



PSYCHOSOCIAL AND CULTURAL ANALYSIS OF CHILDLESSNESS AND ITS IMPLICATIONS ON WOMEN EMANCIPATION IN SOUTH WESTERN NIGERIA: THE COUNSELING PERSPECTIVE

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ABSTRACT

Studies show that the stereotype that childlessness is solely considered a woman's problem makes infertility a major disaster for childless women in Nigeria. This study adopted a cross sectional survey design to explore the extent to which Psychosocial and cultural factors correlate with perception of childlessness among women in South Western Nigeria. Multi-stage sampling technique was utilized to draw out five hundred and fifty-four males and seven hundred females with age range of 20-45 (\overline{X} =30.4; SD=8.6) from South Western Nigeria. A synchronized instrument with three sub-sections titled Psychosocio-cultural assessment of childlessness (r=0.75) was utilized for data collection. Two Research questions were answered and six null hypotheses tested at 0.05 level of significance. Descriptive Statistics, Multiple Regression Analysis, Pearson Product Moment Correlation and t-test for independent samples were used for data analysis. Results show that Nigerians irrespective of tribe, gender, age, educational status, self-esteem and religion consider childlessness a taboo and hold women solely responsible. This outcome has implications for improved sexual and reproductive health policy with respect to gender mainstreaming and counselling interventions for childless women.

Keywords: Psychological, Socio-cultural, Childlessness, Women emancipation, Counselling

INTRODUCTION

Out of the four purposes of marriage namely; childbearing, sexual satisfaction, companionship and economic satisfaction, procreation is the major aim of most Nigerian marriages. Children are considered a symbol of both social and economic well-being. This is evident from a popular saying that "He who has children has wealth" The assumed benefits of children are closely linked with core psychological needs for connectedness, engaging activity, security and control (e.g., reliable support in old age), and experiencing a positive self, the fulfilment of which appears to be major correlates of subjective well-being (Angner, 2005; Ryan & Deci, 2001).

Studies from communities in Egypt, Nigeria, Mozambique and the Gambia showed that infertile women are often excluded from social events and ceremonies or may even be despised and perceived as inauspicious (Kabasa 1994; Okonofua, 1997; Gerritsm, 1997; Sundby, 1997). In some cases, they are feared as casting "evil eye" on pregnant women. In a recent study in Benin City, Nigeria, the researcher reports that childless women were regarded as worthless and deserved to be divorced (Omage, 2013). Childless women for the purpose of this study are women who desired to have pregnancy but are involuntarily childless due to infertility, pregnancy loss, stillbirth or child death (Lechner, Bolman & van Dalen, 2007). This is as opposed to "voluntarily childless women" who are of childbearing age, fertile but choose childless. Infertility according to American Society of Reproductive Medicine (2013) is failure to achieve a successful pregnancy after 12 months or more of appropriate, timed unprotected intercourse or therapeutic donor insemination. Nigerian women is one of the half a million women in the developing world who die each year in pregnancy or childbirth. This amounts to one every minute (World Health Organization, 2013).

How childlessness is viewed and reaction to childlessness is dependent upon psychosocial-cultural factors prevalent in any society. Researchers (Okonofua, 2007; Omage, 2013) opined that the Nigerian traditional belief systems based on continuity of lineages place a high premium on fertility. Whatever the cause, as a result of existing social and gender norms, women are often blamed if a couple is childless. This observation was collaborated by Umeora, Igberase, Okogbenin and Obu (2008) who reported that 66.7% of the respondents in their study held women responsible for etiology of infertility and as a result suffered intimate partner abuse, psychological and emotional trauma from their families, as well as isolation and stigmatization from the society.



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The stereotype that infertility is solely considered 'a woman's problem' makes childless women to be generally blamed. Thus, childlessness could have lifelong impact on women and could affect their quality of life negatively. The psychological consequences of infertility are well documented. Infertile women often feel guilt and worthlessness leading to low self-esteem, depression and anxiety (Omoaregba, James, Lawani, Morakinyo & Olotu, 2011). In terms of the economic impact of childlessness, childless women and their families may feel that they have a lack of social security and support in their old age. At the family and lineage level, childless women receive disrespectful treatment and maltreatment by in-laws due to the concern for their family lineage dying out. In more extreme cases, acts of violence are committed against them (Feyisetan & Bankole, 2002; Omoaregba, et.al, 2011). Studies also show that childlessness women have more health complaints, greater anxiety and depression, and complicated grief (Lechner, et al., 2007). Loss of social status, stigma, isolation, alienation and physical violence associated with childlessness have implications for the political, social, and economic emancipation of women in Nigeria. Despite the personal cost to the individual as it pertains to psychosocial well-being, childlessness can aggravate the problem of human rights abuse against Nigerian women and can lead to socio-economic disempowerment on a scale that exceeds that associated with other major reproductive health problems.

Childlessness as a major barrier to women emancipation has received little attention from policy makers and programmers in developing countries including Nigeria. Van Balen (2000) observed that attention is given basically only to the medical and clinical aspect of childlessness at the expense of the social or psychological aspect. There is also no notable counselling intervention that alleviates the negative psychological experiences of childless individuals especially women. On the research front, several studies have investigated the prevalence, causes and consequences of childlessness and infertility. For example, Akanbi (2004) using respondents in Ogbomosho area of Oyo State revealed that Nigerians have negative attitude toward involuntary childlessness regardless of age, sex, educational level and religion. Similarly, Ola (2009) using 600 respondents shows that both men and women perceive childlessness in women to be caused by evil spirits, ancestral curses and promiscuity while the cause of childlessness in men is perceived to be the result of psychosexual disorders. Further, Omage (2013) reports that infertility was found to be consistently higher in the rural areas compared to the urban and in the North compared to the South.

The need to further understand the psychosocial and cultural dimensions of childlessness in order to contribute to existing literatures on Counselling intervention to ameliorate the psychological trauma of childless women becomes imperative.

Objectives of the study

In light with the stated problems the major thrust of this study is to investigate the psychosocial and Cultural Analysis correlate of childlessness and Its Implications on Women Emancipation in South Western Nigeria: this study examined the composite and relative contributions of Psychosocial and Cultural factors (gender, age, tribe, religion, educational status, and self-esteem) to perception of childlessness in South Western Nigeria. The study also hypothesized that psychosocial and cultural factors will not have significant influence on the respondent's perception of childlessness.

MATERIALS AND METHODS

In this cross-sectional study, a total of 1254 respondents was drawn using Multi-stage sampling technique. In the first stage, three states (Lagos, Ekiti and Osun) were selected out of the six that made up South Western Nigeria. In order to ensure adequate representativeness, simple random sampling method was used in the second and third stages to select three Local Governments from where three towns each were drawn. For ethical considerations, the purpose of the research was explained to the participants who thereafter enrolled into the study after signing a simple written informed consent.

A synchronized instrument with 3 sub-sections titled 'Psycho socio-cultural assessment of childlessness' was developed and validated based on the study objectives. It is a 20 item self-report questionnaire designed in five scale Likert format which ranges from strongly agreed to strongly





disagree. Section A contained questions about demographic data, while section B elicited information in respect to the individual's opinion regarding childlessness, what causes childlessness, how childless women should be treated in the society and what a man should do if the wife does not have a child for him.

Four Measurement and Evaluation specialists reviewed the questionnaire and confirmed that it has face and content validities. To evaluate the simplicity and ease of the questions, the questionnaire was given to 50 adults randomly drawn from non-participating states during a pilot study. Cronbach alpha was calculated for internal consistency of the items. The values were: $(\alpha=0.74)$ for perception of childlessness women; $(\alpha=0.71)$ for what causes childlessness; $(\alpha=0.70)$ on how childless women should be treated in the society and $(\alpha=0.72)$ for what a man should do if the wife does not have a child for him. The total reliability index was r=0.75.

Consequently, the validity and reliability of the questionnaire were considered satisfactory. The field study was thereafter carried out over a period of six months following the pilot revisions. Three research assistants who could speak at least one of the 3 Nigerian major Languages were recruited from the participating states. The data were analyzed using t test for independent samples, Multiple Regression Analysis and Pearson Product Moment Correlation Coefficient (PPMCC). Version 15.0 of Software Package for Social Sciences (SPSS) was utilized. Level of rejection was set at 0.05 alpha level.

RESULTS

Descriptive statistics of the sample show that five hundred and fifty-four males (44.8%) and seven hundred females (55.82%) with age range of 20-45 (\bar{x} =30.4 SD=8.6) participated in the study. Summary of the demographic profile of respondents is presented on table 1.

Table 1: Demographic profile of Respondents

S/N	Variables	Categories	Number	Percentage (%)
1	Gender	Female	700	55.82
		Male	554	44.18
		Total	1254	100%
2	Marital Status	Married	757	60.37
		Single	342	27.27
		Divorced	113	9.01
		Widowed	42	3.35
		Total	1254	100%
3	Educational status	Primary	217	17.30
		Secondary	418	33.33
		Tertiary inst. graduates	338	26.95
	1	University graduates	178	14.19
		Illiterates	103	8.21
		Total	1254	100%
4	Religion	Christian	623	49.68
		Muslim	429	34.21
		Traditions	173	13.79
		Aesthesis	29	2.31
		Total	1254	100%
5	Self Esteem	High	678	54.06
U		Low	576	45.93
		Total	1254	100%
6	Occupational status	Traders	350	27.91
		Civil servants	277	22.0
		Self-employed	314	25.03
		farmers	113	9.01
		Unemployed	200	15.94
		Total	1254	100%
7	Tribes	Yoruba's	734	58.53
		Igbos	332	26.48
	<u></u>	Hausa	188	14.99
		Total	1254	100%



As could be seen from Table 1, 8.21 % of the total population was illiterate, 17.30 % had primary education, 33.33 % had secondary education, 26.95 % graduated from other tertiary institutions and 14.19 % had university education. With respect to religion 49.68 % were Christians, 34.21 % were Muslims, 13.79 % were traditionalist, and 2.31% were atheists. A total of 678 respondents consisting 54.06 percent of respondents had high self-esteem while 576 (45.93%) had low self-esteem. Regarding marital status, 60.37 % were married, 27.27% were single, 9.01 % were divorced, 3.35 % widowed/widower. 15 % of the married males were childless while 21 % of the females are yet to bear children. Their occupational profile showed that 27.91 % were traders, 22.0 % were civil servants, 25.03 % were self- employed, and 15.94 were unemployed while 9.01 were % farmers. Regarding tribe of the respondents, the three dominant ethnic groups in Nigeria were used, namely; Hausa, Igbo and Yoruba. The result shows that 58.53 % of the respondents were Yorubas, 26.48 % Igbos, while only 14.99 % were Hausas. This is expected given that the research site was a Yoruba based community, this was closely followed by Igbo immigrants and minority Hausas who resides in an area called sabo in each study site.

Research Questions:

Opinion regarding childlessness women were assessed using four questions of how much they agree or disagree with the following statements: 'The purpose of marriage is for childbearing' "Childless women are worthless"; "A childless woman disinherits her husband" responsible for childlessness". 57 % felt the purpose of marriage is for a woman to bear children" 13 % felt that childless women are worthless, 30% believes that a childless woman disinherits her husband. Majority of the respondents (53%) were of the opinion that women/ wives were responsible for childlessness, 24% of respondents claimed that husbands were responsible for infertility; 23 % reported that the problem could be from both partners. The researcher elicited information regarding what causes infertility as a follow up to the previous question. The results show that 22% believed that a woman's previous abortions was the cause of infertility; 14 % believed that incompatibility is the cause; 23% of them claimed it to be supernatural forces; 7% of them support disease to be the cause of infertility; 27% of them believed that lifestyle is the cause; and 7 % of them believed that occupational and environmental hazard are the causes of infertility. 66 % of the male respondents agreed that a man should remarry in case the wife did not conceive; while 76% of female respondents said they were willing to remain in a childless marriage. When asked the reason for wanting remarriage the male respondents said " I can't wait for a woman who has useless'/mismanaged herself". The female would rather wait because according to them 'children are gifts from God, I know that God will give me my own at his own time'

T- test for independent sample which was utilized to test the seven null hypotheses that gender, age, tribe, religion, educational status, and self-esteem would not significantly influence respondents perception of childlessness were retained. The results show that there was no significant differences in perception based on Gender (t =1.55, df=1252, P=2.35>0.05), marital status (t= 0.034, df= 1250,P=1.32>0.05) ;Educational Status (t=1.02, df= 1249,P=2.11>0.05) ; Religion (t=0.07,df=1251,P=3.13>0.05) ; Self Esteem (t=1.01,df=1252,P=3.21);Occupational status (t=.036,df=1249, P=2.41>0.05) and Tribe (t=2.55,df=1251,P=3.09>0.05)

Multiple Regression Analysis was undertaken in order to determine the composite contribution of the independent (gender, age, tribe, religion, educational status and self- esteem to the prediction of the dependent variable (perception of childlessness in women). The result as presented on table 2 shows that the seven independent variables accounted for 72 % of the total variance on perception of childlessness in women as revealed thus=, R=.1197; R^s =.922.Adj R^s =.721 and Std. error of estimate =. 8.71128. While the remaining 27.08 % could be attributed to other factors not considered in this study. The result of the Multiple regression analysis produced Fratio ($_{5/1243}$) = 347.81 which was significant at p<0.05 alpha level.



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Table 2: Summary of Regression Analysis showing the joint contribution of the independent variables to the prediction of the dependent variable

Multiple R	R Multiple R-Square		Adjusted R- Squar	Adjusted R- Square		Standard Error of Estimate	
0.1197 0.922			0.721	0.721		8.71128	
ANOVA							
Model	Sum of squares	DF	Mean Square	F-ratio	Р	Remark	
Regression	82273.911	6	13712.3185	347.81	<0.05	Sig	
Residual	97433.208	1247	78.134088				
Total	179707.119	1253					

Table 3: Relative contribution of each of the independent variables to the prediction of the dependent variable

Model	Unstandardized coefficient		Standardized Coefficient	Rank	t	р	Remark
	В	Std Error	Beta (β)		-1	•	
Constant	-0.9724	6.277			-3.111	0.319	
Gender	0.804	0.902	0.511	2 nd	11.201	.000	Sig
Age	0.729	0.532	0.401	3 ^{ra}	7.101	.000	Sig
Tribe	0.967	0.602	0.623	1 st	13.111	.000	Sig
Self -esteem	0.4155	0.337	0.222	5 th	4.120	.000	Sig
Religion	0.623	0.117	0.128	6th	3.101	.000	Sig
Educational status	0.103	0.503	0.343	4 th	5.105	4.003	Ns

Table 3 also highlighted the relative contribution of each of the independent variables to the prediction of the dependent variable. It reveals that the independent variables (tribe, gender, age, educational status, self-esteem and religion) made significant contributing effect to the dependent variable (perception of childlessness). It was observed that tribe made the highest contribution (β =0.623), followed by gender (β =0.511), age (β =0.401), educational status (β =0.343) and self esteem (β =0.222). While religion of the respondents made the least contribution as could be seen from the beta (β =0.128). The t-test scores also confirmed the supremacy of tribe over other independent variable

DISCUSSION

Psychosocial and cultural analysis of childlessness and its implications on women emancipation in Nigeria was examined in this study with a noticeable sample size of 1254. Okonofua, et. al., (1997) and Omage (2013) showed that due to social meaning of infertility in Nigeria, childless women are denied their rights which are in agreement with the findings of the present study where 57 % of respondents felt that the purpose of marriage is for a woman to bear children. Similarly, Umeora et. al (2008) reported that 66.7% of the respondents in their study held women responsible for the etiology of infertility. This view was also confirmed in Ola (2009) study where both men and women perceive childlessness in women to be caused by evil spirits, ancestral curses and promiscuity, while the cause of childlessness in men was perceived to be the result of psychosexual disorders. This outcome was collaborated by respondents in the present study where 22% of them believed that a woman's previous abortions was the cause of infertility; 14 % believed that incompatibility is the cause; 23% claimed it was supernatural forces; 7% was of the opinion that it was disease, 27% believed that lifestyle was the cause; and 7 % felt that occupational and environmental hazard were the causes of infertility

The fact that 66 % of the male respondents agreed that a man should remarry in case the wife did not conceive confirmed the earlier findings of Umeora, et. al. (2008) who reported that childless women were more likely to suffer social consequences of infertility, such

as neglect, abandonment, economic deprivation, social ostracism and physical abuse. Omage (2013) also confirmed that their respondents were of the opinion that childless women should be divorced. Ojua, Edem and Aernyi (2013) also gave similar report that childlessness was the major cause of marital instability in Benue state, Nigeria. This study outcome collaborated Akanbi (2004) whose study revealed that Nigerians have negative attitude toward involuntary childlessness regardless of age, sex, educational level and religion.

The finding of this study is not surprising given that every Nigerian couple desire to have children irrespective of the gender and this is consistent with what is obtainable in other African countries. This could be attributed to the fact that children are highly valued due to social, cultural and economic reasons. Infertile and childless women are therefore confronted with a series of societal stigmatization and discrimination which may lead to psychological disorders and depressions. However, a contrary finding was reported by Mead (1935) among Mundugumor tribe in Papua New Guinea where children are not welcomed to earth with warmth and love instead, babies were seen as a hassle until they could fend for themselves.

Implications of the Study

This study shows that irrespective of tribe, age, gender, occupation, educational status, self-esteem and religion women are held solely responsible for childless marriage. This finding has far reaching implication for women emancipation in Nigeria. Put differently, childless women in Nigeria are politically, economically and socially handicapped since child bearing is strictly interwoven with socio-economic empowerment. Undoubtedly, gender equality and women's empowerment are essential for growth and poverty reduction. Women in Nigeria are the main drivers of economic development yet they suffer disproportionately from poverty and its related consequences, such as malnutrition, poor health and illiteracy.

Recommendations

Experience of childlessness can be devastating for the couple desiring a child. Although both men and women are emotionally impacted by their childlessness, they typically experience and cope with this challenge differently. It has been demonstrated that individual or group psychosocial interventions are effective in reducing negative affect of childlessness on couples especially women. This is because most problem of childlessness is emotional distress and not psychopathological. Counsellors can adopt any of the following psychotherapeutic intervention based on individual client or case (s); emotion- and problem-focused interventions; supportive group interventions; psychological and sexual counselling; couple therapy; cognitive-behavioural therapy; mind-body therapy; cognitive-restructuring; relaxation training, nutrition and exercise psychodynamic psychotherapy and crisis intervention.

In addition, all elements of discrimination, gender stereotypes, social, religious differences and elements pertaining to structural barriers and institutional policies need to be expunged.

Conclusion

This study adopted cross sectional survey design to examine the Psychosocial-cultural Analysis of Childlessness and its implications on women emancipation in Nigeria. Adequate sample size comprising of unequal representation of respondents with respect to gender, age, tribe, educational status self-esteem and religion were utilized. The results of Multiple Regression analysis and t- test for independent samples provided additional evidence that despite the numerous declarations on gender equality, gender inequity still permeates the cultural, political, socio economic and health sectors in many Nigerian settings.

The need for Psychologists to manage the emotional and psychological life of childless women in Nigeria is evident from this study. Community education on the actual cause of childlessness which will dispel myths about the causes and ways of preventing infertility required scaling up.

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