% of the deaths did not register. The result shown in this table suggests that birth and death registrations in Kwara State rural areas are low. Perhaps, the low registration of vital events may not be unconnected with the poor financial status of most of the rural dwellers.

Table 1: Registration of Births and Deaths in Kwara State

	Asa			Ekiti			Ifelodun			Ilorin-West			Ilorin-East			Offa			Tot (%)
Settlement	Ala	Oge	%	Osi	Eru.	%	Jeb	Sha	War.	Ger	%	Ipo.	Agb	%	Igo	Ija	%		
a	Percentage of Birth Registered																		
Registered	7	6	(60)	7	6	(73)	11	7	(81)	8	7	(92)	6	8	(76)	11	7	(80)	77
Unregister.	4	3	(40)	3	2	(27)	2	2	(19)	1	1	(08)	2	2	(24)	3	1	(20)	23
b	Percentage of Death Registered																		
Registered	0	0	(0)	0	0	(0)	0	0	(0)	0	0	(0)	0	0	(0)	0	1	(04)	01
Unregister.	1	8	(90)	11	9	(100)	11	9	(90)	0	0	(0)	8	7	(92)	14	6	(92)	78
	0																		
No idea	1	1	(10)	0	0	(0)	2	0	(10)	9	8	(100)	2	1	(08)	0	1	904)	21

Source: Author's fieldwork, 2015. Note: The percentages of coverage are in parentheses

Among the rural areas, 100% of Asa, Ekiti, Ifelodun, Ilorin-East and Ilorin-West, Local Government Areas did not register their deaths. Only 4% of the deaths in Offa LG were registered (Figure 3).

**Figure 2: Birth Registration in Selected Rural Settlements**

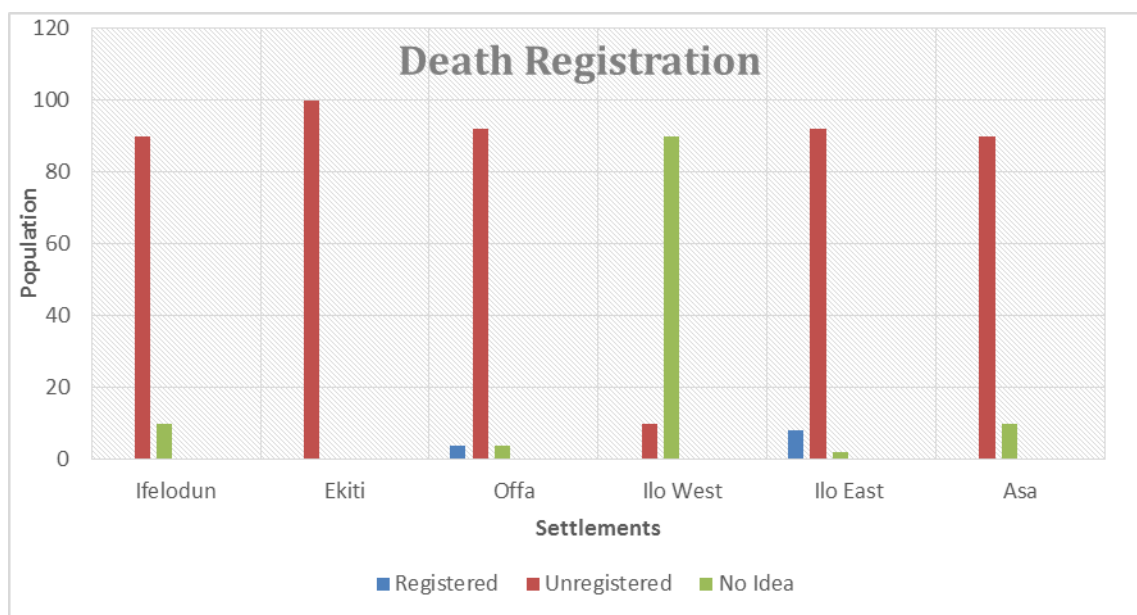


Figure 3: Death Registration in Selected Rural Settlements

Expected for Vital Registration Centres

In Nigeria, vital events are usually registered at various designated centers. However, most of the birth and death registrations are done in hospitals. Table 2 shows that 86% of the respondents registered in hospitals, while 7% obtained birth certificates from the Courts of Law. An insignificant number of the respondents registered through Special registration (1%),

Table 2: Venue and Frequency of Respondents' Registration

a Percentage of Birth and Death Registered at Different Centers																			
	Asa			Ekiti			Ifelodun			Ilorin-West			Ilorin-East			Offa			Tot
	Ala	Oge	%	Osi	Eru	%	Jab	Sha	%	War	Ger	%	Ipo	Agb	%	Igo	Ija	%	
Hospital	9	7	(76)	9	8	(95)	8	8	(75)	7	7	(86)	8	10	(90)	12	7	(94)	86
Court	1	1	(12)	0	0	(0)	2	1	(10)	1	0	(04)	1	0	(06)	2	1	(06)	07
Spec-Reg.	0	0	(0)	0	0	(0)	1	0	(05)	0	0	(0)	1	0	(04)	0	0	(0)	01
Others	1	1	(12)	1	0	(05)	2	0	(10)	1	1	(10)	0	0	(0)	0	0	(0)	06
b Frequency of Vital Registration																			
Always	8	8	(85)	7	5	(70)	6	4	(45)	8	6	(80)	9	10	(96)	13	8	(98)	79
Occasional	2	1	(10)	2	2	(23)	4	3	(30)	0	1	(05)	1	0	(04)	0	0	(0)	12
No Idea	1	0	(05)	1	1	(07)	3	2	(25)	1	2	(15)	0	0	(0)	1	0	(02)	09

Source: Author's fieldwork, 2013.

The second part of the table shows the likely reasons why some people did not register. It is surprising to note that many of the respondents deliberately refused to register their deaths. From the interaction made with the respondents, it was observed that most of the people (79%) had vital registration centres in their villages. This of course should encourage them to register their deaths. As a

matter of fact, only 9% did not have any idea of vital registration.

Further, the study reveals that, people's awareness on availability of vital registration centres vary from one Local Government to another in Kwara State. As shown in the table, 98%, 96%, 85% and 80% have permanent vital registration centres in Offa, Ilorin-East, Asa and Ilorin-West, respectively. About 45% and

70% of respondents from Ifelodun and Ekiti had permanent registration centres. From the table above, Offa has the highest respondents who stated that they had permanent vital registration centres. This is probably the reason why the Local government had the second highest percentage of birth and death registrations. The pattern of vital registration distribution in this study may not be different from what is obtainable in other states in Nigeria. The distribution of registration centres in Table 2 is graphically presented in Figure 4.

Unlike the rural areas, there are permanent vital registration centres in most, if

not all the urban centres. Indeed, in the past, vital registration centres were rarely available in many rural areas. Today, it appears the number of the centres has increased; thus, the level of birth registration has greatly improved. For instance, about 80% of the births in this study were registered, while only 23% of the births did register between 1994 and 2007 (UNICEF 2008). Another striking fact in the study is that, most of the registrations in the rural areas were done in Hospitals, Maternity homes and other Medical Centres instead of the NPC, the main registration centres designated by the Federal Government.

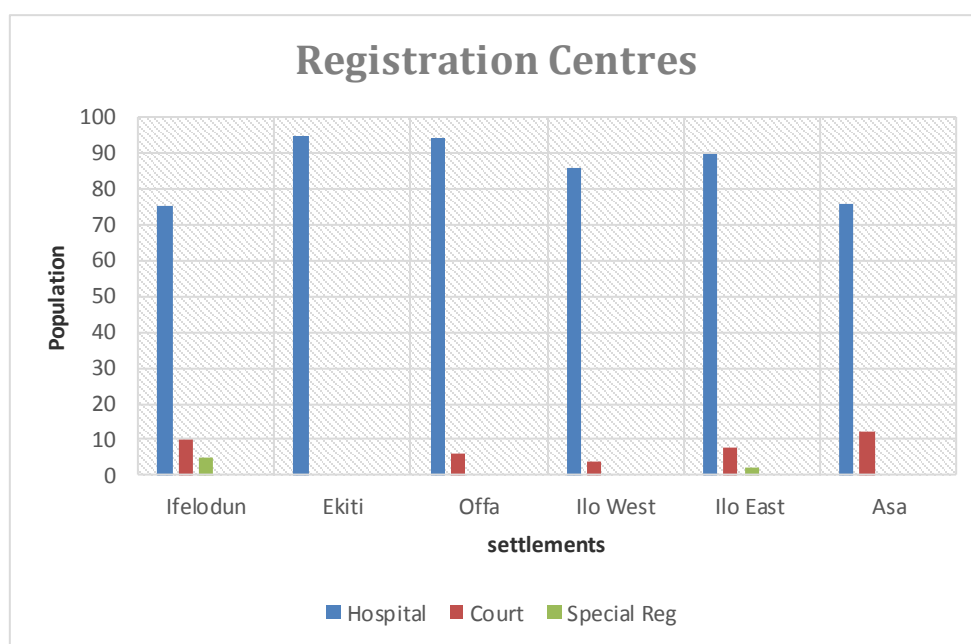


Figure 4: Registration Centres in Selected Rural Settlements

CONCLUSION

The paper has examined the coverage of vital registration in some selected rural settlements in Kwara State. Using data obtained through questionnaire administration and analyzing them through simple percentage and graphs, the study observed that most of the births were registered in rural areas. About 77% of

the births in the study area were registered, while only 23% did not register. Among the Local Government Areas, Ilorin-East recorded the highest birth registration (96%). This is followed by Ekiti (95%). However, Ifelodun, had the lowest birth registration.

The study also revealed that a substantial number of the people did not register their

deaths. Indeed, 78% of the deaths in the study area were not register. The percentage of birth and death registrations varied from one local government area to another.

The study also revealed that most people who registered their births and deaths did it in Hospitals. In fact 86% registered in Hospitals, while the rest registered in either a Court of Law or Other outlets. Among the respondents who registered in Hospitals, 96% were from Ilorin East and 75% from Ifelodun.

Efforts to determine why death registration was low revealed that many people deliberately refused to register their deaths. As matter of fact, 76% of the people were aware of vital registration exercise, but chose not to register. The present poor registration of vital events could affect the quality of population estimate made from vital events.

RECOMMENDATIONS

Since demographic data are often estimated from civil registration, efforts must be made to

find solution to the problem of low vital registration. On this note, the study recommends that:

- More rural health workers should be employed from the rural areas instead of employing health officers from urban centres. This is because, medical staff employed from urban centres do not stay in the rural area always. As reported during the study, most of the times, such staff are not in their work-places, but in the urban centres where they live.

- If possible, the village heads in rural areas should be involved in the registration of their areas. The head, Baales, Magaji or Obas, in the rural settlements are highly respected. Therefore, their involvement would encourage their people to register their vital events.

- Also, if possible, death registration should be made free. If this is done, it would encourage the people to register their deaths.

- The government can also find a way of rewarding those who register their deaths.

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