



## FINAL REPORT: PMA PLUS/CRVS - BIRTH REGISTRATION SURVEY IN ADDIS ABABA AND SNNPR, ETHIOPIA



## **PMA PLUS CRVS Final Report**

**Title:** Final Report: Performance Monitoring and Accountability PLUS/Civil Vital Registration Services Survey (CRVS) in the Southern Nations, Nationalities and Peoples' region (SNNPR) and Addis Ababa, Ethiopia

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## Executive summary

In Ethiopia, the birth registration rate remains very low, despite remarkable progress made in health and other development areas. According to the most recent 2016 Demographic and Health Survey (EDHS, 2016), nationally, only 3% of children under five years of age had their birth registered.

In 2012, the Federal Government of Ethiopia enacted legislation that established the agency responsible for vital events registration. This law also made it compulsory for caregivers to register vital events, including births (Federal Government of Ethiopia, 2012). The agency tasked with the responsibility of rolling out and enacting the laws on vital events registration is called Vital Events Registration Agency (VERA). Since the law was passed, VERA launched a nation-wide initiative to train local authorities throughout Ethiopia on the new systems and requirements in tandem with various awareness campaigns at the national and regional levels throughout Ethiopia. Several years since the legislation was approved and passed however, the birth registration process in Ethiopia remains a very nascent process as evidenced by continued low rates of birth registration throughout the country.

Using the PMA2020 platform, the PMA-CRVS (civil registration and vital statistics) study was conducted to identify facilitators and barriers to birth registration among community members and among birth registration providers. The study also measured percentage of children, 0-5, in the study regions who had their births registered.

Among the eleven regions of Ethiopia, we selected two regions – Addis Ababa and the Southern Nations Nationalities and People’s (SNNP) regions, as they represent different societal settings and birth registration levels. The PMA-CRVS study was conducted in a total of 44 and 22 enumeration areas (EAs) in SNNP and Addis Ababa, respectively. It used the PMA2020 platform and EAs in these two regions. PMA2020 employs local women, referred to as resident enumerators (RE), to collect data using smartphones.

For PMA-CRVS, REs returned to a subset of the households interviewed during the sixth round of data collection for PMA2020 in Ethiopia. Specifically, they re-visited households with a child aged 0-5 years old or with a woman in her third trimester of pregnancy at the time of the round 6 survey in Addis Ababa and SNNP. Such households were eligible for participation in the PMA-CRVS study. In these households, we conducted an interview with caregivers about Knowledge, Attitudes and Practices (KAP) about birth registration. The KAP survey also included a discrete choice experiment (DCE) of attitudes and behaviors related to birth registration among caregivers. In addition to the KAP survey, we conducted a birth registration facility survey to assess the availability of services, facilitators and barriers of birth registration services among the vital events registration facilities expected to serve the study population.

The study found that birth registration knowledge remains low among caregivers, including those who have registered the births of their children. The results from the DCE questions revealed that among caregivers, there is a strong preferences for registration facilities that were open longer hours (i.e., evenings or weekends). Overall, both the KAP and facility survey

revealed that awareness and knowledge about vital events registration remains low and recommends that agencies responsible for provision of these services should work to increase community awareness. Additionally, local and federal governments should consider increasing resources and training of facility staff so that they can feel equipped to provide these services.

## Introduction

### Birth registration

Birth registration is a fundamental human right (Cappa, 2014). In many societies, it is required for access to essential health and social services (e.g., education, inheritance, and international travel). It also helps provide vital statistics, e.g. number of live births in a year in an administrative area, to inform policy and planning. For example, without accurate birth registration, estimates of the under-five mortality rate may not be reliable. As a result, impacts of investment in child survival policy and programs may remain unknown or unclear. As such, the rate of birth registration has become an important indicator of progress of development. It is thus included in the new global development framework of the Sustainable Development Goals (SDG), specifically SDG 16.

The SDG is a unique opportunity to improve birth registration. In its 2014 report, “A World that Counts”, the UN Secretary General’s Independent Expert Advisory Group called for a Data Revolution for Sustainable Development, which includes birth registration as an important dimension (AbouZahr, 2015). Despite its significance, the rate of birth registration is only 71% globally (United Nations Children’s Fund, 2019). It is particularly limited in low- and middle-income countries (LMICs).

In Ethiopia, the birth registration rate remains very low, despite remarkable progress made in health and other development areas. According to the Ethiopia 2016 Demographic and Health Survey, only 3% of children under age five had a birth certificate (EDHS, 2016). This is not only one of the lowest levels in sub-Saharan Africa and globally but also indicates a deteriorating trend compared to data from the 2005 Ethiopia DHS, 6.6% (EDHS, 2005).

Major initiatives to increase birth registration are currently under way in some LMICs. Unfortunately, these initiatives often lack adequate data to identify facilitators and barriers to birth registration in LMICs. Most data on birth registration are collected during large-scale surveys such as the DHS or Multiple Indicator Cluster Surveys (MICS). These surveys ask respondents whether their children have a birth certificate, but there are no follow-up questions on attitudes towards, and knowledge about, birth registration; nor are there attempts to elicit why some births have been registered whereas others haven’t. In addition, current knowledge about birth registration and its factors centers around populations’ – or potential clients’ – perspective of birth registration, but lack providers’ perspective. Both perspectives, clients and providers, are needed to efficiently strengthen birth registration systems. Providers’ perspectives are particularly informative for relevant government agencies and stakeholders to understand service provision dynamics and identify areas for prioritization and improvement.

## Laws and Regulations for Birth registration in Ethiopia

Ethiopia is the second most populous country in Africa, with an estimated population of over 80 million people, a large proportion of whom are under 15 years (47%) (EDHS 2016).

In 2012, in an effort to improve vital events registration, the Federal Government of Ethiopia enacted legislation that made it compulsory to register vital events, including births. The 2012 law also established VERA, Vital Events Registration Agency (VERA) the agency responsible for birth registration in Ethiopia. VERA was inaugurated in 2016. Since then, VERA has launched a nation-wide initiative to train local authorities throughout Ethiopia on the new systems and requirements.

Along with the passage of the law mandating registration of vital events, the Federal government enacted additional measures to ensure compliance. The law on civil vital registration included a provision which states that failure to register a birth would be punishable by jail time of up to 6 months or a fine ranging from 500 to 5,000 Ethiopian birr, approximately 17- 170 USD. Despite this prohibitively high financial penalty, rates of birth registration in Ethiopia remain low, as does demand for these services. It must be noted that caregivers have generally not faced punishment and this punitive measure largely serves to act as a deterrent and is not often enforced.

In Ethiopia, there are 9 regional states and two city administrations. Within each region, there are smaller administrative structures including zones (provinces), woredas (districts) and kebele. A kebele is the lowest administrative unit and is akin to a municipality. The civil registration centers/facilities are located within each kebele's administrative office. The administration structure in the two city administrations, Addis Ababa and Dire Dawa, is somewhat different. They are organized in the form of sub-cities and woredas, where the registration facilities are located. According to the 2017 VERA report, each registration center serves, on average, a population of about 5,500 people.

Under current laws and statues on civil registration both mother and father are required to be present to register the birth of their child at the kebele or woreda offices designated to serve their community. If either has died, the current caregiver can register the child. If both the mother and the father are dead, the care-taker, adopter, or even police can register the child with a provision of legal documents and identity cards. Parents or legal guardians are required to register the birth of their child within 90 days of the birth. No witness is needed to register a child.

The first step in the birth registration process is to receive a birth notification card. For facility births, these birth notification cards are issued at both public and private health facilities. However, in Ethiopia as the majority (73%) of deliveries occur at home (EDHS, 2016) VERA amended the registration law to ensure that health extension workers (HEWs), community health workers, can notify all births that occurred in their locality/Kebelle to the civil status officer. Therefore, for parents who have a home birth, the HEW assigned to the catchment area is required to give the parents the birth notification card. Baptism papers for those in the Christian faith, or similar documents for the Muslim faith are allowed to be used in lieu of birth notification cards. Once caregivers have the birth notification cards or baptism

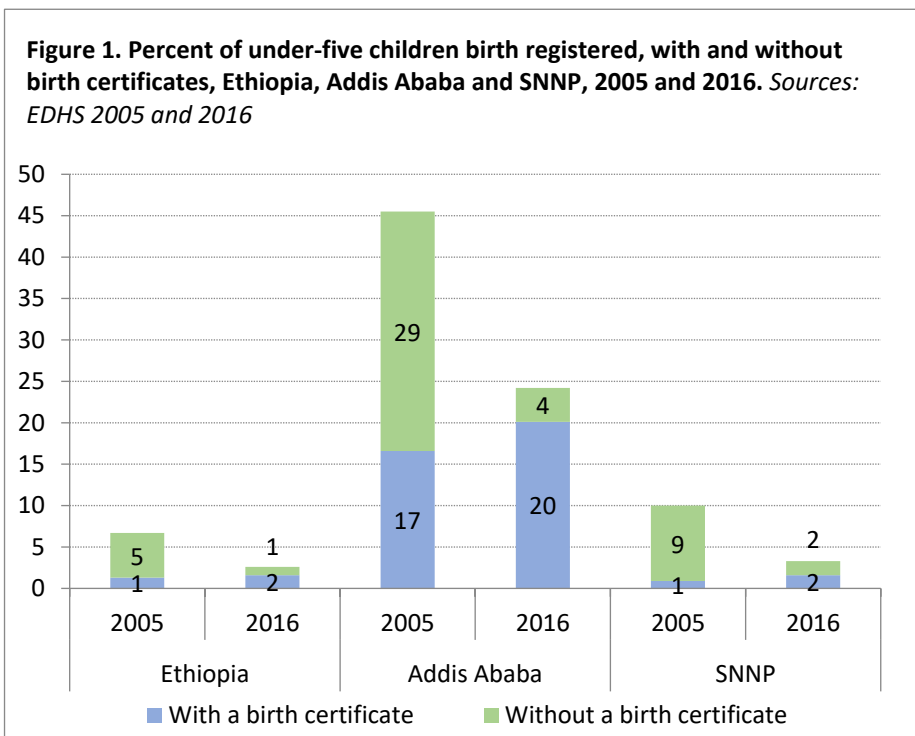


certificates, they are then required to take these documents to the vital registration office assigned to their kebele/municipality to register the birth.

Once parents have the birth notification card, they are required to take this card to their respective kebele or woreda office to register the birth of the child. Both parents are required to be present for this process. The kebele office is the only office that can register births and issue birth certificates, no other entity or office has that mandate or power. In Ethiopia, registering a birth is free, but getting a birth certificate is subject to certain amount of payment; however, there is no standard payment structure throughout the country. Despite the fact that this decree was issued seven years ago, knowledge, awareness and practices involving birth registration throughout Ethiopia remains low.

In Ethiopia, birth registration is not required for enrollment in schools. This is true for public and private educational establishments. To date, the study team is not aware of any government services that require birth registration or a birth certificate to access services. Additionally, birth registration is not required for federally issued travel documents such as passports.

Despite the enactment of the law in 2012 and a growing and young population, the proportion of children under 5 with a birth certificate is estimated to be just 3% nationally (Figure 1, EDHS, 2016). Furthermore, birth registration rates vary across regions in Ethiopia. For example, in the nation’s capital, Addis Ababa, the birth registration rate was the highest among all regions, at 24% in 2016 (EDHS, 2016). However, it declined from 46% in 2005 (Figure 1). In SNNP, which is in southwest Ethiopia and one of the most populous regions, birth registration declined from 10% to 2% between 2005 and 2016 (EDHS, 2005, EDHS, 2016). It is noted that measurement errors or changes in survey design and implementation guidelines could be possible reasons for the decline, since the trend is driven by the decline in percent of children who were registered but couldn’t show the birth certificate at the time of interview.



According to VERA, the main reason for low birth registration is the very low demand to register vital events from the community (Plan Ethiopia, 2005). VERA speculates that such a low demand is related to the current levels of low community awareness toward registration of vital events and the lack of motivation. In fact, there are no instances where birth



certificates are mandatory for social services, except issues related to inheritance. However, there are informal and irregular practices of requesting a birth certificate in some urban schools during enrollment. The government does not require children to have birth certificates or that students have their births registered for school enrollment as there is concern that this may reduce the staggering school enrollment rate. Such competing priorities have made it challenging to use all possible strategies to increase the demand for registration services. In addition, misconceptions and misinformation about the registration process are believed to also contribute to low registration rates (Plan Ethiopia, 2005). For example, some parents, as our findings suggest, may believe that the birth notification form (a simple document stating a child's name, place and date of birth) serves as a birth certificate.

To improve programmatic impact of the study and use of the study results, we collaborated with key birth registration stakeholders in the country, including VERA, Central Statistical Agency (CSA) and the Ministry of Health. Results and lessons learned from the activities will be instrumental to improve birth registration practice in the populace. The study results provide important feedback to VERA and national policy makers in improving the registration process and systems throughout the country.

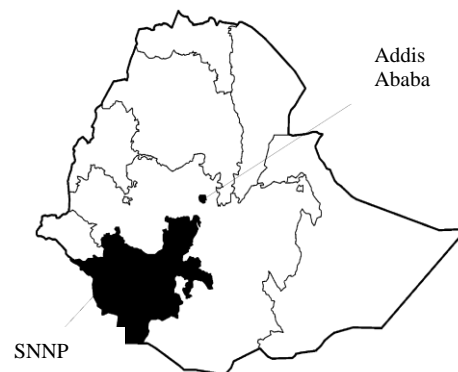
## Research objectives

In this study, PMA-CRVS, we sought to understand and assess levels, facilitators and barriers of birth registration from clients and providers' perspectives in two regions in Ethiopia – Addis Ababa and Southern Nations Nationalities and People's (SNNP) regions. Addis Ababa is an entirely urban region with 3.2 million inhabitants, while SNNP is a large, predominantly rural (85%) region with 17.9 million inhabitants (EDHS, 2016).

Our study has two main components: an assessment of vital events registration facilities survey, referred to as the facility-based survey, and a household-based survey, referred to as the KAP survey. The household-based survey consisted of interviews with caregivers of children aged 0-5 years old in selected households. To further our understanding of barriers and facilitators of birth registration and to inform potential interventions, we also nested a discrete choice experiment (DCE) within the household survey. A DCE is a procedure to elicit an individual's preferences using a series of hypothetical questions. It is widely used in economics, and in health services research (Kruk, 2016; Rockers, 2013; Kruk, 2010; Kruk, 2009). In such contexts, DCEs have for example helped design programs to improve the proportion of deliveries that occur at health facilities, or to facilitate the posting of recent medical school graduates to underserved rural areas. DCEs have however not been used to investigate barriers and facilitators of birth registration.

The objectives of the study were to assess the level, facilitators and barriers of birth registration in Ethiopia. Specifically, we aimed to:

*Figure 2: Map of Ethiopia, highlighting study regions – SNNP & Addis Ababa*



- Determine the level of birth registration at the regional level
- Identify facilitators and barriers of birth registration among community members
- Identify the availability of birth registration services at facility level; and
- Identify facilitators and barriers of birth registration system among birth registration providers.

## Methodology

### Study Design

The Bill & Melinda Gates Institute for Population and Reproductive Health at the Johns Hopkins Bloomberg School of Public Health (JHSPH) launched the PMA2020 project in 2013 to track progress in family planning program indicators. PMA2020 implemented innovative survey methods in selected countries and geographies to track progress towards the Family Planning 2020 initiative. It employs locally recruited and trained female resident enumerators (Zimmerman, 2017). The resident enumerators (REs) have at least a minimum secondary level of education and are selected after evaluating their competency in using mobile phone devices for data collection. The REs conduct face-to-face interviews with women and well experienced field supervisors collect data from public health facilities. Both use smartphones to enter and transmit data in real-time to cloud servers for rapid analysis and feedback.

After a rigorous hands-on training, REs use the phones to list households in their assigned enumeration areas (EA) and are responsible for carrying out the household, female, and private health facility interviews within each EA. Data collection is undertaken annually within the same EAs, with a new random sample of households and women drawn in each round.

In Ethiopia, PMA2020 has been operational since 2013 and has completed several rounds of data collection under the supervision of Addis Ababa University (AAU) and Ethiopia Public Health Association (EPHA), the PMA implementing partners in Ethiopia. PMA2020 Ethiopia served as a platform for this PMA-CRVS study.

The most recent survey, prior to this study, was conducted from June to July in 2018. This was the sixth round of data collection for PMA2020 Ethiopia and referred to throughout this document as PMAET/R6. In the PMAET/R6 household questionnaire, birth registration status among children aged 0-5 years of age was ascertained, providing a sampling frame for the KAP survey. These questions were asked of all households during the administration of the household questionnaire. They were added at the end of the household roster. Additionally, all women 15-49 years old the in sampled households were eligible for the female interviews, and, upon completion, asked about consent to follow-up if selected for a future survey.

The PMA-CRVS study returned to a subset of PMAET/R6 households in the SNNP and Addis Ababa regions. These were household with at least one child under 6 or a woman pregnant in her third trimester at the time of the PMAET/R6 survey and where a female household member had consented for future follow-up. These households were eligible for participation in the PMA-CRVS study. For these households, a Knowledge, Attitudes and Practices (KAP)

questionnaire was completed by the caregiver of the child. The caregiver was asked about the child(ren) s/he cares for, as well as her/his attitudes and knowledge about birth registration.

In addition, to the KAP survey, the registration facility survey was conducted to assess the availability of services, facilitators and barriers of birth registration services among the vital events registration facilities expected to serve the study population.

Ethical approval for the study was obtained from the Ethiopian Public Health Institute (EPHI) and the JHSPH Institutional Review Boards.

## Sample Description

Prior to the launch of the PMA-CRVS survey PMA2020/Ethiopia had conducted six rounds of data collection in 47 EAs in SNNP and 22 in Addis Ababa. After the start of data collection however, three EAs in SNNP were dropped, due to security concerns and concerns for the safety of field staff resulting in a total of 44 enumeration areas participating in the survey in SNNP. The final 44 EAs in SNNP and 22 EAs in Addis Ababa were included in this study.

The enumeration areas for PMA2020 were selected using a two-stage stratified cluster sampling design and selected with probability proportional to size within urban and rural strata. Since PMA2020 is a cluster sample survey, our estimates of power are affected by the clustering of observations within survey clusters. Further, as our survey design mimics the design of the DHS, we further used design effects based on the 2016 EDHS data to adjust our assessment of statistical power. We assumed response rate of 95% and attrition (lost to follow up between Round 6 and the KAP survey) at 80%.

Using the PMAET/R6 data for the two PMA-CRVS regions, the KAP survey was implemented. The sample size for PMA-CRVS was limited within specific parameters regarding eligibility: 7-9 month pregnant women and/or children under-six at the time of the PMAET/R6 survey, resulting in about 900 and 250 eligible households in SNNP and Addis Ababa, respectively. Due to the lower fertility level between the two selected regions the recruitment and enrollment process for the KAP survey was different for Addis Ababa and SNNP. In Addis Ababa, all households who had at least one child age 0-5 years at the time of the Round 6 survey or at least one pregnant women who was in her third trimester were included in the study. In SNNP, a random sample of 50% of such households were selected for participation.

Our sample size calculations for households suggested that we needed a minimum sample size of 384 caregivers in each region for point estimates for a key KAP indicator (e.g. percent with knowledge of a registration place) at 50% (with +/- 5% margin of error). Some KAP indicators are however unlikely to be at 50% considering current low registration rates. Therefore, the needed sample size was likely to be smaller.

In addition to the KAP survey, we collected basic information on registration service availability and related factors from all vital events registration facilities which are assigned to serve each EA selected for the KAP survey. According to the 2017 VERA report, of the available 18,617 registration centers (kebeles) country wide, 15,574 (82.2%) have started the registration (Federal Government of Ethiopia, 2017; Conference of Ministers, 2012). Of these,

4,202 and 117 registration facilities are within SNNPR and Addis Ababa, respectively. For this survey, field supervisors were responsible for identifying all registration facilities, which are assigned to serve the EAs involved in the KAP survey. Accordingly, we anticipated that PMA-CRVS would assess 44 registration facilities located within the kebele administrative office in SNNP and more than 20 registration facilities stationed at the woredas and sub-cities administrative offices in Addis Ababa.

**KAP survey:**

*Inclusion criteria:*

- Households interviewed with at least one child age less than 6 years, or with at least one woman in her third trimester of pregnancy during the PMA2020/Ethiopia round 6 survey
- Households where a female respondent aged 15-49 consented for future follow-up at the time of the PMA2020/Ethiopia round 6 survey
- Willing to voluntarily participate in the study

*Exclusion criteria:*

- Not a usual member/ resident of the selected household
- Persons with cognitive or hearing disabilities that would inhibit them from taking part in the interviews
- Unwillingness to participate in the study

**Facility survey:**

*Inclusion criteria*

- Local administrative offices where vital events are registered and that serve the sampled EAs for the KAP survey
- Vital events registration facilities with competent respondent who is willing to voluntarily participate in the study

*Exclusion criteria*

- Local administrative offices which are permanently closed or demolished at the time of the survey

## Study Implementation

Using the PMAET/R6 survey household listing of enumerated households, REs returned to eligible households. Data collectors visited selected households and introduced themselves and the study, and then sought verbal consent for households to participate in the survey. The data collector then administered the KAP questionnaire to the eligible caregiver in the household.

Within each selected household, REs identified the primary caregivers of “index” child(ren), i.e., those children 0-5 old who lived in the selected households at the time of the PAMET/R6 survey. Index child(ren) also included any children born since PMAET/R6 and children who have moved into an eligible household. Any index child who had died since Round 6 or moved out of the household was not included in the study. For the KAP survey the eligible respondents were the primary caregivers.

The survey protocol allowed each child to have at most one primary caregiver - in the preferred order of: 1) mother, 2) father, and 3) other adult household members who provide care for the index child(ren). If a selected respondent was the primary caregiver for multiple index children in a household, he/she was allowed to respond about each of the multiple index children. In cases where there were multiple caregivers, the KAP survey was programmed in ODK to select one primary caregiver per household at random for the KAP interview. If the selected primary caregiver was unavailable at the time of the household visit, he/she was replaced by another (randomly selected) caregiver from the same household.

Once participants were identified in eligible households they were consented for the KAP survey. On the KAP survey, we used the Round 6 data to preload the names, ages and relationship status of each household member. If there were changes to the household composition, e.g. a child has been born in the last four months since the R6 survey, or the household has adopted a child under-five years of age, the RE would update the roster and add in the new child, for example. The RE then located the caregivers, confirmed them by name, and consented them for the interview.

Each caregiver was visited in person at their home. If the RE was unable to locate the caregiver during the specified interview times, she made two more attempts to complete the interview. The KAP survey took about 20 to 40 minutes to complete for each caregiver.

At each visit, the respondent was interviewed in a quiet location that guaranteed visual and auditory privacy where the respondent was comfortable within her/his homestead. The RE interviewed participants in their local languages. Data collection was done using mobile phones, as was consistent with PMA2020 practice, programmed with logic rules and skip patterns for quality assurance in real-time.

Once data collection was complete within an EA, the RE informed her supervisor. The supervisor then identified the facilities that were responsible for issuing birth registration services and birth certificates within each EA and conducted the facility survey. Similar to KAP survey conducted by the REs, supervisors conducted all interviews in-person and had three attempts to conduct and complete each survey.

Recruitment for the facility survey was done by the field supervisor who also conducted the interview. In each EA, field supervisors worked with local administrative office heads and administration personnel, including VERA, to identify the facilities designated to provide vital events registration services in the respective EA. Working very closely with VERA and the PMA-Ethiopia leadership team, each field supervisor confirmed the list of facilities designated to provide vital events registration services in the EAs which they collected data in.

As mentioned above, vital registration facilities are located within the lower administrative kebele offices and registration facilities in the two urban city administrations are located within the district and sub-city administrative offices. SNNP is one of the nine agrarian regions and Addis Ababa is one of the two urban administrative cities. Accordingly, sampled registration facilities in the SNNP region and Addis Ababa City Administration were within the kebele and district/sub-city administrative offices of the sampled EAs for the KAP survey, respectively.

Field supervisors visited registration facilities assigned to serve the randomly selected EAs for the KAP survey, and introduced themselves and the study, and then sought approval to conduct the survey from the head of the administrative office. The registration facility survey was conducted through a face-to-face interview with the birth registration facility vital events focal person, often this was the civil status officer.

After he/she obtained the approval, the supervisor identified an appropriate respondent who worked in the vital events registration unit (civil status officer), and then sought verbal consent from the respondent to participate in the survey. After consent was given from respondent, the field supervisor then administered the registration facility questionnaire to the participant. If the registration facility was closed or an appropriate respondent was not available on the first attempt, the interviewer would revisit the facility or attempt to find the eligible respondent at a different time the same day or the next day, up to three times. If the administrative office (registration facility) was confirmed to have been closed for an extended period or eligible respondent could not be found during the three attempts, the registration facility was considered as a non-response.

A total of 63 facilities were included, 41 registration facilities located within the kebele administrative offices in SNNP and 22 registration facilities stationed at the woredas and sub-cities administrative offices in Addis Ababa.

## Timelines

### **Training**

CRVS Trainer of Trainers Training for supervisors: December 21-22, 2018

CRVS Training of REs: December 24-26, 2018

### **Data Collection**

December 31, 2018 – March 20, 2019

## Analysis

The quantitative data generated through the KAP survey was analyzed using standard descriptive techniques. We have described the distribution of knowledge, attitudes and practice towards birth registration using univariate and bivariate statistics. Data from the DCE was analyzed using random logit models, previously used in other similar experiments (Kruk, 2016; Rockers, 2013; Kruk, 2010; Kruk, 2009). When necessary, we applied survey weights to adjust for the complex PMA2020 design and sampling strategy. Household weights were created based on the probability of the enumeration area being selected within urban and rural strata in SNNPR, and for Addis Ababa only urban strata. In both survey regions, we made adjustments for non-response to the household level.

Similarly, the registration facility survey has been analyzed using descriptive analysis. We have described the distribution of birth registration services availability; the availability of required materials to provide service; qualification and training status of service providers; the overall status of birth event registration service integration; the challenges encountered in the

process of birth event registration services and the possible solutions and recommendations indicated from the service providers to alleviate the challenges.

All analyses were performed in Stata. All statistical tests were done at a significant level of  $p \leq 0.05$ . The results are presented in text narratives, tables and graphical presentations below.

## Results

### Response Rates

Figure 3 and Table 1 below show the response rates for the PMA-CRVS study. Of the 840 selected households, 714 were relocated and determined to be eligible for the KAP survey. At the household level, the response rate was thus 85%. The field team reported difficulty in some instances with re-locating households based on information collected during round 6 of PMA 2020 (conducted five months before the PMA-CRVS survey started data collection). This relocation of households contributed to lower response rate for the KAP.

For the birth registration facilities, 66 were eligible to enroll. Of these a total of 63 completed the survey, yielding a response rate of 95%.

Figure 3: Study flowchart with sample size and response rates

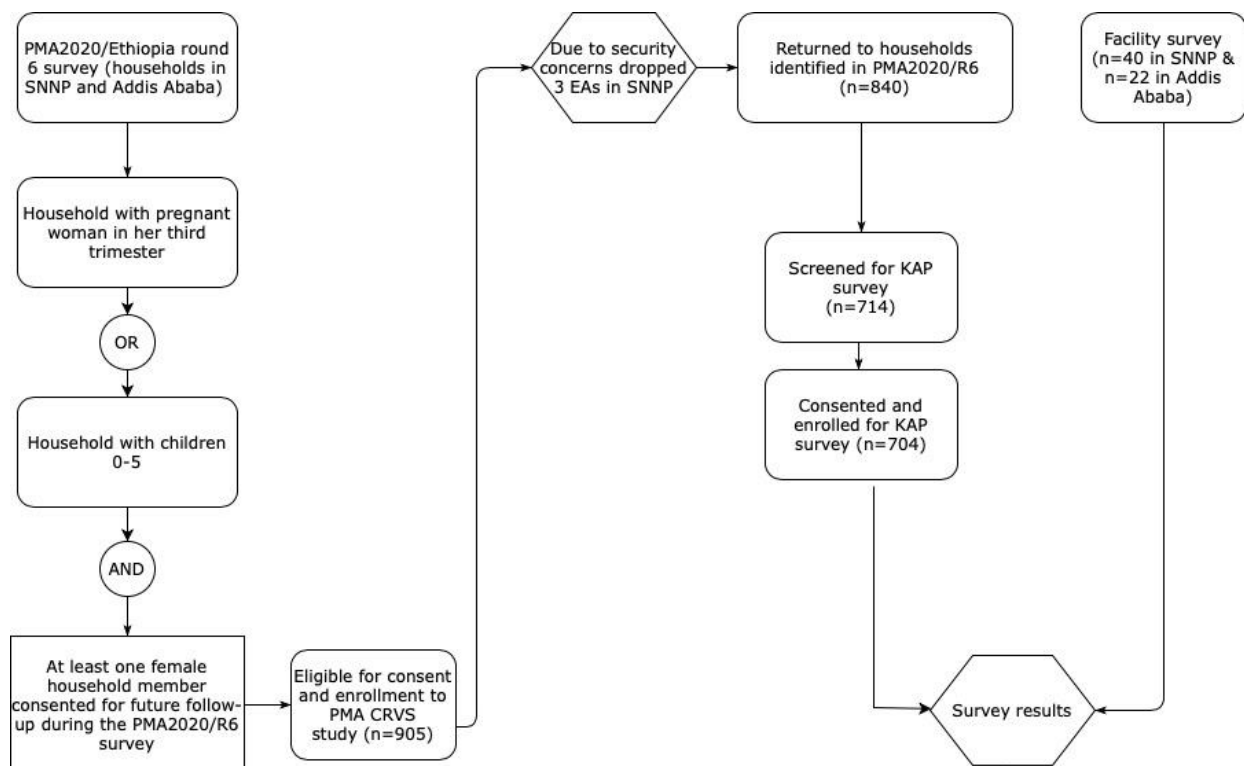




Table 1: Results of KAP interview (unweighted)

Number of households and facilities interviewed and response rates	
<b>Household interviews</b>	<b>SNNPR and Addis Ababa</b>
Households selected	840
Household interviewed	714
Household response rate	85%
<b>Birth registration facility interviews</b>	
Number of facilities selected	66
Facilities interviewed	63
Response rate among facilities	95%

## Background Characteristics

Table 2 below summarizes the household characteristics of the 714 households screened and enrolled in the study. Of the 714 households identified as being eligible in the study, 10 households were later determined to be ineligible as the index child had moved out of the household and in one case died, thus a total of 704 households in SNNP and Addis Ababa completed the KAP survey.

In SNNP the sample included approximately 80% of households in rural areas and a far smaller proportion (17.5%) in urban areas, reflecting the predominantly rural makeup of the region. In Addis Ababa, by contrast, 100% of households were in urban areas. In both regions, the majority of caregivers were between 25-34 years old (55% in SNNP and 61% in Addis Ababa). The majority of caregivers, in both regions, had attained a primary-level education. The majority of the households in Addis Ababa were among the wealthiest quintiles (77.4%), whereas in SNNP one quarter (6%) were in highest wealth quintile.

Table 2: Household Caregiver background characteristics, weighted

Caregivers background characteristics	Region				Total	
	SNNP		Addis Ababa		n	%
	n	%	n	%		
<b>Residence</b>						
Urban	101	17.5	139	100	240	33.6
Rural	474	82.5	0	0	474	66.4
<b>Total</b>	<b>575</b>	<b>100</b>	<b>139</b>	<b>100</b>	<b>714</b>	<b>100</b>
<b>Caregivers age</b>						
15-24	93	16.4	13	9.6	106	15.1
25-34	310	54.8	84	60.8	394	56
35-44	124	21.9	38	27.7	162	23.1
44 and above	39	6.9	3	1.9	41	5.9
<b>Total</b>	<b>566</b>	<b>100</b>	<b>138</b>	<b>100</b>	<b>704</b>	<b>100</b>
<b>Caregivers education</b>						
Never Attended	219	38.7	5	3.6	224	31.8
Primary (1-8)	263	46.5	39	28.6	303	43
Secondary (9-12)	42	7.4	44	32	86	12.2

Technical/Vocational	25	4.3	22	15.8	46	6.6
Higher	17	3.1	28	20	45	6.4
<b>Total</b>	<b>566</b>	<b>100</b>	<b>138</b>	<b>100</b>	<b>704</b>	<b>100</b>
<b>Wealth</b>						
Lowest quintile	144	25	0	0	144	20.1
Lower quintile	142	24.7	0	0	142	19.9
Middle quintile	143	24.9	0	0	143	20
Higher quintile	111	19.4	32	22.6	143	20
Highest quintile	35	6	108	77.4	142	19.9
<b>Total</b>	<b>575</b>	<b>100</b>	<b>139</b>	<b>100</b>	<b>714</b>	<b>100</b>

Table 3 below shows the weighted background characteristics of the children of the caregivers in the Table 2 above. A total of 998 children under 6 were reported by the caregivers as being under their care, the majority of whom live in SNNP (n=812 in SNNP and n=186 in Addis Ababa). Approximately half of children in SNNP were delivered at home (50.7%), a stark difference to Addis Ababa, where none of the children were delivered at home.

*Table 3: Background characteristics of children 0-5 reported by their caregivers in SNNP and Addis Ababa (weighted)*

Children Background characteristics	Region				Total	
	SNNP		Addis Ababa		n	%
	n	%	n	%		
<b>Child's age</b>						
0	111	13.66	39	21.17	150	15.06
1	122	15.06	38	20.24	160	16.03
2	98	12.09	30	15.92	128	12.8
3	177	21.82	32	17.12	209	20.94
4	170	20.92	28	15.28	198	19.87
5	134	16.46	19	10.27	153	15.31
<b>Child's gender</b>						
Male	414	51.0	96	51.62	510	51.11
Female	398	49.0	90	48.38	488	48.89
<b>Place of delivery</b>						
Home	412	50.7	0	0	412	41.26
Public health facility	373	45.89	138	74.37	511	51.19
Private health facility	21	2.53	47	25.32	68	6.78
Other	7	0.88	1	0.31	8	0.77
<b>Total</b>	<b>812</b>	<b>100</b>	<b>186</b>	<b>100</b>	<b>998</b>	<b>100</b>

## Birth Registration

### Knowledge, attitudes and practices among caregivers who *have* registered births of children

Overall rates of birth registration of children under 5 remains low. 14.4% of children aged 0-5 in Addis Ababa have had their births registered. In SNNP only 5.7% of children aged 0-5 had their birth registered. In both Addis Ababa and SNNP, caregivers with more education were more likely to have registered the birth of their child/ren. Moreover, birth registration is

relatively higher for caregivers who give birth in private facilities. In SNNP and Addis Ababa respectively, 20.9% and 17.2% of caregivers who delivered in private facilities reported having registered the birth. By comparison, among caregivers whose children were delivered in public facilities only 6.3% in SNNP and 13.4% in Addis Ababa reported having those births registered as Table 4 shows.

*Table 4: Percentage of children age 0-5 whose births with birth registration (certificate or registered), by socio-demographic characteristics - Addis Ababa and SNNP*

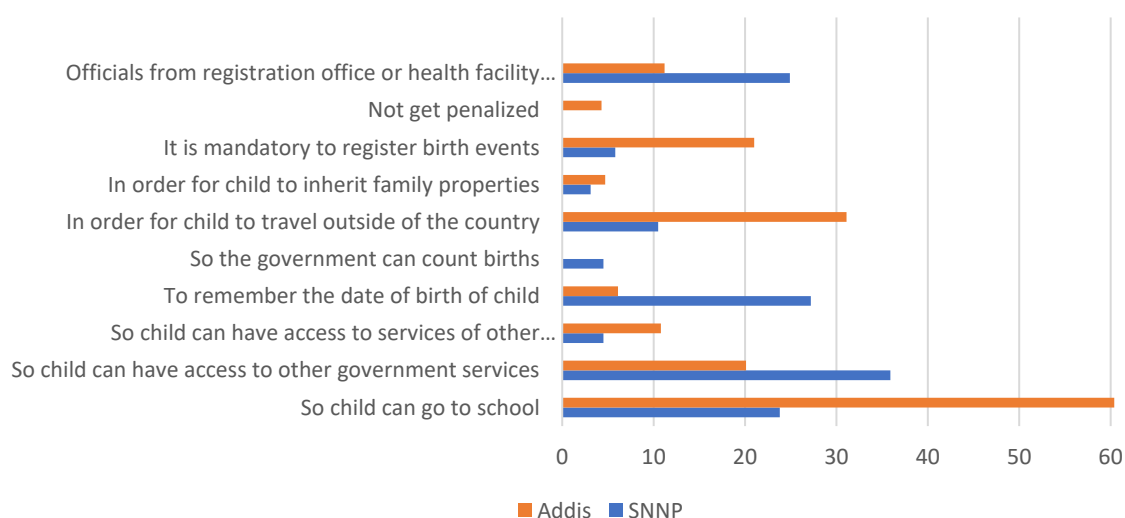
	Birth registration and certificate status					
	Addis Ababa			SNNP		
	Registered birth (%)	Has certificate	Not registered birth	Registered birth (%)	Has certificate	Not registered birth
<b>Residence</b>						
Urban	14.4	10.4	85.6	5.6	3.1	94.4
Rural	-	-	-	5.7	1.3	94.3
<b>Child's age</b>						
0	11.4	10.5	88.6	8.9	3.7	91.1
1	13.4	11.9	86.6	13.5	2.5	86.5
2	10.7	8.1	89.3	7.1	3.1	92.9
3	23.2	11.4	76.8	1.6	0	98.4
4	16.1	12.3	83.9	2.1	0.2	97.9
5	10.4	6.6	89.6	4.8	1.7	95.2
<b>Child's gender</b>						
Male	16.3	12.9	83.7	3.3	1	96.7
Female	12.3	7.7	87.7	8.2	2.1	91.8
<b>Caregiver's age</b>						
15-24	12.3	10.3	87.7	3.6	0.4	96.4
25-34	14.9	10.7	85.1	7.9	2.2	92.1
35-44	14.8	10.6	85.2	2.5	0.9	97.5
45 and above	0	0	100	0	0	100
<b>Married</b>						
No	3.7	3.7	96.3	1.2	0.8	98.8
Yes	15.1	10.9	84.9	5.9	1.6	94.1
<b>Caregiver's education</b>						
Never Attended	10.7	0	89.3	3.7	2.1	96.3
Primary (1-8)	15.9	14.4	84.1	6.2	0.5	93.8
Secondary (9-12)	16.2	10.7	83.8	10.5	2.5	89.5
Technical/Vocational	7.6	5.4	92.4	9	7.3	91
Higher	16.5	10.5	83.5	9.4	0	90.6
<b>Wealth quintile</b>						
Lowest quintile	-	-	-	6.5	0	93.5
Lower quintile	-	-	-	2.8	0.5	97.2
Middle quintile	-	-	-	7.9	3.6	92.1

Higher quintile	11.6	7.8	88.4	6.2	1.7	93.8
Highest quintile	15.1	11.1	84.9	4.1	3.4	95.9
<b>Place of delivery</b>						
Home	-	-	-	4.1	0.2	95.9
Public health facility	13.4	10.3	86.6	6.3	2.1	93.7
Private health facility	17.2	10.9	82.8	20.9	20.1	79.1
<b>Total</b>	<b>14.4%</b>	<b>10.4%</b>	<b>85.6%</b>	<b>5.7%</b>	<b>1.6%</b>	<b>94.3%</b>

Table 4 above shows the proportion of children under 5, whose birth was registered and among these children who have registered births, those who have a birth certificate. In the KAP survey, if a caregiver indicated that their child's birth was registered, the data collector asked a series of follow-up questions on the birth registration process and certificate process. In Addis Ababa, only 10.4% have a birth certificate and in SNNP the proportion of children with a birth certificate was only 1.6%.

Among caregivers who had registered the birth of the child/ren under 5, a variety of reasons were stated for their decision to register the births. These reasons are summarized in Figure 4 below. The most common of these were for the child to be able to attend school (60.4% in Addis Ababa and 23.8% in SNNP). Caregivers also believed that birth registration would allow their child to have easier access to various government services (20.1% in Addis Ababa and 35.9% in SNNP) as Figure 4 below shows. In addition, 27.2% of SNNP respondents stated that they registered their children's birth so they can remember the birthdate of their children. That estimate for Addis Ababa was 6.1%. It is concerning that nearly a quarter (24.9%) in SNNP and 11.2% of the respondents in Addis Ababa state that they decided to register the birth of their child because they felt that the registration authorities or officers forced them to.

*Fig. 4: Reasons why caregivers decided to register birth of child - percentage of caregivers in Addis Ababa and SNNP, among caregivers who have registered a birth*



Federal law in Ethiopia mandates that parents who do not register births within 90 days of delivery will be penalized. Despite this law, only 21% of caregivers in Addis Ababa and 5.8% in SNNP stated that they decided to register the birth because registration is required by law. A much smaller proportion of parents seem to be aware that failure to register a birth can be penalized. Among caregivers who registered the births of their children only 4.3% in Addis Ababa said they did this to avoid being penalized by the government. In SNNP none of the caregivers listed this as a reason to explain why they chose to register the birth.

As Table 4 shows, 14.4% of children under 6 in Addis Ababa and 5.7% in SNNP have had their births registered. However, far fewer caregivers, particularly in SNNP, reported that these births were actually registered at the respective civil registry office (Table 5). As mentioned earlier, the law on registration in Ethiopia states that births can only be registered at the designated civil registry office which is typically at the kebele or woreda/district office. When a child is born in a health facility, regardless of whether it is public or private, caregivers receive a formal birth notification document. The notification document, or card in some cases has to be taken by the parents or legal caregivers to the kebele registration office and only then can parents be able to register the birth of the child. The birth notification form/card cannot serve as an official registration of a birth. The birth notification card/form is however an acceptable document, along with other paperwork provided by caregivers that can be used when registering the birth.

In the KAP survey, for caregivers who reported having had the birth of their child registered there was a series of follow-up questions, one of which asked where they registered the births as births can only be registered at the civil registry office. However, looking at Table 5 below the percent of caregivers reporting that they registered the births at the kebele civil registry office is surprisingly low. In SNNP only 23% of parents reported that they registered the births at the civil registration office. This is in stark contrast to Addis Ababa where nearly three quarters (71.1%) of caregivers who said they registered the births of their child had registered these births at the woreda or kebele civil registry.

*Table 5: Percentage of children under 5 who had their birth registered with the woreda or kebele civil registry*

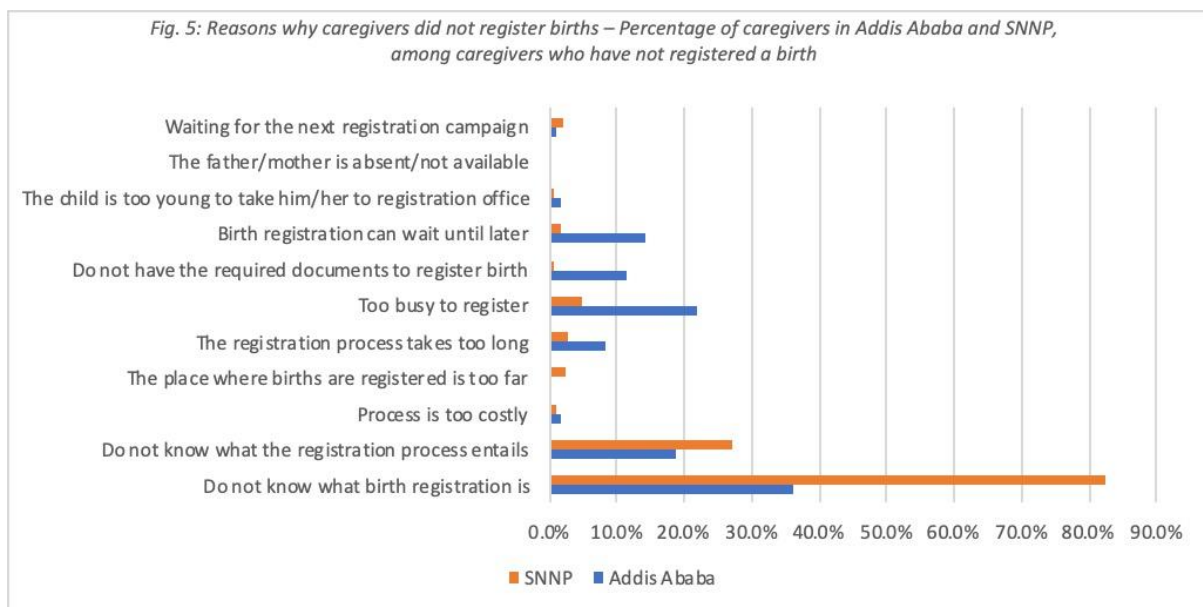
Region	Yes (%)	No (%)
SNNP	23.0%	77.0%
Addis Ababa	71.1%	28.9%
<b>Total</b>	<b>32.4%</b>	<b>67.6%</b>

The results from this survey therefore suggest that even among those caregivers who reported having registered the birth of their child, there may be misreporting by caregivers. The results show that caregivers, even among those who state to have registered the birth of their child, may be unaware of the process of birth registration, the laws, and know where and how to register births.

Knowledge, attitudes and practices among caregivers who have not registered births of children

While a growing number of caregivers have registered births of their children, the majority however have not, particularly in SNNP. The percent of caregivers who have not registered births in SNNP is a startling 94.3% and in Addis Ababa is 85.6% (Table 4).

There are number of reasons that can help explain the low rates of registration and chief among them, particularly for SNNP, is that many caregivers were not aware of what birth registration is, what it entails or have not heard of any messages via media or in the community about birth registration. 82.3% of caregivers who have not registered the birth of their child in SNNP said that they do not know what birth registration means. Among caregivers in Addis Ababa who have not registered births of their children 36.1% said they did not know what birth registration means (Figure 5 below).



As Figure 5 above shows caregivers in Addis Ababa are relatively more knowledgeable of birth registration and its purpose. 28.2% in Addis Ababa and 15.2% in SNNP of caregivers say they do not know what the process involves. It appears that for caregivers in Addis Ababa, barriers to registration are mostly related to limitations on their time. 18.4% of caregivers in Addis Ababa say they are too busy to register the birth, whereas 2.6% of caregivers in SNNP state this as a barrier to registration.

Underscoring the difference in knowledge and awareness of the birth registration between SNNP and Addis Ababa further is the percent of caregivers who have heard messages about birth registration, which is shown in Table 6 below.

*Table 6: Percentage of caregivers who have ever heard of messages on need of registering births*

Region	Yes (%)	No (%)	Do not know (%)
SNNP	21.8%	72.0%	6.2%
Addis Ababa	60.0%	38.8%	1.2%
<b>Total</b>	<b>29.3%</b>	<b>56.3%</b>	<b>5.2%</b>

Less than one-third (29.3%) of all caregivers who have not registered the births of their children said they have ever heard of any messages/public service announcements about the importance of birth registration. Almost three quarters (72%) of the caregivers in SNNP reported that they have not heard of any messages, this figure among caregivers in Addis Ababa was 38.8%. Table 7 below further underlines the disparities in knowledge and awareness between caregivers in Addis Ababa and SNNP.

*Table 7: Knowledge of places where births can be registered: as reported by caregivers in Addis Ababa and SNNP who have not registered birth*

<b>Places where caregivers reported being able to register births</b>	<b>Addis Ababa</b>	<b>SNNP</b>
At the kebele/woreda/sub-city office	71.1%	23.0%
Health facility	29.6%	16.3%
Church or Mosque	14.1%	2.3%

By law, the only place where caregivers can register the birth of their child is at the kebele/woreda/sub-city office. Health facilities and religious institutions can issue, and often do issue, birth notifications that can be used when registering births at a designated administration office. The table above suggest there is a large knowledge gap between caregivers in Addis Ababa and SNNP. Over two-thirds (71.1%) of caregivers in Addis Ababa correctly identified the sole authority able to register births and record vital statistics. This figure was only 23% among caregivers in SNNP who had not registered births.

### Discrete Choice Experiment

We also investigated the preferences of caregivers for the registration of the births of their children in these two regions of Ethiopia. We did so using a population-based discrete choice experiment (DCE). This is a survey methodology in which respondents are asked to repeatedly choose between hypothetical versions of a good or service characterized by different, randomly selected attributes (Mangham et al, 2009). Statistical analysis of DCE data then allows assessing the relative importance of each of these attributes in influencing decisions to obtain or forego a particular good or service. DCEs are widely used in business and marketing and have recently been mobilized extensively to guide health system strengthening in LMICs. This methodology has however not been used to inform the development of CRVS systems.

The DCE module was designed to estimate the relative value that caregivers assigned to different attributes of birth registration facilities in considering whether and where to register their child. We first conducted a review of the literature on the barriers to birth registration in LMICs. Based on the outcomes of this review, we identified several barriers that are characteristics of the registration process or the facilities that carry out this process. We then determined which of these barriers were relevant to the Ethiopian context through a review of legislative documents (i.e., the 2012 and 2017 proclamations relative to civil registration), and consultation with VERA officials.

This process yielded a list of 6 attributes to be included in the DCE. These were 1) the cost of obtaining a birth certificate, 2) the time to wait for service at the registration facility, 3) the



number of visits required to register a birth and obtain the birth certificate, 4) the opening hours of the registration facility, 5) the distance to the registration facility from the caregiver’s residence, and 6) whether the presence of one or both parents is required to complete the registration process. For each attribute, we selected 2 to 3 levels that were either representative of the situation of birth registration in Addis Ababa and SNNP regions or represented potentially desirable alternatives. Finally, we piloted the DCE design with stakeholders, as well as potential data collectors and participants. We refined the definition and levels of each attribute based on their feedback.

Each DCE participant was asked to evaluate hypothetical registration facilities with various combinations of the above characteristics. In total, there were 324 potential combinations of the attributes (and their levels) described in table 8 below, such that respondents could not evaluate each of these combinations. Instead, we asked them to make 8 choices between two randomly selected hypothetical registration facilities. The choice sets were formed using the DCREATE module in Stata, which creates efficient fractional designs for DCE (Hole, 2015). This approach allows assessing preferences for each level of the various attributes. In each of the choice sets, respondents were given the option to select neither facility.

*Table 8: Attributes and levels of registration facilities used in the discrete choice experiment, Addis Ababa and SNNP regions of Ethiopia 2018/19*

<b>Attributes</b>	<b>Levels</b>
<i>Cost of birth certificate</i>	Free (0 Birr)
	100 Birr
	250 Birr
<i>Time to wait for service at registration facility</i>	1 Hour
	3 Hours
	5 hours
<i>Number of visits required to register birth</i>	Single visit
	Multiple visits
<i>Opening hours of the registration facility</i>	Regular hours (weekdays, 8:30-17:00)
	Extended hours (weekdays, 8:30-19:00)
	Weekend hours (weekdays, 8:30-17:00 + Saturdays, 8:30-12:00)
<i>Distance to registration facility</i>	30 minutes walk
	2 hours walk
	4 hours walk
<i>Application procedures</i>	Only one parent present
	Both parents present

The DCE included two practice choice sets, during which interviewers could demonstrate DCE procedures to respondents, verify their understanding of these procedures, and address any questions or misunderstandings they might have. We also added an additional choice set that contained a “dominant” response. In this latter set, one of the two hypothetical facilities was preferable to the other facility on all attributes. This choice set was inserted to evaluate the respondents’ comprehension of DCE questions. It was randomly placed in the sequence of choice sets to avoid instances where interviewers would automatically select the dominant

choice to save time, instead of asking respondents to make the selection. Finally, we randomly varied between respondents the order in which attributes were displayed on the screen. This allows assessing whether respondents predominantly make decisions based on the value of the first attribute that appears. Similar checks have been used in prior studies to help establish the reliability of the DCE data.

To conduct the DCE, interviewers were first instructed to read a script explaining the DCE procedures to respondents. Then, they were asked to state the levels of the attributes of each hypothetical facility included a choice set, and to repeat these attributes if necessary. They were also instructed to encourage respondents to take their time in making each choice, and to carefully consider each alternative. Using ODK, we built several automated quality checks into the DCE section of our data collection application. For example, we flagged instances where a respondent would opt out of each choice set (i.e., selecting neither facility) or instances where a respondent would select the same facility (e.g., facility A) in each choice set. Field supervisors were alerted to those occurrences, and were asked to provide feedback to interviewers.

Among the 714 participants in the birth registration study, 704 completed the DCE module (98.6%). Those DCE participants failed to complete 52 out of 5,640 total DCE choices they were asked to make (0.9%). Among valid DCE answers, respondents opted out of the choice between the two hypothetical facilities 726 out of 5,588 times (13.0%). Two thirds of respondents never opted out of the choice they were asked to make (470/704, 66.7%), and only 6 respondents (0.85%) opted out of every choice. In the choice set with a dominant option, 656 respondents selected the objectively most desirable registration facility (out of 703 respondents who provided valid answers to this choice set, 93.3%).

Results from the willingness to pay analysis are shown in Table 9. They indicate that, relative to a facility open at regular weekday hours, DCE participants were willing to incur an additional cost of 32.3 birr (i.e., 1.15 USD) in order to attend a registration facility that remains open for extended hours on weekdays, whereas they were willing to pay an additional 60.9 birr (i.e., 2.00 USD) in order to attend a facility that opens on weekends (i.e., Saturday morning). These analyses also indicated that DCE participants were willing to pay 43.70 birr (1.50 USD) to attend a registration facility that only required one visit to obtain the birth certificate, and 25.10 birr (0.90 USD) to attend a facility that only required one of the parents to be present to register the birth. On the other hand, the choices made by respondents implied that they would require compensation to attend registration facilities that were further away from their own residence.

*Table 9: Estimates of willingness-to-pay for facility attributes from mixed logit models, Addis Ababa and SNNP regions of Ethiopia 2018/19*

Attribute	WTP coefficient <sup>a</sup>	95% CI
Waiting time		
Hours required for service	-1.983	(-5.341 to 1.375)
Number of visits required to complete registration		
Multiple visits (Ref)	1	--
Single visit	43.654***	(33.062 to 54.245)
Opening hours		

Regular hours (Ref)	1	--
Extended hours	32.342***	(19.224 to 45.460)
Weekend hours	60.873***	(43.392 to 78.354)
Distance		
Hours to reach facility	-41.473***	(-45.217 to -37.729)
Application procedures		
Both parents required to be present (Ref)	1	--
Only one parent required to be present	25.077***	(14.098 to 36.055)

Notes: <sup>a</sup> the coefficients are expressed in birr (1 birr = 0.035 US Dollar as of 1/1/2019). A positive coefficient represents the amount that respondents are willing to contribute to access a facility with a given level of an attribute. Negative coefficients indicate that respondents should be compensated in order to offset the disutility due to a specific level of an attribute.

\*\*\* p<0.001, \*\*p<0.01, \* p<0.05

### Facility-based survey results

The PMA-CRVS study in Ethiopia also conducted a facility-based survey. The survey included the designated administrative offices/facilities serving the study site areas and therefore reflected the facilities available to the study population. The survey included a total of 62 facilities, which were reported by supervisors and confirmed by VERA as the designated facilities serving each EA included in the survey sample. These facilities were also designated to provide other vital registration services, but focus of the survey was on availability of birth registration services and challenges and recommendations from the providers' perspective.

Table 10: Facility characteristics, among administrative offices in SNNP and Addis Ababa

Facility characteristics	Region				Total	
	SNNP		Addis Ababa		n	%
	n	%	n	%		
Provide birth registration services	40	100%	22	100%	62	100%
Other vital registration services offered						
Death registration	40	100%	22	100%	62	100%
Marriage	39	97.5%	22	100%	61	98.4%
Divorce	39	97.5%	22	100%	61	98.4%
Adoption	5	12.5%	22	100%	27	43.5%
Legitimization of fatherhood	2	5%	21	95.5%	23	37.1%

All facilities in the sample reported providing birth registration services as well as death registration services. There was more variability in service provision between SNNP and Addis Ababa facilities for adoption and legitimization of fatherhood process. Legitimization of the fatherhood process is where paternity is checked and verified.

While all facilities in SNNP and Addis Ababa that were included in the survey reported providing birth registration services to the residents in the communities they serve, all reported various challenges with the process and service provision.

The facilities tasked with recording vital events, issuing birth certificates and registering births are also responsible for a multitude of other services, including issuing identification cards, collecting land and agricultural taxes, organizing labor and in-kind contributions and resolving conflicts through social courts (Yilman, 2008). The staff assigned to issue birth registration are often the same staff who are already responsible for all other activities and services provided by the kebele office. In Table 11 below, nearly three quarters (71.4%) of staff at the facilities in Addis Ababa believe that they do not have adequate skilled manpower and nearly half (45%) of staff in facilities in SNNP stated this as challenge. Similarly, 75% of administrators at facilities in SNNP said that staff responsible for provision of these services are overburdened. In Addis Ababa, a relatively smaller percentage (23.8%) reported staff being overburdened. Another common challenge reported by facilities in both regions was perceived low levels of community awareness on registration (67% in Addis Ababa and 80% in SNNP).

Unique to Addis Ababa, where reports to VERA are submitted via internet, administrators reported that interruptions to internet service were their biggest challenge. 95% of facilities in Addis Ababa and just 2.5% of facilities reported interruptions to internet as a challenge to providing birth registration services.

*Table 11: Reported challenges of providing birth registration services among facilities in SNNP and Addis Ababa*

<b>Challenges in provision of birth registration</b>	<b>Addis Ababa</b>	<b>SNNP</b>
Inadequate skilled manpower	71.4%	45.0%
Lack of support from VERA	14.3%	42.5%
Insufficient or no budget	52.4%	65.0%
Staff overburdened with coinciding duties	23.8%	75.0%
Low birth registration awareness in the community	66.7%	80.0%
Low demand from community for birth registration	66.7%	62.5%
Limited/inadequate space for registration facility	66.7%	22.5%
Limited/inadequate equipment to archive birth registers	71.4%	47.5%
Interruption of internet connection	95.2%	2.5%
Limited clarity on policy/rules/regulations/requirements	38.1%	12.5%

The PMA CRVS facility survey also included a series of questions to administrators on what would improve the overall registration process. As Table 12 below depicts, an almost equal proportion of facilities in SNNP (72.5%) and Addis Ababa (72.7%) believe that either allocating budgets for this activity or providing additional budget would improve the overall process. Similarly, staff at facilities in both sites reported in almost equal proportions that dedicated staff responsible for birth registration should be recruited (68.2% in Addis Ababa and 70% in SNNP). Respondents to the facility survey also felt that additional training for registration staff would be beneficial (45.5% in Addis Ababa and 55% in SNNP).

As with findings from the KAP survey, both providers and caregivers noted there need to be more effort to increase awareness and demand for registration services. Of the facilities included in the study, 59.1% in Addis Ababa and 65% in SNNP believe that announcing birth

registration laws to the community would improve overall demand. Additionally, another popular recommendation among respondents to the facility survey in both regions was for the registration process to be integrated with other stakeholders, community services and entities (e.g. school enrollment) – 45.5% in Addis Ababa and 62.5% SNNP.

*Table 12: Recommendations from staff responsible for the provision of birth registration and certificate process*

<b>Recommendations for improvements</b>	<b>Addis Ababa</b>	<b>SNNP</b>
Provide training to registration service providers	45.5%	55.0%
Need more support from VERA	63.6%	52.5%
Allocating budget or providing additional budget	72.7%	72.5%
Recruit staff who will undertake registration services	68.2%	70.0%
Announcing birth registration laws and legislations to the community	59.1%	65.0%
Get/purchase cabinets to store birth registers service	68.2%	35.0%
Support from Health facilitates in notifying and linking birth events with the registration office	45.5%	47.5%
Making birth certificate as a requirement for vaccination	22.7%	15.0%
Improve internet connectivity	81.8%	2.5%
Service integration with other stakeholders	45.5%	62.5%

## Discussion

Vital events registration in LMICs, particularly birth and death registration remain low, particularly when compared with higher and middle income countries. Ethiopia, similar to other LMICs is a country where birth registration at the national and regional levels remains low. Most data on birth registration are typically collected during large-scale surveys such as the DHS or MICS. These surveys often include a brief set of questions asking respondents if their children have a birth certificate; with no follow-up questions on knowledge and attitudes about birth registration. The objective of PMA-CRVS was to determine facilitators and barriers to birth registration from the perspective of caregivers and providers. Priority indicators and survey tools were identified by the PMA2020 research team in close collaboration and consultation with VERA. The study was implemented in Addis Ababa and the SNNP Region of Ethiopia. While the results indicate improvements since the most recent DHS in the percent of birth registered, there remains substantial room for improvement, particularly in raising awareness.

As our analysis indicates the percent of children 0-5 whose births are registered is higher in Addis Ababa (14.4%) compared to SNNP (5.7%). This disparity in registration was noted in EDHS2005 and EDHS2016, and findings from this survey indicate a continuing trend of higher registration rates in the capital city compared to other more rural regions. This survey also found a number of other clear differences in knowledge, attitudes and practices in birth registration between these two regions. 82.3% of caregivers in SNNP who have not registered the births of their child/ren said the reason they have not done so is because they do not know what birth registration is. In Addis Ababa, this figure was 36.1%, still relatively high, but markedly lower than SNNP.

The results from this survey also found that caregivers may not be fully aware of the processes required. Results indicate that caregivers may not be aware of the difference between a birth notification document/card, a formal birth registration documentation and a birth certificate. In addition, a high proportion of caregivers seem to be unaware of where births must be registered. By law, births can only be registered at the designated registration offices at the kebele or district level. Despite this, among caregivers who said that they registered the births of their children only 71% in Addis Ababa and 23% in SNNP indicated that they registered the births at the kebele office; with caregivers noting that hospitals and churches are additional locations where can be registered births. Health facilities issue birth notification forms and churches issue certificates of baptism, both of which can be used as documentation to complete the birth registration process at the vital event registration office, but are not in and of themselves proof of registration. The results from this survey indicate that there is a level of confusion among caregivers, suggesting that community awareness and knowledge needs to be addressed.

This survey found that a proportion of caregivers are unaware of the laws regarding birth registration. This is true for caregivers who have registered births as well as those have not. These figures would suggest that VERA needs to increase their awareness campaigns in both rural and urban areas and implement community sensitization campaigns and events to develop awareness and knowledge about registration and the laws to caregivers.

Our findings from the DCE document the preferences of caregivers in registering births in these two regions of Ethiopia. We evaluated the quality of the data generated by this DCE using standard strategies. This assessment indicated that our DCE generated choice data that met quality benchmarks through which other DCEs have been evaluated. The use of DCE allowed confirming the existence of significant barriers to birth registration related to costs and distance in these two regions of Ethiopia. DCE participants were less likely to opt for registration facilities that were further away from their homes, and/or that charged a fee for the acquisition of the birth certificate. This is consistent with the findings of several other studies that have investigated barriers to birth registration in other settings and using a broad array of other methodologies (Fisker et al, 2019).

Our study also highlighted other characteristics of registration facilities, and the registration process, that might play a key role in the registration-related behaviors of caregivers. In particular, we found that choices were influenced by the opening schedule of the facility: DCE participants expressed consistent preferences for registration facilities that remained open for longer hours on weekdays, and especially for facilities that also opened on weekends. This might be because in Addis Ababa and in more urbanized areas of SNNP, the current opening schedule of registration facilities conflicts with work schedules or with times during which economic activities of caregivers are ongoing.

In willingness-to-pay analyses, we estimated that caregivers were willing to pay more than 60 birr (i.e., approximately 2.0 US dollars on 1/1/2019) to access a registration facility that was open on weekends. According to World Bank estimates of the gross domestic product (GDP) for 2018, this is slightly less than one day of average earnings in Ethiopia. This is however an imperfect benchmark for our study since it is based on national GDP estimates, whereas our sample is predominantly drawn from Addis Ababa and urban areas of the SNNP region. These

are areas that are significantly richer than other, more rural areas of the country. For example, according to the 2016 Ethiopia DHS, 99.9% of the households in Addis Ababa belonged to the highest wealth quintile. Our use of this benchmark might thus over-estimate the trade-offs that caregivers in Addis Ababa and SNNP region are willing to make in order to access registration facilities with specific attributes.

We also found strong preferences for registration facilities that deliver a birth certificate in a single registration visit, and for facilities that only required one of the two parents to be present at the time of registration. The current CRVS policy in Ethiopia requires that the administrative facilities implementing the birth registration process deliver the birth certificate immediately to the parents/caregivers. However, in our survey, more than a third of caregivers who had registered the birth of their child reported having to return to the registration facility multiple times before they could complete that process. On the other hand, the main procedure outlined by the current legal framework in Ethiopia requires both parents to be present at the registration facility in order to register a birth. This might constitute a significant barrier to birth registration, as indicated by our DCE results and by the results of prior studies that have investigated reasons reported by caregivers for not registering a birth in other settings (Fisker et al, 2019). Indeed, this might make birth registration particularly complex for children who have at least one parent engaged in migration (e.g., work-related), or for children whose parents might no longer be in a relationship/union.

Findings from the facility-based survey echo similar results to the KAP on the awareness of the processes among the community. Among the sampled facilities in SNNP, 80% of facilities believe that a key reason why parents do not register births is because there is low awareness in the community. In Addis Ababa, 66.7% of facilities in the sample feel that low awareness in the community contributes to low levels of birth registration. Additionally, facility staff in both survey regions feel that more resources need to be made available to staff to better equip them with the ability to provide services. 75% of facilities in the SNNP sample feel that staff is overburdened and in Addis Ababa, 23.8% of facilities feel this to be a major constraint on service provision.

Similar to findings from the KAP survey, there are stark differences in some measures between SNNP and Addis Ababa. For example, 95.2% of facility staff in Addis Ababa feel interruptions to internet services limits service provision as reports to VERA are sent electronically. In SNNP only 2.5% of facilities reported interruptions to internet services as a key challenge to service readiness and provision. Interestingly, facilities in the two regions also reported different levels of support from VERA. Nearly half of the facilities in SNNP (42.5%) feel that they do not have adequate support from VERA to provide registration services. In Addis Ababa, however only 14.3% of facilities in the sample feel that a lack of support from VERA is impedes service provision.

## Strengths and Limitations

The implementation of the PMA-CRVS study was limited to two regions in Ethiopia, one of which was an entirely urban sample. Ethiopia is a country where over 80% of the population



is rural. Therefore, the sample selection may be criticized for not including a larger sample of regions that reflect the diversity and the true rural-urban composition in Ethiopia. In addition to the representativeness of the sample beyond the two regions, the overall sample size of households and facilities was small. This limited our ability to identify statistically significant differences across background characteristics, such as wealth or parity or facility type. While we included several questions in the KAP survey to measure the knowledge and attitudes towards birth registration, due to a lack of other population-based surveys measuring these values, it is difficult to validate our values. In addition, future work would be improved by expanding the facility survey sample.

Despite these limitations, the PMA-CRVS study has several strengths. First, the PMA-CRVS study worked closely with VERA to design the survey tools and implement the study. In addition, officials and staff from VERA attended and actively participated in the training of field staff, providing insightful and informative comments and feedback throughout the process. Preliminary results have also been shared with VERA with the hope that results and recommendations from the survey can be implemented by the agency charged with this responsibility in Ethiopia. Additionally, the study utilized enumerators who had conducted multiple rounds of PMA2020 surveys and who were familiar with survey work and with the communities in which they were collecting data. The familiarity with respondents and relationship with the community that REs have built over time could have helped with data quality.

Another strength of the PMA-CRVS study is that previous national surveys focus measures only on the proportion of children under 5 years of age who have a birth certificate and/or whose birth may have been registered with the registration authorities and not on measures of knowledge and attitudes towards vital events registration. Therefore the information available on knowledge and attitude towards birth registration and facilitators and barriers of birth registration is limited. Moreover, there is limited data that present the providers' perspectives. Both perspectives are however needed to efficiently strengthen birth registration systems. Providers' perspectives are particularly informative for relevant government agencies and stakeholders to understand service provision dynamics and identify areas for prioritization and improvement. This survey provides rich data from the caregiver and the provider perspective. The study team also partnered closely with implementers and policy makers in Ethiopia to help inform policy and program changes.

Our DCE also has several specific limitations. First, we only investigated the main effects of each attribute of the registration facilities and processes, without considering potential interactions between these attributes. This is problematic because it is plausible that the effects of an attribute might depend on the levels of another: for example, facilities that remain open on weekends might be particularly attractive in settings where both parents are required to be present at the time of registration, because it is more likely that both parents will be available at the same time on weekends. Second, due to limited sample sizes, we did not investigate whether the effects of attributes varied across population sub-groups, e.g., by poverty, educational level of the caregiver, or region. Third, we only presented DCE respondents with choices that were characterized by a limited set of attributes or levels of these attributes. Other aspects of the registration facilities/process might affect registration

choices, e.g., whether the registration office is located in an administrative setting or in a healthcare setting.

## Recommendations

VERA and the federal and local authorities charged with the responsibility of ensuring the registration of vital events have made progress over the years. A growing number of caregivers and members of the general population are becoming more aware of the importance of vital events registration.

The current study does however underscore several gaps in knowledge among caregivers on the birth registration process, requirements and overall the law. The study results highlight regional disparities among caregivers and their practices, with caregivers in Addis Ababa appearing to have higher rates of registration when compared to those in SNNP. The study also reveals that barriers and facilitators of birth registration appear to be somewhat different between Addis Ababa and SNNP. Therefore, birth registration promotion strategies should consider the local context and tailor to a region specifically.

Our DCE analysis indicates a number of strategies that might help further accelerate the scale-up of birth registration in Addis Ababa and in the SNNP region. In particular, it appears warranted to explore whether altering the opening schedule of registration facilities to allow late nights and weekend openings might help improve birth registration rates. This is feasible within the current legislative framework for birth registration in Ethiopia and could thus be tested during a cluster-randomized trial in those two regions. Such a change might stimulate the demand for birth registration and complement initiatives that aim to strengthen and streamline the administrative systems that implement civil registration services. Other strategies highlighted by our DCE (e.g., reducing the legal requirements for parental presence at the time of registration) might also have an impact on birth registration rates, but would not be possible without amendments to the legislative framework that regulates birth registration in Ethiopia.

The study also found that among facilities providing vital events registration services, staff in both regions feel that additional staff, training, budget and resources would improve service provision. Staff also underscored the importance of increased community awareness initiatives.

From the provider and caregiver perspectives, results from this survey indicate that demand and knowledge remain a challenge and while there are regional disparities overall registration remains low. Given these findings, authors of this report recommend continued and widespread community awareness campaigns. These campaigns can be implemented throughout the country through multiple mediums – radio, television, print media – as well as hosting events at kebele offices/in the community to educate general population on the laws and processes required by caregivers.

Additionally, VERA should assess the capacity of staff at the kebele/administrative offices and whether staff would benefit from additional training. VERA should also consider other

resource constraints and see how best they are able to alleviate some of those challenges so that staff can feel that they are equipped to provide needed services.

While the process, requirements and fee structures vary by region, VERA should work closely with the various administrative offices to address regional disparities in knowledge, services access and provision.

## References

AbouZahr C, de Savigny D, Mikkelsen L, Setel PW, Lozano R, Nichols E, et al. Civil registration and vital statistics: progress in the data revolution for counting and accountability. *Lancet*. 2015;386:1373-85.

Cappa C, Gregson K, Wardlaw T, Bissell S. Birth registration: a child's passport to protection. *Lancet Glob Health*. 2014;2:e67-8

Conference of Ministers. A Report for the fourth Conference of Ministers Responsible for CRVS. Country Report on Ethiopia. 2012. [http://www.apai-crvs.org/sites/default/files/public/Country%20Report%20-%20Ethiopia\\_Eng\\_0.pdf](http://www.apai-crvs.org/sites/default/files/public/Country%20Report%20-%20Ethiopia_Eng_0.pdf)

Federal Government of Ethiopia. Federal Negarit Gazeta. Proclamation No. 760/2012. Registration of Vital Events and National Identity Card Proclamation. 2012

Federal Government of Ethiopia. Federal Negarit Gazeta. Proclamation No. 1049/2017. Registration of Vital Events and National Identity Card Proclamation. 2017

Fisker, A. B., Rodrigues, A. and Helleringer, S. (2019), Differences in barriers to birth and death registration in Guinea-Bissau: implications for monitoring national and global health objectives. *Trop Med Int Health*, 24: 166-174. doi:[10.1111/tmi.13177](https://doi.org/10.1111/tmi.13177)

Hole, AR 2015. "DCREATE: Stata module to create efficient designs for discrete choice experiments," Statistical Software Components S458059, Boston College Department of Economics, revised 25 Aug 2017.

ICF and Central Statistical Agency (CSA) [Ethiopia]. (2016). *Ethiopia Demographic and Health Survey*. Addis Ababa, Ethiopia, and Rockville, Maryland, USA.

ICF and Central Statistical Agency (CSA) [Ethiopia]. (2005). *Ethiopia Demographic and Health Survey*. Addis Ababa, Ethiopia, and Rockville, Maryland, USA.

Kruk ME, Johnson JC, Gyakobo M, Agyei-Baffour P, Asabir K, Kotha SR, et al. Rural practice preferences among medical students in Ghana: a discrete choice experiment. *Bull World Health Organ*. 2010;88:333-41.

Kruk ME, Paczkowski M, Mbaruku G, de Pinho H, Galea S. Women's preferences for place of delivery in rural Tanzania: a population-based discrete choice experiment. *Am J Public Health*. 2009;99:1666-72

Kruk ME, Riley PL, Palma AM, Adhikari S, Ahoua L, Arnaldo C, et al. How Can the Health System Retain Women in HIV Treatment for a Lifetime? A Discrete Choice Experiment in Ethiopia and Mozambique. *PLoS One*. 2016;11:e0160764.

Mangham LJ, Hanson K, McPake B, How to do (or not to do) ... Designing a discrete choice experiment for application in a low-income country, *Health Policy and Planning*, Volume 24, Issue 2, March 2009, Pages 151–158, <https://doi.org/10.1093/heapol/czn047>

Plan Ethiopia (2005). *A review of birth registration in in Addis Ababa and the Regional States of Oromia, Amhara and SNNPR, Ethiopia*. Addis Ababa; The African Child Policy Forum

Rockers PC, Jaskiewicz W, Kruk ME, Phathamavong O, Vangkonevilay P, Paphassarang C, et al. Differences in preferences for rural job postings between nursing students and practicing nurses: evidence from a discrete choice experiment in Lao People's Democratic Republic. *Hum Resour Health*. 2013;11:22

United Nations Children's Fund, *Birth Registration for Every Child by 2030: Are we on track?*, UNICEF, New York, 2019

Yilman & Venugopal. 2008. Local Government discretion and accountability in Ethiopia. Andrew Young School of Policy Studies, Georgia State University.  
<https://siteresources.worldbank.org/EXTSOCIALDEVELOPMENT/Resources/Ethiopia.pdf>

Zimmerman, L., Olson, H., Tsui, A., & Radloff, S. (2017). PMA2020: Rapid Turn-Around Survey Data to Monitor Family Planning Service and Practice in Ten Countries. *Studies in Family Planning*, 48(3), 293–303. <http://doi.org/10.1111/sifp.12031>

## Appendix: Questionnaires

### Knowledge Attitudes and Practices (KAP) Survey

NO	QUESTIONS AND FILTERS	CODING CATEGORIES				Relevant if:
<b>IDENTIFICATION</b>						
<b>Please record the following identifying information prior to beginning the interview.</b>						
001a	<p><b>Your name: Is this your name?</b></p> <p>[ODK will display the name of the Enumerator associated with the phone's serial number.]</p> <p><i>Check the button next to the name if that is your name and select 'yes' here. Do not check the button if that is not your name and select 'no' here (long press to remove response next to the name if needed).</i></p>	Yes..... 1 No..... 0				Always
001b	<p><b>Enter your name below.</b></p> <p><i>Please record your name</i></p>	Interviewer's Name				001a=0
002a	<p><b>Current date and time.</b></p> <p>[ODK will display on screen]</p>	Yes..... 1 No..... 0				Always
002b	<p><b>Is this date and time correct?</b></p>					
	<b>Record the correct date and time</b>	Date	Month	Day	Year	002a = 0
		Time	Hour	Minutes	AM/PM	
003a	<p>Region</p> <p><b>PLEASE SELECT THE NAME OF THE REGION WHERE THE HOUSEHOLD IS LOCATED.</b></p>	SNNPR .....7 Addis Ababa..... 10				Always
003b	<b>Zone/sub-city</b>	<i>ODK will populate a list of appropriate zones or sub-city based on the selected region.</i>				Always
003c	<b>District</b>	<i>ODK will populate a list of appropriate districts based on the selected zone.</i>				Always
003d	<b>Locality Name</b>	<i>ODK will populate a list of appropriate localities based on the selected district. There may be only one choice.</i>				
004	<b>Enumeration area</b>	<i>ODK will populate a list of appropriate Enumeration Areas based on the locality</i>				Always
005	<p><b>Structure number</b></p> <p><i>Please verify the structure number from the list given to you by your supervisor</i></p>	<i>ODK will populate a list of structure numbers based on the Ethiopian Round 6 data. Select the structure number that you are responsible for covering</i>				Always
006	<p><b>Household number</b></p> <p><i>Please verify the structure number from the list given to you by your supervisor</i></p>	<i>ODK will populate a list of eligible households by displaying the household number. Select the household number that you are responsible for interviewing</i>				Always

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
007	<b>Are you at the dwelling/structure interviewed in Round 6?</b>	Yes..... 1 No..... 2	Always
007a	<b>Is at least one of the original R6 members still living in the dwelling/structure?</b>	Yes..... 1 No..... 0	007=1 Skip to 096 if No
008	Check: Have you already sent a form for this structure and household? <b>DO NOT DUPLICATE ANY FORM UNLESS YOU ARE CORRECTING A MISTAKE IN AN EARLIER FORM.</b>	Yes..... 1 No..... 0	Always
008a	<b>Reason for resending this form?</b>	There is/are new eligible member/s on this form ..... 1 I am correcting a mistake made on a previous form ..... 2 The previous form disappeared from my phone without being sent..... 3 I submitted the previous form, but my supervisors told me that it was not received. 3 Other (Specify)..... 3	If 008=1
009	<b>Is a member of the household and competent respondent present and available to be interviewed today?</b>	Yes..... 1 No..... 0	007a=1 Skip to 096 if No
<b>INFORMED CONSENT</b> Find a competent member of the household. Read the greeting on the following screen.			



NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
010a	<p>Hello. My name is _____ and I am working for the Addis Ababa University, Federal Vital Events Registration Agency, and Federal Ministry of Health. We are conducting a local survey that asks parents and caregivers of young children about the birth registration for their children. We would very much appreciate your participation in this short survey to identify all adult caregivers of the children under six in this household. We will then follow-up with a different set of questions to one of these adults. Depending on your responses we may ask you to participate in an additional study. Your participation in this survey would be very much appreciated, but it is completely voluntary. There is no problem if you choose not to answer these questions.</p> <p>The survey should take about 15 minutes to complete. Whatever information you provide will be kept strictly confidential and will not be shown to anyone other than members of our survey team. All research projects carry some risk that information about you may become known to people outside of the study. To protect against this, the phone and any applications with PMA2020 data are password protected.</p> <p>The information will help us inform the government to better plan health and birth registration services in Ethiopia. Whatever information you provide will be kept strictly confidential and only fully de-identified data will be used when conducting analyses, presenting results, or sharing data.</p> <p>Participation in this survey is entirely voluntary. If we should come to any question you don't want to answer, just let me know and I will go on to the next question; or you can stop the interview at any time. However, we hope that you will participate in this survey since your views are important.</p> <p>If you have any questions about the study and your rights as a research participant, you may ask me now or you may also contact Dr. Solomon Shiferaw (+251 911 406845) or Dr. Assefa Seme (<a href="tel:+251911228193">+251 911 228193</a>) at Addis Ababa University in Addis Ababa, Ethiopia. At this time, do you want to ask me anything about the survey?</p>		009=1
	<p>Explain the consent form to the respondent. Then, ask: <b>May I begin the interview now?</b></p>	<p>Yes..... 1 No ..... 0</p>	009=1
010b	<p><b>Interviewer's name</b></p> <p><i>Please record your name as a witness to the consent process. You previously entered "[NAME FROM 001]."</i></p>	<div style="border: 1px solid black; height: 40px; width: 100%;"></div>	010a = 1
011	<p><b>Respondent's first name.</b></p> <p><i>Please record the first name of the respondent.</i></p>	<div style="border: 1px solid black; height: 30px; width: 100%;"></div>	010a = 1
012	<p><b>This household had – members in round 6 namely:</b>  <b>Round 6 Household Member 1</b>  <b>Round 6 Household Member 2</b>  <b>Round 6 Household Member 3</b>  <b>Round 6 Household Member 4</b></p> <p><b>ODK will display the summary of all household members listed in Round 6. You will then update their information to indicate any changes including deaths. Record any new members including infants born since R6 or anyone who moved in.</b></p>		010a = 1

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
013	R6 Household Member 1  Below are the round 6 details for member 1:  First name: Relationship to the head of the HH: Gender: Age: Marital status:  Usually live in the HH:		Always Repeat for each member

Household Roster Screen #1	112h	Does [NAME] usually live here?	Yes ..... 1 No ..... 0 No response ..... -99	1 0 -99	1 0 -99	1 0 -99	HM1+ : 114=1 OR HM1: 116=1 HM2+ : 116=1 OR 112a=0
	014	Do you wish to update any of this information?	Yes ..... 1 No ..... 0				If 112h=1
	112b	Name of HH member		<input type="text"/> Name	<input type="text"/> Name	<input type="text"/> Name	HM1+ : 114=1 OR HM1: 116=1 HM2+ : 116=1 OR 112a=0
	112c	What is [NAME]'s relationship to the head of the household?	Head ..... 1 Wife/Husband ..... 2 Son/Daughter ..... 3 Son/Daughter-in-law ..... 4 Grandchild ..... 5 Parent ..... 6 Parent in law ..... 7 Brother/Sister ..... 8 House help ..... 9 Other ..... -88 Don't know ..... -99 No response .....	1 1 1 1 1 1 1 1 1 1 -88 -99	1 2 3 4 5 6 7 8 10 9 -88 -99	1 2 3 4 5 6 7 8 10 9 -88 -99	HM1+ : 114=1 OR HM1: 116=1 HM2+ : 116=1 OR 112a=0
112d	Is [NAME] male or female?	Male ..... 1 Female ..... 2-99 No response .....	1 2-99	1 2-99	1 2 -99	HM1+ : 114=1 OR HM1: 116=1 HM2+ :	

NO	QUESTIONS AND FILTERS	CODING CATEGORIES				Relevant if:
						116=1 OR 112a=0
112f	<b>How old was [NAME] at their last birthday?</b> <i>If less than one year old, enter 0</i>		<input type="text"/> Age	<input type="text"/> Age	<input type="text"/> Age	HM1+: 114= 1 OR HM1: 116= 1 HM2+: 116=1 OR 112a=0
Screen #2	112g <b>What is [NAME]'s current marital status?</b>  <i>If not married, probe to determine if they have ever been married and, if so, if they are divorced, widowed, or have never been married.</i>	Married ..... Living with a partner ..... Divorced / separated..... Widow / widower . Never Married ..... No response . ....	1 2 3 4 5 -99	1 2 3 4 5 -99	1 2 3 4 5 -99	112f ≥ 10
	015 <b>What is the status of R6 member in the household?</b>	Moved out of household ..... Deceased..... Unknown ..... No response..... Do not know .....	1 2 3 -99 -88			Always asked if child < 6 AND 112h= 0
016	<b>Are there any other usual members of your household, including newborns?</b>	Yes..... No.....	1 0	1 0	1 0	010a = 1
112a	<b>READ THIS CHECK OUT LOUD: There are [NUMBER OF HOUSEHOLD MEMBERS ENTERED] household members who are named [NAMES OF ENTERED HOUSEHOLD MEMBERS]. Is this a complete list of the household members?</b> <i>Remember to include all children in the household.</i>	Yes..... No.....	1 0			116=0
<b>For each child under 6 [TBD]update the information to ask:</b>						
017	<b>In what day and month was [CHILD_Name] born?</b>  <i>ODK will display the age completed in Q112f or Q013.</i>	Day: Month: Year: Don't know ..... No response .....	..... 01 Jan 2020 01 Jan 2020			If 013<<6 AND 014=0 OR 112f<6 AND 016=1
018	<b>How old were [CHILD_Name] at his/her last birthday?</b>  <i>ODK will display the age in the HH roster.</i>	Age in years: _____				017≠- 01 Jan 2020
019	<b>Who is the primary caregiver of [CHILD_Name]?</b>	[ODK will display the list of household members]				If 018<6

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
020	What is [CAREGIVER'S NAME]'s relationship to [CHILD_Name]?	Mother ..... 1 Father ..... 2 Grandmother ..... 3 Grandfather ..... 4 Step-parent ..... 5 Legal adoptive guardian ..... 6 Other ..... 7 Don't know ..... -88 No response ..... -99	019≠-88 or -99
020a	Is [CAREGIVER'S NAME] present and available to be interviewed today?	Yes ..... 1 No ..... 0	Skip to 096 if No
021a	<p>Hello. My name is _____ and I am working for the Addis Ababa University, Federal Vital Events Registration Agency, and Federal Ministry of Health. We are conducting a local survey that asks parents and caregivers of young children about the birth registration for their children. Your participation in this survey would be very much appreciated, but it is completely voluntary. There is no problem if you choose not to answer these questions.</p> <p>The survey should take about 30 minutes to complete. Whatever information you provide will be kept strictly confidential and will not be shown to anyone other than members of our survey team. All research projects carry some risk that information about you may become known to people outside of the study. To protect against this, the phone and any applications with PMA2020 data are password protected.</p> <p>The information will help us inform the government to better plan health and birth registration services in Ethiopia. Whatever information you provide will be kept strictly confidential and only fully de-identified data will be used when conducting analyses, presenting results, or sharing data.</p> <p>Participation in this survey is entirely voluntary. If we should come to any question you don't want to answer, just let me know and I will go on to the next question; or you can stop the interview at any time. However, we hope that you will participate in this survey since your views are important.</p> <p>If you have any questions about the study and your rights as a research participant, you may ask me now or you may also contact Dr. Solomon Shiferaw (+251 911 406845) or Dr. Assefa Seme (<a href="tel:+251911228193">+251 911 228193</a>) at Addis Ababa University in Addis Ababa, Ethiopia. At this time, do you want to ask me anything about the survey?</p>		020a=1
	Explain the consent form to the respondent. Then, ask: <b>May I begin the interview now?</b>	Yes ..... 1 No ..... 0	020a=1
<b>Respondent's Background and Marital Status</b> <i>Now I would like to ask about your background and marital status.</i>			
101	Is [CAREGIVER'S NAME] male or female?	Male ..... 1 Female ..... 2 No response ..... -99	021a = 1
102	<p>In what month and year were you born?</p> <p>The age in the household roster is [AGE].  <i>If respondent knows the year, but not month enter 'Do not know' for month  Select 'Do not know' for month and '2020' for year to indicate 'No Response'.</i></p>	Month <input type="text"/> Year <input type="text"/>	021a = 1

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
103	<b>How old were you at your last birthday?</b> <i>Must be more than 14. Must agree with Q112f OR Q013.</i>	Age <input type="text"/>	021a = 1
104	<b>What is the highest level of school you attended?</b> <i>Only record formal schooling. Do not record bible or koranic school or short courses.</i>	Never Attended..... 0 Primary..... 1 Secondary ..... 2 Technical & vocational..... 3 Higher ..... 4 No response..... -99	021a = 1
105	<b>What is your religion?</b>	Orthodox..... 1 Catholic..... 2 Protestant ..... 3 Moslem ..... 4 Traditional ..... 5 No religion..... -77 No response ..... -99	021a = 1
<b>ALL CHILDREN</b>			
I will now ask you some questions about your child. If you have more than one child under 5 [or six, TBD] we will start with the first child born.			
<b>ODK will repeat questions 021-028 for each eligible child</b>			
021	<b>In what region was [NAME] born?</b>	Tigray ..... 1 Afar ..... 2 Amhara ..... 3 Oromia ..... 4 Ethiopia Somali ..... 5 Benishangul Gumuz..... 6 SNNPR ..... 7 Gambella..... 8 Harari ..... 9 Addis Ababa..... 10 Dire Dawa ..... 11 Outside Ethiopia..... 12 Don't know ..... -88 No response ..... -99	If 018<6
022	<b>In what zone/sub-city was [NAME] born?</b>	<i>ODK will populate a list of appropriate zones based on the selected region.</i>	If 021≠-88 or -99
023	<b>Where was [NAME] born?</b>	Home ..... 1 Government hospital ..... 11 Government health center ..... 12 Government health post ..... 13 Other public sector ..... 14 Private hospital/clinic ..... 21 Other private medical sector ..... 22 NGO/Faith-based health facility .... 31 Traditional healer/medicine..... 32 Other ..... 96 Nowhere, no treatment sought ..... -77 No response ..... -99	If 018<6

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
024	<b>Does [NAME] have a birth certificate?</b> <i>Note: Please show the sample birth certificate to the respondent and observe and verify the birth certificate.</i>	Yes, observed ..... 1 Yes, not observed ..... 2 No ..... 0 Don't know ..... -88 No response ..... -99	If 018<6
025	<b>Has (NAME)'s birth ever been registered with the woreda or kebele civil registry?</b>	Yes ..... 1 No ..... 0 Don't know ..... -88 No response ..... -99	If 024=0 OR 2
026	<b>Why do you not have the birth certificate?</b>	The registration office was out of certificates ..... 1/0 Could not afford birth certificate ..... 1/0 Never completed the formalities ..... 1/0 Never returned to collect birth certificate ... 1/0 Not aware that birth certificate is different to registration ..... 1/0 Don't want to obtain birth certificate ..... 1/0 None of the above ..... 1/0 Other (specify) ..... 1/0 Don't know ..... -88 No response ..... -99	If 025=1 AND 024=0
027	<b>Has the birth of [NAME] been recorded elsewhere that is not the civil registry?</b> <i>Hint: The question needs to be asked whether or not the child was registered in the civil registry.</i>	Yes ..... 1 No ..... 0 Don't know ..... -88 No response ..... -99	If 018<6
028	<b>Where was the birth of [NAME] registered?</b> <i>HINT: Multiple answers are possible. Do not read the answers out loud, instead let the respondent spontaneously state their reason(s). After each reason, ask: "is there any other reason?"</i>	Health facility ..... 1/0 Church ..... 1/0 Mosque ..... 1/0 Traditional authority ..... 1/0 Other (specify) ..... 1/0 Don't know ..... -88 No response ..... -99	If 027=1
<b>REGISTERED CHILDREN</b>			
I will now ask you some questions about your child/ren who have had their births registered or have a birth certificate.			
029	<b>Where was the birth of [NAME] registered in the civil registry?</b>	At registration office(Kebele) ..... 1 At registration office(Woreda) ..... 2 At registration office(Sub-city) ..... 3 During a registration campaign made by registration office ..... 4 Registration office officials (at health facility) 5 Elsewhere (specify) ..... 6 Don't know ..... -88 No response ..... -99	If 024=1 OR 025=1
030a	<b>Interviewer: Please record whether the date of birth registration is available and legible in the child's birth certificate.</b> <b>Is the date of birth registration available in (Name)'s birth certificate?</b>	Yes ..... 1 No ..... 0 No response ..... -99	If 024=1

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
030b	<p><b>In what month, day and year were the birth of (name) registered?</b></p> <p><i>Hint: Please refer the birth certificate of the index child to identify the exact date of registration and record the date here.</i></p> <p><i>For any illegible records: record January for month, 01 for day, and 2020 for year.</i></p>	<p>Month <input type="text"/></p> <p>Day <input type="text"/></p> <p>Year <input type="text"/></p>	If 030a=1
030	<p><b>How long after the delivery was the birth of (name) registered?</b></p>	<p>Days: ..... 1</p> <p>Weeks: ..... 2</p> <p>Months: ..... 3</p> <p>Years ..... 4</p> <p>Don't know ..... -88</p> <p>No response ..... -99</p>	If 025=1 OR 030a=0
031	<p><b>Enter length of time after the delivery was the birth of (name) registered?</b></p> <p><i>Hint: You can refer the birth certificate of the index child to identify the exact time of registration.</i></p>	<p>Days <input type="text"/></p> <p>Weeks <input type="text"/></p> <p>Months <input type="text"/></p> <p>Years <input type="text"/></p>	If (030≠-88 or -99)
032	<p><b>Who registered the birth of (name)?</b></p> <p><i>HINT: Multiple answers are possible. Do not read the answers out loud, instead let the respondent spontaneously state their response(s). After each response, ask: "who else?"</i></p>	<p>Mother ..... 1/0</p> <p>Father ..... 1/0</p> <p>Legal guardian/caregiver ..... 1/0</p> <p>Other relative ..... 1/0</p> <p>Other person ..... 1/0</p> <p>Don't know ..... -88</p> <p>No response ..... -99</p>	If 024=1 OR 025=1
33a	<p><b>Did you pay a fee to register the birth of [NAME]?</b></p>	<p>Yes ..... 1</p> <p>No ..... 2</p> <p>Don't remember/ know ..... 3</p> <p>No response ..... -99</p>	If 025=1 OR 24=1
33b	<p><b>If yes, how much?</b></p>	<p>Enter birr</p>	If 33a=1
034a	<p><b>Did you pay for any of these?</b></p>	<p>Birth registration ..... 1/0</p> <p>Birth certificate ..... 1/0</p> <p>Paid for services but not sure if charges were for registration or certification or other ..... 1/0</p> <p>No(None of the above) ..... 1</p> <p>Don't know ..... -88</p> <p>No response ..... -99</p>	If 024=1 OR { 024=2 AND 025=1 }
034b	<p><b>Enter amount in Birr</b></p>	<p>Birr (enter amount) ..... 2</p> <p>Don't know ..... -88</p> <p>No response ..... -99</p>	If 024=1 or 2
035	<p><b>How many times did you have to visit the registration facility to register the birth of [NAME]?</b></p>	<p>Number of visits <input type="text"/></p>	If 025=1 OR 024=1

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
036	<p><b>How many times did you have to visit the registration facility to obtain the birth certificate of [NAME]?</b></p> <p><i>Hint: 0 is a possible answer if the birth certificate was issued during the same visit made to register the child.</i></p>	<p>Number of extra visits <input type="text"/></p>	<p>If 024=1 OR {024=2 AND 025=1}</p>
037	<p><b>How long did it take to complete the birth registration process?</b></p>	<p>Minutes <input type="text"/></p> <p>Hours <input type="text"/></p> <p>Days <input type="text"/></p> <p>Weeks <input type="text"/></p> <p>Months <input type="text"/></p>	<p>If 025=1 OR 024=1</p>
038	<p><b>How long did it take to obtain the birth certificate?</b></p> <p><i>Note: this is the time from when the registration was completed to when the certificate was obtained.</i></p> <p><i>Hint: If the respondent assumes that the time spent to obtain birth certificate was simultaneous with the registration process or couldn't differentiate it select "concurrent with registration"</i></p>	<p>Hours <input type="text"/></p> <p>Days <input type="text"/></p> <p>Weeks <input type="text"/></p> <p>Months <input type="text"/></p> <p>Concurrent with registration <input type="text"/></p>	<p>If 024=1 OR {024=2 AND 025=1}</p>
039	<p><b>What are the reasons why the birth of [NAME] was registered?</b></p> <p><i>HINT: Multiple answers are possible. Do not read the answers out loud, instead let the respondent spontaneously state their reason(s). After each reason, ask: "is there any other reason?"</i></p>	<p>So [NAME] can go to school..... 1/0</p> <p>So [NAME] can have access to other government services..... 1/0</p> <p>So [NAME] can have access to services of other organizations ..... 1/0</p> <p>To remember the date of birth of [NAME].. 1/0</p> <p>So the government can count births..... 1/0</p> <p>In order for [NAME] to travel outside of the country ..... 1/0</p> <p>In order for [NAME] to inherit family properties ..... 1/0</p> <p>It is mandatory to register birth events..... 1/0</p> <p>Not get penalized ..... 1/0</p> <p>Officials from registration office or health facility insisted/forced us to register the event ..... 1/0</p> <p>My neighbors were doing it, so I followed suit ..... 1/0</p> <p>No specific reason to register the birth event of [NAME]..... 1/0</p> <p>So [NAME] can get insurance..... 1/0</p> <p>Other (specify) ..... 1/0</p> <p>None of the above..... 1/0</p> <p>Don't know .....-88</p> <p>No response.....-99</p>	<p>If 024=1 OR 025=1</p>



NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:	
<b>UNREGISTERED CHILDREN</b> Questions 040-042 concern children whose birth was not registered				
040	<p><b>There are many reasons why the birth of a child may not be registered. What are the reasons why the birth of [NAME] has not yet been registered?</b></p> <p><i>Hint: multiple answers are possible. Do not read the answers out loud, instead let the respondent spontaneously state their reason(s). After each reason, ask: "is there any other reason?"</i></p>	Don't know what birth registration is ..... 1/0 Don't know what birth registrations entails 1/0 Process to costly ..... 1/0 The place where births can be registered is too far ..... 1/0 The registration process takes too long..... 1/0 Don't know the purpose of birth registration 1/0 Too busy to register the birth ..... 1/0 Doesn't have the required documents to register the birth ..... 1/0 It is not important to register a birth ..... 1/0 Birth registration can wait until later ..... 1/0 The child is too young to take him/her to the registrar office ..... 1/0 The father/mother is absent/not available . 1/0 The father/mother does not want to register the child's birth ..... 1/0 I'm waiting for the next registration campaign ..... 1/0 Other (specify) ..... 1/0 None of the above..... 1/0 Don't know .....-88 No response.....-88	If 025=0, -88, or -99	
041	<p><b>Do you wish to register the birth of [NAME] in the future?</b></p>	Yes, definitely ..... 1 Yes, probably ..... 2 No, probably not..... 3 No, definitely not ..... 4 Don't know .....-88	025=0, -88, or -99	
<p style="text-align: center;"><b>DISCRETE CHOICE EXPERIMENT</b></p> <p><i>Note: Note: If the caregiver has an unregistered child, then ask where would they rather register him or her?</i></p> <p><i>If the caregiver has multiple unregistered children, then ask where they would rather register the youngest one.</i></p> <p><i>If the caregiver only has registered children, then ask where would they prefer registering a child under age 5 they might care for in the future?</i></p> <p><i>Question for unregistered child caregiver is current caring for: Now, I'm going to present you with a series of 9 choices to make. Specifically, imagine that you are planning to register the birth of [name]. I will then ask you to choose where you would like to go to register this birth, among possible registration offices that I will describe to you. These are imaginary offices that do not correspond to existing offices. But I would nonetheless like you to tell me which office you would choose to register your child. I will present those offices to you in pairs, and I will ask you to choose the one you prefer among the two. If you do not like either of the offices, you can also state "neither", meaning that in that case you would either choose not to register the birth, or you would seek to register it elsewhere. There are no right or wrong answers to these questions—we are only interested in learning about what is important to you in deciding where to register a birth.</i></p>				021a = 1

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:																												
	<p><i>Question for child a caregiver might care for in the future: Now, I'm going to present you with a series of 9 choices to make. Specifically, imagine that you are planning to register the birth of [a child under age 5 you might care for in the future]. I will then ask you to choose where you would like to go to register the birth of this child, among possible registration offices that I will describe to you. These are imaginary offices that do not correspond to existing offices. But I would nonetheless like you to tell me which office you would choose to register your child. I will present those offices to you in pairs, and I will ask you to choose the one you prefer among the two. If you do not like either of the offices, you can also state "neither", meaning that in that case you would either choose not to register the birth, or you would seek to register it elsewhere. There are no right or wrong answers to these questions—we are only interested in learning about what is important to you in deciding where to register a birth.</i></p> <p><i>/your next child/a child you care for</i></p>																														
42	<table border="1"> <thead> <tr> <th data-bbox="279 779 572 813">Attribute</th> <th data-bbox="572 779 1118 813">Scenarios</th> <th data-bbox="1118 779 1230 813"></th> <th data-bbox="1230 779 1342 813"></th> </tr> </thead> <tbody> <tr> <td data-bbox="279 813 572 947" rowspan="3">Fees</td> <td data-bbox="572 813 1118 869">0 (free)</td> <td data-bbox="1118 813 1230 869" rowspan="10">Indifferent/Neither</td> <td data-bbox="1230 813 1342 869" rowspan="10">No Response e.....-99</td> </tr> <tr> <td data-bbox="572 869 1118 913">&gt;150 (out-of-pocket cost level 1)</td> </tr> <tr> <td data-bbox="572 913 1118 947">&gt; 300 (out-of-pocket cost level 2)</td> </tr> <tr> <td data-bbox="279 947 572 1048" rowspan="3">Service time</td> <td data-bbox="572 947 1118 981">1 hour</td> </tr> <tr> <td data-bbox="572 981 1118 1014">3 hours</td> </tr> <tr> <td data-bbox="572 1014 1118 1048">5 hours</td> </tr> <tr> <td data-bbox="279 1048 572 1126" rowspan="2">Number of visits required</td> <td data-bbox="572 1048 1118 1081">Single visit</td> </tr> <tr> <td data-bbox="572 1081 1118 1126">Multiple visits</td> </tr> <tr> <td data-bbox="279 1126 572 1328" rowspan="3">Opening hours</td> <td data-bbox="572 1126 1118 1182">Regular weekday hours (8:30-17:30)</td> </tr> <tr> <td data-bbox="572 1182 1118 1238">Extended weekday hours (8:30-19:00)</td> </tr> <tr> <td data-bbox="572 1238 1118 1328">Regular weekday hours + weekend hours (sat 8:30-13:00)</td> </tr> <tr> <td data-bbox="279 1328 572 1440" rowspan="3">Distance</td> <td data-bbox="572 1328 1118 1361">30 minutes by foot</td> </tr> <tr> <td data-bbox="572 1361 1118 1395">2 hours by foot</td> </tr> <tr> <td data-bbox="572 1395 1118 1440">4 hours by foot</td> </tr> <tr> <td data-bbox="279 1440 572 1507" rowspan="2">In-person Applicants</td> <td data-bbox="572 1440 1118 1473">Both parents</td> </tr> <tr> <td data-bbox="572 1473 1118 1507">Only one of the parents</td> </tr> </tbody> </table>	Attribute	Scenarios			Fees	0 (free)	Indifferent/Neither	No Response e.....-99	>150 (out-of-pocket cost level 1)	> 300 (out-of-pocket cost level 2)	Service time	1 hour	3 hours	5 hours	Number of visits required	Single visit	Multiple visits	Opening hours	Regular weekday hours (8:30-17:30)	Extended weekday hours (8:30-19:00)	Regular weekday hours + weekend hours (sat 8:30-13:00)	Distance	30 minutes by foot	2 hours by foot	4 hours by foot	In-person Applicants	Both parents	Only one of the parents		021a = 1
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In-person Applicants	Both parents																														
	Only one of the parents																														
<b>AWARENESS OF CRVS SERVICES</b>																															
043	<p><b>Have you ever heard messages stressing the need to register a birth?</b></p>	<p>Yes..... 1  No..... 0  Don't know .....-88  No response.....-99</p>	<p>If  021a  = 1</p>																												

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
044	<p><b>Where did you hear such messages?</b></p> <p><i>HINT: several answers are possible. Do not read the answers out loud, instead let the respondent spontaneously state their source(s) of information. After each source, ask: "is there any other source?"</i></p>	Radio..... 1/0 Television ..... 1/0 Newspaper ..... 1/0 Internet ..... 1/0 Text message ..... 1/0 Health facility..... 1/0 Kebele officials, including HDA..... 1/0 Billboard ..... 1/0 Community event ..... 1/0 Sensitization campaign ..... 1/0 Conversation with friends ..... 1/0 Conversation with spouse ..... 1/0 Conversation with other relatives.. 1/0 Other (specify) ..... 1/0 No response.....-99	043=1
045	<p><b>Do you think that a mother or a father of the child have the obligation to declare the birth events to responsible bodies?</b></p>	Yes, definitely..... 1 Yes, probably ..... 2 No, probably not..... 3 No, definitely not ..... 4 Don't know .....-88	If 021a = 1
046	<p><b>Do you know where you can register birth events?</b></p> <p><i>HINT: several answers are possible. Do not read the answers out loud, instead let the respondent spontaneously state their source(s) of information. After each source, ask: "is there any other source?"</i></p>	Yes, Kebele/Wereda/sub-city..... 1/0 Yes, health facility ..... 1/0 Yes, Church/Mosque ..... 1/0 Yes, other (specify) ..... 1/0 No ..... 1/0 None of the above..... 1/0 No response.....-99	If 021a = 1
047	<p><b>Do you believe registering birth events have any benefits to the child?</b></p>	Yes, definitely..... 1 Yes, probably ..... 2 No, probably not..... 3 No, definitely not ..... 4 Don't know .....-88	If 021a = 1
048	<p><b>When is the expected timeframe that a birth event should be registered after its occurrence?</b></p>	Within X Days <input type="text"/> Within X Weeks <input type="text"/> Within X Months <input type="text"/> Not sure ..... 2 Don't Know.....-88 No response.....-99	If 021a = 1

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
48a	<p><b>To which service(s) do you think the birth registration facility charge you when declaring/registering a birth event?</b></p> <p><b>Is it for birth registration, birth certification, both birth registration &amp; certification, or neither of these?</b></p>	Birth registration only ..... 1 Birth certification only..... 2 Both birth registration & certification as a package service ..... 3 Birth registration or/and certificate and penalty ..... 4 Chargeable but can't differentiate whether the payment is for birth registration or certification ..... 5 Charge only for penalty..... 6 Not sure whether both services are chargeable or not ..... 7 Both services are free ..... 8 Other ..... 9 No response.....-99	If 021a = 1
050	<p><b>What are the requirements needed to register a birth event and get a birth certificate?</b></p> <p><i>HINT: several answers are possible. Do not read the answers out loud, instead let the respondent spontaneously state their response(s). After each response, ask: "is there any other requirement?"</i></p>	Both mother and father should be available during the registration ..... 1/0 Renewed identity card of the parents/responsible person to register the event ..... 1/0 Birth notification or unofficial birth certificate (I) obtained from health facility ..... 1/0 Photograph of the child ..... 1/0 Money to get the service ..... 1/0 Prior permission from church/mosque/health facility/Kebelle administration ..... 1/0 Other (specify) ..... 1/0 No response.....-99	049=1 or 2
049	<p><b>Do you know the requirements needed to register a birth event and get a birth certificate?</b></p>	Yes, all of the requirements ..... 1 Yes, some of the requirements ..... 2 No ..... 0 Don't know ..... -88 No response.....-99	If 021a = 1
051	<p><b>Is it punishable by law if you fail to declare birth event within a specific period?</b></p>	Yes, definitely..... 1 Yes, probably ..... 2 No, probably not..... 3 No, definitely not ..... 4 Don't know ..... -88	If 021a = 1
052	<p><b>What is the punishment for not declaring the birth event?</b></p> <p><i>HINT: several answers are possible. Do not read the answers out loud, instead let the respondent spontaneously state their response. After each response, ask: "what else?"</i></p>	Simple imprisonment not exceeding 6 months or ETB 500-5,000..... 1/0 Jail ..... 1/0 Money ..... 1/0 Don't know about the exact punishment....-88 No response.....-99	If 051=1
053	<p><b>Are there any cultural or social stigmas that discourage registration of birth events in your community?</b></p>	Yes, definitely..... 1 Yes, probably ..... 2 No, probably not..... 3 No, definitely not ..... 4 Don't know ..... -88	If 021a = 1
Note	<p><b>Now I'm going to read you few questions to get your opinion towards the registration of birth events system. For each please tell me how strongly you agree or disagree with the statement.</b></p>		If 021a = 1

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
054	<b>It is an appropriate measure to penalize parents for not declaring one's birth event within a specific time limit.</b>	Strongly agree..... 1 Agree ..... 2 Neutral ..... 3 Disagree..... 4 Strongly disagree ..... 5	If 021a = 1
055	<b>It is an appropriate measure to make birth certificate legal requirement for child vaccination.</b>	Strongly agree..... 1 Agree ..... 2 Neutral ..... 3 Disagree..... 4 Strongly disagree ..... 5	If 021a = 1
056	<b>It is an appropriate measure to make birth certificate a legal requirement for school enrollment.</b>	Strongly agree..... 1 Agree ..... 2 Neutral ..... 3 Disagree..... 4 Strongly disagree ..... 5	If 021a = 1
<b>LOCATION AND QUESTIONNAIRE RESULT</b>			
<p><b>Thank the respondent for her/his time.</b>  <i>The respondent is finished, but there is still more for you to complete outside the home.</i></p>			
096	<b>Location</b> Take a GPS point near the entrance to the household. Record location when the accuracy is smaller than 6m.	RECORD LOCATION	Always
097	<b>How many times have you visited this household?</b>	1 <sup>st</sup> time ..... 1 2 <sup>nd</sup> time..... 2 3 <sup>rd</sup> time ..... 3	Always
098	<b>In what language was this interview conducted?</b>	English ..... 1 Amharic..... 2 Other ..... 96	010a= 1
099	<b>Questionnaire result</b> <i>Record the result of the Household Questionnaire</i>	Completed..... 1 No household member at home or no competent respondent at home at time of visit ..... 2 No mother, father, or a primary caregiver at home at time of visit..... 2.5 Postponed..... 3 Refused..... 4 Partly completed ..... 5 Dwelling vacant or address not a dwelling 6 Dwelling destroyed..... 7 Dwelling not found ..... 8 Entire household absent for extended period of time ..... 9 Entire household moved ..... 10	Always

## Assessment of Vital Events Registration Facilities (AVERF) Questionnaire

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:												
<b>IDENTIFICATION</b>															
001a	<p><b>Interviewer's name: Is this your name?</b> [ODK will display the name associated with the phone's serial number.]</p> <p><i>Check the button next to the name if that is your name and select yes' here. Do not check the button if that is not your name and select no' here (long press to remove response next to the name if needed).</i></p>	Yes..... 1 No ..... 0	Always												
001b	<p><b>Enter your name below.</b> <i>Please record your name</i></p>	Interviewer's Name	001a=0												
002a	<p><b>Current date and time.</b> [ODK will display on screen]</p> <p><b>Is this date and time correct?</b></p>	Yes..... 1 No ..... 0	Always												
002b	<p><b>Record the correct date and time.</b></p>	<table border="1" style="margin-left: auto; margin-right: auto;"> <thead> <tr> <th style="text-align: center;">Day</th> <th style="text-align: center;">Month</th> <th style="text-align: center;">Year</th> </tr> </thead> <tbody> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> <tr> <th style="text-align: center;">Hours</th> <th style="text-align: center;">Min</th> <th style="text-align: center;">AM/PM</th> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> </tbody> </table>	Day	Month	Year				Hours	Min	AM/PM				002a=0
Day	Month	Year													
Hours	Min	AM/PM													
003a	<p><b>Region</b> <i>Please select the name of the region where the facility is located.</i></p>	SNNPR ..... 7 Addis Ababa..... 10	Always												
003b	<p><b>Zone/Sub city</b> <i>Please select the name of the zone where the facility is located.</i></p>	ODK will populate a list of appropriate zones/Sub cities based on the selected region.	Always												
003c	<p><b>Woreda/District</b> <i>Please record the name of the district where the facility is located.</i></p>	ODK will populate a list of appropriate districts based on the selected zone.	Always												
003d	<p><b>Kebele/Locality name</b> <i>Please choose the name of the locality where the facility is located. There may be only one choice.</i></p>	ODK will populate a list of appropriate localities based on the selected district/woreda.													
004	<p><b>Enumeration area</b></p>	ODK will populate a list of appropriate enumeration areas based on location selected	Always												
005	<p><b>Facility number</b> <i>Please record the number of the facility from the listing form.</i></p>	Facility number <input style="width: 100px; height: 20px;" type="text"/>	Always												
006	<p><b>Where is the registration of vital events facility located?</b> <i>Please select the specific location where the service for registration of vital events is provided.</i></p>	Kebelle Administrative office ..... 1 Woreda/District Administrative office..... 2 Sub city Administrative office ..... 3 Independent Vital Events Registration Office..... 4 Other (specify) ..... 7	Always												
007	<p><b>Is a competent respondent present and available to be interviewed today?</b></p>	Yes..... 1 No ..... 0	Always												

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
<b>INFORMED CONSENT</b> <i>Find the competent respondent responsible for client services (main administrator and family planning in-charge) who is present at the facility. Read the greeting on the next screen:</i>			
<p>Hello. My name is _____ . We are here on behalf of the Addis Ababa University, and Federal Vital Events Registration Authority to assist the government and communities in understanding more about the status of vital events registration facilities. Now I will read a statement explaining the survey.</p> <p>Your facility was randomly selected to participate in this study. We will be asking you questions about the registration of vital events and will ask to see client birth registers. No client names from the registers will be reviewed, recorded or shared. The information about your facility may be used by the Federal Vital Events Registration Authority and health organizations for planning service improvements or further studies of health services. The data collected from your facility will also be used by researchers for analyses. However, the name of your facility will not be provided, and any reports by researchers who use your facility data will only present information in aggregate form so that your facility cannot be identified.</p> <p>We are asking for your help to ensure that the information we collect is accurate. If there are questions for which someone else is the most appropriate person to provide the information, we would appreciate your introducing us to that person.</p> <p>You may refuse to answer any question or choose to stop the interview at any time. Do you have any questions about the survey?</p>			007=1
008	Explain the informed consent form. Then, ask: <b>May I begin the interview now?</b>	Yes..... 1 No ..... 0	007=1
009	<b>Interviewer's name:</b> [Interviewer name from 001b] <i>Mark your name as a witness to the consent process.</i>	<input data-bbox="742 1064 1173 1153" type="text"/>	008=1
010	<b>Name of the registration facility</b> <i>Please record the name of the administrative office (Kebele, Wereda(s) or Sub-city name) where the registration facility is located..</i>  <i>ODK will display the name from 003b if 003a=10 OR the name of 003d if 003=7</i>	<input data-bbox="742 1254 1173 1344" type="text"/>	008=1
011	<b>What is your main position in this facility?</b> <i>Select the highest managerial qualification of the respondent.</i>	Civil Status Officer..... 1 Kebele manager..... 2 Sub city manager ..... 3 No specific role in the office ..... 4 Other (Specify) ..... 5 Don't know ..... -88 No response..... -99	008=1
<b>Section 1 – Information about Registration Facility services</b> <i>Now I would like to ask about the services provided at this facility</i>			
102	<b>How many days each week is the \${facility_location_\$006} routinely open?</b> <i>Enter a number between 0 and 7. Enter 0 for less than 1 day per week. Enter -88 for do not know, -99 for no response</i>	Number of days <input data-bbox="949 1736 1173 1825" type="text"/>	009=1
103	<b>Does this \${facility_location_\$006} usually provide Vital Events Registration Services?</b>	Yes..... 1 Yes, but temporarily not functional ..... 2 No ..... 0 Don't know ..... -88 No response..... -99	009=1

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
103a	<p><b>Why is this \${facility_location_lab} temporarily suspended providing Vital Events Registration Services?</b></p>	Service provider (Trained staff) left/dismitted.....1/0 Service provider (Trained staff) is on leave .....1/0 Registration Facility closed: due to security issues .....1/0 Registration Facility closed: no materials/budget .....1/0 Unknown Reason .....1/0 Other (specify) .....1/0 No response .....1/0	103=2
103b	<p><b>When is the last time this registration facility suspended vital events registration services?</b></p>	Before X Days ..... 1/0 Before X Weeks ..... 1/0 Before X Months ..... 1/0 Before X Years ..... 1/0 Don't know ..... 1/0 No responses ..... 1/0	103=2
104	<p><b>Why is this \${facility_location_\$006} not providing Vital Events Registration Services?</b></p>	No trained staff ..... 1/0 No forms ..... 1/0 No information about this service ..... 1/0 Not selected as VERA site ..... 1/0 Other (specify) ..... 1/0 None of the above ..... 1/0 Don't know ..... -88 No response ..... -99	103=0
101b	<p><b>What year did \${name_registration_facility_\$006} first begin providing Vital Events Registration Services?</b></p> <p><i>Enter 2020 for do not know.</i></p>	Year <input data-bbox="959 1200 1169 1261" type="text"/>	103=1
102b	<p><b>How many days each week is the \${name_registration_facility_\$006} routinely open to provide Vital Events Registration Services?</b></p> <p><i>Enter a number between 0 and 7. Enter 0 for less than 1 day per week. Enter -88 for do not know, -99 for no response</i></p> <p><i>Number of days the \${facility_location_\$006} is open: \${102}</i></p>	Number of days <input data-bbox="948 1413 1166 1491" type="text"/>	103=1
105	<p><b>Which of the Vital Event Registration services is this facility currently providing.</b></p> <p><i>Select all that applies.</i></p> <p><i>Enter -88 for do not know and -99 for no response.</i></p>	Birth Registration ..... 1/0 Death Registration ..... 1/0 Marriage ..... 1/0 Divorce ..... 1/0 Other (specify) ..... 1/0 Adoption ..... 1/0 Legitimization of fatherhood ..... 1/0 Don't know ..... -88 No response ..... -99	103=1
106	<p><b>Do you have an estimate of the size of the current catchment population that this registration facility serves that is, the target, or total population living in the area served by this registration facility?</b></p>	No catchment area ..... 1 Yes, knows size of catchment area ..... 2 Doesn't know size of catchment area ..... 3 Don't know ..... -88 No response ..... -99	105=1



NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
107	<p><b>What is the size of the catchment population?</b></p> <p><i>Record the number of people living in the area served by this facility.</i></p>	<p>Number of people <input type="text"/></p>	106=2
108	<p><i>Now, I have some questions about staffing for this registration facility.</i></p> <p><b>How many staff members are directly involved in the services related to vital events registration.</b></p>	<p>Number of staff members <input type="text"/></p>	103=1
108a 2	<p><b>What year did you first begin working at this registration facility?</b></p> <p><i>Enter 2020 for do not know.</i></p>	<p>Year <input type="text"/></p>	103=1
109	<p><i>Now, I have some questions about the vital event coordinator or focal person of this vital events registration facility/department. What is the role or position of the vital events coordinator or focal person in the registration service?</i></p> <p><i>Hint: If the registration facility is located within Kebele and there is only one civil status officer, please select the 3rd option "Civil Status Officer"</i></p>	<p>Chief, Civil Status officer ..... 1  Vital events coordinator..... 2  Civil Status officer ..... 3  Other role ..... 5  No focal person..... 6  Don't know ..... -88  No response..... -99</p>	108>0
109a	<p>Interviewer, please indicate if the respondent is the focal person.</p> <p><b>Is the respondent the focal person for this registration facility?</b></p>	<p>Yes..... 1  No ..... 2  No response..... -99</p>	If 109 ≠ 6 OR - 88 OR - 99
110	<p><b>What is the highest level of school that the focal person or vital event coordinator attended?</b></p> <p><i>Only record formal schooling. Do not record bible or koranic school or short courses.</i></p> <p><i>Enter -88 for do not know and -99 for no response. 0 is a possible answer.</i></p>	<p>Never Attended ..... 0  Primary..... 1  Secondary ..... 2  Technical &amp; vocational ..... 3  Higher ..... 4  Don't know..... -88  No response..... -99</p>	109≠6 OR - 88 OR - 99
111	<p><b>Does the focal person or vital event coordinator primarily work for registration of vital events?</b></p>	<p>Yes, primary duty ..... 1  No, as additional task..... 0  Don't know ..... -88  No response..... -99</p>	109≠6 OR - 88 OR - 99
112	<p><b>If no, what is the primary duty of the focal person or vital event coordinator?</b></p>	<p>Manager of the Administrative office ..... 1  Head of the Administrative office ..... 2  School Director ..... 3  Deputy head of administrative office ..... 4  Other role ..... 5  Don't know ..... -88  No response..... -99</p>	111=0

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:																								
113	Did the focal person or any staff of the registration unit/facility ever attend training related to birth event registration services and activities organized by VERA or any other organization?	Yes..... 1 No ..... 2 Don't know ..... -88 No response ..... -99	108>0																								
114	What contents were covered during the training? <i>Select all that applies.</i> <i>Do not read out the options out loud. . Probe by asking, what else?</i>	How to register births ..... 1/0 How to compile and send report ..... 1/0 How to issue birth certificate ..... 1/0 How to involve stakeholders ..... 1/0 How to properly preserve records of vital events and secure their confidentiality..... 1/0 How to create awareness among the community on the registration of vital events ..... 1/0 Training on online registration and reporting systems 1/0 Training on updated directives and guidelines . 1/0  Don't know ..... -88 No response ..... -99	113=1																								
115	When was the last time that the staff received the training?	With in the past 3 months.....0 Within the past 6 months..... 1 Within 6-12 months ..... 2 More than 12 months ago ..... 3 Don't know ..... -88 No response..... -99	113=1																								
116	When is the last time this registration facility received a supervisory visit from VERA staff or higher-level registration office?	Never ..... 0 Within the past 6 months..... 1 More than 6 months ago ..... 2 Don't know ..... -88 No response..... -99	103=1																								
<b>Section 2 – Service Provision and Reporting System</b>																											
201	Does this registration facility have electricity at this time? <i>Select for running electricity only.</i>	Yes..... 1 No ..... 0 Don't know ..... -88 No response..... -99	103=1																								
202	At any point today, has the electricity been out for two or more hours?	Yes..... 1 No ..... 0 Don't know ..... -88 No response..... -99	201=1																								
203	Does this facility have forms required to register or report birth events including birth certificate?	Yes..... 1 No ..... 0 Don't know ..... -88 No response ..... -99	105=1																								
204	Which forms are currently available in this facility? <i>Read the options one by one.</i> <b>O: Observed</b> <b>RU: Reported but Unseen</b> <b>NA: Not Available</b>	<table border="1"> <thead> <tr> <th></th> <th>O</th> <th>RU</th> <th>NA</th> </tr> </thead> <tbody> <tr> <td>Birth register</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Birth event Report formats</td> <td>1</td> <td>2</td> <td>0</td> </tr> <tr> <td>Birth event Tally sheet</td> <td>1</td> <td>2</td> <td>0</td> </tr> <tr> <td>Birth certificate</td> <td>1</td> <td>2</td> <td>0</td> </tr> <tr> <td>Handover form</td> <td>1</td> <td>2</td> <td>0</td> </tr> </tbody> </table>		O	RU	NA	Birth register				Birth event Report formats	1	2	0	Birth event Tally sheet	1	2	0	Birth certificate	1	2	0	Handover form	1	2	0	203=1
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NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
205	Has this facility been out of any birth registration forms anytime in the past 3 months?	Yes..... 1 No ..... 0 Don't know ..... -88 No response ..... -99	203=1
206	Which forms, or register were out of stock? <i>Read the options one by one.</i>	Birth register..... 1/0 Birth event Report formats ..... 1/0 Birth event Tally sheet..... 1/0 Birth certificate ..... 1/0 Don't know ..... -88 No response ..... -99	205=1
207	Has this facility ever provided a birth report to the higher level registration office?	Yes..... 1 No ..... 2 Don't know ..... -88 No response..... -99	105=1
208	How often does this registration facility report registered birth events to the higher level on regular basis?	Weekly ..... 1 Monthly ..... 2 Quarterly ..... 3 Every 6 month ..... 4 Yearly ..... 5 Irregularly ..... 6 Don't know ..... -88 No response..... -99	207=1
209	When is the last time you reported about the number of registered births at this facility to the higher level registration office? <i>If respondent knows the year, but not day/month enter 'Do not know' for day/month Select 'Do not know' for month and '2020' for year to indicate 'No Response'.</i>	Day <input type="text"/> Month <input type="text"/> Year <input type="text"/>	207=1
210	How did you transmit this report to higher level registration office usually?	Dropped off report at VERA office..... 1 VERA worker collected report from facility ..... 2 Electronically ..... 3 Other ..... 5 Don't know ..... -88 No response..... -99	207=1
211	May I see the room/s where registration of birth events is conducted?	Yes..... 1 No ..... 0 Don't know ..... -88 No response..... -99	105=1

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:																																								
212	<p>For each of the following items, check to see whether item is in the room where registration of vital events is conducted.</p> <p>Computer.....</p> <p>Printer.....</p> <p>Photocopy machine.....</p> <p>Telephone.....</p> <p>Waiting benches/chairs.....</p> <p>LAN.....</p>	<table border="1"> <thead> <tr> <th>Observed &amp; Functional</th> <th>Observed but Not Functional</th> <th>Reported but unseen</th> <th>Not available</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>1</td> <td></td> <td></td> </tr> <tr> <td>1</td> <td>1</td> <td>2</td> <td>-77</td> </tr> <tr> <td>1</td> <td>1</td> <td>2</td> <td>-77</td> </tr> <tr> <td>1</td> <td>1</td> <td>2</td> <td>-77</td> </tr> <tr> <td>1</td> <td>1</td> <td>2</td> <td>-77</td> </tr> <tr> <td>1</td> <td>1</td> <td>2</td> <td>-77</td> </tr> <tr> <td>1</td> <td>1</td> <td>2</td> <td>-77</td> </tr> </tbody> </table>	Observed & Functional	Observed but Not Functional	Reported but unseen	Not available	1	1			1	1	2	-77	1	1	2	-77	1	1	2	-77	1	1	2	-77	1	1	2	-77	1	1	2	-77	211=1								
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213	<p>May I see your birth register record book for the past completed month?</p>	<p>Yes..... 1</p> <p>Yes, but no adequate records for past months .... 2</p> <p>No ..... 0</p> <p>Don't know ..... -88</p> <p>No response..... -99</p>	105=1																																								
214	<p>From birth register record book, record:</p> <p>Past completed month OR current month record if 213=2.. Enter -88 for do not know, enter -99 for no response.</p>	<p style="text-align: center;">Total # records</p> <table border="1"> <tr> <td># of registered births</td> <td style="width: 50px; height: 20px;"></td> </tr> <tr> <td># of birth certificates issued</td> <td style="width: 50px; height: 20px;"></td> </tr> </table>	# of registered births		# of birth certificates issued																																						
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# of birth certificates issued																																											
215	<p>May I see the room where registers of birth events (civil status) are stored/archived?</p>	<p>Yes..... 1</p> <p>No ..... 0</p> <p>Don't know ..... -88</p> <p>No response..... -99</p>	105=1																																								
216	<p>Observe the place where registers of birth events (civil status) are stored and report on the following condition:</p>	<table border="1"> <thead> <tr> <th></th> <th>Yes</th> <th>Somewhat or Broken</th> <th>No</th> <th>Not Available</th> </tr> </thead> <tbody> <tr> <td>Is there a separate/independent room assigned for this purpose?</td> <td>1</td> <td>2</td> <td>0</td> <td>-77</td> </tr> <tr> <td>Does the room have adequate light?</td> <td>1</td> <td>2</td> <td>0</td> <td>-77</td> </tr> <tr> <td>Are the registers placed in a shelf, which is lockable?</td> <td>1</td> <td>2</td> <td>0</td> <td>-77</td> </tr> <tr> <td>Are the birth registers archived in sequential manner according to the serial number?</td> <td>1</td> <td>2</td> <td>0</td> <td>-77</td> </tr> <tr> <td>Are the birth registers protected from water?</td> <td>1</td> <td>2</td> <td>0</td> <td>-77</td> </tr> <tr> <td>Are the birth registers protected from direct sunlight?</td> <td>1</td> <td>2</td> <td>0</td> <td>-77</td> </tr> <tr> <td>Is the room clean of evidence of rodents (bats, rats), pests (roaches), or flooding?</td> <td>1</td> <td>2</td> <td>0</td> <td>-77</td> </tr> </tbody> </table>		Yes	Somewhat or Broken	No	Not Available	Is there a separate/independent room assigned for this purpose?	1	2	0	-77	Does the room have adequate light?	1	2	0	-77	Are the registers placed in a shelf, which is lockable?	1	2	0	-77	Are the birth registers archived in sequential manner according to the serial number?	1	2	0	-77	Are the birth registers protected from water?	1	2	0	-77	Are the birth registers protected from direct sunlight?	1	2	0	-77	Is the room clean of evidence of rodents (bats, rats), pests (roaches), or flooding?	1	2	0	-77	215=1
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217	<p>Are clients charged for obtaining any of the following services?</p>	<p>Both birth registration and birth certificate as a package ..... 1/0</p> <p>Registration of birth event ..... 1/0</p> <p>Typical issuance of birth certificate ..... 1/0</p>	105=1																																								

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:														
	<i>Read all options out loud one by one.</i>	Delayed issuance of birth certificate..... 1/0 Late (after a year) issuance of birth certificate ..... 1/0 Penalty for late comers ..... 1/0 Other payments related to birth registration (specify) 1/0 No charge for any service ..... -77 Don't know ..... -88 No response ..... -99															
218	<p><b>How much do you charge for each service that you provide?</b></p> <p><i>Enter all prices in Ethiopian Birr</i></p> <p><i>Enter -88 for do not know, -99 for no response.</i></p> <p>[ODK will only display the services for which the facility charges from Q217</p>	<p style="text-align: right;">Amount per Unit</p> <table border="1" style="width: 100%;"> <tr><td>Both birth registration and birth certificate as a package</td><td style="width: 50px;"></td></tr> <tr><td>Registration of birth event</td><td></td></tr> <tr><td>Typical issuance of birth certificate</td><td></td></tr> <tr><td>Delayed issuance of birth certificate</td><td></td></tr> <tr><td>Late (after a year)issuance of birth certificate</td><td></td></tr> <tr><td>Penalty for late comers</td><td></td></tr> <tr><td>Other payments (specify)</td><td></td></tr> </table>	Both birth registration and birth certificate as a package		Registration of birth event		Typical issuance of birth certificate		Delayed issuance of birth certificate		Late (after a year)issuance of birth certificate		Penalty for late comers		Other payments (specify)		217≠-77, -88, -99
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<b>Section 3 –Birth Event Registration Services Integration</b>																	
301	<p><b>Does this facility work with any governmental or non-governmental institution in the process of birth events notification?</b></p>	Yes..... 1 No ..... 0 Don't know ..... -88 No response..... -99	105=1														
302	<p><b>Which institution/s is/are involved in the process of birth event notification to the catchment population?</b></p> <p><i>Select all that applies.</i></p> <p><i>Do not read the answers out loud, instead let the respondent spontaneously state their response(s). After each response, ask: "is there any other institution?"</i></p>	Health posts .....1/0 Other health facilities (Governmental, Faith based and NGO).....1/0 Religious institutions .....1/0 Community Volunteers (HDAs or other DAs) .....1/0 Schools .....1/0 Other (specify) .....1/0 Don't know .....1/0 No response.....1/0	301=1														
<b>Question 303-306 will be asked to all institutions indicated in question 302</b>																	
303	<p><b>Does this registration facility get a formal birth notification form from \${institution_type}?</b></p>	Yes, all times..... 1 Yes, sometimes ..... 2 No ..... 0 Don't know ..... -88 No response..... -99	302≠-88& -99														
304	<p><b>Does this registration facility get formal birth event report from \${institution_type} on a regular basis?</b></p>	Yes, all times..... 1 Yes, sometimes ..... 2 No ..... 0 Don't know ..... -88 No response..... -99	302≠-88& -99														
305	<p><b>How often does this facility receive a formal report from \${institution_type}?</b></p>	Weekly ..... 1 Monthly .....2 Quarterly .....3 Every 6 month.....4 Yearly.....5	304=1 OR 2														

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
		Don't know ..... -88 No response..... -99	
306a	Does this registration facility regularly provide support to the institution/s involved in the process of birth events notification?	Yes, to all available facilities ..... 1 Yes, to some facilities ..... 2 No ..... 0 Don't know ..... -88 No response..... -99	301=1
306b	Does this registration facility regularly provide supervision to the institution/s involved in the process of birth events notification?	Yes, to all available facilities ..... 1 Yes, to some facilities ..... 2 No ..... 0 Don't know ..... -88 No response..... -99	301=1
306c	Does this registration facility regularly provide supplies to the institution/s involved in the process of birth events notification?	Yes, to all available facilities ..... 1 Yes, to some facilities ..... 2 No ..... 0 Don't know ..... -88 No response..... -99	301=1
307a	Does this facility experience any problems/challenges in providing birth event registration?	Yes..... 1 No ..... 0 Don't know ..... -88 No response..... -99	
307	What are the main challenges/problems this registration facility is currently facing in providing birth event registration services to the catchment population? Hint: <i>multiple answers are possible. Do not read the answers out loud, instead let the respondent spontaneously state their reason(s). After each reason, ask: "is there any other challenge?"</i> .	Inadequate skilled manpower .....1/0 Lack of support from VERA.....1/0 No or inadequate budget.....1/0 Low notification of birth events .....1/0 Overburden with other coinciding duties .....1/0 Lack of ownership by the administrative office.....1/0 No or poor service integration with local stakeholders ....1/0 Low birth registration awareness in the community .....1/0 Low birth registration demand from the community .....1/0 Lack of birth registration and/or report formats .....1/0 No or inadequate store room to archive birth registers1/0Inadequate space of registration facility .....1/0 No or inadequate equipment to archive birth registers....1/0 Interruption of internet connection.....1/0 No internet connection at all.....1/0 Limited clarity on policy/rules/regulations and requirements .....1/0 Requirements for parents/caregivers are unnecessary/bureaucratic .....1/0 Other (specify) .....1/0 Don't know .....1/0 No response.....1/0	307a=1
308	What is/are your suggestions or recommendations to improve the quality of birth events registration services or ideas that would solve any challenges this registration facility might have encountered? Hint: <i>multiple answers are possible. Do not read the answers out loud, instead let the respondent spontaneously state their reason(s). After each reason, ask: "is there any other possible solution?"</i> .	Transform to automated registration system .....1/0 Transform to automated reporting system .....1/0 Training to registration service providers .....1/0 More support from VERA or/and lower levels of VERA...1/0 Allocating budget or additional budget .....1/0 Recruit staff who will undertake registration services.....1/0 Announcing birth registration laws and legislations to the community.....1/0 More strict actions for families who do not declare births 1/0 Ownership by the administrative office.....1/0 Service integration with other stakeholders.....1/0 Get Supplies timely: Registration forms, birth certificates and reporting formats .....1/0 Renovation of store Room .....1/0 Constructing Separate Room to store birth registers .....1/0 Get/purchase cabinets to store birth registers service ....1/0	105=1

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
		Support from Health facilitates in notifying and linking birth events with the registration office ..... 1/0 Handing over this service to HEWs ..... 1/0 Making birth certificate as a requirement for vaccination 1/0 Making birth certificate as a requirement for school enrollment ..... 1/0 Improve internet connectivity ..... 1/0 Modify requirements and regulations ..... 1/0 Other (specify) ..... 1/0 None of the above ..... 1/0 Don't know ..... 1/0 No response ..... 1/0	
<b>LOCATION AND QUESTIONNAIRE RESULT</b>			
<b>Thank the respondent for her / his time.</b> <i>The respondent is finished, but there are still more questions for you to complete outside the facility.</i>			
013	<b>Location</b> <b>Take a GPS point outside near the entrance to the facility. Record location when the accuracy is smaller than 6m.</b>	RECORD LOCATION	Always
014	<b>How many times have you visited this registration facility for this interview?</b>	1 <sup>st</sup> time ..... 1 2 <sup>nd</sup> time ..... 2 3 <sup>rd</sup> time ..... 3	Always
015	<b>In what language was this interview conducted?</b>	English ..... 1 Amharic ..... 2 Other (specify) ..... 3	008=1
016	<b>Record the result of the Service Delivery Point Questionnaire.</b>	Completed ..... 1 Not at facility ..... 2 Postponed ..... 3 Refused ..... 4 Partly completed ..... 5 Facility closed, not found or demolished ..... 6 The facility temporarily suspended providing Vital Events Registration Services ..... 7 Other ..... 8	Always