

The Status of Women, Sex Preference, Decision-Making and Fertility Control in Ekpoma Community of Nigeria

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ABSTRACT This study examined gender relationship and how this affect sex preference and decision-making in the home with particular reference to fertility in Nigeria .The small university community of Ekpoma was used as the case study. In this locality, seven hundred households were randomly selected for the study with larger concentration of educated respondents. The questionnaire and focus group discussion were employed to elicit information from respondents. The simple percentage was employed in data management. The findings revealed that the level of education notwithstanding, people are still holding to tradition and customs in matters affecting gender. These attitudes are influenced by the never changing inheritance pattern, supremacy of the patriarchal system and the love for tradition. Most disturbing is that women don't seem to see any thing wrong with the situation. The researchers therefore concluded that women empowerment when encouraged will not only affect women's autonomy but also will increase their worth, participation in family decision-making including reproductive decisions and reduce the preference for a particular sex by couples. All these will have implications for fertility control programmes in Nigeria.

INTRODUCTION

The status of individuals and the power they wield in any society is culturally determined, as all cultures are gender sensitive. Gender relationship is a vital practice that influences the lives of men and women in any society. It is so important that it affects the roles we play and the relative power we wield. It determine the opportunities and privilege we have.

Gender affects both "power to" and "power over". According to Riley (1997), "power to" refers to the ability to act and often requires access to social resources such as education, money, land and time. In most societies, women usually have less "power over" compared to men in all spheres of life. Individuals with "power over" are able to assert their wishes and goals even in the face of opposition from others. All these show that gender relationship influences all aspects of our lives, the schooling we receive, the social roles we play and the power and authority we command.

The current women empowerment programmes are geared towards improving the status of women, which to a large extent affect sex preference among couples and families. If men and women are equally valued, couples will not prefer one sex to another. The growing support for and attention to gender equality however is based on the assumption that it would improve the lives of most people especially those of women. In the long run such equality is vital for

population policies and processes. Participants at International Conference on Population and Development (ICPD) in Cairo in 1994 expressed this view. It was further re-emphasized at this conference that "advancing gender equality and the empowerment of women and the elimination of all kinds of violence against women and ensuring women's ability to control their own fertility, are corner-stone of population and development related programmes". It was believed that when women have more autonomy, maternal and child health will improve, fertility and child or infant mortality will decline and population growth rate will reduce.

In the light of the above, this study aims at finding out if this traditional behaviour pattern has changed over years, given the influence of education and awareness in our community. Finally, this work invariably leads to new research questions and agenda that can enhance our knowledge and understanding of the culture, power relationship among couple and how these affects role expectations, child bearing and rearing practices in Nigeria.

Fertility control like most other family decisions is not always an individual affair but involves co-operation, discussion and joint decision making among couples. The nature of relationship existing among the couples affects the decision on family size. According to Beckman (1982), the status of women in the family in particular and society in general is important in the decision authority in the marital dyad.

Hollerback (1980) also found that the way women interact with kins, neighbours, peers, and community leader, health professionals' etc. are significant extramarital influences in shaping the decision style. Fertility decisions at a given time depend to a large extent on current situations within the family. Each birth may therefore be influenced by a different set of motivational, cultural and family conditions. Some of these situations include.

1. No decisions that may occur when a couple does not foresee that pregnancy result from particular actions.
2. Misperceive their fecundity and or lack knowledge of fertility decisions.
3. Passive decision which take place when particular habits or customs within the culture reinforce the childbearing behaviors acceptable for group survival.
4. Active decision which take place when the couples are aware of a number of things
5. Probability of pregnancy.
6. Possibility of regulating fertility and the fact that costs and benefits are attached to fertility outcome (Odimegwu et al., 2001).

Ahmed (1990) noted "a great number of barriers (for women) are rooted in social values, customs, beliefs and assumption about the nature of a woman and her capability". Males are generally referred to as the head of the home. These socially determined roles in the household have a significant effect on decision-making that will determine ability to take advantage of opportunities that will then affect the educational, occupational, social and health-related status of members of the household along gender line. The social pressure to conform to the social elements determining gender relationship is strong and deviation often carries a sanction, especially for women. In the views of Olaloye (1996), to resist ones socially prescribed position is to risk social disfavour which might not only affect one's position in the family, but also in social, work or religious groups as well as the community at large.

In many societies, women are brought up to be dependent on the men in their families to the extent that they are incapable of changing the situation of male dominance. What seems unfortunate is that the woman forms the major source and force of socialization in the family, which reinforces these traditional beliefs that women must be submissive to the men. They also reinforce the belief that men must act like

men, be more aggressive and less sensitive to the views and reactions of others especially those of women. When they marry these men in attempting to act like the men, takes most of the family decisions including reproductive decisions.

Research Questions

1. What is the status of women amongst the people of Ekpoma ? Do Women have enough powers and autonomy to take family decisions including reproductive decisions ?
2. Since family planning services are usually centered on women, can they take reproductive decisions without their husbands consent as the traditional head of the home? What implications has this on family planning programmes ?
3. Why do couples prefer one sex to the other and what implication does this have on reproductive decision-making and fertility in Nigeria?
4. What is the relationship between statuses of women, sex preference, decision-making and fertility control programmes in Ekpoma community ?

Rationale for the Study

The Cairo conference on population and development sets it as a goal to "alter the interpersonal and social forces that shapes sexual and reproductive preferences and outcomes both accidental and intended" (Dixon-Muller and Germain, 2000: 72). The goal according to them is intended to reshape the decision-making environment in a way that would undermine the coercive pronatalism or patriarchal regimes and creates conditions favourable to female autonomy, late marriages and smaller family size. In other words, the social context of sexual and reproductive decision-making should be well explored. Towards this end, it is vital that we have objective insight into the personal, household and social factors influencing fertility regulating behaviour of individuals and couples and on the basis of this proffer possible solution for problems of gender inequality, women empowerment and low fertility rate in Nigeria.

Secondly, this work invariably leads to new research questions and agenda that can enhance our knowledge and understanding of the culture,

power relationship among couples and how these affects role expectations, child bearing and rearing practices in Nigeria.

The main objectives of this study are:

1. To examine gender relationship between men and women and how it affects decisions on child bearing, childcare and upbringing.
2. To identify the effective decision-making in society and family with a view to developing appropriate program intervention targeted on them as important agents of change.
3. To investigate the pattern and differential in fertility with respect to a number of socio-cultural determinants and explore differential level of family life preference.
4. To understand the power and role of men in family life vis-à-vis those of women, especially in terms of fertility and contraceptive decisions and the status of women in the family and society and how this influence the control they have over their bodies
5. To identify the policy implication of these findings on future demographic decisions in Nigeria.

METHOD OF STUDY

This study was carried out in Ekpoma; (Ekpoma is a growing University town situated in Esan West Local government Area of Edo State). It is the headquarters of Esan West Local government Area of Edo state .The citing of a University 23years ago transformed the town from a rural agrarian community to an urban cosmopolitan community. The choice of Ekpoma as a reference for this study is because of it's dual status of an urban town and it's reminiscence of rural setting.

The whole idea was to find out if behaviour and thought patterns have changed over the years due to the influence of education, mainly occasioned by the presence of the University.

Our survey and sampling was household based. Seven hundred households were randomly selected. All our respondents were married females. Our final population of study, though randomly selected had some elements of purposive sampling. There was a large concentration on the educated population, because of the initial presumption that education could influence a change in thought pattern, status of women, sex preference, decision-making and fertility control in Nigeria.

The questionnaire and focus group discussion were used to elicit information from the respondents. The focus group discussion was conducted strictly for different categories of women to seek their separate views on these issues .In this case, four focus group discussion sessions were held , distinguished by age and level of education.

RESULTS

The researchers sampled 700 respondents for this work though only 684 were properly completed. However a larger proportion of educated respondents were sampled to find out if the level of education has any influence on the variables under study. This accounted for why 51.2% of the respondents were people with university education or its equivalent. While about 19% are on the average educationally, 22.7% have not less than primary school education .Only 7.6% had no formal education and they were the older respondents (see Table 1).

Table 1: Percentage distribution of respondents by educational attainment

<i>Educational attainment</i>	<i>Frequency</i>	<i>Percentage</i>
Degree/HND	350	51.16
NCE/OND	127	18.50
WASC/GCE	84	12.28
Primary	71	10.38
No Schooling	52	7.60
Total	684	100.00

It was found that irrespective of the level of education, traditional pattern of thought still predominates. This is evident in the fact that 89.5% of the respondents still preferred male to female children. In addition, almost 5% have preference for female children while 5.5% expressed no choice (see Table 2).

Table 2: Percentage distribution of respondents by sex preference.

<i>Sex preference</i>	<i>Frequency</i>	<i>Percentage</i>
Male	612	89.47
Female	34	4.97
No preference	38	5.56
Total	684	100.00

Some of the reasons given for male preference is the traditional inheritance pattern which has no room for female children coupled with the fact

that women change their names at marriage and a family without a male child will not have anyone to bear the family name. The few who value female children argued that they have observed that female children care for their parents especially if they married prosperous men than children. Others already have children who are all males and wish to have females.

One of the responses from focus group discussion session summarizes the views on male preference. The 32-year-old married graduate concludes that;

“In our culture, every one values sons. At least a boy in the midst of many girls is not bad. If all are boys, most women still pray for girls .If you have many children and no boy , you do not feel secured. In fact as a woman,you are not the owner of the house even if you are the only wife”

The sum total of this is that sex preference is responsible for the low status of women in the community of study.

On family decisions, 65% of the respondents are of the view that the man stands out as the traditional head of the home and therefore the decision maker including reproductive decisions. Some times important issues are never discussed with wives. Even when discussed, the man still takes final decision.

Table 3: Decision making factor in relation to family size.

<i>Response pattern</i>	<i>Frequency</i>	<i>Percentage</i>
Man only	422	65.13
Woman only	31	4.78
Both	195	30.09
Total	648	100.00

From Table 3, only 5% of the respondents accept that women take family decisions .This group of people are the highly educated respondents who argue that men should not be left alone to take all decisions .As many as 30% of the respondents insist that as couples, both ought to discuss important issues in the home before decisions are taken .Some of these issues are number of children , when to or when not to use contraception and other family matters.

On what determines family size, majority of the respondents, about 94% insist on the sex of the children as the main factor. Only 4% believe economic consideration is still the factor responsible for the size of the family (see Table 4).

Table 4: Determinant of family size

<i>Family size</i>	<i>Frequency</i>	<i>Percentage</i>
Economic consideration	30	4.39
Sex of children	646	94.44
Both in equal val	8	1.17
Total	684	100.00

The low status of women is responsible for the preference for male children. This in turn affects family decision including reproductive decision-making and fertility in Nigeria.

DISSCUSSION

This finding conforms to the existing literature (Lei, 1991; Oreland, 1983; Arnold and Kuo, 1984) on the status of women / the girl child in our societies. Lei (1991) in a survey in Vietnam, discovered that families need at least one son and would continue child bearing until a son is born. The majority of the respondents in the same study insist that each family should have at least two sons to ensure that one of them will survive to adulthood. Among some of the possible explanations for the existence of son preference are:

1. Parents are typically supported in their old age by son(s), whereas girls usually move away from their families hence a son is more desirable as an investment and “the traditional idea that a boy belongs to us and a daughter to someone else” has become wide spread (Hiebert, 1993).
2. The other explanation is that sons are needed to maintain the family line. This definitely has implication for fertility. If families desire one or more sons, then they may have larger families than would otherwise have been the case, and this would create, according to Rahman and Davanzo (1993), “a significant barriers to further fertility decline” in many countries.

Although reliable and comprehensive data are still very scanty in most African countries, evidence abound to show that the preference for a particular sex among couples (especially male child) is prevalent and has been found to have contributed immensely to large family size being experienced in most developing countries. The value traditionally placed on a particular sex is higher for one sex than the other. This according to Ahmed (1984) was the reason for the low status accorded to the female relative to the males in

some cultures of the world. The male is seen as the only legitimate future successor to the family (retention of family name) whereas; the role of the female is to be seen as no more than a productive mother and housekeeper.

In the same vein, Arnold and Kuo (1984) in their study of sex preference in seven Asian countries observed that cultural traditions and random biological process, rather than the general levels of development determine sex preferences. The effect of sex preference in fertility behaviour was observed by Oreland (1983) in his world fertility survey, that preference for a particular sex sustains higher level of childbearing than would be the case if parents were indifferent to the sex of their children. He also observed that couples continue to bear children beyond their overall desired family size in order to achieve some favoured sex.

Isiugo-Abanihe (2003) revealed that preference for male child is strong and widespread in Nigeria. The reason for son preference vary “from concern over successorship which is influenced by exogamous and virilocal patterns of marriage, to the persistent belief in the breadwinner system, inheritance rights, and the coarse utilitarian needs for manual labour on the farms”. He observed that most of the participants (males and females) in the focus group discussion (FGD's) conducted agreed that both male and female children are important in their own right because of the different roles they perform. Though the participants emphasized the need for a balance between sons and daughters, the necessity of having somebody to carry on the family name compel parents to prefer sons to daughters. The seriousness of having a son is stressed in all the country especially among the Ibo culture, which holds having a male child very supreme. It is not surprising therefore that parent invest more in male children more than on daughters. The main arrangement for this according to him is that “investment on a daughter is lost once she marries but investment on a son is permanent in the family”.

The “Preference for sons on grounds of their economic role indicates that the current generation of spouses is poised to perpetuating the bread winner system and to recycle sexual inequality, their level of education and enlightenment notwithstanding. It emerges from this that sex preference holds important implication for political and economic culture, not

necessarily because sons are born according to the preference. The preference for one sex over another suggest the existence of numerous other tendencies and these may negatively affect the environment within which we could promote male responsibility in family life decisions” – (Isiugo-Abanihe, 2003). This attitude also has very serious implications for women empowerment programmes of action, especially when women are the vessels used during socialization process to perpetuate this ideology.

CONCLUSION

It has been suggested that the pathways of influence from women's increased autonomy to their fertility and childcare behaviour may be both direct and indirect. Empowering experiences that change women's perception of self-worth and well being, affect women's dependence on men and their ability to make decisions. These impact flow back into the hierarchical social structure through women's existing relationships with men and “powerful” women. They also exert influence indirectly to reduce gender inequalities in prestige, control over resources and decision making power”. such changes in turn affect fertility behaviour by enhancing women's ability to take their own need for health and well being into account.

It is worthy of note that if women are to implement their reproductive preference, then it is essential that their empowerment occurs not only within their personal spheres but also in a broader sphere of the community and the state. This is why Dixon Muller (1993), argues that the promotion of policies that encourages contraceptive use and smaller families are futile, if not accompanied by the eradication of legal, social and economic constraints on women.

IMPLICATIONS OF STUDY

Since the mid-1980, women empowerment has become very popular in the field of development. In policy debate and grass root programme, empowerment has virtually replaced such term as poverty alleviation, welfare and community participation in describing the goal of development and intervention (Batliwala, 1994). The fact that the word “empowerment” has become so common does not mean that people are really sure what women empowerment implies

in relation to social, political and economic discourse. Women empowerment is important to the demographer on one hand, because it has some implication for women reproductive rights. For the social scientist in general and sociologist in particular because of the unique and important position they occupy in the structure and the role they play in the socialization process. Anand, (1994) noted that demographers have started to examine the interconnection among the exercise of human right (such as right to work, to acquire an education and to enjoy freedom of movement), women's perception of their own well-being and self-efficacy and a broad range of reproductive decisions. Such efforts tend to assess the role of women's autonomy in decision-making and have considered the resources needed to alter or circumvent restrictions on their autonomy at many cultural and institutional levels. This is why according to Mahmud and Johnson (1994), research policy debate and action programmes are beginning to recognize the centrality of gender based power relationships in influencing the decision making process by which reproduction is determined.

It has been established that women have a role to play in achieving success with population policies. We have observed that one useful means by which population policies which are not only ethnically sound but reinforce human development can translate into programme strategies, is by empowering women. The existing attitudes, cultural and religious beliefs about sex, reproduction and women's right to protect them constitute serious obstacles to women empowerment. It also limits her ability to control and participate in decision-making with regards to the determination of fertility behaviour. This informs the opinion that for women to control their reproduction, they must first achieve social status and dignity, to manage their own health, sexuality and to exercise their basic rights in society and in partnerships with men.

In the light of the above conclusions, promotion of women's empowerment (in concept, language and practice) can help bridge the distance between women's rights, increasingly used in policy statements and the actual implementation of popular policies that continues to emphasize contraceptive services. This is important because women empowerment requires changes in male power and dominance. An empowerment approach would increase policy

programme alteration to male responsibility for their fertility, disease transmission and childcare.

For women to be empowered, they must first have autonomy. Equality of autonomy between men and women is seen as "equal decision making ability with regards to personal affairs". The gap between status and autonomy is evident in the fact that although women may rise to a higher status level either as producers, producers of labour, as mother-in-law or in other social roles, their subordination to men may not necessarily be reduced (Safilio-Rothschild, 1982).

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