

SCHOOL OF POSTGRADUATE STUDIES
UNIVERSITY OF LAGOS

CERTIFICATION

THIS IS TO CERTIFY THAT THE THESIS -
FACTORS IN THE PERSISTENCE OF HIGH FERTILITY AMONG THE
YORUBA: A CASE STUDY OF IWO LOCAL GOVERNMENT AREA OF
OYO STATE

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IN THE DEPARTMENT OF
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FACTORS IN THE PERSISTENCE OF HIGH FERTILITY
AMONG THE YORUBA: A CASE STUDY OF
TWO LOCAL GOVERNMENT AREA OF
OYO STATE

BY

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DEDICATION

This Thesis is dedicated to my children

· Oluwaseyi Raimi

Gbolagunte Raimi

Bukola Raimi

ABSTRACT

Past and recent studies have found the level of fertility among the Yoruba to be very high and stable. Attempts to explain why this is so have, however, not been satisfactory. This study has therefore attempted to provide an answer to this problem using Iwo local government area as a case.

The study reveals that the level of fertility in Iwo local government is very high despite the fact that a significant proportion of the women interviewed had ever used family planning methods, and, in fact, some were using these methods as of the time of the interview. The current fertility data cumulate to about 5.7 children per woman by age 49 and the retrospective fertility estimates cumulate to about 6.3 by age 50.

We attempted to relate the fertility of the respondents to their socio-economic characteristics and we found that the average number of children ever born to women aged 50 years and above is not less than 5 per woman in any of the groups excluding the probability that the number of children born alive have not been stated, especially by these old women who began child bearing some thirty to thirty-five years before the survey. This indicates that the completed family size of Iwo local government women is probably more than 5 children per woman irrespective of their socio-economic status. Analysis of current fertility did not also show any significant differences among groups. For instance, there was no significant difference between urban fertility (5.7 per woman) and rural fertility (5.6 per woman). We also found in the study that about 85

percent of women in parity 6 still desired more children while about three fifths of women with 8 living children desired more children irrespective of their level of education. This study reveals that the combination of male dominance and the lack of communication between husband and wife on the issue of child-bearing have contributed significantly to the "large family ideal culture" of the population. Women in Iwo local government also preferred to have many children because of the social and psychological satisfactions they derived from having many children. According to the women, children (especially male ones) perpetuate the family name. Extended family obligations and the belief that the basic function of the women is to bear as many children as are biologically possible are also factors revealed by this study as contributing significantly to the high fertility of the Yoruba. For example, women in Iwo local government area mentioned reasons other than economic reasons for preferring large families. Such reasons frequently mentioned include: "To honour me at death" (13.2 percent) "To inherit my property" (15.2 percent) "To continue my lineage" (15.6 percent) "To abide by the wish of extended family members (6.8 percent) "Children are good in themselves" (9.6 percent) "It is the wish of God that everybody should have plenty of children" (6.6 percent). Overall, it is these well-integrated cultural norms about childbearing and their internalization from childhood that help to sustain high fertility among the Yoruba regardless of their socio-economic status. The persistence of these cultural norms will continue to sustain fertility at a high level.

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In an undertaking of this kind, one shares much of the labour and interest for a long period with the field workers. As such I could not forget the part played by my interviewers most of whom were drawn from parts II and III students of Social Sciences, 1975/86 set. To them and in particular to Mr. Bayo Olayinka, the President of Social Studies Students' Association, Oyo State College of Education, Ila-Orangun who led the team, I express my gratitude.

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CHAPTER ONE

INTRODUCTION

1.1 YORUBA SOCIAL ORGANISATION

Yorubaland lies to the west of the River Niger. To the West is Benin Republic and to the North is the Bight of Benin. It is roughly between latitudes 6° and 9° North and longitudes 2° 30' and 6° 30' East.

According to Fadipe (1970), Yorubaland is peopled by the Egba, Egbado, the Awori of the Ilaro division of Abeokuta province, the Ijesa of Oyo and Ilorin princes, the Ife and Ijesa Of Oyo province, the Ondo the Idoko, Ikale and Ilaje of Ondo Province, the various small groups of related people collectively known as the Ekiti; the most important of which are the people of Otun, Ado, Ikole and Efon, the Yagba and the Igbomina of Ilorin and Kabba Provinces. However, the Yoruba like any other tribe in Nigeria, have been affected by the present political arrangement in the country as the Yoruba are now mainly found in Oyo, Ondo, Ogun, and some parts of Kwara and Bendel States.

All these people speak a language known as Yoruba which belongs to the Sudanic family and as they had split before the establishment of British rule into as many groups as there are today, the question has been raised as to whether the word Yoruba does not, in fact, refer to a linguistic, rather than an ethnic or cultural group.

According to Johnson (1921), the Yoruba are said to have sprung from Lamurudu one of the Kings of Mecca, whose

offsprings were Oduduwa-the ancestor of the Yoruba, the Kings of Gogobiri and of the Kukawa, two tribes in the Hausa Provinces.

Fadipe (1970), however, claimed that all Yoruba believe that they descended from one ancestor Oduduwa. This Oduduwa myth is so strong that Yoruba Obas believe that there existed kinship relationship among them in the past. All Yoruba today claim Ile-Ife as their place of origin and believe that it is from Ile-Ife that other groups migrated in good numbers to many parts of the present Yorubaland.

In the pre-colonial era, Yorubaland comprised a large number of kingdoms the capitals of which were often towns of a substantial size (Bascom, 1955-1975). The act of living together which is a common feature among the Yoruba today had started even in pre-colonial time. Olusanya (1966) in his study of rural-urban fertility differential in Western Nigeria, remarked that about a quarter of the population of Western Nigeria the home of the Yoruba were living in towns of 100,000 people or more in 1963

Lloyd (1967) also identified a characteristic that is common to Yoruba cities. He said that the basic elements in traditional Yoruba cities are the twin institutions of the ruler's palace and the central market. In nearly all cases their location is central within the city and they are usually adjacent. Lloyd also went further to say that the traditional Yoruba urban society was made up broadly of four classes - the farmers, the traders, the artisans and the rulers. The farmers were easily the most numerous but they were quite

often an undifferentiated mass. The craftsman tended to be relatively fewer though their absolute number was larger than is often realised. Lloyd (1967) noted that if one were to consider the number of people required to make and repair the hoes and other impliments needed by farmers, to weave the cloth for the older members of the community, to construct the houses and fashion the wood, to make leather and beaded articles for the rich, to carve door posts, decorative calabashes, and the various objects of religious worship, to smelt and make brass and bronze objects, it would be found that artisans formed a considerable proportion of the population of most traditional Yoruba cities.

By the late 19th century, they were no longer important in the community. This can be ascribed to the gradual undermining of their trade by the penetration of cheaper and better manufactured equivalents from Europe.

According to Johnson (1921) a remarkable development among the Yoruba is the idea of kingship. There were two categories of rulers, the Oba who based their claims to wear the beaded crowns on their descent from Oduduwa and the baale, heads of the subordinate villages or towns under the political authority of an Oba. The Oba or baale was helped in governance by a council of chiefs who advised him on policy matters. These chiefs were also the king-makers and in the case of Oyo they could depose the king.

The wide extent of the empire possibly led to the development of the detailed palace administration it had. The Ilari were palace servants who supervised both the rituals

within the palace and the administration of the kingdom. The Alaafin was secluded in his palace and relied on the Ilari for important traditional ceremonies.

Another important organ of government was the Oyo Mesi, the seven prominent chiefs in Oyo who decided succession to the throne. They also had the power to remove an unpopular ruler.

The elaborate palace administration found in Oyo also existed to a lesser extent in Ijebu-Ode where the Awujale had a large number of palace servants called the Odi. The Owa of Ilesa and the Ooni of Ife also had some detailed palace administration while kingship forms in Ekiti, Owo and Lagos show evidence of Bini influence. In essence, the palace was the cultural, political and economic centre of every Yoruba kingdom. Since the Oba was regarded as the link between the present and the past, almost all traditional ritual activities began or ended within the walls of the palace.

The Oba was also the political head of the kingdom and all orders of government emanated from the palace. The Oba was also the economic hub of the kingdom. He received annual tributes of food-stuffs and money from his subjects. Some of the traditional ceremonies that had to be performed were linked with aspects of the economy, for instance, agriculture. The most important market in the town or kingdom was often located in front of the palace.

The lineage formed a very important institution in Yoruba political and social organisation. The unit of social organisation was the family and that of political organisation

was the lineage. Members of a lineage were drawn from all men and women who claimed to be descended from common ancestor. In Ekiti and Oyo, emphasis is laid on links through the male line, while among the Awori, Ijebu and Ondo, such connections may be through the male or female line or both.

The youths performed public tasks and formed the bulk of the army. To have a constant supply of able-bodied men to the army, more children, especially male ones, are desired and actually produced by each family. The older men assisted the chiefs in the governance of the town while in some cases chiefs were appointed from among them.

Johnson (1921) also noted that government was absolute, but it has been much modified since the kingdoms was divided into what may be called limited monarchies as a result of inter-tribal wars.

Adejuwon (1962) writing on the climate of Yorubaland said that Yorubaland is fairly well watered but the rivers and streams are dependent upon the annual rains; and impassable river in the raining season may become but a dry water course in the dry season. There are a few mountains in the north and west but in the east the prevailing aspects is high ranges of mountains from which that part of Yorubaland derives its names - Ekiti.

Yorubaland generally can be divided into two main vegetational zones - the thick forest and the deciduous forest. The thick forest occupy the southern and eastern portions, the deciduous forest occupy the northern, central and western where the Yoruba are mostly found.

The soil is very rich and suitable for agriculture in which a large majority of the population is engaged. The deciduous area is also entirely pasture land. Minerals apparently do not exist to any appreciable extent, although some-iron-ores which the people work themselves and from which they formerly manufactured all their implements of husbandry and war and articles for domestic use.

The economy of the Yoruba was essentially subsistence agriculture. Farming consisted of the cultivation of yams, cassava, maize etc. by men with the assistance of their wives and sons. The size of the farm of an average Yoruba man depends upon the number of wives and children especially male children he has. In order to increase the size of the farm, more male children would be needed. However this trend has changed in both rural and urban areas of Yorubaland. Yoruba children like the children in other parts of Nigeria attend schools today and they have largely done so since the inception of free primary education in the old Western Region in 1955. Even, the contributions of children to the household farmland before 1955 were still insignificant as Olusanya (1985) put it: "Communal assistance, mutual help (aaro) various forms of land tenure especially share-cropping and the use of hired labour, which are not new among the Yoruba, tend to de-emphasize the role of children as farm hands".

Wives also used to have strips of farm for market gardening. They used to plant peppers, melons, beans etc. Cocoa, kolanut are also grown as cash crops. Vegetables of several kinds are grown.

In addition to agriculture, the Yoruba practise some other occupations like trading and crafts work. Men and women apart from working on farms involve themselves in some specialized crafts work like weaving, carving, dying, pot-making, iron smithing, shoe making etc. Some Yoruba occupations are hereditary, for instance drumming, praise singing and iron smithing are hereditary occupations among the Yoruba. Trading is usually dominated by women who used to sell the agricultural products of their husbands, men are primarily found in long distance trade.

Farming and these other occupations are practised with very simple implements. According to Lloyd (1935), not only are the tools simple but the capital outlay on raw materials is low. The craftsmen usually produced their goods to order, the customers paying part of the price in advance.

Until recently, occupational specialization was low among the Yoruba. Most of these other occupations mentioned earlier are performed side by side with farming. However with the introduction of Christian religion and subsequent spread of western education, specialization began. Some people became teachers others preachers, doctors, nurses, dressmakers, hairdressers etc. Thus the Yoruba population became more mobile. People began to move from rural to urban centres looking for paid jobs. Thus towns and cities developed more in Yorubaland. The cities have most of the characteristics of the pre-colonial towns. For instance, Yoruba urban centres are not as heterogenous as cities in advanced countries of the world. It was only Lagos that was most heterogenous in

population according to 1952 census than all other cities in Yorubaland and even then more than 70 percent of the people in Lagos then were still Yoruba.

The proportion of people working in occupational groupings also differ between the traditional Yoruba towns and urban towns in more advanced countries. The 1952 census data showed that apart from Ibadan province, all Yoruba had over 40 percent of their population working in the agricultural sector. It was only in Lagos that the proportion working in agriculture was relatively low.

Most Yoruba, according to Bowen (1966), prefer to live in cities and villages all at the same time. They live in villages during the week and in towns at the week ends or when they have any ceremony.

All Yoruba towns tend to have the same physical forms. These forms seemed to have been dictated by the king's superior position. The palace was the point of convergence of all interests. Each quarter was made up of family compounds. All the chiefs of the quarters as well as the heads of compounds look towards the palace..

The result of the spread of education mentioned earlier is the development of commerce and industry in most Yoruba towns. There have been increases in the building of commercial houses, markets, factories, motor parks, roads, railways, schools, colleges, universities, and recreational centres.

1.2 MARRIAGE AND FAMILY FORMATION

For a man or a woman who had reached the age of marriage to remain single is against the more of the Yoruba. Fadipe

(1970), said that Yoruba men got married even when they were sexually impotent in order to save either their own faces or the faces of their immediate relatives, as well as to get someone to look after the domestic establishment. Therefore marriage — is universal and in unsophisticated traditional life, no person remained unmarried by choice after passing, say, the age of thirty in the case of men and twenty five in the case of women. Johnson (1921) also confirmed the age of marriage for both Yoruba men and women when he said that Yoruba men "were seldom married before the age of thirty and the young women not before twenty".

However, this age at marriage for Yoruba men and women has declined in recent years because of the relative ease of obtaining bride price. Olusanya (1969) found that about 70 percent of young women married between 15 and 19 years in the villages of Western Nigeria while only 30 percent of the women aged 40 years and over were married at these ages. Ohadike's data 1968 from a fertility study in the city of Lagos also supported this finding. The implication of this type of early marriage is excessive child bearing other things being equal.

Universality of marriage in Nigeria in general and among the Yoruba in particular was confirmed first by the results obtained in the 1965/66 Rural Demographic sample survey which showed that in Nigeria as a whole, 94 percent of women aged 25 - 29 were married and that in Western Nigeria predominantly occupied by the Yoruba, 97 percent were married. Olusanya (1982) also reported that one out of every ten males in the age group 15 - 19 was married at least once before. Almost 50 percent of the men in age group 20 - 24 had ever married;

by age 34 years 90 percent of them had been married at least once before while virtually every male was married by age 50.

Olusanya also observed in the same study that three-quarters of the females between ages 15 and 19 years had ever married and by age 24 over nine tenths had ever married. Thus marriage among females is restricted within a much narrowed age range than in the case of males and there are virtually no spinsters after the age of 24 years. The Nigerian fertility survey of 1981-82 also reported that almost all the women interviewed had been married by age 25 years (National Population Bureau, 1984). Therefore, the observation of Mayer Fortes about 40 years ago among the Tallensi of Ghana is still true to Nigerians today. Fortes reported that marriage to the Tallensi is "the normal state of life for every adult. They cannot conceive of anyone voluntarily refraining from marriage throughout life. There is something wrong with men and women who never marry; and they are few". (Fortes, 1949).

The gratification of sexual desire except in a state of wedlock was also against the mores of the Yoruba. Also to have children especially sons, as well as the desire for a helpmate in the household and the family economy were responsible for the fact that practically every individual male of the age of marriage sooner or later get married.

Marriage among the Yoruba involved the payment of the bride price by the parents of the bride-groom to the bride's parent. This bride price used to be in form of money (cowries)

or services or sometimes both. The payment of bride price, some scholars argue, used to delay marriages at least for some years after puberty among the Yoruba.

Payment of bride price as a condition for marriage is declining among the Yoruba especially among the Muslims and educated elites. Gbadamosi (1978) writing in Islam and Yoruba society said that a girl could enter into the household of the husband without the payment of the bride price or even the rendering of any service. He said, "This was particularly common in Muslim communities, but this, however, should also be done with the knowledge of her parents."

The Yoruba also practised widow inheritance because to them, the relationship established by marriage between two families should continue even after the husband's death. The practice in this regard was to allow the relationship between the two families continue. Fadipe (1970) found that widow inheritance levirate form of marriage is very common among the Yoruba. With this practice, the number of children per woman that should have been lost because of the death of the husband is considerably reduced.

In the context of marriage especially in the Yoruba traditional society, the man is recognised as the one who marries the woman, and therefore father of all offspring of the marital union. In this context the decision to have or not to have children is his, and invariably his decision is usually in favour of having children, as more and more children further enhance his status as a man in the society. Among the traditional Yoruba people, a man's social standing depends on

the number of children especially sons, he has. Since there appears to be no biological limit to the number of children a man can have, some males keep having children even to old age. There are some Yoruba men in their eighties and beyond, who still give birth to young children who may be much younger than some of their great-grand children.

The authority relations that derives from the social structure of traditional Yoruba society is that of patriarchy. Ottong (1985) for instance said that from the basic primary unit of the family to the level of the society, authority is wielded by the male. Patriachal authority relations in the family are very pervasive among the Yoruba, such that in many homes a son could assume "control" of the family in the father's absence. And, on the death of the father one of the sons, usually the eldest is by custom and tradition expected to assume paternal rights over the family, thus bringing his brothers and sisters, as well as his mother and his father's other wives, under his authority. The important position of the male in Yoruba society places him in a paramount position in the authority structure and decision-making process of the family.

In all Yoruba societies men are regarded with considerable pride. Thus, both men and women look at the male children as a highly prized treasure, and a family or couple without at least a son feels insecure. To parents; children, especially sons are desired for continuity of the famil line, and for inheritance and security of the family property or estate. Besides, children as offspring of marital unions provide a

... very important source of self-fulfilment to the parents but that fulfillment is incomplete without at least a male child among the offspring.

----- The pride of place generally accorded the male among the Yoruba, has in some instances resulted in couples having more than desired family size, in the quest for at least a son among their children. Because of the importance of and the expectations placed on sons, male children are right from infancy made to play roles that are characteristically regarded as superior to those of the females. It is against the background of cultural beliefs, practices and decision as that affecting family size can be placed.

----- The extended family system was an important feature among the Yoruba. The large extended family comprising the parents, their married sons and their wives and children as well as their unmarried ones lived together in the same building or the same compound as a single family. Fadipe (1970) writing on the Yoruba family system said "Whether a family be polygynous or monogamous, wife, husband and children are found under one roof, i.e. in the compounds of the husband's extended family. Each wife is allotted a room. The husband generally has a room, while the children sleep either with their mothers, if of tender age or female or in the veranda".

A son in marriage, might continue to live in the same house with his parents if there was sufficient space or move out to build his own separate house provided he could afford it and start building a family. He would also be given a portion of land for agricultural purpose and thus became the head of a separate economic unit.

As a rule, all the members of a compound except women who were admitted into it by marriage were related to one another on the father's side. As mentioned earlier, children belonged to the father's lineage. The members of the family were generally related to one another as brothers and sisters, as uncles, nephews and nieces and as first or second cousins.

We also mentioned earlier that in the past, all decisions were made by the head of the family, who happened to be the husband, and sons owed their father total obedience. This pattern is however, changing nowadays as young men prefer to live apart from their father's family. Hence the break-up into smaller household within the same compound.

The head of each household usually settled disputes arising within such household. Cases that could not be treated by the household head would be brought before the head of the family. It is obligatory for the head of the family to arrange and finance all the first marriages of his children. The subsequent marriages could be financed by the children themselves.

Among the Yoruba, the reproductive function of a woman was the concern of the extended family, the lineage and also the community at large. Also spacing of children among the Yoruba family was largely regulated by the traditional norms as part of the family institution under which duration of breast feeding of the new-born, the post-partum taboos, the abstinence from cohabitation on certain specified days and certain other practices were regulated. Thus Talbot (1968), writing on the demographic implication of this custom said "According to the census statistics, the proportion of non-

adults is higher among the Yoruba than among other races, despite the great infant-mortality and the time between births, due to the custom of non-intercourse during the suckling of the child. These influences are, however, perhaps more than counter-balanced by the fact that there are no unmarried women".

As mentioned earlier, children were always welcomed in good numbers into Yoruba families. Talbot (1968) said that the Yoruba have traditionally motivated desire for offsprings Ojo (1967) writing on Yoruba culture commented that "It is hardly necessary to state that the value placed on having many children developed to ensure the survival of the family, clan or tribe in conditions of excessively high infant and childhood mortality. Moreover, in these agricultural societies, the children served not only to replenish labour, but also to extend cultivation". Thus high infant and childhood mortality experienced by many Yoruba families was another factor that led to many children being born into the families.

However, the advancement in educational and technological facilities which are leading to a considerable degree of industrialization and urbanisation are also presently eroding the traditional family institution. Sometimes the breaking of the extended family is due to the children's getting employment outside the home. An educated child may find work in cities like Ibadan or Lagos and so he would have to leave home. This child is unlikely to establish a great compound with many wives and children because of the problem of housing. Since he has to buy most of his food items, he

probably likes to reduce his family size to a manageable proportion.

However, the movement of these young and educated men from their traditional homes does not necessarily mean a permanent separation between them and other members of the family. Those who have moved usually return home especially when there is any ceremony and those staying in big cities like Lagos and Ibadan usually send their children home to be educated. They remit home regularly part of their earnings for the maintenance of the old grandfather and also to pay school fees of their brothers. Mabogunje (1972) note in his book, Regional mobility and Resource Development in West Africa, that "migration does not mean permanent separation between the migrants and their rural kins".

1.3 FERTILITY AMONG THE YORUBA

As would be observed from the above discussion, child-bearing was the essential function of marriage among the patriarchal Yoruba. Studies have been conducted to see whether the process of modernization has any effect on the reproductive performance of Yoruba women. The results of such studies have been nearly similar especially on the level of fertility as almost all showed that Yoruba women have on the average between six and seven children.

Ohadike (1964) reported, for instance, a total fertility of 6.6 per woman for Lagos and also found in 1966 the mean number of children born by uneducated women aged 35 years and over in Lagos to be 6.0 per woman; it was 6.2 per woman for those women who had had primary school education and

6.4 for those who had had secondary education in the same age group.

High fertility among women in Lagos was also indicated by Morgan's results from survey conducted in 1967 - 1968.

He reported a plausible CBR of 59.2 per thousand and a total fertility rate of 7.3 per woman.

Studies done in other parts of Yorubaland have also disclosed a pattern of high fertility. On the basis of data obtained in a 1966 inquiry among 3,316 and 3,217 women respectively for women of all marital conditions. In another study of five villages located within 96 km of Ibadan, Olusanya 1967 reported a CBR of 46.3 per thousand population.

Arowolo (1974) also reported an average of 5.1 births for married and currently employed women in his study of urban working women in Ibadan while Raimi (1975) found the average number of children ever born per women in a Yoruba rural community to be 6.3.

In another study, Raimi (1978) found a considerable high fertility in Iwo where cumulative fertility for women aged 45 and above is 6.7 per woman and the total fertility rate is 6.8 per woman by age 44 and the retrospective fertility estimates cumulate to about 7.1 by age 50.

As far as the fertility trends of the Yoruba are concerned, the fragmentary data available suggest rather an increase than stability or decrease. The Nigeria Fertility Survey of 1981-82 (National Population Bureau, 1984) confirmed the persistently high fertility in Nigeria as a whole and in Southern Nigeria in particular. The survey found a mean

of 5.84 children ever born per woman for the women aged between 45-49, a total fertility rate (all marital conditions) of 6.34 and a total fertility rate (all married women) of 7.48 per woman and a higher mean completed family size in the South than in the North, though fertility at younger ages was appreciably higher in the North. This trend has been officially recognised and expressed in the Second National Development Plan 1970 1974: "Generally speaking, it can be said that Nigeria is going through a demographic transition phase of a rising birth rate and declining death rate, leading to a potentially high rate of population growth".

Table 1.1

Age-Specific Fertility Rates for Some Selected Yoruba Areas and Nigeria

Age	LAGOS a 1968	IFE b 1969	OYO b 1969	IWO c 1979	NIGERIA d 1984
15-19	0.145	0.098	0.070	0.130	0.126
20-24	0.305	0.218	0.276	0.302	0.256
25-29	0.329	0.262	0.264	0.326	0.280
30-34	0.296	0.239	0.213	0.303	0.220
35-39	0.203	0.179	0.131	0.143	0.158
40-44	0.104	0.117	0.058	0.087	0.067
14-49	0.079	0.055	0.042	0.054	0.024
Total Fertility	7.3	5.8	5.3	6.7	5.66

(a) Morgan (1968)

(c) Raimi (1979)

(b) Olusanya (1969)

(d) National Population Bureau (1984)

The above table clearly shows that fertility is persistently high among the Yoruba. Also the two Lagos surveys (Morgan, 1968; Ohadike, 1964) reported so far were done approximately four years apart and based on these surveys one might be tempted to look for a fertility estimate of 6.8, one would hesitate to suggest an upward fertility trend in Lagos over the four-year interval, as the methodology of the two surveys and the corrections applied to the findings undoubtedly different. This upward fertility trend is perhaps true of all other Yoruba areas.

1.4 ARE THERE SOCIO-ECONOMIC DIFFERENTIALS?

An important observation from human reproductive performance is the existence of fertility differentials. These differentials tend to be associated with cultural and socio-economic factors. Many studies have attempted to associate these observed differentials in fertility with the type of residence, modernization variables and religion. Because adequate data for all the Yoruba as a group are difficult to come by, the approach here will be to use evidence from individual Yoruba towns and villages to illustrate observed differentials in fertility.

Persistently high fertility among the Yoruba has been attributed to a complex combination of factors related to the process of industrialization, modernization and economic development. Olusanya (1969) for instance found a positive relationship between fertility and socio-economic status. The study infact shows that fertility level increases with increases with a rise in the level of education. The trend

in the fertility for the educated shows that they built up their families more rapidly than their uneducated counterpart. For instance, the educated wives who married before 1946 had an average of over four children in their 15th year of marriage and their uneducated counterparts had an average of less than three. On the whole, Olusanya suggested that fertility has tended to increase as a result of modernisation.

Ohadike (1966) also found a positive association between education and fertility. He found the mean number of children born by non-educated women aged 35 years and over to be 6.0; and 6.2 for those with primary school education in the same age group and 6.4 for those with secondary school or higher education. These findings were consistent with that of Olusanya's referred to earlier.

In another study, Olusanya (1981) further expatiated on the positive association between fertility and education status. The reasons for this he said are related to a reduction in the incidence of fertility restricting diseases and in the degree of detraditionalism with improved education.

Orubuloye (1979) however established that fertility first rises with education to the primary school level and then falls as educational level increases. Those without formal education had fertility lower than those of women with primary education. The fertility of those with secondary and higher education is lowest.

Another modernization variable used to explain fertility differential among the Yoruba was urbanization. For example

Olusanya (1969) found that fertility level was positively correlated with the degree of urbanization. He noted that fertility in rural areas of Western Nigeria was lower than that of the urban areas. This finding was confirmed by Morgan (1968) on the basis of data collected for Lagos. The difference appeared to be very marked; the total fertility rate for Lagos stood at 7.3 per woman, a high level by African standards, whereas the corresponding figures for more traditional towns and rural areas varied between 5.3 and 5.8.

In a later article Olusanya in 1969, further confirmed the higher urban than rural fertility. He used an analytical technique which enabled him to compare the fertility rates of different cohorts of women at specific durations. His results show an evidence of the positive association of fertility with urbanization and education. He found in both rural and urban areas that older marriage cohort had lower average number of children ever born than the more recent cohorts. He attributed this to the fact that the younger cohorts were doing away with the traditional taboo of long post-partum sexual abstinence, and yet were not using family planning methods. Another reason he gave was increased standard of living, leading to reduction in pregnancy wastage and infertility (Olusanya, 1969).

However, one explanation given by scholars deal with the question of reliability of the data. We are indeed dealing with a problem that requires extremely careful field work. Asking certain questions such as a woman's age or the

number of children she has had directly may violate cultural conventions. Moreover, many of the women do not know exactly how old they were when they were married or the dates of birth of their children. Since educational levels are probably higher in urban (and since child mortality is lower) one might expect urban women to omit proportionately fewer births when questioned about their children. This to some extent can explain the reported differential fertility between rural areas of Yorubaland.

Another explanation given by authors is the break-down of the traditional African pattern of child spacing which is based either on prolonged lactation alone or quite frequently on a combination of prolonged lactation and post-partum abstinence. The breakdown can be caused by a number of factors most of which seem to be associated with Westernization of life styles and modes of production. Olusanya (1969) as mentioned earlier suggested this hypothesis based on his own personal observation. He then summarized reasons for the persistent high fertility among the Yoruba thus:

1. Improved school education and association with modern medicine act together to weaken the traditional lactation taboo, thus decreasing the interval between pregnancies per woman.
2. Improved public health measures such as malaria control and environmental sanitation, have been shown to produce not only a reduction in infant and maternal mortality but also an actual increase in fertility per woman.

3. The prevalence of certain diseases as well as generalised gross inadequacy of medical services, may produce infertility in some women. However, improved medical facilities as well as a rising standard of living may act together to reverse these tendencies.
4. To quote Olusanya, "With the diffusion of middle class culture to the lower class, both educated and uneducated mothers have increasingly resorted to bottle feeding so that the belief in the relationships between sex, mother's milk and the child's illness or death no longer hold". This, also leads to a decline in the lactation taboo and shorter pregnancy intervals.

Further evidence that this increase in fertility is related to the progressive modernization and urbanization processes at work among the Yoruba today is derived from the observed consistent increases in mean live births from the oldest to the most recent cohort examined by Olusanya.

Morgan (1974) added yet another point that improved socio-economic and socio-medical status produce initially at least, the awareness that a family can raise and support more children.

Religion was also used to explain fertility differential among the Yoruba. Ohadike (1966) for example, on the basis of his Lagos data, concluded that Moslem and traditional worshippers, with an average of 4.2 children ever born appeared to be some 10.5 percent more fertile than Christians with an average of 3.8. , Catholics were slightly lower than Protestants and far lower than Moslems.

Occupationally, wage employment has been associated with high fertility among the Yoruba. Arowolo (1974) for instance found in his fertility study of urban Yoruba working women, 'that unemployed Yoruba working women and all those in home-related services at almost every age-group show lower average children ever born than those in gainful occupations. Unemployed women of completed fertility reported an average number of children ever born of 4.2 compared with 5.1 for those currently employed. This means that working outside the home as in wage employment has positive relationship with fertility among the Yoruba. Olusanya (1981) however reported that female employment has a decidedly lowering effect on the level of fertility. In his Surulere sample, the averages for the employee category are one to two live births lower than the averages for either the self employed or the housewife category. While fertility is also lower for the employees than the other categories in Yaba/Ebute-Meta, the differentials here are less pronounced than in the Surulere group. In the non-employee categories, however, it seems that the averages for the Yaba/Ebute-Meta groups are lower than those of the Surulere groups. The position remains unchanged when date of marriage rather than age is used which indicates that employment status is so powerful an influence that the elimination of differences in marriage duration has little or no effect on the result.

Ohadike (1966) also found that household accommodation and expenditure showed positive association with fertility in that the larger the accommodation or the higher the

expenditure, the higher generally was the number of children born. Such relationship arose possibly from the fact that the size of households (including the children) also bore a positive relationship to and therefore influences greatly the living space occupied and the monthly expenditure.

At this point, we should point to the fact that as far as we know, the differences in fertility among the Yoruba arise from socio-cultural rather than biological differences. In other words, there is no convincing evidence that the physiological capacity to reproduce differs significantly among the Yoruba. Secondly most of the socio-economic variables observed were positively associated with fertility among the Yoruba. This is contrary to what is happening in most developed societies of the world.

1.5 FAMILY PLANNING

The idea of birth control is probably not new among the Yoruba. What is probably new is the idea of restricting fertility to achieve a certain predetermined family size (i.e. family planning). As Olusanya 1969 put it, "To the Yoruba the idea of birth control is not foreign but as in many societies at the same level of development, the restriction on reproduction among the Yoruba is traditionally not regarded as a means of achieving a pre-meditated size of family or the spacing of births for economic reasons, but is closely linked with their belief system"

A series of studies has been conducted to find out first of all what the Yoruba themselves feel about family planning. Ohadike (1966) for instance investigated fertility and family

size attitudes in Lagos. About as many respondents (48 percent) approved whole-heartedly of the idea of having many children as there were those (47 percent) who rejected the idea.

Perhaps more significant is the fact that the degree of acceptors increased with rising socio-economic status; the younger and more educated the respondents, the higher was the proportion of acceptors. Thus 67 percent of wives who had secondary education or more 61 percent of those with primary/modern/Arabic school only and only 32 percent of those without education fell in the category of acceptors.

It was also found that 64 percent of the reasons given for disapproving of a large family emphasised the social and economic problems of raising the children. There were respondents (51 percent) who say nothing good in having many children, and there were, of course, others (11 percent) who held the contrary view.

Morgan (1969) made a similar study in Lagos. He found that 45 percent of his sample had ever practised contraception. He also found that education including a few years of primary schooling only, was positively related with clinic attendance and that no schooling was negatively related. He observed that increase in level of education of the patients did not necessarily increase their attendance. Another observed characteristics of the attendants was the number of children per woman. Women with four children and above were "over represented" at the clinics while those with less than four

were under-represented". This latter observation of Morgan agrees with Ohadike's result that what the university graduates and professionals consider to be the minimum number of children in Nigeria is four or five before thinking of accepting birth control.

After a study of two adjacent suburban areas in Ibadan, Olusanya (1966) noted that educated wives tended to have larger families. His further studies in 1971 in Ife and Oyo showed that although educated women were critical of excessive child-bearing, their fertility was as high as that of their uneducated counterparts.

Okediji (1968) studied currently married women in three areas of Ibadan to compare fertility and use of contraception with socio-economic indicators. He found that only 23 percent of his sample had ever used contraception and he concluded that attitudes towards family planning and the use of contraceptives to limit or space children was positively related with socio-economic status.

Caldwell and Igun (1969) planned and carried out a sample survey, designed to show the geographical and chronological spread of antinatal knowledge and practice. Their findings showed that 12.5 percent had ever practised contraception in Lagos; this can be compared with Morgan's findings of 1969 of 45 percent. For Ibadan females it was 16 percent and can be compared with Okediji's figure of 23 percent. These findings on knowledge of contraception in Lagos were in line with Morgan's findings there, while those for Ife and Ibadan are somewhat higher than would be expected

from Olusanya's 1966 work unless change had been very rapid.

Frank Mott (1974) conducted a survey on aspirations and attitudes of University of Lagos undergraduates. He noted that the average male under-graduate was about 26 years old and not yet married. He went further to say that while very few of the students had any children then, they planned to have an average of about 5.6 children with about two-thirds to be males. Three-quarters of the men approved of the use of family planning methods in marriage. Indeed if the health of the mother or child was at stake, a majority of the male students even approved of abortion.

Raimi (1975) found in his study of the attitudes of the members of a Yoruba rural community to family planning that about 2 out of every five women interviewed had knowledge of family planning and that a significant proportion of those with knowledge (51.3 percent) heard about family planning for the first time from family planning field workers of Iwo General Hospital. In the same study about a third of the women interviewed approved the use of contraception in marriage but only 6.1 percent of the sample claimed to have ever used contraception.

In another 'KAP' study conducted by Raimi (1978) in a Yoruba city, he found that 54.6 percent had knowledge of family planning, 50.6 percent had ever practised contraceptives. He noted that KAP variable increase with increase in education and that Christians practised contraceptives more than Moslems. The most significant finding of the study is that family planning clients had more children on the average than non-clients..

The Nigerian Fertility survey 1981 - 82 referred to earlier (National Population Bureau 1984) showed on the whole that 66 percent of the women interviewed had heard of no method of family planning and 85 percent had used no method. However, a significant proportion of women with secondary or higher education, about 70 -percent had heard of any method and there are clear differences between educational categories. The South, the home of the Yoruba is ahead of the North in terms of knowledge and actual use of family planning.

There are also educational differentials in terms of the actual use of contraception. About 42 percent of the women with secondary or higher education compared to 25 percent with primary and 10 percent with no education had used a method. Although significant proportions had heard of some efficient methods such as the pill, I.U.D. and injection intention to use these in future is virtually nil.

Olusanya (1981) also reported that in terms of knowledge of methods of family planning, the women in Surulere are not only much more informed on the whole; they are much more so in each educational category than the women in Yaba/Ebute-Meta. On the whole, 89 percent of women in Surulere and 60 percent of women in Yaba/Ebute-Meta have heard of methods of preventing or delaying a pregnancy. However, only 47 percent of women in Surulere and 5 percent of women in Ebute-Meta/Yaba could specify methods heard. On the actual use of family planning, 47 percent of women in Surulere and 7.4 percent of women in Yaba/Ebute-Meta have ever used any family planning method. Also in this respect, the Surulere group are far

better even within the same educational category.

It seems from the above findings by scholars that the knowledge and use of contraceptives is increasing especially among educated Yoruba women. The question now is, "Does this increase in the use of contraceptives have any effect on Yoruba fertility?"

As of now, it seems family planning has been relatively unimportant in shaping family size among the Yoruba. The higher urban fertility than rural fertility despite the fact that the proportion of women using contraceptives is higher in urban than rural areas is a clear indication that contraceptive use is not having an effect yet on Yoruba fertility. Another relevant question that needs to be raised here is 'who are these women using contraceptives and why are they using them, if other than to limit child birth?'

It was observed that a significant proportion of women who had ever used any of the modern methods were mostly the young, educated, city-born wives of protestant origin still in the reproductive age group. For instance Ohadike (1966) found that 50 percent, 17 percent, 3 percent and 1 percent respectively of respondents with University/professional, secondary, school, primary/others and no education; 10 percent of protestants as against 3 percent Catholics and 1 percent Moslems. 7 percent and 2 percent respectively of city-born and non-city born respondents, had used modern methods obtained from chemists or doctors. It was also observed that these educated young women most of whom are in wage employment are attending family planning clinics more than the old and

uneducated women. Incidentally fertility is higher for these young women who are attending family planning clinics than the old and uneducated women who are non-attendants.

From the point of view of future fertility decline it is yet to be demonstrated that contraception can play an important role in fertility reduction. However, a considerable proportion of wives supported the dissemination of birth control methods and expressed the intention of using them in the future. For example, Ohadike (1966) in his study of Lagos, showed that some 49 percent approved of doctors giving information in their clinics, 46 percent would use a contraceptive method if advised by a doctor and 50 percent supported the establishment of clinics for purposes of family planning in the country.

Wane (1976) argues that the conventional assumption in the family planning literature that birth control in developing nations is first accepted mainly by those who have achieved their desired family size and want no more children is not applicable in the Nigerian context. On the contrary, her analysis, based on a sample of 6,606 Yoruba women suggests that within marriage, spacing is the most prominent motivation for contraceptive practice, more important than the limitation.

Caldwell (1977b, 1978) in his study of Ibadan found that past and present contraceptive users were one-fifth and one-quarter respectively more fertile than those who had never practised any method of fertility control except abstinence.

This pattern in which birth spacing by modern contraception precedes birth limitation, has been documented most clearly in Nigeria Fertility Survey of 1981-82 (National

Population Bureau, 1984). The study reported a clear differential in attitude to, knowledge and practice of family planning by regions and educational groups. The southern women showed clearly more positive attitudes to and in fact practise family planning more than their northern counterparts. However, these southern women whose attitudes seems to be more favourable to family limitation, show a level of fertility clearly higher (in terms of children ever born) than that of the north, while in terms of current fertility, there are no regional differences.

Overall, KAP of family planning has increased with increase in level of education but fertility and desired family size have remained high. This is even so among Yoruba women who use contraceptives.

In spite of these observations great caution should be exercised in accepting most of the fertility and family planning data referred to here for inferences on future fertility trends. This is because the sample sizes of most of the studies are very small. In particular, the group aged 45 years or more are always too few to permit very confident generalizations about possible fertility change. Secondly, many of the women including some of the literate ones do not know exactly how old they were when they married, or dates of birth of their children. Therefore ages were merely guessed and this could distort the observed data.

Some of the KAP studies referred to in this chapter, for example, that of Caldwell and Igun (1969) defined family planning methods to include modern contraceptives only and

that was why their figures were a little depressed when compared with that of Morgan (1969), Olusanya 1966, 1981) and the Nigerian Fertility Survey, 1981-82. In the realm of knowledge of family planning, Olusanya (1969) refers to traditional abstinence as a form of birth control or family planning, and persons born and raised in Nigeria must be familiar with this ancient and prevalent technique. One would therefore expect the levels of knowledge in these studies to be higher than reported.

Despite these shortcomings, one can still make the following generalizations with respect to fertility levels and trends among the Yoruba.

1. Based on the data available, fertility among the Yoruba is persistently high.
2. There are even indications that with the onset of modernization forces, the fertility rate may in the short run at least be rising.
3. The spread of contraceptives among the Yoruba in recent times is not reducing reproductive performance. These coupled with the declining mortality is now leading to an extremely high population growth rate among the Yoruba. The death rate which was 26.9 per 1000 total population in 1965-66 (Federal Office of Statistics, 1968) or 23 per 1000 in 1963 (Olusanya, 1975) has also been estimated to be around 14 per 1000 from the Nigeria Fertility Survey 1981-82 data (Olusanya, 1985).

The population growth rate thus increased from 2.5 percent per year in 1965/66 to over 3.5 percent in recent

years. In fact, if the United Nations estimated birth rate of 55 per 1000 is accepted (UN, 1978) the growth rate becomes even higher.

The high fertility among the Yoruba is producing a population with a large proportion of persons below age fifteen and thus leading to a situation where the number of dependants per worker is very high. The dependency burden creates pressures on the household as well the government to spend currently for consumption rather than save. Both Federal and State Governments are using a significant proportion of their revenue in the provision of educational facilities and maternal health. For instance, education now occupies a highly important place in most plans for socio economic development. In the 1962-68 National Development Plan, education received 10.3 percent of the gross public sector investment, it received 13.5 percent of the total investment in 1970-74 and in 1975-80. Third Development Plan, education received 7.5 percent in the overall plan allocation while it ranked third in the programmes of the states where it has share of 12.0 percent of the overall budget. (Federal Republic of Nigeria, 1980). These educational needs are obviously closely related to population growth. A country with a high birth rate and declining mortality has a youthful population. Under such a demographic situation, an ever-increasing number of pupils will reach school age every year.

The story is not different as for provision of health. There is no doubt that population is growing faster than

available medical facilities. For example, between 1960 and 1965, there was a net addition of 902 doctors to the then rather small number of medical practitioners in the country. During same period (1960-1965) net additions to the population amounted to about 5.6 million. Only 702 doctors were added between 1965 and 1970 and 429 between 1970 and 1972, compared with a net population addition of 6.3 million and 2.8 million respectively (Arowolo, 1981). In 1970 every doctor serviced about 20, 345 population and the corresponding figure for 1972 was 18, 429 to every doctor. However, the situation should have slightly changed especially if we have access to the most current data and even then, a significant proportion of these medical facilities including the doctors are concentrated in urban areas.

As for housing problem, there is no doubt that there are housing problems in almost all Nigerian cities. The absence of a census of housing accommodations in Nigeria make it difficult for us to give a reliable picture of the problems. However, housing problem in Nigeria is essentially urban one. The third National Development Plan 1975-80 commented:

Rapid urban growth associated with accelerated tempo of socio-economic development has seriously aggravated the shortage of dwelling units in Nigeria resulting in overcrowding, high rent, slum and squatter settlements which are visible features of the urban scene throughout the country.

The urban housing problem affects significantly more urban poor than urban rich. In rural areas too, the general poverty of the population is largely responsible for the

sub-standard houses in which they live.

The ensuing concern for providing the urban poor with decent shelter is now high on the public agenda. In fact, the issue has been transferred into a moral question (Fuller and Scott, 1986). In declaring 1987 as International year of shelter for the Homeless (IYSH), the United Nations not only recognises the problem, it also frames it in the correct perspective as a matter of social justice, hence the imperative to secure shelter for all by 2000. In Nigeria, a new National Housing Policy is currently being debated by the public. The 42nd Annual General Meeting of the Association of Housing Corporation of Nigeria which met in Calabar, Cross River State in August, 1987 also discussed the problem of increasing urban housing.

Many governments in Nigeria have embarked on massive housing programmes to combat the serious housing problem.

Other problems created by the excessive population growth include mass exodus of rural dwellers to urban areas to look for unavailable urban jobs, increasing poverty, increasing income inequalities, acute shortage of foodstuffs, hunger, mass unemployment and underemployment etc. Thus, individual household is spending more on food and other materials needed by the households while the government as demonstrated earlier are spending more on the provision of education and health services. These decrease both the private and government savings. The lower rate of savings in turn keep down investment and consequently capital formation becomes very low. It is this low capital formation

that is creating problems of poverty, unemployment and under-employment among the Yoruba.

These social and economic consequences of the rapid population growth is generating great concern among the Yoruba as a group and Nigeria as a country. This is evident from the various development plans of Nigeria since 1970 when Nigeria has continued to support the family planning programmes governmental and non-governmental organizations as part of health programmes with due regard to the human rights component but without any official policy of reducing birth rates or the rate of population growth through family planning programmes.

It is note-worthy that the second National Development Plan, 1970-1974 observed the upward trend in the rate of population growth arising from increasing birth rate and declining death rate. It also recognised that this condition was accompanied by low per capita income, young age structure and high dependency ratio. Despite these problems, the plan optimistically asserted that:

the magnitude of the country's population problem is unlikely to be such that calls for extensive emergency or panic action. Given the promising resource base of the economy, the country can, through careful planning, succeed in buying time to ward off undue population pressure.

This position was further maintained in the Third National Development Plan 1975-80. According to the Plan,

The country is fortunate in possessing a large land area well endowed with natural resources, which if carefully

exploited should provide a basis for building a viable economy which ensure a steadily rising standard of living for the population within the foreseeable future .. Emphasis of policy is therefore being deliberately placed on accelerating the rate of growth of the economy rather than on direct action to achieve a drastic or immediate reduction in the overall birth rate. It is believed that the high tempo of social and economic development will itself help to accentuate the forces, already at work, which will tend to bring down the birth rate in the long run (emphasis ours)

Based on this optimistic stance, the Plan decided on continuing the programme of "integrating the various voluntary family planning schemes into an overall health and social welfare programme of the country ..."

It is, however, reassuring that, for whatever it is worth, the Military administration of Buhari in 1984 gave the Federal Ministry of Health the assignment of producing a national policy on population for development. The rationale for an official population policy as stated in the Draft Document (Federal Republic of Nigeria, 1985: 1) is that,

the worldwide economic recession of the 1980s combined with the nation's rapid growth of the population tend to frustrate further improvements in the standard of living.

The general format of the Draft National Population policy for Nigeria is in accordance with the World Population plan of Action agreed upon at Bucharest in 1974. The proposed 4 children to one woman by the Federal Military government, even if it can be well executed will only reduce the population problem by a small margin as 4 children per woman will still

result into about 2 percent annual growth of population. And it is doubtful if Nigeria can have a 2 percent annual increase in her economic resources.

On the whole, as we have repeatedly mentioned in this chapter, the fertility among the Yoruba in particular and in Nigeria in general is extremely high and government policies reviewed above lent support to this view. However, the explanation for the persistently high fertility among the Yoruba is not clear as already mentioned. Therefore the objective of the present study is to examine more closely using data from a small group of Yoruba, the inhabitants of Iwo Local Government area. We propose to study the fertility level and patterns of Iwo Local Government area in great detail. As a concrete case of all other Yoruba groups, such a detailed study will enable us answer the questions that have been left unanswered in previous fertility studies. Such questions include the following: Why is fertility still very high despite the increasing level of education, urbanization and increasing use of contraception? Why do Yoruba mothers who are in wage employment exhibit the same level or sometimes higher fertility than mothers who are self employed? Why is urban fertility higher than rural fertility despite the fact that the proportion of women using contraceptives is higher in urban than rural areas? Is it because there is a "missing link" as Olusanya (1985) puts it, between the idea of contraception and fertility? What is this missing link? These and other similar questions are what this study intends to answer. It is only a clear understanding of these issues

that will give a clue to future population dynamics and information at attempting to influence its course.

CHAPTER TWO

THE CONCEPTUAL FRAMEWORK OF THE STUDY2.1 EXISTING STUDIES

Fertility levels and differentials among the Yoruba have been obtained from results of a number of surveys in the relatively recent past. Many of the studies covered only very small areas. However, these studies have certain value; they all confirm that fertility is consistently high among the Yoruba. The question we want to emphasize in this section therefore is how previous scholars have explained the already established high fertility either in Nigeria in general or among the Yoruba in particular. We would also take a look at how scholars have explained fertility levels and differentials in some other parts of the world.

The United Nations (1969) estimates of birth rates for major world regions show that the figure of 49 births per 1000 population for the West African region (defined as extending from Mauritania to Nigeria) exceeds all others and that 44 per 1000 population for the middle African region (from Chad through Zaire to Angola) is third highest among the remaining 23 regions.

The high figure recorded for the West African region relative to other regions was attributed to the low chances of survival to maturity of a live birth. In such a situation of uncertainty a woman may prefer to give birth to as many children as possible with the hope that at least a few will survive to adulthood. The differential between the regions and fertility level may be a reflection of differential

improvement in living conditions.

Preston (1975) also argued that accelerated population growth is universally induced by successful health programmes. He argued further that mortality decline should remove the social underpinnings upon which high fertility had rested. More concretely under a regime of reduced mortality, fewer births would be required in order for parents to achieve a certain family size goal (assuming such a goal exists among traditional African) that was framed in terms of surviving children.

The fear of many children not surviving to adulthood to fulfil their social and economic roles in the family therefore is said to be responsible for high fertility levels in developing societies. The extent to which deceased children are replaced in the family seems to vary systematically with the level of socio-economic development. Preston pointed out that in general, populations at the highest and lowest developmental levels, exhibit the strongest replacement effects.

Improvement in health services to Preston produces high fertility levels by reducing sterility, subfecundity, and pregnancy wastage by extending the average lifetime of a marriage: In Gabon for example, mortality is quite high even for tropical Africa but fertility is usually low because approximately a quarter of women of reproductive age are sterile, mostly as a result of malaria infection. Thus one can say that an anti-malaria campaign in such a population can be expected to reduce mortality and raise fertility.

The high fertility in Nigeria, and particularly among the Yoruba has also been explained on the basis of traditional customs of sex taboo during nursing and of universality of marriage of women. Olusanya (1971) suggested that the loosening of this taboo jointly with changing infant feeding patterns and developing medical services and a positive effect on fertility. The same may be true in respect of ritual abstinence. If a custom of abstinence of about three years after delivery should lose its force, it would undoubtedly increase fertility. For instance Caldwell and Caldwell (1977) in the result of the study done around the Yoruba city of Ibadan gave average duration of abstinence in Ibadan city to be 22.0 months while the duration of breast-feeding was 16.0 months. Marlins and colleagues (1964) also found around Imesi Ile the average duration of abstinence to be 26.5 months while the duration of breast feeding was 23.2 months. The corresponding figures for Ibadan rural areas as found by Orubuloye (1977) were 26.8 months. It is thus clear that prolonged post-partum abstinence has been widely practised in Nigeria.

Adegbola, Page and Lesthaeghe (1976) pointed out that abstinence is largely related to breast-feeding: the most common institutionalisation of the link finds its expression in the belief that semen dries up, spoils or actually enters and poisons the mother's milk, leading to sickness or even death for the infant. A variant is stated in the belief that the odour of the embryonic child harms the breastfed one. The obvious chances for the unweaned child. Hence,

abstinence may be practised for as long as the child is breastfed.

In a study by Potter and his colleagues (1965), it was shown that the period of post-partum amenorrhoea lengthens with age of the women on average of 7.4 months for mothers aged 15-19 years to 13.5 months for those aged 40 years and over. This is plausible since women who have had just two live births stand a better chance of having the third than for a woman who has had five live births to have the sixth because of progressive physiological impairment.

Olusanya (1981) however, observed a reduction in the degree of traditionalism with improved education especially among Yoruba families. Since the educated women who marry at later ages would like to build up their families so rapidly (considering the fact that the delay is involuntary), they will not keep strictly to this traditional post-partum abstinence in recent years and hence high fertility.

Olusanya observed further in the same study, a mean interval between marriage and first birth to be between 8 and 10 months for women in Surulere area of metropolitan Lagos. In the study it was also observed that a majority of the women were pregnant before they entered marriage. In fact, it is conception that brings about marriage contract and not marriage preceding conception. Thus the arrival of the first baby was a few months after marriage. For the Surulere women in the study who were in age group 15-24 and in parity 1, the mean interval between successive births for all births was 10.8 months. The interval was two years 7.2 months

for women aged 35-54 years in the same parity.

The study went further by observing a tendency for Ebute-Meta/Yaba women to observe longer intervals for all births as compared to the Surulere women. Also noted in the two areas is a tendency for contraction of mean interval for all births observed for the younger generation as compared to the older generation.. This contraction of mean interval for all births observed for the younger women has the tendency to increase fertility at least for this group of women.

A number of socio-economic factors have been mentioned as explaining these features. Prominent among the explanations for the tendency for intervals to decrease with each successive birth generation or marriage cohorts is the increased spread of education which has the tendency to increase age of first marriage as women will now stay longer in schools and on marriage start to have children in quick succession so as to gain the time lost as a result of an extended period of formal education. Another reason is the increased use of baby food which implies less use of the mother's milk and consequently reduction in the weaning period. All these have a tendency to high fertility.

Hull and Hull (1977) employed a detailed analysis of the Davis Blake intermediate variables and identified post-partum abstinence, and apparent differences in fecundity as determinants of fertility differentials in the Indonesian population. It was found that women from the lowest income groups observed longer periods of post-partum abstinence on

average than do women from the middle or upper income groups. It is observed from this study that for all income groups there is a tendency for younger women to observe shorter periods of abstinence than women in their mothers generations. This confirms the various findings of other scholars in the field of population and that of Olusanya (1969) in particular that the spread of modernizing values cut across income or occupational or educational groups. The pattern is said to be a product of differential and changing pattern or breast-feeding behaviour. Older women and poorer women were likely to breastfeed for longer periods and were likely to observe a taboo on intercourse during this period. Ideas about 'proper' modern behaviour, the advertisement of powdered milk coupled with the advice of Western trained doctors have influenced young women to wean their children earlier. Thus they resume sexual relations earlier in the post-partum period.

Another factor which according to Hull and Hull affect fertility differential is differences in fecundity. This is biological and not sociological. The analysed data by the Hulls showed that people in the lower income groups finish their potential reproductive lives earlier than those in middle and upper income groups. This, it is suggested may be due to deficient diet, higher incidence of diseases among the poor and particularly their vulnerability to tuberculosis and venereal diseases which often go untreated. High fecundity thus produces high fertility among middle and upper income Indonesian population.

In most patrilineal societies like Nigeria, children especially male ones, are always welcomed into the families

so that most families would not stop childbearing until they had at least one or two male children. While the literature relating to this question is extensive, there is actually very little quantification of the magnitude of this male preference and its possible effects on fertility levels. Mott (1974) in his study of Ebendo, indicated that the average Ebendo woman of reproductive age considers about ten children the 'best' number for some one as herself to have. There is very little variation between the younger and older women in this regard as the women between the ages of 15 and 29 considered 9.8 the best number and the women aged 30 and over 10.4 children.

However, while 10 children was then overall best number, the average woman considered 6.6 sons, and 4.1 daughters the optimum combination. Thus, from the perspective of the women in the community, they would ideally like almost 60 percent of their children to be males and 40 percent females. According to Mott, the women who expressed preference for larger families also expressed preference for larger proportion of male offspring. Also, overall 116 women, about a third of the women who responded to this question considered seven or greater the best number of sons compared with only 36 women, or about 10 percent of the total who considered seven or more daughters as the best number. Mott therefore concluded that to a limited degree, this preference for male children may have an effect on Ebendo fertility.

A history of female births appears to be associated with a desire to bear more children. Women whose first two children

were sons wish on the average to have 6 more children whereas those whose first two children were daughters desire seven or more children.

Raimi (1975) in his study of a Yoruba rural community correlated fertility with the number of sons a woman has already, controlling for religious differences. The average number of children ever born for Christian women with 2 or more sons already was 5.4 while it was 6.1 for their muslim counterparts. Those women who have had no male children represent an extreme group for each religion since average number of children ever born per women for the two religious groups was identical, 8.6 for Christian women and 6.6 for muslim women. However, these findings should be interpreted with a caution because there are very few women (18) in the Christian category as the village is predominantly Muslim and that Christianity is concentrated among the younger members of the community.

Another variable used to explain fertility differential by most scholars is the age at marriage. Caldwell (1977) for instance indicated that in urban Ghana, delayed female marriage does reduce fertility substantially and its incidence is associated with educational level attained. Caldwell based this observation on the fact that his female respondents who were 45 and above years old had 19 percent fewer than did their mothers at the same age group. The weakness in this study is that delayed marriage is not itself a necessary and sufficient condition for low fertility. Women may marry late because of years spent in school but they

can still have high fertility if the interval between successive births is short.

Olusanya (1969) compared the fertility rates of women married at different periods when those women are at corresponding duration of marriage. For Ife and Oyo women who married before and after 1946 and who had just spent one year in marriage, the average number of live births increases to the most recent marriage cohort of 1961-1965. This rising trend is for all age groups irrespective of their education though the rate of increase is not the same.

In a study, Jones (1977) described the pattern of fertility in Indonesia as an early marriage, high fertility level pattern. In a country with late marriage and low fertility, childbearing tends to be truncated i.e. concentrated heavily at ages 20-34 and especially in the age group 20-29. This is not the case in Indonesia where fertility rates are quite high at ages 15-19 and 35-39. In other words, one reason for the high level of fertility in Indonesia is that women begin childbearing years to be spread over a 20 year span or longer, whereas in the West a ten-year span or shorter is much typical.

Coale and Tyre (1963) also established the fact that high fertility in some Chinese populations resulted from late marriage followed by very high reproductive rates into the later years of childbearing. On the other hand, they found that the high fertility in India resulted from very early marriage and reproduction rates in the early childbearing years with a sharp decline into the late years.

Agarwala (1965) demonstrated that a lower birth rate would follow from late average age at marriage of females. In 1965, he estimated that an increase in average age at marriage of Indian women from the existing 15.6 years to 19 or 20 years would result in an annual CBR 30 years later of 33.9 births per 1000 population instead of 47.8, a decline of about 29 percent. He had found a rise in age at marriage of Indian women from a mean of 12.8 years in the decade 1891-1901 to nearly 16 years in 1951-1961 in another study in 1963.

One thing which Agarwala did not note is that increase in age at marriage does not imply low total fertility as mentioned earlier. Under a condition of increase in age at marriage, the same or even higher fertility rate as before could be achieved mainly by contracting the births and hence increasing the age specific birth rates.

Farid (1973) studied how mean family sizes of the different age at marriage groups of a given marriage cohort were built up over the child bearing span. The study revealed a kind of pattern which is that of increasing frequency of births at younger ages for married women. For instance, an analysis of the 1911 marriage cohort for Sweden showed that women who are under 20 and whose marriage duration is one year had a mean family size of 0.94. Those who are in the age group 35-39 and with same marriage duration had 0.58 as the mean family size. When the marriage was 20 years, women whose marriage was under 20 years had 4.40 mean family size whereas women aged 30-34 with the same marriage duration

had 2.57 mean family size. The emerging trend is one of increasing frequency of births at the early marriage duration.

Age at marriage therefore whether it is increasing, constant or declining has been used by these scholars to explain high fertility in developing countries. In societies where women enter into marriage late as a result of staying longer in schools, the women tend to give birth to children in quick succession so that at the end their completed fertility will be higher than the completed fertility of women who enter into marriage very early.

Other socio-economic variables used to explain high fertility by previous scholars are education, urbanization and use or non-use of contraceptive. Okediji (1967) for instance established an inverse relationship between socio-economic status and number of living children. However, these Okediji's findings are deficient. He based his analysis on the number of living children instead of the number of life births. Again, late age at marriage as mentioned earlier is not in itself a sufficient condition for affecting low fertility as Okediji tried to make us believe. Experience has shown that it takes a long time for attitudes to change more so when it is related to fertility. In Western Europe which first experienced Demographic transition, it took time before increasing living conditions could bring about a decline in fertility level. Except that the couples in the area of study (modern area) constitute different species of mankind who discard old ideas immediately on being exposed to new ones, the study and its findings remain unconvincing. Old habits it is said die hard. The cultural

clement and its impediment nature continues to constitute a threat to planning implementation in most parts of the developing nation. What the study measured was attitude (verbal behaviour) contrary to the actual behavioural pattern of the educated women.

Olusanya (1967) in the study referred to earlier, found a weak positive relationship between fertility and socio-economic variables especially education. The study shows that fertility level increases with a rise in the level of education. The trend in the fertility for the educated show that they build up their family more rapidly than their undeducated counterpart. For example, the educated wives who married before 1946 had an average of over four children in their fifteenth year of marriage and their uneducated counterparts had an average of less than three in the fifteenth year of marriage. The educated can be said to have better access to new ideas and good health care services. They are likely to carry most pregnancies to successful end. Thus for this group, it may be true that the fertility level is rising. The same cannot be said of those with no exposure or access to these modern values.

Olusanya stated further that there was no differences between the fertility of 25-29 years old wives with some education and those with no education in Ife and Oyo towns. By age 45, however, the educated women had more children on average than their uneducated counterparts reflecting in this case, delayed childbearing patterns for educated women. Controlling for both education and urban/rural residence, Olusanya found that by age 45, uneducated rural women had

fewer children ever born than their uneducated urban counterparts suggesting an urban effect independent of educational status.

Olusanya (1981) further expatiated on the positive association between fertility and educational status. The reasons for this he said are related to a reduction in the incidence of fertility restricting diseases and in the degree of "detraditionalisation" with improved education. Earlier, Olusanya (1971) had pointed out that the educated women were more unequivocally unfavourable in their attitudes toward excessive child-bearing. It was further stressed that attitudes and actual behaviour do not often coincide. What was responsible for this lack of agreement was, however, not stated.

Also in the study of Ohadike 1966 referred to earlier there was a positive association between fertility and education. He found the mean number of children born by non-educated women aged 35 years and over to be 6.0 for those with primary school education in the same age group, it was 6.2 and it was 6.4 for those with secondary school or higher education. These findings were consistent with that of Olusanya.

In another development Orubuloye (1977) also in his study referred to earlier, established that fertility first rises with education to the primary school level and then falls as educational level increases (i.e. a curvilinear pattern). Those without formal education had fertility lower than that for women with primary education. The fertility of those with secondary and higher education is

lowest. Here it was established that fertility increases with education and later it falls. The impression one gets from the study is that education must go far before it can have any pronounced influence on fertility.

The Nigerian Fertility survey 1981-82 mentioned earlier also showed that the desired and actual reproductive performance of educated women are higher than for their uneducated counterparts. (National Population Bureau, 1984). The study found that regardless of the number of children already had, there was hardly any of the women (educated or not) who did not want more children. Of those women with secondary or higher education and with 4-7 living children, 85 percent wanted more children and of those with 8 children, 60 percent wanted more children. The study also showed that women with some formal education had significantly higher fertility than the illiterate women.

The contributions of Arowolo (1977) in a study referred to earlier to the relationship between fertility and occupation is also very significant. He found that unemployed Yoruba working women and all those in home related services at almost every age-group show lower average children ever born than those in gainful occupations. Unemployed women of completed fertility reported an average number of children ever born of 4.2 compared with 5.1 for those currently employed. The study went further to say that an individual background is an important factor among women in Ibadan city. Ibadan born women who are currently employed show a consistently lower average children ever born at virtually every age group than employed women of rural origin. It was further

hinted that children ever born to women interviewed can be hardly differentiated on the basis of difference in the burden of child care responsibilities. That the rural or urban background affected the women more than their occupation calls for further investigation because one thinks that occupational type should predominate over background characteristics in affecting the level of fertility unless it can be argued that people are not subject to change as a result of new experiences. People of similar occupation who live in the city seem to share more in common even with differing backgrounds. In fact, occupation should play a more determinant role than the one assigned it by Arowolo. However, what we infer from this study is that employment outside the home is a factor that tends to increase fertility in Ibadan city.

The relationship between women's participation in the labour force and fertility was also noted by Farooq (1985). He noted that participation of women in the formal sector especially in urban areas depresses fertility. Working outside home environments leads to role incompatibility between childbearing and working (Stycos and Weller, 1968) which does not arise in case of unemployed or self-employed women. He found however, a positive association between status and fertility in the rural areas.. The extended family member who cannot be easily accommodated in urban areas served as substitute mothers in rural areas.

Davanzo and Butz (1981) also found that women employed outside their home environments generally breastfed less

than others while those unemployed or self-employed breast-fed more than women working outside their home environment. The variation in the duration of breastfeeding between these two categories of women partially explain the differential in birth spacing that exists between them i.e. the women working outside their home environments have shorter interval between successive births than unemployed or self employed women and hence mothers working outside their home environments have higher fertility than their counterparts who are self-employed or unemployed.

In the study of Olusanya (1981) referred to earlier, he also found that female employment has a lowering effect on the level of fertility. In his main group, the averages for the employee category are one to two live births lower than the averages for either the self-employed or the housewife category. However the differentials are less pronounced in the control group than the main group. Olusanya also concluded that employment status seems to be what makes the real difference in the fertility of his respondents and not education as such. It is implied in Olusanya's study that the integration of women in economic production tends to develop their capacity to limit the number of children they have. This is contrary to the findings of Arowolo in Ibadan city as he found women currently employed outside their home environments to be about 18 percent fertile than unemployed women. Most working women because of the assistance offered by substitute mothers could combine childbearing function with wage employment function and hence their fertility

tends to be higher than for unemployed or self-employed women. With this, it seems that the relationship between fertility and occupational status of mothers is still inconclusive.

Many scholars also showed that the relationship between fertility and urbanization, for instance, in the study we referred to earlier, Olusanya (1969) found a positive relationship between the two variables. He indicated that fertility levels in urban Western Nigeria were higher than in rural areas. Ife and Ibadan were taken to be more urbanized than Oyo in terms of population and literacy level. The average number of life births for Ibadan and Ife women are greater than that of Oyo. For example women aged 35-39 years in Ife and Ibadan are reported to have 3.96 and 3.88 average number of life births respectively whereas Oyo has 5.53. Morgan confirmed this finding in 1968 in Lagos when he came out with a total fertility of 7.3 for Lagos which is a high level for African standards, when compared with Olusanya's figures for Ibadan, Ife and Oyo, the difference appeared to be very marked confirming the thesis that the more urbanized a settlement is, the more its fertility.

However, Olusanya's differentiation of Ife and Oyo into more urbanised and less urbanised may not be accurate because it appears on the surface that Oyo and Ife in terms of development are too close. Also to use literacy rate as a differentiating factor, one would expect Olusanya to substantiate this probably by the use of crude literacy rates for the two communities.

In Ekanem's (1972) study of Eastern Nigeria the urban women had 6.8 children ever born during their reproductive years compared with 6.3 for the rural women even though they desire fewer than 6 children compared with seven or more for their rural counterparts. At this stage of socio-economic development, the rural women appear to have fewer children than they consider ideal whereas the urban women have more children than they consider ideal.

An explanation of the increasing trend of fertility in most urban areas of developing societies is the improved health conditions of the urban relative to the rural areas. Olusanya (1965) for instance found that the increase in the CBR after 1944 in Mauritius was due to improvements in health particularly malaria eradication. Before the eradication of malaria the CBR was low and fluctuated between 30 and 40 per 1000 population. After 1947 when malaria was virtually eradicated and there was improvement in welfare facilities and sanitary conditions, there was a sustained rise in the rate and by 1952, it was 50 per 1000. This increase was accompanied by a sustained reduction of still births from year to year. This shows a positive relationship between improvement in welfare and fertility level.

Gaise (1974) pointed out the differential fertility obtained between rural and urban dwellers in Ghana. He observed fertility differential among the tribes in Ghana. He however cautioned that the low fertility tribes in Ghana exhibit high fertility by world standard and that their fertility is higher than that of the low natality areas of tropical Africa. Eradication of venereal diseases and

other causes of infertility may raise the fertility level among some of the Ghanaian tribes especially those whose living conditions are low and among whom ecological conditions are poor even by local standards. Gaisie pointed out that urbanization per se does not bring rapid declines in fertility levels. In the light of available data, Gaisie observed that education appears to be a powerful instrument of fertility changes. But since education will take a long time to bring about changes in fertility levels, organized birth control will be needed to arrest some of the socio-economic problems resulting from constant high fertility and declining mortality.

The trend observed by Gaisie may be transitional as fertility is tied to attitude and it takes time for attitudes to change improved living conditions cannot be automatically followed by fertility decline. It is only when couples become surer than ever before that a given number of live births will survive to maturity, that they may decide to bring to life only the desired number of live births. The fear that many live births may not survive to adulthood can be a causal factor in high fertility level that Gaisie observed among urban Ghanaians.

Improved living conditions are sometimes measured by mortality rates. Studies have shown that mortality rates are higher in rural than urban communities. For instance, in his study in Ife and Oyo, Olusanya (1966) obtained an IMR for Ife ranging between 91 and 107.8 and for Oyo an IMR ranging from 126.9 to 128.5 per 1000 births. The 10-year age grouping gave IMR for Ife between 88.2 and 105.1

and for Oyo 112.4 to 120.1 per 1000 births. Olusanya also obtained expectations of life at birth between 48 and 50 years (Ife) and 43 to 45 years (Oyo).

If we compare these figures with that obtained for Lagos Metropolis by Morgan and Kannisto (1973), one would see that infant mortality decreases with the degree of urbanization. An IMR of 109.2 per 1000 and CDR of 12.4 per 1000 women were obtained for Lagos. The rural demographic sample survey of 1965/66 obtained a CDR of 26.9 per 1000 and IMR of 178 per 1000. All these data show that mortality is higher in rural than urban centres. Since it takes some time as mentioned earlier for the women to realize that more of their live births are surviving to adulthood, fertility in urban areas continues to be high probably until that time when this becomes clearly visible.

One other factor that has been used to explain fertility levels in most countries is the use or non-use of contraceptives. For instance, the general experience in Asia and Latin America is that contraception is adopted primarily to limit rather than to space births. This, however, contrasts sharply with the general experience in other developing countries like Ghana and Kenya where the expression by large proportions of couples that they no longer want additional children has not always meant that couples would adopt family planning if it was made available to them. In Kenya for instance E. Dow and H. Werner (1981) in comparing KAP data for 1966-67 and 1977-78 for Nairobi, Kenya and six rural clusters with the objectives of measuring change during the

decade found for the Nairobi sample, the average number of living children and of children desired which was 5.8 remained virtually unchanged during the period in spite of the fact that 87 percent of the women in 1966-67 were aware that a large family was economically disadvantageous, that it involved high costs in terms of educating the children and that the proportion without formal education had fallen from 49 percent to 17 percent. Moreover, there was a remarkable improvement in knowledge and practice of family planning.

The authors were surprised that "other critical variables that might have been expected to vary in an inverse fashion with increases in knowledge and use of family planning methods have not done so". In an attempt to explain this phenomena, they said "Instead, greater practice of contraception is apparently taking place within a reasonably stable framework of urban fertility values. In practice, these values apparently co-opt and control contraceptive knowledge and use, in that they move it in the direction of spacing, rather than stopping, in the realisation of stable urban fertility norms". The authors thought that this pattern "in which family planning is used . . . to complement and maintain rather than change and reduce fertility aspirations" might be similar to that in other parts of sub-saharan Africa.

In Thailand, a comparison by Knodel and Pitaktepsombati (1975) of urban/rural fertility by contraceptive use indicates that the marital fertility of contracepting rural and urban women was fairly similar, but urban women not practising

contraception experienced substantially low fertility rates than their rural counterparts.

Rizk (1977) found that the fertility of the so-called contraceptors studied in Jordan was higher than that of the non contraceptors no matter how long they had been married or how much of schooling they had had.

This pattern in which birth spacing by modern contraception precedes birth limitation and has also been found among Yoruba women. For instance Ware (1976), Caldwell (1977b, 1978) and National Population Bureau (1984) all demonstrated (see introduction) that KAP of family planning has increased with increase in modernisation variables, but fertility and desired family size have remained high.

Caldwell (1976), use the theory of "intergenerational wealth flows" to explain higher and unchanging fertility and cast doubt on the erstwhile use of socio economic variables in situations where they are not relevant. He wrote that fertility in traditional societies is not dependent on the spread of industrialization or even the rate of economic development. According to him, fertility decline is more likely to precede industrilisation and help to bring it about than follow it. Caldwell (1977a) explained further, the persistent high fertility among the Yoruba in terms of the flow of wealth which according to him is mainly from children to parents. "As long as children ungrudgingly share their earnings with their parents, it will pay to have a large family and to educate them". This theory has been criticised especially by Olusanya (1987) when he said that

the theory did not apply to either the rural or urban Yoruba on whom it was mainly based. According to Olusanya, the rural child attends school today and he has largely done so since the inception of the free primary education in the old Western Region in 1955. Before then his contribution to the household economy was not very significant and by the time it was, he was given his own piece of land to cultivate in readiness for marriage, the expenses for which are paid by his parents. Communal assistance, mutual help 'aaro', various forms of land tenure especially share-cropping (Olusanya 1976) and the use of hired labour which are not new among the rural Yoruba, tend to de-emphasize the role of children as farm hands.

The urban child on the other hand is either sent to school or apprenticed to a trade (in most cases today after primary education) and spends the better part of a day outside the home. He consequently has very little time to contribute significantly to the family income. Moreover, over the years an increasing proportion of fathers have either been drawn into wage employment from which they retire on a pension or are trained, self-employed craftsmen with apprentices who work for them well into their old age. The urban child has therefore been progressively released from the customary obligation of wholly or partially maintaining his parents who were responsible for his rearing, training or education.

Thus, the rural or urban parents care for their children from birth to adulthood, if this could be translated into

cash, would be far more than low life expectancy in the society would enable the parents to get back in full if at all. The net balance of the wealth flows, to the extent that this is a reality rather than a myth, has by and large always been positively in favour of children.

The most telling criticism of the theory, however, is that today well educated parents who do not require maintenance assistance in future from their children but rather struggle to see that the children have the best education at whatever cost, are among the most fertile in Nigeria.

From the studies reviewed above many other important facts emerge. The findings show that fertility level is still very high in Africa in general and in Nigeria in particular. Although, owing to lack of reliable historical data, the trend of higher fertility cannot be statistically verified but from the little evidence, we have, fertility may be increasing in almost all countries of Africa.

Many of the scholars agree that the aspects of modernisation influencing fertility change in Africa in general and Nigeria in particular consist of declining mortality, the rising status of women induced by legal reforms and acquisition of higher education, the spread of education and literacy, an increase in the influence of secular rationality, the growth of industrialisation and urbanization, general increase in the standard of living, family planning and religion.

Some of these aspects of modernisation which were associated with fertility decline in many Western European

countries and other areas of European influence have been found to have been associated with fertility increase in Nigeria. Therefore the theory that the desire to achieve a higher socio-economic status may motivate some individuals to have fewer children is not applicable to African countries. A way of achieving this high and socio-economic status is to stay longer in schools but unfortunately staying longer school has been found not to be associated with fertility decline in Africa; rather it seems to have been responsible for fertility increases and this is particularly true of the Yoruba.

The shortening of the period of post-partum abstinence and shorter breast-feeding have been identified as contributory factors to persistent high fertility among the Yoruba in particular and in Nigeria in general. Marriage is also universal in almost all African countries and the expectation of the people from the newly-wedded couple is to bear children. Such a marriage will be regarded as failure if the couple cannot produce children of their own.

According to the scholars, the loosening of sex taboo conjointly with changing infant feeding patterns and developing medical service has positive effect on fertility among the Yoruba. If a custom of abstinence of about 36 months after delivery should be reduced to between 15 and 20 months as observed by many of the scholars, it will definitely increase fertility other things being equal.

The increasing trend in the nuclearization of the family as a result of the spread of western education is

also found to be positively related to fertility.

The relationship between fertility and type of marriage is inconclusive as Olusanya (1977) found no significant difference in the average number of live births per woman for women who are either monogamously married whereas Ekanem (1974) concluded that polygamy exercises a depressing role on fertility.

Other facts that emerge from the review are:

1. that sex preference is associated with family size so that women whose first two children were sons are more likely to desire fewer children than those whose first two children were daughters.
2. that the fear of many children not surviving to adulthood is responsible for high fertility in Nigeria in general and among the Yoruba in particular.
3. that fertility is higher for literate women than for their illiterate counterparts.
4. that urban women exhibit higher fertility than rural women.
5. that unemployed Yoruba working women and all those in home-related services at almost every age group show lower average number of children ever born than those in gainful occupation.
6. that Moslems women are more fertile than Christian women.
7. and that fertility is higher for contraceptive users than for non-users.

2.2 THEORETICAL ORIENTATION

How do these findings fit in with the existing theory of fertility change? It will be observed that all the studies reviewed were done within the frame-work of the grand theory known as the demographic transition theory the essence of which is the movement of vital rates from high to low levels over a period of time, the duration of change depending on diverse conditions in various countries.

Landry (1934) described what he called the demographic transition theory as a general pattern of transition from a state of high birth and death rates to a state of low birth and death rates. It has been most usually asserted that the transition begins when the mortality rates fall, leaving a high fertility rate unchecked and thus leading the society towards a situation of rapid growth and heavy pressure on resources. Eventually, survival demands that fertility of the population in question falls to meet the reduced mortality. Thus the transition is completed.

Thompson (1929) Notestein (1945) and Blacker (1947) also using the demographic history of European countries contributed to the formulation of the demographic transition theory. They said that the transition went through three stages:

1. the pre-industrial stage with high fertility and mortality, and a resultant low rate of natural increase.
2. the transitional stage with high fertility but declining mortality, resulting in a high rate of natural increase and

3. the modern stage with fertility and mortality stabilized at low levels, and consequently a low rate of natural increase..

The first stage was in the pre-industrial revolution era. European countries had high mortality rates resulting from virulence of frequent epidemics, plagues, incessant floods, poor sanitary conditions and lack of knowledge of the causes of these diseases. In other words it is a stage which is close to natural fertility limited by factors such as high sterility from poor hygiene, high maternal mortality, many still births and sexual taboos and prohibitions. Therefore in order to offset the effects of the prevailing high mortality, a high rate of reproduction was necessary. Encouraging high fertility were the entrenched institutional norms and values supporting marriages, low age at marriage and large family sizes. Moreover, the economy was mainly subsistence and thus the household was the production and consumption unit, which made large family sizes advantages.

The second stage in the transition produces a slight fall in mortality covering all age groups, and increases the percentage of women in the reproductive age groups, and also younger girls, thus increasing the reproduction potentials of the society. All these are in response to improvements in preventive medicine, sanitation and food supply, which accompanied the industrial revolution and economic development of the eighteenth century. The lag between fertility and mortality caused high growth rates in these countries. Because fertility involves a lot of complex variables and the institutional norms, it cannot respond so easily to

economic development as mortality does.

The third stage and end of the transition are marked by a decrease in fertility and mortality so that fertility and mortality are stabilized at low levels in these countries with a consequent low rate of natural increase. The same factors which led to an increase in fertility now act to reduce it. What happens is that demographic pressures increased receptivity to new ideas, the desire for better living standards and the greater probability of survival of the children born, all act together on the behaviour and attitudes of couples. A new mentality is produced in which the desired number of children is achieved by means of voluntary control of fertility. One other factor that caused the reduction in fertility was the enactment of child labour laws. This reduced the value of children to parents. The development of a capitalist mode of production made parents realise the existence of alternatives to childbearing. This last stage is the ultimate of the demographic transition; that is the attainment of conditions of low fertility and mortality, which eventually results in a low rate of natural increase.

The generalization of these historical events to societies that are yet to undergo demographic transition theory. The main postulate of the theory is that with increasing economic development, every country eventually attains low levels of mortality, fertility and natural increase. The developed countries of the world are at this stage while most developing countries are presently either at the first or second stage.

However, this theory is without its limitation for instance, the demographic theory failed to predict the rise in fertility

levels of Western European nations in the immediate post World War II. Secondly, the demographic experience of less developed countries in recent times has failed to replicate the pattern of transition in Western Europe. In most of the developing countries, fertility is rising with increasing level of education, industrialization and urbanization. The fall in mortality in these developing countries is a deviation from the demographic transition pattern in that it is very fast (Peterson, 1961).

One other limitation of this theory has to do with the determination of the relevant components of "modernization" which is usually assumed as one of the processes, countries have to undergo in their movement from one stage of the transition to another. The components that have been suggested include urbanization, economic development, technological improvement, use of contraception etc. The problem has to do with identifying the relevant components. Some of these variables constituted part of the components of modernisation of some countries while in others they were absent (Notestein, 1953; Hausa and Duncan, 1959).

These limitations notwithstanding, the transition theory remains the best available theory for explaining the levels and differentials in vital rates among and within countries. Thus, empirical researches in demography have been concerned with explaining the different parts of the theory. The studies reviewed in the first section of this chapter, as mentioned earlier used essentially demographic transition theory.

This theory has been applied to many parts of Europe and it has been found that fertility responds negatively to increasing industrialization and modernisation as implied in the theory. For example, Tanber (1958) found in Japan that fertility decline was related to the increasing level of industrialization. Kirk (1971) also found a negative relationship between industrial development and fertility. The question now is whether this theory can be used to explain fertility behaviour of the Yoruba. In other words, how useful is this theory in explaining the persistent high fertility among the Yoruba?

According to the demographic transition theory, one would expect lower fertility in urban centres of Nigeria than in rural areas. This is because urban centres are more industrially and educationally developed than rural areas.

Secondly, the cost of rearing and educating children is much higher in cities than in villages. Aspirations for 'high quality children' are very marked even among the lower income group of the Yoruba. Education is seen as the major key leading to material success, and material success is a very highly valued item in cities, one would therefore expect preference for smaller families in cities than in rural areas.

Infant mortality, for instance, is reported to be lower in cities like Lagos and Ibadan. If there were to be an effect of infant mortality along the line of demographic transition theory one would again expect lower fertility in these cities than surrounding villages.

Finally, contraception are more widely available and more widely used in cities than in villages. This should have a lowering effect on urban fertility levels which is not so.

Other variables that feature prominently in the transition theory which scholars have used to explain fertility levels in Nigeria in general and among the Yoruba in particular include mass education, nucleation of the family, increasing standard of living, employment of women outside the home and 'KAP' of contraception. Education, for instance, has been found to have an increasing rather than decreasing effect on fertility.

By the above comments we do not mean that the background factors mentioned do not affect fertility in the direction stated in the transition theory. Rather, we are inclined to think that intermediate variables have a more crucial role to play and must be sufficiently modified by these variables before fertility can decline. In other words, more emphasis needs to be placed on these intermediate variables in trying to explain high and persistent fertility.

Therefore our search for the factors that are responsible for the persistently high fertility among the Yoruba will not be limited to testing the variables implied by the demographic transition theory alone but will include looking into some of our traditions or social norms that usually encourage high fertility.

As a more plausible explanation, we shall begin with the thesis propounded by Freedman (1936) in his analysis of

the social norms encouraging high fertility in the less developed nations. According to him societal levels of fertility are related to variations in cultural norms about reproduction and these in turn, are related to the nature of the society.

One of the fundamental principles of sociology is that when many members of a society face a recurrent common problem with important social consequences they tend to develop a normative solution for it. This solution, a set of rules of behaviour in a particular situation, becomes part of the culture, and the society indoctrinates its members to conform more or less closely to the norms by explicit or implicit rewards and punishments. For instance, a society with high and variable mortality is likely to have built into its cultural patterns strong pressures for having many children so as to have 'extra' children as a safeguard against the catastrophic loss of the essential minimum number. If this explanation is acceptable, we would hypothesize that fertility is persistently high among the Yoruba because of the relatively high infant and childhood mortality. In other words, high fertility among the Yoruba is an adjustment to relatively high mortality.

One other cultural pattern that is prevalent among the Yoruba is the extended type of family. Among the Yoruba a wide range of activities involve interdependence with kinsmen and especially with children. These include production, consumption, leisure activity, assistance in illness and old age and many other activities covered by the family institution.

Therefore in this present study we will also test the assumption that the high fertility among the Yoruba is a function of the prevalence of the extended family structure. Large numbers of children are desired and actually produced if the values considered essential are obtained from extended family members other than other social or economic institutions.

On the other hand, Lorimer (1954) said that systems based on nuclear, neolocal family units make for lower fertility since fewer routine functions are carried out within the family unit. If the individual is, or believes he is, part of a larger non-familial system, he begins to find rewards in social relationships for which large numbers of children may be unnecessary. Therefore, a shift of functions from family to other specialized institutions is important to reduce level of fertility among the Yoruba.

If extended family is important in a society where mortality is high the number of births desired and produced are likely to be substantially high.

We are also assuming that the combination of male dominance and the lack of communication between husband and wife, especially on problems of family and family planning may retard the adoption of family planning and hence the fertility level will remain high.

In the customs and traditions of the Yoruba, there is a saying that a woman, like a child, should be seen and not heard. The expression vividly illustrates the status of the female in the traditional setting. As mentioned in Chapter one, tradition accords a low status to the females

and prime status to the male. Consequently, the male dominates the affairs of the community and at home - is head of the family and chief bread winner. In this position, the male is lord and master, and is so regarded by the wife or wives. By tradition his decision is final and what he opposes or objects to should not be contemplated by the wife. Thus the decision to have or not to have children is his, and invariable his decision is usually in favour of having children, as more and more children further enhances his status as a man in the society.

In traditional Yoruba society, a man's social status depends on the number of children especially sons he has. And the pride of place generally accorded the male in society, has in some instances resulted in couples having more than normal family size, in the quest for at least a son among their children.

From the issues outlined, it can be hypothesized therefore that the more dominant the male position among the Yoruba families the higher the fertility level. As Hill, Stycos and Black (1969) noted, male dominance and lack of communication between husband and wife is said to retard the adoption of family planning. This might be especially true if the wife has the strongest interest in family limitation while the husband is indifferent.

The main thesis of the study therefore is that high fertility among the Yoruba is not a result of unrestrained maximum fecundity but rather is an adjustment mainly to the high mortality, to the dependence on extended family institution and also to traditions and customs that favour high fertility.

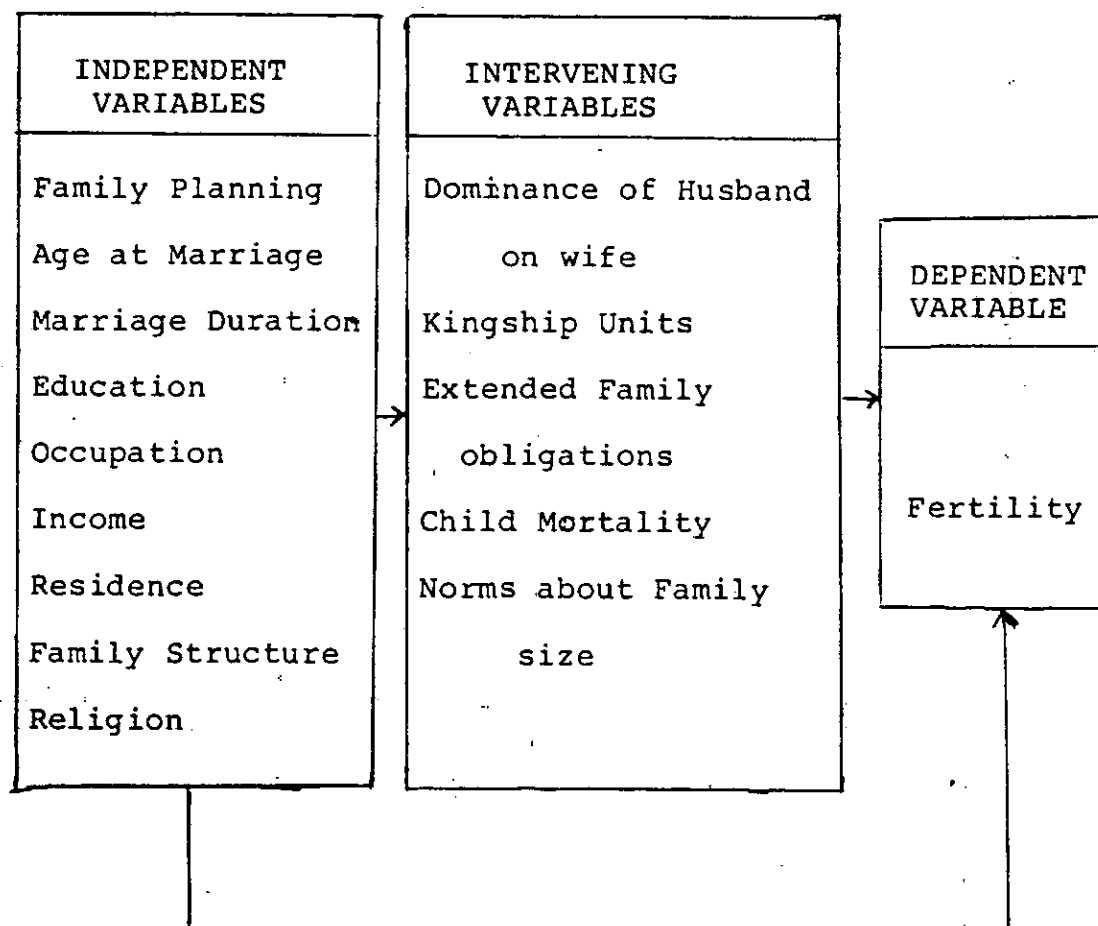
This generalization suggest the following subsidiary hypotheses which will be examined closely in this study:

1. Fertility is likely to be higher for urban than for rural women.
2. A combination of male dominance and the consequent lack of communication between husband and wife especially on issues related to family size and family planning are likely to be unfavourable to the adoption of family planning and hence to the limitation of family size.
3. Fertility level among the Yoruba is likely to be positively related to level of education of the women.
4. Yoruba women in paid employment are likely to have higher fertility than their counterparts in other occupational categories..
5. Fertility level among the Yoruba is likely to be negatively related to the income of the women.
6. Women in modified extended families are likely to be more fertile than women in any other category of household structure.
7. Muslim women are likely to be more fertile than Christian women.

2.3

THE MODEL: EXPLANATORY VARIABLES FOR
THE PERSISTENTLY HIGH FERTILITY
AMONG THE YORUBA.

FIG 2.1



The model shown in figure 2.1 shows how fertility is determined by a set of variables. Fertility is the dependent variable while the independent variables are residence (rural/urban residence), education, occupation and Religion etc.

The variables that affect fertility are divided into two in the model, i.e. the independent and intervening variables. Residence in the model refers to urban and rural residence. There exists a unique social, physical and environmental pattern in the rural areas which makes it different from

the urban areas. These social, physical and environmental conditions in the urban areas cause some peculiar social organizational pattern like heterogeneity, nuclearization of the family, secondary relationship and erosion of the family. Rural areas are relatively homogenous and socially integrated. Family and kinship bond among family members is strong.

Education, on the other hand tends to change the social and economic orientation of people with at least some education. Educated people irrespective of their other background characteristics tend to behave the same way and usually always show similar attitudes and opinions towards social, economic and political issues. Education also tends to determine one's occupation, where to live either in urban or rural areas and also education tends to determine one's values especially values related to childbearing.

People's attitudes are usually modelled after that of the group with which they move. The Muslims and Christians are different both in the groups they keep and also in their socio-economic status. Christian women are allowed more freedom of movement in the towns and villages, market places and even allowed to attend lectures on family planning programmes. In short the Muslims and Christians are different in their socio-economic characteristics.

All these identified independent variables affected most of the variables we have designated as intervening variables in our model. The variables we identified as independent variables do not always affect fertility directly but indirectly through most of the variables we identified as the intervening variables in our model.

Education for instance affects the age at marriage and age at marriage can in turn affect fertility. Again education affects child mortality or the degree of the practice of family planning. All these in turn will affect fertility.

The second relationship shown on the model is where the independent variables affect directly the dependent variables instead of going through the intervening variables. For instance residence in terms of rural/urban or religious differences can affect the reproductive performance of the Yoruba directly without going through any of the intervening variables.

The model is based on the following assumption:

1. With increase in the level of education, it is assumed that level of income will also increase and as income increases, standard of living will also increase and increase in standard of living is likely to reduce mortality and decrease in mortality is assumed to lead to decrease in fertility (following our demographic transition theory).
2. Increase in the level of education is assumed to lead to more women working outside their home environments and working outside the home environments by the women is assumed to reduce the dominance of husband over wife which in turn will increase discussions of family planning and number of children desired. All these will affect fertility.
3. Increase in the level of education is assumed to lead

to increase in neoloal settlement and nuclear family structure. These in turn are likely to affect fertility level.

CHAPTER THREE

METHODOLOGY

3.1 THE RESEARCH SETTING

Iwo local government area of Oyo State which is about forty-five kilometres north of Ibadan was chosen for study. This local government area is also about thirty kilometres and forty-eight kilometres from Oyo and Oshogbo respectively. It is about one hundred and eighty six kilometres from the open sea in Lagos.

The city of Iwo which is the headquarters of the local government lies between latitude $7^{\circ} 37'$ and $7^{\circ} 40'N$ and the longitude $4^{\circ} 9'E$. The altitude is generally between 212 and 273 metres above the mean sea level.

Since our study deals specifically with Yoruba women, Iwo will be a suitable study area as there are very few, if any, non-Yoruba households of the whole local government area.

3.2 TRENDS IN THE GROWTH OF POPULATION

There have been series of population counts and estimates especially for the city of Iwo from where we can obtain the pattern of population growth.

TABLE 3.1Population Changes of Iwo 1981-1986

Year	Total Population	% Change per annum	Source
1921	53,588		Nigerian census
1931	57,191	6.80	Nigerian census
1952	100,006	3.0	Nigerian census
1963	158,583	4.20	Nigerian census
1976	268,452	3.70	Estimate by L.G Iwo
1986	362,938	3.77	Estimate by author

In the absence of reliable data on births, deaths and migration, it is not possible to comment on the population changes reflected by the above census figures. One other difficulty in assessing the correct demographic characteristics of the Yoruba cities in general and Iwo in particular is the seemingly wide fluctuations in their populations. During the agricultural season, most inhabitants of Iwo go to farms and return to the town periodically - over the week ends or once in two to three months. Consequently, most of the houses would remain locked especially during agricultural seasons. During the off-season, the farmers return to Iwo to live there for a few months. For instance a house-to-house survey conducted in April 1969 by the town planning authority of Iwo local government yielded a total population of about 20,000 for Isale-Oba ward of the city. Nearly half the number of habitable dwellings remained closed. The same study was repeated on October 1969 with a view to assessing the population of the area during non-agricultural

seasons. The second survey yielded a population of 64,211.

What this meant is that the people of Iwo like those of many other Yoruba cities usually keep at least two houses - one on the farm which are surrounding villages in this study and the other one at Iwo. This definitely makes population count or survey for the city very difficult. These problems notwithstanding, one can still say authoritatively here, that the population of Iwo is increasing rather than declining.

Corresponding to the marked increase in the city's population has been the phenomenal growth of industrialisation (especially growth of small scale industries). For instance, although Iwo had been the headquarters of Osun South Division of the former Western Region and also the headquarters of the present Iwo local government since 1967, she did not have any large-scale industries until recently. According to the Iwo local government study of 1969 mentioned earlier, the only industries worth the name were two cassava processing units, three quarrying operations and two saw-mills. These three types of industrial units employ 125 persons of whom more than half were women and they occupied a total land of about 20 acres.

However, this trend is changing. Industrialization is beginning in the city. Now there is a large-scale industrial establishment (Agbaje & Co Ltd) which as of 3rd November 1986 had one hundred and fifty seven senior and junior workers. This industry producing nylon bags is along Iwo Ibadan road. There are also at present seventeen

block industries, thirteen saw mill industries, seven hotels, and the quarrying operations have increased from three in 1969 to eight in 1986.

Iwo like many other Yoruba towns and cities is known for a few crafts which include weaving, dyeing and pottery. These handicrafts are carried out in individual houses incidental open spaces and backyards.

The first primary school was built in 1918 by the Baptist Mission of America. As noted by Gbadamosi (1978), Iwo was a late starter in the sphere of education especially when compared with some other Yoruba cities like Abeokuta, Ijebu, Ilesha etc. This of course is due to the fact that Islamic religion was first entrenched in the area. Even today, Iwo is a predominantly Muslim city. In 1969, the Iwo town planning authority study showed that 77.3 percent of the people were Muslims. This figure fell to 58.4 percent in 1978 (Raimi, 1978). This declining trend is probably due to the influence of missionaries especially Baptist and Methodist Missionaries. When these missionaries arrived in Iwo, they established schools, colleges and churches. It was made mandatory by the missionaries for those who attended these schools and colleges to become christian. By so doing, they converted many young muslims who attended their schools and colleges to Christians.

Educational facilities as mentioned earlier are increasing in all parts of the Local government area. For instance, before the introduction of free primary school in the old Western Region in 1955, there were only 15 primary schools

in the whole local government area, 10 of which were in Iwo and the remaining 5 in other parts of the local government area. At that time, there were two teacher training colleges (Baptist College, Iwo and L.A.T.T.C. also at Iwo).

Primary schools rose from 15 in 1954 to 44 in 1955 and a secondary school was established. In 1964, there were four secondary schools and six secondary modern schools, Today, this local government can boast of 26 secondary schools, 51 primary schools, one technical college and one college of education.

The effect of this increase in educational institutions is the growth of employment opportunities for both male and female outside their homes. Majority were employed to teach, others as clerks and messangers in the ministeries.

This introduction of Western education had significant influence as mentioned earlier, on the Muslim converts. Many muslims and traditional religious adherents were converted into christians and there may be more christians than muslims today among the younger residents of this local government area especially among those with some education. Therefore, Muslim ideals (especially that of marrying up to four women and that these wives be in purdah) are giving way gradually to christian ideals - marriage of one wife and less restriction of such a wife at home. Christian women are allowed to go out and take up paid jobs rather than staying at home as complete housewives.

The local government town planning authority's study of 1969 indicated that only 13.5 percent of the women were in paid employment (majority are primary school teachers and nurses) in Iwo, but this figure rose to 23.6 percent in another separate study done by Raimi in 1978.

This pattern, whereby women are seldom allowed to take up paid employment is not peculiar to Iwo or even to the Yoruba but it is also common in Nigeria. For instance, Lucas (1971) indicated that women formed only 2.1 percent of the total wage employment in Nigeria in 1956. This figure rose to 5.1 percent in 1960 and to 7.2 percent in 1965 and the trend has undoubtedly continued since then. A Nigerian delegate to a conference on educational and Employment possibilities for women in 1971 is quoted as saying, "Jobs abound for women, but they aren't qualified". (quoted in David Lucas, 1971). This situation has been changing now. For instance Lucas (1971A) indicated that in 1960, female constituted 37 percent of the total enrolment in primary schools in Nigeria as a whole. By 1966, this proportion had increased to about 40 percent. For secondary school (general) the figure of enrolment for the two dates were 21% and 31% for secondary (technical and vocational), they were 2% and 9% and for secondary (teacher training) they were 23% and 25%.

3.3 DATA COLLECTION

Data for this study were generated from the information that were collected through intensive formal interviewing of randomly selected ever-married women in the local government area. Also the data we collected through the checking of

the records of the family planning clinic of Iwo General Hospital and the records of the local government council itself were used to supplement the information collected through the intensive interview. Personal observations of many households that were included in our sample were made which assisted in appraising the responses of our respondents

Sampling: All ever-married women in Iwo local government area constituted our universe. We selected randomly one thousand five hundred of them. For the purpose of selecting our samples, Iwo local government was divided into two groups. Iwo and her environs constituted the first group and other settlements relatively far from Iwo constituted the second group.

Group 1 consisted of Iwo, Oluponna and Ile-Ogbo. This is because these settlements expanded from their original locations to join Iwo so that it becomes difficult especially for outsiders to identify where one settlement ends and where the other one starts.

Secondly, we grouped these settlements together because they enjoy the same facilities, for instance, they use water from the same water works, they use the only General Hospital at Iwo and electricity was extended from Iwo to these other settlements. To the taxi drivers too, travelling from Iwo market place to either Oluponna or Ile-Ogbo constitutes only a drop that would command charges of only 30k. Therefore for the purpose of this study, these areas were regarded as part of the city of Iwo. These settlements together had 239,201 people in 1963 when there were only 336,821 people

in the whole local government area in the same year (population census of Western Region, Vol. 1, 1963).

As mentioned earlier, there were four wards in the city namely: Oke-Adan, Gidigbo, Molete and Isale Oba. However, because of our new definition of Iwo, we had six wards because Ile-Ogbo and Oluponna constituted a ward each.

We organised a preliminary survey of this area before the real study with a good map with the aim of dividing the whole six wards into clusters. We did this for two main reasons. First to estimate the population of the city (as defined above) and secondly for the purpose of choosing our samples.

For the purpose of estimating the number of households in each of our clusters, we classified the houses into two categories: single floor dwelling units and multiple-floor blocks. The single floor dwelling unit are more common than the other type and have on the average eight habitable rooms while the multiple floor blocks have between 12 and 16 habitable rooms. Blocks of flats are very uncommon and are limited to the Iwo local government housing estate and the Kekere's housing estate and also the few recent buildings along the new Iwo-Ibadan road.

On the whole, the four wards in Iwo were divided into, 81 roughly equal clusters, Oluponna ward, 19 and Ile-Ogbo were, 21 also roughly equal clusters. We have on the whole 121 roughly equal clusters for the six wards. These clusters were numbered from 1-121. We then selected one cluster randomly in each of the six wards in the city - Isale-Oba, Molete, Gidigbo, Oke-Adan, Ile Ogbo and Oluponna, for further

preliminary study. From this study, we found the following total number of households*.

Table 3.2

Distribution of Clusters in Iwo

Wards	Cluster No.	No. of HH in a Cluster
Oke-Adan	40	512
Isale-Oba	6	572
Molete	32	492
Gidigbo	20	481
Oluponna	114	472
Ile-Ogbo	92	506

From the above table, we assumed that about 500 households are living in each of our clusters. Also we found that between 9 and 8 persons are living in each household in Isale-Oba, Ile-Ogbo, Oluponna and Molete wards. However, in Gidigbo and Oke-Adan wards where more housing units were found, we found that between 6 and 7 persons are living in such household. On the basis of these observations, we assumed that about 8 persons are living in each household in the city of Iwo.

Putting all these observations into consideration, we estimated the total population for Iwo, Oluponna and Ile-Ogbo as of November 1986.

* In this study, a household is defined as a group of people who eat together from the same pot and are living under the same roof plus relatives or non-relatives living in the boys quarters.

Total number of Clusters for Iwo = 81
 No. of households per Cluster = 500
 Average No. of persons per household = 8
 Total population for Iwo as of November 1986 = $81 \times 500 \times 8$
 = 324,000

Using the same approach, we got 84,000 for Ile-Ogbo and
 76,000 for Oluponna.

Table 3.3

Estimated Population of Iwo, Ile-Ogbo, Oluponna
November 1986

Settlements	Estimated Population (1986)
Iwo	324,000
Ile-Ogbo	84,000
Oluponna	76,000

As mentioned earlier, the second objective of our preliminary study of Iwo and its environs and the consequent division of the words into clusters was to assist us, in the selection of the samples. Also as mentioned earlier, the clusters in the six wards were numbered from 1 to 121 and ten clusters were randomly chosen using systematic sampling procedure.

We started from 4 that was randomly selected and added 12 continuously until a sample of ten clusters were chosen. We added 12 because 10 is about $1/12$ of 121 which is the total number of clusters.

Table 3,4Selected Clusters

Cluster No.	Name of most popular street in the Cluster
4	Olukotun
16	Hospital Road
28	Oke Afo
40	Alawe
52	Eleru
64	Kondo
76	Kajola
88	Station Road
100	Alagbaa
112	Baale

The name of the most popular street in each of the clusters was used to identify each cluster as shown on the above table. Also the clusters that were selected into the sample were thus given names to make identification easier.

We have estimated earlier that about 500 households live in each cluster. We were therefore unable to include all the households in the sample. Sampling procedure was carried onestep further.

We assigned a number to each of the houses in each of the selected clusters. From our observation, we discovered that there are about 200 houses in each of the clusters. The interviewer were instructed to enter every 4th house so that a total of 50 houses were used in each of the cluster. The interviewers were also instructed to list the number of

households in each of the houses they entered and then pick randomly two households in each of the houses and interview only the two households chosen. In all, about 100 households were interviewed in each of the selected clusters. Since 10 clusters were chosen in this group, 1000 households were chosen in the city of Iwo (as defined previously)

Since some of the households had two or more married women the actual woman interviewed was determined by ballot. The process used to select the woman that was interviewed was discussed sufficiently with the interviewers during the training session.

In group II which consisted of the settlements that are relatively far from the city, a sample was chosen randomly. The settlements were arranged in two groups depending upon their population sizes. Those with population size of 3,000 and above in 1963 were grouped together using 1963 census figures the following nine settlements fell into this group.

Table 3.5
Population Distribution of Villages with 3,000 and above
People (1963)

<u>Settlement</u>	<u>Population Size</u>
Kuta	17,508
Ogbaagba	8,820
Telemu	7,217
Agberire	6,346
Bode Osi	4,658
Ajagba	3947
Oyediran	3,896
Isero/Obamore	3,258
Ile Ogo	3,122

Source: Population Census of Western Nigeria 1963 Vol.1

We were unable to do our interview in all these settlements because of time and financial constraints. We, however, pick randomly one of these settlements, where we did our interview intensively.

The names of the settlements were written in small pieces of paper and folded after which one was picked, Bode-Osi was thus picked.

Bode-Osi is about 16km from Iwo and along Iwo-Ejigbo road. Original settlers in Bode-Osi came from the city of Iwo just to farm. Later they began to live there only to come to Iwo at the end of the week. Today, the present generation of Bode have settled down completely only to come to Iwo on ceremonial occasions.

Primitive subsistence farming is the major occupation. Farming consists of the cultivation of yams, cassava, maize etc. by men with the assistance of their sons.

Trading is also gaining ground in Bode-Osi especially among women in recent years. Also some younger residents of Bode-Osi are now learning trades like tailoring, carpentry, bricklaying and driving etc.

The first primary school was established in Bode-Osi in 1946. It was the first school in the whole area so that people usually come from neighbouring villages to attend the school. Such villages include: Ile-Ogo, Ikonifin, Elepo, Iwara, Ajagba and Ogede. A secondary school was also established in Bode-Osi in 1980 by the last civilian administration.

There is a maternity centre built by the local government council. There is no form of recreational facility, no

petrol station or wholesale business house, no pipe borne water and no electricity.

The houses in Bode-Osi like those in traditional areas of Iwo were crowded together. They are not numbered and do not face any street.

During our preliminary survey of the village, we divided the whole village into five clusters. The clusters were given numbers 1-5. These numbers were written in small pieces of paper and folded. Clusters number 2, 3 and 5 were chosen.

We also estimated that there are about 100 houses in each of the clusters. Systematic sampling procedure was used to pick the houses that were included in the sample as the interviewers were instructed to enter every 2nd house so that 50 houses were used in each of the selected three clusters.

The interviewers were also asked to list all the households in a house and pick the woman to be interviewed in polygynous households. Thus 300 households were chosen in this group.

The last group of our sample area consisted of all settlements with less than 3,000 people according to 1963 population census. These are as shown in Table 3.6.

Table 3.6

Population Distribution of Villages with less
than 3,000 People (1963)

<u>Settlement</u>	<u>Population</u>
Ikire-Ile	2,760
Asa	2,528
Asamu	2,432
Mogunala	2,171
Kuta	1,996
Papa	1,943
Elemowu	1,933
Fagbayibi	1,815
Ikonifin	1,751
Awuje	1,655
Awokekere-Bale	1,546
Ologun	1,535
Ikoyi	1,420
Elemo Olukotun	1,246
Oweru	1,228
Eleji	1,217
Foritaje	1,200
Jagun	1,128
Agbojukunrun	1,111
Iwo-Oke	1,002
+ Olopon	851
Tankoka	848
Iwara	742
Idiroko	551
Yakoyo	543
Akinyele	482
Total	37,635

It was not possible to do our interview in all the villages listed in table 3.6 because of the reasons mentioned earlier. We decided to pick one of the villages randomly. We wrote the names of the villages on small pieces of paper and folded them. Then we picked one and thus Fagbayibi was picked.

Fagbayibi rose from a farmland to her present status. The farmland belongs to the people of Fagbayibi's compound of Iwo but because of the distance, the inhabitants decided to stay on the farm and return at the end of every week. The population of Fagbayibi began to grow and also the land area began to expand. Almost all families in Fagbayibi have houses also in Fagbyibi's compound in Iwo. They usually come home on ceremonial occasions and also they usually carry to Iwo their corpses for burial.

The inhabitants of this village are predominantly farmers engaged in the planting of food and cash crops. Most of the present generation especially those who learnt a trade have moved to Iwo leaving the old in the village.

There is a primary school which was built in 1955 but no secondary school. Children have to move out of the village to receive secondary education either in Iwo or Ogbaagba another nearby settlement having a secondary school. The head and his sons constitute the manpower of individual family farming, assisted sometimes by son-inlaws who by custom are required to help.

The village was regarded as a cluster for the purpose of selecting the samples. Just about 205 houses were

identified during our preliminary survey of the village. We instructed our interviewer to enter all the houses and to pick randomly one household in each of the houses for interview. In cases of polygamous families the women to be interviewed was decided, by ballot. Two hundred households were eventually included in the sample.

The proportion interviewed in each of our three groups was based on the 1963 census figures. Although we recognised the problem associated with the use of 1963 census in making this type of policies, but we have no choice since the 1963 census is the officially recognised censuses even today. Thus the sample size of 1,500 and distributed as shown in Table 3.7.

Table 3.7

Selected Sample size in each of the survey locations

GROUPS	1963 POPULATION	PROPORTION OVER TOTAL POPULATION	SAMPLE SIZE SELECTED
I IWO	239,723	71.0	1000
II BODE-OSI	58,852	17.8	300
III FAGBAYIBI	37,635	11.2	200
TOTAL	336,210	100.0	1,500

In the final analysis however, Bode and Fagbayibi were combined to make the rural areas of the local government while Iwo and its environs constituted the urban areas. Although we presented the characteristics of Bode Fagbayibi and Iwo separately in chapters four and five to enable our readers to see at a glance the difference in the socio-economic

characteristics of our survey locations before Bode and Fagbayibi were combined to represent the rural areas of the local government.

3.4 QUESTIONNAIRE DESIGN

We prepared an interview schedule which was used for the study. The interview schedule was written in English and translations were made where necessary by the interviewers who were trained in such a way that they would be able to translate correctly and in the same way.

Controlled interviewing on the basis of a formal schedule is rather alien to the culture of the groups which we are studying. consequently, many round-about approaches were used in order to obtain reliable responses to the specific items on the schedule especially question on age of the respondents and also questions related to the reproductive performances of the respondents. In order to minimize errors, field-workers were not only trained in the use of schedule as well as the complicating sampling procedure but were made to study carefully the literature on historical events for determination of ages in Nigeria (Ade Ajayi and A. Igun, 1963).

The interview schedule was divided into two main sections. The first section was the household section which was filled by heads of households. Questions in the second part were answered by every married woman.

The second part of the schedule included questions on background characteristics of the respondents and their husbands; urban or rural background, age; religion, dwelling

unit, literacy, education, occupation, income and relationship with head of households.

The third section deals with marriage and reproductive history. Question on marital status was included. We thought that asking direct questions on children especially in this type of society might not yield good results, hence we used an indirect approach to get information about the actual reproductive performance of the respondents. We also made provision for a table on the schedule where further information about all the children born by each of the respondents were given. Further questions that would help us know, how the respondents felt about raising children were included.

The last section of the schedule deals with the opinions of the respondents and their attitudes towards and practices of family planning. Questions on knowledge, attitudes and practices of family planning were included. Questions on family planning clinic attendance, reasons for attending the clinic and how many children they had before attending the clinic were also included.

Experience from studies done in many developing societies shows that determination of the respondents' incomes is usually difficult even when the respondents are ready to co-operate fully. This is so because a large proportion of the women are illiterate and their main occupation is petty trading. Therefore data on incomes are usually estimates since those who are traders would not keep any account and as such will not be able to say categorically how much they earned and some even spend whatever they realised from their trading immediately.

3.5 HOW THE INTERVIEW WAS RECEIVED

The fieldwork was successful judging from the quality of work done on the questionnaires and also from the oral reports of most of the interviewers. However, a number of specific problems were naturally encountered most of which were later solved.

The first problem encountered was the reluctance of the women in Fagbayibi's village to co operate with the interviewers. The interviewers that were sent there did not do any interview for the first two days of the exercise. One of the interviewers said:

We introduced ourselves to them, and
told them the objectives of the study,
yet they refused to answer our questions.

In fact we discovered later that there had never been a sample survey of this type in the village. We therefore employed two teachers in the village, trained them and asked them to assist the interviewers in the administration of the questionnaires. The village women co-operated fully with these teachers because they have been interacting with them (the teachers) for some time.

Another specific problem, especially encountered in Bode, was related to their occupations. Most of the women in Bode were traders who usually attended markets located sometimes about six to eight kilometres away. They usually left home very early in the morning and returned very late at night. This gave rise to many unsuccessful calls at the homes of these women. To solve this problem the interviewers were instructed to sleep in Bode so that they could have some

interviews done in the evenings. One interviewer in Bode has this to say:

Most of the women leave home as early as 7 a.m. for the daily markets that are situated in Bode and its environs and will never come back until late in the evening. And when they come back they look so tired and not ready for any interview.

Another problem which was very popular especially in Iwo city was the problem of getting women in purdah interviewed. We did not envisage this problem at the beginning and as a result we did not include females in our first list of interviewers. An interviewer reported thus:

As I was about to enter a house, the head of the household shouted on me that I should not enter as his wife was with him. The husband came out after some time and asked me what I was looking for. I told him my mission but he said that I could not see his wife because she is 'eleha'.

We immediately arranged for women interviewers who were also sufficiently trained. The women interviewers interviewed women in purdah.

Another problem encountered was created by some literate women in Iwo city. Some of such women had been interviewed on several occasions in the past and therefore they started asking for gifts. One of the interviewers in the area has this to say:

Most of the literate women told me that they had been over burdened in the past with this type of interview without any reward. So they openly demanded for gifts.

We solved this problem with persistent persuasion and by letting them know that the result of the study will assist the government in making policies that are beneficial to them in future.

Another very important problem in fertility surveys in Developing countries like Nigeria is the reluctance of women especially the illiterate ones to answer questions on the number of children they have. They believed that counting the number of children a woman has was against the mores of especially the Yoruba as one of the interviewers put it:

Most of the illiterate women told me that they would not give me the names of their children as doing so means counting the children. It is believed by the women that some of the children, if not all of them, would die if they are counted.

However, we solved this problem by the way we asked questions on reproductive history of the respondents. We first asked them to name their children who were with them at home as of the day of the interview. Then we asked them to list those that were somewhere else and later to name the children who were born alive to them but no more living.

There was also the problem of listing the names of the respondent's sisters' or brothers' children together with their own especially in illiterate households. The experience of one of the interviewers is reproduced below:

A woman who married in 1984 told me that she had four children as of the date of the interview (November 1986). Then I asked her how she managed to have four children within two years of marriage but she told me that the first two were born by her junior sisters and the children usually call me 'mummy' because I am older than their mothers.

This type of problem is not peculiar to our study because it is caused by the classificatory kinship terminology used by the Yoruba. After serious probes especially in

doubtful cases, we were able to separate actual children of a woman from her other relations.

We also discovered that some of the respondents used to dodge questions on family planning especially those that related to the use of contraceptives when the husband or some other persons were around and when they did, their responses looked so doubtful. An interviewer has this to say:

A University graduate in ward six of Isale-Oba told me that she had never heard anything about family planning and that I should stop asking her further questions on family planning. Thus, I stopped the interview for that day. The next day, I went to meet her in the school where she was teaching. She then asked "How can I be talking of contraception in the presence of my husband? It is true I used contraception but not to the knowledge of my husband" I felt sorry about it and we then completed the interview.

Finally, the longer the interviewers stay on the field, the more they acquired experience which they used to solve most of these problems.

3.6 CHOICE OF ANALYTICAL METHOD

A number of statistical techniques are available for use in demographic studies. The most commonly used of these are multiple correlation and regression techniques, mean number of children ever born, birth interval dynamics, cohort analysis of retrospective fertility etc. However, we have used in this study only standard demographic techniques such as (1) mean number of children ever born, (2) birth interval dynamics, (3) cohort analysis of retrospective fertility and where appropriate, (4) the chi-square tests and (5) standard-

ization especially where we observed that the age-specific values do not show consistent differences from age to age and it is suspected that differential age distribution may have affected the overall mean values that could be used alternatively in exploring differential fertility.

In a study of this nature, fertility trend based on children ever born is desirable. However, this type of trend will ordinarily require data for various dates in the past. Such data enable the researcher to study changes in levels from one date to another.

Since our study is a one-round study, information on fertility trend could only be obtained from data provided by women on the number of children they have ever born together with the children's dates of birth. This approach requires that children ever born per woman be given for specified durations of marriage beginning with marriages of one year's duration and ending with marriages of thirty-five years duration. These durations are combined with the women's dates of marriage. In effect, the table shows the average number of children achieved by marriage cohorts during segments of their reproductive life as well as total number of children achieved ultimately.

In addition to a direct question on the number of children ever born alive, we also provided in the questionnaire, a table for further information (name, date of birth, sex etc) about each child. Since the children were listed in order of their birth, it was convenient to construct another table showing the total number of children a woman has born alive at given durations of marriage.

The respondents were arranged into groups of marriage dates to make the analysis less cumbersome, although single dates would have been ideal because they would avoid the problem of using as denominator for the births a figure less than the total number of women in the group as marriage duration increases.

The advantages of this kind of analysis are mainly first, to enable us compare young and old women at equal durations of marriage. In other words, we can see how the average number of live births achieved by say, the marriage cohort of 1956-60 when their marriage was only one year old, compares with that of 1981-85, that is a comparison of fertility in the late 'fifties' and the early 'eighties'. This would not be possible if we had only average number of children ever born alive per woman up to the date of the survey.

This type of comparison would have been impossible because the younger women are at various stages of their reproductive career while the older women have completed childbearing. And since it is not known whether the younger women will ultimately exceed or fall short of the level of fertility already attained by the older women, comparison of the younger and the older women in terms of their achieved family size at the time of the survey cannot be meaningfully made. It is because we have the dates of birth of the children that we are able to study the history of reproduction of the women or the number of births achieved on specific dates before the survey. Such information also

enables us to observe the family building characteristics of our respondents over the period of childbearing either rapidly at shorter birth intervals or slowly at larger birth intervals. Thus the analysis of birth intervals enables us to explain the high or low frequency of births that we observed.

Since the date of marriage was also given by the respondents, it was easy to record the interval in months between marriage and the first birth; between the first and the second birth etc. in a table. These intervals were then summarized by computing the mean interval. The sum of all the intervals in each cell or all birth order was divided by the total number of women in the date of marriage group to obtain the mean or average interval. This was also done for each order of birth (i.e. marriage and first birth, first and second birth etc) and for all orders of birth taken together. The method of computing the overall mean for each date of marriage or age group is discussed on page

CHAPTER FOUR

EVALUATION OF THE SURVEY AGE/SEX DATA

A well known problem in demographic surveys in developing countries is that of the reliability of the data collected. This is probably due to the level of literacy in these countries and their cultural backgrounds. This is manifested in the reluctance of many people in these countries to answer questions, especially those that are related to fertility and family planning which are very intimate questions. When such questions are answered by predominantly illiterate persons, the question of the reliability of their responses becomes relevant. It is against this background that the evaluation of our survey data is carried out below.

4.1 THE AGE STRUCTURE OF THE POPULATION

One of the most basic and probably the most important single set of demographic data is that on age. The age structure of a population tells much about the demographic history of the population. For instance, it tells the past effects of mortality, fertility and migration on a given population at any point in time. Data on age composition are important in themselves, for the description and analysis of other types of demographic data and for the evaluation of the census or survey of a population.

Age in this study is defined as age as of last birthday. Whatever definition is used, however, there is no avoiding errors, especially among populations where records of births

are seldom kept. Shryock and Siegel (1973) point out that errors in tabulated data on age may arise from any of the following types of errors, of enumeration coverage errors, failure to record age and misreporting of age. Coverage errors are of two types. Individuals of a given age may have been missed by the census or survey or erroneously included (e.g. being counted two or more times). The first type of coverage error represents gross under-enumeration at this age.

In addition, the ages of some individuals included in the study may not have been reported or may have been erroneously reported by the respondents or erroneously estimated by the interviewer or erroneously processed by the researcher himself. Moreover, in countries where birth records are seldom kept as mentioned earlier or where birth records are poorly kept, ages are usually subject to guess work. This is very common in less-developed societies of the world.

Where information on age is a matter of guesswork by either the respondent or the interviewer, another very important and common error is known as 'age heaping'. This is the tendency to report one's age as ending in preferred digits (usually zero or five and to a lesser extent 2 or 8).

Apart from questions directly related to fertility, we also included in the questionnaire a question on the composition of households including the ages and sexes of the members. The data used in this section are drawn from the responses to this question. The single-year age distribution in Figure 4.1 shows a pronounced shifting upwards

or downwards of ages. The figures recorded for those aged less than one, for instance, are relatively low in Iwo, Bode and Fagbayibi. Some of them were inadvertently not enumerated as of the time of the interview. This may be particularly true of the illiterate households. This observation, however, may not be peculiar to our study, because in most data especially in less-developed countries, the ages of small children are often reported a little higher than they really are. For instance, Mott (1974) obtained a similar result in his study of Ebendo, a mid-Western Ibo village. Shryock and Siegel (1973);, also writing on age misreporting, mention that age '0' is always underreported. The explanation they use is that '0' is not regarded as a number by many people and because parents may tend not to think of newborn infants as regular members of the households.

Figure 4.1 also shows considerable age heaping especially on ages ending in five and zero. This is particularly true in all the survey locations but more pronounced in Iwo and Bode. This is so because most people prefer to 'round off' their ages especially in the absence of birth certificates, for example, many people who are either eighteen or nineteen may report themselves as twenty years of age. Ajit Das Gupta (1958) noted that age heaping is most pronounced among populations or population sub-groups having a low educational status.

The causes and patterns of age or digit preference vary from one culture to another but preference for ages ending in '0' and '5' is quite widespread. In some cultures

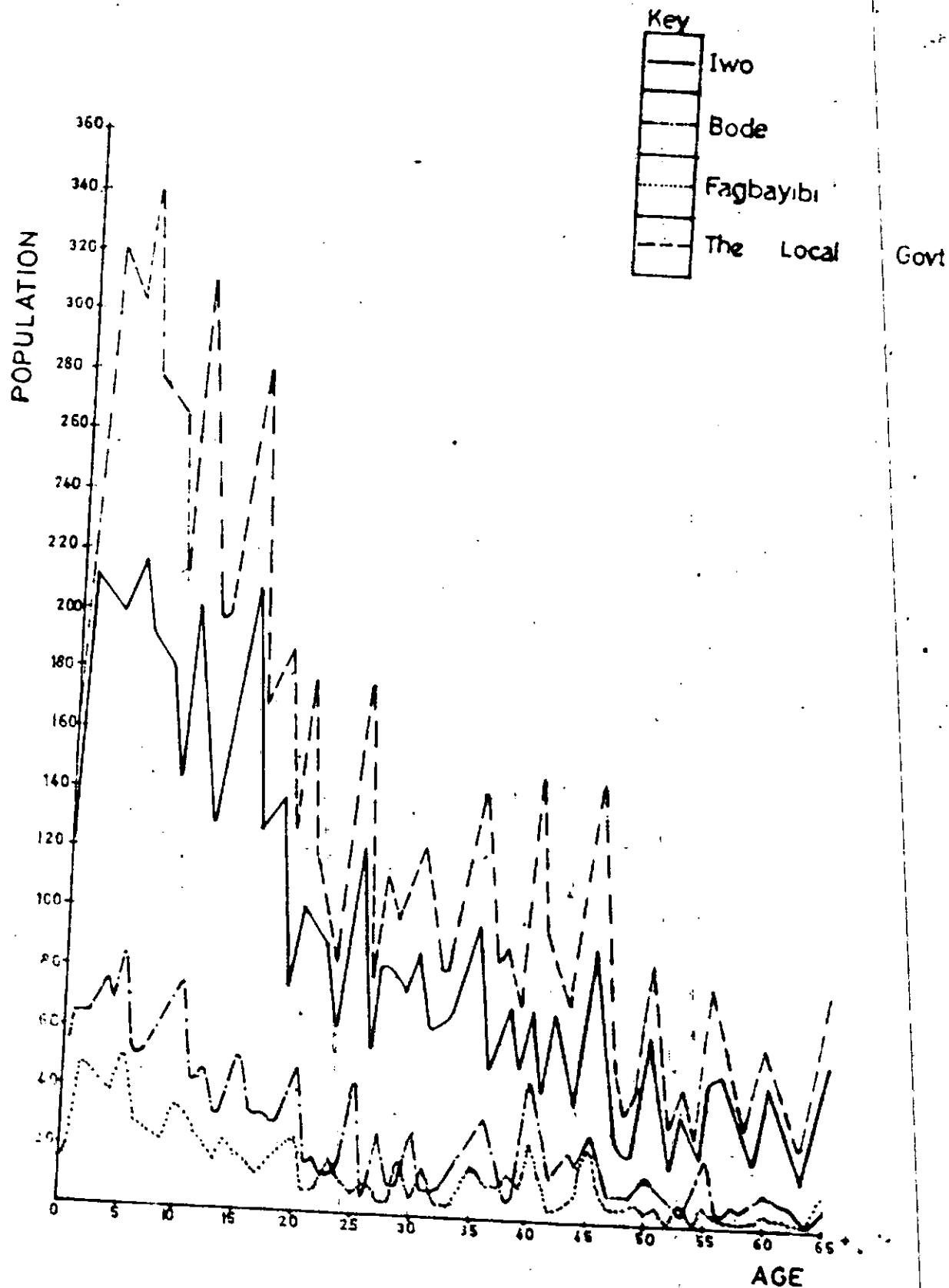
certain numbers are specifically avoided (e.g. 3 or 13). For instance Olusanya (1969) noted in his study of rural-urban migration in Western Nigeria that the digit preferred is an even number. The 'heaping' on even numbers was very regular and clearly reflected the culturally determined preference for two, four or multiples of these to one, and three among the Yoruba. Explaining this trend, Olusanya wrote: "Among the Yoruba, three gifts are considered to be the fits of the devil and are thought to bring ill-luck. Either one is added to make four or one is subtracted to leave two". In the same survey, of children they considered good avoided figures such as 3, 5 and 7 and their preferences were concentrated on 4, 6, and 10 children. However, the heaviest concentration in Olusanya's study, as is common in many populations, was on figures ending in '0'.

The extent of age heaping in our data is demonstrated with the use of some indexes of age preference. Various statistical measures have been developed to deal with heaping on individual ages or terminal digits (Shryock and Siegel, (1973). The simplest measures which we shall first relate to our data assume that there are equal numbers in each age over some age range (such as a 3-year, 5-year or 11-year age range) which includes and preferably, is centred on the age being examined. For instance an index of heaping on age N may be calculated as the ratio of the enumerated population aged N to one-third of the population age N-1, and N+1. Using an index of heaping on age N, we have:

$$\frac{PN}{\frac{1}{3}(PN-1 + PN + PN+1)} \quad K \text{ where}$$

FIG. 4.1 :

SINGLE YEAR AGE DISTRIBUTION
FOR IWO LOCAL GOVERNMENT, 1986



*PN = Population aged N

PN-1 = Population aged N - 1

K is constant 100

Thus using an index of heaping on age 30 in our data we have:

$$\frac{P_{30}}{\frac{1}{3}(P_{29} + P_{30} + P_{31})} \times 100 = \frac{123}{\frac{1}{3}(103+123+91)} \times 100 = \frac{123}{105} \times 100$$

$$= 117.2$$

The index of 117.2 computed for age 30 shows a considerable heaping on age 30. The higher the index the greater the concentration on the age examined. An index of 100 indicates no concentration on this age.

This method is used to compute indexes of preferences shown in Table 4.1. The table shows

Table 4.1

Indexes of Preference for ages ending in '0' and '5'

<u>Age</u>	<u>Indexes</u>
5	112.3
10	123.6
15	123.7
20	122.2
25	152.2
30	117.2
35	127.7
40	138.0
45	156.4
50	145.0
55	137.9
60	156.4

considerable heaping on ages ending '0' and '5'. The table also shows that index of digit preference increases with age. In other words, age heaping is relatively more prevalent among older people than the younger ones. The explanation for this is that a significant proportion of the younger generations in Iwo local government have at least some education whereas significant proportion of the older generations are illiterates and people with some education seems to have had occasion to give their ages in the past; they were able to give their ages without much difficulty, although we cannot ascertain the accuracy of the stated ages.

Whipple's index which was developed to reflect preference for or avoidance of a particular terminal digit or of each terminal digit was also applied to our data. For example, employing again the assumption of rectangularity in a 10-year range, heaping on terminal digit '0' in the range 23-62 was measured by comparing the sum of the populations at the ages ending in '0' in this range with one-tenth of the total population in the range.

$$\frac{(P_{30} + P_{40} + P_{50} + P_{60})}{\frac{1}{10} (P_{23} + P_{24} + P_{25} \dots + P_{60} + P_{61} + P_{62})} \quad K = 100$$

Thus, for the terminal digit ending in '0' Whipple's index

$$= \frac{416}{\frac{1}{10} (3347)} \quad K = 100 = 124.3$$

Similarly for terminal digits ending in '5', Whipple's index is 143.5. The corresponding figures for Philippines (1960) and United States (1960) are 156.0 and 100.9 respectively (United Nations, Demographic Yearbook 1962). This

measure also varies between 100 representing no preference for '0' or '5' and 500, indicating that only digits '0' and '5' were reported. Thus, Whipples index also confirm that there is considerable preference for ages ending in '0' and '5' among our studied population. However, this observation, as mentioned earlier, is not peculiar to our study. A comparison

Table 4.2
Responses to Specified Digit Endings

Digit Ending	IWO LOCAL GOVT.	1986	NIGERIA 1963 a	
	% Expected	% Actual	% Expected	% Actual
0	10	12.2	10	21
1	10	10.3	10	6
2	10	10.9	10	6
3	10	7.3	10	4
4	10	10.0	10	7
5	10	14.4	10	18
6	10	9.7	10	4
7	10	8.6	10	9
8	10	9.7	10	11
9	10	6.8	10	8

Source (a) Population census of Nigeria, 1963.

of our index for preferring digits ending in '5' with that of the Philippines (1960), if we disregard the time lag, shows that preferences for ages ending in '5' is less common in our survey population than it was in Philippines in 1960. However, our data show considerable heaping on multiples of '5' compared with the U.S. figure of 1960.

We want to note here that the choice of the range 23 to 62 is largely arbitrary. In computing indexes of heaping, the ages of early childhood and extreme old age are often excluded since they are more strongly affected by other types of errors of reporting than by preference for specific terminal digits. .

The procedure described was extended to provide an index for each terminal digit (0, 1, 2, 3, 4 ... 9). The population ending in each digit over a range of 23 to 62 was expressed as a percentage of the total population in the range. The results are shown in Table 4.2. Here an index of 10 percent is supposed to indicate an unbiased distribution of terminal digits, and hence presumably, accurate reporting of age. Indexes in excess of 10 percent indicate a tendency toward preference for a particular digit and indexes below 10 percent indicate a tendency towards avoidance of a particular digit. Thus data shown in Table 4.2 confirm considerable age heaping on ages ending in '5' and '0' but more pronounced (14.5 percent) on ages ending in '5' than ages ending in zero.

When age heaping in our data is compared with age heaping in the 1963 census data, striking similarities emerge. The concentration is still on both ages ending in '5' and '0'. However, age heaping is more pronounced in 1963 census than in our data and secondly there is heavier concentrations on ages ending in '0' than ages ending in '5' in the 1963 census. The explanation for small age heaping in our data than in the 1963 census may be due to the fact that a higher proportion of our population is literate

compared with the proportion of literates in Nigeria in 1963. Literate households tend to keep proper records of their ages compared with the illiterate households and hence they are likely to report more accurate ages than their illiterate counterparts. If this logic is accepted, our data on age is likely to be more accurate than the data collected on age in 1963 census. Also virtually all school-age children in Iwo Local government go to school and so giving or determining their ages was not a problem. Most of the interviewers in Bode and Fagbayibi observed that the children in these two settlements often remembered their ages earlier than their parents. The most avoided digits in our study as shown in Table 4.2 are 9, 3, and 7 which is in line with Olusanya's (1969) observation that the Yoruba tend to avoid odd numbers especially 3.

On the whole, in this particular study, there is a pronounced tendency to report age in a digit ending in '0' or '5' although this tendency is less pronounced than in many other surveys in developing countries. - There is no significant heaping at digits 2 and 8 and there appears to be a marked deficiency in the population at ages ending in digit 3, 7 and 9. The series of questions in the interview schedule inquiring into date of birth, current age, years married, age at marriage, date of marriage and ages of various children resulted in many women reconsidering earlier answers on the basis of their latter responses in conjunction with probes from the interviewers.

As mentioned earlier, age misreporting exists in all societies of the world irrespective of their level of their

economic and social development. Wolfenden (1954) for instance referring to data for the United States and Canada, mentioned the tendency to overstate age until the attainment of age 21, to understate age at adult ages, especially on the part of women and to overstate age at the advanced ages. Young adult women have frequently been suspected of understating their ages. Net omissions among women over 50 as a group may be excessive. Persons just under 65 may report themselves as 65 or older. Elderly persons tend to exaggerate their ages. Thus the problem of age misreporting is worldwide, although its magnitude varies from culture to culture. William Brass (1968) also noted that the number of African females in their teens tend to be understated and the number of females in the adult age groups to be over-stated. This bias has been attributed to a tendency among interviewers systematically to 'age' those women who are already married or mothers from the 'teen ages into the adult age groups on the assumption of a higher 'typical' age of marriage than actually prevails.

Therefore researchers have devised a means of reducing the errors, especially errors of age heaping by grouping the age data into either five years or ten years - age categories. In line with this principle, we have also grouped the ages as shown in Table 4.3 and Figure 4.2. As expected, the grouping has the effect of largely eliminating especially errors of age heaping.

Table 4.3

Percentage Age Distribution of Household Members in Iwo Local Government, 1986

AGE GROUP	IWO				BODE				FAGBAYIBI				IWO LOCAL GOVT.			
	M		F		M		F		M		F		M		F	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
0-4	483	15.7	462	16.2	149	17.4	143	16.2	97	21.0	89	18.1	729	16.6	694	16.4
5-9	475	15.4	438	15.2	144	16.8	134	15.2	86	18.3	77	15.8	701	15.9	649	15.3
10-14	411	13.3	400	13.9	124	14.5	113	12.8	59	12.6	63	12.8	594	13.5	576	13.5
15-19	359	11.7	328	11.4	99	11.6	89	10.1	32	6.8	50	10.3	490	11.1	467	11.0
20-24	228	7.4	195	6.8	51	6.0	63	7.1	37	7.9	33	6.7	316	7.2	291	6.9
25-29	227	7.4	193	6.7	44	5.1	55	6.3	19	4.1	25	5.1	290	6.6	273	6.4
30-34	186	6.0	175	6.1	37	4.3	50	5.7	18	3.8	24	4.9	241	5.5	249	5.0
35-39	163	5.3	172	6.0	48	5.6	49	5.5	29	6.2	30	6.1	240	5.5	251	5.9
40-44	134	4.4	136	4.7	77	9.0	71	8.0	32	6.1	32	6.5	243	5.5	239	5.6
45-49	110	3.6	96	3.4	32	3.7	48	5.4	30	6.4	28	5.7	172	3.9	172	4.1
50-54	92	3.0	81	2.8	23	2.7	24	2.7	13	2.8	12	2.4	128	2.9	117	2.8
55-59	93	3.0	94	3.3	15	1.8	29	3.3	7	1.5	11	2.2	115	2.6	134	3.2
60-64	84	2.8	74	2.6	9	1.1	11	1.2	6	1.3	9	1.8	99	2.3	94	2.2
65+	35	1.2	25	0.9	3	0.3	4	0.5	3	0.6	8	1.6	41	0.9	37	0.9
Total	3080	100.0	2869	100.0	855	100.0	883	100.0	468	100.0	491	100.0	4399	100.0	4243	100.0

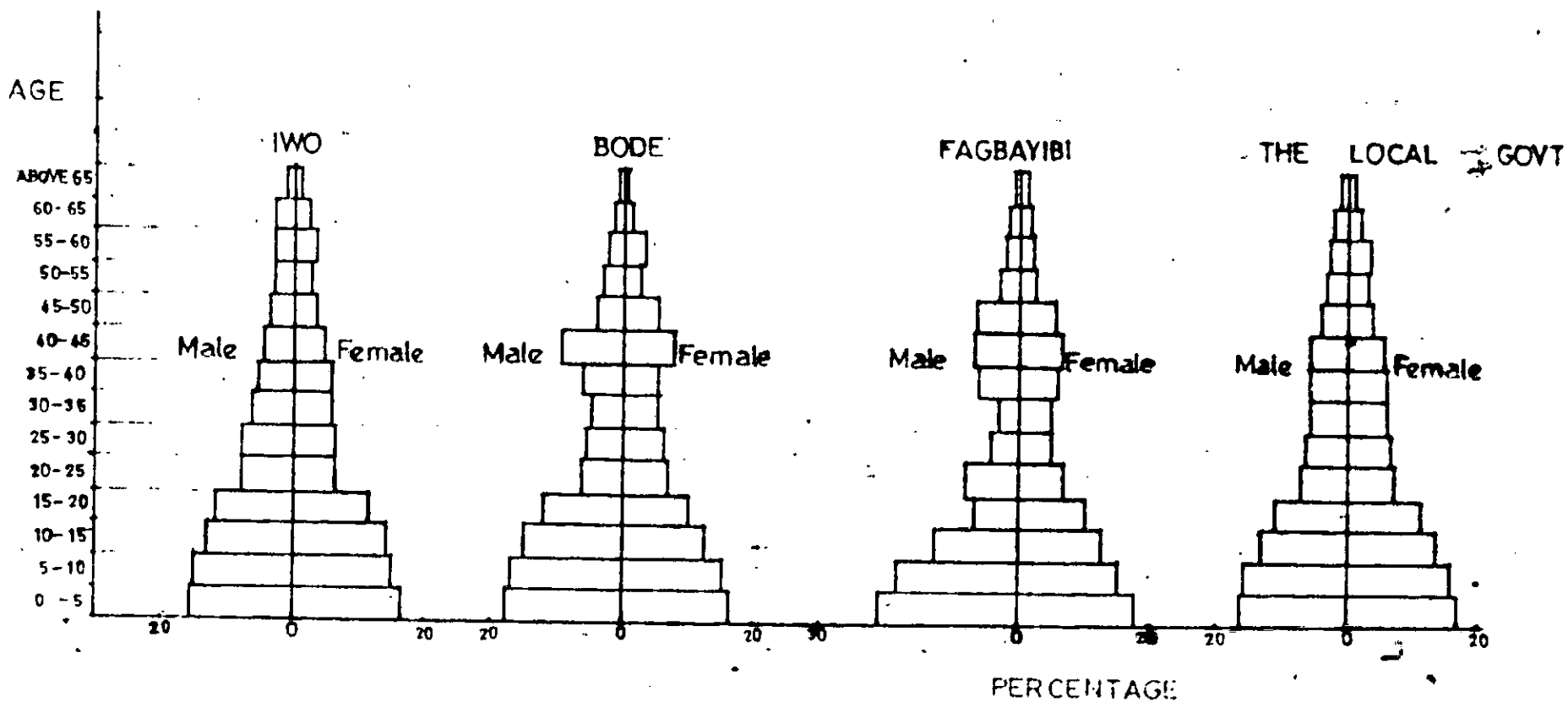


Table 4.4

Percentage of the Population in the Main Age Groups

Settlement	Under 15	15-64	65+
Iwo	44.7	53.7	1.6
Bode	46.5	53.0	0.5
Fagbayibi	48.3	50.8	0.9
Iwo Local Government	45.6	53.1	1.3
Nigeria, 1963a	43.0	54.8	2.2
Nigeria, 1968b	42.9	54.2	2.9
Nigeria, 1984c	44.2	53.4	2.4
Ghana, 1960d	44.5	52.4	3.1
U.S.A. 1960d	31.1	59.7	9.2

Sources :

- (a) Population Census of Nigeria, 1963.
- (b) FOS Rural Demographic Sample Survey, Nigeria, 1965/66, Lagos 1968.
- (c) NFS, (National Population Bureau, 1984)
- (d) United Nation Demographic Yearbook 1965

The expected shape of the age-sex structure of a typical population is pyramidal with a broad base and tapering to an apex at the oldest ages. The base represents the population of children under five years while the apex represents the oldest members. The pyramid is usually divided into two; the left side shows the proportion of males, while the right shows females. The shape is like a pyramid because the number of persons born within the same period becomes smaller and smaller with increases in age owing to the effect of mortality.

This typical shape, however, may vary from country to country. The departure from the ideal "pyramidal" shape may be due to a number of factors, principal among which are the growth and death processes that the population undergoes in time, and distortions due to differential mortality and migration rates of males and females within the population, there being fewer deaths at the younger ages and higher female deaths during child-bearing age. Also between the ages of 15 to 25, more young adult males than females undertake migration to urban centres to work places and institutions of higher learning in less-developed societies. Moreover, irregularity in the structure may be due to problems in the completeness of the census recording like insertion of wrong age due to ignorance

The age distribution of the sample population reveals distortions from the normal model discussed above. There is an unusually heavy concentration between ages 35 and 49 especially for Bode and Fagbayibi. While age misreporting might be used to explain part of the population concentration on those ages, migration is another factor that can be used to explain the situation. In 1981, a village very near Bode (Oronnu village) was abandoned because of the spread of guinea worm disease in the village. While the younger ones moved to the city of Iwo either to continue their education or learn a trade, the older generation moved to Bode and went to their farms in the morning, returning in the evening to Bode which is just a little over three kilometres away from their farms. Thus, those who stayed in Bode were predominantly old men with their wives.

As for Fagbayibi, the heavy concentration of the young and the very old people is due to the fact that educational facilities beyond the primary level and other modern social and economic amenities are not available in the village. Children have to move out of the village to Iwo immediately after their primary education to either receive higher education or learn a trade. Therefore, the village is left with fairly old people and children who are still in primary school or are not old enough to attend school.

Apart from these peculiar cases of Bode and Fagbayibi the population distribution of Iwo city and that of the local government look similar to the population distribution of other African countries. As shown in Table 4.4 for instance, 45.6 percent of the population was under 15 years of age and 1.3 percent was 65 years of age while 53.1 percent of the population was between 15 years and 64 years of age. These figures were compared with data for Nigeria, (1963, 1966, 1984); Ghana (1960) and United States (1960). Except for United States, the structure of the populations of all other countries or areas of a country shown in the table are very similar. The dependency ratio for our sample population, though higher than the dependency rates computed for Nigeria in 1963, 1966 and 1984 respectively is still fairly comparable and illustrates youthfulness of African population.

The relatively low proportion of population in age group 65 years and over (1.3%) confirm the misreporting problem for the older group which we mentioned earlier, also the rather low proportions of the population in age

group 0-4 when compared with other African data as shown in Table 4.4 is due partly to age misreporting mentioned earlier and secondly to another factor mentioned that our population is educationally more advanced than any of those African countries and one may be tempted to accept our data as more accurate than any other data shown on the table. The age distribution is tested statistically below.

The sex-age composition of the population of Iwo Local government is also compared with the age-sex composition of Nigeria 1963 and some other selected African countries as in Table 4.5. The first two age groups i.e. '0-4' and '5-9' are fairly comparable with the sex age composition of Nigeria, 1963. However, from age group '15-19' the sex-age composition of Nigeria, 1963, seems to be less consistent than the sex age composition of Iwo. The explanation for this is as mentioned earlier that there are more educated people in Iwo local government in 1986 than Nigeria as a whole in 1963.

Table 4.5

Percentage Age Distribution of Iwo Local Government and
Some Other Selected African Countries

Age Group	IWO LOCAL GOVT.		NIGERIA a		Ghana b		DAHOMAY c	
	M	F	M	F	M	F	M	F
0 - 4	16.5	16.4	16.6	16.7	18.8	19.6	19.0	18.8
5 - 9	15.9	15.3	15.5	13.7	15.1	15.2	14.9	14.7
10 - 14	13.5	13.5	11.2	9.2	10.5	9.8	12.7	12.5
15 - 19	11.1	11.0	8.5	10.1	8.1	7.9	10.8	10.6
20 - 24	7.2	6.9	11.0	12.2	7.9	9.6	9.1	8.9
25 - 29	6.6	6.4	9.4	10.1	8.3	9.2	7.6	7.5
30 - 34	5.5	5.8	7.4	7.8	7.1	7.4	6.3	6.2
35 - 39	5.5	5.9	4.8	4.0	5.8	5.3	5.1	5.1
40 - 44	5.5	5.6	4.4	3.6	4.9	4.4	4.1	4.1
45 - 49	3.9	4.1	2.5	2.5	3.6	2.9	3.2	3.3
50 - 54	2.9	2.8	2.3	2.9	2.9	2.5	2.5	2.7
55 - 59	2.6	3.2	1.8	2.0	1.8	1.5	1.8	2.0
60 - 64	2.2	2.2	2.5	2.9	1.7	1.7	1.3	1.5
65+	0.0	0.9	2.1	2.3	3.0	3.0	1.6	2.1

Sources: (a) Population Census of Nigeria, (1963)
 (b) Population Census of Ghana (1969)
 (c) Van de Walle (1975; 623)

The age ratio method is based on ratio of successive ages. It is a ratio of an enumerated age or age-group to the average of its two adjoining ages or age-groups. For instance age ratio for age 5 is number of population in age 5 divided by half of population in age 4 plus population in

age 6 multiplied by 100 Thus age ratio for

$$\text{age 5} = \frac{P_5}{\frac{1}{2}(P_4 + P_6)} \times 100.$$

Age ratio should normally show little deviation from 100 except at advance ages or as a result of major fluctuations in past birth rates, although such fluctuations should not be such as to think that they are unnatural. Increase can arise if a significant proportion of births are postponed. Up to about age 18, the ratios are normally similar for males and females. From ages above 20, however, the attraction force for rounding up ages is usually stronger in the case of females than in the case of males. At older ages, the result for males are always as erratic as for females.

The age ratio of the sample populations is presented in Table 4.6 and Figure 4.4. The ratios do not deviate significantly until age 20 where a decline of about 19 percent and 21 percent is observed for males and females respectively. From age 20, however, no other significant deviation from 100 occurs until age 40 where an increase of about 18 percent and about 37 percent are observed for males and females respectively. As expected, the deviations for both males and females are substantial at older ages. On the whole, it seems, the ratios for females deviate much more than the ratios for males especially from age 35 to age 59. The deviations in age ratios for Bode and Fagbayibi are much more pronounced especially on age groups 40-44 and 45-49 for Bode and age groups 15 - 19 and 20 - 24 for Fagbayibi. The reason for this trend has been mentioned earlier: that

distortions in age structure occur more in Eagbayibi and Bode because of the relatively low level of literacy in these two survey locations and consequently higher age misreporting than what is observed for Iwo and the entire local government.

Table 4.6
Age Ratios of the Population of Iwo Local Government,
1986

Age Group	IWO		BODE		FAGBAYIBI		THE LOCAL GOVT.	
	M	F	M	F	M	F	M	F
0 - 4	-	-	-	-	-	-	-	-
5 - 9	106.0	101.6	105.5	104.7	110.3	101.3	106.0	102.2
10-14	98.6	104.4	102.1	101.3	100.0	99.2	99.7	103.2
15-19	112.4	110.2	113.1	101.1	66.7	104.2	107.6	107.7
20-24	77.8	74.9	71.3	87.5	145.0	88.0	81.0	78.6
25-29	109.6	104.3	100.0	97.3	69.1	87.7	104.1	101.1
30-34	95.4	95.9	80.4	96.2	75.0	87.3	90.9	95.0
35-39	93.4	110.6	84.2	81.0	116.0	107.1	99.2	93.3
40-44	98.2	101.5	192.5	144.9	108.5	110.3	117.6	136.6
45-49	97.3	88.5	64.0	101.1	133.3	127.3	93.3	84.7
50-54	90.6	85.3	97.9	62.3	70.3	61.5	88.9	76.5
55-59	105.7	121.3	93.8	165.7	73.7	104.7	101.3	127.0
60-64	131.3	124.4	100.0	66.7	120.0	94.7	126.9	110.0
65+	-	-	-	-	-	-	-	-

4.2 SEX COMPOSTION

Unlike data on age, data on sex are easier to collect because definition and classification of sex present no statistical problems. This is not to say, however, that

data on sex are free from errors. The principal problem relating to the quality of the data on sex collected in censuses or surveys concerns the differential completeness of coverage of the two sexes. In more developed countries, mis-reporting of sex is negligible; there appears to be little or no reason for a tendency for one sex to be reported at the expense of the other. For instance, the reports on sex in the 1960 census of the United States and in the accompanying re-interview study differed by about one percent (U.S. Bureau of the Census, 1960). In some other countries, deliberate misreporting of sex may be more serious. Parents may report young boys as girls to avoid the attention of evil spirit or so that they may be overlooked when their cohort is called up for military service. These same factors may contribute to differential underremuneration of the two sexes.

The sex ratio is the principal measure of sex composition and is usually defined as the number of males per 100 females. One hundred is the point of balance of the sexes according to this measure. A sex ratio above 100 denotes an excess of males while a sex ratio below 100 denotes an excess of females.

In general sex ratios tend to fall in the narrow range from about 95 to 102 barring special circumstances, such as history of heavy war losses or heavy immigration, sex ratios outside the range of 90 to 105 are to be viewed as extreme. Moreover, sex ratios by age usually follow a rather typical pattern all things being equal. Usually young boys are more numerous than young girls because male births are in general

FIG 4.3 SEX RATIOS OF IWO AND SOME SELECTED COUNTRIES

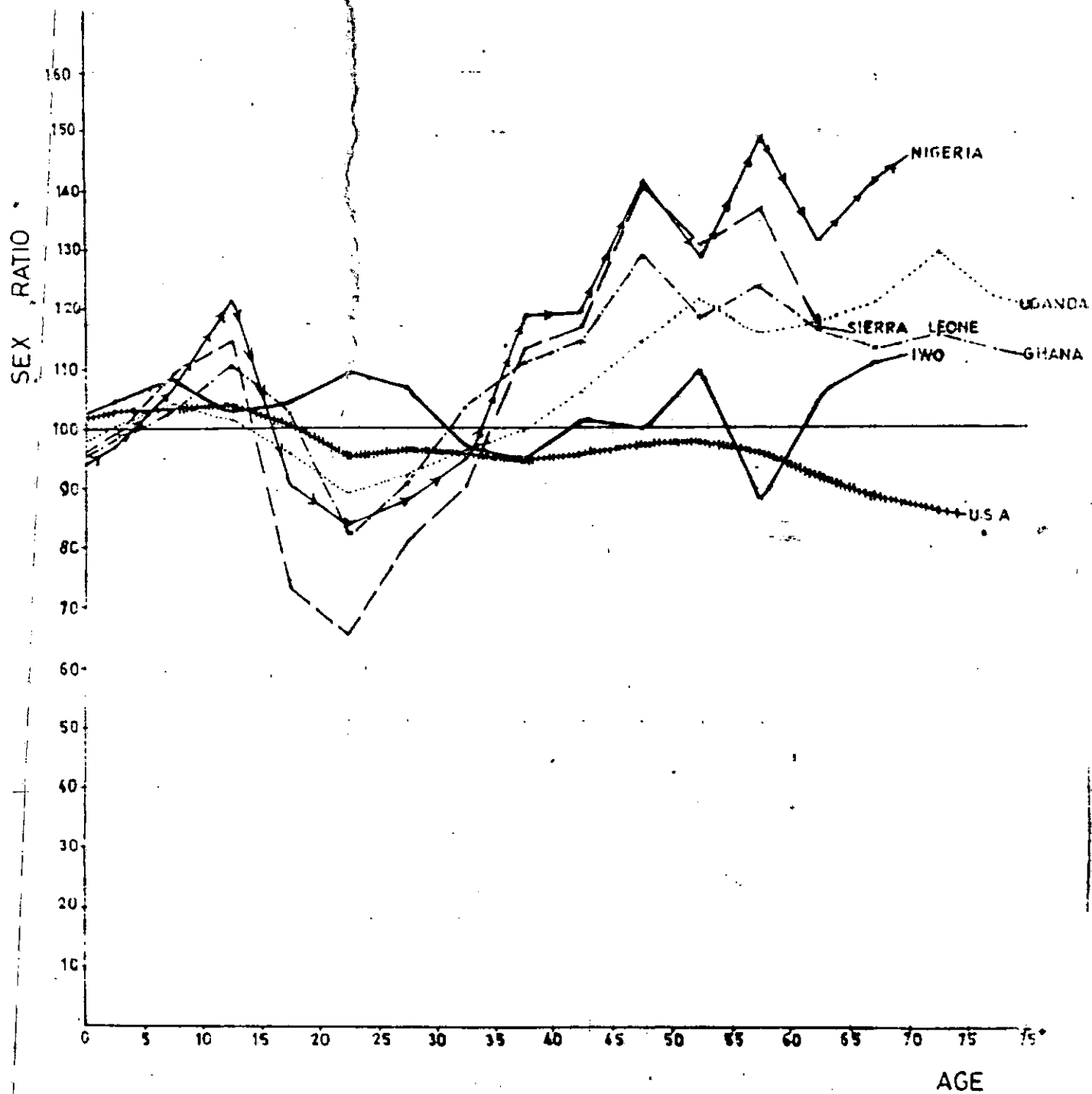
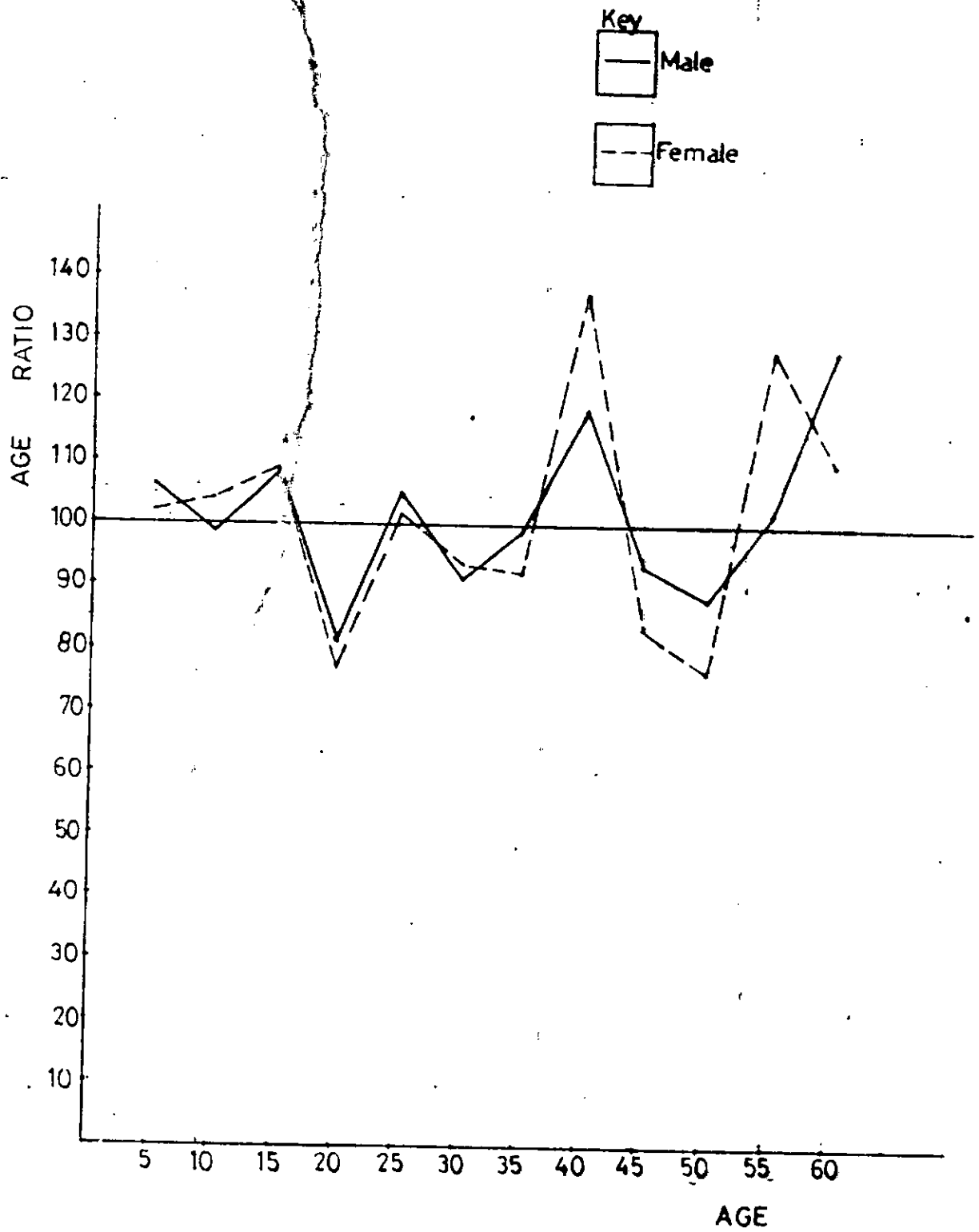


FIG 4.4 - AGE RATIO OF THE SURVEY POPULATION



slightly more than female births. However, male mortality is higher at younger ages than female mortality. Therefore the sex ratio which is generally a little above one hundred at birth, normally falls gradually with increasing age. The rate at which the ratio will decline depends on a number of demographic factors such as out-migration of males and the mortality of females relative to that of males.

The sex ratios of Iwo local government presented in Table 4.7 do not totally conform to this typical pattern. The sex ratio for the city of Iwo is high up to age 34, then low for age groups 35 - 39 and 40 - 44, then rises again until age group 65 and above except age group 55 - 59 where there is a slight fall. For Bode, the sex ratios are high up to age group 15 - 19 and fall thereafter except age group 40 - 44. The sex ratio is as low as about 52 percent especially in age group 55 - 59. The low sex ratios observed for Bode from age 20 can be explained partially by differential mortality rate between males and females but more importantly by the fact that more adult and older males have migrated out than their female counterparts.

The pattern for Fagbayibi is also different. Sex ratios are high at the early ages up to age 9, low between ages 10 and 19, rising again in age group 20 - 24. There are more females than males also between age 25 - 39 and also from age 55 and over.

The ratios for the whole local government are low in the age groups 30 - 34, 35 - 39, and 55 - 59. In all other age groups there are more males than females. The sex ratio

Table 4.7Sex Ratios by Age, Iwo Local Government, 1986

<u>Age Groups</u>	<u>Iwo</u>	<u>Bode</u>	<u>Fagbayibi</u>	<u>Iwo Local Govt.</u>
0 - 4	104.5	104.2	109.0	105.0
5 - 9	108.4	107.5	111.7	108.0
10 - 14	102.8	109.7	93.7	103.1
15 - 19	109.9	111.2	54.0	104.9
20 - 24	116.9	81.0	112.1	108.6
25 - 29	117.6	80.0	76.0	106.2
30 - 34	106.3	74.0	75.0	96.8
35 - 39	94.8	98.0	96.7	95.6
40 - 44	98.5	108.5	100.0	101.7
45 - 49	114.6	66.7	107.1	100.0
50 - 54	113.6	95.8	108.3	109.4
55 - 59	98.9	51.7	63.6	88.5
60 - 64	113.6	81.8	66.7	105.3
65+	140.0	75.0	37.5	110.8
<u>All Ages</u>	<u>107.4</u>	<u>96.4</u>	<u>95.3</u>	<u>103.7</u>

Table 4.8

Sex Ratios of Iwo Local Government and Some Selected Countries

Age Group	IWO 1986	NIGERIA 1963a	SIERRA LEONE 1963b	GHANA 1960c	UGANDA 1962d	U.S.A. 1966e
0 - 4	105.0	97	99.0	98.2	101.0	103.4
5 - 9	108.0	107	108.0	102.5	104.0	103.4
10 - 14	103.1	121	114.5	110.6	102.0	103.3
15 - 19	104.9	91	74.3	103.8	96.0	100.7
20 - 24	108.6	84	66.0	83.2	88.2	95.4
25 - 29	106.2	88	82.0	90.9	92.0	96.3
30 - 34	96.8	95	90.4	98.6	96.0	95.8
35 - 39	95.6	118	113.3	111.0	100.0	95.0
40 - 44	101.7	119	122.0	114.0	106.0	95.8
45 - 49	100.0	141	140.1	128.4	114.4	97.0
50 - 54	109.4	128	131.1	118.4	122.1	97.2
55 - 59	88.5	149	137.2	123.4	116.0	95.9
60 - 64	105.3	132	117.0	116.3	117.3	91.3
65 - 69	110.8	142	-	113.3	121.0	88.1
70 - 74	-	-	-	115.5	129.4	85.6
75 +	-	-	-	113.0	122.2	-
All Ages	103.7	102	98.4	102.2	110.0	97.0

Sources (a) The Population Census of Nigeria, 1963

(b) The Population Census of Sierra Leone, 1963

(c) The Population Census of Ghana, 1960

(d) The Population Census of Uganda, 1962

(e) U. S. Bureau of the Census, 1968,

at birth is about 102.6 which compares favourably with the sex ratio at birth of 103 reported for some selected villages in Western Nigeria in 1969 (Olusanya, 1969).

However, the pattern of sex ratios observed in this study is not a peculiar pattern. For instance, the population of Ghana and the former regions in Nigeria as well as the whole country show similar patterns in which there are more males than females in ages from 35 years. The highest sex ratios for Ghana is about 130. The explanation given by Caldwell (1967) for the consistently high ratios in the older ages is that they are "largely a product of relatively greater immigration", although Olusanya (1969) challenged this explanation by saying that men in these ages are very unlikely to have moved from other countries into Ghana.

The sex ratios of the population of the United States of America and some selected West African countries are presented in Table 4.8 and Figure 4.3. There is a significant difference between the rates observed for the African States and United States of America. While the United States have more males than females at early ages to age 19 and the ratios consistently decline in the older ages, thus the African countries show low sex ratio at early ages and more males than females at ages 5 - 14 and less males than females in the central age groups (15-39) with surplus males again at ages 40 and above. The sex ratios in the central age groups are low in African populations because the ages of middle-aged women are reported too low in almost all African

censuses and surveys. This shows that in Africa, it takes a woman long to pass the 30 years mark. Thus the fact that the sex ratios of African countries show similar patterns led Lorimer (1963) to make the following observations: "The misreporting of ages in African surveys affects the reports on children, as well as those on adults; though there is generally no apparent underenumeration of children in Africa. There are large apparent deficits in the reported number of persons in age-classes in the vicinity of puberty. One usually finds an apparent excess of females in the central child-bearing classes".

The analysis of our data in Table 4.8 shows no marked difference from the African pattern of sex ratio. The minor differences are probably due to differences in survey or census methodology employed by these countries and also differences in the timing of such surveys and censuses.

4.3 SUMMARY

The foregoing evaluation of age and sex distribution of the sample population shows gross distortions. The single, year distribution is particularly distorted. The ages of small children especially those that are below one year seem to have been reported a little higher than they really are. The old people especially those who are 65 years and above appear under-enumerated. There is also a high incidence of preference for digits '0' and '5' and avoidance of digits like 3, 7 and 9. However, when the data are grouped into five-year categories, these errors become largely suppressed.

As with the age data, distortions are also observed when the data are evaluated by the use of the sex ratio. The sex ratios obtained from the data deviate considerably from the expected pattern which indicates differential misreporting of age by both sexes during the survey

On the whole, in spite of these reservations, our data appear sufficiently reliable for the purpose of the analysis of fertility especially when five-year age groupings are employed. Moreover, the most affected segments of the population - the very younger and the very old - are excluded for the purpose of the study. However, caution needs to be exercised in interpreting the results based on the age structure of the sample population since its combination into five-year age groups do not completely eliminate the errors even though the births which are the numerator in the analysis can be reasonably assumed to have been shifted with any shift in the ages of mothers.

CHAPTER FIVE

SOCIO-ECONOMIC CHARACTERISTICS OF THE RESPONDENTS
AND THEIR HOUSEHOLDS

The following information on household structure, type, relationship, age, education, occupation, income, religion, place of birth and marriage may be helpful in forming a first impression of the sample. Therefore these variables will be discussed in this chapter as a background to further discussion in later chapters

5.1 HOUSEHOLD - SIZE, TYPE AND RELATIONSHIPS

For the purpose of this study, a household is defined as a group of persons living together under one roof and eating from the same pot. It will also include domestic servants who live either under the same roof as the couples or in their boys' quarters. In other words, it includes not only the couple and their children but also relatives and non-relatives who live with them.

As shown in Table 5.1, the average household sizes are 6.3, 6.2 and 5.2 for Iwo, Bode and Fagbayibi respectively, it seems therefore, that there is a direct relationship between the size of the household and the size of the settlements. This might be explained by the fact that facilities for advancement in education especially secondary education are available only in Bode and Iwo. Parents from surrounding villages including Fagbayibi usually send their children to members of their extended families in Iwo and Bode who by custom should offer any assistance requested of

them. The member of the extended family in the town is responsible for the housing and feeding of those children from the villages. This situation is not peculiar to Iwo; it was noted by Ohadike (1968) in his Lagos study: "The continued influence of traditional kinship and family ties was emphasized by the presence of one or more extended family members related to either of the spouses in slightly less than half of the households ... Their presence, like that of the non-relatives of spouses was positively associated with the socio-economic status of the household".

The household size in the survey area conform with the findings of previous surveys. Olusanya (1967) reported an average size of 4.9 in his rural survey of six villages in the then Western Nigeria. The federal office of statistics in the Rural Demographic sample survey 1965/66 (FOS, 1968) arrived at the following household size: rural Nigeria, 5.6; rural eastern region, 5.2; and rural mid-west region 4.9. Olusanya's figure (1981) of 6.0 persons per household for Ebute-Meta/Yaba is not far from our figure of 6.3 for Iwo town. Olusanya and others (1979) also obtained an average of 5.3 persons per household in their study of migrant farmers in South-West Nigeria. Adepoju (1981) also arrived at the following in his study of three rural communities around Ife: Omifunfun, 5.3; Aye-Koka, 5.2; Keredolu, 5.7.

It seems that the average household size is generally small among the Yoruba. This might be due to the fact that the large extended family comprising a man and his wife or wives, his married and unmarried children, the wife or

Table 5.1

Percentage Distribution of the Households

HOUSEHOLD SIZE	IWO		BODE		FAGBAYIBI		THE LOCAL GOVT.	
	N	%	N	%	N	%	N	%
1 - 2	13	1.37	7	2.52	13	7.06	33	2.3
3	74	7.8	29	10.43	27	14.67	130	9.2
4	110	11.60	36	12.95	39	21.20	185	13.1
5	149	15.71	69	24.82	29	15.76	247	17.5
6	172	18.4	68	24.46	28	15.21	268	19.0
7	199	20.99	46	16.55	25	13.59	270	19.1
8	107	11.29	15	5.48	13	7.1	135	9.6
9	54	5.70	5	1.80	4	2.2	63	4.5
10	40	4.22	1	0.36	3	1.6	44	3.1
11	17	1.80	2	0.72	2	1.1	21	1.5
12	13	1.37	-	-	1	0.5	14	1.0
Total	948	100.0	278	100.0	184	100.0	1,140	100.0
Average	6.3		6.2		5.2		6.2	

Table 5.2

Percentage Distribution of the Sample Population According to Structure of the Household

STRUCTURE	IWO		BODE		FAGBAYIBI		THE LOCAL GOVT.	
	N	%	N	%	N	%	N	%
Husband	948	15.9	278	16.0	184	19.2	1410	16.3
Wives	1017	17.1	348	20.0	237	24.8	1602	18.5
Children	3471	58.3	1023	59.0	528	55.0	5022	58.2
Parents	153	2.6	29	1.7	6	0.6	188	2.2
Other Rel.	279	4.8	43	2.7	4	0.4	326	3.7
Non-Rel.	81	1.3	13	0.6	-	-	94	1.1
Total	5949	100	1734	100.0	959	100.0	8642	100.0

wives of his sons as well as other relatives as a single economic unit is very uncommon among the Yoruba. A married son is usually given a portion of land for use and he thus becomes the head of a separate economic unit, that is, working, cooking and eating with his wife and children. Olusanya (1969) who made this observation among the Yoruba also added: "... mutual help among the children and between them and their parents continues. He may continue to live in the same house with his parents, but usually moves to his own separate building as soon as, and provided he can afford to build one". Many young couples prefer to live apart from their parents nowadays. Usually when the father dies, the eldest son would inherit the family house or leave it for any member of the extended family. Giving this situation, the average household size among the Yoruba is relatively low as observed.

As shown in Tables 5.2 and 5.3, the households in Iwo contained more of the parents of either spouse than the households in either Bode and Fagbayibi.

Table 5.3

Average Distribution of the Structure of Household

STRUCTURE	IWO	BODE	FAGBAYIBI	LOCAL GOVT.
Husband	1.0	1.0	1.0	1.0
Wives	1.07	1.25	1.29	1.14
Children	3.67	3.68	2.87	3.56
Parents	0.16	0.10	0.03	0.13
Other Relations	0.29	0.15	0.02	0.23
Non-Relations	0.09	0.05	-	0.07

Table 5.4

Distribution of the Households by Type

Type of Household	IWO		BODE		FAGBAYIBI		LOCAL GOVT.	
	N	%	N	%	N	%	N	%
Nuclear	753	79.4	185	66.5	122	66.3	1060	75.2
Extented	126	13.3	23	8.3	9	4.9	158	11.2
Polygamous	69	7.3	70	25.2	53	28.8	192	13.6
Total	948	100.0	278	100.0	184	100.0	1410	100.0

This might be due, as we shall see later, to the fact that more women in Iwo households are in paid employment and therefore need substitute mothers to take care of their children when they are away to their working places.

Moreover, they are economically well off to take care of themselves, their children, the mothers and other relations who live with them. Children naturally form the highest proportion of the households in all the survey locations.

It seems also as if the proportion of wives in each household increases with the decrease in the size of survey locations.

These households are classified into types as shown in Table 5.4. For the purpose of this study, we used three types of household identified by Olusanya (1981). The first type, according to him is the nuclear household which is made up of a couple and their unmarried children. It may contain, and in a large proportion of cases does contain, domestic servants and other unrelated persons as well as relatives with the exception of parents of the couple. It is essentially a two generation co-residential group. The second type which Olusanya called the polygynous household

Table 5.5

Distribution of the Households by Literacy Status

Literacy Status	IWO		BODE		FAGBAYIBI		LOCAL GOVT.	
	N	%	N	%	N	%	N	%
Literate Household	612	64.6	151	54.3	77	41.8	840	59.6
Illiterate Household	336	35.4	127	45.7	107	58.2	570	40.4
Total	948	100	278	100	184	100	1410	100.0

contains at least two wives living under one roof. Like the nuclear household, it does not contain any of the couple's parents, but having at least two co-wives, it is closer to the traditional family than those classified as nuclear. The third type he called "modified-extended" is made up of couples, their young children, wives or husbands' parents (usually females) and any other persons in the first two types. It is essentially a three generation group but is a modification of the traditional extended family in that only one representative of the first generation (the couple's mother is present).

In his study, the nuclear type of family is more prevalent in Iwo than in any of the other locations. Although about two-thirds of households in Bode and Fagbayibi are of nuclear type, the proportion is about four-fifths in Iwo. The modified extended household type is also more prevalent in Iwo than in the other two locations. This trend was also found in Lagos by Olusanya (1981). Here, the modified-extended family was more prevalent in Surulere than in

Ebute-Meta/Yaba. The reason for this is as mentioned earlier, that is, couples' mothers perform the important function of looking after babies and young ones when couples are at work. However, polygynous households tend to be inversely related to the size of the settlement. The proportion in polygynous households in Fagbayibi is more than that of Bode and that of Bode is more than that of Iwo.

On the whole the polygynous type of household is relatively more prevalent (about 13.6 percent) in Iwo Local government than was reported for Lagos by Olusanya (1981) as he reported only 2 percent of all households in Surulere and 6.6 percent for Ebute-Meta/Yaba as being polygynous households. Mott (1974) also reported that about 34 percent of all marriages in Ebendo was of polygynous type.

The reason for the high incidence of polygynous households in Iwo local government relative to some other areas may be related to religion. As will be seen shortly, there are significantly more Muslims than Christians in Iwo local government area and the Islam approves polygynous marriage.

As shown in Table 5.5, the level of literacy among the survey population is high. For the purpose of this study, a literate household is defined as a household where the head and at least one of his wives can read and write. Therefore in a polygynous household at least one of the wives and the husband should be able to read and write before such a household is classified as a literate household. Employing this definition, almost three out of every five households in Iwo local government are literate households. However, the level of literacy is positively related to

the size of settlements. It is higher in Iwo (about 64.6 percent) than in Bode and higher in bode than in Fagbayibi.

The type of swelling unit occupied by the households is as shown in Table 5.6. Self-contained flats are uncommon in Iwo local government. Even in the city of Iwo, only 7.5 percent of all households live in self-contained flats. They are not even available in bode and Fagbayibi. The most common type of housing units in the local government are the face-to-face type of where each household would just rent a room or two. The proportions of households living in this type of dwelling unit are 39 percent, 43.9 percent and 50.5 percent in Iwo, Bode and Fagbayibi respectively.

In this study, we used face-to-face-flat to mean a unit where a singly household occupies one of the opposite sides of a floor of a building. This type of dwelling unit is also fairly common in the city of Iwo where about a quarter of all households live in face-to-face flats where sometimes some amenities like kitchen and latrine are shared with members of other families. However, this type of housing unit is still uncommon in Fagbayibi. What is fairly common in Fagbayibi, is the single family house. The explanation for this is that a man on marriage leaves his parents house and puts up his own house nearby. Building such houses costs little in small communities.

Table 5.7 exhibits considerable variation in the source of water. While majority of households in Iwo obtain water from either private or neighbour taps, the story is different in bode and Fagbayibi as more than four out of every five

Table 5.6

Distribution of the Respondents by type of Dwelling Unit

Type of Dwelling Unit	IWO		BODE		FAGBAYIBI		LOCAL GOVT	
	N	%	N	%	N	%	N	%
Single family House	110	11.6	44	15.8	42	22.8	196	13.9
Self Contained flat	71	7.5	-	-	-	-	71	5.0
Face-to-Face flat	232	24.5	44	15.8	9	4.9	285	20.2
Whole house in compd.	160	16.9	68	24.5	40	21.8	268	19.0
Rooms in a house	370	39.0	122	43.9	93	50.5	585	41.5
Boys' Quarter	5	0.5	-	-	-	-	5	0.4
Total	948	100	278	100	184	100	1410	100

Table 5.7

Distribution of the Respondents by source of Water

Source of Water	IWO		BODE		FAGBAYIBI		LOCAL GOVT.	
	N	%	N	%	N	%	N	%
Stream	-	-	229	82.4	167	90.8	396	28.1
Well	76	8.0	49	17.6	17	9.2	142	10.1
Vendor	9	0.9	-	-	-	-	9	0.6
Public tap	275	29.0	-	-	-	-	275	19.5
Neighbour's tap	412	43.5	-	-	-	-	412	29.2
Private tap	176	18.6	-	-	-	-	176	12.5
Total	948	100	278	100	184	100	1410	100

households and about nine out of ten households respectively obtain water from streams. This is because pipe-borne water is foreign to both Bode and Fagbayibi.

The proportion of households depending on neighbours' taps is relatively high in the city of Iwo (43.5 percent) as compared with public taps. The explanation for this is that the Oyo State Water Corporation stopped the provision of public taps early in 1985. The few public taps that are functioning now in most towns of Oyo State are more or less private taps because they are financed by groups of people living in the same neighbourhood. They pay monthly water rates like any other persons who has a private tap in his house. Therefore those who could not afford private taps get water from friendly neighbours.

On the whole, the rural areas of Iwo local government can not be said to have access to potable water if potable water is taken to mean treated water that can be reasonably taken as safe drinking water. As earlier mentioned, most of the rural areas depend upon water from rivers, rivulets and streams. While water from these can be safe (if the wells are deep enough and protected or if the water is from natural springs) it is generally untreated.

— However, the proportion of households depending upon treated water in Iwo local government is significantly higher than the proportion of households depending upon treated water in Nigeria. For instance, Morah (1987) using Nigeria 1981-82 fertility survey data reported that only one fifth of the surveyed women (19.5% live in households that have access to either within or just outside their homes. As many as 36.7

percent live in households that depend on water from wells and 43.8% on water from other sources such as streams, rivers etc. This latter group can conveniently be said not to have access to safe drinking water.

Table 5.8

Distribution of the Respondents by type of Sewage system

Type of Sewage System	IWO		BODE		FAGBAYIBI		LOCAL GOVT.	
	N	%	N	%	N	%	N	%
Open bucket	-	-	-	-	-	-	-	-
Pit latrine	591	62.9	158	56.8	55	22.9	804	57.0
Water System	240	25.3	-	-	-	-	240	17.0
No latrine	117	12.4	120	42.3	129	70.1	366	26.0
Total	948	100	278	100	184	100	1410	100

Like in Iwo local government, access to potable water supply is more common in the urban than rural areas of Nigeria as Morah, (1987) reported that 58.4 percent of the women in urban compared with only 8.9 percent of those in the rural areas, live in households that have access to potable water supply. However, about a third of the women in both areas live in households that depend on water from wells while over half (52.7 percent) of the rural women, compared with 11.2 percent of urban women have access to water from the generally unsafe 'other' sources. Higher proportions of the literate and more educated women than those in the 'white collar' occupations live in households with access to potable water supply.

The modern water system latrine, as well as deep protected pit latrines, are usually considered as hygienic and adequate

facilities for excreta disposal. The bucket system and 'other' types of toilet facilities (which include the bush around the home or nearby streams) are both insanitary and inadequate since both usually involve depositing human wastes on the ground or in open containers which become breeding grounds for flies and other disease vectors. Table 5.8 shows that water system type of latrine is not common in the local government as a whole as only 17 percent of households depend on water system of latrine. However, water system of latrine is available only in the city of Iwo because there is no pipe-borne water in either Bode or Fagbayibi. The most common type of sewage system in the local government is pit latrine and the availability of pit latrines is still positively related to the size of the settlement as proportion of households depending on pit latrine is higher in Iwo (62.9 percent) than in Bode (56.8 percent) and that of Bode is higher than that of Fagbayibi.

Another striking finding is the proportion of households without latrine which is about 26 percent in the local government. Even in the city of Iwo, 12.4 percent of households have no latrine. Morgan (1967) who conducted a survey on housing conditions in Lagos found that 8 percent of all houses in Lagos had no latrine. If the type of sewage system used is an index of development, it shows that Lagos of 1968 was more developed than Iwo of 1986. However, Iwo local government is more developed than Nigeria as a whole if we use the same index. For instance Morah (1987) in his study we referred to earlier reported that

59.6 percent of the respondents lived in households that use the latrine as their major facility for excreta disposal only 3.9 percent lived in households that use the modern flush toilet system; another 2.9 percent lived in households that use the bucket system while 33.6 percent lived in households that did not have any toilet facilities whatsoever. The proportion that live in urban areas of Nigeria (15.7 percent), amongst the most educated and literate women (14.6% and 9.8% respectively).

5.2 SOCIO-ECONOMIC AND DEMOGRAPHIC CHARACTERISTICS OF THE RESPONDENTS

Age Composition: Most of the women are comparatively young as about 67 percent of them are less than forty years of age. The distribution of the ages seem to be similar in Iwo and Bode.

Table 5.9

Percentage Age Distribution of the Respondents

Age Group	IWO		BODE		FAGBAYIBI		LOCAL GOVT.	
	N	%	N	%	N	%	N	%
15 - 19	13	1.4	10	3.6	12	6.5	35	2.5
20 - 24	106	11.2	26	9.4	29	15.8	161	11.4
25 - 29	185	19.5	52	18.7	25	13.6	262	18.6
30 - 34	173	18.2	45	16.3	24	13.0	242	17.2
35 - 39	165	17.4	43	15.5	25	13.6	233	16.6
40 - 44	105	11.1	51	18.3	32	17.4	188	13.3
45 - 49	89	9.4	20	7.2	17	9.2	126	8.9
50 - 54	47	5.0	17	6.1	10	5.4	74	5.2
55 - 59	25	2.6	6	2.2	4	2.2	35	2.5
60 +	40	4.2	8	2.8	6	3.3	54	3.8
Total	948	100	278	100	184	100	1410	100

The number of women in each age group first rises with age until a peak is reached at age group 25 - 29 in both Iwo and Bode. It then declines steadily especially in Iwo until age group 55 - 59.

On the whole about a third of the women are under age 30, while about one out of every ten women is over 45 years of age. The mean age for all the women is 36.3 years.

Marital Characteristics: For the purpose of this study, 'marriage' will be used to include all women who live with their husbands in legally traditionally or religiously accepted unions, as well as those who live with a male partner in stable consensual unions.

The proportion of those that are currently married in Iwo Local government is very high. The proportion widowed increases as the size of survey location decreases, though the proportion of widowed women is very small in all cases. The possible explanation for this trend is because of probably lower mortality in towns than in villages. Divorce is uncommon in rural areas of Iwo local government as no divorce case is reported in either Bode or Fagbayibi. However, about one out of a hundred marriages in Iwo would result in divorce.

Table 5.10
Marital Status of the Respondents

Marital Status	IWO		BODE		FAGBYIBI		LOCAL GOV'T.	
	N	%	N	%	N	%	N	%
Currently married	927	97.8	270	97.1	161	87.5	1358	96.3
Widowed	6	0.6	3	1.1	6	3.3	15	1.1
Divorced	11	1.2	-	-	-	-	11	1.9
Separated	4	0.4	5	1.8	17	9.2	26	1.9
Total	948	100	278	100	184	100	1410	100

Table 5.11

Distribution of the Respondents According to Age
at First Marriage

Age at first Marriage	IWO		BODE		FAGBAYIBI		LOCAL GOVT.	
	N	%	N	%	N	%	N	%
15 - 19	135	14.2	51	18.3	69	37.5	255	18.1
20 - 24	602	63.5	195	70.1	104	56.5	901	63.9
25 - 29	188	19.8	30	10.8	11	6.0	229	16.2
30 - 34	23	2.5	2	0.8	-	-	25	1.8
Total	948	100	278	100	184	100	1410	100
Mean	23		22		21		22.6	

Table 5.12

Distribution of the Respondents by Type of Marriage
Contract

Type of Marriage	IWO		BODE		FAGBAYIBI		LOCAL GOVT.	
	N	%	N	%	N	%	N	%
Ordinance	298	31.4	26	9.4	6	3.3	330	23.4
Customary	650	68.6	252	90.6	178	96.7	1080	76.4
Total	948	100	278	100	184	100	1410	100

Table 5.13

Distribution of the Respondents by the Number of Marriages
Contracted since first Married

No. of Marriages	IWO		BODE		FAGBAYIBI		LOCAL GOVT.	
	N	%	N	%	N	%	N	%
1	931	98.2	275	98.9	178	96.7	1384	98.1
2	15	1.6	2	0.7	4	2.2	21	1.5
3	2	0.2	-	-	2	1.1	4	0.3
4	-	-	1	0.4	-	-	1	0.1
Total	948	100	278	100	184	100	1410	100

Table 5.14

Distribution of the Respondents by Number of Wives to Husband

No. of Wives	IWO		BODE		FAGBAYIBI		LOCAL GOVT.	
	N	%	N	%	N	%	N	%
1	879	92.8	208	74.8	131	71.2	1218	86.4
2	58	6.1	59	21.2	46	25.0	163	11.6
3	9	0.9	10	3.6	7	3.8	26	1.8
4 +	2	0.2	1	0.4	-	-	3	0.2
Total	948	100	278	100	184	100	1410	100

As shown in Table 5.13, the respondents seem to have had very stable unions as less than 2 percent of all the women interviewed had married more than once.

Type of marriage contracted by the respondents also varies with the survey location as shown in Table 5.12. In Iwo, about 31 percent of the respondents married under the marriage ordinance while only about 3 percent married under this system in Fagbayibi.

Marriages are also predominantly monogamous as shown in Table 5.14 as about 86 percent of the women in the local government are the only wives of their husbands, although there are still variations among the survey locations. This finding, if compared with Olusanya's (1969) finding where he reported that almost three-fifths of the women in his survey population were in monogamous unions indicates that polygamous marriages are giving way to monogamous ones in recent years. Ohadike (1967) finding for Lagos that about 31.4 percent of all the respondent wives were reported in

polygamous households also lend support to this declining trend in polygamous marriages. The reason for the declining trend in polygamous marriages among the Yoruba might be related to increases in Western education and the spread of Christian religion in almost all parts of Yorubaland. For instance, Christian doctrine forbids marriage of more than one wife and also the increase in western education, urbanization and industrialization encourage the importation of western culture of which the marriage of only one wife is one. It is also to be noted that in most of the polygamous marriages in Iwo local government, the husband has only one other wife.

The age at first marriage in Iwo Local government area is relatively high when compared with data from similar social surveys. The data in Table 5.11 and figure 5.1 show a mean age at first marriage of 22.6 for all women in the local government area. However, there are variations within the local government. The mean age at marriage for Iwo women is 23 years while it is 21 years in Fagbayibi. It seems the age at first marriage in the local government is positively related to the size of survey location. On the whole it seems that the age at first marriage in Iwo has increased from 20.06 in 1978 (Raimi, 1978) to 22.6 in 1986, a period of eight years. This finding is, however, contrary to the findings of the Nigeria fertility 1981-82 survey (National Population Bureau, 1984). In the survey it was observed that age at first marriage was declining, rather than increasing. Considering only the women aged 25 years

FIG 5-1 PERCENTAGE DISTRIBUTION OF THE AGE AT MARRIAGE OF THE RESPONDENTS (1986)

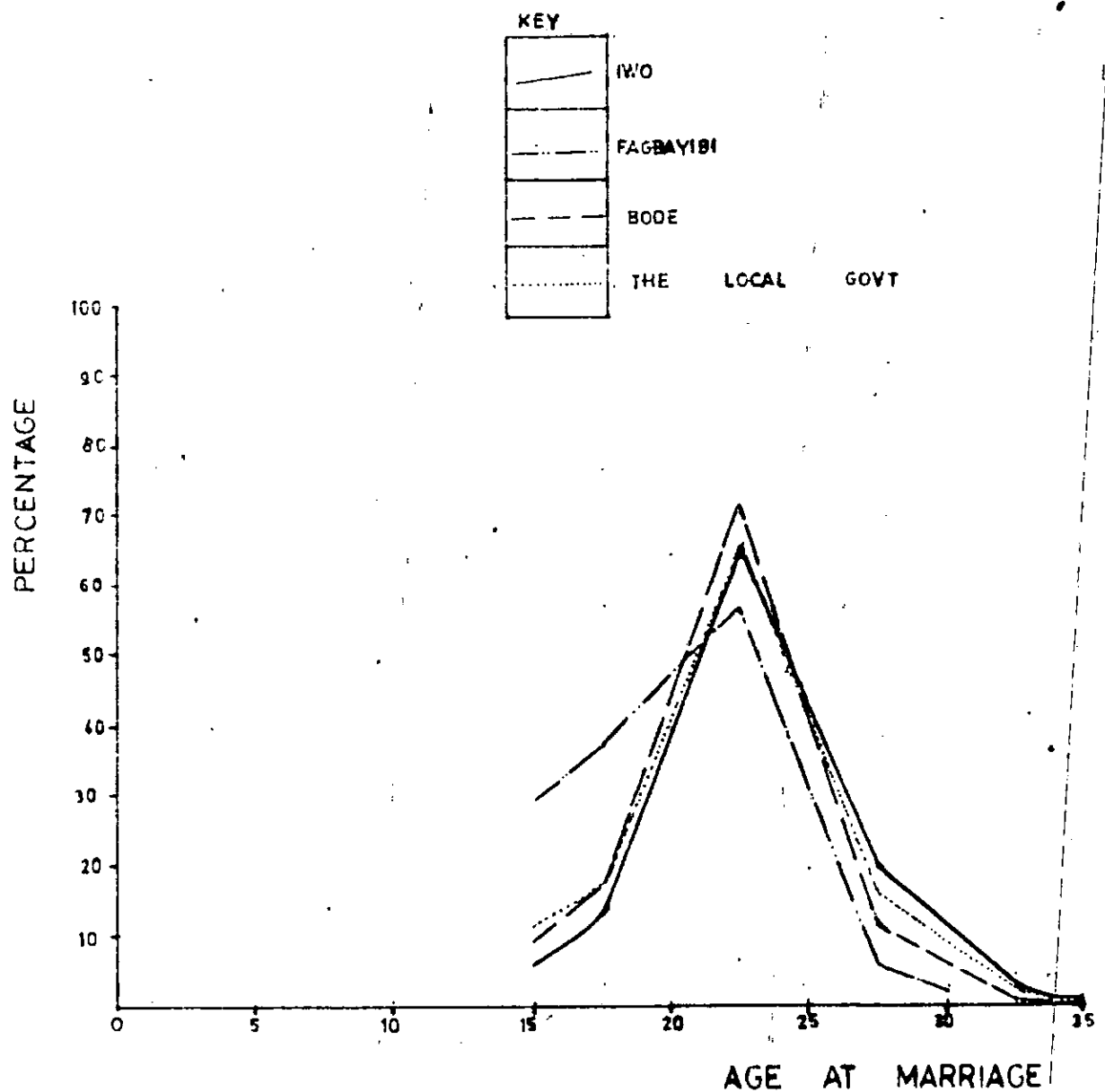


Table 5.15

Distribution of the Respondents Age at First Marriage
by Education

Age at First Marriage	None		Primary		Secondary		Post Secondary	
	N	%	N	%	N	%	N	%
15 - 19	174	56.3	67	22.2	11	3.2	1	0.2
20 - 24	108	35.0	207	66.6	274	79.0	312	70.4
25 - 29	26	8.4	33	10.6	57	16.4	113	25.5
30 - 34	1	0.3	2	0.6	5	1.4	17	3.9
Total	309	100	311	100	347	100	443	100
Mean	19.1		21.0		23.3		24.1	

and over, almost all of whom had been married, it was observed that while 43 percent of the oldest women (aged 45-49) had been married before the age of 16 and 72 percent before the age of 20 years, the comparable figures for the younger women (25-29) are 51 percent and 81 percent. This trend was more evident when their mean ages at first marriage were considered. The mean age increases steadily from 16.6 years for those aged 25-29 to 18.3 for women aged 40-44 and 45-49, respectively.

* Level of education is a very important determinant of the age at first marriage of the women interviewed. For instance, while as many as 56.3 percent of women without education married before the age of 20, only about 22 percent of those with primary education, 3 percent of those with secondary education and less than one percent of those with secondary education married before age 20. Virtually all women without education married before age 25.

The observed difference is still evident when the mean ages at first marriage are considered. The mean age at first marriage increases with the level of education as shown in Table 5.15. This is also found in the Nigeria Fertility Survey 1981-82. In the study, 52 percent of those with no education, and 72 percent of those with Koranic education only were married before the age 16, only 27 percent of those with primary or middle education, and 4.0 percent of those with secondary or higher education were married before that age. Again, while 81 percent of those with no education and 88 percent of those with Koranic education were first married before the age of 20 only 58 percent of those with primary or middle education and 15 percent of those with secondary or higher education were first married before that age.

Religious Characteristics: Iwo is a predominantly Muslim town. Table 5.16 shows that almost three out of every five residents of Iwo are Muslims. The proportion that are Muslim in rural areas is still higher than that for Iwo. In Bode, four out of five residents are Muslims and the same is almost true of Fagbayibi. On the whole about two-thirds of the residents of Iwo local government area are Muslims. The explanation for this is as mentioned earlier in chapter three: the early settlers and rulers of Iwo were Muslims. Christian missionaries arrived late in Iwo. "Christian" as used in this study includes Catholics, Protestants and any other religious sect using the Bible as instrument of worship. There are more Christians in Iwo than in the rural areas of

the local government.

The percentage distribution of the incidence of polygyny by religion is as shown in Table 5.17. Christians are more monogamous than Muslims. Whereas about 5 percent of the Christians married more than one wife, just a little less than 20 percent of the Muslims did so. The proportions of household who claimed to be adherents of traditional religions and those who claimed to have no religious attachment are small.

Table 5.16

Distribution of the Respondents by Religion

Religion	IWO		BODE		FAGBAYIBI		LOCAL GOVT.	
	N	%	N	%	N	%	N	%
Christians	369	38.9	51	18.3	31	16.8	451	32.0
Muslims	567	59.9	223	80.2	142	77.2	932	66.1
Traditional	9	0.9	3	1.1	11	6.0	23	1.6
No Religion	3	0.3	1	0.4	-	-	4	0.3
Total	948	100	278	100	184	100	1410	100

Table 5.17

Religion and Incidence of Polygyny (i.e. Distribution of the Respondents)

Religion	No of Household	Proportion of families with wife/wives			
		ONE	TWO	THREE	FOUR
Christians	451	94.7	4.9	0.4	-
Muslims	932	82.7	14.7	2.4	0.3
Traditional	23	73.9	17.4	8.7	-
No Religion	4	100	-	-	-

Educational, Occupational and Income Characteristics:

For the purpose of this study, education will be used to mean formal education which are of paper qualification. However, Koranic education is not included. Employing this definition, both the respondents and their husbands are comparatively well educated. Just a little over 20 percent of the respondents have no education and the corresponding figure for their husbands is less than 20 percent. However, there are variations among the survey locations. While 18 percent of women in Iwo are illiterates about a third of the women in Fagbayibi have no education. The corresponding figure for Bode is 28.4 percent.

The story is not all that different when education of their husbands is considered. There are more educated husbands in Iwo than Bode or Fagbayibi. On the whole the husbands are more educated than their wives.

Table 5.18 also shows that there are more N.C.E. and University graduates in Iwo than in any of the other survey locations. As expected, there are no University or N.C.E. graduates in Fagbayibi since there are no secondary schools where such people could teach or any business house where they could work. Training school as used in this study include Grade II teacher training college, nursing schools and trade centres. On the whole 22 percent of our respondents have never attended any school, 22.1 percent have primary education, 24.6 percent have secondary education while 31.3 percent have post secondary education.

Table 5 18

Distribution of the Respondents by Education

Education	IWO		BODE		FAGBAYIBI		LOCAL GOVT.	
	N	%	N	%	N	%	N	%
None	173	18.2	79	28.4	57	31.0	309	21.9
1-6yrs Pry.	198	20.9	68	24.5	45	24.5	311	22.1
Mod.School/ Some Grammar Schl.	135	14.3	58	20.9	49	26.6	242	17.2
Fassed H.S.C.	8	0.8	4	1.4	8	4.3	20	1.4
Training Sch.	198	20.9	29	10.4	10	5.4	237	16.8
NCE/University	174	18.4	12	4.3	-	-	186	13.2
Total	948	100	278	100	184	100	1410	100

Table 5.19

Distribution of the Respondents by the Education of
their Husbands

Education	IWO		BODE		FAGBAYIBI		LOCAL GOVT.	
	N	%	N	%	N	%	N	%
None	161	17.0	68	24.5	49	26.6	278	19.7
Primary	184	19.4	76	27.3	52	28.3	312	22.1
Secondary	208	21.9	90	32.4	59	32.1	357	25.3
Post Secondary	395	41.7	44	15.8	24	13.0	463	32.9
Total	948	100	278	100	184	100	1410	100

For the purpose of this study, post secondary education include N.C.E., University, Polytechnics, nursing school and Grade II teacher training colleges. When these figures are compared with the NFS data of 1981/82 striking similarities and differences

emerged. 59.5 percent of their rural population have no education, 22 percent have primary education while only 8.3 percent have secondary education.

As Table 5.20 indicates, the proportion of the respondents who have at least attended school is higher among the younger generation. For instance, about 60 percent of those with secondary education and 60 percent of those with post-secondary education are less than thirty five years old. The corresponding figures for women who are less than 40 years are 70 percent, 78 percent and 75 percent for primary, secondary and post-secondary respectively. Whereas only 20 percent, 5 percent and 10 percent of women with primary, secondary and post secondary education are 45 years and above.

Mott (1974) reported similar findings in his study of Ebendo. About 70 percent of the 15-24 year olds have attended school compared with only 20 percent for the 25-29 years age group and for the older cohorts school attendance among the women in Ebendo was virtually non-existent. The NFS of 1981/82 referred to earlier, also reported that educational attainment varies considerably with age. While 83 percent of the oldest women have not received any formal education at all, this proportion is only 31 percent for women aged 15-19. Similarly, while 32 percent of these young women have attended primary or middle school and a further 26 percent secondary or higher institutions, the comparable figures for the oldest women are only 9 percent and 0.2 percent. (National Population Bureau 1984). This pattern of increasing education with decreasing age reflects

the major expansion of educational facilities which has taken place in recent decades.

There is also a relationship between education and religion. While one out of every four of the illiterate women are Muslims, the situation is different with the Christians. While about half of the Christians have post-secondary education less than 10 percent of the Muslims do. Generally the Christians are more educated than the Muslims. This, however, is expected as the Christian religion encourages formal education. An average Christian likes to know how to read the Bible and song books written at least in his or her own language, hence the propensity to attend either school, or adult literacy classes if he or she is too old to go to school. Moreover, the majority of the Christians in Iwo are converted from either Muslim or traditional religion to Christianity and the conversion usually takes place in primary, secondary or teacher training schools. This undoubtedly is what gives the Christian an edge over their Muslim counterparts in terms of educational attainment.

The most common types of work in Iwo for those who engage in paid employment are teaching and nursing. As shown in Table 5.22 about 2 out of every 5 of the women and more than one-third of their husbands engage in teaching and nursing and clerical work. The proportion involved in these types of jobs in the rural areas of the local government is very low (about 8.3 percent in Bode and 4.9 percent in Fagbayibi). The most common type of occupation in Bode and Fagbayibi is trading for the women and farming

Table 5.20Distribution of the Respondents by Education

Age Group	E D U C A T I O N							
	None		Primary		Secondary		Post Secondary	
	N	%	N	%	N	%	N	%
15 - 19	4	1.3	11	3.5	18	5.2	2	0.6
20 - 24	16	5.2	55	17.7	31	8.9	59	13.3
25 - 29	31	10.0	68	21.9	64	18.4	99	22.3
30 - 34	31	10.0	34	10.9	87	25.1	90	20.3
35 - 39	26	8.4	48	15.4	76	21.9	83	18.7
40 - 44	46	14.9	33	10.6	51	14.7	58	13.1
45 - 49	58	18.8	25	8.0	10	2.9	33	7.4
50 - 54	34	11.0	19	6.2	8	2.3	13	2.9
55 - 59	22	7.1	11	3.5	-	-	2	0.5
60 +	41	13.3	7	2.3	2	0.6	4	0.9
Total	309	100	311	100	347	100	443	100

Table 5.21Distribution of the Respondents by Religious Affiliation by Education

EDUCATION	R E L I G I O N							
	Christian		Muslim		Tradition		No Religion	
	N	%	N	%	N	%	N	%
None	51	11.3	249	26.7	9	39.2	-	-
Primary	57	12.6	247	26.5	7	30.4	-	-
Secondary	127	28.2	214	23.0	5	21.7	1	25.0
Post Secon- dary	216	47.9	222	23.8	2	8.7	3	75.0
Total	451	100	932	100	23	100	4	100

for their husbands. This is however, expected because we have demonstrated lower level of education for these two survey locations than Iwo. On the whole, about two-thirds of the women of Iwo local government are craftsmen, traders and agriculturists while about 64 percent of their husbands engage in similar occupation.

Another striking finding of this study are those who reported themselves as being unemployed. About one out of every 20 of the women interviewed are in this category. This situation is not limited to the women; about 5 percent of their husbands too are unemployed as of the time of the study. These are University, N.C.E and Grade II teacher training college graduates who as of the time of the interview had completed their programmes but were still looking for jobs. They were found both in the towns and rural areas of the local government. The proportion of the husband involved in administrative jobs should be interpreted cautiously. The responses were given to us by their wives and most of the wives just told us "office work" and no more helpful explanation. Most of them even including the illiterate ones, did not know the type of office work the husband were doing. So we classified all such office workers as administrative officers.

Table 5.22

Distribution of Respondents by Occupation

Occupation	IWO		BODE		FAGBAYIBI		LOCAL GOVT.	
	N	%	N	%	N	%	N	%
Agriculture	89	9.4	37	13.3	38	20.7	164	11.6
Dressmaker, hair dresser etc	174	18.4	45	16.2	31	16.8	250	17.7
Traders	288	30.4	150	54.0	88	47.8	526	37.3
Teachers, Nurses Clerks	363	38.3	23	8.3	9	4.9	395	28.0
Religious/Social Workers	4	0.4	3	1.0	4	2.2	11	0.8
Medical doctor/Lecturers	1	0.1	-	-	-	-	1	0.1
Director, Accountant, Admin. Staff	-	-	-	-	-	-	-	-
Unemployed	29	3.0	20	7.2	14	7.6	63	4.5
Total	948	100	278	100	184	100	1410	100.0

Table 5.23

Distribution of the Respondents by their Husband's Occupation

Occupation	IWO		BODE		FAGBAYIBI		LOCAL GOVT.	
	N	%	N	%	N	%	N	%
Agriculture	167	17.6	131	47.1	58	53.3	396	28.1
Dressmaker, barber, Carpenter	182	15.2	30	10.8	25	13.6	237	16.8
Trader/Salesman	193	20.4	53	19.1	29	15.8	275	19.5
Teacher, nurses Clerks	334	35.2	30	10.8	14	7.6	378	26.8
Religious/Social workers	11	1.2	4	1.4	3	1.6	18	1.3
Medical doctor/Lecturer	7	0.7	2	0.7	-	-	9	0.6
Director/Accountant, Admin. Staff	17	1.8	7	2.5	3	1.6	27	1.9
Unemployed	37	3.9	21	7.6	12	6.5	70	5.0
Total	948	100	278	100	184	100	1410	100.0

Like in occupation, we also have problem in collecting information on the income of the respondents and those of their husbands. Majority, as mentioned earlier are self-employed and traders who do not keep any proper account. Even in Iwo where a significant proportion of the women are literate some could not tell us accurately their annual incomes and those of their husbands. However, the interviewers assisted in this regard. They estimated the incomes of women who are in this situation for them after considering many factors such as the type of business of each of the women, the estimated initial capital outlay, the type of the dwelling unit of the household and the amenities in various houses.

In a limited number of cases too, the literate ones who are in paid employment could not tell us accurately their annual incomes. One of the interviewers has this to say:

Some of the literate women who are in paid employment also told me that they did not know how much they earn annually. They just go to the pay officer every month, collect their envelopes, sign for them and leave. When I asked how much they used to find in the envelopes, they said it varied from month to month. So the income group I ticked for such women are mere estimates.

This is not to say that this problem is peculiar to our own study. Most researchers especially in Africa usually face this type of problem. Therefore the income distribution shown in Tables 5.24 and 5.25 are rough estimates.

As expected, the level of income varies with the size of the survey location. It is higher in Iwo than Bode and the income level in Bode is also higher than that of Fagbayibi.

The mean incomes as shown in Tables 5.24 and 5.25 are higher for men than for women in all the survey locations. The higher literacy level for men than women may be used to explain this situation. The higher the level of education the higher the probability of earning higher incomes. Among the illiterates too, women usually marry men who are fairly higher up on income scale than they do. The level of income of the men too is relatively low. While about 63 percent of the men earn ₦3,000 or less, only about 16 percent earn ₦4,000 or more. This can be compared with Olusanya's (1980) data for Surulere, Lagos where about 34 percent of the husbands of his respondents earn ₦3,200 or less and about 36 percent earn more than ₦4,000 annually.

Table 5.24

Income Distribution of the Respondents

Income ₦	IWO		BODE		FAGBAYIBI		LOCAL GOVT.	
	N	%	N	%	N	%	N	%
0 - 1000	260	27.4	92	33.1	70	38.1	427	29.9
1001-2000	201	21.2	76	27.3	56	30.4	333	23.6
2001-3000	209	22.1	60	21.6	28	15.2	297	21.0
3001-4000	163	17.2	28	10.1	18	9.8	209	14.8
4001-5000	62	6.5	12	4.3	7	3.8	81	5.8
6001 and above	24	2.5	3	1.1	2	1.1	29	2.1
Total	948	100	278	100	184	100	1410	100
Mean	2,235		1870		1701		2093	

Table 5.25

Distribution of the Respondents by their Husband's Income

Income N	IWO		BODE		FAGBAYIBI		LOCAL GOVT.	
	N	%	N	%	N	%	N	%
0 - 1000	180	19.0	67	24.1	62	33.7	309	21.9
1001-2000	183	19.3	74	26.7	60	32.6	317	22.5
2001-3000	247	26.1	81	19.1	31	16.8	359	25.5
3001-4000	178	18.8	32	11.5	16	8.7	226	16.0
4001-5000	87	9.2	14	5.0	9	4.9	110	1.8
5001-6000	42	4.4	5	1.8	2	1.1	49	3.4
6001 and above	31	3.2	5	1.8	4	2.2	40	2.9
Total	948	100	278	100	184	100	1410	100
Mean	2562		2094		180		2438	

Migration Characteristics: Migration into Iwo local government is relatively low as more than 70 percent of the women interviewed have been born at the places where they were interviewed with limited variations as more of Fagbayibi residents (about 80 percent) have been born in Fagbayibi while the corresponding figures for Iwo and Bode are 70.5 and 75.2 percent respectively (Table 5.26). The reason for this is obvious. As mentioned earlier, there are no business houses or even secondary schools that can attract people into Fagbayibi.

Of those who claimed not to have been born where they were interviewed, about 62 percent claimed to have been born in Iwo local government. On the whole, about 9 out of every

10 persons in the local government were born in Oyo State and only about 8 percent claimed to have been born in another state. The implication of this is that our study population is a predominantly Yoruba community.

One of the questions which we feel was not honestly answered by the respondents is the questions on where they (the respondents) lived in their childhood. As shown in Table 5.28, almost nine out of every ten persons interviewed in the local government claimed to have lived in the town as a child. The proportions of women in Fagbayibi who claimed to have lived in the town as a child is even unexpectedly higher than that of Iwo. In this community as is commonly true in many comparable developing societies, high status and prestige among men and women is associated with urban living and this we suspect should have happened to the data presented in Table 5.28 where virtually all the women interviewed claimed to have lived in an urban environment as a child.

Table 5.26

Responses as to the question "Were you born in this Village/
Town?"

Responses	IWO		BODE		FAGBAYIBI		LOCAL GOVT.	
	N	%	N	%	N	%	N	%
Yes	668	70.5	209	75.2	147	79.9	1024	72.6
No	280	29.5	69	24.8	37	20.1	386	27.4
Total	948	100	278	100	184	100	1410	100

Table 5.27

Responses to the question "If you were not born in this village/town, where were you born?"

Responses	IWO		BODE		FAGBAYIBI		LOCAL GOVT.	
	N	%	N	%	N	%	N	%
Other town/village in this local govt.	165	58.9	47	68.1	29	78.4	241	62.4
Other L.G. area in this State	88	31.4	16	23.2	8	21.6	112	29.0
Other State	27	9.7	6	8.7	-	-	33	8.6
Outside Nigeria	-	-	-	-	-	-	-	-
Total	280	100	69	100	37	100	386	100

Table 5.28

Responses as to the question, "Where did you live as a child?"

Responses	IWO		BODE		FAGBAYIBI		LOCAL GOVT.	
	N	%	N	%	N	%	N	%
Village	111	11.7	35	12.6	15	8.2	161	11.4
Town	837	88.3	243	87.4	169	91.8	1249	88.4
Total	948	100	278	100	184	100	1410	100

5.3 SUMMARY

The analysis of the characteristics of the respondents and their households in this chapter shows a household size higher than rural areas of Iwo local government. The proportion of relatives and non-relatives found living with households in Iwo is higher ^{than} _{than} those found living with households in Bode and Fagbayibi.

Polygamous households are more commonly found in rural areas than urban areas of Iwo local government, although a large majority of all households in the local government is monogamous. About three out of every five households in the local government are literate household although this varies according to the survey locations.

The most common type of housing unit in the local government are face-to-face type of houses. Households in the rural areas of the local government still depend heavily on streams as a major source of water supply while in the towns, majority of the households depend heavily on their friendly neighbours' taps. The most common type of latrine is the pit latrine. One out of every four households and about one out of every ten households have no latrine in Iwo local government and in the city of Iwo respectively.

An overwhelming majority (about 80 percent) of the women interviewed are still in the child-bearing ages (i.e. ages 15-44), however, there are more women in age group 25-29 than any other age groups. All our respondents have one time or another been married and about 96 percent of them are currently married. The proportion widowed is extremely small. the reason for this probably being the fact that widows re-marry quickly. Divorce is very uncommon especailly in the rural areas of the local government. Age at first marriage is higher in urban areas of the local government than in rural areas. Also age at first marriage varies directly with the level of education.

Almost two-thirds of the residents of Iwo local governments are Muslims and only a little over 30 percent

are Christians. Christians are found among the younger and more literate generation.

In Iwo local government, only about 22 percent of women and about 20 percent of their husbands are illiterates, so that 78 percent of the women and 80 percent of their husbands have ever gone to school. Proportions of wives and husbands who have ever attended schools vary directly with survey locations.

Majority of the women and their husbands who are in paid employment are either teachers or nurses. A significant proportion of the women are traders. Majority of the residents earn less than ₦3,000.00 a year, although this varies with the size of the settlements. Also the husbands are on a higher level of income than their wives.

Finally, Iwo local government is a predominantly Yoruba population as less than 9 percent claimed to have been born outside Oyo State virtually all the residents of the local government have lived as a child in an urban environment.

The extent to which these characteristics have affected the desired family size and family planning behaviour of the women in Iwo local government area is the subject of the next chapter.

CHAPTER SIX

DETERMINANTS OF ATTITUDE TO, KNOWLEDGE AND ADOPTION
OF FAMILY PLANNING

In Nigeria, like in any other parts of Africa, the number of children that should be born in marriage is, traditionally, rarely subject to debate by couples. This is so because the ideal is to have as many children as nature would permit. In a limited number of cases where couples plan ahead to have a certain number of children, the desired number of children does not always coincide with actual fertility.

Moors (1974), in a review of some studies on the relationship between family size decision before marriage or soon after and ultimate fertility, found a weak correlation between the desires shortly before marriages and actual number of children after twenty years. The investigators according to Moors explained the reasons for this low correlation between the two phenomena. They said that the couples concerned had little opportunity before marriage of testing their plans. So their preferences are, according to Moors not "reality based". Moors continues: "But even assuming a high degree of reality and perfect birth control, there are always unpredictable events and circumstances liable to change the plans with regard to a subsequent child. It seems therefore open to challenge to accept preferences as regards family size at an early moment in or before marriage as a variable to be substituted for ultimate family size. This argument applies also to professed attitude and opinion

regarding family planning in general. Nevertheless, we feel that it is only reasonable to start the analysis of the reproductive behaviour of Iwo local government women with their fertility decisions before marriage (if any) as this is likely to assist us in explaining their ultimate fertility levels and patterns.

As mentioned earlier, the situation where couples would plan ahead for the number of children they would like to have is very uncommon in Nigeria. Mott (1974) in his study of Ebendo, a village in Bendel State said: "When the women were asked whether they and their husbands ever discussed how many children they should have, three-quarters of the responses were negative with little variations between the responses of the younger and old women". Where they eventually give desired or ideal number of children the figure tends to be extremely high. For instance Durojaiye Ilori (1981) reported an ideal number of 8.4 and 6.3 children for Nigerian females and males respectively. This, however, is expected in a society where death is considered better than childlessness.

However, a closer look at the characteristics of our respondents presented in chapter five would show that seeds of change (increasing education, urbanization etc) have been sowed particularly among the younger generation, and the likelihood is that this change may result in subsequent demographic change. This chapter, therefore, looks at the fertility intentions of the respondents to see if the modernization factors discussed in chapter five have had

had any effect on their decisions, opinions and actions regarding family size and its limitation.

6.1 RESPONDENT'S DECISIONS AND OPINIONS REGARDING
FAMILY SIZE

Table 6.1 shows that communication between couples as regards fertility decision is very poor as only 28 percent of the women interviewed claimed to have ever discussed the number of children they would like to have with their husbands. There is, however, variations within the survey location. More couples in urban than in rural areas of the local government are likely to have discussed the issue of how many children they should have. While about one-third of the women in urban areas claimed to have discussed the issue of how many children they should have with their husbands, less than 20 percent claimed to have done so in rural areas. In either case, however, the proportion of those who had never discussed the issue is at least two-thirds.

Regarding the level of communication within families in Iwo local government, to the extent that fertility decisions are made, about four out of every ten of the women interviewed reported that no one makes such decisions. The rural areas are far ahead of the urban areas in this regard. While more than one-third reported that fertility decision are jointly made by both husband and wife in urban areas as shown in Table 6.2, the corresponding figure for the rural areas is about 19 percent. The husband is more important as regards fertility decisions in rural areas than urban areas of the

local government though the proportions of the respondents who reported that fertility decisions were made by the husband are relatively low in both urban and rural areas. The contribution of the wives in this regard is very insignificant both in the rural and urban areas of the local government.

The data on attitudes toward children presented in Table 6.3, showed that almost all the women interviewed wanted to have more children. The proportion of women who indicated their intentions to have more children though high in both urban and rural areas, is higher for the rural women. This finding is in line with that of Durojaiye Ilori (1981) for Nigeria where she reported that married couples wanted more children irrespective of the number they already had at the survey time, with a slightly higher proportion of males (87.4 percent) than females (9.4 percent) showing this desire for more children. If the uncertain category is added to the proportions of those who wanted more, the male and female respectively become 85 percent and 88 percent.

The women interviewed wanted more children irrespective of their ages as shown in Table 6.4 and irrespective of the number they had already as shown in Table 6.5. About two-thirds of the urban women who are within age group 45-49 years wanted more children. The corresponding figure for rural women is 70 percent. The proportion of rural women wanting more children is higher in all age groups than their urban counterparts. Overall, the proportion of women wanting children declines with age and also with the number of living

children. Virtually all the younger women wanted more children irrespective of the number of children they had already. About two-thirds of women with living children wanted more children. There is no significant difference between urban and rural women in this regard.

This finding is in line with the Nigeria fertility survey 1981-82 (National Population Bureau, 1984) which shows that regardless of the number of children already had, there was hardly any of the women interviewed who did not want more children, except those aged 40-44 and 45-49 years. Of the women who had 9 or more living children, even at as late as 40-50 years, less than half to one third did not want any more children. However, there is a comment in the report which is worthy of note here: "The usefulness of such attitudinal questions in societies that are largely uninformed about methods of controlling fertility is ... or with a high degree of fatalism ... towards fertility is, however, limited. Responses to the questions may be vague or have very little relationship to intended actions. The responses therefore may have little intrinsic meaning in themselves and little value in predicting²⁹ future fertility behaviour".

As observed in our study, the Nigeria fertility survey did not report any substantial variations in desired number of children among socio-economic status groups. For instance, of those women with secondary or higher education and with 4 to 7 living children, 85 percent wanted more children and of those with 8 or more children, 60 percent wanted more. In the case of urban and rural women, virtually everybody

with 4-7 living children wanted more while 75 percent of those with 8 or more living children did. There is virtually no difference between old and young women.

Like in our study, a large proportion of both young and old women did not give specific numbers in the Nigeria fertility survey. The Nigeria fertility survey report comments as follows: "... the numeric (responses) apart from rationalising past performance, are hardly predictive of of future intentions ... Non-numeric responses were mainly in the form of 'up to God or fate...' 'as many as possible', or some other answers like ... 'I don't know or care'".

The distribution of the respondents' number of children expected by age is as shown in Table 6.6. The expected number of children is consistently high in all age groups but highest in age group 30-34 for both urban and rural dwellers. On the whole, the average expected number of children is generally high but higher for rural than urban dwellers of the local government. In all the survey locations and all age groups the average expected number of children is well above 6.

Table 6.7 shows clearly the relationship between education and number of children expected by the respondents. It seems that education is not likely to reduce the expected number of children until the highest level of education is reached. As the table shows, women with post-secondary education have the lowest expected number of children in the local government, although the average expected children for this group of women (about 6 children per women) is still

very high. Arowolo (1977) also found that education had no significant inverse relationship with the reproductive behaviour of his survey population except at the highest level of education. Table 6.7 does not also show any significant difference between urban and rural women in their attitudes to reproduction even within the same educational category. Rural women with or without education have roughly the same level of expected number of children as their urban counterparts. This finding contrasts sharply with Olusanya's (1981) finding of a clear difference between his Yaba and Surulere samples. Olusanya attributed the observed differences in social and economic environment of women in the two locations.

The relationship between expected number of children and household type is presented in Table 6.8. Although the proportion of women in the nuclear type of households is significantly higher than those of the other two types of household put together, yet a pattern of relationship though unexpected, emerged. Polygynous households have the lowest average expected number of children. In a polygynous household where there are two or more wives, one would expect child-bearing to become competitive among wives and hence attitudes to reproductive behaviour to be more positive than for women in nuclear households which is not the case in the present study. The average expected number of children is highest in the extended type of households. This might be due to the fact that in this type of households, at least one of the parents (usually the mother) of either the wife or husband is present and the problem of who takes care of the children when the parents are out to work is considerably reduced.

Table 6.1

Responses to the Question "Have you and your husband ever discussed how many children you would like to have?"

Responses	URBAN		RURAL		LOCAL GOVT.	
	N	%	N	%	N	%
Yes	311	32.8	84	18.2	395	28.0
No	637	67.2	378	81.8	1015	72.0
Total	948	100	462	100.0	1410	100.0

Table 6.2

Responses to the question "Who in your family decides how many children should be born?"

Responses	URBAN		RURAL		LOCAL GOVT.	
	N	%	N	%	N	%
Husband	186	19.6	114	24.7	300	21.3
Wife	33	3.5	4	0.9	37	2.6
Both	349	36.8	89	19.2	438	31.1
No one	375	39.6	254	55.0	629	44.6
Others (no answer)	5	0.5	1	0.2	6	0.4
Total	948	100.0	462	100.0	1410	100.0

Table 6.3

Distribution of the Respondents According to Desire for more children

Responses	URBAN		RURAL		LOCAL GOVT	
	N	%	N	%	N	%
Want more children	791	83.4	405	87.7	1196	84.8
Don't want more	93	9.8	34	7.8	127	9.0
Uncertain	64	6.8	23	4.9	87	6.2
Total	948	100.0	462	100.0	1410	100.0

Table 6.4

Percentage Distribution of the Respondents According to
Desire for more children by Age

Age of Women	URBAN			RURAL			LOCAL GOVT.		
	Yes	No	N	Yes	No	N	Yes	No	N
15 - 19	100.0	-	13	100.0	-	22	100.0	-	35
20 - 24	98.1	1.9	106	100.0	-	55	98.6	1.4	161
25 - 29	97.8	2.2	185	98.1	1.9	77	98.1	1.9	62
30 - 34	98.3	1.7	173	97.8	2.2	69	98.2	1.8	242
35 - 39	97.0	3.0	165	97.6	2.4	68	97.2	2.8	133
40 - 44	83.0	20.0	105	90.2	9.8	83	85.1	14.9	188
45 - 49	66.3	33.7	89	70.0	30.0	37	69.0	31.0	126
50 - 54	42.6	57.4	47	47.1	52.9	27	44.7	55.3	74
55 +	23.1	16.9	65	28.6	71.4	24	24.6	75.4	89
Total	91.2	8.8	948	88.1	11.9	462	90.4	9.6	1410

Table 6.5

Percentage Distribution of the Respondents According to
Desire for more Children by Number of Living
Children

No of living Children	URBAN			RURAL			LOCAL GOVT.		
	Yes	No	N	Yes	No	N	Yes	No	N
0	100.0	-	10	100.0	-	7	100.0	-	17
1	99.2	0.8	130	100.0	-	42	99.4	0.6	172
2	98.5	1.5	135	100.0	-	51	98.9	1.1	186
3	99.3	0.7	145	97.8	2.2	67	98.8	1.2	212
4	97.8	2.2	135	97.3	2.7	62	97.6	2.4	197
5	95.2	4.8	147	91.7	8.3	69	94.1	5.9	216
6	83.3	16.7	120	87.5	12.5	67	85.2	14.8	187
7	65.0	35.0	60	66.7	33.3	47	65.8	34.2	107
8 +	57.6	42.4	66	57.1	42.9	50	57.4	42.6	116
All Groups	91.2	8.8	948	88.1	11.9	462	90.4	9.6	1410

Table 6.6

Distribution of the Respondents' Average Number of children
by Age

Age of Women	URBAN		RURAL		LOCAL GOVT.	
	No of Women	Average No of Children Expected	No of Women	Average No of Children Expected	No of Women	Average No of Children Expected
15 - 19	13	6.24	22	6.31	35	6.65
20 - 24	106	6.58	55	7.01	161	6.75
25 - 29	185	7.26	77	7.34	262	7.28
30 - 34	173	7.33	69	7.80	242	7.50
35 - 39	165	6.48	68	7.19	233	6.67
40 - 44	105	6.31	83	6.81	188	6.44
45 - 50	89	6.02	37	6.72	126	6.14
50 - 54	47	6.49	27	6.58	74	6.46
55 +	65	6.34	24	6.49	89	6.47
All Groups	948	6.72	462	7.12	1410	6.85

Table 6.7

Distribution of the Respondents Average Expected
Number of Children by Education

Education of Women	No of Women	URBAN	RURAL	LOCAL GOVT.		
		Average No of Children Expected	No of Women	Average No of Children Expected	No of Women	Average No of children Expected
None	173	7.46	136	7.84	309	7.62
Primary	198	7.28	113	7.34	311	7.29
Secondary	197	6.76	150	6.70	347	6.74
Post Secondary	380	6.07	63	6.21	433	6.08
Total	948	6.72	462	7.12	1410	6.85

Thus, women in this type of household are likely to expect to have more children on the average than women in the other two types of households. There are still differences between urban and rural women in this regard as women in rural areas reported higher average expected number of children in all household types (except polygynous household) than women in urban areas.

Table 6.9 presents another surprising finding. Women in agriculture and related services expect to have the lowest average number of children than any other occupational categories and this is true of both urban and rural areas of the local government. The explanation for this might be that those in agriculture are disproportionately more represented among the older generations, a significant proportion of whom have reached their childbearing ages. In other words, women in agriculture are likely to have been more represented among the few women who desired no more children.

Unemployed women (These are predominantly women with grade II Teachers Certificate and N C E who finished their training two or three years before the date of the interview but have not been employed) have the lowest expected average number of children. This group of women might have been influenced by their level of educational attainment, or by the economic situation in which they were as of the interview. Their reproductive attitudes may change as soon as they are employed and have money with which they can raise more children.

Dress-makers, hair dressers and those in related jobs reported the highest avenues expected number of children than all other occupational categories in both rural and urban areas of the local government. The explanation for this is likely to be that women in this type of occupational category are always at home or in their shops and they are always with their children wherever they are. Besides, they usually have at least two apprentices at the time who can be used as substitutes for nursemaids that are difficult to come by these days. Thus, unlike women in other occupational categories the problem of who takes care of their children whether they are at home or not is drastically reduced. The teachers, nurses, clerks and women in related jobs reported relatively low average expected number of children in both rural and urban areas of the local government.

Table 6.10 shows a negative relationship between income and average expected number of children in Iwo local government. The relationship between the two variables is the same in urban and rural areas of the local government. To the extent that the younger and more literate generation may be inculcated with different values, reflecting factors such as more education for themselves and their children, their expenditure pattern may change as their income rises. Thus, as the younger women age, and perhaps acquire more wealth, they may likely demand for fewer children than the current older generation.

The economic literature which places children within the same demand dimension as all other economic goods, is

now quite extensive. Easterlin (1966) for instance said that family formation of a young family is closely related to the level of wellbeing which the family head and his wife had while they were growing up and living in their parents' household, they would probably feel relatively deprived at present at least temporarily depress their fertility in order to increase their wealth level closer to that to which they had earlier become accustomed. Of course, if they feel they are well off now compared with their childhood and adolescent level of living, the fertility response might be the opposite.

Deborah Freedman (1963) on the other hand, said that couples gauge their incomes in relation to that of relevant peers. If they feel that they are well off compared with these peers, they would tend to have more children everything being equal and vice versa.

The approach of Mincer (1962) and Cain (1966) was from a future perspective. They focussed on the concept of transitory income. The relevant income concept in these studies has a future reference as families will at least, partly determine their current behaviour by how well of they feel they are now in comparison with what they feel the future holds in store for them.

The above over-simplified summary of various income - fertility theoretical approaches have been developed with data from developed countries whether these theories will have any relevance to Nigerian situation will be demonstrated further in chapter eight. However, from the absolute income

perspective, there is some evidence, in both rural and urban areas of Iwo local government that there is an inverse relationship between income and expected number of children.

Regarding the level of communication within families as it affects number of children expected, it seems that joint decision-making is associated with smaller expected family size while in a situation where no one makes the decision as to how many children should be born, the expected family size is large (Table 6.11). However, the expected average number of children in all cases is well above six which is already a large expected family size.

Table 6.8

Distribution of the average Number of children expected by Type of Households

Type of Household	URBAN		RURAL		LOCAL GOVT.	
	No of Women	Average No. of Expected Children	No of Women	Average No of Expected Children	No of Women	Average No of Expected Children
Nuclear	753	6.75	307	7.34	1060	6.95
Extended	126	7.10	32	8.13	158	7.34
Polygamous	69	5.64	123	6.51	192	5.86
Total 9	948	6.72	462	7.12	1410	6.85

Table 6.9

Distribution of the Average Number of Children
expected by Occupation of the
Respondents

<u>Occupation</u>	<u>URBAN</u>		<u>RURAL</u>		<u>LOCAL GOVT.</u>	
	No or Women	Average Expected Children	No of Women	Average Expected Children	No of Women	Average Expected Children
Agric.	89	6.31	75	6.62	164	6.65
Dressmaker, hairdressers etc.	174	7.13	76	8.21	250	7.46
Traders	288	7.16	238	6.96	526	7.11
Teachers, Nurses, Clerks etc.	368	6.47	39	7.11	40	6.68
Unemployed	29	5.08	34	7.05	63	6.14
All Groups	948	6.72	462	7.12	1410	6.85

Table 6.10

Distribution of the Average Number of Children
Expected by Income of Respondents

*Income	<u>URBAN</u>		<u>RURAL</u>		<u>LOCAL GOVT.</u>	
	No of Women	Average Expected Children	No of Women	Average Expected Children	No of Women	Average Expected Children
Low	461	7.31	294	7.58	755	7.35
Medium	372	6.35	134	6.63	506	6.51
High	115	5.56	34	5.03	149	5.43
All Groups	948	6.72	462	7.12	1410	6.85

* Income is classified thus:

less than ₦2,000 p.a. = Low

₦2,000 - ₦4,000 p.a. = Medium

₦4,000.00 + = High

Table 6.11

Distribution of the Average Number of children expected on the basis of who makes decision on How Many Children should be born

Who makes Children Decision	URBAN		RURAL		LOCAL GOVT.	
	No of Women	Average Expected Children	No of Women	Average Expected Children	No of Women	Average Expected Children
Husband	186	6.06	114	6.83	300	6.32
Wife	33	7.15	4	8.00	37	7.16
Both	349	6.21	89	6.37	438	6.26
No one	375	7.50	254	7.53	629	7.51
Total	943	6.73	461	7.12	1014	6.87

6.2 SEX PREFERENCE AND EXPECTED FAMILY SIZE

An average woman in Iwo local government^e expected to have about 6.85 children at the end of her child-bearing age with about 60 percent of these children being males and about 40 percent being females. The expectation is almost the same in urban and rural areas of the local government and there is very little variation in this preference by age of woman (Table 6.12).

There are many rational and irrational reasons for this male preference. These reasons as were suggested by Repetto (1972) and Mindel Sheps (1963) include a greater likelihood that a son will bring earning into the family, the continuity of the family name and probably a greater psychological need for sons in societies where males play a dominant role.

Table 6.13 however, shows pronounced differences in male sex preference by the expected number of children. The women

who expressed expectation for larger families also expressed expectation for a larger proportion of male offspring. This preference for male children may have an effect on fertility of Iwo local government women. From the perspective of expressed desire for children as related to the sex of children currently alive, a history of female births appears to be associated with a desire to bear more children on the average whereas those whose first two children were daughters desired over 5.7 more children. Mott (1974) reported similar findings in his study of Ebendo where he discovered that women whose first two children were sons wishes on the average to have 6 more children while those whose first two children were daughters desired 7 more children.

Table 6.14 further illustrates preference for male children. This table shows greater preference for additional sons than additional daughters in comparable parity situations. Women in age group 15 - 19 for example who have had none or one son desired an additional 5.1 sons whereas the same group of women desired an additional 3.0 daughters. This general pattern holds for women at all parities and ages. Even older women who have had at least four sons still desired an additional 2.5 sons before they complete their child-bearing. In contrast, women above the age of 40 who have had four or more daughters have very little desire for additional daughters. These findings imply that there is a likelihood for women in Iwo local government to change their fertility behaviour and attitudes in accordance with the sex of their first few children.

Table 6.12

Distribution of the Sons and Daughters Expected
Altogether by the Respondents' age

Age of Women	URBAN			RURAL			LOCAL GOVT.		
	No of Women	Average Sons expected	Average Daughters Expected	No of Women	Average Sons expected	Average Daughters expected	No of Women	Average sons expected	Average daughters expected
15-19	13	3.18	3.06	22	3.68	2.63	35	3.68	2.97
20-24	106	3.46	3.12	55	3.83	3.18	161	3.71	3.04
25-29	185	4.06	2.23	77	3.82	3.52	262	3.87	3.41
30-34	173	4.11	3.22	69	4.31	3.49	242	4.26	3.24
35-39	165	3.43	3.05	68	4.09	3.10	233	3.77	3.01
40-44	105	4.28	2.03	83	4.13	2.68	188	4.34	3.10
45-49	89	4.41	1.61	37	4.28	2.44	126	4.34	1.80
50-54	47	4.36	2.13	27	4.43	2.15	74	4.31	2.05
55+	65	4.63	1.71	24	4.41	2.08	89	5.53	1.94
All women	948	3.98	2.74	462	4.04	3.08	1410	4.01	2.84

Table 6.13

Distribution of the Expected Number of Sons by Expected
Number of Daughters of Two local Government women

Expected No of sons	No of Women in category	Average Sons expected	Average Daughters expected	Differences between expected sons and daughters	Expected Sex ratio
0 - 2	231	1.5	1.21	0.29	124
3 - 4	629	3.3	2.28	1.02	148
5 - 6	404	5.4	3.53	1.87	153
7 +	146	8.4	5.21	2.19	161

*Table 6.14

Distribution of Additional Sons and Daughters Desired by
Number of Sons and Daughters currently Alive in Iwo Local
Government

Age Sex of Children currently living	Number of Women	Mean additional Sons Desired	Mean additional daughters desired
15-19			
With 0-1 son	15	5.1	3.0
0-1 daughter	13	4.6	2.7
2 or more sons	2	3.6	2.1
2 or more daughters	5	4.4	1.7
20-29			
With 0-1 son	83	4.8	1.8
0-1 daughter	77	4.5	2.3
2-3 sons	59	3.1	2.6
2-3 daughters	56	4.3	3.2
4 more sons	31	2.8	1.7
4 or more daughters	23	4.8	0.8
30-39			
With 0-1 son	68	4.7	3.2
0-1 daughter	74	4.6	2.4
2-3 sons	111	3.4	3.2
2-3 daughters	93	3.8	1.1
4 or more sons	28	2.4	2.9
4 or more daughters	33	4.3	1.0
40-49			
With 0-1 son	55	3.0	2.4
0-1 daughters	57	3.7	0.6
2-3 sons	68	3.1	2.7
2-3 daughters	63	4.1	0.9
4 or more sons	37	2.5	2.8
4 or more daughters	34	3.3	0.7

*Women who are in the child-bearing ages are used for this table.

Table 6.15

Distribution of the Respondents' Opinions On the Number of Children a Yoruba Couple should have

No of Children	URBAN		RURAL		LOCAL GOVT.	
	N	%	N	%	N	%
No answer (Individual choice)	88	9.3	62	13.4	150	10.6
1 - 2	8	0.8	7	1.5	15	1.1
3 - 4	134	14.2	37	8.0	171	12.1
5 - 6	242	25.2	91	19.7	333	23.6
7 - 8	438	46.2	241	52.2	679	48.2
9 +	38	4.0	24	5.2	62	4.4
Total	948	100	462	100	1410	100
Mean	7.0		7.25		7.1	

Table 6.16

Responses to the question "A family of how many children do you consider a large family?"

Responses	URBAN		RURAL		LOCAL GOVT.	
	N	%	N	%	N	%
A family of one child	8	0.8	-	-	8	0.6
A family of two child-children	10	1.1	-	-	10	0.7
A family of three children	-	0.3	1	0.2	4	0.3
A family of four children	19	2.0	7	1.5	26	1.8
A family of five children	86	9.1	20	4.3	106	7.5
A family of 6 or more children	822	86.7	434	94.0	1256	89.1
Total	948	100	462	100	1410	100

Table 6.17

Responses to the question "Would you like to have a large family?"

Responses	URBAN		RURAL		LOCAL GOVT.	
	N	%	N	%	N	%
Yes	541	57.1	340	73.6	881	62.5
No	407	42.9	122	26.4	529	37.5
Total	948	100	462	100	1410	100

Table 6.18

Responses to the question "Why do you feel it is good to have a large family?"

Responses	URBAN		RURAL		LOCAL GOVT.	
	N	%	N	%	N	%
For old age security	83	6.5	86	11.6	169	8.4
To inherit my property	176	13.7	130	17.6	306	15.2
To honour me at death	187	14.6	82	11.2	269	13.2
To use them on the farm	131	10.2	131	17.8	262	13.0
To continue my lineage	204	15.9	107	14.6	311	15.6
Children are good in themselves	177	13.8	16	2.2	193	9.6
To have extra after some might have died	131	10.2	108	14.7	239	11.8
It is the wish of God that everybody should have plenty .. children	100	7.8	34	4.6	134	6.6
To abide by the wish of the family members	94	7.3	42	5.7	136	6.8
Total	1283	100.0	736	100.0	2019	100.0

Notes: Responses are distributed and not respondents

Table 6.19

Responses to the question, "How many children do you consider a small family?"

Responses	URBAN		RURAL		LOCAL GOVT	
	N	%	N	%	N	%
A family of one child	361	38.1	118	25.5	479	34.0
A family of two children	192	20.3	67	14.5	259	18.4
A family of three children	161	17.0	116	25.1	277	19.6
A family of four children	118	12.4	83	18.0	201	14.2
A family of five children	83	8.8	58	12.6	141	10.0
A family of six or more children	33	3.4	20	4.3	53	3.8
Total	948	100.0	462	100.0	1410	100.0

Table 6.20

Responses to the question "Will you like to have a small family?"

Responses	URBAN		RURAL		LOCAL GOVT	
	N	%	N	%	N	%
Yes	385	40.6	120	26.0	505	35.8
No	563	59.4	342	74.0	905	64.2
Total	948	100.0	462	100.0	1410	100.0

Table 6.21

Responses to the question "Why do you feel it is good to have a small family?"

Responses	URBAN		RURAL		LOCAL GOVT.	
	N	%	N	%	N	%
It is expensive to bring up many children	317	41.5	89	48.8	406	42.9
Better care can be given to each child	77	10.1	30	16.3	107	11.3
To give mother chance to go to work	269	35.2	47	25.6	316	33.4
Children are liabilities	75	9.8	14	7.4	89	9.5
Small Population is good for the country	26	3.4	3	1.8	29	3.0
Total	764	100.0	183	100.0	947	100.0

Note: Responses are distributed and not respondents

6.3 ATTITUDE TOWARDS FAMILY SIZE

Table 6.15 shows the respondents' opinions on the number of children a Yoruba couple should have. The table confirms the large family ideal culture of families in the local government. There is no significant difference between the rural and urban women as the two groups of women suggested an ideal of about 7 children for a Yoruba couple. If, however, the proportions of both urban and rural women who thought that the number of children born should be left for God to determine could be translated to specific numbers of children we could probably find significant difference between urban and rural women. The attitudes of the respondents toward children is probed further as shown in Table 6.16 and here we find that virtually all the respondents considered a family of 6 or more children a large family. If however, the question was left open and respondents allowed to freely mention number of children a Yoruba couple should have before that family can be considered a large family, the distribution should have been more useful.

When the respondents were asked if they would like to have a large family, about 6 out of every ten of urban women and almost three quarters of the rural women preferred large families (Table 6.17). The difference between rural and urban women is established in this regard and we can conclude by saying that a rural environment engenders an attitude favourable to high fertility. Olusanya (1969) reported similar findings in his study of Western Nigeria in which almost three-fifths of Ife women and about half of Oyo women

gave responses which were unfavourable to large families; fewer than two-fifths of the rural women gave similar responses.

A favourable attitude towards large families in the local government and the distinct rural-urban differentials in attitude to large families is confirmed in Table 6.20. While about three-fifths of the urban women show attitudes unfavourable to small families, about three-quarters of the rural women did so. On the whole about two-thirds of women in the local government showed attitudes unfavourable to small families.

When Tables 6.19 and 6.16 are compared, one would observe a notable difference. While in Table 6.16, the women (in both urban and rural) agreed reasonably well on the size of family that should be considered a large family, Table 6.19 does not show any usual pattern. It seems therefore, that the women rather than wasting further time, just accepted any of the suggested answers to the question distributed in Table 6.19.

Table 6.18 gives the reasons why a significant proportion of the women in Iwo local government preferred large families to small ones. Surprisingly, traditional functions of children like old age security function or contribution to the work force of the family that had been used most extensively by many investigators do not feature as expected in this study. Many new reasons for wanting large families emerged. For example, reasons such as "To honour me at death" (13.2 percent) "To inherit my property" (15.2 percent) "To

continue my lineage" (15.4) percent) "To abide by the wish of extended family members" (6.8 percent) were given by both rural and urban women. Thus, one fact which the study unfolds is that demand for large families by the Yoruba in particular and probably by Nigerians in general is primarily for other motives and not necessarily for economic motives.

For as many as about 16 percent of the responses distributed in Table 6.18 to relate to continuity of the lineage as a reason for wanting many children did not come as a surprise. This is because it confirms what Olusanya (1987) mentioned about the traditional Yoruba family. According to Olusanya, the traditional Yoruba family forms part of a lineage and one of the main characteristics of a lineage is its perpetuity. The death of a couple should not end a lineage. Therefore if a lineage should continue there should be a balance between mortality and fertility which is done by having many children. Olusanya, however, concluded that the idea was not peculiar to the Yoruba as it is common among other African groups. For instance, he referred to a report of Evans-Prichard (1951) that the Nuer do all things to have some children especially sons. To them, it is a great misfortune for a man to die without a child. Thus, the practice of Ghost marriage by the Nuer confirms this position. Among the Nuer, if a man dies without at least a male child to continue his lineage, one of his (dead man's) kinsmen will marry in his name. Children from such a marriage belong to the deceased and not to the biological father.

Also among the Ashanti, as reported by Fortes Meyer (1954) a man wants many children so that he can pass on the

names of his forebears which is a very important function of the family and also a source of pride. Therefore to the Ashanti the ideal family size is "as many children as God gives" (Olusanya (1987)).

There are some common sayings among the Yoruba that show the importance of childbearing. For instance, Olusanya (1987) writing on the importance of childbearing among the Yoruba said; "... the Yoruba say that children is a 'looking glass', through which a parent sees himself or herself or a 'photograph' through which others see a parent especially after his death. They also say, 'He who is buried by his children is one who has actually given birth to children'..." no wonder then that as many as 13.2 percent of the responses distributed in Table 6.18 indicates "To honour me at death" as a reason for preferring large families.

Yoruba in particular and Nigerians in general are so much interested in the idea of children surviving parents especially to give them befitting burial when they die. The Yoruba believe that the number and type of people that will be present at their burial ceremony depend not only on quality of their children but also on quantity, a common song among the Yoruba reflects this practice: "Oku olomo ase nse tun se" meaning that the burial ceremony of a dead man or woman with children is a continuous process. Also at the end of that burial ceremony, the usual prayer by relative and other well wishers for the children of the dead man is: "... omo yoo se bee fun eyin na o", meaning that children will do the same for you. Therefore for

this type of prayer to be answered by God, all Yoruba men and women know that they should desire and actually produce many children so that at least some would live to give them befitting burial as they give their own parents.

Another reason worth mentioning here again is "To abide by the wish of the extended family members" This forms about 7 percent of all the responses. Among the Yoruba, child-bearing is not only a function of the couple alone but a function of members of the extended family. If a Yoruba man marries, and remains for five or more years without a child other members of the extended family will advise him to try another woman. In other words, they would say that the problem of not having children is not his but that of his wife and should go and marry another woman.

Another way by which members of the extended family usually intervene is when a married man with two or three children decides to stop child-bearing, a member (usually the husband's mother, father or any other older relatives) usually advises such a man against having such a small number of children. Therefore Yoruba families prefer large families not because of economic reasons but because of other social and psychological reasons. However, this will be further discussed in chapter eight.

Table 6.21 give the reasons for preferring small families. It seems the major reasons centred around economic motives as most popular reasons given by the women who preferred small families are "It is expensive to bring up many children nowadays" (14.5 percent) and "To give mother chance to go

to work" (35.2 percent). Overall, virtually all the reasons given (96.6 percent) are personal reasons and consideration for the country at large is minimal. Therefore if those who prefer small families translate it into actual action, they do it because of the personal benefits they will derive from having fewer children and not because they consider "small population to be good for the country".

6.4 RESPONDENTS' KNOWLEDGE OF FAMILY PLANNING

Table 6.22 shows the opinions of respondents on whether children have more chance to live to adulthood than when they (the respondents) were born. Virtually all the respondents in the urban areas (92.4 percent) and about 8 out of every ten respondents in rural areas believed that children have more chance to live to adulthood. These figures when compared with similar figures computed for Yaba/Ebute Meta and Surulere (Olusanya, 1981) are higher and these high proportion of women who believed that children have more chance to live to adulthood may be reflected in the proportions of the women that would approve and actually practise family planning.

The ideal interval between births suggested by the respondents fall between 1.5 and 2 years with 2 years being the most favoured irrespective of urban or rural status. The ideal interval between births is shorter for urban women (2.35 years) than for rural women (2.56 years) and for both urban and rural women, ideal interval between births increases with age except for women in age groups '20-29

and '30-39' which favoured almost the same ideal interval between births (Tables 6.23 and 6.24). Therefore, the older women in the local government seem to be more traditional than the younger ones because the traditional Yoruba practice is to give an interval of 3 to 4 years between births. The suggested ideal interval between births which is still in the neighbourhood of about 2 years for all educational categories decreases as educational attainment increases (Table 6.25). Hence, women with post-secondary education suggested the shortest ideal interval between births in all the survey locations and the interval between births suggested by rural women with post secondary education is unexpectedly shorter than the one suggested by the urban women. The explanation for this might be that the proportion of women with post-secondary education in rural areas is relatively small.

When the respondents were asked what they would do to prevent unwanted pregnancies, a significant proportion of the urban women (48.3 percent) mentioned 'family planning', and almost a third of their rural counterparts did so (Table 6.26). While more than half of the rural women mentioned that they would not have intercourse unless they were looking for another pregnancy, only about 36 percent of the urban women mentioned this method. An insignificant proportion of women in the local government mentioned that the only way to keep themselves away from unwanted pregnancies is for them to move out of the household. This is expected however, because it is rarely done even in traditional Yoruba society.

As shown in Table 6.27, about seven out of every ten respondents in the local government area indicated that they had heard about family planning. The proportion of women who have heard about family planning varies with the survey location. It is higher in urban than in rural areas of the local government as would be expected. However, the proportion of women who claimed to have heard about family planning declined when they (the women) were asked to name the methods they have heard. Table 6.28 shows that about six out of every ten and about four out of every ten of the women in urban and rural areas of the local government respectively could name at least a method.

It seems the proportion of women who have heard about family planning has increased over a period of eight years as it was only about 55 percent in 1978 (Raimi, 1978). The women in Iwo local government are also clearly ahead of the Nigerian women in terms of knowledge of family planning as only about 34 percent of the Nigerian women had heard of family planning as indicated in the Nigeria Fertility Survey of 1981-82 (National [Population Bureau, 1984]). In 1971-73, the Institute of Population and manpower studies (University of Ife) national KAP Survey (Durojaiye-Ilori, 1981) reported that only 58 percent of the Nigerian women had heard of at least a method of family planning. This figure is far less than in our figure of about 71 percent although there is a difference of about 14 years in the timing of the two surveys. However, Durojaiye Ilori did not distinguish between such a traditional method as abstinence and modern methods.

As shown in Table 6.29, more than one-half of the women who could name at least a method indicated they heard of family planning for the first time from the field staff of Iwo General Hospital (Family Planning Unit) while about three out of every ten indicated they heard of family planning for the first time from their friends; press, television, radio would appear to have had little impact at this point since less than 15 percent of the women obtained their knowledge from those sources. Similarly, communication with husband proved of minimal importance since only 3 percent of the women acquired their knowledge from this source. This pattern seems to be similar in all the survey locations except that the influence of friends in the acquisition of family planning information is stronger in rural than urban areas of the local government while the influence of the field staff of Iwo General Hospital family planning unit is stronger in urban than rural areas.

Of the family planning methods known, modern methods are more frequently mentioned than traditional methods as only 12 percent of all methods mentioned are traditional while modern methods constitute about 88 percent (Table 6.30). This might be due to the fact that most women in the local government did not recognise some obvious methods like abstinence and withdrawal as methods of family planning. Durex and pills are the most popular of all modern methods mentioned. However the methods known varied with size of the survey location. While about a third of the urban women

mentioned durex, about two-thirds of their rural counterparts did so. Pills and I.U.D. are more frequently mentioned in urban than rural areas of the local government.

While the traditional methods mentioned did not show any consistent variation with age, the modern methods seem to have exhibited certain relationships. Modern methods mentioned first increase with age up to age group 35-39 and thereafter start to decline consistently with increase in the age of women. This is evident in both the urban and rural areas of the local government except that the maximum is reached earlier (age group 30-34) in rural than urban areas of the local government.

The modern methods mentioned are also positively related with education of the women and this is true of both the urban and rural areas (Table 6.31). However, the traditional methods seem to exhibit a negative relationship with education.

The distribution of women who have heard about family planning in Table 6.32 shows a rough curvilinear relationship with age. Among the women the proportion who have heard family planning increases with age, reaching a maximum among women in the age group 30 - 34 and 25 - 29 for urban and rural women respectively and thereafter starts to decline among older women.

This finding reflects the combined effect of a tendency for greater proportions of women in a particular cohort to learn about contraception as they get older and are more in need of it and a tendency for younger women to be exposed to modern ideas of which contraception is one. Thus as

Table 6.22

Responses to the question "Do you think children
have more chance to live to adulthood than when you
were a child?"

Responses	URBAN		RURAL		LOCAL GOVT.	
	N	%	N	%	N	%
More chance	876	52.4	366	79.2	1242	88.1
The same chance	45	4.7	48	10.4	93	6.6
Less chance	15	1.6	34	7.4	49	3.4
Dont know	12	1.3	14	3.0	26	1.9
Total	940	100.0	462	100.0	1410	100.0

Table 6.23

Disribution of the Respondents by stated Best Interval Between
Births

Best Interval In years	URBAN		RURAL		LOCAL GOVT.	
	N	%	N	%	N	%
1	58	6.3	17	3.7	75	5.3
1.5	213	22.4	63	13.6	276	19.6
2	458	48.3	204	44.2	662	47.0
2.5	42	4.4	24	5.2	66	4.6
3	130	13.7	131	28.4	261	18.5
3.5	4	0.4	4	0.9	8	0.6
4 +	19	2.0	8	1.7	27	1.9
No response	24	2.5	11	2.3	35	2.5
Total	948	100.0	462	100.0	1410	100.0
\bar{X}	2.35		2.56		2.42	

Table 6.24

Percentage Distribution of the Respondents by stated best
Interval Between Births by Age

Best Intervals in years	AGE OF RESPONDENTS (IN YEARS)									
	Less 30		30-39		40-49		50 +		All Ages	
	N	%	N	%	N	%	N	%	N	%
<u>URBAN</u>										
1	30	9.9	21	6.2	7	3.6	-	-	58	6.1
1.5	101	33.2	86	25.4	16	8.2	10	8.9	213	22.5
2	129	42.4	203	60.1	94	48.5	32	28.5	458	48.3
2.5	7	2.3	2	0.6	27	11.9	6	5.4	42	4.4
3 +	32	10.5	24	7.1	44	22.7	53	47.4	153	16.1
No Res- Ponse	5	1.7	2	0.6	6	3.1	11	9.8	24	2.6
Total	304	100.0	338	100	194	100	112	100	948	100
Mean	2.07		2.14		2.66		2.90		2.35	
<u>RURAL</u>										
1	17	11.1	-	-	4	3.3	-	-	17	3.7
1.5	33	21.4	26	19.0	41	34.2	-	-	63	13.6
2	75	48.7	62	45.2	11	9.2	17	33.3	204	44.2
2.5	5	3.2	7	5.1	30	25.0	1	2.0	24	5.2
3 +	23	14.9	40	29.2	32	26.7	27	52.9	143	30.9
No Res.	1	0.9	2	1.5	2	1.6	6	11.8	11	2.4
Total	154	100	137	100	120	100	51	100	462	100
Mean	2.11		2.53		2.54		3.15		2.56	
<u>LOCAL GOVT.</u>										
1	47	10.3	21	4.4	11	3.5	-	-	75	5.3
1.5	134	29.3	112	23.6	57	18.2	10	6.1	276	19.6
2	204	44.5	265	55.8	105	33.4	49	30.1	662	47.0
2.5	12	2.6	9	1.9	57	18.2	7	4.3	66	4.7
3 +	55	12.0	64	13.5	76	24.2	80	49.1	296	21.0
No Res- ponse	6	1.3	4	0.8	8	2.5	17	10.4	35	2.4
Total	458	100	475	100	314	100	163	100	1410	100
Mean	2.13		2.27		2.56		3.04		2.42	

Table 6.25

Distribution of the Respondents by stated Best Interval
between Births by Education

EDUCATION OF WOMEN										
Best Interval in years	None		Primary		Secondary		Post-Sec		All Groups	
URBAN	N	%	N	%	N	%	N	%	N	%
1.	3	1.7	11	5.6	13	6.6	31	8.1	58	6.1
1.5	31	17.9	33	16.6	47	23.9	102	26.8	213	22.5
2	64	37.0	90	45.5	106	53.8	196	52.2	458	48.3
2.5	8	4.6	10	5.1	9	4.6	15	4.0	42	4.5
3	53	30.6	41	20.7	16	8.1	20	5.3	130	13.7
3.5	-	-	3	1.5	-	-	1	0.3	4	0.4
4 +	2	1.2	5	2.5	2	1.0	10	2.6	19	2.0
No Res- ponse	12	7.0	5	2.5	4	2.0	3	0.8	24	2.5
Total	173	100	198	100	197	100	380	100	948	100
Mean	2.66		2.48		2.24		2.18		2.35	
<u>RURAL</u>										
1	-	-	3	2.7	8	5.3	6	9.5	17	3.7
1.5	6	4.4	14	12.4	25	16.6	18	28.5	63	13.6
2	48	35.3	43	38.0	79	52.7	34	54.0	204	44.2
2.5	4	2.9	7	6.2	10	6.7	3	4.8	24	5.2
3	65	47.8	38	33.6	26	17.3	2	3.2	131	28.3
3.5	4	2.9	-	-	-	-	-	-	4	0.9
4 +	2	1.5	5	4.4	1	0.7	-	-	8	1.7
No res- ponse	7	5.2	3	2.7	1	0.7	-	-	11	2.4
Total	136	100	113	100	150	100	63	100	462	100
Mean	2.92		2.68		2.35		2.07		2.56	
<u>LOCAL GOVT.</u>										
1	3	1.0	14	4.5	21	6.1	37	8.4	75	5.3
1.5	37	12.0	47	15.1	72	20.7	120	27.1	276	19.6
2	112	36.2	133	42.8	185	53.3	232	52.4	662	47.0
2.5	12	3.9	17	5.5	19	5.5	18	4.1	66	4.7
3	118	38.2	79	9.3	42	12.1	22	5.0	261	18.5
3.5	4	1.3	3	1.0	-	-	1	0.2	8	0.6
4 +	4	1.3	10	3.2	3	0.9	10	2.2	22	1.9
No response	19	6.1	8	2.6	5	1.4	3	0.6	35	2.4
Total	309	100	311	100	347	100	443	100	1410	100
Mean	2.78		2.55		2.29		2.15		2.42	

Table 6.26

Responses to the question "If you did not want to have another child at this time, what would you do to prevent yourself from becoming pregnant?"

Responses	URBAN		RURAL		LOCAL GOVT.	
	N	%	N	%	N	%
Avoid intercourse	344	36.3	235	50.9	579	41.1
Move out of the household	33	3.5	4	0.9	37	2.6
Breast-feed the last child as long as possible	97	10.2	54	11.7	151	10.7
Use family planning methods	458	48.3	160	34.6	618	43.8
No responses	16	1.7	9	1.9	25	1.8
Total	948	100	462	100	1410	100

Table 6.27

Distribution of the Respondents' Knowledge (ever heard) of family planning in Iwo Local Government, 1986

Knowledge of Family Planning	URBAN		RURAL		LOCAL GOVT.	
	N	%	N	%	N	%
Yes	707	74.6	290	62.8	997	70.7
No	241	25.4	172	37.2	413	29.3
Total	948	100.0	462	100.0	1410	100.0

Table 6.29

Distribution of Women who could name at least a method of Family Planning by Source of Knowledge

Source of knowledge	URBAN		RURAL		LOCAL GOVT.	
	N	%	N	%	N	%
Friends	164	28.4	75	38.1	239	30.7
Press	28	4.7	17	8.6	45	5.8
Television	13	2.3	1	0.5	14	1.8
Radio	26	4.5	18	9.1	44	5.7
Field Staff	336	57.8	76	38.6	412	53.0
Husband	14	2.4	10	5.1	24	3.0
Total	581	100	197	100	778	100

Table 6.28

Distribution of the Respondent's knowledge (can name at least a method) of Family Planning in Iwo Local Government, 1986

Knowledge of Family Planning	URBAN		RURAL		LOCAL GOVT.	
	N	%	N	%	N	%
Yes	581	61.3	197	42.6	778	55.2
No	361	38.7	265	57.4	632	44.8
Total	948	100	462	100	1410	100

Table 6.30

Distribution of Methods of Family Planning known

Methods Known	URBAN		RURAL		LOCAL GOVT.	
	N	%	N	%	N	%
Traditional						
Abstinence	44	33.8	22	51.1	66	38.2
Withdrawal	65	50.0	9	20.9	74	42.8
Abortion	14	10.8	6	14.0	20	11.5
Native Medicine	7	5.4	6	14.0	13	7.5
Total	130	100	43	100	173	100
Modern						
Durex	341	33.6	162	64.0	503	39.7
Pill	448	44.2	75	29.7	523	41.3
I.U.D.	118	11.6	13	5.1	131	10.3
Rhythm	49	4.8	2	0.8	51	4.0
Injection	58	5.7	1	0.4	59	4.7
Total	1014	100	253	100	1267	100

Note: Responses are distributed and not respondents.

as knowledge of contraception spreads among women in Iwo local government, as it probably has been in recent years, it may be diffused through channels to which younger cohorts are more attuned. Then, as any particular cohort ages and greater proportions find they have all the children they want, the proportion who learns about contraception also increases. These two tendencies may intersect in such a manner that contraceptive knowledge is most common among women mid-way in the child-bearing ages.

We shall from now attempt to show the relationship between some socio-economic variables and knowledge of family planning.

Since knowledge is the crucial first step on the path toward eventual practice of family planning, various factors that might have accounted for the presence or absence of information were examined. Table 6.33 suggests the influence of education of the respondent and indicates that the proportion who were aware of family planning increased steadily at each educational level for the women. Ability to name at least a method is also positively related with education of women as shown in Table 6.34. This is true for both urban and rural women of the local government. The Nigeria fertility survey of 1981-82 referred to earlier support this finding as it reported that a large proportion (70 percent) of women who had had secondary or higher education had heard of any method and there are clear differences between educational categories (National Population Bureau, 1984).

As we pointed out in chapter three, that Chi-square test will be used (where applicable) in our analysis because

most of the variables measured in this study are nominal level variables and more importantly because we do not observe any major difference in either fertility aspirations or actual fertility between sub-groups of our population. We however recognised the limitations of chi-square distribution itself. For instance, we recognise that, other things being equal, the greater the number of cells, the larger the chi-square. Blalock (1972) also pointed out that the significance level attained depends on the sizes of the samples used. If the samples are very large, it is generally easy to establish significance for even a very slight relationship. This means that when samples are large, we are saying very little when we have established a 'significant' relationship. Therefore for large samples, a much more important question is Given that a relationship exists, how strong is it? We have also solved such questions by using Pearson's contingency coefficient (c) to establish the strength of the relationship.

Thus, the relationship between family planning awareness and education shown in Table 6.33 is significant at 95 percent level all the survey locations except that the relationship is much stronger in urban than in rural areas of the local government. Ability to name at least a method is also significantly related (at 95 percent level) to education of the women (Table 6.34).

Table 6.35 indicates that the proportion of women who have heard of family planning increases as the number of living children increases especially for urban women. There is a very weak relationship between the proportion of women

who have heard of family planning and the number of living children for rural women. Mott (1974) also noted this type of association between family planning knowledge and either number of children ever born or number of living children in his study of a rural mid-western Ibo. The educated women in rural areas are comparatively young with a few children and they may be disinterested in family planning information. The older women with many children are comparatively less educated and their level of awareness of family planning information should have been affected by this low level of education. In the local government, the proportion of women who have ever heard of family planning increases as the number of living children increases except for women with 7 and above children where a significant proportion of older and illiterate women are found.

There is also a significant relationship (significant at 95 percent level) between religious affiliation and family planning knowledge in Iwo local government (Table 6.36). The proportion of Christians who have ever heard of family planning is higher than that of the Muslims and this is true for both rural and urban women. The traditionalists and those without religion are considerably under-represented in the sample and this should have affected the proportion of such women who have ever heard of family planning. When education of women was controlled for as in Table 6.37, it was observed that the difference in the proportions of Christians and Muslims who have ever heard about family planning becomes progressively reduced, although the

differences between Christians and Muslims persist. We also controlled for the number of living children and still, the differences between these two religious groups persist. All childless Christians and Muslims have never heard about family planning although the women in this category is too small to make any meaningful conclusion possible (Table 6.37).

The proportion of women who have ever heard of family planning by occupation is shown in Table 6.38 and indicates that occupation has significant relationship (significant at 95 percent level) with knowledge of family planning. As expected, the proportion of women who have ever heard about family planning among the agriculturists and related works is the lowest. The reason is related to the fact that a significant proportion of the women engaged in agriculture have no education. Virtually, all women in the local government, (95.6 percent) who are either teachers, nurses or clerks have heard about family planning and there is very little variation with the size of the survey location. However, one would expect that lower proportion of the hair dressers and sewing mistresses who are always at home or in their shops with their children to have heard about family planning than the traders who most of the times work outside their home environment. This is not the case in this study and the explanation may be that significant proportion of the hair dressers and dressmakers have at least attended school before they decided to learn a trade while majority of the traders are illiterates.

Family planning knowledge is also significantly related to income of the women as evidenced in Table 6.39. Proportion

of women who have ever heard that there are methods used by couples to delay or prevent a pregnancy increases steadily with the increase in the level of income, so that women with low income are least likely to have heard of a contraceptive method in Iwo local government. Women with low incomes are probably found disproportionately among illiterate women and thus less likely to have heard about any contraceptive method.

Women in nuclear households are more likely to have heard about methods of family planning than women in either extended or polygamous households (Table 6.39). Thus, the relationship between household type and knowledge of family planning is statistically significant at 95 percent level. This pattern is observed in all the survey locations irrespective of their sizes and socio-economic development.

The women in Iwo local government who indicated that they were the ones who made the decision regarding how many children they should have were much more likely to have heard about family planning than women who indicated that decisions regarding how many children should be born were made by either the husband or jointly made (Table 6.40). However, proportion of the women who have ever heard about family planning is lowest for women who indicated that the decisions regarding how many children should be born were made by the husband. This finding is in line with the finding of Mott (1974) in Ebendo where he reported that only 9 percent of women whose husbands made decisions regarding how many children should be born have knowledge of family planning.

Table 6.31

Distribution of Type of Methods
Known by Education

Educa- tion	TRADITIONAL						MODERN						
	Absti- nence	With- drawal	Abor- tion	Native Medi.	Total	Per Cent	Durex	Pill	I.U.D	Rhythm	Injec- tion	Total	Per- Cent
<u>URBAN</u>													
None	29	12	-	5	46	35.4	66	44	5	-	1	116	11.4
Pry.	9	31	8	2	50	38.5	138	85	8	9	11	252	24.9
Sec	6	8	5	-	19	14.6	116	109	42	15	21	303	29.9
Post-Sec.	-	14	1	-	15	11.5	20	210	63	25	25	343	33.8
Total	44	65	14	7	130	100	341	448	118	49	58	1014	100
<u>RURAL</u>													
None	13	3	-	5	21	48.8	15	5	-	-	-	20	7.9
Pry.	8	6	2	1	17	39.5	51	11	-	-	-	62	24.5
Sec	1	-	3	-	4	9.3	47	28	4	2	-	81	32.0
Post-Sec.	-	-	1	-	1	2.4	49	31	9	-	1	90	35.6
Total	22	9	6	6	43	100	162	75	13	2	1	253	100
<u>LOCAL GOVT.</u>													
None	42	15	-	10	67	38.7	81	49	5	-	1	136	10.7
Pry.	17	37	10	3	67	38.7	190	96	8	9	11	314	24.8
Sec	7	8	8	-	23	13.3	163	137	46	17	21	384	30.3
Post-Sec.	-	14	2	-	16	9.3	69	241	72	25	26	433	34.2
Total	66	74	20	13	173	100	503	523	131	51	59	1267	100

Table 6.32

Percentage Distribution of Women who have ever heard about
Family Planning by Age

KNOWLEDGE OF FAMILY PLANNING												
Age	URBAN				RURAL				LOCAL GOVT.			
	Yes	No	Total	N	Yes	No	Total	N	Yes	No	Total	N
15 - 19	79.6	23.1	100.0	13	68.2	31.8	100.0	22	74.3	25.7	100.0	35
20 - 24	84.9	15.1	100.0	106	76.4	23.6	100.0	55	81.4	18.6	100.0	161
25 - 29	88.6	11.4	100.0	185	81.8	18.2	100.0	77	87.8	12.2	100.0	262
30 - 34	80.9	19.1	100.0	173	75.4	24.6	100.0	69	78.1	21.9	100.0	242
35 - 39	80.6	19.4	100.0	165	61.8	38.2	100.2	68	75.1	24.9	100.0	233
40 - 44	65.7	34.3	100	105	50.6	49.4	100.0	83	95.5	41.5	100.0	188
45 - 49	52.8	47.2	100.0	89	48.6	51.4	100.0	37	49.2	50.8	100.0	126
50 +	48.2	51.8	100.0	112	35.3	64.7	100.0	51	43.6	56.4	100.0	163
Total	74.6	25.4	100.0	948	62.8	37.2	100.0	462	70.7	29.3	100.0	1410

Table 6.33

Percentage Distribution of Women who have ever heard about Family Planning by Educational Attainment in Iwo Local Gocal Government, 1986

Education of Women	KNOWLEDGE OF FAMILY PLANNING											
	URBAN				RURAL				LOCAL GOVT.			
	Yes	No	Total	N	Yes	No	Total	N	Yes	No	Total	N
None	41.0	59.0	100.0	173	37.5	62.5	100.0	136	39.5	60.5	100.0	309
Pry	70.2	29.8	100.0	198	62.8	37.2	100.0	113	67.5	32.5	100.0	311
Sec.	80.2	19.8	100.0	197	76.7	23.3	100.0	150	78.7	21.3	100.0	347
Post-Sec.	89.2	10.8	100.0	380	84.1	15.9	100.0	63	88.4	11.6	100.0	443
Total	74.6	25.4	100.0	948	62.8	37.2	100.0	462	70.7	29.3	100.0	1410

$$X^2 = 148.68$$

$$P < .01$$

$$df = 3$$

$$X^2 = 62.1$$

$$P < .01$$

$$X^2 = 225.2$$

$$P < .01$$

Table 6.34
Percentage Distribution of all Respondents in each Educational Category
who mentioned at least a method of Family Planning

Education of Women	KNOWLEDGE OF FAMILY PLANNING											
	URBAN				RURAL				LOCAL GOVT.			
	Yes	No	Total	N	Yes	No	Total	N	Yes	No	Total	N
None	18.5	81.5	100.0	173	19.1	80.9	100.0	136	18.8	81.2	100.0	309
Pry.	61.6	38.4	100.0	198	38.1	61.9	100.0	113	49.8	50.2	100.0	311
Sec.	73.1	26.9	100.0	197	54.7	45.3	100.00	150	65.1	34.9	100.0	347
Post-Sec.	77.1	22.9	100.0	380	73.0	27.0	100.0	63	76.5	23.5	100.0	443
Total	61.3	38.7	100.0	948	42.6	57.4	100.0	462	55.2	44.8	100.0	1410

$X^2 = 156.7$

$P < .01$

$df = 3$

$X^2 = 66.3$

$P < .01$

$df = 3$

$X^2 = 262.8$

$P < .01$

$df = 3$

Table 6.35

Percentage Distribution of Women who have ever heard about Family Planning by Total Living Children in Iwo Local Government 1986.

Total living children	KNOWLEDGE OF FAMILY PLANNING											
	Yes	No	Total	N	Yes	No	Total	N	Yes	No	Total	N
None	40.0	60.0	100.0	10	57.1	42.9	100.0	7	47.1	52.9	100.0	17
1 - 2	58.9	41.1	100.0	265	57.0	43.0	100.0	93	58.4	41.6	100.0	358
3 - 4	73.6	26.4	100.00	280	67.4	32.6	100.0	129	71.6	28.4	100.0	409
5 - 6	86.5	13.5	100.0	267	61.0	39.0	100.0	136	80.1	19.9	100.0	403
7 +	87.3	12.7	100.0	126	64.9	35.1	100.0	97	73.5	26.5	100.0	223
Total	74.6	25.4	100.0	948	62.8	37.2	100.0	462	70.2	29.3	100.0	1410

 $X^2 = 71.98$
 $P < .01$
 $df = 3$
 $X^2 = 13.43$
 $P < .01$
 $df = 3$
 $X^2 = 48.89$
 $P < .01$
 $df = 3$

Table 6.36

Percentage Distribution of Women who have ever heard about Family
Planning by Women's Religious Affiliation in Iwo Local Government
1986

Religion	KNOWLEDGE OF FAMILY PLANNING											
	URBAN				RURAL				LOCAL GOVT.			
	Yes	No	Total	N	Yes	No	Total	N	Yes	No	Total	N
Christians	82.1	17.9	100.0	369	86.6	13.4	100.0	82	82.9	17.1	100.0	451
Muslims	69.8	30.2	100.0	567	57.3	42.7	100.0	365	64.9	35.1	100.0	932
Traditional	55.6	44.4	100.0	9	64.3	35.7	100.0	14	60.9	39.1	100.0	23
No Religion	100.0	-	100.0	948	62.8	37.2	100.0	1	100.0	-	100.0	4
Total	74.6	25.4	100.0	948	62.8	37.2	100.0	462	70.7	29.3	100.0	1410

$$X^2 = 19.5$$

$$P < .01$$

$$df = 2$$

$$X^2 = 16.8$$

$$P < .01$$

$$df = 2$$

$$X^2 = 48.6$$

$$P < .01$$

$$df = 2$$

Table 6. 38

Percentage Distribution of Women who have ever heard about Family Planning by Women's Occupation in Iwo Local Government, 1986.

Occupation of Women	KNOWLEDGE OF FAMILY PLANNING											
	URBAN				RURAL				LOCAL GOVT.			
	Yes	No	Total	N	Yes	No	Total	N	Yes	No	Total	N
Agriculture	27.0	63.0	100 0	89	5.3	94.7	100,0	75	17.1	82.9	100.0	164
Tailors, Hair-dressers	76.4	23.6	100.0	174	51.3	48.7	100.0	76	68.8	31.2	100.0	250
Traders	62.5	57.5	100.0	288	80 3	19.7	100,0	238	70.5	29,5	100.0	526
Teachers, Nurses etc.	76.2	3.8	100.0	363	89.7	10.3	100.0	32	95.6	4.4	100.0	395
Unemployed	55.8	44.8	100.0	29	61.8	38.2	100,0	34	58.7	41.3	100.0	63
Total	74.	25.4	100.0	943	62.8	37.2	100.0	455	70.7	29.3	100.0	1398

Note: Religious workers, doctors and Accountants are not included in the analysis because they are very few.

Table 6.39

Percentage Distribution of Women who have ever heard of Family Planning by Income of Women and also by Household type.

Income	Knowledge of Family Planning											
	URBAN				RURAL				LOCAL GOVT.			
	Yes	No	Total	N	Yes	No	Total	N	Yes	No	Total	N
Low	64.4	35.6	100.0	461	55.1	44.9	100.0	294	60.8	39.2	100.0	755
Medium	83.6	16.4	100.0	372	72.4	27.6	100.0	134	80.6	19.4	100.0	506
High	86.1	13.9	100.0	115	91.2	8.8	100.0	34	87.2	12.8	100.00	149
Total	74.6	25.4	100.0	948	62.8	37.2	100.0	462	70.2	29.3	100.0	1410
	X ² = 49.5				X ² = 21.7				X ² = 53.6			
	P = .01				P = .01				P = .01			
	df = 2				df = 2				df = 2			
<u>Household Type</u>												
Nuclear	79.3	20.7	100.0	753	71.7	28.3	100.0	307	77.1	22.9	100.0	1060
Extended	61.1	38.9	100.0	126	59.4	40.6	100.0	32	60.8	39.2	100.0	158
Polygamous	47.8	52.2	100.0	69	41.5	58.5	100.0	123	43.8	56.2	100.0	192
Total	74.6	25.4	100.0	948	62.8	37.2	100.0	462	70.7	29.3	100.0	1412
	X ² = 45.1				X ² = 27.8				X ² = 93.3			
	P = .01				P = .01				P = .01			
	df = 2				df = 2				df = 2			

Table 6.37

Percentage Distribution of Respondents by Religious Affiliation, education and Knowledge (ever heard) of Family Planning and by Number of Living Children

EDUCATION RELIGION	Knowledge of Family Planning											
	Yes	No	Total	N	Yes	No	Total	N	Yes	No	Total	N
Christians	47.1	59.9	100.0	34	30.0	70.1	100.0	10	45.5	54.5	100.0	44
Muslims	19.7	80.3	100.0	138	28.7	71.3	100.0	122	22.8	77.2	100.0	254
Primary												
Christians	81.0	19.0	100.0	47	70.0	30.0	100.0	10	78.9	21.1	100.0	57
Muslims	68.4	31.6	100.0	150	58.5	41.5	100.0	97	68.0	32.0	100.0	247
Secondary												
Christians	89.4	10.6	100.0	87	87.0	13.0	100.0	30	89.1	10.9	100.0	117
Muslims	80.0	20.0	100.0	118	71.1	28.9	100.0	121	79.0	21.0	100.0	239
Post-Sec.												
Christians	96.5	3.5	100.0	199	94.9	5.1	100.0	39	96.2	3.8	100.0	238
Muslims	89.6	10.4	100.0	164	91.7	8.3	100.0	24	92.6	7.4	100.0	188
<u>Living Children</u>												
None												
Christians	33.3	66.7	100.0	3	-	100.0	100.0	2	20.0	80.0	100.0	5
Muslims	14.3	85.7	100.0	7	-	100.0	100.0	5	14.3	85.7	100.0	12
1 - 2												
Christians	71.3	28.7	100.0	86	55.8	44.2	100.0	30	67.2	32.8	100.0	116
Muslims	48.5	51.5	100.0	179	45.3	54.7	100.0	63	92.2	7.8	100.0	242
3 - 4												
Christians	84.7	15.3	100.0	88	77.3	22.7	100.0	42	82.0	18.0	100.0	130
Muslims	73.9	26.1	100.0	184	56.7	43.3	100.0	83	69.2	30.8	100.0	267
5 +												
Christians	95.4	4.6	100.0	122	80.2	19.8	100.0	76	89.3	10.7	100.0	198
Muslims	82.3	17.3	100.0	262	59.2	40.8	100.0	152	73.7	26.3	100.0	414

Note: Traditionalists and those without Religion are not included in the analysis because they are few.

Table 6.40

Distribution of Women who have ever heard of Family Planning
by "Who makes Children Decisions".

Family Planning Knowledge	Husband		Wife		Both		No One		Total	
	N	%	N	%	N	%	N	%	N	%
<u>URBAN</u>										
Yes	103	55.4	30	90.9	295	84.5	276	73.6	704	74.7
No	85	44.6	3	8.1	54	15.5	99	26.4	239	25.3
Total	186	100.0	33	100	349	100	375	100	943	100
<u>RURAL</u>										
Yes	66	57.9	3	75.0	64	71.9	156	61.4	289	62.7
No	48	42.1	1	25.0	25	28.1	98	36.6	172	37.3
Total	114	100	4	100	89	100	254	100	461	100
<u>LOCAL GOVT.</u>										
Yes	169	56.3	33	82.9	360	82.2	431	68.5	993	70.7
No	131	43.7	4	10.8	78	17.8	198	31.5	411	29.3
Total	300	100	37	100	438	100	629	100	1014	100

$$X^2 = 58.9$$

$$P < .01$$

$$df = 3$$

$$X^2 = 33.3$$

$$P < .01$$

$$X^2 = 76.1$$

$$P < .01$$

as against 31 percent for women who indicated that they made the decisions themselves.

6.5 ATTITUDES TO FAMILY PLANNING

Ultimately, the adoption of family planning depends not only on information but on approval, and even here endorsement will come before use. Here we would attempt to show the level of approval of family planning among women in Iwo local government.

As shown in Table 6.41, about two-thirds of the women in the local government approved the use of family planning methods in marriage and as expected, the urban areas of the local government are superior in this regard which is in line with other similar studies conducted either in Nigeria or elsewhere. For instance Knodel and Pitaklepongombati (1973) noted that almost three out of four currently married women in the reproductive ages in both provincial towns and Bangkok Thomburi in Thailand approved the use of contraception and in fact could readily mention a method of contraception without being prompted; just under half of rural women could do so.

Ekanem (1972) also reported for eastern part of Nigeria that 48.1 percent of the males and 48.8 percent of the females in urban areas approved family planning while 25.9 percent of the males and 24.8 percent of the females approved family planning in rural areas. Caldwell and Igun (1970) also noted that knowledge and use of anti-natal practice in Nigeria are correlated with the degree of urbanization. There is no doubt that the rural environment is synonymous with strong anti-attitude towards family planning.

The relationship between attitude towards family planning and age of women is as shown in Table 6.42. The level of approval increases with age until a peak of 77.3 percent is reached at age group 30-34 for all women in the local government. There is also a difference between urban and rural women in this regard. While a peak of 81.6 percent is reached at age group 30-34 for urban women, a peak of 72.7 percent is reached for their rural counterparts at age group 25-29. The proportion of women who are uncertain, is however, erratic.

The level of family planning approval in Iwo Local government seems to be fairly high especially when compared with the level of approval for the whole country. For instance Durojaiye-Ilori, (1981) reported that not more than 25 percent of Nigeria couples either did not approve or were uncertain. This implies that family planning service have been reaching a significant proportion of women in Iwo.

Any action programme however, will ultimately have to deal not so much in terms of general approval but with specific forces working for or against the adoption of family planning. In an attempt to clarify these forces, the women were asked the reasons for approving or not approving of family planning.

The reasons given for approving family planning are shown in Table 6.43. More than a third of the urban women who approved family planning gave "so that the mother can work" as reason for approving family planning. If this is added to the proportion of women who gave "so that husband

and wife can do other things", the figure will increase to about 50 percent of all women who approved family planning. The corresponding figure for the rural women is about 51.3 percent living in rural or urban areas of the local government are now aware of the fact that child-bearing can affect the work of mothers who work outside their home environment. Whether this awareness will be reflected in the actual reproductive performance of the women is another question. It is also interesting to note that only one percent of the women who approved family planning chose "small population is good for the country", as the reason for approving. This indicates that the women recognised the need for adopting family planning only at the micro level.

The reasons given for not approving family planning are shown in Table 6.44. The most common reasons given by both urban and rural women is "cost too much" and the proportion of women who gave this reason is almost the same in all the survey locations. Another reason worth mentioning here especially for rural women is "Husband disapproves". About one-fifth of rural women who disapproved family planning gave this reason for disapproving. The corresponding figure for the urban women is 13.7 percent. It seems therefore that the urban husbands are becoming dominant in child-bearing matters than their rural counterparts.

Overall, this is not a pessimistic picture in that some of the basic reasons advanced by the women were given out of ignorance and such ignorance is in fact susceptible to early and profound changes.

Approval of family planning in Iwo local government is positively related to the education of the women. (Table 6.45). The observed relationship between education and attitudes of family planning is statistically significant at 99 percent level. This is true in all the survey locations irrespective of size and socio-economic status. The most opposed to family planning are those without education. As level of education increases, the effect of rurality on family planning attitudes tends to diminish as women with secondary and post secondary education in both urban and rural areas of the local government exhibit almost the same level of approval.

The relationship between family planning attitudes and number of living children shown in Table 6.46 is positive and significant at 99 percent level. The proportion of women who approved family planning increases with the number of living children until it gets to the group of women with 7+ children where a slight fall is observed. This trend is that a significant proportion of older and illiterate women are found among women with 7 or more children and we have reported earlier that older and illiterate women of Iwo local government are less favourable to family planning. On the whole, the major difference appears to be between those who have no children and those who have some children although the proportion of childless women in our population is relatively small and this might have affected the observed difference. This trend had been observed somewhere else outside Nigeria. For instance, Stoeckel and Choudhury (1973) reported that women who were childless

had considerably lower proportions approving of family planning in Bangladesh than women with some children.

In Nigeria, it has also been demonstrated that acceptance of family planning is related to the number of children a woman has already. For example, Morgan (1972) reported that women with four or more children are "over-represented" at the clinics while those with fewer than four children are "under-represented". This observation agrees with Ohadike's (1960) result which shows that what the University graduates and professionals consider to be the minimum number of children in Nigeria before thinking of accepting birth control is four or five. Mott (1973) also found in his study of the University of Lagos undergraduates that a couple should have at least four children before accepting the use of family planning methods in marriage. Therefore, it is probably a general pattern at least in developing societies of the world that couples would not start thinking of accepting family planning until they have had at least some children.

Table 6.47 shows the relationship between family planning attitudes and religion and indicates a statistically significant relationship between the two variables (significant at 99 percent level). There are greater proportions of Christians who approve of family planning than Muslims. The relationship is consistently maintained while controlling for wife's education and number of living children as in Table 6.48. However, both Christian and Muslim women who have no children are unfavourable to family planning.

As expected, women who are in agriculture and related services are the most opposed to family planning (Table 6.49). The explanation for this is that significant proportion of them are illiterates and thus are the most traditional set of women in the local government. Virtually all women who are either teachers or nurses or clerks approved the use of family planning methods. Surprisingly, more than 7 out of every ten urban women who claimed to be unemployed approved the use of contraception. We would expect such complete housewives, to exhibit unfavourable attitude towards family planning. However, majority of these unemployed women have post-secondary education and this might have affected their attitudes toward family planning

Family planning attitude is positively related to income of the women in both urban and rural areas of the local government (Table 6.50). The relationship between income and family planning attitudes is also statistically significant at 99 percent significant level. Table 6.50 also indicates that women living in nuclear households are more favourable to family planning than women living in either extended or polygamous families. This trend is true for both urban and rural women. Women in modified extended families are much more likely to approve the use of contraception than women in polygamous families.

The relationship between educational status, type of household and family planning attitudes is as presented in Table 6.51. The polygamous households and modified extended households are combined in Table 6.51 for two main reasons.

First the number of women in the two types of household combined is still less than a third of women in nuclear type of household alone. Secondly, the polygamous household is very similar to the modified-extended household. It may have couples' mothers and any other persons like the modified extended household.

It seems that the relationship between type of household and attitude towards family planning is not clear. The proportion of women with post-secondary education who approved family planning in polygamy/modified-extended households is higher than that of the nuclear households whereas the proportion of women who approved family planning is consistently higher up to secondary school level for women in nuclear households than those in polygamous/modified extended households. Overall there is no significant differences between urban women in nuclear households and those in polygamous/modified extended households in their attitude towards family planning. However, the influence of household type in rural areas of the local government on attitude to family planning is significant. The non-nuclear households in rural areas of the local government are more traditional than those in urban areas and as such less favourable to family planning. On the whole, it seems that the influence of education on family planning attitudes is stronger than the influence of household type. However, the numbers involved in polygamous/modified extended households are relatively small and this might have affected the data obtained.

Wives who considered themselves the family decision-makers regarding fertility decisions are more likely than not to approve the use of family planning methods (Table 6.52). This is the case in both urban and rural areas of the local government. However, the number of women in this category is relatively small and therefore this result should be treated cautiously. The most opposed to family planning in the local government are those who claimed that their husbands are responsible for making decisions regarding how many children should be born. Attitude towards family planning tend to be favourable where decisions regarding how many children should be born are jointly made by both the husband and the wife.

6.6 PRACTICE OF FAMILY PLANNING

The proportion of women in Iwo local government who have ever used any family planning method is low when compared with the proportion who claimed to have ever heard about family planning. Table 6.53 indicates that less than half of the urban women and about a third of the rural women claimed to have ever used at least a method of family planning. A surprising finding with regard to the practice of family planning is the relatively low proportion (27.7 percent) who claimed to be currently using a method of family planning. This is very unexpected considering the level of knowledge and approval of family planning in the local government.

However, when the proportions of women who have ever used or are currently practising family planning are compared

Table 6.41

Distribution of the Respondents by Attitudes
Towards Family Planning, Iwo Local Govt. 1986

Attitudes Towards Family Planning	URBAN		RURAL		LOCAL GOVT.	
	N	%	N	%	N	%
Approved	647	63.3	271	58.7	918	65.1
Disapproved	261	27.5	175	37.9	436	30.9
Uncertain	40	4.2	16	3.4	56	4.0
Total	948	100.0	462	100.0	1410	100.0

Table 6.42

Percentage Distribution of Respondent's Attitudes Toward Family Planning by Age of Women, Iwo Local Government, 1986

Age Group	URBAN					Attitudes Towards			Family		Planning LOCAL GOV'T.				
	Appro- ved	Disap- proved	Uncer- tain	Total	N	Appro- ved	Disap- proved	Uncer- tain	Total	N	Appro- ved	Disap- proved	Uncer- tain	Total	N
15-19	46.2	53.8	-	100	13	54.5	45.5	-	100	22	51.4	48.6	-	100	35
20-24	60.4	39.6	-	100	106	65.5	34.5	-	100	55	62.1	37.9	-	100	161
25-29	73.0	24.9	2.1	100	185	72.7	26.0	1.3	100	77	72.9	25.2	1.9	100	262
30-34	81.5	18.5	-	100	173	66.7	33.3	-	100	69	77.3	22.7	-	100	242
35-39	79.4	15.8	4.8	100	165	60.3	39.7	-	100	68	73.8	22.7	3.5	100	233
40-44	54.3	34.3	11.4	100	105	53.0	37.3	9.7	100	83	53.7	35.6	10.7	100	188
45-49	59.6	34.8	5.6	100	89	59.5	35.1	5.4	100	37	59.5	34.9	5.6	100	126
50 +	53.6	36.6	9.8	100	112	27.5	62.7	9.8	100	51	45.4	44.8	9.8	100	163
All Ages	68.3	27.5	4.2	100	948	58.7	37.9	3.4	100	462	65.1	30.9	4.0	100	1410

Table 6.43Distribution of the Reasons for Approving Family Planning

Reasons for Approving Family Planning	URBAN		RURAL		LOCAL GOVT.	
	N	%	N	%	N	%
The health of mother is at stake	28	4.3	7	2.4	35	3.8
Better care can be given to each child	60	9.3	40	14.7	100	10.9
The family's economic situation	87	13.4	27	10.1	114	12.4
To help family happiness	46	7.1	12	4.4	58	6.3
Family already has enough children	96	14.9	45	16.5	141	15.4
So that the mother can work	241	37.2	64	23.6	305	33.2
So that husband and wife can do other things	81	12.5	75	27.7	156	17.0
Small population is good for the country	8	1.3	1	0.6	9	1.0
Total	647	100.0	271	100.0	918	100.0

Table 6.44Distribution of the Reasons for Disapproving Family Planning

Reasons for Disapproving Family Planning	URBAN		RURAL		LOCAL GOVT.	
	N	%	N	%	N	%
It is harmful to health	51	19.5	23	13.1	74	17.0
It is against religion	42	16.1	19	10.9	61	14.0
Cost too much	81	31.1	57	32.6	138	31.6
Too much trouble	6	2.3	10	5.7	16	3.7
Large family is better off	11	4.2	5	2.9	16	3.7
Morally wrong	24	9.3	20	11.4	44	10.0
Husband Disapproves	36	13.7	38	21.7	74	17.0
Large population is good for the country	10	3.8	3	1.7	13	3.0
Total	261	100	175	100	436	100

Table 6.45

Percentage Distribution of Women's Attitude Toward Family
Planning by Educational Attainment, Iwo Local Government,
1986

Education	Attitudes Towards Family Planning														
	URBAN					RURAL					LOCAL GOVT.				
	Appro- ved	Disap- proved	Uncer- tain	Total	N	Appro- ved	Disap- proved	Uncer- tain	Total	N	Appro- ved	Disap- proved	Uncer- tain	Total	N
None	32.9	53.8	13.3	100	173	28.7	64.0	7.3	100	136	31.1	58.3	10.6	100	309
Primary	63.9	29.8	6.6	100	198	57.5	38.9	3.5	100	113	61.4	33.1	5.5	100	311
Secun- dary	77.2	20.8	2.0	100	197	77.3	21.4	1.3	100	150	77.3	21.0	1.7	100	347
Post- Secondary	82.1	17.9	-	100	380	81.0	19.0	-	100	63	81.9	18.1	-	100	443
Total	68.3	27.5	4.2	100	948	58.7	37.9	3.4	100	462	65.1	30.9	4.0	100	1410

$$X^2 = 161.5$$

$$P < .01$$

$$df = 6$$

$$X^2 = 63.4$$

$$P < .01$$

$$df = 6$$

$$X^2 = 250.1$$

$$P < .01$$

$$df = 6$$

Table 6.46

Percentage Distribution of Respondents by Attitude Towards Family Planning by total Living Children, Iwo Local Government, 1986.

No. of Living Children	Attitudes Toward Family Planning														
	URBAN					RURAL					LOCAL GOVT.				
	Appro- ved	Disap- proved	Uncer- tain	Total	N	Appro- ved	Disap- proved	Uncer- tain	Total	N	Appro- ved	Disap- proved	Uncer- tain	Total	N
None	10.0	90.0	-	100	10	-	100	-	100	7	5.9	94.1	-	100	17
1 - 2	58.1	41.9	-	100	265	51.6	48.4	-	100	93	56.4	43.6	-	100	358
3 - 4	66.4	29.7	3.9	100	280	58.9	39.5	1.6	100	129	64.1	32.8	3.1	100	409
5 - 6	79.7	15.4	4.9	100	267	59.6	34.6	5.8	100	136	73.0	21.8	5.2	100	403
7 +	73.8	13.5	12.7	100	126	68.0	25.8	6.2	100	97	71.3	18.8	9.9	100	223
Total	68.3	27.5	4.2	100	948	58.7	37.9	3.4	100	462	65.1	30.9	4.0	100	1410

 $X^2 = 70.7$
 $P < .01$
 $X^2 = 21.7$
 $P < .01$
 $X^2 = 120.1$
 $P < .01$

Table 6.48

Percentage Distribution of Respondents' Attitudes toward Family Planning by religion, education and by number of living children

		Attitudes Toward Family Planning														
Edu. Religion		URBAN					RURAL					LOCAL GOVT.				
		Appro- ved	Disap- proved	Uncer- tain	Total	N	Appro- ved	Disap- proved	Uncer- tain	Total	N	Appro- ved	Disap- proved	Uncer- tain	Total	N
None																
Christians		47.1	50.0	2.9	100	34	40.0	50.0	10.0	100	10	45.5	50.0	4.5	100	44
Muslims		31.1	54.5	14.4	100	132	28.7	63.1	8.2	100	122	29.9	58.7	11.4	100	254
Primary																
Christians		78.7	17.1	4.2	100	47	60.0	30.0	10.0	100	10	75.4	19.3	5.3	100	57
Muslims		59.3	34.0	6.7	100	150	61.9	34.0	4.1	100	97	60.1	34.3	5.6	100	247
Secondary																
Christians		88.5	10.3	1.2	100	87	82.6	17.4	-	100	30	87.3	11.8	0.9	100	177
Muslims		67.6	29.6	2.8	100	118	72.7	27.3	-	100	121	70.3	28.4	1.3	100	239
Post-Secondary																
Christians		93.0	7.0	-	100	199	84.6	15.4	-	100	39	86.2	13.8	-	100	238
Muslims		76.2	23.8	-	100	164	75.0	25.0	-	100	24	76.1	23.9	-	100	188
Living Children																
None																
Christians		33.3	66.7	-	100	3	-	100	-	100	2	20.0	80.0	-	100	5
Muslims		-	100	-	100	7	-	100	-	100	5	-	100	-	100	12
1 - 2																
Christians		67.4	32.6	-	100	86	66.7	33.3	-	100	30	67.2	32.8	-	100	116
Muslims		53.6	46.4	-	100	179	44.4	55.6	-	100	63	51.2	48.8	-	100	242
3 - 4																
Christians		78.0	19.8	2.2	100	88	78.6	21.4	-	100	42	78.2	20.3	1.5	100	130
Muslims		60.8	37.4	4.8	100	184	49.4	48.3	2.3	100	83	57.2	38.3	4.0	100	267
5 +																
Christians		84.4	10.9	4.7	100	122	90.8	7.9	1.3	100	76	86.8	9.8	3.4	100	198
Muslims		74.7	16.6	8.7	100	262	49.7	42.0	8.3	100	152	65.4	26.1	8.5	100	414

Table 6.47

Percentage Distribution of Respondents by Attitudes Toward
Family Planning by Religion

Religion	Attitudes Toward Family Planning														
	URBAN					RURAL					LOCAL GOVT.				
	Appro- ved	Disap- proved	Uncer- tain	Total	N	Appro- ved	Disap- proved	Uncer- tain	Total	N	Appro- ved	Disap- proved	Uncer- tain	Total	N
Christians	80.5	18.4	1.1	100	369	84.1	12.2	3.7	100	82	81.2	17.3	1.5	100	451
Muslims	60.3	33.5	6.2	100	567	52.6	44.1	3.3	100	365	57.3	37.7	5.0	100	932
Traditional	55.6	33.3	11.1	100	9	64.3	28.6	7.1	100	14	60.9	30.4	8.7	100	23
No Religion	100	-	-	100	3	100	-	-	100	1	100	-	-	100	4
Total	60.3	27.5	4.2	100	948	58.7	37.9	3.4	100	462	65.1	30.9	4.0	100	1410

$$X^2 = 45.0$$

$$P < .01$$

$$df = 4$$

$$X^2 = 23.3$$

$$P < .01$$

$$df = 4$$

$$X^2 = 69.8$$

$$P < .01$$

$$df = 4$$

Table 6.49

Percentage Distribution of Respondents by Attitude Towards Family Planning and by Women's Occupation, Iwo Local Government, 1986

Occupation	Attitudes Towards Family Planning														
	URBAN					RURAL					LOCAL GOVT.				
	Appro- ved	Disap- proved	Uncer- tain	Total	N	Appro- ved	Disap- proved	Uncer- tain	Total	N	Appro- ved	Disap- proved	Uncer- tain	Total	N
Agricultural	29.2	57.3	13.5	100	89	5.3	80.0	14.7	100	75	18.3	67.7	14.0	100	164
Tailors, Hairdressers	71.3	25.3	3.4	100	174	51.3	51.3	48.7	-	76	65.2	32.4	2.4	100	250
Trader	56.2	37.2	6.6	100	288	73.3	24.4	2.1	100	238	64.1	31.4	4.5	100	526
Teachers etc	85.3	13.9	0.8	100	363	84.6	15.4	-	100	39	85.3	14.0	0.7	100	395
Unemployed	72.4	27.6	-	100	29	58.8	41.2	-	100	34	65.1	34.9	-	100	63
Total	68.3	27.5	4.2	100	943	58.7	37.9	3.4	100	455	65.1	30.9	4.0	100	1398

$$X^2 = 168.3$$

$$P < .01$$

$$df = 8$$

$$X^2 = 62.8$$

$$P < .01$$

$$df = 8$$

$$X^2 = 252.8$$

$$P < .01$$

$$df = 4$$

Table 6.50

Percentage Distribution of Respondents by Attitudes Toward
Family Planning and by Income and Household Type

Attitudes Towards Family Planning															
Income	URBAN					RURAL					LOCAL GOVT.				
	Appro- ved	Disap- proved	Uncer- tain	Total	N	Appro- ved	Disap- proved	Uncer- tain	Total	N	Appro- ved	Disap- proved	Uncer- tain	Total	N
Low	55.7	38.0	6.3	100	461	51.7	43.9	4.4	100	294	54.2	40.3	5.5	100	755
Medium	78.5	19.1	2.4	100	372	66.4	31.3	2.3	100	134	75.3	22.3	2.4	100	506
High	85.2	13.0	1.8	100	115	88.2	11.8	--	100	34	85.9	12.8	1.3	100	149
Total	68.2	27.5	4.3	100	948	58.7	37.9	3.4	100	462	65.1	30.9	4.0	100	1410
	$X^2 = 68.2$					$X^2 = 27.7$					$X^2 = 93.8$				
	$P < .01$					$P < .01$					$P < .01$				
	$df = 4$					$df = 4$					$df = 4$				
<u>Household</u>															
Nuclear	73.6	25.5	0.9	100	753	73.6	25.4	1.0	100	307	73.6	25.5	0.9	100	1060
Extended	55.6	27.0	17.4	100	126	53.1	40.6	6.3	100	32	55.1	29.7	15.2	100	158
Polygynous	33.3	50.8	15.9	100	69	22.8	68.3	8.9	100	123	26.6	62.0	11.4	100	192
All Groups	68.2	27.5	4.3	100	948	58.7	37.9	3.4	100	462	65.1	30.9	4.0	100	1410
	$X^2 = 149.6$					$X^2 = 83.3$					$X^2 = 232.3$				
	$P < .01$					$P < .01$					$P < .01$				
	$df = 4$					$df = 4$					$df = 4$				

Table 6.51

Percentage Distribution of Respondents by Attitudes Toward
Family Planning and by Education and Household Type, Iwo
Local Government, 1986

EDUCATION	Attitudes Towards Family Planning									
	Nuclear Household					Polygynous/Modified-Extended				
	Appro- ved	Disap- proved	Uncer- tain	Total	N	Appro- ved	Disap- proved	Uncer- tain	Total	N
<u>URBAN</u>										
None	28.5	54.7	16.8	100	137	30.5	52.8	16.7	100	36
Primary	61.4	34.2	16.8	100	158	52.5	42.5	5.0	100	40
Secondary	75.0	23.7	4.4	100	156	68.3	31.7	-	100	41
Post- Secondary	86.4	13.6	-	100	302	93.6	6.4	-	100	78
<u>RURAL</u>										
None	38.9	55.6	5.5	100	90	13.0	76.1	10.9	100	46
Primary	68.0	30.7	1.3	100	75	39.5	52.6	7.9	100	38
Secondary	79.0	20.0	1.0	100	100	68.0	30.0	2.0	100	50
Post- Secondary	85.7	14.3	-	100	42	71.4	28.6	-	100	21
<u>LOCAL GOVT</u>										
None	32.6	55.1	12.3	100	227	20.7	65.9	13.4	100	82
Primary	63.5	33.0	3.5	100	233	44.2	47.4	6.4	100	78
Secondary	76.6	22.3	1.1	100	256	68.1	30.8	1.1	100	91
Post- Secondary	86.3	13.7	-	100	344	88.9	11.1	-	100	99

Table 6.52

Distribution of the Respondents Family Planning Attitudes by "Who makes Children Decisions"

Attitudes of Family Planning	Who Makes Children Decisions									
	Husband		Wife		Both		No one		Total	
	N	%	N	%	N	%	N	%	N	%
<u>URBAN</u>										
Approved	89	47.8	27	81.8	273	78.2	255	68.0	644	68.3
Disapproved	94	50.6	6	18.2	65	18.6	94	25.1	259	27.5
Uncertain	3	1.6	-	-	11	3.2	26	6.9	40	4.1
Total	186	100	33	100	349	100	375	100	943	100
<u>RURAL</u>										
Approved	61	53.5	3	75.0	59	66.3	148	58.3	271	58.8
Disapproved	52	45.6	1	25.0	27	30.3	94	37.0	174	37.7
Uncertain	1	0.9	-	-	3	3.4	12	4.7	16	3.5
Total	114	100	4	100	89	100	254	100	461	100
<u>LOCAL GOVT.</u>										
Approved	150	50.0	30	61.1	232	75.8	403	64.1	915	65.2
Disapproved	146	48.7	7	18.9	92	21.0	188	29.9	433	30.8
Uncertain	4	1.3	-	-	14	3.2	38	6.0	56	4.0
Total	300	100	37	100	438	100	629	100	1404	100

with the results of similar studies conducted elsewhere in Nigeria, it was discovered that Iwo local government women were still far ahead of women in some other parts of Nigeria in the area of practice of family planning especially if we disregard the time lag. Caldwell and Ware (1978) for instance reported that only one-sixth of Ibadan women of reproductive age have ever used a method of birth control other than abstinence, and only one-seventh were either using a method at the time of the survey or had recently used a method. Ukaegbu (1977) also reported that only 3-5 percent of the women interviewed in his study of Ngwa (an Imo State rural community) had ever used modern contraceptive methods.

Caldwell and Igun (1970) also reported a rural birth control levels of one percent in Southern Nigeria, and only 0.4 percent in Northern Nigeria (other than by abstinence). Morgan (1975) however, suggested that Lagos may differ from the rest of the country as the levels of contraception may be as high as twice that of Ibadan. Olusanya (1980) reported that 47 percent of women in Surulere and 7.4 percent of women in Yaba/Ebute-Meta have ever used a method of family planning.

The Nigeria fertility survey of 1981-82 (National Population Bureau (1984) also reported that on the whole 15 percent of the women interviewed has used a method of family planning and there are variations by region. The South is clearly ahead of the North in terms of the knowledge and use of family planning techniques. Thus, the

the level of use of contraception in Iwo local government is significantly higher than for the entire country in 1982.

Tables 6.53 and 6.54 also indicate a positive and statistically significant relationship between education and ever practice or currently practising family planning. As the level of education of women increases, the proportion of women who have ever practised family planning also increases. The Nigeria fertility survey of 1981-82 mentioned earlier also reported a positive association between education and actual use of family planning methods (National Population Bureau, 1984). About 42 percent of the women with secondary or higher education compared to 25 percent with primary and 10 percent with no education has used a method of family planning.

Women who claimed to have ever used family planning methods but are not currently using one were asked the reasons for discontinuing the use of contraception and the responses are as presented in Table 6.55. Almost a third of the urban women and about four out of ten of the rural women answered "my last child is old; I want another one". What this implies is the fact that most users of contraception in Iwo local government are using it not to stop or reduce the number of children they would have but to space them and at the same time to satisfy their sexual needs as well as those of their husbands. Table 6.55 also confirmed this statement; about one-quarter of the urban women and more than one-fifth of the rural women said that they were currently using contraception because the children they were nursing

at the time of the interview were young and another 16 percent of the women in the entire local government reported that they were using contraception as at of the time of the interview because they were the only wives of their husbands. However more than a third of the women claimed that they were currently using contraception because they had got enough children. The other reasons for stopping the use of contraception worth mentioning here are: "It is too expensive nowadays", (16.5 percent) "It is no more readily available", (21.2 percent). When the women were questioned further, they reported to us that these contraceptives were no more readily available at the family planning clinic a unit of Iwo General Hospital, and so they were left with only one option of buying in Chemist shops in the town at very high prices. If this trend continues, it would have an adverse effect on the use of contraception in the local government.

In order to further establish the fact that contraception is used for spacing rather than for limiting child-bearing in Iwo local government, further analysis were made on women who claimed to have ever used family planning methods. The distribution of the women who have ever used family planning methods by the number of children they had before they started the use by education is presented in Table 6.57. The table indicates that virtually all the ever-users of contraception have at least four children before they started using it irrespective of their educational status. About 4 out of every 5 women who have ever used family planning methods had four or more children before they thought of using

family planning methods; the level of education attained by the women is very irrelevant in this regard.

Thus spacing is the basic objective for contraceptive use in Iwo local government. For a more detailed study of the observed pattern, we referred again to the first responses of Table 6.55, "My last child is old; I want another one". In all 74 women in the whole local government gave this reason for stopping the use of contraception. The distribution of the 74 women by age and education is as shown in Table 6.58. The table indicates that all the women are below age 40 and about 85 percent of them are between age 20 and 34. Almost 9 out of every 10 of the women who gave this reason for stopping the use of contraception have secondary or higher education. In fact less than 3 percent of the women have no education. Table 6.59 also indicates that about 91 percent of the women who gave this reason for stopping the use of contraception have got at least 3 children. Thus, women with at least secondary education and at least three children stopped the use of contraception so as to have another pregnancy and consequently another birth. Therefore the implication of all these findings is that neither education nor the use of family planning can explain the fertility characteristics of our respondents. The love for larger number of children by them is so strong that such factors as education or use or non-use of contraception are hardly relevant.

A content analysis of the questionnaires of the 74 women who stopped the use of contraception because they were looking

for another pregnancy is used here to support this seeming insatiable desire for children by our respondents.

A University graduate women who had four living children and who claimed to have stopped the use of contraception so as to have another pregnancy and who was questioned further by the interviewer on why she wanted another child when she had got 4 children, had this to say:

Women with or without education are like trees and one of the basic function of a tree is to bear as many fruits as possible so that a tree that is unable to bear fruits is not fit to live so also a woman that is unable to bear children is regarded as a fruitless tree that is not fit to live.

Another woman with teachers' garde II certificate and three living children and who claimed to have stopped the use of contraception so as to have another pregnancy was similarly questioned in Bode-Osi on why she stopped the use of contraception she answered:

You will observe that the three children I told you I have are all girls. Since these three children will grow up and marry outside and change their names to those of their husbands, who else will remain to continue to bear the name of our own family? So I cannot stop child-bearing until I have got at least two male births.

The answer of these respondents is not too far from what we discussed earlier in this chapter that Yoruba women preferred large families so as to get some of them to continue their lineages. We also showed that women whose first two children were males desired on the average fewer children than women whose first two children were females. The answer of the respondents quoted above is to confirm these our earlier observations.

One other woman who had ever used family planning but currently not using one because she wanted another pregnancy was further questioned by an interviewer in Oluponna on why she wanted another child when she had already got five children. She also has this to say:

My husband told me he wanted as many as eight children and if I am unable to give him these eight children, he would marry another woman. Since I would not like my husband to take another woman, I must have to abide by his wish.

In the above answer, two factors also feature prominently. First, the dominance of husband over wife. We have also mentioned this earlier, that as far as decisions as to how many children are to be born is concerned, the husband has the final say.

Another factor that feature in the above answer is that inability to procreate sufficiently may lead to marital breakdown as the husband searches for a more productive partner. Therefore contraceptive as mentioned earlier are not used to limit child-bearing by Yoruba women but just for spacing as an average Yoruba couple will not think of using family planning methods unless they have some children, their level of education or any other socio-economic characteristics being irrelevant.

In the local government, a little over one-quarter of the women interviewed claimed to have ever attended family planning clinic. As expected, the urban areas are far ahead of the rural areas in this respect (Table 6.60). The table indicates that the relationship between family planning clinic

attendant and education is positive and statistically significant at 99 percent level. A significant proportion of women who reported that they had ever attended family planning clinic claimed to have received only moral support from their husbands (Table 6.62). It seems from this evidence that family planning activity in Iwo local government is more of women affairs as just about 13 percent of the urban women and 7 (seven) percent of the rural women who have ever attended family planning clinics received financial assistance from their husbands. It seems that the proportion of women who have ever attended family planning clinic and have received financial assistance from their husbands declines with education. The explanation for this might be that women with higher education are likely to have secured employment which makes them less dependent on their husbands in the procurement of many household materials including the payment for family planning clinic services. Surprisingly, some women in both urban and rural areas of the local government do attend family planning clinic without the knowledge of their husbands. It follows that family planning methods can be practised even if the husband is opposed to them. The relationship between women who have ever practised family planning and age is as shown in Table 6.62. The proportion of women who have ever practised family planning increases steadily with age until a maximum is reached in age group 35 - 39 where the proportion of users of family planning methods starts to decrease consistently. The trend is the same for both urban and rural women except that the

maximum is reached earlier in rural than urban areas of the local government. However, the proportion of rural women who have ever practised family planning is lower at each age group than their urban counterparts in the same age group.

The relationship between current users of contraception shown in Table 6.63 follow the same pattern as for the women who have ever practised family planning discussed earlier. However, of all the women in age group 15-19, none of them is currently using any family planning method. It seems therefore, that the use of contraception in Iwo local government though limited has been concentrated among women who are the greatest contributors to fertility. This trend expected to have affected the level of fertility of women in the local government. Whether or not it has done so will be seen in chapter eight.

As shown in Table 6.64, proportion of women who have ever practised family planning methods increases as the number of living children a woman has already increases. In other words, the proportion of women who have ever practised family planning is positively and significantly associated with the number of living children. The childless women are virtually non-practitioners of family planning in Iwo local government.

Table 6.65 indicates that twice as many Christians as are Muslims have ever practised family planning in Iwo local government. The number of women who claimed to be traditional worshippers or who claimed to have got no religion

is small and that smallness should have affected the statistics computed for them. However, the relationships between religion and practice of family planning is significant at 99 percent level.

When the respondents' education is used as a control variable as in Table 6.66, the expected differences between religious affiliation and practice of family planning occur only among women with some education. There are no significant differences between illiterate Muslims and Christians in their practice of family planning. This implies that education exercises a stronger influence on the practice of family planning than does religion among women of Iwo local government. A similar result is obtained when the number of living children is controlled. All the childless women interviewed irrespective of their religious affiliation have ever used any method of family planning. Those women who have had no children represented an extreme group for each religion since both religions stress that women must have some children. These childless women in both religions probably do not even consider family planning because of their desire to have at least some children. Thus the differential practice of family planning is not likely to appear until after some children are born.

Occupation of women is also significantly associated with the practice of family planning (Table 6.67). The teacher, nurses and clerks have the highest proportion practising family planning while women in agriculture and related services have the lowest proportion practising

family planning. The proportion of rural women in agriculture who claimed to have ever used any method is very low (6.7 percent). This is however expected, because in a rural agrarian society, where a large family is an economic asset, the practice of family planning will be very low.

As shown in Table 6.68, the practice of family planning shows a positive and statistically significant relationship with wife's income. Proportion practising family planning increases consistently with the increase in wife's income. This pattern is observed in urban and rural areas of the local government. Traditionally, the higher status groups (groups in higher education, higher income etc) are the first to be exposed to, and to adopt new innovations which are then gradually diffused through the middle classes to the lower classes. In developing societies like Nigeria, the higher status groups are generally characterized as being better educated, having higher income, and enjoying higher overall standard of living than majority of the population. They can have access to information through papers, radio and television and their attitudes and actual behaviour are thus changed faster than their counterparts in lower status groups.

More than a half of the urban women who live in nuclear households have used at least a method of family planning (Table 6.68). The corresponding figure for the rural women is about 41 percent. Women in polygamous households have the least proportion who have ever practised family planning. This observation is true for both urban and rural areas of the local government.

Table 6.53

Percentage Distribution of Respondents who have Ever Practised Family Planning by Education.

EDUCATION	Practice of Family Planny (Ever Practice)											
	URBAN				RURAL				LOCAL GOVT.			
	Yes	No	Total	N	Yes	No	Total	N	Yes	No	Total	N
None	17.9	82.1	100	173	11.0	89.0	100	136	14.9	85.1	100	309
Primary	32.8	67.2	100	198	23.9	76.1	100	113	29.6	70.4	100	311
Secondary	51.3	48.7	100	197	48.0	52.0	100	150	49.9	50.1	100	347
Post-Sec.	65.3	34.7	100	380	69.8	30.2	100	63	65.9	34.1	100	443
Total	46.9	53.1	100	948	34.2	65.8	100	462	42.8	57.2	100	1410

$$X^2 = 152.7$$

$$P < .01$$

$$X^2 = 61.3$$

$$P < .01$$

$$X^2 = 228.9$$

$$P < .01$$

$$df = 3$$

Table 6.54

Distribution of Respondents who are currently using Family Planning Method by Education

EDUCATION	Women Currently Using Family Planning											
	URBAN				RURAL				LOCAL GOVT.			
	Yes	No	Total	N	Yes	No	Total	N	Yes	No	Total	N
None	12.1	87.9	100	173	6.6	93.4	100	136	10.8	89.2	100	309
Primary	23.7	76.3	100	198	14.2	85.8	100	113	20.3	79.7	100	311
Secondary	36.0	64.0	100	197	22.0	78.0	100	150	30.0	70.0	100	347
Post-Sec.	44.2	55.8	100	380	41.3	58.7	100	63	43.8	56.2	100	443
Total	32.4	67.6	100	948	18.2	81.8	100	462	27.7	72.3	100	1410

$$X^2 = 64.6$$

$$P < .01$$

$$df = 3$$

$$X^2 = 25.3$$

$$P < .01$$

$$df = 3$$

$$X^2 = 96.5$$

$$P < .01$$

$$df = .25$$

Table 6.55

Distribution of Respondents According to Reasons for
Discontinuing the use of Family Planning Methods

Reasons	URBAN		RURAL		LOCAL GOVT.	
	N	%	N	%	N	%
My last child is old, I want another one	44	31.9	30	40.5	74	34.9
I am no more in school	16	11.6	7	9.4	23	10.9
It makes me fat unnecessarily	3	2.2	-	-	3	1.4
My husband asked me to stop it	6	4.3	3	4.1	9	4.3
Because of other side effects	2	1.5	-	-	2	0.9
It is expensive and not readily available	57	41.3	23	31.1	80	37.7
It reduces sexual enjoyment	10	7.2	11	14.9	21	9.9
Total	138	100	74	100	212	100

Table 6.56

Distribution of Respondents According to Reasons
for the Continued Use of Family Planning Methods

Reasons	URBAN		RURAL		LOCAL GOVT.	
	N	%	N	%	N	%
Because I am in school	52	16.9	8	9.5	60	15.4
I have got enough children	109	35.5	33	39.3	142	36.3
Because the child I am nursing is young	81	26.4	18	21.4	99	25.3
My husband said he has got enough children	17	5.5	10	11.9	27	6.9
I am the only wife of my husband	48	15.7	15	17.9	63	16.1
Total	307	100	84	100	391	100

Table 6.57

Distribution of Respondents who have ever used Family Planning Methods by the Number of Children they had before they started Using Methods and by Education

Respondents Having	Education of Women									
	None		Pry		Secondary		Post-Sec.		Total	
	N	%	N	%	N	%	N	%	N	%
0 - 1 Child -	-		2	2.2	4	2.3	7	2.4	13	2.2
Two children	2	4.3	6	6.5	10	5.9	13	4.4	31	5.1
Three Children	7	15.3	11	12.0	21	12.1	42	14.4	81	13.4
4 or more Children	37	80.4	73	79.3	138	79.8	230	78.8	478	79.3
Total	46	100	92	100	173	100	292	100	603	100

Table 6.58

Distribution of the Respondents who gave "My last child is old, I want another one" as reason for discontinuing the use of Contraception by Age and Education

Age	Education of Women									
	None		Pry		Secondary		Post-Sec.		Total	
	N	%	N	%	N	%	N	%	N	%
15 - 19	-		-		1	3.6	-		1	1.4
20 - 24	-		1	14.3	4	14.3	1	2.7	6	8.1
25 - 29	2	100	4	57.1	6	21.4	9	24.3	21	28.4
30 - 34	-		2	28.6	14	50.0	20	54.1	36	48.6
35 - 39	-		-		3	10.7	7	18.9	10	13.5
40 - 44	-		-		-		-		-	
45 - 49	-		-		-		-		-	
Total	2	100	7	100	28	100	37	100	74	100

Table 6.59

Average Number of Children born alive to Women
who gave "My last child is old, I want another
one" as reason for Discontinuing the Use of
Contraception by Age

Age of Women	No of Women	No of Children born alive	Average No of children born alive
15 - 19	1	1	1.00
20 - 24	6	10	1.67
25 - 29	21	68	3.23
30 - 34	36	161	4.47
35 - 39	10	48	4.80
Total	74	288	3.89

Table 6.60

Distribution of the Respondents by Whether or not they
have ever Attended any Family Planning clinic by Education

Education of women	Family Planning Clinic Attendants											
	URBAN				RURAL				LOCAL GOVT			
	Yes	No	Total	N	Yes	No	Total	N	Yes	No	Total	N
None	8.1	91.9	100	173	5.1	94.9	100	136	6.8	93.2	100	309
Primary	15.7	84.3	100	198	11.5	88.5	100	113	14.1	85.9	100	311
Secondary	31.5	68.5	100	197	29.3	70.7	100	150	30.5	69.5	100	347
Post-Sec.	49.7	50.3	100	380	42.9	51.7	100	63	48.8	51.2	100	443
Total	31.2	68.8	100	948	19.7	80.3	100	462	27.4	72.6	100	1410

$$X^2 = 125.6$$

$$P < .01$$

$$df = 3$$

$$X^2 = 59.2$$

$$P < .01$$

$$df = 3$$

$$X^2 = 187.5$$

$$P < .01$$

$$df = 3$$

Table 6.61

Distribution of the Responses to the Question "would you say that your husband gave you moral or financial support before you attended the clinic" by education

Responses	Education									
	None		Primary		Secondary		Post-Sec		All Groups	
	N	%	N	%	N	%	N	%	N	%
Moral	8	38.1	15	34.1	47	44.3	175	81.0	245	63.4
Financial	9	42.9	12	27.3	15	14.2	11	5.1	47	12.1
No Support	4	19.0	11	25.0	18	17.0	7	3.2	40	10.3
Does not know	-	-	6	13.6	26	24.5	23	10.7	55	14.2
Total	21	100	44	100	106	100	216	100	387	100

Table 6.62
Percentage Distribution of Respondents who have ever Practised Family Planning by Age

Age	Ever Practice Family Planning											
	URBAN			N	RURAL			N	LOCAL GOVT			N
	Yes	No	Total		Yes	No	Total		Yes	No	Total	
15-19	15.4	84.6	100	13	13.6	86.4	100	22	14.3	14.3	100	35
20-24	38.7	61.3	100	106	25.6	74.4	100	55	34.2	65.8	100	161
25-29	48.1	51.9	100	185	45.5	54.5	100	77	47.3	52.7	100	262
30-34	53.2	46.8	100	173	59.4	40.6	100	69	55.0	45.0	100	242
35-39	61.2	38.8	100	165	45.6	54.4	100	68	56.7	43.3	100	233
40-44	55.2	44.8	100	105	25.3	74.7	100	83	42.0	58.0	100	188
45-49	46.1	53.9	100	89	21.6	78.8	100	37	38.9	61.1	100	126
50 +	18.8	81.2	100	112	10.9	89.1	100	51	16.0	84.0	100	163
Total	469	54.1	100	948	34.2	65.8	100	462	42.8	57.2	100	1410

Table 6.63

Percentage Distribution of Respondents Currently Practising
Family Planning by Age

Currently Practising Family Planning													
Age	Yes	URBAN			N	RURAL			N	LOCAL GOVT.			N
		No	Total			Yes	No	Total		Yes	No	Total	
15-19	-	100	100	100	-	100	100	22	-	100	100	35	
20-24	19.8	80.2	100	106	7.3	92.7	100	55	15.5	84.5	100	161	
25-29	34.1	65.9	100	185	20.8	79.2	100	77	30.2	69.8	100	262	
30-34	41.0	59.0	100	173	36.2	63.8	100	69	39.7	60.3	100	242	
35-39	48.5	51.5	100	165	23.5	76.5	100	68	41.2	58.8	100	233	
40-44	37.6	62.9	100	105	15.7	84.3	100	83	27.7	72.3	100	188	
45-49	25.8	74.2	100	89	16.2	83.8	100	37	23.0	77.0	100	126	
50++	8.9	91.1	100	112	7.8	92.2	100	51	8.6	91.4	100	163	
Total	32.4	67.6	100	948	18.2	81.2	100	462	27.7	72.3	100	1410	

Table 6.64

Percentage Distribution of Respondents who ever Practised
Family Planning by Number of Living
Children

Ever Practice of Family Planning														
No of Living Children	Yes	URBAN			N	Yes	RURAL			N	LOCAL GOVT.			N
		No	Total				No	Total			Yes	No	Total	
None	-	100	100	10	-	100	100	7	-	100	100	17		
1-2	38.1	61.9	100	265	19.4	80.6	100	93	33.2	66.8	100	358		
3-4	45.0	55.0	100	280	33.3	66.7	100	129	41.3	58.7	100	409		
5-6	53.2	46.8	100	257	40.4	59.6	100	136	48.9	51.1	100	403		
7 +	59.5	40.5	100	126	43.3	56.7	100	97	52.5	47.5	100	223		
Total	46.9	53.1	100	948	34.2	65.8	100	462	42.8	57.2	100	1410		
$X^2 = 64.5$					$x^2 = 21.3$					$X^2 = 40.6$				
$P < .01$					$P < .01$					$P < .01$				
$df = 5$					$df = 4$					$df = 4$				

Table 6.65

Percentage Distribution of Respondents who have ever Practised Family Planning By Religion

Religion	Ever Practice of Family Planning											
	URBAN				RURAL				LOCAL GOVT.			
	Yes	No	Total	N	Yes	No	Total	N	Yes	No	Total	N
Christians	65.3	34.7	100	369	62.2	37.8	100	82	64.7	35.3	100	451
Muslim	34.6	65.4	100	567	28.8	73.2	100	385	31.5	68.5	100	932
Traditional	55.6	44.4	100	9	57.1	42.9	100	14	56.5	43.5	100	23
No Religion	100	-	100	3	100	-	100	1	100	-	100	4
All Groups	46.9	53.1	100	948	34.2	65.8	100	462	42.8	57.2	100	1410

$$X^2 = 84.6$$

$$P < .01$$

$$df = 2$$

$$X^2 = 28.3$$

$$P < .01$$

$$df = 2$$

$$X^2 = 147.7$$

$$P < .01$$

$$df = 2$$

Table 6.66

Percentage Distribution of Respondents who have Ever practised
Family Planning by Religious Affiliation and by Education

Education Religion	Ever Practice of Family Planning											
	URBAN				RURAL				LOCAL GOVT.			
	Yes	No	Total	N	Yes	No	Total	N	Yes	No	Total	N
None												
Christians	17.6	82.4	100	34	20.0	80.0	100	10	18.2	81.8	100	44
Muslims	15.9	84.1	100	132	18.8	81.2	100	122	17.3	82.7	100	254
Primary												
Christians	44.7	55.3	100	47	30.00	70.0	100	10	42.1	57.9	100	57
Muslims	36.7	63.3	100	150	26.8	73.2	100	97	32.8	67.2	100	247
Secondary												
Christians	55.2	44.8	100	87	53.3	46.7	100	30	54.7	45.3	100	117
Muslims	44.1	55.9	100	118	34.7	65.3	100	121	39.3	60.7	100	239
Post.Sec.												
Christians	66.8	33.4	100	199	61.5	38.5	100	39	66.0	44.0	100	238
Muslims	54.3	45.7	100	164	54.2	45.8	100	24	54.3	45.7	100	188
<u>Living Children</u>												
None												
Christians	-	100	100	3	-	100	100	2	-	100	100	5
Muslims	-	100	100	7	-	100	100	5	-	100	100	12
1 - 2												
Christians	41.9	58.1	100	86	33.3	66.7	100	30	37.7	63.3	100	116
Muslims	19.0	81.0	100	179	17.7	82.3	100	63	17.4	82.6	100	242
3 - 4												
Christians	56.8	43.2	100	88	40.5	59.5	100	42	51.5	48.5	100	130
Muslims	44.0	56.0	100	184	34.9	65.1	100	83	41.2	58.8	100	267
5 +												
Christians	70.5	29.5	100	122	56.6	43.4	100	76	65.2	34.8	100	198
Muslims	55.3	44.7	100	262	60.5	39.5	100	15	46.1	53.9	100	414

Table 6.69

Distribution of the Respondents who have Ever Practised
Family Planning by Education and Household Type, Iwo
Local Government, 1986

Education	Nuclear Household				Polygynous/Modified-Extended			
	Yes	No	Total	N	Yes	No	Total	N
<u>URBAN</u>								
None	25.5	74.5	100.0	137	19.4	80.6	100.0	36
Primary	42.2	57.8	100.0	158	35.0	65.0	100.0	40
Secondary	49.4	50.6	100.0	156	46.3	53.7	100.0	41
Post Secon.	57.6	42.4	100.0	302	53.8	46.2	100.0	78
<u>RURAL</u>								
None	21.1	78.9	100.0	90	6.5	93.5	100.0	46
Primary	34.7	65.3	100.0	75	28.9	71.1	100.0	38
Secondary	37.0	63.0	100.0	100	36.0	64.0	100.0	50
Post Secon.	54.8	45.2	100.0	42	47.6	52.4	100.0	21
<u>LOCAL GOVT.</u>								
None	23.8	76.2	100.0	227	12.2	87.8	100.0	82
Primary	39.9	60.1	100.0	233	32.1	67.9	100.0	78
Secondary	44.5	55.5	100.0	256	40.7	59.3	100.0	91
Post Secon.	57.3	42.7	100.0	344	52.5	47.5	100.0	99

Table 6.70

Distribution of the Respondents Who Have Ever Practised
Family Planning by "Who Makes Children Decisions?"

Whether respondents ever practised family planning or not	Who Makes Children Decisions									
	Husband		Wife		Both		No One		Total	
	N	%	N	%	N	%	N	%	N	%
<u>URBAN</u>										
Yes	52	28.0	22	66.7	201	56.7	169	45.1	444	47.1
No	134	72.0	111	33.3	148	42.4	206	54.9	499	52.9
Total	186	100	33	100	349	100	375	100	943	100

$X^2 = 61.31$; $P < .01$; $C = .25$; $df = 3$

RURAL

Yes	37	32.5	3	75.0	46	51.7	72	28.3	158	34.3
No	77	67.5	1	25.0	43	48.3	182	71.7	303	65.7
Total	114	100	4	100	89	100	294	100	461	100

$X^2 = 26.5$; $P .01$; $C = .23$; $df = 3$

LOCAL GOVT.

Yes	89	29.7	25	67.6	247	56.4	241	38.3	602	42.9
No	211	70.7	12	32.4	191	43.6	388	61.7	802	57.1
Total	300	100	37	100	438	100	629	100	1404	100

$X^2 = 68.6$; $P < .01$; $C = .22$; $df = 3$

Proportion of women who have ever practised family planning in both nuclear and polygamous/modified-extended households increases consistently with the increase in the respondents' education. However, the proportions of women who have ever practised family planning at each educational category is consistently higher in nuclear than polygamous/modified extended households (Table 6.69). This trend is the same in urban and rural areas of the local government.

Like in attitude and knowledge, the women in the sample who claimed that they were the ones who made the decision regarding how many children they should have, have the greatest proportion who have ever practised family planning. (Table 6.70). Joint decision making is also associated with the practice of family planning as about 56 percent of women who claimed that the decisions regarding how many children should be born are jointly made by them and their husbands, have ever practised family planning.

6.7 SUMMARY

In this chapter, we have attempted to show the average number of children expected by rural and urban women. On the whole, the average number of children expected by all the women in the local government is about 6.85, a figure considered very high. These women irrespective of their ages still adhere to traditional values and large family norms. The question now, is why do these women expected to have as many as 6.85 children on the average? To answer

this crucial question, we have related expected number of children with some variables like education, occupation, income and household type.

The expected number of children declines with education so that women with post secondary education have the lowest expected number of children and the illiterate women have the highest number of expected children. High level of education provides increased decision making power of the women and makes them more aware of alternative roles to childbearing. As these alternative roles become increasingly acceptable, expected number of children will also decline and this is what has happened to women with post secondary education in Iwo. This is not to say however, that we have found the explanation for the persistently high expected number of children in education as women with the post secondary education still expected to have over six children on the average.

Besides education, expected number of children is also associated with some socio-economic variables like occupation income, and family type. Occupation, however, has no systematic relationship with expected number of children. The average expected number of children of the teachers, nurses and clerks is equally high and even higher than those of women in agriculture and trading. Expected number of children has negative relationship with income. Women in polygamous households have the lowest expected number of children.

The pro-natalist character of women in Iwo local government was further confirmed as a significant proportion of

them preferred large families to small families. The major reasons they gave for preferring large families included 'To inherit my property'; 'To honour me at death'; 'To continue my lineage'; 'children are good in themselves'; 'To abide by the wish of family members'. These reasons deviate significantly from the traditional reasons which had been discussed extensively by previous scholars. The traditional reasons centred around economic variables. Thus, the Yoruba preferred large families to small families because of social and psychological factors so that economic factors are very secondary.

On the whole, an average woman in Iwo local government would like to have at least three out of every five of her children to be males. However, there are variations as to the sex of children the woman has already.

The ideal interval between births as presented in this chapter is lower than the traditional pattern of birth spacing among the Yoruba. This probably due to the fact that birth interval is no more tied to custom but influenced by the conditions in which the couple found themselves. What effect will this type of lower birth interval have on the number actually born by an average Yoruba woman? Will the observed shorter interval between birth be an explanatory factor for the persistently high fertility among the Yoruba. These and similar questions will be examined in the next two chapters.

In general, the current state of family planning knowledge, attitudes and practices in Iwo local government is very encouraging. Nearly 55 percent could name a method,

about two-thirds approved the use of contraceptive in marriage, about 43 percent have ever used at least a method and more than a quarter of the women are currently practising family planning. The question is, with this significant proportion practising family planning, why the higher expected number of children (6.85)?

In an attempt to answer that crucial question, this chapter examined the reasons for discontinuing family planning methods by women who have ever used family planning methods but who are not currently using one. More than a third of women in this category answered "My last child is old; I want another one". This implies that most contraceptive users in Iwo local government are using contraceptives for spacing rather than for stopping childbearing. This is more so when about a quarter of the women in Iwo local government who are currently using contraceptives are using it because the children they were nursing as of the time of the interview were young. Another 16 percent of the current users of contraceptive as of the time of the study because they were the only wife of their husbands. All these amount to what we mentioned earlier that contraceptive use by the women of Iwo local government is not to reduce the number of children they would have but only to assist them in having children only when they want them.

A further analysis of the 74 women who have ever used family planning methods but are not currently using one because they wanted another pregnancy, shows that virtually all of them are between age 20 and 34 and about 90 percent

of them have got at least 3 children, .All these show that the use or non-use of contraception, educational or occupational status of the women cannot reduce their expected number of children. The content analysis of the questionnaires of the 74 women showed that the high expected number of children of the women are more related to traditions and customs rather than to education, occupation or use or non-use of contraception. Women with or without education wanted many children because to them a childless woman is like a fruitless tree that is not fit to live. Women with or without education wanted many children especially male children to continue to bear their family names, to inherit their properties and give them befitting burial at death. All these are cultural factors that have nothing to do with the modernisation variables like occupation, education or income.

KAP (Knowledge, Attitude and Practice) items presented in this chapter differ markedly between Christians and Muslims. Christians are more likely to have a higher proportion with knowledge of family planning than Muslims and also to be more favourable to family planning than Muslims and finally to have higher proportion who have ever practised family planning than Muslims. However, it will be relevant to mention here that there are few Christians in relation to Muslims in this study (451:932). Since the proportion of Christians with 'KAP' is higher than that of Muslims for all the controlled variables, this small number cannot be overlooked, since it may have had an effect on the results

and the computation of the statistics. Further research should therefore be conducted on the religious differentials which utilizes a matched groups design with equal number of Christians and Muslims. This would allow for additional cross tabulations when needed and control for the effect of equal Ns in the statistical computation.

'KAP' of family planning also varied with the education of the women. 'KAP' items increase with the increase in the level of education of the women. Income, occupation and household structure are found to be significantly related with 'KAP' items. For instance Income has a positive and statistically significant relationship with 'KAP' items. The teachers, nurses and clerks have consistently higher proportions with knowledge of, favourable attitudes toward, and practice of family planning than all other occupational groups.

In conclusion, it would certainly be overstating the case to infer that these educational, occupational and income differential in 'KAP' is the beginning of a transitional period leading to a substantial decline in fertility. To what extent have these status indicators influenced the reproductive performance of women in Iwo local government? What is the present level of fertility of women in the local government? What factors other than these status indicators are responsible for its present level? These and other related questions will be the subject of discussion in the next two chapters.

CHAPTER SEVEN

FERTILITY LEVEL

The lack of an up-to-date accurate census in Nigeria implies a scarcity of concrete data on fertility levels, patterns and trends. However, efforts have been made over the years by individual researchers, organisations and the government to collect data on fertility levels and trends in the Yoruba area in particular and Nigeria in general through sample surveys. All the studies resulting from these activities as and reviewed in chapter two have one thing in common; they all found a persistently high fertility among the Yoruba in particular and Nigeria in general. Average number of children ever born as reported by many of the studies ranges from 5 to 7 children per woman. The total fertility also ranges from 5 to well above seven in some studies.

7.1. RETROSPECTIVE BIRTHS

The average number of pregnancies per woman is as shown in Table 7.1. The mean number of pregnancies to the women interviewed is 5.01. As would be expected, the older women contributed significantly more than the younger women to this average since most of the younger women had not completed childbearing at the time of the interview.

Table 7.2 and figure 7.1 show the average number of children ever born by age. As would be expected, the

average number of children born alive per woman increases with age. The average of 6.44 for the oldest cohort (women who are 45 years old or more) is an indicator of completed fertility if we assume that these women have virtually reached the end of their reproductive lives. This average appears high especially when compared with data from similar studies. For instance the Nigeria fertility survey of 1981 - 82 reported a mean number of children ever born per woman of about 5.80 for the oldest cohort (45 - 49) (National Population Bureau, 1984). The report of the Nigeria fertility survey, however, also recognised that a mean of 5.8 children was low for the country though high internationally and attributed the level to omission of children especially on the part of older women. Adadevoh (1972) however, reported an average completed fertility of 5.6 births per woman.

When Table 7.1 and 7.2 are compared, it is observed that about 13.4 percent of all pregnancies reported in the whole local government did not result in live births. Considering the difficulties involved in remembering the number of pregnancies a woman has had since marriage one may be tempted to believe that the rate of pregnancy wastage in the local government is much higher than observed. This type of difficulty in remembering the number of pregnancies since marriage has also been noted in many studies. For instance Olusanya (1969) mentioned this problem of recalling the number of pregnancies a woman has had since marriage in his study of Ife, Oyo

and some villages in the then Western Region.

The distribution of the women according to the number of children ever born is shown in Table 7.3. The table indicates that about 97 percent of the women in the oldest age group (45 and above years) have given birth to four or more children while 67.5 percent of the same group of women have given birth to six or more children. For women in both the age groups 40-44 and 35-39, the percentage with six or more children is about 34 percent. For the younger women aged 15 - 24, more than 40 percent have had two or more children. Thus not only the level, but also the tempo, of fertility appears high by international standards.

Table 7.3 also shows that only 3.4 percent of all the women interviewed have not had any children. Most of these, are, however, in the youngest age group. For instance about two - thirds of the childless women are below age 20. Virtually all the women interviewed have got at least a child by age 30. The proportion of older childless women is very low when compared with the proportion of childless women in similar age groups in some other studies. For instance the Nigeria Fertility Survey 1981-82, referred to earlier reported that about a quarter of the women interviewed had no children, while the younger women contributed significantly to this proportion, the older women too were not spared as about 9 percent of the women aged 45 - 49 were childless as of the time of the study (National Population Bureau). Why

the proportion of the childless older women is so low in our study is not clear. It could reflect improving health condition which have lowered sterility. Alternatively it could be caused by omission of children by older women.

Table 7.4 shows average number of pregnancies by only fertile women. 'Fertile women' in this study is defined to include all women who have got at least a pregnancy. The distribution of the average number of pregnancies for the fertile women in the local government remains almost the same as for all the women presented in Table 7.1. The explanation for the similar trend in pregnancy is that the proportion of infertile married women in the local government (3.3 percent) is relatively low. These infertile married women are predominantly found among women who are in the first two age groups. For example 52.2 percent of the infertile married women are in age group 15-19 and about 89.1 percent are less than 25 years old. This is why the average number of children ever born per fertile woman shown in Table 7.4 is significantly higher in the first two age groups than those shown for the same groups of women in Table 7.2.

Table 7.1Average Number of Pregnancies per Woman by Age

<u>Age of Women</u>	<u>No. of Women</u>	<u>Average Pregnancies</u>
15 - 19	35	0.23
20 - 24	161	1.13
25 - 29	262	3.55
30 - 34	242	4.58
35 - 39	233	5.95
40 - 44	188	6.63
45 - 49	126	7.33
50 +	163	7.47
<hr/>		
Total	1410	5.01

Table 7.2Average Number of Children Ever Born per Woman by Age

<u>Age of Women</u>	<u>No. of Women</u>	<u>Average Children ever born</u>
15 - 19	15	0.17
20 - 24	161	1.01
25 - 29	262	3.03
30 - 34	242	4.09
35 - 39	233	5.33
40 - 44	188	5.67
45 - 49	126	6.32
50 +	163	6.48
<hr/>		
Total	1410	4.34

Table 7.3

Percentage Distribution of all the Respondents According
to Number of Children Ever Born, by Age

	No. of Women	Number of Children									Total
		0	1	2	3	4	5	6	7	8+	
15-19	35	65.7	22.9	8.6	2.8	-	-	-	-	-	100.0
20-24	161	9.2	42.9	28.6	14.3	5.0	-	-	-	-	100.0
25-29	262	2.3	8.4	14.9	29.4	27.1	10.3	5.3	2.3	-	100.0
30-34	242	1.2	3.7	12.4	21.5	27.7	21.9	8.3	2.9	0.4	100.0
35-39	233	-	6.4	7.7	3.4	27.9	18.5	17.6	12.0	6.4	100.0
40-44	188	-	1.1	2.7	1.6	21.8	41.5	20.7	6.9	3.7	100.0
45-49	126	0.8	0.8	1.6	-	12.7	32.5	24.6	15.8	11.1	100.0
50+	163	-	0.6	1.2	0.6	4.9	12.9	13.5	17.8	48.5	100.0

Table 7.4

Average Number of Pregnancies per Fertile Woman by Age

Age of Women	No. of Women	Average Pregnancy
15 - 19	11	1.81
20 - 24	144	
25 - 29	259	3.44
30 - 34	241	4.44
35 - 39	232	5.67
40 - 44	188	6.47
45 - 49	126	7.33
50+	163	7.47
Total	1364	4.99

Table 7.5Average Number of Children Ever Born per Fertile Woman by Age

<u>Age</u>	<u>No. of Women</u>	<u>Average</u>
15 - 19	11	1.44
20 - 24	154	
25 - 29	259	3.12
30 - 34	241	4.10
35 - 39	232	5.35
40 - 44	188	5.67
45 - 49	126	6.32
50 +	163	6.42
Total	1364	4.48

7.2. CURRENT FERTILITY

Table 7.6 and figure 2 present age - specific fertility rates (ASFRS) per 1000 women for Iwo local government women who are between the ages of 15 - 49. The age-specific fertility rate increases with the age of women up to age 29 before it starts to decline in older ages. If we assume a sex ratio at birth of 1.02, the total fertility rate for the local government women implies a gross reproduction rate of about 2.81. The general fertility rate is also about 160.0 per 1000 women. The table also indicates that fertility for the entire local government women is distributed fairly evenly throughout the whole of the childbearing period. This is evident from the percentage distributions of the age-specific

fertility rates presented in the same table. This type of distribution is typical of high fertility societies where birth control by modern methods is either virtually non-existent or, where it exists, it is used to space rather than to limit fertility. In low-fertility countries, child-bearing tends to be concentrated in a narrower range of age than in high-fertility societies.

The age-specific fertility rates per 1000 married women is as presented in Table 7.7. It should be noted (already mentioned in chapter three) that we interviewed only ever-married women in Iwo local government and thus the age-specific fertility rates presented in Table 7.7 is more or less the age-specific fertility rates of our respondents. The age pspecific fertility rates presented in Table 7.6 is for all women in the local government irrespective of their marital status. A comparison of tables 7.6 and 7.7 indicates that the age-specific fertility rates are consistently higher from age group 20 - 24 for married women than for all women in the local government. However, the age-specific fertility rate for women in age 15 - 19 is an exception as it is unexpectedly lower for married women than for all the women. This probably reflects the fact that there are many women in age group 15 - 19 who have had children and yet not married as of the time of the survey. Unmarried mothers who are even between the ages of 20 and 24 are also likely to have reported their ages to be less than 20 and the same is true of very young

girls (13 or 14 years old) who have got at least a child to report themselves a little above their actual ages. This is probably why we have as many as 467 women in age group 15 - 19 alone.

Table 7.8 shows the age-specific fertility rates per 1000 married fertile women. The difference between the rates for the fertile women and the rates for all the married women shown in Table 7.7 are pronounced in the first two age groups where a significant proportion of all the infertile women are found. This observation had been noted and mentioned earlier. The distribution of the age-specific fertility rates remains almost the same as for all married women discussed earlier.

We also observed that both the number of children ever born or born within the reference period to the younger mothers appear to be fairly more accurate. This observation is however, expected because the younger cohort are more educated than the older ones. Although only about 30 percent of the women have never had formal education, the older women contribute substantially to this proportion. For instance, 16.5 percent of the women who have never had formal education are below age 30, whereas 65 percent of the same group of women are 40 years and above. The younger women are thus likely to be familiar with the dates and could easily recollect the birth days of their last and perhaps only child.

Besides, social factors contribute towards the pattern observed. The celebration of birth-day anniversary has come to be accepted as a way of life within the society. It ostensibly offers an excuse for a huge and grand celebration. It is particularly important for the younger mothers since they have fewer children than the older ones. They look forward more eagerly to the birth-day of their children than the older women. Given this situation, it is most unlikely that they would easily forget the birthday of their last and perhaps only child.

Another factor is the differential degree of traditionalism between the cohorts. The older women are more traditionally oriented than the younger women. Since traditionally, women should abstain from sex for a long time after birth in order to breast-feed the children, it is likely that the older women may report their 18-month old children as babies, i.e. less than one year. To the older women also, this may be their last child. Even when the child grows to an adult age, they still regard them as babies. The degrees of misreporting thus tends to widen with age of women included in the study.

However, the comparison of the cumulated fertility rate (F_i) and the average number of children ever born (P_i) shown in Table 7.9 does not show any appreciable misreporting rate by the older women as expected. The deviations between the cumulated fertility rate and the

average number of children born alive are unexpectedly low and also have ^{no} systematic relationship with age of women. This observation negates our earlier assumption that as women grow older, they tend to under-report their number of live born children. A possible explanation to this trend might be related to what we mentioned earlier that a significant proportion of Iwo local government women (about 70 percent) have had at least some education. Therefore, we will shelve the idea of adjusting this data with Brass technique as Brass essentially based his method of adjustment on the assumption that older women tend to misreport the number of children ever born to them (brass, 1968).

When the age-specific fertility rates for Iwo local government are compared with available rates for several African countries as in Table 7.10, certain interesting similarities and contrasts appear. Distortion in the Iwo local government fertility rates is most like to have occurred in the rate for the 25 - 29 years old and 30 - 34 year old groups, primarily because of age heaping. In the absence of birth certificates, it is likely that the women report themselves as having being 25 or 30 years of age. This may account for the reason why about 40 percent of the women are found in these two age groups alone. As Table 7.10 indicates, Iwo local government fertility between the ages of 25 to 29 is higher (except that of Ghana) than in any of the selected African areas Iwo local government fertility is also

lower (except that of Mauritius) for women in age group 15-19 than in any of the selected African areas. This probably reflects the relatively late age at marriage and consequently childbearing in Iwo local government area than any of the selected African areas. Comparing the Nigerian data alone, it seems increasing age at marriage as a result of increasing number of years used in schools is beginning to have effect on the fertility of the women in the first two age groups. For instance, fertility level is lower in the first two age groups in 1984 than either 1965/66 or 1970 (Table 7.10)

Beside these differences, Iwo local government fertility rates have certain similarities with the fertility rates of the selected African countries. The distribution of the fertility rates of all the country except, perhaps Mauritius show them as high fertility countries as the fertility rates are distributed fairly evenly throughout the child-bearing periods.

Figure 7.3 compares the age-specific fertility rates per 1000 women of Iwo local government with age-specific fertility rates of rural Nigeria (1965/66) Nigeria (1970) and Nigeria (1984). The basic difference is that Nigeria as a whole is characterized by early start of childbearing while Iwo local government is characterized by relatively late start but continuous childbearing until the onset of menopause. The 1965/66, 1970 and 1984 Nigerian data support this observation. Tye and Coale (1961) have also shown that high fertility in

some Chinese populations resulted from late marriage as in Iwo local government, followed by very high reproduction rates into the later childbearing years. On the other hand, they continued, that high fertility in India, resulted from very early marriage and high reproduction rates in the early childbearing years, with a sharp decline in the later years:

The total fertility rate of the Iwo local government area compares favourably with any of the Nigerian data except perhaps that of the rural demographic survey of 1965/66 which reported the lowest total fertility rate. This may probably mean that fertility is lower for rural than for urban women in Nigeria, This will be further discussed in the next chapter.

Table 7.6

Age-Specific Fertility Rates per 1000 Women

Age	No. of Women	ASFRS	Percent Distribution
15 - 19	467	62.1	5.5
20 - 24	291	257.7	22.8
25 - 29	273	282.1	24.9
30 - 34	2249	216.9	19.2
35 - 39	251	155.4	13.7
40 - 44	219	109.6	9.7
45 - 49	164	48.8	4.2
Total	1914	1132.6	100

		$\times \quad 5$	
		<u>5663</u>	
Total Fertility	5663		
		G.F.R	160.0
		G.R.R	281.1

Table 7.7Age-Specific Fertility Rates per 1000 Married Women

Age	No. of Women	ASFRS	Percent Distribution
15 - 19	35	57.1	4.9
20 - 24	161	267.1	22.8
25 - 29	262	293.9	25.0
30 - 34	242	223.1	19.0
35 - 39	233	154.5	13.2
40 - 44	188	122.3	10.4
45 - 49	126	55.6	4.7
Total	1247	1173.6	100.0

$$\frac{x}{5}$$

5868

Total Fertility 5868

G.P.R. 194.1

G.R.R. 290.5

Table 7.8Age-Specific Fertility Rates per 1000 Married Fertile Women

Age	No. of Women	ASFRS	Percent Distribution
15 - 19	11	181.8	13.6
20 - 24	144	298.6	22.4
25 - 29	259	297.3	22.3
30 - 34	241	224.1	16.8
35 - 39	232	155.2	11.6
40 - 44	188	122.3	9.2
45 - 49	126	55.6	4.1
Total	1201	1334.9	100.0

$$\frac{x}{5}$$

6674.5

Total Fertility 6674.5

Table 7.9

Comparison of the Cumulated Fertility Rate (F1) and the
Average Number of Children (P1) by Age for Women in Iwo
Local Government

Age	F1	P1	Difference
15 - 19	0.12	0.171	0.05
20 - 24	1.03	1.012	0.02
25 - 29	2.44	3.027	0.59
30 - 34	3.68	4.087	0.41
35 - 39	4.60	5.330	0.73
40 - 44	5.25	5.670	0.42
45 - 49	5.57	6.317	0.75

Table 7.10

Age-Specific Fertility Rates for Selected African Areas.

Age	IWO L. GOVT. 1986	NIGE- RIA 19 65/66a	NIGE- RIA 19 1970b	NIGE- RIA 19 1984c	MAURI- TIUS 1972d	GHANA 1970b	MORO- CCO 1970b	UAR 1973b
15-19	.062	.181	.208	.127	.049	.141	.242	.182
20-24	.258	.266	.284	.256	.183	.296	.368	.184
25-29	.282	.233	.249	.280	.126	.285	.237	.253
30-34	.217	.172	.184	.220	.127	.273	.260	.201
35-39	.155	.125	.131	.158	.086	.224	.176	.136
40-44	.110	.068	.073	.067	.031	.133	.087	.067
45-49	.049	.041	.007	.025	.004	.060	.034	.027
Total Ferti- lity	5.67	5.43	5.68	5.66	3.03	7.06	7.02	5.28

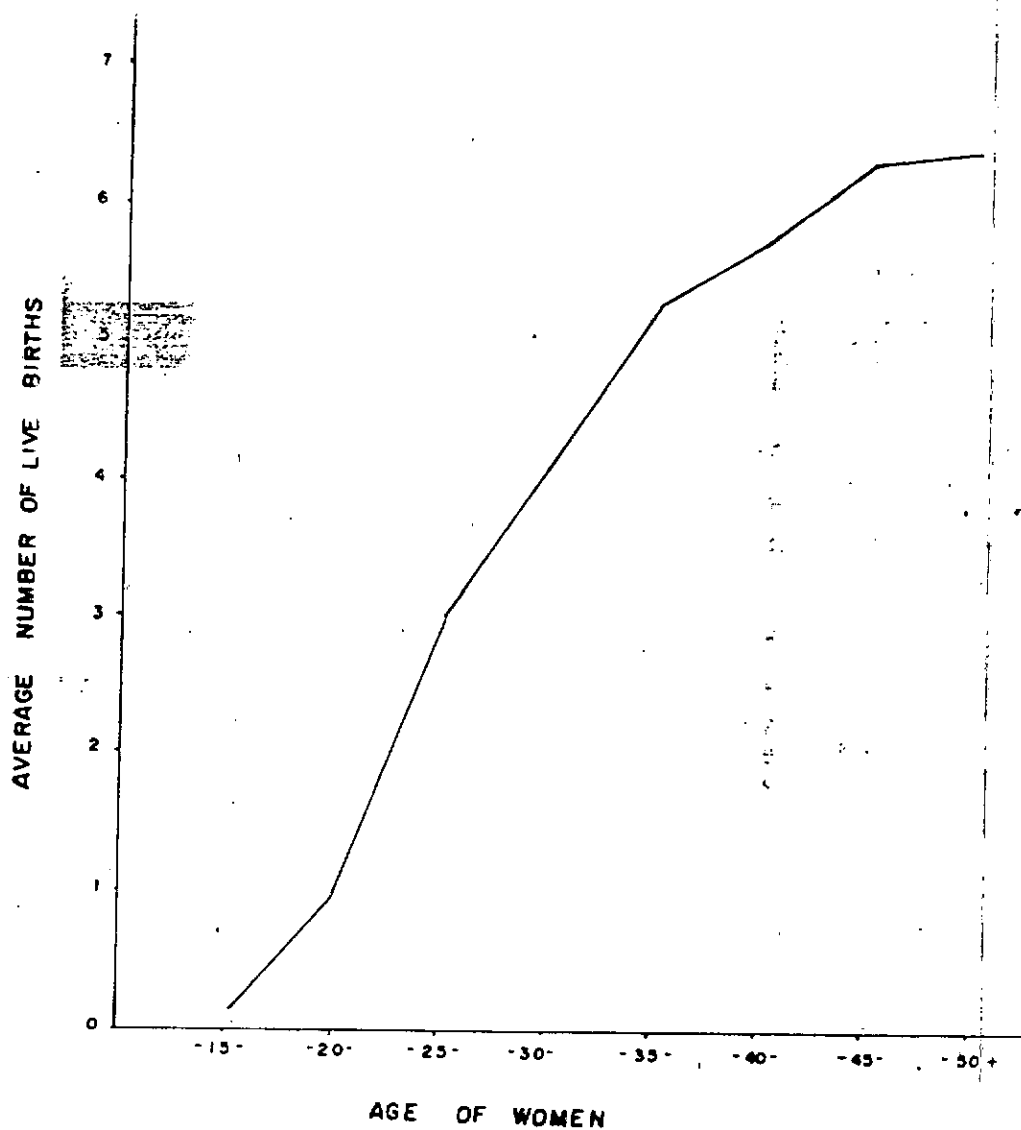
Sources:

- (a) 1965/66 Rural Demographic Sample Survey
- (b) U. S. Bureau of the Census (1971)
- (c) Nigeria Fertility Survey 1981-82
- (d) ECA/PD/WP/79/4 pp.53 and 114

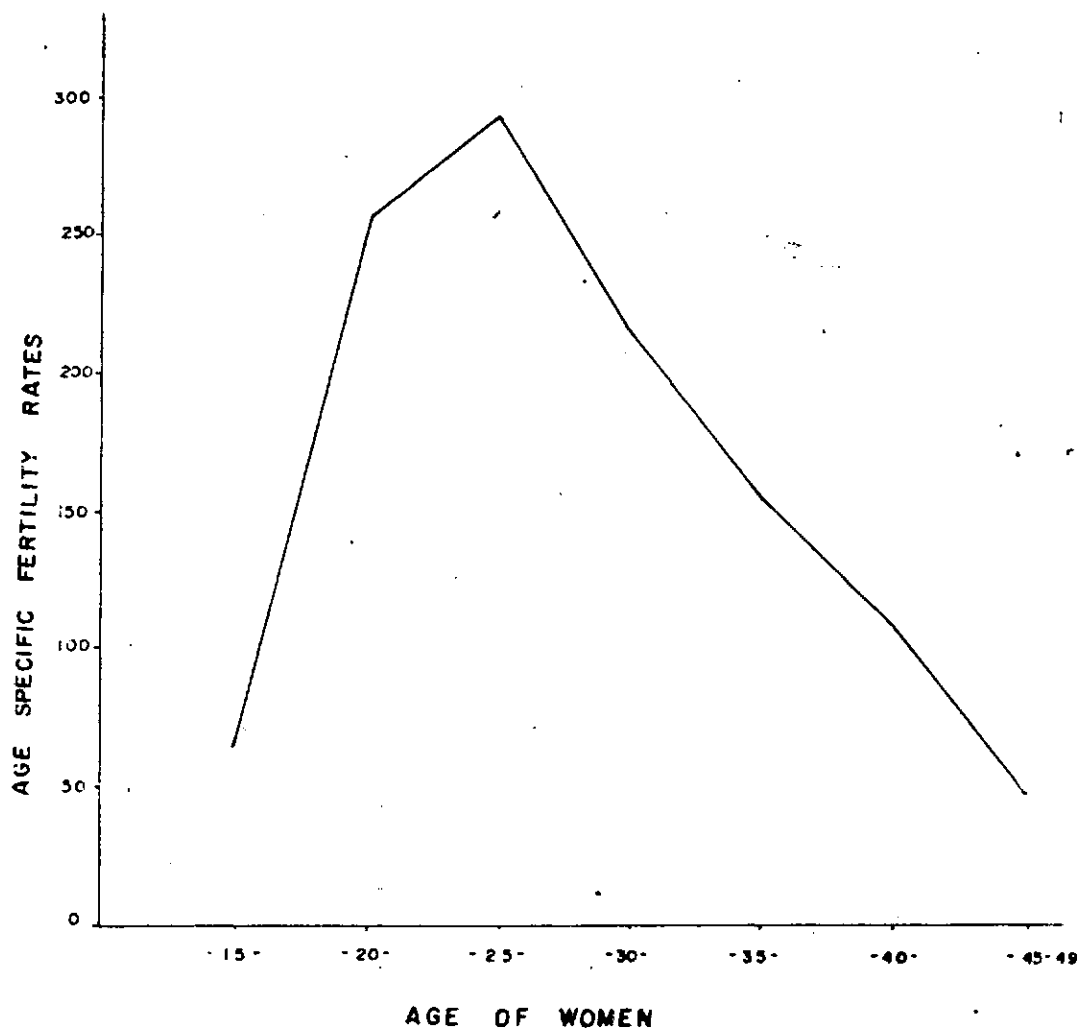
FIG. 7.1 :

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AVERAGE NUMBER OF LIVE BIRTHS PER MARRIED WOMAN,
FOR TWO LOCAL GOVERNMENT, 1986



AGE SPECIFIC FERTILITY RATES PER 1000 WOMEN
FOR TWO LOCAL GOVERNMENT, 1986



AGE SPECIFIC FERTILITY RATES PER 1000 WOMEN
FOR IWO LOCAL GOVERNMENT, 1986, NIGERIA 1965/66, 1970 AND 1984

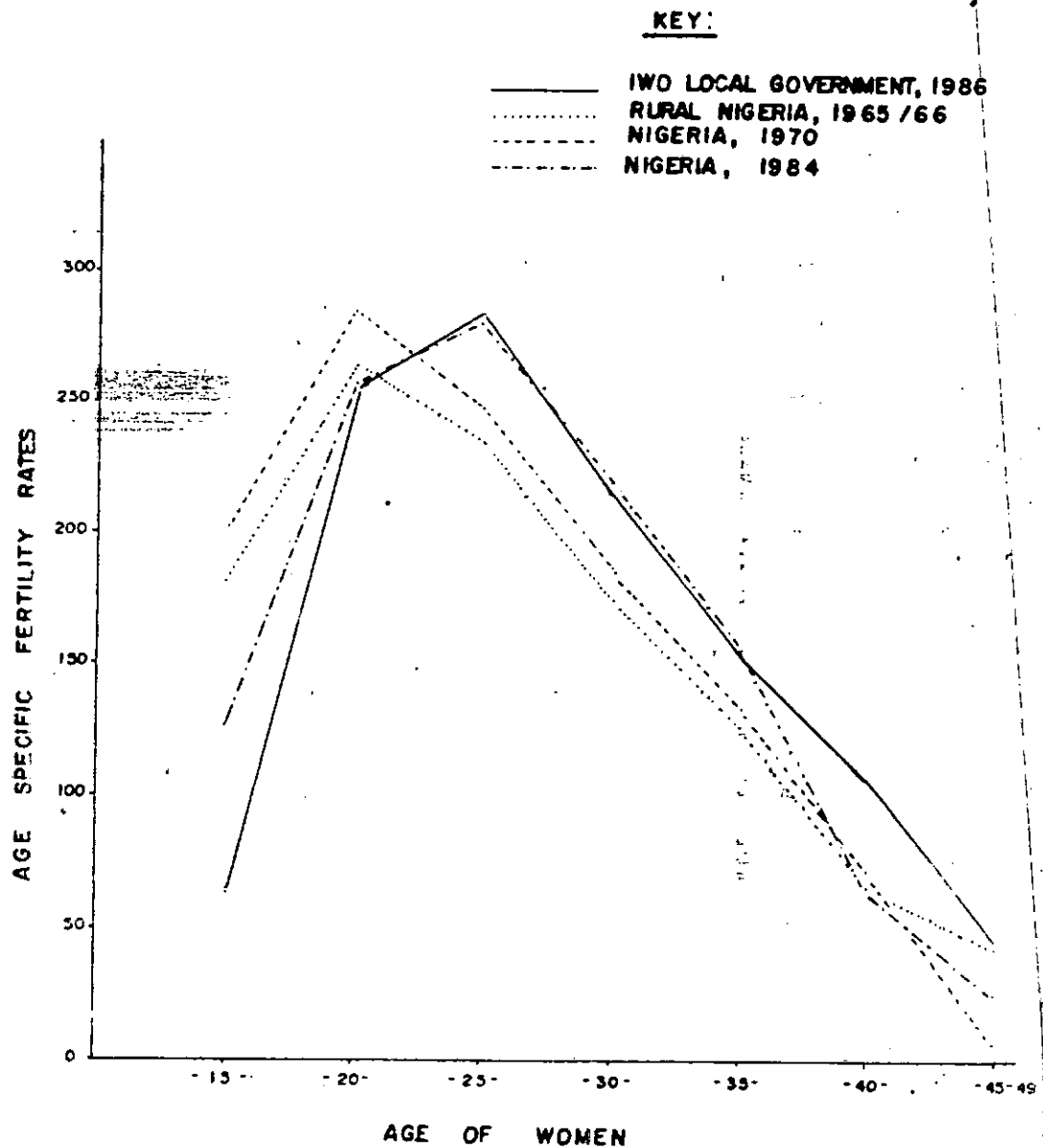


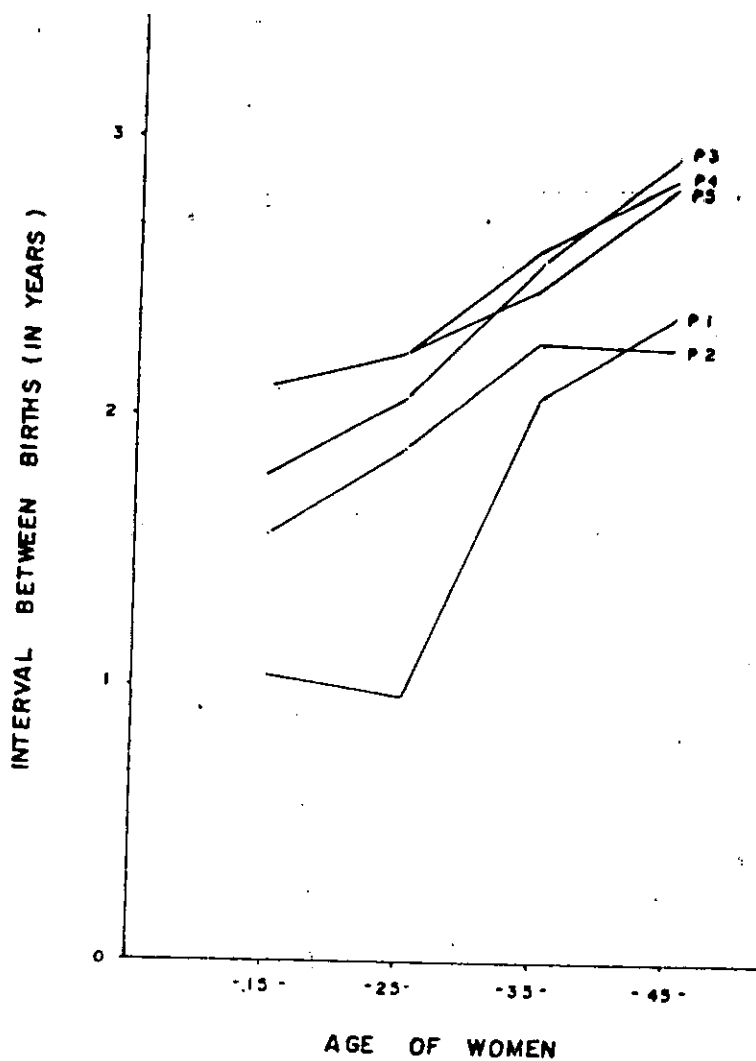
FIG. 7.4 :

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MEAN INTERVALS BETWEEN SUCCESSIVE BIRTHS BY AGE,
FOR TWO LOCAL GOVERNMENT WOMEN, 1986

KEY:

- P1 = PARITY 1
- P2 = PARITY 2
- P3 = PARITY 3
- P4 = PARITY 4
- P5 = PARITY 5



MEAN INTERVALS BETWEEN SUCCESSIVE BIRTHS BY DATE OF MARRIAGE
FOR TWO LOCAL GOVERNMENT, 1986

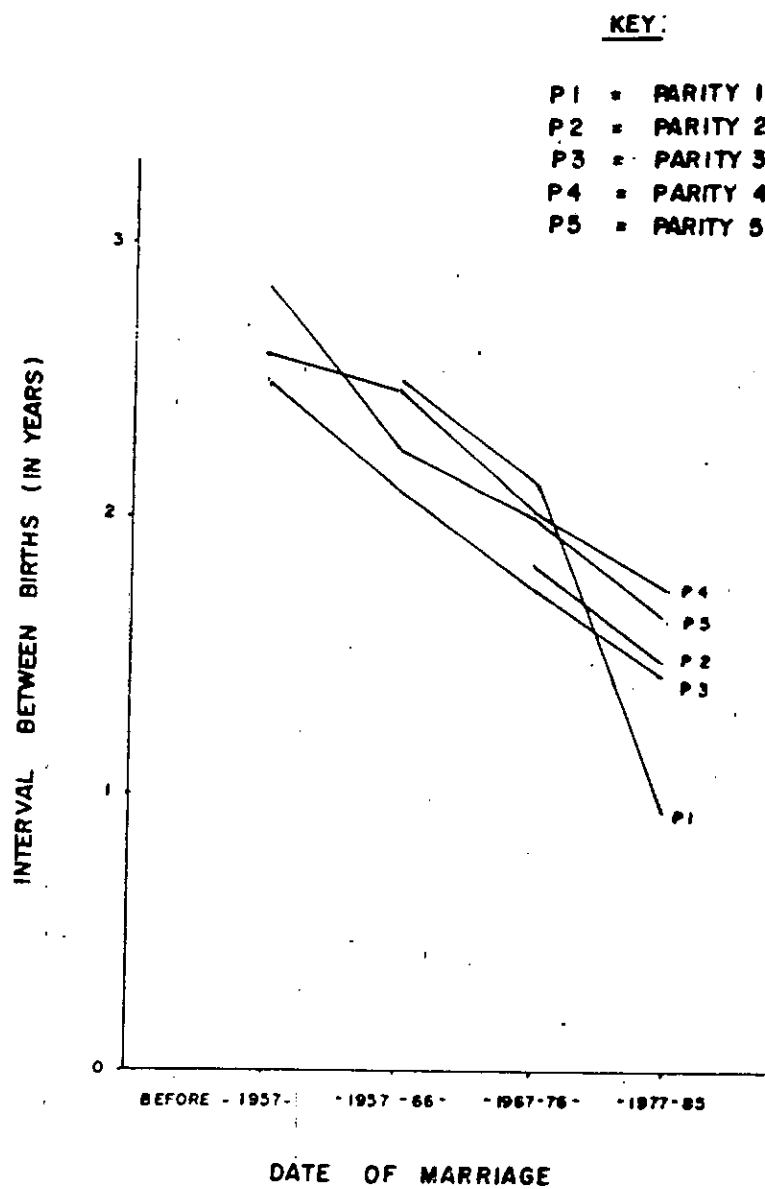
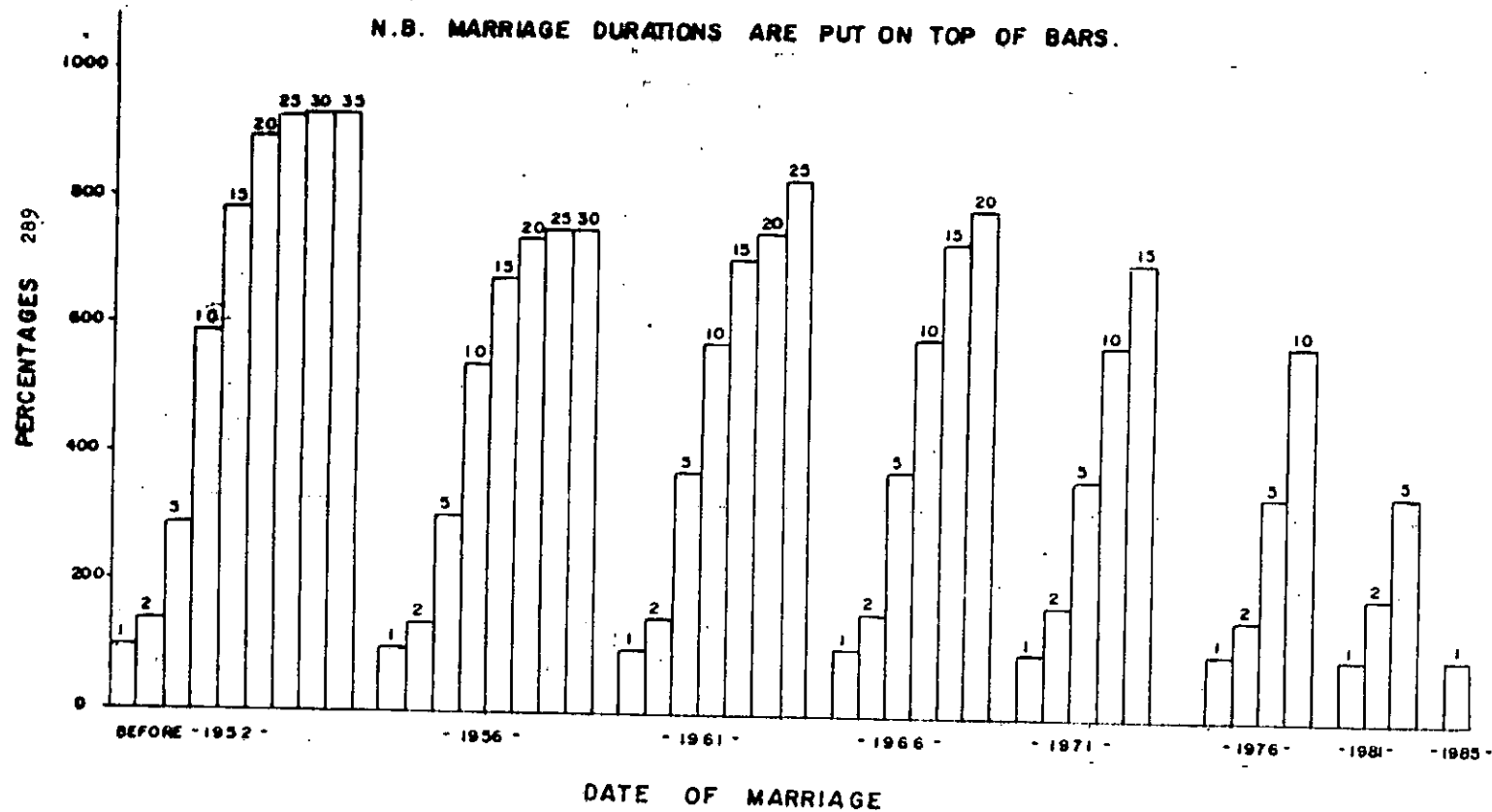


FIG. 7.6

COMPARATIVE ANALYSIS OF FREQUENCY OF CHILD BEARING
(FIGURES PUT IN PERCENTAGES WITH DURATION 1 EQUAL TO 100)



7.3. FAMILY-BUILDING CHARACTERISTICS

It is not enough to establish the fact that the fertility of Iwo Local government area is persistently high; it is also necessary to examine how this family size is made-up. The purpose of marriage especially among the Yoruba is to bear children. The trend among the Yoruba nowadays especially among younger generations is for the proposed bride to get pregnant before the actual marriage. This is probably to assure the would-be husband that the girl he is marrying is capable of producing children. Thus the mean interval between marriage and first birth as reported by Olusanya (1981) was very small and in fact it ranges between 8 and 10 months in some cases especially for younger women in Surulere.

In this study, we employ the formulae used by Olusanya (1981)*

(a) For mean interval for all birth orders,

$$X = \left(\frac{1}{P_x} \right) \sum_{B=1}^n K \quad \text{where}$$

K = Interval (years or months) for each successive birth

B = Number of children born alive (1, 2 n)

P = Number of women

X = Any age group

In other words

- (i) For each order of birth and for each age group, the intervals for women are summed (K)
- (ii) These total intervals for all successive births (K)

are divided by the number of births (B)

(iii) Finally, the result in II is divided by the number in the age group (P_x) to obtain mean interval for all women in the given age group.

(b) For mean interval between each successive birth

$$x = \frac{K}{P_x} = \begin{array}{l} \text{Total interval (years or months)} \\ \text{No. of women in each age group.} \end{array}$$

to obtain the intervals between births.

However, a number of alternative methods can be used to compute intervals between successive birth orders (P.O. Olusanya, (1981)). For instance, birth intervals between successive birth orders can be computed regardless of the size of family already achieved. This approach, however, involves the use as base of different numbers of women from one birth order to another and as such is not valid to obtain from the computed figures the progression of interval from one birth order to the next. We have not chosen this approach because of that limitation.

The mean intervals between successive births in years by age for Iwo local government women is as presented in Table 7.11. The table shows that the mean interval between marriage and first birth is lower for mothers aged 15-34 (about one year) than for mothers aged 45-54 (about 1.8 years). The observed higher mean intervals between marriage and first birth could be explained for by the fact that the older women are likely to be more traditional in their reproductive behaviour since majority of them have no education. The level of infertility which may be

a direct result of such factors as poor health, nutritional deficiency is likely to be higher for older than for younger women because accessibility to modern medicine is directly related to education.

Table 7.11 and figures 7.4 and 7.5 also indicate that the mean intervals between birth increase with each successive birth. The explanation for this is that as number of birth increases, the ability to carry pregnancy to terms declines. Potter and his colleagues (1965) have shown in their analysis of birth intervals that the period of postpartum amenorrhoea lengthens with age of the women from an average of 7.4 months for mothers aged 15-19 years to 13.5 months for those aged 40 years and over. Henry (1961) attributed this increase to longer menstruating intervals and an increasing incidence of foetal loss. As number of birth increases, the body become progressively weakened and thus probability of getting a fifth pregnancy for a woman with 4 live births is lower than the probability of getting the second pregnancy for a woman with one live birth.

Controlling for duration of marriage as in Table 7.12 does not change significantly the pattern. The mean intervals between births increase consistently from younger to older marriage cohorts. For instance, the mean interval between births for women who married before 1957 in parity 5 is about 43 percent higher than the mean interval between births for women who married between 1977 - 86 and are in the same parity 5.

Controlling for age at marriage does not change our earlier observation, that the mean intervals between births increase with each successive birth.

The effect of the narrowing of intervals between births can be seen in Table 7.13 which shows average number of live births at equal durations of marriage. We find that the average number of live births increases from the older marriage cohort to the younger marriage cohort up to the tenth year of marriage. The average remains almost the same for women who are in their fifteenth year of marriage but it is still slightly higher for women in younger marriage cohorts. There is no systematic relationship between number of live births and marriage duration for women in marriage durations 20 and 25. For the two marriage durations, the average number of children ever born first declines as marriage duration increases and starts to rise again for women in younger marriage cohorts. This pattern observed for older marriage cohorts (marriage durations 20, 25 and 30) probably reflects the effects of memory lapse. Secondly women who have been in marriage for well over twenty years are more likely to be more traditional and thus keep to the traditional birth spacing of about three years or more.

A comparative analysis of frequency of childbearing for all groups is made in Table 7.14 and figure 7.6. All figures in Table 7.14 are in percentages with duration 1 equal to 100. We find that average number of live births increase steeply from marriage duration one to marriage

duration 15. From marriage duration 15 to marriage duration 30, however, the rate of increase slowed down considerably and in fact almost the same figures were recorded for duration 25, 30 and 35 for women who married before 1952 and 1956. This observation is true of all marriage cohorts. For example, while the difference between marriage duration 5 and 10 for the cohort of women who married before 1952 is about 308, the difference between durations 15 and 20 is 110 and the difference between durations 20 and 25 is only 31 for the same group of women. (Table 7.14). This means that a Yoruba woman should have got a significant proportion of all her births by the time she reaches her 15th year of her marriage. The explanation for this is, as mentioned earlier, that fecundity declines with increase in the age of women. There is also a tendency for pregnancy wastage to increase with increase in the age of women. This is because as a woman grows older, her body becomes more weakened as a result of previous births and thus bability to carry pregnancy to term at older ages becomes progressively reduced.

Besides, social factors also contribute to this phenomenon. A Yoruba woman who has been in marriage for about 20 years is likely to have got a daughter who could have married and started childbearing. A situation where a woman and her daughter bear children at the same time is rarely welcomed by the Yoruba and in fact if it happens at all, it will be regretted. Therefore, majority of

Table 7.11

Mean Intervals between Successive births (in years), Iwo
Local Government area, 1986

PARITY 1

Age of Women	N	Marriage and 1st birth	1st and 2nd birth	2nd and 3rd birth	3rd and 4th birth	4th and 5th birth	All births
15-24	55	1.01					1.01
25-34	51	0.99					0.99
35-44	13	2.08					2.07
45-54	5	2.38					2.37

PARITY 2

15-24	25	0.99	2.16				1.08
25-34	94	1.07	2.49				1.78
35-44	16	1.69	2.88				2.29
45-44	10	1.50	3.00				2.25

PARITY 3

15-24	10	0.90	2.05	3.40			1.79
25-34	107	1.14	2.44	2.60			2.06
35-44	35	1.34	3.17	3.24			2.58
45-54	12	1.58	3.71	3.54			2.95

PARITY 4

15-24	8	0.94	2.06	2.63	2.81		2.11
25-34	142	1.07	2.34	2.52	2.93		2.22
35-44	89	1.37	2.77	3.07	3.40		2.65
45-54	40	1.39	3.10	3.33	3.64		2.87

PARITY 5

15-24	-	-	-	-	-	-	-
25-34	62	1.05	2.23	2.58	2.68	2.55	2.22
35-44	142	1.43	2.43	2.66	2.83	3.06	2.48
45-54	57	1.75	2.72	3.10	3.26	3.43	2.85

Table 7.12

Mean Intervals between Successive Births (in years) by Date of Marriage, Iwo Local Government, 1986.

PARITY 1

Date of Marriage	N	Marriage and 1st birth	1st and 2nd birth	2nd and 3rd birth	3rd and 4th birth	4th and 5th birth	All births
Before '57	-	-	-	-	-	-	-
1957-66	1	2.50					2.5
1967-76	36	2.13					2.13
1977-86	36	0.93					0.93

PARITY 2

Before 1957	-	-	-				-
1957-66	-	-	-				-
1967-76	61	1.60	2.02				1.81
1977-86	84	1.12	1.85				1.49

PARITY 3

Before 1957	3	1.50	2.67	3.33			2.50
1957-66	23	1.26	2.44	2.61			2.10
1967-76	99	1.04	2.07	2.14			1.74
1977-86	39	0.97	1.51	1.79			1.45

PARITY 4

Before 1957	4	2.13	2.25	2.75	3.35		2.60
1957-66	43	1.71	2.07	3.13	3.04		2.49
1967-76	121	1.11	1.85	2.30	2.83		2.02
1977-86	111	0.87	1.67	2.10	2.23		1.72

PARITY 5

Before 1957	7	2.07	2.14	2.86	3.14	4.00	2.84
1957-66	86	1.47	1.84	2.36	2.58	3.06	2.26
1967-76	81	1.42	1.59	2.06	2.48	2.56	2.02
1977-86	89	0.79	1.44	1.81	1.64	2.47	1.63

Table 7.13

Average Number of live births per woman at Given Duration
of Marriage by Date of Marriage

Date of Marriage	Duration of Marriage (in years)									
	N	1	2	5	10	15	20	25	30	35
Before 1952	64	0.61	0.84	1.73	3.61	4.77	5.44	5.63	5.64	5.64
1952 - 56	56	0.73	0.98	2.18	3.98	4.96	5.39	5.51	5.51	-
1957 - 61	150	0.68	1.01	2.52	3.92	4.83	5.10	5.67	-	-
1962 - 66	221	0.66	1.05	2.48	3.93	4.83	5.26	-	-	-
1967 - 71	195	0.69	1.14	2.53	4.01	4.89	-	-	-	-
1972 - 76	249	0.74	1.18	2.60	4.37	-	-	-	-	-
1977 - 81	260	0.77	1.22	2.71	-	-	-	-	-	-
1982 - 85	173	0.82	-	-	-	-	-	-	-	-
1986	42	-	-	-	-	-	-	-	-	-

Table 7.14

Comparative Analysis of Frequency of Child-bearing (figures put
in percentages with Duration 1 equal 100)

Date of Marriage	Duration of Marriage									
	N	1	2	5	10	15	20	25	30	35
Before 1952	64	100	138	284	592	782	892	923	925	925
1952 - 56	56	100	134	297	545	679	738	755	755	-
1957 - 61	150	100	149	371	576	710	750	834	-	-
1962 - 66	221	100	159	376	595	732	792	-	-	-
1967 - 71	195	100	165	367	581	716	-	-	-	-
1972 - 76	249	100	159	351	584	-	-	-	-	-
1977 - 81	260	100	158	352	-	-	-	-	-	-
1982 - 85	173	100	-	-	-	-	-	-	-	-
1986	42	100	-	-	-	-	-	-	-	-

Yoruba women stop childbearing voluntarily irrespective of age as soon as they start having grandchildren. Olusanya (1981) for instance reported that the proportion of women in Surulere and Ebute-meta/Yaba who terminated childbearing either voluntarily or involuntarily increased from age 30 rapidly until age 50 when all women are supposed to have reached the end of their reproductive life.

7.4. SUMMARY

Fertility in Iwo local government is considerably high regardless of which methodological approach is used to measure it. Whether one uses current or retrospective fertility, the current fertility data cumulates to about 5.7 per woman by age 49 and the retrospective fertility data cumulates to about 6.5 children per woman by age 50. It is thus established that fertility of Iwo local government area women and hence of the Yoruba is still very high. However it is also very relevant to note that fertility level of the respondents though high, is still less than their average expected number of children. In other words, their desires do not match their actual reproductive performance. The actual family size attained by the women is about 7 percent less than their desired family size.

We also found from the fertility analysis in this chapter, that the importance of custom, particularly that aspect relating to birth spacing is declining. This is

evident in the shorter intervals between births observed for especially younger women. For instance the mean interval between marriage and first birth is about eight months lower for mothers aged 15-34 years than for mother aged 45-54 years. The mean birth intervals have also been reduced from about 2.8 years for women who married before 1957 to about 1.5 years for the 1977-86 marriage cohort. This declining birth interval is also reflected in the family building characteristics of the woman. On the whole, fertility of the respondents is still considerably high. What then are the factors that are responsible for this persistently high level of Yoruba fertility? These will be the subject of discussion in the next chapter.

CHAPTER EIGHT

FERTILITY DIFFERENTIALS

As was shown in chapter seven, there is no doubt that fertility levels among women in Iwo local government area remain very high. Since fertility is an important factor in population dynamics, this study will go further to examine whether there are significant differences among groups in the population. In this chapter, therefore, fertility levels will be examined in relation to socio-economic and cultural characteristics of the studied population.

8.1 FERTILITY AND MORTALITY

We want to quickly record here that we are not primarily looking at the problem of mortality in Iwo local government area but we want to make a passing reference to it here because of its close association with fertility which is our subject matter.

Mortality is higher for males than for females between birth and age 4. From age 5 however, mortality is higher consistently for females than for males up to age 44 except for a slight fall for females relative to that of males at age group 30-34. The higher mortality for females than for males from age 15 to 44 especially is a result of maternal deaths as this is the reproductive period when probability of dying is higher for females than for males. From age 45 however, the data do not

show any systematic sex differential.

Mortality is higher in almost all ages for both males and females in rural areas of the local government than for urban areas. This pattern is expected because as mentioned earlier, medical facilities are concentrated in the urban areas of the local government to the neglect of rural areas. Secondly literacy level is higher for urban (82 percent) than for the rural (70 percent) areas of the local government, especially literacy in respect of the mothers which has been, Caldwell (1973) been found to have a significant effect on child mortality. Although the availability of medical facilities may be an important determinant of mortality if medical facilities are not available, differential mortality can still exist between educated and non-educated mothers as Orubuloye and Caldwell (1975) found in their study of the impact of public health services on mortality in a rural area of Nigeria.

The crude death rate for urban areas of the local government which is about 17.5 per 1000 population is about 14.3 percent lower than the crude death rate of 20 per 1000 population computed for the rural areas of the local government. On the whole, the crude death rate for the local government is about 18.3 per 1000 population. This figure is not far from Ekanem and Farooq's (1976) figures of 20.2 and 18.6 per 1000 for Eastern and Western Nigeria respectively and also compares favourably with Wogugu and Ekanem (1979) figures of 19.3 and 18.3 for the same regions respectively.

Our figure is significantly lower than the 1965/66 figure of 26.9 per 1000 for the total Nigerian rural population (Federal Office of Statistics, 1968).

Table 8.1 indicates a significantly higher proportion of child mortality to women at higher parity levels. Over all, 4.2 percent of children to women who have had one to three children, 6.3 percent of the children to the four to seven parity women and 14.3 percent of the children to the eight parity and higher women have died. Majority of women with 8 or more children are likely to be found among older mothers who are probably less literate than the younger mothers; their maternal health-care is likely to be poorer than that of mothers with one to three children who are younger and more literate. Hence child mortality among parity eight and above is likely to be as high as we found it.

The relatively high child mortality level among mothers in Iwo local government may suggest one reason why women in the local government area have high fertility desires. Table 8.2 supports this assumption; it indicates that child mortality leads to a greater number of children ever born. The table also shows that women compensate by having additional children almost axactly equal in number to the number of deaths they have had. That is, if one or two of their children die, they have approximately one or two additional children (on the average) to compensate. For instance, the mean number of children currently alive for women who are 45 years

and above remain almost stable irrespective of the number of child deaths the woman has had. The same goes for the women in other age groups. Whereas the range for the number of children ever born to mothers in 35-44 age category is from 5.1 to 7.1, the number of children currently alive is almost the same irrespective of how many child deaths the woman has had.

It is clear from Table 8.2 that women with many children do not have more deaths just because they had a greater number of births, otherwise deaths as a percentage of total births should remain constant for mothers who have had greater number of deaths; instead, death as a percent of total births increases as one moves from the women who have had no deaths to those who have had many deaths and these additional deaths are compensated for exactly in terms of additional births. Table 8.2 therefore indicates that if child mortality can be reduced in Iwo local government, there might be a compensating one to one corresponding decline in completed family size other things being equal. We are then postulating that if the younger generation of mothers in Iwo local government area have a larger proportion of their children survive, it may well be reflected in lower completed family size. This probably lend support to that body of demographic literature that we discussed in chapter two which postulates that in any demographic transition, decline in mortality is a precondition for a decline fertility (Heer and Smith, 1963; Cochraine, 1964; Donald

and Hare, 1964; Preston, 1975).

Another very important finding revealed in Table 8.2 which will make the acceptance of the above postulation difficult is the fact that women who are 45 years and above and have had no child death still have on the average over five children which we consider a relatively large family. Probably such women have many children in anticipation of an unknown future number of deaths rather than waiting to have compensating children. Whatever way we look at it, whether women have many children in anticipation of an; unknown future child death or they have many children to compensate for their dead children, the fact still remains that fertility is positively related to child-mortality in Iwo local government. Women who reported highest number of live births also reported highest number of child mortality.

Table 8.1Child Mortality by Parity and Age of Mother, Iwo Local Govt.
1986

Age	Parity of Women	No of births	No of Child deaths	% of Child deaths
15-24	1 - 3	152	3	2.0
	4 - 7	64	2	3.1
25 - 34	1 - 3	309	6	1.9
	4 - 7	1298	36	2.8
	8+	244	27	11.1
35 - 44	1 - 3	221	11	5.0
	4 - 7	1556	96	6.2
	8+	305	41	13.4
45+	1 - 3	215	18	8.4
	4 - 7	1271	129	10.1
	8+	477	80	16.8

Table 8.2Relationship between Number of Child Deaths and Number of Children ever born

Age	No of deaths	No of women in category	Mean No of children ever born	Mean No of children currently alive	Deaths as % of total births
15 - 24	No death	190	1.3	1.3	0.0
	One death	6	2.0	1.2	41.7
	2 + deaths	-	-	-	-
25 - 34	No death	455	3.4	3.4	0.0
	One death	40	4.5	3.5	22.3
	2+ deaths	9	5.3	3.3	37.5
35 - 44	No death	308	5.1	5.1	0.0
	One death	78	6.2	5.2	16.3
	2+ deaths	35	7.1	5.1	28.4
45 +	No death	101	5.3	5.3	0.0
	One death	157	6.2	5.2	15.8
	2+ deaths	31	7.9	5.6	28.9

8.2 FAMILY PLANNING AND FERTILITY

The potential efficacy of any fertility control programme is related to a number of factors. The first of these factors is an awareness by the women of the desirability and feasibility of controlling their family size. The second is whether because of religious, social or economic factors, the women are ready to use such family planning devices and lastly, whether such family planning methods are readily available.

Most of these factors have been discussed in chapter six and in terms of awareness, a significant proportion of the local government women are already aware that there are modern devices to limit fertility and in terms of the practice, a relatively high proportion indicated that they have ever used family planning devices and in fact many are currently using these methods. What we intend to do here is to see whether the use of family planning devices have affected the family size of the users.

Table 8.3 shows that average number of children ever born by women who have used family planning methods is slightly higher in all age groups up to 44 years than the average number of children born by women who have never used any family planning devices. However, average number of children ever born by women who have never used family planning methods is higher consistently from age 45 and above. Overall, the average children ever born by women who have never used any family planning method and are 45 years and above old is about 3.6.

percent higher than for women who are in the same age group and have ever used at least a method. The same pattern observed for all the local government women is observed for women living in the urban areas of the local government. It seems, therefore that the effect of the use of the family planning methods will not be seen until the women have got to the end of their reproductive years where also the difference between the completed family size for the 'ever users' and 'never users' is unexpectedly low.

The average number of children ever born to women who are currently using family planning in the local government is consistently higher from age 35 to the end of the reproductive years than for the average number of children ever born by women who have never or who are currently not using any family planning method (Table 8.4). However, no woman in age group 15-19 indicated that she was currently using any method of family planning. The explanation for this is the fact that the women in this category are young and have just probably been married and would like to have at least some children before they think of the use of family planning methods. The average number of children ever born by the older women (45 years and above) who are currently using family planning methods is about 3.1 percent higher than for the same category of women who are currently not using family planning methods. It is likely that these older women who are currently using family planning methods are using them in order to prevent further births and not necessarily

for spacing which is probably a basic reason for using contraceptives by younger mothers. The number of rural women in each age category is small and smallness will prevent any meaningful comparison with their urban counterparts.

The average number of children ever born by family planning clinic attendance is presented in table 8.5. The average number of children ever born to the family planning clients is as high as the average number of children for women who have never attended any family planning clinic. This is evidenced from the standardized averages for the two groups of women that are the same. Urban-rural differentials could not be meaningfully explored because of the few rural women who reported themselves as family planning clients.

As we mentioned in Chapter six, and also earlier in this chapter, an average Iwo local government woman would like to have at least some children before she can think of whether to use or not to use family planning devices. This observation is evidenced in Table 8.3, 8.4, 8.5 and 8.6 as there are very few cases of younger women who have ever used or are currently using family planning devices. However, decision to use or not to use family planning methods may not be sufficiently determined by the number of children ever born but by how many of the live born children that are living. This is what we have shown in Table 8.6. The family planning clients who are 45 and above years old have got on the average

about 6.3 births of which only about 5.1 percent died leaving a balance of about 5.98. In other words an average family planning client in Iwo local government area should have got about 6 children living by the time she is 50 years old.

Child mortality is lower for the younger mother who are attending family planning clinics than for older women. For instance, all the family planning clients who are between the age bracket of 15 and 24 reported no child death. Those between the age of 25 and 39 lost only about 2.5 percent of their live births. This low child mortality may be a factor that encourage these younger mothers to attend family planning clinics in the hope that they can have their children when they want them as long as the women know that majority of the children will survive to adulthood. Therefore the younger mothers could afford to attend family planning clinic as long as they know that they would have their desired number of living children which is about 6 per woman before they reach the end of their reproductive years.

A significant proportion (about 91 percent) of the family planning clients have at least some education. Thus, data on retrospective fertility by education for the family planning clients is summarized in Table 8.7. The average number of children ever born, though high by international standard for all educational categories, it is highest for women with primary education. The illiterate family planning clients have on the average

more children than family planning clients with secondary or higher education but less than their counterparts with primary education. It is highly likely however that because of recall lapse the number of children ever born alive to illiterate family planning clients is higher than indicated here. The number of living children follow the same pattern. Overall, the family planning clients, irrespective of education have on the average well above four children per woman.

Finally, although a significant proportion of women in Iwo local government have heard about family planning as discussed in chapter six, and majority of them expressed positive attitudes towards its use and in fact a significant proportion have ever used and are still using family planning devices, their fertility levels remain persistently high. The women who have ever used family planning methods surprisingly exhibit the same level or sometimes higher fertility than women who have never used family planning methods. What role then is family planning playing among these women? At present, it seems the use of family planning has no lowering effect on fertility level of Iwo local government women. We are inclined to think therefore, that the observed increasing use of family planning devices is not meant to limit reproduction but to probably space out the desired number of children through out their reproductive years. However, the situation where women used family planning devices to space rather than to limit

is not peculiar to this study. Similar studies conducted somewhere else in Africa in general and among the Yoruba in particular reported the same finding.

Thomas E Dow and Lind-Werner's (1981) study which we referred to in chapter two, reported that in Nairobi, number of living children and of children desired which was about 5.8 children per woman remained almost unchanged during the period in spite of the fact that almost nine out of ten of the women in 1966-67 were aware that a large family was very expensive to maintain and that the proportion without formal education had fallen from 49 percent to 17 percent. Moreover, there was a remarkable improvement in knowledge and practice of contraceptives. Dow and Werner therefore concluded that contraceptives are being used by women in Nairobi to complement and maintain high fertility rather than to change and reduce fertility aspirations. Caldwell and Caldwell (1977b, 1978) which was also reviewed in chapter two found similar trend in their study of the city of Ibadan. Ware (1976) wrote "....within marriage, spacing is the most prominent motivation for contraceptive practice, more important than the limitation of family size".

We can also make an inference from the Nigeria 1981-82 fertility survey (National Population Bureau, 1984). The study reported an average number of children ever born by women with secondary or higher education and aged 35-39 years of about 4.6. Surprisingly, the southern women whose attitude seems to be clearly more favourable

Table 8.3

Distribution of the Children ever born by Age of Mothers and by whether or not Women have ever used Family Planning Methods

Whether or not women have ever used Family Planning Methods

Age	URBAN						RURAL				LOCAL GOVT.			
	Have used		Have Not used		Have used		Have Not used		Have used		Have Not used			
	N	AV	N	AV	N	AV	N	AV	N	AV	N	AV	N	AV
15-19	2	0.50	11	0.09	3	0.67	19	0.11	5	0.60	30	0.10		
20-24	41	2.05	65	1.02	14	1.50	41	0.98	55	1.45	106	0.78		
25-29	89	3.03	96	3.03	35	3.06	42	2.98	124	3.04	138	3.01		
30-34	92	4.17	81	4.10	41	4.05	28	3.96	133	4.14	109	4.03		
35-39	101	5.50	64	5.38	31	3.13	37	4.97	132	5.41	101	5.23		
40-44	58	5.72	47	5.70	21	5.76	62	5.56	79	5.73	109	5.62		
45-49	41	6.12	48	6.33	8	6.63	29	6.48	49	6.20	77	6.39		
50+	21	6.19	91	6.41	5	6.80	46	6.74	26	6.31	137	6.52		
Total	445	4.41	503	4.36	158	4.15	304	4.25	603	4.35	807	4.32		
SRD AV		4.46		4.34		4.45		4.28		4.40		4.28		

Table 8.4

Distribution of Children ever born by Age of Mother and by Women who are currently Using Family Planning Methods

Age	URBAN						RURAL				LOCAL GOVT.			
	YES		NO		YES		NO		YES		NO			
	N	AV	N	AV	N	AV	N	AV	N	AV	N	AV	N	AV
15-19	-	-	13	0.15	-	-	22	0.18	-	-	35	0.17		
20-24	21	1.38	85	1.01	4	1.50	51	0.88	25	1.40	136	0.96		
25-29	63	3.02	122	3.04	16	3.00	61	3.02	79	3.01	183	3.03		
30-34	72	4.10	101	4.03	25	4.00	44	4.02	97	4.07	145	4.10		
35-39	79	5.46	86	5.44	16	5.06	52	5.04	95	5.39	138	5.27		
40-44	39	5.79	66	5.67	13	5.09	70	5.60	52	5.77	136	5.63		
45-49	23	6.52	66	6.14	6	6.50	31	6.52	29	6.52	97	6.26		
50+	10	6.62	102	6.34	4	6.50	47	6.72	14	6.71	149	6.46		
Total	306	4.50	641	4.27	84	4.45	378	4.16	391	4.61	1019	4.27		
STD AV		4.45		4.31		4.26		4.30		4.44		4.31		

Table 8.5

Distribution of Children ever born by age of mother and by whether or not women have ever attended family planning clinics

Family Planning Clinic Attendance												
Age	URBAN				RURAL				LOCAL GOVERNMENT			
	Atten- dants		Non-Atten- dance		Atten- dants		Non-Atten- dance		Atten- dants		Non-Atten- dance	
	N	AV	N	AV	N	AV	N	AV	N	AV	N	AV
15-19	-	-	13	0.15	-	-	22	0.18	-	-	35	0.11
20-24	11	1.36	95	1.02	-	-	55	0.93	11	1.36	150	0.99
25-29	39	2.97	146	3.05	13	3.0	64	3.02	52	2.98	210	3.04
30-34	73	4.08	100	4.14	31	4.03	38	4.00	104	4.07	138	4.10
35-39	83	5.46	82	5.44	21	5.10	47	5.55	104	5.38	129	5.29
40-44	51		54		18		65		69		119	
45-49	30	6.02	59	6.14	6	6.12	31	6.15	36	6.04	90	6.14
50+	9		103		2		49		11		152	
Total	296	4.8	652	4.20	91	4.70	371	4.10	387	4.78	1023	4.28
STD. AV.		4.35		4.37		4.16		4.36		4.34		4.34

Table 8.6

Mean Number of Children born alive and still living to
Family Planning Clinic Attendants by Age

Family Planning Clinic Attendance									
URBAN				RURAL			LOCAL GOVT.		
Age	N	Mean No of child- ren born	Mean No of child- ren living	N	Mean No of child- ren born	Mean No of child- ren living	N	Mean No of child- ren born	Mean No of child- ren living
15-19	-	-	-	-	-	-	-	-	-
20-24	11	1.36	1.36	-	-	-	11	1.36	1.36
25-29	39	2.97	2.95	13	3.0	2.92	52	2.98	2.94
30-34	73	4.08	4.04	31	4.03	3.97	104	4.07	4.02
35-39	83	5.46	5.35	21	5.10	4.90	104	5.38	5.26
40-44	51	6.02	5.81	18	6.12	5.73	69	6.03	5.79
45-49	30			6			36		
50+	9			2			11		
Total	296	4.80	4.69	91	4.70	4.54	387	4.78	4.65

to family limitation show a clearly higher average number of children even born than the North.

If all these observations are correct, it means that an increase in contraceptive use do not or have not changed the fertility norms of these societies. Can socio-economic factors like rural-urban residence or educational development or changes in occupational status of the women change them?

SOCIO-ECONOMIC FACTORS AND FERTILITY

Historically fertility decline in the developed countries of the world has been attributed to factors related to the process of industrialization, modernization and economic development. Thus many scholars have attempted to explain fertility decline by using a number of socio-economic factors such as urbanization, education, occupation, family type, income and a host of other socio-economic factors. In this section we shall attempt to relate fertility of Iwo local government women with some of these variables and see whether they could be used to explain the persistently high fertility of the respondents.

8.3. RURAL-URBAN RESIDENCE AND FERTILITY

The average number of pregnancies per woman is as shown in Table 8.8. The older rural women have consistently higher average than their urban counterparts. However, the urban women in age 15-24 reported higher averages than

Table 8.7

Mean Number of Children born alive and still Living to Family
Planning Clinic Attendants by Education

Education of Women	No of Women in category	Mean No of children ever born	Mean No of living children
None	35	5.46	5.11
Primary	64	5.61	5.41
Secondary	122	4.69	4.55
Post Secondary	166	4.23	4.19
Total	387	4.79	4.65

their rural counterparts. Table 8.9 shows the average number of children ever born by age and by rural-urban residence. The rural women in age group 25-44 have consistently lower average number of children ever born than their urban counterparts whereas these same group of rural women reported higher average number of pregnancies than the urban women in the same age group (Table 8.8).

On the whole, about 16 percent of all pregnancies in rural areas of the local government did not result in life births. The corresponding figure for the urban women is about 12 percent.

On the whole, the urban average number of children ever born is not significantly higher than the rural average as evidence in the standardized averages computed for the two survey locations. If however, women aged 50

and above are regarded as being beyond their child bearing years, the completed family size of 6.37 per woman computed for urban women would be about 6 percent lower than that of the rural women of about 6.75 per woman. What this implies is that the completed family size for the rural women might be slightly higher than that of the urban women. Orubuloye (1981) suggested similar pattern when he estimated 5.6 children per woman for Ibadan city women and 6.2 children per woman for women in Ibadan villages who were 50 and above years old. This latter finding should however, be interpreted more cautiously as it has confined the analysis to the older women who are more liable to memory lapse than the younger ones.

Table 8.10 presents age-specific fertility rates (ASFR) per 1000 women for both rural and urban areas of the local government. The age-specific fertility rate increases with the age of women up to age 29 before it starts to decline in older ages. This is true of both urban and rural women of the local government. On the whole there is no significant difference between the fertility levels of urban and rural women of the local government area as the total fertility for the two survey locations is almost the same (about 5.67 for urban and 5.62 per woman for rural women). Thus, judging from either prospective births, or from current births, this study does not find any significant difference between urban and rural fertility levels. However, some similar surveys on rural-

urban fertility differentials in Nigeria, suggest that urban fertility is higher, than rural fertility.

This is found in Olusanya's (1969) study of the then Western Region. Ekanem (1975) reported similar pattern for couples in the former Eastern Nigeria.

The analysis of the average expected number of children which we did in chapter six indicated that the rural women desired more children than their urban counterparts. This desire does not match the actual practice as Table 8.9 and 8.10 show. Although the urban women desired fewer children than their rural counterparts, their fertility levels are as high or even slightly higher than the fertility level of the rural women. Whereas the average desired number of children are 6.72 and 7.12 for both urban and rural women respectively, their total fertility rates are 5.67 women for urban and 5.62 per woman for rural areas of the local government. This confirms what we mentioned in chapter six that where couples decided on a certain number of children they should have, the desired number of children does not always coincide with their actual fertility.

Table 8.8

Average Number of Pregnancies per Woman by Age and by Rural-Urban Residence

Age	URBAN		RURAL		TOTAL	
	N	AV	N	AV	N	AV
15-19	13)		22)		35)	
20-24	106)	1.41	55)	0.96	161)	1.29
25-29	185	3.50	77	3.68	262	3.55
30-34	173	4.53	69	4.71	242	4.58
35-39	165	6.00	68	5.93	233	5.95
40-44	105	6.42	83	6.91	188	6.63
45-49	89	7.24	37	7.57	126	7.33
50+	112	7.32	51	7.80	163	7.47
Total	948	4.98	462	5.06	1410	5.01
STD. AV		1.06		1.11		

Table 8.9

Average Number of Children ever born per Woman by Age and Rural-Urban Residence

Age	URBAN		RURAL		TOTAL	
	N	AV	N	AV	N	AV
15 - 19	13}		22}		35}	
20 - 24	106}	0.96	55}	0.71	161}	0.86
25 - 29	185	3.03	77	3.01	262	3.03
30 - 34	173	4.12	69	4.01	242	4.09
35 - 39	165	5.45	68	5.04	233	5.33
40 - 44	105	5.72	83	5.61	188	5.67
45 - 49	89	6.24	37	6.51	126	6.32
50+	112	6.37	51	6.75	163	6.48
Total	948	4.38	462	4.24	1410	4.34
STD AV		4.36		4.29		

Table 8.10

Age-Specific Fertility Rates per 1000 Women by Rural-Urban Residence

Age	URBAN		RURAL		TOTAL	
	N	ASFRS	N	ASFRS	N	ASFRS
15 - 19	328	70.1	139	43.2	467	62.1
20 - 24	195	256.4	96	260.4	291	257.7
25 - 29	193	285.0	80	275.0	273	282.1
30 - 34	175	211.4	74	229.7	249	216.9
35 - 39	172	157.0	79	151.9	251	155.4
40 - 44	136	102.9	83	120.5	219	109.6
45 - 49	96	52.1	69	44.1	164	48.8
Total	1295	1134.9	619	1125.3	1914	1132.6
		<u>x 5</u>		<u>x 5</u>		<u>x 5</u>
Total Fertility		5674.5		5626.5		5663.0

8.4. EDUCATION AND FERTILITY

Education is generally considered the process by which societies transmit their culture from generation to generation and also it has become (especially in less-developed countries of the world) the principal channel of social mobility and change. In recent years, interest has centred on education as a channel of socio-economic change which influences fertility behaviour negatively. However, direction of the influence of education on fertility behaviour has not been consistent in African countries. As we pointed out in chapter two, some studies found a negative association between education and fertility whereaw others have found a positive association. It is against this background that we intend to closely look at the relationship between the two variables in this study.

Table 8.11 shows the average number of children ever born by age and educational status of the women. The table indicates that the average number of children ever born by illiterate mothers is lower than the average number of children born by women with primary education from age 25 to the end of the reproductive years. The difference among the younger mothers between the two groups is not clear and this is because we have very few women in 'None education' category in age groups 15-19 and 20-24. However, when we combine the two age groups, we find that the illiterate women have the same average (1.05 per woman) as women who have primary education. The average number of children ever born to women with primary education and

are 40 years and above is about 5 percent higher than that of their illiterate counterparts.

When the average number of children ever born to women who have secondary or above education is compared with that of the illiterate women, we find that the averages for the illiterate women are consistently higher than the averages for women with secondary or post secondary education. The average number of children born to illiterate mothers who are 40 years and above is about 12 percent and 15 percent higher than their counterparts with secondary and post secondary education respectively.

When the standardized averages in Table 8.11 are compared, we find that women with primary education have the highest average, followed by the illiterate women and women with post secondary education having the lowest average.

The age-specific fertility rates per 1000 married women shown in Table 8.12 and figure 8.1 confirm this observation as it indicates that the influence of women's education on their fertility becomes clearer only after post-primary level. The total fertility for illiterate women is about 5 percent lower than that of the women with primary education but higher by about 17 percent and 26 percent than those of the women with secondary and post-secondary education respectively.

The pattern whereby fertility first increases with education, reaching the maximum at primary school level before it starts to decline steadily at the highest level of education is not peculiar to this study. Similar results

have been obtained in studies in Lagos and elsewhere in the Yoruba area. For example Orubuloye (1981) in his study of the city of Ibadan found that women with primary school education had the highest level of fertility, followed by those who have not been to school, while those with secondary or more education have the lowest. Morgan (1976) found similar trend in Lagos. Olusanya (1981) also found that mean pregnancies and mean live births were consistently higher among primary and modern school graduates in Surulere area of Lagos metropolis. The 1981-82 Nigeria fertility survey (National Population Bureau, 1984) gave similar result; the average number of children ever born for women with primary education (complete or incomplete) is above 7. The total fertility of women with primary education is also clearly above 7 whereas the corresponding values for their illiterate, secondary and higher counterparts are about 6.6 and 3.9 respectively. Lucas (1973) also found the same pattern in Lagos.

This pattern is not peculiar to Nigeria; a similar pattern was reported especially for urban areas of Ghana (Census Office, Accra, (1971)).

If women with primary education have been found to exhibit the highest level of fertility relative to other educational categories in Nigeria and somewhere else in Africa, the question is: Why are current fertility and mean live births consistently higher among primary school graduates than for any other educational category? First the duration of schooling for primary school graduates is

so short (usually six years) that it does not significantly affect their age at marriage, so that primary school graduates and illiterate women tend to marry at approximately the same time. And as will be shown later, the birth interval for primary school graduates is shorter than the birth interval for the illiterates. This means that the primary school graduates are less traditional than their illiterate counterparts. Primary school graduates are also more likely to make use of medical facilities provided by the government than their illiterate counterparts. Finally, primary school graduates are more likely to keep the rules of hygiene more often than their illiterate counterparts. All these will result in lower pregnancy wastage for the primary school graduates than their illiterate counterparts and corresponding higher live births. Also, part of the higher fertility observed for women with primary education than for the illiterate women may be explained by greater level of omission among the illiterate women which we mentioned earlier but this is unlikely to have been so in the various studies which found this pattern.

Women with secondary and post secondary education on the other hand, would stay longer in schools than primary school graduates and so they are likely to marry at higher age than primary school graduates. Furthermore, as we have shown in chapter six, proportion of women with post-primary education who make use of family planning methods is significantly higher than either for the illiterates or

primary school graduates. Therefore, the relatively late age at marriage for women of higher educational levels coupled with their increased contraceptive practice, may be responsible for the relatively low fertility found among them.

Table 8.13 shows the average live births per woman by age at first marriage and by education. Average number of children ever born by the women is negatively associated with the age at first marriage. However, women who delay marriage within a traditional society where the average age at marriage is quite low, would be expected to hold more modern values than women married at very young ages. Older age at marriage allows time for education and opportunity for alternative roles within society. As alternative roles such as employment outside the home, begin to compete with traditional child bearing roles, a decrease in fertility would be expected. In contrast, girls who married at very young ages are more likely to remain under the traditional influence of their families and thus their fertility level is expected to be high as those of their parents.

If, however, we disregard those who married at age 30 and above because women in that category are few, a close look at the average number of children ever born of the other categories indicates that literate women, although married at different dates have the same average number of live births. For instance, the average live births for women with secondary education who married between the ages

of 15 and 19 is only about 4 percent higher than the same group of women who married between the ages of 25 and 29 whereas the average live births of illiterate women who married between the ages of 15 and 19 is about 35 percent higher than another group of illiterate women who married between ages 25-29. The explanation for this is that, a literate woman who realises that she enters into marriage late as a result of probably staying longer in schools will have children in quick succession so that by the time she is only about 6 to 8 years old in marriage, she should have got as many as four children, whereas another literate woman who marries early can afford to space out her children by the use of family planning devices. The illiterate women however, are more traditional and the age at marriage can have higher influence on the fertility than it does to the fertility of the literate women. An illiterate woman irrespective of the age she marries would like to maintain the traditional interval of between 2 to 3 years between births or else she becomes subject of ridicule by her illiterate co-wives.

Tables 8.14 and 8.15 lend support to the differentials in the family building characteristics of the literate and illiterate women. While none of the illiterate women who married between 1977-86 (10 years duration of marriage) have got 3 and above children, 21.1 percent and 67.7 percent of the women with primary and secondary and above education respectively have got 3 or more children with the same marriage duration (Table 8.15). This implies as we have

earlier suggested that the literate women have shorter interval between births than their illiterate counterparts. Also, while a significant proportion (45.2 percent) of the illiterates who are 45 and above years old have got 7 or more live births, only 5 percent and 12.8 percent of the women with primary and secondary and above education respectively have had 7 or more births (Table 8.14). However, the differentials in family building characteristics of the local government women will be discussed at the later part of this chapter.

In Table 8.16 in which average number of live births is controlled for duration of marriage, the difference between the educational categories seems to have disappeared among women who married before 1961. The average live births for women who married before 1961 is about 6 children per woman irrespective of their educational status. We also find that there is no consistent relationship between average number of live births and education for women who married between 1961 and 1981. After 1981 however, it seems average live births increase with education of women. This might be due to the fact that women with secondary and above education who married at these dates should have been probably married at relatively late ages and thus give birth to children at short intervals to compensate for the time wasted before they enter into marriage. Overall, fertility differential by education when duration of marriage is controlled for, is very insignificant as evidenced in the standardized

average live births presented in Table 8.16,.

The average number of live births per woman by number of years spent in school by the mother shown in Table 8.17 shows almost the same pattern as observed in Table 8.11 which indicates a very close association between the number of years spent in schools and the level of educational attainment. The average live births shown in Table 8.17 is consistently higher from age 25 to the end of the reproductive years, for women who spent between 1-6 years in school than any other duration of schooling shown on the table. The relationship between number of years spent in school and fertility among younger mothers cannot be validly stated here because of the small number of women involved. However, average live births is slightly lower for women who spent above 6 years in school than either women who have never being to school or women who have spent between 1 - 6 years in school.

Overall, education which has been found in many parts of the world to show the strongest negative relationship with fertility, shows in Iwo local government and infact in Nigeria, a positive association except at the highest level of education, where, in any case, the average number of children ever born per woman is still very high by international standard. Therefore our initial assumption that education will be negatively associated with fertility is not upheld and thus, the question as to why fertility level of the respondents remains persistently high is left

Table 8.11

Average Number of Children over born alive per Woman by
Age and by Education level of women

Age	Level of Education									
	None		Primary		Secondary		Post Sec.		All Groups	
	N	AV	N	AV	N	AV	N	AV	N	AV
15-19	4	0.25	11	0.18	18	0.17	2	-	35	0.17
20-24	16	1.25	55	1.23	31	1.06	59	0.95	161	1.01
25-29	31	3.03	68	3.10	64	3.03	99	2.97	262	3.03
30-34	31	4.39	34	4.82	87	4.04	90	3.74	242	4.09
35-39	26	5.38	48	5.65	76	5.16	83	5.28	233	5.33
40-44	46	6.34	33	6.65	51	5.61	58	5.42	188	5.67
45-49	58		25		10		33		126	6.31
50+	97		37		10		20			
Total	309	5.16	311	4.36	347	4.00	443	3.94	1410	4.33
STD AV		4.37		4.73		4.13		4.00		

Table 8.12

Age-Specific Fertility Rates per 1000 married Women by
Education of Women

Age	Level of Education									
	None		Primary		Secondary		Post Sec.		All Groups	
	N	ASFR	N	ASFR	N	ASFR	N	ASFR	N	ASFR
15-19	4	-	11	90.9	18	55.6	2	-	35	57.1
20-24	16	312.5	55	309.1	31	258.1	59	220.3	161	267.1
25-29	31	322.6	68	324.0	64	281.0	99	263.0	262	294.0
30-34	31	258.1	34	294.1	87	218.4	90	188.9	242	223.1
35-39	26	192.3	48	145.8	76	157.9	83	144.6	233	154.5
40-44	46	152.2	33	121.2	51	117.6	58	103.4	188	122.3
45-49	58	69.0	25	80.0	10	-	33	30.3	126	55.6
Total	212		274		337		424		1247	
T.P.		6534		6826		5443		4753		5868

Table 8.13

Average Number of Children ever born alive per Woman by Age at First Marriage and Education of the Women

Age of Marriage	Level of Education									
	None		Primary		Secondary		Post Sec.		All Groups	
	N	AV	N	AV	N	AV	N	AV	N	AV
15-19	157	5.41	84	4.61	13	4.15	1	4.0	255	5.04
20-24	130	5.08	187	4.33	250	4.05	334	4.01	901	4.28
25-29	22	3.50	38	4.09	78	3.97	91	3.76	229	3.86
30+	-		2	3.50	6	3.0	17	3.41	25	3.82
Total	309	5.16		4.37	347	4.00	443	3.94	1410	4.33
STD AV		4.79		4.33		3.95		3.87		

Table 8.16

Average Number of Children ever born per Woman by Date of Marriage and Education

Date of Marriage	Level of Education									
	None		Primary		Secondary		Post Sec.		All Groups	
	N	AV	N	AV	N	AV	N	AV	N	AV
Before 1952	44)		14)		5)		1)		65	6.34
1952-56	33)	6.12	19)	6.12	2)	6.07	2)	5.86	56	6.46
1957-61	60)		44)		32)		14)		150	5.88
1962-66	59	5.76	58	5.16	58	5.73	46	5.17	221	5.63
1967-71	44	4.91	49	4.98	44	5.08	62	4.79	195	5.11
1972-76	40	3.92	56	3.94	73	3.81	80	3.36	249	4.21
1977-81	19	3.16	42	3.10	86	2.91	113	3.13	260	3.12
1982-86	10	1.20	29	1.48	51	1.69	125	1.81	215	1.68
Total	309	5.16	311	4.37	347	4.00	443	3.94	1410	4.33
STD AV		4.21		4.16		4.19		4.02		

Table B.14

Percentage Distribution of all Respondents by Parity, Education and Age

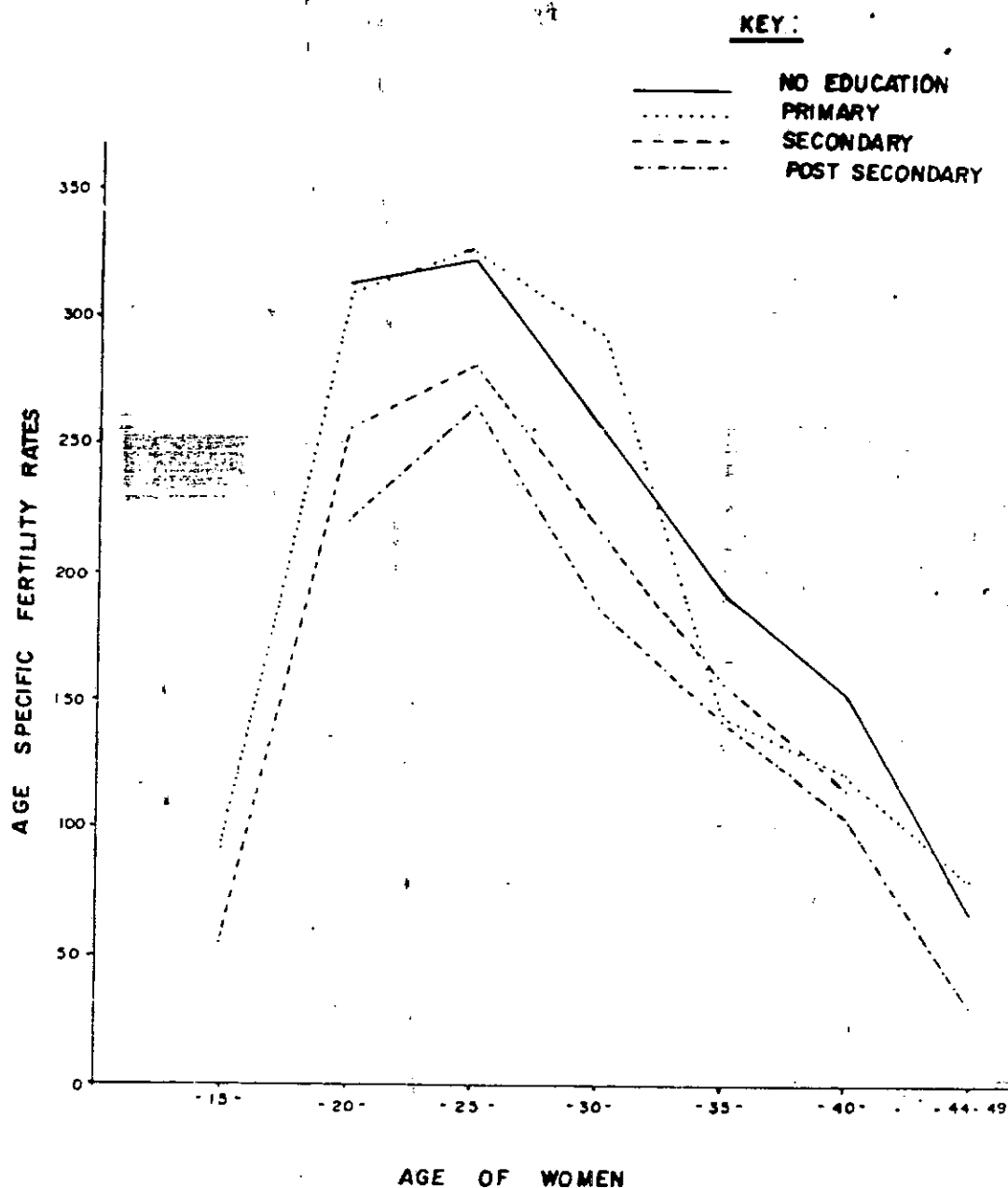
Pa- rity	NONE								PRIMARY				SECONDARY						POST SECONDARY						All Groups	
	15-29		30-34		45+		15-29		30-34		45+		15-29		30-34		45+		15-29		30-34		45+			
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%		
0	16	31.4	4	3.9	-	-	12	9.0	-	-	1	1.6	5	4.5	1	0.5	-	-	6	3.8	3	1.3	-	-	47	3.3
1	12	23.5	6	5.8	1	0.6	16	11.9	6	5.2	-	-	22	19.8	6	2.8	1	5.0	36	22.6	17	7.3	2	3.6	124	8.8
2	11	12.4	7	6.8	2	1.3	28	20.9	9	7.8	1	1.6	26	23.4	13	6.1	1	5.0	36	22.6	11	4.8	-	-	145	10.3
3	6	11.7	9	8.7	10	6.5	52	38.8	13	11.3	-	-	33	29.8	18	8.4	2	10.0	18	11.3	3	1.3	-	-	164	11.6
4	6	11.7	12	11.7	21	13.5	26	19.4	14	12.2	3	4.8	21	18.9	46	21.5	8	40.0	41	25.8	73	31.6	13	23.6	281	19.9
5			21	20.4	27	17.4			24	20.9	4	6.5	4	3.6	58	27.1	5	25.0	22	13.9	77	33.3	19	34.6	261	18.5
6			16	15.5	24	15.5			24	20.9	11	17.7			51	23.8	2	10.0			29	12.6	11	20.0	168	11.9
7			12	11.7	26	16.8			13	11.3	14	22.6			17	7.9	1	5.0			14	6.1	3	5.5	102	7.3
8+			16	15.5	44	28.4			12	10.4	28	45.2			4	1.9	-	-			4	1.7	7	12.7	118	8.4
Total	51	100	103	100	155	100	134	100	115	100	62	100	111	100	214	100	20	100	159	100	231	100	55	100	1410	100

Table 8.15

Percentage Distribution of the Respondents by Parity, Education and Date of Marriage

Pa- rity	NONE								PRIMARY								SECONDARY AND ABOVE										All Groups	
	Before 1957		1957-66		1967-76		1977-86		Before 1957		1957-66		1967-76		1977-86		Before 1957		1957-66		1967-76		1977-86					
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%		
0	-	-			7	8.3	16	55.2	1	3.0	1	1.0	1	1.0	11	15.5	-	-			2	0.8	9	2.4	47	3.3		
1	2	2.6			8	9.5	10	34.5	-	-	2	2.0	4	3.8	17	23.9	1	10.0	2	1.3	24	9.4	59	15.7	124	8.8		
2	2	2.6	-		15	17.9	3	10.3	2	6.1	-	-	9	8.6	28	39.5	1	10.0	-	-	33	12.9	53	14.1	145	10.3		
3	-		3	2.5	22	26.2			2	6.1	9	8.8	38	36.2	15	21.1	-	-	11	7.3	39	15.3	24	6.4	164	11.6		
4	3	3.9	18	15.1	18	21.4			3	9.1	11	10.8	29	27.6			1	10.0	14	9.4	74	29.0	111	29.6	281	19.9		
5	4	5.2	36	30.3	8	9.5			1	3.0	6	5.9	21	20.0			2	20.0	44	29.3	52	20.4	89	23.8	261	18.5		
6	5	6.5	31	26.1	4	4.8			4	12.1	27	26.5	3	2.8			4	40.0	33	22.0	25	9.8	30	8.0	158	11.9		
7	18	23.4	21	17.6	2	2.4			7	21.2	23	22.5					1	10.0	28	18.7	6	2.4			102	7.3		
8+	43	55.8	10	8.4					13	39.4	23	22.5					-		18	12.0					118	8.4		
Total	77	100	119	100	84	100	29	100	33	100	102	100	105	100	71	100	10	100	150	100	255	100			100	1410	100	

AGE SPECIFIC FERTILITY RATES PER 1000 WOMEN BY EDUCATION
FOR IWO LOCAL GOVERNMENT, 1986



unanswered.

Table 8.17

Average Number of Children born alive per woman by Age and
by Number of years the Mother used in Schools

Age	<u>No. of Years the Mother Used in Schools</u>									
	None		1-6		7-12		13+		All Groups	
	N	AV	N	AV	N	AV	N	AV	N	AV
15-19	4)		11)		17)		3)		35	0.17
)	1.1)	1.00)	0.75)	0.75		
20-24	16)		48)		40)		57)		161	1.01
25-29	31	3.03	60	3.68	83	3.05	88	2.56	262	3.03
30-34	31	4.39	34	4.71	90	4.08	87	3.75	242	4.09
35-39	26	5.38	45	5.76	83	5.29	79	5.11	233	5.33
40-44	46	5.85	31	6.42	45	5.58	65	5.33	188	5.67
45-49	58	6.53	24	6.70	13	6.00	31	5.74	126	6.32
50 +	97	6.49	29	6.82	111	6.09	27	6.00	163	6.48
Total	309	5.16	282	4.55	382	3.99	437	3.86	1410	4.33
STD AV.		4.47		4.83		4.23		3.99		

8.5. OCCUPATION, INCOME AND FERTILITY

Many studies have related fertility levels to the occupational status of women, focussing on the incompatibility of continuous child-bearing on the one hand and permanent employment in the modern sector of the economy on the other, interest has centred on the possibility of associating certain categories of work with lower fertility (Caldwell

1975, 1976; Central Bureau of Statistics, Nairobi, 1979, Olusanya, 1981). The idea which we got from these studies that the onset of any extensive fertility decline must be associated with the involvement of a substantial fraction of the population in modern systems of social and economic organisation stimulates us to want to see whether the relationships between fertility levels and the occupational status of women in Iwo local government area can be used to explain their high fertility.

Table 8.18 shows the average number of children ever born alive by type of occupation and age of women. It indicates that teachers, nurses and clerical officers have higher average number of live births than any occupational category especially in age groups 25-34 and 35-44. Teachers, nurses and clerical staff enter into marriage relatively later than any of the other occupational categories because they stay longer in educational institutions. Hence, they have the lowest average live born in the early part of the reproductive period. However, by the time they attain the age of 25 years, they have built up their families so rapidly that they overtake women in other occupational groups who probably started child-bearing earlier. As the table indicates, women in all occupational groups including the teachers, nurses, and clerks have almost the same average live births towards the end of their reproductive years (45 years and above). Acsadi, Igun and Johnson (1972) also found that women in professional and clerical jobs start planning their families with fewer children than housewives,

service and craft workers.

Women who are in farming and related jobs have the lowest average live birth in age group 45 and above although they have the highest average live births in age 15-24. This may be partly explained by under-reporting as majority of women in this occupational category are likely to be illiterate. Secondly, they are likely to observe the traditional interval between births more often than their counterparts in other occupational categories and they are more likely to have experienced more pregnancy wastage than the other occupational categories.

On the whole, women in age group 45 and above in all occupational categories except women in agriculture have at least six children on the average. Therefore the only significant differential which Table 8.18 shows is between women in agriculture and women in other occupational groups.

However, when we controlled for duration of marriage as in Table 8.19 the difference between the teachers, nurses and other occupational groups becomes clearer. Teachers, nurses and clerical officers consistently have higher average children ever born from 1952-56 marriage cohort to 1977-81 marriage cohort than any other occupational groups. Therefore, to the extent that there are occupational differences in reproductive behaviour among these groups of women those in paid employment (teachers, nurses, clerks) may be said to have slightly higher average children ever born than any other occupational

categories.

This finding contrasts sharply with Olusanya's (1981) finding in Lagos that femal employment has a decidedly lowering effect on the level of fertility. However, similar findings have been reported somewhere else in Africa. For instance, the fertility of unemployed women who were between the ages of 15 and 44 years in Ghana, was markedly lower than that for the employed women (census office, Accra, 1971). Data from the United Republic of Tanzania show that women in the professional category recorded higher average parity than other occupational groups (Egero, B.; and Henin, R.A. 1973).

However, there is a general problem in relating occupational fertility and that problem is related to the grouping of the occupations into categories. For instance grouping all occupations in a population into a limited number of categories (i.e. between 6 and 10 classes) necessarily involves lumping together significantly different social and economic groups into one class. This is a factor that can blur differences.

Table 8.20 indicates that income of the women is negatively related with number of children ever born. Average number of children ever born is consistently higher from age 20 to the end of their reproductive years than the average children ever born to women in other income groups. Women in high income group have the lowest average children ever born in all ages. Ibanga (1987) also found that the group with the least amount of

savings had the highest average number of children ever born, although he reported a consistent rise in the average number of children desired as the level of savings increases. These observations are consistent with the assumptions of economic theory of fertility (Becker, 1960). The explanation for this is, as we pointed out earlier, that education is highly related to occupation and occupation in turn is highly related to income. It is possible that a significant proportion of the women in high income group are found among women with the highest level of education and we have shown that women who have attained the highest level of education have the lowest average number of children ever born. Therefore that what we observed for women in high income group is a reflection of what we observed for women with the highest level of education.

The position remains unchanged when date of marriage rather than age is used as in Table 8.21.

Overall, this study reveals a positive association between employment status and average number of children ever born and a negative association between income and average number of children ever born. However, the average ever born for women in each occupational or income category are so high by international standards that we cannot say that the two variables (occupation and income) can be used to explain the persistently high fertility among the Yoruba. In fact any differentials observed may be fortuitous and may have nothing to do with these variables.

Table 8.18Average Number of Children ever born by type of Occupation*Age of MotherAge of Women

Occupation	15-24		25-34		35-44		45+		All Groups	
	N	AV	N	AV	N	AV	N	AV	N	AV
Agriculture	27	2.15	37	3.57	48	5.10	52	5.67	164	4.45
Tailors, hair dressers	50	1.22	86	3.66	54	5.57	60	6.32	250	4.38
Traders	32	1.69	220	3.30	180	5.33	94	6.03	526	4.54
Teachers, nurses, clerks	59	0.88	133	3.86	129	5.80	74	6.34	395	4.54
Unemployed	28	1.11	23	3.35	5	4.60	7	6.14	63	2.76
Total	196	1.31	499	3.53	416	5.47	287	6.10	1398	4.33

* Doctors, Accountants and religious workers are not included in this analysis because they are very few.

Table 8.19

Average Number of Children ever born by Date of Marriage and
Occupational Category of Mothers

Date of Marriage	Types of Occupation											All Groups
	Agriculture		Tailors, Dair Dress- ers etc.		Traders		Teachers Nurses, Clerks etc		Unem- ployed			
	N	AV	N	AV	N	AV	N	AV	N	AV	N	
Before 1952		5.27	7	6.43	27	6.33	-	-	-	-	64	5.84
1952-56	22	5.09	5	6.40	25	6.24	3	6.67	1	6.00	56	5.82
1957-61	50	4.54	23	5.61	63	5.55	9	6.56	5	6.00	150	5.30
1962-66	25	4.32	33	5.33	101	5.16	59	6.22	3	4.33	221	5.36
1967-71	17	3.94	47	5.32	75	4.95	56	6.59	-	-	195	5.41
1972-76	13	3.31	44	4.48	101	3.81	69	5.61	22	3.00	249	4.33
1977-81	5	2.40	43	2.98	89	3.11	96	4.25	20	2.15	253	3.41
1982-86	2	1.50	48	2.06	45	1.67	103	2.01	12	1.33	213	1.91
Total	164	4.45	350	3.02	526	4.38		4.54	63	2.76	1398	4.34
STD AV		3.42		4.39		4.14		4.97		2.69		

Table 8.20

Average Number of Children ever born alive by Age and by
Income of Mother

Age	Income of Women							
	High		Medium		Low		All Groups	
	N	AV	N	AV	N	AV	N	AV
15-19	3	-	9	0.22	29	0.11	35	0.17
20-24	24	0.79	48	0.94	89	1.11	161	1.01
25-29	19	2.47	105	2.87	138	3.22	262	3.03
30-34	26	3.46	94	3.73	122	4.49	242	4.09
35-39	35	4.80	83	5.08	115	5.67	233	5.33
40-44	25	5.80	67	6.23	96	6.40	188	5.67
45-49	10		38		78		126	6.32
50+	7		62		94		163	6.48
Total	566	3.84	506	4.22	755	4.52	1410	4.33
STD AV		3.88		4.20		4.60		

Table 8.21

Average Number of Children ever born alive per woman by
Date of Marriage and Income

Date of Marriage	<u>Income of Women</u>							
	High		Medium		Low		All Groups	
	N	AV	N	AV	N	AV	N	AV
Before 1952	7	5.86	16	5.88	41	6.61	64	6.34
1952 - 56	5	6.20	15	6.20	36	6.61	56	6.46
1957 - 61	14	5.36	52	5.58	84	6.18	150	5.88
1962 - 66	18	5.00	68	5.34	135	5.84	221	5.63
1967 - 71	26	4.50	69	4.88	100	5.43	195	5.11
1972 - 76	27	3.89	99	4.05	123	4.41	249	4.21
1977 - 81	31	2.94	116	3.08	113	3.22	260	3.12
1982 - 86	21	1.76	71	1.68	123	1.67	215	1.68
Total	149	3.94	506	4.06	755	4.60	1410	4.33
STD AV.		4.13		4.16		4.51		

8.6. FERTILITY AND HOUSEHOLD-STRUCTURE

Studies in Bangladesh, India and Pakistan indicate that contrary to expectation, the polygynous family not only continues to exist, but in certain areas is increasing in urban as well as rural areas (Caslillo, Weisblat and Villareal, 1968). Furthermore, Nag (1965) showed that polygynous families have lower fertility than nuclear families. Sarma (1964) also found nuclear to be poorer and to have more children than polygynous families in four

rural villages of West Bengal. In Nigeria, however, there are very few studies done relating household structure to fertility and the few studies done did not conclude with any clear association between fertility and household structure. For instance, Olusanya, (1981) found no significant fertility differential between women in nuclear households and polygynous/modified extended households in his study of Surulere and Yaba/Ebute metta, Lagos. The data presented in this section differentiates not only between women in nuclear and modified extended/polygynous households as Olusanya did in 1981 but among nuclear, modified extended and polygynous households.

The average children ever born by type of household shown in Table 8.22 indicates that average number of children ever born to women in modified-extended households is higher than the average number of children ever born to women in both nuclear and polygynous households. Comparing women in nuclear households with women in polygynous households, the average number of children ever born to women in nuclear households is consistently higher than the average to women in polygynous households from age 25 to the end of the reproductive period. However, a lower average is observed for younger mothers (mothers between age 15 and 24) in nuclear households than their counterparts in polygynous households. The explanation for the observed higher average ever born children to the younger mothers in polygynous household than younger mothers in nuclear households is that a significant proportion of the women

in nuclear households probably have post primary education whereas a significant proportion of their counterparts in polygynous households probably have no education or at best have primary education. We have mentioned earlier that women with post primary education have a higher age at marriage than the illiterate women. It is likely, therefore, that women in polygynous households, on the average enter into marriage earlier than their counterparts in nuclear households. Consequently, a higher average is observed for them at the early years of the reproductive period. However, the higher birth interval reported for women with some education than for the illiterate women would mean that educated women should have overtaken their uneducated counterparts and thus have more children on the average at higher levels of marriage duration. Thus, average number of children ever born is higher for younger women in polygynous household than for their counterparts in nuclear households but have consistently lower average number of children ever born at older ages.

As Table 8.23 indicates, the average number of children ever born seems to be higher for women in nuclear households than for women in either modified-extended or polygynous households especially among older marriage cohorts. However, the average to women in modified extended households who married between 1962 and 1971 is higher than for the same groups of women in either nuclear or polygynous households. There is no significant difference in the average children

ever born to mothers in younger marriage cohorts in either nuclear or modified extended households. Controlling for date at marriage does not change the traditional position of women in polygynous households as they have consistently the least average children ever born throughout the marriage cohorts. Therefore we would accept our hypothesis that fertility is likely to be lower for women in polygynous households than for women in other type of households identified in this study and that fertility for women in nuclear households is likely to be lower than fertility for women in modified extended households. Ekanem (1974), although comparing monogamous marriage with polygynous marriage as they affect fertility, concluded that polygyny has a depressing effect on fertility as he observed a significantly higher fertility-for women in monogamous marriage than for women in polygynous marriages.

The question we will now address ourselves to now is: What is it in polygynous households that depresses fertility in Iwo local government area or alternatively; what is it in modified extended households that has the power to raise fertility level of women well above the fertility levels of women in either nuclear or polygynous households?

Polygynous households seems to be more traditional than other nuclear or modified extended households. Women in polygynous households are likely to keep strictly to the traditional birth intervals of about 3 years. A situation where the first wife has her first child before the second

wife and the second wife wanting to have her second child before the first wife's second birth is unwelcomed in polygynous households. All these will amount to time wastage between reproductive years and consequently low completed family size. We should also note that for many couples, the change from nuclear household to polygynous households is precipitated by some factors like couples failure to bear children.

As regards women in modified extended households, it will be recollected that our modified-extend households will include at least one of the couple's parents (usually the mother) whereas the nuclear household has none of the couple's parents. The presence of any of the couple's mother in modified extended households can encourage women in such households to have more children on average than women in nuclear households. Women in modified extended households can combine childbearing roles with other competing roles such as employment outside the home more easily than women in nuclear households who would be compelled to look for housemaids that are very difficult to get nowadays. Therefore the presence of any of the couple's mothers creates a situation similar to that in the traditional extended family as far as child care is concerned since a grand-mother in an urban household is expected to be able to take adequate care of her grandchildren in the absence of their mother.

Table 8.22

Average Number of Children ever born by Age of Women and
by Household Type

Age	Type of Household							
	Nuclear		Modified- Extended		Polygynous		All Groups	
	N	AV	N	AV	N	AV	N	AV
15 - 19	20	0.10	8	0.25	7	0.29	35	0.17
20 - 24	120	0.97	22	1.18	19	1.16	161	1.01
25 - 29	214	3.03	19	3.53	29	2.66	262	3.03
30 - 34	187	4.08	25	4.76	30	3.57	242	4.09
35 - 39	165	5.44	31	5.29	37	4.86	233	5.33
40 - 44	132	6.16	25	6.38	31	5.73	188	5.67
45 - 49	86		15		25		126	6.32
50+	136		13		14		163	6.48
Total	1060	4.34	158	4.57	192	4.09	1410	4.33
STD AV		4.35		4.65		3.99		

Table 8.23

Average Number of Children ever born by Date of Marriage
and Household Type

Date of Marriage	Type of Household							
	Nuclear		Modified Extended		Polygynous		All Groups	
	N	AV	N	AV	N	AV	N	AV
Before 1952	25	6.96	7	6.43	32	5.84	64	6.34
1952-56	27	7.07	6	6.83	23	5.65	56	6.46
1957-61	85	6.28	21	6.14	44	5.02	150	5.88
1962-66	162	5.72	28	6.35	31	4.45	221	5.63
1967-71	151	5.15	21	5.86	23	4.22	195	5.11
1972-76	212	3.09	17	3.03	20	2.68	249	4.11
1977-81	226		19		15		260	3.12
1982-86	172		39		4		215	1.68
Total	1060	4.23	158	4.70	192	4.60	1410	4.33
STD AV.		4.46		4.58		3.68		

8.7. RELIGION AND FERTILITY

Studies have shown Christian fertility to be lower than that of Muslim fertility (K. Davis, 1951; J.N. Sinha, 1957). In attempting to explain the Christian-Muslim differentials in fertility and to relate the fertility differentials to practice of family planning, Stoekel and Chondhury (1969) suggested that Christians may have a more progressive attitude toward family planning than do Muslim couples. This suggestion was based upon their findings that the proportion of Christians with knowledge of family planning was twice that of Muslims; the proportion of Christians currently practising family planning is three times that of Muslims and a greater proportion of Christians continued to practise family planning for longer periods of time. On the basis of differential practice of family planning on the part of Christians and Muslim women of Iwo local government area reported in chapter six, we would also hypothesize that fertility level is likely to be lower for the Christians than for the Muslims.

Average number of children ever born alive per woman is consistently higher for Muslim than for Christians women from age 15 to the end of the reproductive period (Table 8.24). The average number of children ever born per woman to Muslim women who are 45 years and above old is about 11 percent higher than the average children ever born alive to their Christian counterparts and in fact the difference is about 29 percent for younger women

(15 - 29). The larger difference in average number of children ever born alive per women among younger women than older women may reflect the fact that Muslims probably enter into marriage earlier than Christians. We reported in chapter five that a higher proportion of the Christians than Muslims have formal education. This may have affected the age of marriage of the Christians as they are likely to have used more years in school than their Muslim counterparts.

The difference in the reproductive behaviour of the Christians and Muslims persist when duration of marriage is controlled for as in Table 8.25. The average number of children ever born per woman to the Muslims is consistently higher in almost all marriage cohorts than the average number to the Christians women. It is only among older marriage cohorts (those who married before 1962) that the average seems to be almost the same for both Muslim and Christians women. This indicates that the Christians and Muslims are likely to have almost the same number of children ever born at the end of their reproductive years. However, whatever the difference we might have observed between the Christian and Muslim reproductive performance, fertility is still very high for the two religious groups.

The effect of socio-economic factors on reproductive behaviour of the respondents is not yet clear and definite as mentioned in chapter one. Yoruba women like any other Nigerian women are still traditionalists.

Table 8.24

Average Number of Children ever born per Woman by Age
and Religious Affiliation of the Women

Age	R E L I G I O N					
	Christians		Muslims		All Groups	
	N	AV	N	AV	N	AV
15 - 19	18)		17)		35	0.17
20 - 24	69)	1.73	92)	2.35	161	1.01
25 - 29	98)		162)		260	3.02
30 - 34	82	3.87	157	4.20	239	4.09
35 - 39	65	5.69	163	5.42	228	5.33
40 - 44	47	5.34	138	5.76	185	5.66
45 - 49	27	6.04	98	6.41	125	6.33
50+	45	5.89	105	6.72	150	6.49
Total	451	3.71	932	4.59	1383	4.30
STD AV		4.07		4.47		

Table 8.25

Average Number of Children ever born alive per Woman
by Date of Marriage and by Religion

Date of Marriage	R E L I G I O N					
	Christians		Muslims		All Groups	
	N	AV	N	AV	N	AV
Before 1952	11)		49)		60	6.33
1952-56	14)	6.08	38)	6.05	52	6.19
1957-61	41)		102)		143	5.85
1962-66	54	5.31	166	5.57	220	5.51
1967-71	65	4.72	127	5.31	192	5.21
1972-76	82	3.90	164	4.37	246	4.23
1977-81	111	2.51	146	3.59	257	3.34
1982-86	73	1.51	140	1.77	213	1.63
Total	451	3.78	932	4.56	1383	
STD AV.		3.88		4.34		4.30

Therefore our search for an explanation for the persistently high fertility is pursued further in the examination of those aspects of our culture that are related to reproductive behaviour.

8.8. ASPECTS OF YORUBA CULTURE RELATED TO CHILD-BEARING

As reported in chapter six, the Yoruba regarded children as 'fruits' (Eso) of a woman so that a childless woman is likened to a tree without fruit. This is because, among the Yoruba, a wide range of activities involve interdependence with kinsmen. It is some of these activities in relation to reproductive behaviour of the Yoruba that we intend to examine in this section.

As mentioned in chapter six, a combination of male dominance and the consequent lack of communication between husband and wife especially on issues related to family size makes the adoption of family planning and hence the limitation of family size difficult. Traditionally, husbands are heads of their families; they make important decisions, especially those that are related to child-bearing all alone and involvement of the wives in this regard is limited. Therefore communications between husband and wife as to how many children should be born is very limited among Yoruba couples, although it is not peculiar to only the Yoruba (Hill, Stycos and Back 1959).

However, as we mentioned in Chapter six, only a few of the women interviewed indicated that they have ever

discussed how many children they should have. Table 8.32 shows the average number of children ever born classified by whether or not the husband and wife have ever discussed how many children they should have. The average number of children ever born is consistently higher for couples who have never discussed the issue of how many children they should have than for couples who have discussed how many children they would like to have. The difference in average for women who are 40 years and above and have not discussed the issue of how many children they should have is about 9 percent higher than their counterparts who have discussed the issue. In terms of the impact of decision-making on actual behaviour, there is a pattern among the women which suggests that joint decision making is associated with smaller average number of children ever born as average number of children ever born to couples who jointly make decisions as to how many children should be born is lower consistently from age 15 to age 50 than any other category of women (Table 8.27). The average number of children ever born to women who indicated that no one makes decision as to how many children should be born closely follows the average obtained in a situation where husbands make the decision. The average is lowest for women who indicated that both make the decision as to how many children should be born themselves.

A comparison of Tables 8.28 and 8.30 indicates that the average number of children ever born by women who preferred small families to large ones is as large if not

larger than the average number of children ever born by women who indicated their preference for large families. This finding is surprising as one would expect the women who preferred small families to show this in their actual reproductive behaviour. The explanation for this may be probably related to what our respondents thought 'large family' was, since it was intentionally not defined for them.

Average number of children ever born alive per woman for women who preferred large families by reasons for preferring large families is shown in Table 8.28. It will be recalled that in chapter six, we distributed a number of reasons given by the respondents for preferring large family and we reported then that a number of motives other than economic motives for preferring large families were mentioned. It is the respondents who mentioned these reasons and by their ages that we distributed in 8.28. The Table indicates that women who gave the response 'To honour me at death' have the highest average number of children ever born from age 15 to age 44. However, women who gave 'To inherit my property', as a reason for preferring large family have the highest number of number of children ever born in age group 45 and above. We have discussed this issue extensively in chapter six.

Another reason mentioned for preferring large family is "to use them on the farm". As we mentioned in chapter six, most of the traditional reasons for wanting many children discussed extensively by previous scholars do not

feature prominently as expected in this study, an example is the reason we have just mentioned. Less than 10 percent of the women who preferred large families gave the response 'to use them on the farm', as a reason for preferring large families. The average number of children born to the women who mentioned this reason for preferring large families is also lower than the average number of children born alive to women who mentioned the two reasons we discussed earlier.

It seems therefore, that children are not brought into the world (as implied in many writings on this subject) mainly to contribute to the household workforce on the farm or for the purpose of contribution to the household economy. Parents who even live in rural areas and are farmers often seek assistance from other sources whenever they want to clear their farmlands or do any other work on their farms rather than depend on their children who start attending school from the age of six and who usually move out of the village immediately they complete their primary education. Olusanya (1976) recognised this fact when he wrote;

"Whenever assistance is required for preparing the land for planting, is obtained from various sources such as mutual assistance by villagers (aaro) various forms of land tenure rights given to stranger farmer especially share-cropping".

Prothero (1957) also mentioned hired labour as a source of labour among the Yoruba. These sources of labour to farmers seem to have reduced the role of children as farm hands. So the contributions of children to the household workforce

is no longer significant. A significant proportion (about 74 percent) of women who gave this reason for preferring large families are above the age of 35 years.

Another important reason mentioned by the women for preferring large families emanated from the idea that a woman's most important family function is child bearing and failure to perform this function is regarded by the extended family member as a failure on the part of the woman and consequently, the members of the extended family would advise the husband to try another woman. This is not peculiar to the Yoruba, it is an idea that is prevalent in most African societies (Raccliffe Brown, 1958; Evans-Prichard, 1951).

As evidenced in Table 8.28, dependence on children at old age seems to have relatively little consideration for preferring large families as less than 8 percent of the women mentioned this reason for preferring large families. The average number of children ever born, to women who mentioned 'for old age security' is less than 4 per woman. This is not to say however, that the old age security function of the children is no more existing among the Yoruba. Parents do ask for what is customarily their due in terms of assistance and support especially during important functions like Ileya festival or Christmas celebration. Besides these occasional gifts, children hardly give substantial support to their parents to cover a significant proportion of the cost of bringing them up.

Other reason mentioned for preferring large family by women in Iwo local government which are not in any way

related to economic consideration is 'Children are good in themselves'. Children bring social prestige to their parents. Olusanya (1987) wrote: "...education especially at the tertiary level brings the family social prestige; they also include (especially among illiterates) the sheer joy of being seen by others as capable of maintaining a large number of persons. The investment and its end-result, in short, are a status symbol and the possibility of returns is secondary and a remote consideration". Therefore Yoruba parents are also proud to be associated with many children and also it is a social prestige for them to be seen feeding and training many children. Even the urban parents, as we have shown earlier in this chapter, who have serious accommodation problem still preferred and actual have many children not necessarily because of what the children will do for them in future but because of the joy of being parents of many children.

Child-mortality which used to be very high in the past is another consideration for women in Iwo local government to prefer and actually have large families. In the present study about 12 percent of women who preferred large families attributed their preference to this high child mortality. The average children ever born for women who gave this reason for preferring large families is about 3.78 per woman. To the Yoruba, it is not enough to give birth to children but it is very important that these children live to give their parents a befitting burial and to continue the lineage of their parents. One very important custom of the Yoruba is for the children of a dead man to first put

dust in his (the dead man's) grave before any other person and it is a shame if some other persons have to do it first.

Yoruba also associated childbearing to work of God which nobody should tamper with. This belief is reflected in the attitudes of some women (especially Muslim women) toward family planning devices. They believe that God who gives them children will take care of the children, therefore deliberate limitation of the number of children a woman should have is against the wish of God more so that God has given every woman a pre-determined number of children and she should not stop such children from coming to the world. This religious belief unlike child-mortality factor or extended family obligation factor, is very difficult to change.

When education is used as a control variable as in Table 8.29, the pattern remains almost the same. The illiterate women and women with primary education only have the highest number of children everborn in all reasons mentioned by the women for preferring large families. Women with post secondary education have the lowest average number of children ever born by reasons mentioned by the women for preferring large families.

We mentioned earlier, that women who preferred small families to large families unexpectedly have the same if not higher average number of children ever born alive per woman. Table 8.30 also confirms this observation. Women who preferred small families because they considered small population better than large population for the country

have the highest average number of children ever born per woman (about 4.6 children per woman). Although the number of women in this category is relatively small, the observation confirms what we mentioned earlier that our respondents who were not given any definition of large or small families just used their own judgement of what they regarded as small or large family to answer our questions.

Women who considered children to be very expensive nowadays to bring up still have well over 4 children per woman, an average considered high by international comparisons. Although these women realised that the costs of bringing up the children to adulthood are very high and returns are very inadequate, yet they still gave birth to many children.

About 34 percent of women who preferred small families gave "so that mother can go out and work", as reason for preferring small families. Except in a limited number of cases, the average number of children ever born for this group of women is higher than the average number of children ever born to the other groups. The women, even realizing that too many children can affect the mother's work, still go on to have well over six children on the average. This trend also confirms our earlier observation that working outside the home environment cannot significantly reduce their level of fertility.

The pattern remains virtually the same when education is controlled for as in Table 8.31. The illiterate women and women with primary education only still have the highest

Table 8.26

Average Number of Children ever born by Whether or not the husband and wife have ever discussed how Many Children They Should have by age

Age	R E S P O N S E S					
	YES		NO		ALL GROUPS	
	N	AV	N	AV	N	AV
15 - 19	7	0.14	33	0.15	35	0.17
20 - 24	39	0.95	122	1.03	161	1.01
25 - 29	75	2.80	187	3.12	262	3.03
30 - 34	91	3.67	151	4.33	242	4.09
35 - 39	81	4.90	153	5.56	233	5.33
40 - 44	56)		132)		188	5.67
45 - 49	28)	5.69	98)	6.24	126	6.32
50+	19)		144)		163	6.48
Total	395	3.97	1015	4.48	1410	4.33
STD AV.		4.00		4.47		

Table 8.27

Average Number of Children ever born alive per Woman by "Who decides how many children should be born" and by Age of Women

Age	Husband		Wife		Both		No One		All Groups	
	N	AV	N	AV	N	AV	N	AV	N	AV
15 - 19	14	0.14	3	-	5	-	13	0.15	35	0.17
20 - 24	40	1.68	10	1.10	61	1.01	50	1.10	161	1.01
25 - 29	31	3.39	11	2.55	67	2.67	153	3.14	262	3.03
30 - 34	41	4.63	8	3.50	67	3.99	126	4.00	242	4.09
35 - 39	47	5.49	5	4.80	72	5.28	109	5.32	233	5.33
40 - 44	38)		-)		47)		103)		188	5.67
45 - 49	34)	6.46	-)	-	56)	5.82	34)	6.08	124	6.33
50+	55)		-)		63)		41)		159	6.40
Total	300	4.77	37	2.49	438	4.23	629	4.29	1404	4.33
STD AV		4.70		2.00		4.11		4.33		

Table 8.28

Average Number of Children ever born for 'Women who preferred large families' by Reasons for preferring large families and by age

Reasons	Age of Women									
	15-24		25-34		35-44		45+		All Groups	
	N	AV	N	AV	N	AV	N	AV	N	AV
Old age Security	11	0.82	19	2.95	17	4.41	23	5.56	70	3.83
Inherit my property	45	1.58	110	4.09	74	5.80	52	6.37	281	4.56
Honour me at death	30	1.70	30	4.30	56	6.07	24	6.33	140	4.80
Use on the farm	7	0.71	18	3.00	40	5.00	30	5.73	95	4.54
Child mortality	20	0.80	40	4.24	18	5.22	27	5.85	105	3.78
Other responses	32	1.06	90	3.03	52	4.98	16	5.63	190	3.45
Total	145	1.28	307	3.55	257	5.44	172	5.99	881	4.21

Table 8.29

Average Number of Children ever born for Women 'Who preferred large families' by reasons for preferring large families and by education

Reasons	Education of Women									
	None		Primary		Secondary		Post Sec.		All Groups	
	N	AV	N	AV	N	AV	N	AV	N	AV
Old Age Security	26	4.04	20	4.30	15	3.53	9	3.00	70	3.83
Inherit my property	61	5.00	64	4.64	64	4.53	92	4.01	281	4.56
Honour me at death	28	4.93	25	4.92	34	4.62	53	4.02	140	4.80
Use on the farm	34	5.03	20	5.10	32	3.91	9	3.33	95	4.59
Child mortality	29	3.96	34	3.97	24	3.58	18	3.56	105	3.78
Other responses	27	3.78	38	3.84	45	3.78	80	3.21	190	3.49
Total	205	4.53	201	4.38	214	4.20	261	3.83	881	4.21

Table 8.30

Average Number of Children ever born alive per Woman for Women who preferred small families by Reasons for preferring small Families and by Age

Reasons for preferring small families	Age of Women									
	15-24		25-34		35-44		45+		All Ages	
	N	AV	N	AV	N	AV	N	AV	N	AV
Children are expensive	36	1.67	63	3.49	61	5.41	46	6.07	206	4.32
Better care to children	14	1.21	21	3.48	22	5.32	12	7.00	71	4.10
Mother can go to work	34	1.12	66	3.91	43	5.86	28	6.57	171	4.28
Children are liabilities	10	1.00	13	3.31	12	5.67	4	6.50	39	3.77
Small population is good for the country	3	2.67	7	3.71	6	5.83	2	6.50	18	4.56
Total	97	1.37	170	3.65	144	5.57	94	6.23	505	4.24

Table 8.31

Average Number of Children ever born alive per woman for women who preferred small families by Reasons for preferring small families and by Education of Women

Reasons for preferring small families	Education of Women									
	None		Primary		Secondary		Post Sec.		All Groups	
	N	AV	N	AV	N	AV	N	AV	N	AV
Children are expensive	42	4.90	39	4.53	56	4.13	69	4.00	206	4.32
Better care to children	16	4.43	18	4.33	18	3.89	19	3.58	71	4.10
Mother can go to work	42	4.50	37	4.67	27	4.30	65	3.69	171	4.28
Children are liabilities	7	4.42	10	4.70	12	3.58	10	3.40	39	3.77
Small population is good for the country	-	-	4	5.25	8	3.97	6	4.66	18	4.56
Total	107	4.73	108	4.57	121	4.04	169	3.92	505	4.29

number of children ever born per woman while women with post-secondary education have the lowest average number of children ever born, although they (women with post secondary education) still have about 5 children on the average.

8.9. DIFFERENTIAL IN FAMILY BUILDING CHARACTERISTICS

In chapter seven, we discussed the family building characteristics of the women in Iwo local government. Here we want to examine whether there are differences among groups in the population in their family building characteristics.

Tables 8.32 (i) and 8.32 (ii) show the mean intervals between successive births in years for urban and rural areas of the local government. Generally, the mean intervals between successive births are larger for rural than for urban women. While the mean interval between marriage and first birth is about 10 months for urban women aged 15-24 it is about 1.1 years for the rural women in the same age category. The mean interval between marriage and first birth for urban women aged 45-54 is about 1.5 years while it is about 2 years for their rural counterparts. The difference between urban and rural areas of the local government might be explained by differences in the two environments as mentioned earlier. The level of infertility of rural women which may be a direct result of such factors as poor health, nutritional deficiency or purely physiological factors is likely to be higher than the level of infertility

of urban women. Secondly, the rural women are likely to be more traditional in their reproductive behaviour than their urban counterparts so that the rate of pre-marital conception will be lower for rural than for urban areas. We reported earlier, higher literacy level for urban than rural areas; premarital conception is also more common among literate group.

Our observation for the whole local government area which we reported in chapter seven that the mean intervals between births increase with each successive birth is also applicable to both rural and urban areas (Tables 8.32 (i) and 8.32 (ii)).

Mean intervals between births is negatively related to education of women in both rural and urban areas of the local government (Tables 8.33 (i) - 8.33 (ii)). However, the mean intervals between successive births are in some cases higher at each educational category in rural than urban areas of the local government. We want to mention here that the data in Table 8.33i - 8.33ii were not distributed by the age of the women. We recognise the fact that such distribution may affect the mean intervals between birth shown in the Tables. However, the original distribution of all the women by education showed that the educated women are already concentrated in younger ages.

The number of live births per woman at given duration of marriage by date of marriage and rural-urban residence is as shown in Table 8.34. The average number of live births in both rural and urban areas increases from the

older marriage cohort to the younger marriage cohort up to the tenth year of marriage. However, the rural averages are generally lower than the urban averages except in a limited number of cases, for example, women who married between 1957-66 in their 15th and 20th years of marriage. The higher averages observed for the urban women at almost all the durations of marriage can be explained partly by their relatively lower mean intervals between births than their rural counterparts. It may also be that factors inhibiting fertility are less common in urban than rural areas of the local government as a result of the concentration of medical facilities in the urban areas.

We also find that the increase in averages for marriage duration in rural areas is not as consistent as increase in averages for urban women in the same duration of marriage. For the rural women, average live births increases up to 1957 - 66 marriage cohort, declines slightly for women in 1967-76 marriage cohort and therefore rises again. The observed trend may be related to the factors inhibiting fertility mentioned earlier that are common in the rural areas. For the urban women on the other hand, the averages for marriage-duration increase consistently from oldest marriage cohort to the youngest.

A comparative analysis of frequency of childbearing by rural-urban residence is as shown in Table 8.35. We find that the frequency of childbearing, especially for the first 5 years of marriage is higher for urban than for rural women of the local government.

Table 8.36 indicates that average live births of the illiterate women in marriage duration 1 does not show any consistent relationship with date of marriage, although the youngest marriage cohort has the highest average live birth reflecting the reduced interval between marriage and first birth even among the illiterate women. It also probably reflects the reduction of factors inhibiting conception at marriage mentioned earlier.

We also find that the average live births for illiterate women at marriage duration 1 is the lowest of all educational categories in almost all marriage cohorts except women with post-secondary education who married before 1957. The women with post-secondary education who married before 1957 are so few and should have been reflected in the very low average observed for them. The lower average live births observed for the illiterate women reflects probable lower incidence of pre-marital conception among them compared with other educational categories.

The average number of live births also increases from the oldest marriage cohort to the youngest marriage cohort except for marriage duration 5 for both primary and secondary educational categories which probably reflects errors due to recall lapse.

A comparative analysis of frequency of childbearing by education is made in Table 8.37. Our earlier observation that childbearing is concentrated within the first 15 years of marriage remains virtually unchanged even when we have controlled for education. However, we found that illiterate

Table 8.32(i)

Mean Intervals between successive births (in years)

URBAN							
PARITY I							
Age of Women	N	Marriage and 1st birth	1st and 2nd births	2nd and 3rd births	3rd and 4th births	4th and 5th births	All births
15 - 24	29	0.83					0.83
25 - 34	40	0.90					0.90
35 - 44	21	2.36					2.36
45 - 54	9	2.40					2.40
PARITY 2							
15 - 24	21	0.77	1.86				1.32
25 - 34	38	0.93	2.43				1.67
35 - 44	21	1.32	2.73				2.03
45 - 54	19	1.10	3.00				2.06
PARITY 3							
15 - 24	7	0.86	1.71	2.07			1.55
25 - 34	66	1.05	2.26	2.41			1.91
35 - 44	24	1.08	3.13	3.23			2.48
45 - 54	10	1.44	3.39	3.56			2.80
PARITY 4							
15 - 24	14	0.90	2.30	2.60	2.70		2.13
25 - 34	86	0.92	2.22	2.53	2.93		2.15
35 - 44	62	1.30	2.56	2.90	3.26		2.51
45 - 54	33	1.36	2.88	1.21	3.61		2.77
PARITY 5							
15 - 24	-	-	-	-	-	-	-
25 - 34	44	1.0	1.79	2.26	2.47	2.56	2.02
35 - 44	96	1.36	2.37	2.56	2.73	2.98	2.40
45 - 54	41	1.79	2.63	3.06	3.17	3.46	2.82

Table 8.32(ii)

Mean Intervals between successive births (in years)

<u>RURAL</u>							
<u>PARITY I</u>							
Age of Women	N.	Marriage and 1st. birth	1st and 2nd births	2nd and 3rd births	3rd and 4th births	4th and 5th births	All births
15 - 24	24	1.19					1.19
25 - 34	11	1.36					1.36
35 - 44	2	1.75					1.75
45 - 54	-	-					-
<u>PARITY 2</u>							
15 - 24	14	1.14	2.43				1.79
25 - 34	24	1.44	2.63				2.04
35 - 44	5	2.40	3.10				2.75
45 - 54	1	2.50	3.50				3.00
<u>PARITY 3</u>							
15 - 24	3	1.17	2.50	2.67			2.11
25 - 34	34	1.35	2.87	3.05			2.42
35 - 44	11	1.82	3.27	3.32			2.80
45 - 54	3	2.00	4.67	3.67			3.45
<u>PARITY 4</u>							
15 - 24	3	1.00	1.67	2.67	3.00		2.09
25 - 34	56	1.32	2.54	2.51	2.93		2.33
35 - 44	23	1.52	3.24	3.44	3.74		2.99
45 - 54	7	1.50	4.14	3.86	3.79		3.32
<u>PARITY 5</u>							
15 - 24	-	-	-	-	-	-	-
25 - 34	28	1.07	2.30	2.61	2.70	2.54	2.25
35 - 44	40	1.58	2.56	2.88	3.06	3.24	2.66
45 - 54	16	1.65	2.96	3.22	2.44	2.38	2.93

Table 8.33(i)

Mean Intervals between successive births in years
by Education of Women

URBAN.

PARITY 1

EDUCATION	N	Marriage and 1st birth	1st and 2nd births	2nd and 3rd births	3rd and 4th births	4th and 5th births	All births
None	10	1.80					1.80
Primary	14	1.29					1.29
Secondary	20	1.11					1.11
Post Sec.	45	0.72					0.72

PARITY 2

None	10	1.30	3.35				2.33
Primary	24	1.10	2.79				1.95
Secondary	25	1.00	2.32				1.64
Post Sec.	40	0.75	1.84				1.29

PARITY 3

None	15	1.73	3.40	3.47			2.87
Primary	43	1.29	2.97	2.86			2.36
Secondary	31	1.00	2.48	2.77			2.08
Post Sec.	13	0.72	1.86	2.17			1.58

PARITY 4

None	20	1.70	3.03	3.25	3.43		2.86
Primary	27	1.33	2.70	2.96	3.20		2.55
Secondary	42	1.05	2.37	2.72	3.13		2.32
Post Sec.	106	0.78	2.07	2.49	3.00		2.09

PARITY 5

None	26	1.92	2.88	3.12	2.98	3.12	2.81
Primary	18	1.56	2.56	2.89	2.94	3.19	2.63
Secondary	38	1.39	2.30	2.61	2.75	2.95	2.40
Post Sec.	99	1.08	1.97	2.27	2.65	2.88	2.17

Table 8.33(ii)

Mean Intervals between successive births (in years)
by Education of Women

RURAL

PARITY 1

EDUCATION	N	Marriage and 1st birth	1st and 2nd births	2nd and 3rd births	3rd and 4th births	4th and 5th births	All births
None	8	1.63					1.63
Primary	8	1.25					1.25
Secondary	11	1.14					1.14
Post Sec.	8	0.88					0.88

PARITY 2

None	8	1.88	4.13				3.01
Primary	13	1.54	3.81				2.63
Secondary	17	1.29	3.03				2.16
Post Sec.	8	1.14	2.57				1.86

PARITY 3

None	10	1.80	3.75	3.54			3.03
Primary	22	1.48	2.93	3.14			2.51
Secondary	22	1.36	2.82	2.93			2.37
Post Sec.	3	1.17	2.17	2.50			1.95

PARITY 4

None	16	1.75	3.41	3.25	3.41		2.96
Primary	16	1.47	3.09	2.94	3.38		2.72
Secondary	33	1.23	2.64	2.70	3.16		2.43
Post Sec.	19	0.79	1.24	2.37	2.86		1.82

PARITY 5

None	22	1.73	2.91	3.09	3.32	3.07	2.82
Primary	10	1.45	2.70	3.00	3.15	3.50	2.76
Secondary	31	1.35	2.37	2.77	2.87	2.94	2.46
Post Sec.	17	0.94	1.94	2.41	2.65	2.82	2.15

Table 8.34

Average Number of live births per woman at given duration of marriage by date of marriage and by rural-urban residence

Date of Marriage	Duration of Marriage (in years)								
	N	1	2	5	10	15	20	25	30
<u>URBAN</u>									
Before '57	66	.71	.97	2.14	4.02	5.00	5.55	5.70	5.70
1957-66	239	.72	1.09	2.71	3.67	4.80	4.96	-	-
1967-76	297	.75	1.26	2.85	4.17	-	-	-	-
1977-85	304	.84	-	-	-	-	-	-	-
1986	31	-	-	-	-	-	-	-	-
<u>RURAL</u>									
Before '57	54	.61	.83	1.70	3.50	4.69	5.26	5.43	5.44
1957-66	132	.65	.92	2.11	3.63	4.38	5.45	-	-
1967-76	141	.62	1.02	2.41	3.96	-	-	-	-
1977-85	107	.88	-	-	-	-	-	-	-
1986	11	-	-	-	-	-	-	-	-
<u>LOCAL GOVT</u>									
Before '57	120	.67	.91	1.94	3.78	4.36	5.42	5.58	5.58
1957-66	371	.69	1.03	2.49	3.65	4.89	5.13	-	-
1967-76	444	.70	1.18	2.70	4.10	-	-	-	-
1977-85	411	.85	-	-	-	-	-	-	-
1986	42	-	-	-	-	-	-	-	-

Table 8.35

Comparative Analysis of Frequency of Childbearing for rural-urban and the local government (Figures put in percentages with duration 1 equal = 100).

Date of Marriage	Duration of Marriage (in years)								
	N	1	2	5	10	15	20	25	30
<u>URBAN</u>									
Before '57	66	100	137	301	566	704	782	803	803
1957-66	239	100	151	376	510	667	689	-	-
1967-76	297	100	168	380	556	-	-	-	-
1977-85	304	100	-	-	-	-	-	-	-
1986	31	-	-	-	-	-	-	-	-
<u>RURAL</u>									
Before '57	54	100	136	279	574	769	862	890	892
1957-66	132	100	148	340	585	787	871	-	-
1967-76	147	100	157	371	609	-	-	-	-
1977-85	107	100	-	-	-	-	-	-	-
1986	11	-	-	-	-	-	-	-	-
<u>LOCAL GOVT.</u>									
Before '57	120	100	136	290	564	725	809	833	833
1957-66	371	100	151	366	537	710	754	-	-
1967-76	444	100	164	375	569	-	-	-	-
1977-85	411	100	-	-	-	-	-	-	-
1986	42	-	-	-	-	-	-	-	-

TABLE 8.36

Average Number of live births per woman at given duration of marriage

URBAN

Date of Marriage	E D U C A T I O N O F W O M E N										A N D									
	No Education										Primary									
	N	1	2	5	10	15	20	25	30	N	1	2	5	10	15	20	25	30		
Before 1957	33	.76	.91	1.97	3.94	4.85	5.39	6.64	6.70	23	.83	1.04	2.13	4.52	5.65	5.71	6.17	6.35		
1957-66	63	.62	.94	2.6	4.03	4.87	5.41			59	1.00	1.12	2.98	4.62	5.59	5.96				
1967-76	56	.72	1.2	2.64	4.32					59	.96	1.49	2.63	4.71						
1977-85	17	.81																		
1986	4																			

RURAL

Before 1957	44	.66	1.82	1.68	3.45	4.45	5.11	5.43	5.61	10	0.80	1.00	1.80	3.60	4.70	5.60	5.6	5.7		
1957-66	52	.54	.85	1.94	3.56	4.56	5.12			43	.74	.95	2.16	3.88	5.16	5.86				
1967-76	35	.66	.94	2.09	3.71					46	.76	1.09	2.37	3.98						
1977-85	8	.88								13	.85									
1986										1										

LOCAL GOVT.

Before 1957	77	.70	.86	1.81	3.66	4.62	5.23	5.95	6.18	33	.83	1.03	2.03	4.24	5.36	5.72	5.92	6.00		
1957-66	115	.58	.90	2.30	3.82	4.73	5.27	-	-	102	.89	1.05	2.96	4.32	5.38	5.86				
1967-76	91	.68	1.10	2.43	4.09	-	-	-	-	105	.82	1.20	2.51	4.39	-	-				
1977-85	25	.83	-	-	-	-	-	-	-	64	.92	-	-	-	-	-				
1986	4	-	-	-	-	-	-	-	-	7	-	-	-	-	-	-				

and by Education

MARRIAGE									DURATION								
Secondary									Post Secondary								
N	1	2	5	10	15	20	25	30	N	1	2	5	10	15	20	25	30
7	.86	1.14	2.00	4.42	5.14	6.43	6.57	6.57	3	.67	1.33	2.33	4.33	5.33	6.33	7.33	7.33
59	.95	1.19	2.61	4.14	5.17	6.51			58	.81	1.28	2.50	3.93	5.36	6.38		
69	.92	1.23	2.72	4.52					116	.90	1.13	2.61	4.46				
50	.92								189	.93							
7									14								
31	.66	.97	2.16	3.65	4.52	5.29	-	-	2	1.00	1.50	2.50	4.00	5.00	6.00	-	-
47	.84	.96	2.26	3.88	-	-	-	-	26	.88	1.42	2.58	4.19	-	-	-	-
66	.85	-	-	-	-	-	-	-	31	.94	-	-	-	-	-	-	-
6	-	-	-	-	-	-	-	-	4	-	-	-	-	-	-	-	-
7	.86	1.14	2.00	4.43	5.17	6.43	6.57	6.57	3	.67	1.33	2.33	4.33	5.33	6.33	7.33	7.33
90	.86	1.11	2.46	3.92	4.94	6.09	-	-	60	.82	1.26	2.50	3.93	5.35	6.38	-	-
113	.88	1.15	2.60	4.37	-	-	-	-	142	.89	1.13	2.61	4.41				
124	.88	-	-	-	-	-	-	-	220	.93							
13									18								

Table 8.27

Comparative Analysis of Frequency of Childbearing

URBAN

Date of Marriage	E D U C A T I O N										A N D							
	No Education										Primary							
	N	1	2	5	10	15	20	25	30	N	1	2	5	10	15	20	25	
Before 1957	33	100	120	259	518	638	709	869	879	23	100	125	257	546	681	712	743	
1957-66	63	100	152	419	650	785	873	-	-	59	100	112	298	464	554	586		
1967-76	56	100	171	377	617	-	-	-	-	59	100	173	306	548				
1977-85	17	100	-	-	-	-	-	-	-	51	100							
1986	4									6								

RURAL

Before 1957	44	100	124	255	523	674	744	823	850	10	100	125	225	450	588	700	700	
1957-66	52	100	157	357	659	844	948	-	-	43	100	128	292	524	697	792	-	
1967-76	35	100	142	317	562	-	-	-	-	46	100	143	312	534	-	-	-	
1977-85	8	100	-	-	-	-	-	-	-	13	100	-	-	-	-	-	-	
1986										1								

LOCAL GOVT.

Before 1957	77	100	123	259	523	660	747	850	883	33	100	126	248	517	654	710	710	
1957-66	115	100	155	397	659	816	909	-	-	102	100	118	333	485	604	650	-	
1967-76	91	100	162	357	601	-	-	-	-	105	100	146	306	535	-	-	-	
1977-85	25	100	-	-	-	-	-	-	-	64	100	-	-	-	-	-	-	
1986	-	-	-	-	-	-	-	-	-	7	-	-	-	-	-	-	-	

women spread childbearing wider over marriage durations than their literate counterparts. For instance, Table 8.37 shows the same figure of '764' in marriage durations 25 and 30 for women with secondary education and who married before 1957 whereas the figures for the illiterate women shown an increase of about '33' in marriage duration 30 over the figure recorded for marriage duration 25 for the same marriage cohort. This women with at least secondary education whom we have shown earlier as usually starting childbearing late, also (as indicated in Table 8.37) stop childbearing earlier than any other educational categories. This pattern confirms our earlier observation that most Yoruba women terminate voluntarily childbearing even before they reach the end of their reproductive period.

On the whole, the increasing use of family planning devices by women with secondary and post-secondary education plus their higher age at marriage than other educational categories, have considerably reduced relatively, the effect of declining interval between births observed for them on their completed family size.

8.10. SUMMARY

In this chapter, we have examined many variables in an attempt to explain the high fertility among the Yoruba. The first of such variables we examined is mortality and we found that child mortality in Iwo local government area is relatively high. However, child mortality as we found in

this chapter cannot all alone explain the persistently high fertility among the women.

We also found that the respondents had many children because they wanted them and not because they did not know how to avoid having them. This is because the completed family size for the women who had ever used family planning devices is as high if not higher than the completed family size for the women who had never used any family planning method. Average number of children ever born is consistently higher at almost all age groups for family planning clients than average number of children ever born by the non-clients.

There is evidence as presented in chapter six to accept the fact that effective methods of family planning devices are available in Iwo local government area. Also there is evidence of their being used by a significant proportion of the women. Therefore high fertility among the women cannot be explained by lack of adequate family planning services or by non-use of the available services.

Attempt was also made in this chapter to relate fertility with some socio-economic variables. We found that urban women are as fertile if not more fertile than their rural counterparts. We also found that average number of children ever born first increases with education until the maximum is reached at primary education and therefore starts to decline.

The average number of children ever born by the women is negatively associated with the age at first marriage. The explanation might be that those who married late have

at least some education and we have mentioned earlier that women with some education are less traditional in their childbearing behaviour. They have shorter interval between births so that by the time they should have been in marriage for 10 years, they would have had more children than the illiterate women who married earlier. However, the literate women who married at different ages have almost the same average number of live births,

Another highlight of the fertility analysis in this chapter is the association of paid employment (teachers, nurses, clerks) with higher average number of children ever born. Although the difference between the average number of children born to women in teaching, nursing and associated jobs and other occupational groups shown in this study is not significant, it is slightly higher. Women in agriculture have lower average number of children ever born. However, controlling for duration of marriage, the difference between the teachers, nurses and other occupational groups becomes clearer as teachers, nurses and clerks consistently have higher average live births from 1952-56 marriage cohorts to 1977 - 81 marriage cohorts than any other occupational groups.'

There is also a weak and negative relationship between the number of children ever born and income. In terms of fertility differential by religion, we found that average number of children ever born alive to a woman is slightly higher for Muslim women than for Christian women.

It should be noted however, that the completed family size for both Christians and Muslims are extremely high that religion could not be used wholly to explain the persistently high fertility among the survey population.

It seems that, from the foregoing, the analysis of these socio-economic variables in relation to fertility are not sufficient to explain the high fertility among the women in Iwo local government area.

We found in this chapter that the average number of children ever born alive is consistently higher for couples who have never discussed the issue of how many children they should have than for couples who have. We also found that joint decision making by husband and wife as to how many children should be born is associated with smaller average children ever born.

One rather surprising finding in this chapter is the average number of children ever born by women who preferred small families to large ones which is as high if not higher than the average number of children ever born by women who indicated their preference for large families.

We also found in this chapter some social norms of the Yoruba which prescribe a large number of children. These norms depend on how having a particular number of children affects the performance of important function of the family. Such family functions that required large number of children identified by this study include (1) old age security (2) property inheritance, (3) continuity of the lineage

(4) giving befitting burial to parents and (5) extended family obligations.

Even if mortality is declining as we have shown, an average Yoruba couple who has learned to depend on their children for old age security or for giving them befitting burial at death, or to continue their lineages when they die or to inherit their properties cannot be expected to significantly reduce the number of children they will bring into the world to match the declining mortality.

Besides these functions of children to the family members, there are still some other aspects of Yoruba culture identified in this chapter that still favour high fertility. For instance, some women preferred to have many children because they considered children to be good in themselves. They preferred to have many children not because of any material gain but they said they would be happy by being surrounded by many children.

We also found from the fertility analysis in this chapter, that part of the high fertility among the Iwo local government women can be explained for by the declining importance of custom, particularly that aspect relating to birth spacing. This is evident in the shorter intervals between births observed for younger and literate women. For instance the mean interval between marriage and first birth is about eight months lower for mothers aged 15-34 years than for mothers aged 45-54 years. The mean birth intervals have also been reduced from about 2.8 years for women who married before 1957 to about 1.5 years for the

1977 - 86 marriage cohort. These declining birth intervals are also reflected in the family building characteristics of the women.

CHAPTER NINE

SUMMARY AND CONCLUSION

In this study, the expectation that fertility will be high in Iwo local government area despite the increasing level of literacy, urbanisation, occupational diversification, a rise in standard of living and increasing use of modern contraception is based on the work of previous scholars. Although, as shown by previous studies, there are minor fertility differentials among groups within the Yoruba society (and these are fortuitous and the pattern subject to reversal), the level of fertility so exhibited by each group is very high by international comparisons. The explanations given for the persistently high fertility among the Yoruba by some of these scholars as will be recalled, do not really go to the very roots of the matter. They are in terms of contraception as a substitute for traditional birth spacing without necessarily reducing fertility i.e. spacing without stopping (Helen Ware, 1976). The present study, therefore has attempted to provide a more detailed explanation by looking more closely at those women who may be regarded as initiators of change on the basis of their responses.

9.1. SUMMARY OF MAIN FINDINGS

In order to see whether fertility levels remain high among the Yoruba or changes have been taking place, we studied a small group of the Yorub (Iwo local government area of Oyo State) as a concrete case of the Yoruba group.

The residents of the local government are predominantly Yoruba as less than 10 percent claimed to have been born outside Oyo State. As the study shows, the average household size in Iwo local government area is about 6 persons per household. The level of literacy in Iwo local government is relatively high as about 60 percent of all households are literate households. The most common type of housing unit in the area are face-to-face type of houses and about 25 percent of the houses have no latrine. The residents are predominantly Muslims.

A significant proportion (about 4 out of every five) of the women interviewed are still in the childbearing ages (i.e. ages 15-44). All the women interviewed have at one time or another been married and more than 95 percent are currently married. A little less than 80 percent of the women have at least some education. Majority of the respondents who are in paid employment are either teachers or nurses. A significant proportion of the women are traders.

However, the urban areas are characteristically different from the rural areas of the local government. The study shows that the size of house holds are larger in urban than rural areas. A larger proportion of the urban than the rural dwellers are educated and consequently a larger proportion of urban women than rural women are in salaried employment. Social amenities such as electricity, pipe-borne water, hospitals and banks are lacking in the rural areas. A higher proportion of women in rural areas than urban areas belong to the low income group.

The respondents' attitudes, as revealed by the study, are essentially pro-natalist. The expected number of children is very high (about 6.85 per woman) although it declines with education as women with post-secondary education, have the lowest expected number of children per woman. The expected number of children is also associated with some other socio-economic factors such as occupation, income and structure of household.

The pro-natalist character of women in Iwo local government area is further confirmed by the significant proportion of them who preferred large to small families. The reasons they gave for preferring large families centred significantly around social and psychological factors. The contribution of economic factor in this regard is unexpectedly low as less than 15 percent of the reasons given by the women for preferring large families are essentially economic reasons. Also a woman in Iwo local

government would like at least 60 percent of all her children to be males. A large majority of the women had no idea before marriage of the number of children they would ultimately have.

The major findings with regard to the current status of the women's knowledge of, attitudes towards the practice of family planning can be briefly stated. Nearly 55 percent could name at least a method of family planning. This proportion varied markedly with age of women as the middle-aged group (women between 25 and 35 years) contributed significantly to this proportion. About two-thirds of the women interviewed approved the use of family planning methods in marriage. As in the case of knowledge, attitudes to family planning also varied with age as middle-aged women contributed significantly to the proportion of women who approved family planning. As regards the practice, about two out of every five of the women interviewed indicated that they had ever used family planning methods. However, only about a quarter of the women indicated that they were using family planning methods as of the time of the interview. This proportion is low when compared with the level of knowledge or approval but very high compared to about 7 percent for the country as a whole (National Population Bureau, 1984). One possible explanation for the low proportion currently practising family planning is that respondents simply were not telling the truth and were probably unwilling to admit

that they were practising family planning. Given the current state of knowledge, attitudes and practice of family planning among the women, it is one of the paradoxes of Yoruba reproduction that such women could still desire on average as many as 6.85 children.

As the study shows, KAP items varied with socio-economic variables. For instance, knowledge and practice of contraception are positively associated with education and income of the women while attitude to unlimited procreation is negatively related to them and the differences are very clear. Urban women also have higher proportion with knowledge of family planning than rural women and also showed more favourable attitudes to family planning than their rural counterparts. In fact a much higher proportion of the urban women have ever practised and are currently practising family planning than rural women.

With regard to fertility, the study reveals that the level among the respondents is very high at least by international standards. The average number of children ever born to those who had virtually completed their childbearing at the time of the interview (aged 50 years and above) was found to be about 6.5 children per woman. The total fertility used here as a measure of current fertility of the woman is around 5.7. These findings indicate that past and present fertility are both very high among the women of Iwo local government area. The shorter intervals between births observed

for especially young and more literate women than the older and illiterate women lend support to this observation.

This study also attempted to see whether or not there are significant differences among groups in the population. Although, modern contraception is the most efficient way to reduce fertility, its overall effectiveness in this regard is limited. This is because as revealed by this study, the use of contraceptives is neither limiting both the fertility aspirations of the women nor their actual reproductive performance. Paradoxically average number of children ever born is considerably higher at almost all age groups for family planning clients than for the non-clients. Despite the fact that effective methods of family planning devices are available in Iwo local government area and there is evidence of their being used by a significant proportion of the women, the fertility level even among the users remains very high. Thus as the study reveals, even if 100 percent of the eligible women in Iwo local government area used the most effective contraception, the level of fertility (assuming women will bear the number of children they desire) would still be very high, since the desired number children is, on the average, about seven children per woman.

Currently, contraception is being practised mainly by two groups of women in Iwo local government. The first consists of women who have already had their desired number of children and want no more. The

second group embraces women who want to use it just to space out their children. This is evident in higher proportion of women (about 35 percent) who had used family planning methods but were not using one as of the time of the interview because the babies they were nursing were old and they wanted another pregnancy.

We also attempted to relate fertility to urbanization. As already mentioned attitudes to large families, as revealed by this study, are far more favourable among rural women than among urban women. Such a clear difference is also noted in the number of children desired. While the rural women desired 7.1 children on the average their urban counterparts desired 6.7 children per woman.

In terms of actual fertility, however, the evidence from the average number of children ever born alive does not seem to indicate any important and consistent average number of children ever born to women in the two communities is fairly close. When however, we compared the average number of children born alive by the oldest women (45 years and above) we found that the rural women were slightly more fertile than the urban women. Analysis of current fertility however, shows no significant difference between urban fertility (5.7 per woman) and rural fertility (5.6 per woman). Overall, it seems (as the present study reveals) that the cultural and physiological factors which restricted fertility in rural areas in the past are being levelled

out for the rural and urban sectors consequent high but similar level of fertility of all groups.

The level of education of the women, as revealed by this study, is an important factor affecting not only their fertility performance, but also their marriage patterns. Women with secondary school or higher education marry later and have fewer children. The relationship between fertility and education found in this study is similar to that found in most previous studies conducted among the Yoruba (Olusanya, 1981) and is different from what would be expected on the basis of the classical inverse pattern of differential fertility by educational attainment. The relationship observed here is one of a rise in fertility with education reaching a maximum at the primary level of education. The study reveals that women with primary education have the highest average number of children ever born of all the educational categories while women with post-secondary education have the lowest. However, the fertility of women with post-secondary education although the lowest, is high by international standards. For instance, women who have had post-secondary education and are 45 years old or above have about 5.6 children per woman,

This study also shows that employment status of the women is associated with fertility. Women in paid employment (teachers, nurses, clerks) consistently have higher average children ever born than any other occupational categories except at age group (15-24).

The differences persist when duration of marriage is controlled for. What our data suggest here is also contrary to what would be expected on the basis of the classical pattern of differential fertility by occupation. One would expect that respondents in the highest occupational status group (in Iwo local government area, they are predominantly teachers, nurses and clerks) whom we have shown as having consistently higher proportions with knowledge of, favourable attitudes towards and practice of family planning than the remaining occupational groups, would also have significantly lower average number of children ever born than any other occupational groups. The higher fertility observed for women in high status occupation is probably partly due to the lumping together of women in different educational categories in the high status occupation.

The study also reveals that average number of children ever born decreases as income increases.

Women in modified extended households have been shown to have the highest level of average number of children ever born followed closely by women in nuclear households while women in polygynous households have the lowest average number of children ever born.

Muslims have been shown in this study to be more fertile than Christian. The difference between the two religious groups persist when duration of marriage is controlled for.

Overall, the fertility differentials (where they exist at all) among groups as revealed by this study are very small. They are likely to be due to some intervening factors (e.g. shifts in age at marriage) rather than the traditional variables such as education, occupation, urbanization, income per se and it seems that by the end of reproduction, whatever differences exist virtually disappear (for example either because those who marry late produce children in rapid succession or those who marry early space their births. Unfortunately the younger women are still at various stages of reproduction and we cannot know what level they will attain until they reach the end of the race. Nevertheless, there is ample evidence from the study that their fertility, if completed would have been equally high. The average number of children ever born to those who had virtually completed their childbearing (aged 50 years and above) is not less than 5 per woman in any of the groups observed. This indicates that the Iwo local government women have not reached such a level of development whereby such factors as education, occupation, income etc determine reproductive behaviour. Rather as we have shown fertility in this society is still largely influenced by traditional norms.

There are some other pieces of evidences, as revealed by this study, which lend support to the high fertility norm of the Yoruba. The study reveals that more than 70 percent of the women, whether educated or not, have

never discussed the issue of how many children they should have. The proportion is about 67 percent and 82 percent in urban and rural areas of the local government respectively. The study also reveals that it is only after parity 6 that one finds a substantial proportion of women not wanting more children which also confirms the "large family ideal culture" of the respondents. About 60 percent of women with 8 living children each still desire more children. Regardless of age of women, expected number of children is larger than 6 per woman. The level of education of the women is also irrelevant. Virtually all the women (89 percent) think that a family of 6 and above children is large.

This study also reveals that discussion among couples as regards how many children should be born is related to declining fertility as we found that joint decision-making by husband and wife as to how many children should be born is associated with lower completed family size. Unfortunately majority of our respondents, as mentioned earlier have never had this type of discussion with their husbands. Thus about two thirds of the women interviewed reported that decisions as to how many children should be born are either made by the husband or no one makes such decisions. These findings reflect the carry-over of the idea of male superiority over the females. As long as this type of situation persists among the Yoruba, their fertility level will remain high irrespective of

their socio-economic status.

It is also very relevant to note that only 2.5 percent of the women interviewed reported that they were the ones who made the decision regarding how many children they should have. The women in this category, though very few, approved and in fact practised family planning more often than women whose husbands made the decisions/^{and} for where no decisions as to how many children should be born were made. The women who reported themselves as the decision-makers also reported the lowest average number of children ever born. It is also important to note that the women who reported themselves as the decision-makers are comparatively young and none of them is up to 40 years old. The inference to be drawn here is that a new breed of women is emerging who will be ready to break the traditional dominance of men on many family matters especially those related to childbearing.

One factor which we think may not allow women to decide on the births of fewer children than the husbands even if they are given a free hand to do so is the likelihood of the husbands marrying another woman which we mentioned earlier. This makes the problem of male dominance in childbearing and related issues very difficult to break by the woman. It suggests that family planning programmes in this country, a significant proportion of which are female-oriented will probably not affect fertility of the Yoruba women negatively for

many years to come.

The study reveals that about 10 percent of the women interviewed preferred large families because they considered children to be good in themselves and not necessarily for what the children could do for them in future. They derive joy from being seen by others as capable of financing many children.

The study also reveals that another 16.3 percent of our respondents preferred large family for the continuity of the lineage. One of the most important of the characteristics of the kinship unit or a lineage is its perpetuity. Membership of a lineage is replenished through births. A way to ensure this is therefore for couples to have many children in expectation that some of them will live to continue the lineage.

"Giving befitting burial at death" is also emphasized by women studied as about 13.5 percent of them mentioned this reason for preferring large families. Among the Yoruba, children are expected to be the first set of people to put dust on the body of their parents at death and it is shameful if any other person does it. Therefore couples would want to have many children so that some will at least live to bury them and to spend extravagantly at their burials. This is evident in a common saying among the Yoruba mentioned by Olusanya (1981): "He who is buried by his children is one who has actually given birth to children"

Other social and religious reasons mentioned by the respondents for preferring large family include: "To inherit my property (14.8 percent). "To abide by the wish of extended family members (6.4 percent), "It is the wish of God that everybody should have plenty children" (6.1 percent).

On the whole about 67 percent of the women interviewed gave these social and psychological reasons for preferring large families. These social and psychological functions of children to parents among the Yoruba are so important that parents do not mind how much they spend to bring their children up. This is evident in the fact that respondents who are 45 years and above and who consider children to be expensive to bring up nowadays or women who considered that children are liabilities nowadays still have well over six children. Thus an average Yoruba woman would do all things possible including selling some of her belongings (if need be) to bring up her children,

There is also emphasis on male children as revealed by this study. The women irrespective of their educational status wanted at least two male children. To them, it is only the male children that can continue with the names of their families. Female children on marriage leave the households of their parents to join the households of their husbands. Worse still, they changed their names to those of their husbands who takes credit for whatever they (the wives) have achieved in life.

Thus women bear more than their desired number of children so as to have at least some male children.

In summary, the data presented in this study showed that it is the socio-cultural norms regarding childbearing that are largely responsible for the persistently high fertility among the respondents. The respondents wanted and actually had many children so that the children could continue their lineages or inherit their properties. They had many children so that they (the children) could give them befitting burial when they die. Therefore if the socio-economic factors examined in this study are to have any effect on the reproductive behaviour of the women, they would have to affect significantly the socio cultural factors prevalent among the people. While it is true as some authors have observed that high fertility remain among the Yoruba because those who practise contraception do so for spacing children in the traditional way rather than for checking excessive childbearing, why they do not check fertility is because their norms still largely support prolific childbearing regardless of their socio-economic status.

9.2. CONCLUSION

Why is fertility reduction desirable among the Yoruba in particular and among Nigerians in general? As we have pointed out in chapter one, the Nigerian society today

is faced with many serious problems such as housing, unemployment, food shortage, inadequate transportation and a host of others which need to be solved very urgently. The population pressure in different parts of the country increases yearly and frustrates efforts at solving these problems. In this study, the point has been made that the principal factor in population growth in Nigeria is the persistently high fertility level. Mortality is much easier to control and has in fact been substantially reduced in Nigeria. It is the wide divergence between births and deaths that accounts for the high population growth rate. It is this high rate of population growth that is jeopardizing efforts being made to accelerate economic development. It is therefore not surprising that more emphasis is laid on the reduction of fertility in Nigeria,

The draft national population policy and the programmes for the control of fertility revolve around the provision of family planning information supplies and services. However, as evidenced by this study, the availability of contraceptive materials and their use need not lead to an overall lowering of the fertility level. It is therefore necessary to adopt an approach aimed at limiting rather than merely spacing childbearing.

Population issues and attitudes concerns subtle aspects of human behaviour and are strongly affected, as we have shown in this study by social, psychological and cultural factors. Changing such behaviours and

attitudes calls for vigorous and persistent attacks on them rather than on the socio-economic attitudes of the population.

Mass-education that will be able to re-orientate couples on the beliefs surrounding procreation should be adopted within the shortest possible time. There is need to educate both males and females that with the increasing education, industrialization and urbanization which encourage both internal and international migration, the idea of child (especially male child) being the perpetuator of the family name has drastically changed.

One of the factors helping to sustain high fertility, as this study reveals, is lack of communication between husband and wife as regards the number of children they should have. Therefore encouraging discussion among couples might lead to family limitation since the women then become aware of their husbands' attitudes.

Finally, if fertility norm is pro-natalist as we have found among the respondents, any suggestion about a new fertility norm can only be accepted when the people have been sufficiently convinced that the new norm that they are being invited to adopt is better and more rewarding than one they are used to. Such a change in orientations is necessarily often gradual. It will come about through programmes that bring recognizable changes in the usual circumstances of the people. The extent of changes in these circumstances will clearly determine future trend in fertility levels of the Yoruba. For these circumstances are the real barriers to fertility decline among the Yoruba and their removal will definitely hasten their fertility decline.

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APPENDIX I

Iwo Local Government Residents By Single Year of Age, 1986

AGE	IWO		BODE		FAGBAYIBI		LOCAL GOVT.	
	M	F	M	F	M	F	M	F
Less 1	63	60	11	<u>10</u>	7	9	<u>81</u>	79
1	111	101	29	36	20	18	<u>160</u>	155
2	105	104	38	27	26	22	<u>169</u>	<u>153</u>
3	102	102	42	33	23	21	167	146
4	102	95	31	37	21	19	154	<u>151</u>
<u>5</u>	109	103	49	35	29	22	187	<u>160</u>
6	100	91	24	27	21	17	<u>145</u>	<u>135</u>
7	96	<u>88</u>	27	<u>25</u>	13	13	136	<u>136</u>
8	95	86	33	26	11	14	139	126
9	75	70	11	21	12	11	98	102
10	100	101	43	33	14	18	157	152
11	<u>82</u>	<u>73</u>	24	<u>20</u>	14	15	120	113
12	66	64	22	26	12	11	100	101
13	<u>77</u>	75	17	15	9	7	103	97
14	<u>86</u>	82	18	19	10	12	114	112
<u>15</u>	<u>106</u>	<u>103</u>	32	<u>23</u>	5	13	143	139
16	66	<u>61</u>	18	16	6	10	90	87
17	72	<u>64</u>	14	20	5	7	91	91
18	75	<u>63</u>	18	13	4	13	<u>27</u>	<u>89</u>
19	40	<u>37</u>	17	17	12	7	69	61
20	56	46	23	24	<u>13</u>	11	92	81
21	50	<u>48</u>	5	12	2	<u>5</u>	57	<u>65</u>
22	45	<u>46</u>	7	<u>11</u>	3	6	55	63
23	40	22	8	6	11	7	<u>50</u>	35
24	37	33	8	10	8	4	53	47
25	64	58	24	22	2	5	90	85
26	31	<u>23</u>	3	4	1	8	36	35
27	50	36	12	10	2	3	64	49
28	46	38	3	9	1	4	50	51
29	36	38	2	10	12	<u>3</u>	<u>50</u>	<u>53</u>
30	41	45	15	15	4	<u>3</u>	60	63
31	38	<u>45</u>	2	10	9	6	49	42
32	37	26	3	9	1	7	41	45
33	30	29	6	8	2	4	38	49
34	36	38	11	8	2	4	49	<u>50</u>

AGE	IWO		BOBE		FAGBAYIBI		LOCAL GOVT	
	M	F	M	F	M	F	M	F
35	46	52	14	13	15	3	75	68
36	25	27	16	16	5	7	46	50
37	31	31	5	8	4	<u>8</u>	40	47
38	37	34	<u>7</u>	7	1	<u>6</u>	45	47
39	24	<u>28</u>	6	5	4	6	34	39
40	34	36	24	23	14	<u>14</u>	72	73
41	24	<u>21</u>	23	<u>18</u>	6	6	53	45
42	33	36	10	6	4	3	<u>47</u>	45
43	23	23	10	14	3	5	36	42
44	20	20	10	10	5	4	35	34
<u>45</u>	51	<u>41</u>	12	<u>18</u>	13	12	76	71
46	16	16	8	16	4	7	28	39
47	16	12	<u>3</u>	7	4	3	23	22
48	12	10	6	4	4	3	22	17
49	15	17	3	3	5	3	<u>23</u>	23
50	33	31	8	9	5	1	46	41
51	15	13	<u>7</u>	5	3	4	25	22
52	11	8	6	4	1	3	18	15
53	18	21	1	2	3	2	22	25
54	15	8	1	4	1	2	17	14
55	24	23	10	15	5	3	39	41
56	23	30	2	4	2	4	27	<u>38</u>
57	19	20	2	3	-	3	21	26
58	14	12	1	7	-	-	15	19
<u>59</u>	13	9	-	-	-	1	13	10

AGE	IWO		BODE		FAGBAYIBI		LOCAL GOVT.	
	M	F	M	F	M	F	M	F
<u>60</u>	22	23	6	5	1	4	29	<u>32</u>
<u>61</u>	17	14	-	-	2	2	19	<u>16</u>
<u>62</u>	14	11	3	3	1	2	18	16
<u>63</u>	12	8	-	3	1	1	13	12
<u>64</u>	19	18	-	-	1	-	20	18
65+	35	25	3	3	2	8	41	37
TOTAL	3080	2869	855	883	468	491	4399	4243

APPENDIX II

POPULATION CENSUS OF NIGERIA, DECEMBER, 1963 HISTORICAL
EVENTS FOR IWO DISTRICT COUNCIL CENSUS DISTRICT, IWO WEST

E V E N T S	Date	No. of Years as at Dec. 1963
Ijaye War	1860	103
The British took over control of Lagos	1861	102
Outbreak of Ibadan/Ekiti War	1877	82
Ijebu War (Ogun Imagbon)	1892	<u>71</u>
Benin Expedition	1897	<u>66</u>
Ibadan-Ebute Metta railway completed	1900	63
Bale Aderibigbe of Ile-Ogbo installed	1904	59
Oluwo Lamuye died, Oluwo Sunmonu Oshurwo installed	1906	57
Oluwo Abimbola I installed, Oluwo Sunmonu died	1909	54
First World War began	1914	49
Influenza (Gaga); End of World War I	1918	45
Adubi War	1918	45
Iwo-Oyo Road Opened	1920	43
Dr. and Mrs. E.G. Machean of the Baptist Mission came to Iwo	1922	41
Oluwo Abimbola I died, Oluwo Abanikanda installed; Oluwo Saidu Adubiaran Installed	1930	33
Iwo-Ibadan Road Opened; Economic depression	1931	32
Iwo-Ejigbo Road Opened	1932	31
Baptist College removed from Ogbomoso to Iwo	1938	25
Oluwo Kosiru was Installed; Second World War began	1939	25
Scarcity of Salt; Cocoa burnt; No sale for Palm-Kernels	1941	<u>22</u>
Harragins Salary Review	1947	16
University College, Ibadan founded	1948	15
Enugu Colliery Massacre	1949	14

E V E N T S	Date	No. of Years as at Dec. 1963
Ibadan Conference for Review of Constitution	1950	13
Separation of Iwo from Ibadan; First Regional Election: S. I. Ogunwale Elected	1951	12
First meeting of new Regional Houses	1952	11
Kano Riot	1953	10
First London Conference; Election to the House of Representatives; M. A. Sanni Elected	1954	9
Free Primary Education Introduced; Opening of Electricity in Oshogbo	1955	8
Second Regional Election: Oyaniyan Elected; Queen Elizabeth II of Great Britain Visited Nigeria	1956	7
Lalupon Train Disaster; Self-Government for Western Nigeria; Second London Conference	1957	6
Adelabu Riot	1958	5
New £5, £1, 10s and 5s Currency Notes Introduced	1959	4
Federal Election: E. A. Adeyemo and A. Oderinde Elected	1959	4
Independence of Nigeria	1960	3
Ahmadiyya Grammar School Opened	1962	1
Emergency in Western Nigeria	1962	1

APPENDIX IIIThe Department of SociologyUniversity of LagosLagos - Nigeria

SURVEY OF FACTORS IN THE PERSISTENCE OF HIGH
FERTILITY AMONG THE YORUBA: A CASE STUDY OF TWO LOCAL
GOVERNMENT AREA OF OYO STATE

This questionnaire is designed to enable us know, if you help us to complete it, your feelings about raising children among the Yoruba. It has nothing to do with tax. Every answer given, any opinion expressed will be treated in confidence. You are absolutely free to express your opinion. We hope you will find the questions very interesting. We also hope you will give them a careful thought.

Thanks for your usual co-operation.

'LAYI RAIMI

Name of Respondent: _____

Address: _____

Date of Interview: _____

Name of City/Town/Village: _____

- 1(a) Did any female member(s) of your household give birth to babies during the past twelve months?

1 _____ Yes

2 _____ No

- (b) If Yes, give below information about these babies?

No. of Babies	Name of Mother	Age of Mother	Name of Child	Sex of Child
1st Baby				
2nd Baby				
3rd Baby				
4th Baby				

NOTE: Check ages of mother and child with ages given under household composition.

- 2(a) Did any members of your household die since the past twelve months?

No. of Persons	Name of dead Person	Sex	How old was he/she at death?	Cause(s) of death
1st dead person				
2nd dead person				
3rd dead person				
4th dead person				

- (b) If Yes, give above information about those who have died since the past twelve months:

3. What type of dwelling unit does the household occupy?

- | | |
|------------------------------|---------------------------|
| 1. Single - Family house | 5. Rooms in a house |
| 2. Self contained flat | 6. Boys quarters |
| 3. Face to face flat | 7. Other (Please specify) |
| 4. Whole house in a compound | _____ |

4. What type of latrine or sewage system does the household have?

- | | |
|-----------------|---------------------------|
| 1. Open bucket | 4. No latrine |
| 2. Pit latrine | 5. Other (Please specify) |
| 3. Water System | _____ |

5. Where does the household get drinking water?

- | | |
|---------------|---------------------------|
| 1. Stream | 5. Neighbours tap |
| 2. Well | 6. Private tap |
| 3. Vendor | 7. Other (Please specify) |
| 4. Public tap | _____ |

SECTION. II

Demographic and Socio-Economic Characteristics of the Woman

1. Name of Respondents _____ (Check with household composition)
2. Age of Respondents _____ (Check with household composition)
3. Marital Status _____ (Check with household composition)
- 4(a) If married, widowed, divorced or separated, how old were you when first married ? _____ years.
- (b) Please, give further information on the table provided

No. of Marriage	Age at Marriage	Type of Marriage State ORD or CUS	Date of Marriage (Month & Year)	Date of Marriage Terminated	Reason Married terminated state DV or DSP
1st					
2nd					
3rd					
4th					

ORD = Marriage Registry or Church

CUS = Customary

DV = Divorce

DSP = Death of Spouse or husband

5. Were you born in this Town/Village? 1. Yes
2. No
6. If No, where were you born ?
 1. Other town/village in this local government area
 2. Other local government area in this State
 3. Other State
 4. Outside Nigeria (but Nigerian or non-Nigerian)
 5. Other (Specify) _____
7. Where did you live as a child? 1. Village 2. Town
8. What is your religion? 1. Christians 2. Muslims 3.
3. Traditional 4. Others
9. What is the level of Education completed?

	Wife	Husband
1. None, illiterate (cannot read or write)		
2. 1 - 6 years Primary School		
3. Secondary Modern School some Grammar Schl.		
4. Passed School Certificate/G.C.E. O/L		
5. Passed H.S.C./G.C.E. A/L		
6. Training School (Teacher, Nurse etc.)		
7. N.C.E./University		
8. Other (Please specify) _____		
10. What is the total number of years used in Schools

11. What is your occupation? Wife _____ Husband _____
1. Farming, hunting, harding, butchery _____
 2. Tailor/dress maker, Hair dresser/Barber _____
 3. Trader/Salesman _____
 4. Teacher, Nurse, Midwife, Clerical Staff _____
 5. Religious worker/Social worker _____
 6. Medical doctor/Dentist, Lecturer _____
 7. Director, Accountant, Manager, Admin. _____
 8. Unemployment _____
 9. Other (Specify) _____
12. Will you say your income per annum is between Wife _____ Husband _____
1. ₦0 - ₦1,000.00 _____
 2. ₦1,000 - ₦2,000.00 _____
 3. ₦2,001 - ₦3,000.00 _____
 4. ₦3,001 - ₦4,000.00 _____
 5. ₦4,001 - ₦5,000.00 _____
 6. ₦5,001 - ₦6,000.00 _____
 7. ₦6,001 and above _____

SECTION III

REPRODUCTIVE HISTORY OF RESPONDENT

- 13(a) Have you children of your own living here at home? 1 Yes 2. No
 (b) If Yes, how many? _____ (Number)
- 14(a) Have you children living far from the family? 1. Yes 2. No
 (b) If Yes, how many ? _____ (Number)
- 15(a) Have you had any other children who were born alive to you but who are not living now? 1 Yes 2. No
 (b) If Yes, how many _____ (Number)
16. Some pregnancies and as a miscarriage or a still-birth, (i.e. babies born dead)
- (a) Have you had any pregnancies which resulted in a miscarriage?
 1. Yes 2. No.
- (b) If Yes, how many? _____ (Number)
- (c) Have you had any pregnancies which resulted in a still birth?
 1. Yes 2. No
- (d) If Yes, How many? _____ (Number)
- 17(a) Women sometimes have something done, either through a doctor, a midwife, or in some other way, to end a pregnancy early; Has this been the case with you? 1. Yes 2. No
- (b) If Yes, on how many occasions? _____

(FOR OFFICE USE ONLY)

- Sum all pregnancies (Q13b, 14b, 15b, 16b, 16d, 17b)
- Sum all live births (Q13b, 14b, 15b)
- Sum all living children (Q13b and 14b)

1. Interval between	Interval	Duration(Years)	No. of births
Marriage and 1st birth		1	
1st and 2nd		2	
2nd and 3rd		5	
3rd and 4th		10	
4th and 5th		15	
		20	
		25	
		30	
		35	
		40	

Total birth ()

18. Please give further information in the table provided below about all the children you have ever born alive, including both living and dead.

S/N	Give the Names of the children beginning with the oldest	S E X		Date of birth month and year	Is the child living or dead?
		M	F		
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					

19(a) How many children do you want to have? _____ (Number)

How many boys _____ (Number)

How many girls _____ (Number)

1(b) How many more do you want to have? _____ (Number)

How many boys _____ (Number) How many girls _____ (Number)

20. How many children do you think make the best size family for a Yoruba couple? _____ (Number)

- 21(a) A family of how many children do you consider a large family?
1. A family of one child
 2. A family of two children
 3. A family of three children
 4. A family of four children
 5. A family of five children
 6. A family of six or more children
- (b) Will you like to have a large family? 1. Yes 2. No
- (c) Why do you feel it is good to have a large family? _____
- 22(a) A family of how many children do you consider a small family?
1. A family of one child
 2. A family of two children
 3. A family of three children
 4. A family of four children
 5. A family of five children
 6. A family of six or more children.
- (b) Will you like to have a small family? 1. Yes 2. No
- (c) Why do you feel it is good to have a small family? _____
23. Do you think that children have more chance to live to adulthood now than when you were a child?
1. More chance
 2. The same chance
 3. Less chance
 4. Don't know

SECTION IV
FAMILY PLANNING

We have already talked about how many children you have and how you feel about them. I would now like to end this interview by asking you a few more questions about how you feel about raising children.

- 24(a) Have you and your husband ever discussed how many children you would like to have?
1. Yes
 2. No
- (b) Who in your family decides how many children should be born?
1. Husband
 2. Wife
 3. Both
 4. No one
 5. Other (Specify) _____
25. How long do you feel it is best for a woman to wait after the birth of a child before her next child is born?

_____(Months)

26. If you did not want to have another child at this time, what would you do to prevent yourself from becoming pregnant?

1. Avoid intercourse
2. Move out of the household
3. Breast-feed the last child as long as possible
4. Name method used if other than above

27(a) Do you know about any methods of family planning? 1. Yes 2. No

(b) If yes, what methods do you know? _____

(If the respondent is unable to name a method, knowledge is not established).

(c) Have you ever heard of any of the following methods ?

Traditional

1. Abstinence
2. Withdrawal
3. Abortion
4. Native Medicine
5. Other (Please specify) _____

Modern

6. Durex
7. Pills
8. I.U.D.
9. Rhythm
10. Injection
11. Other (specify) _____

28. Where did you first learn about family planning?

- | | |
|---------------|----------------------------------|
| 1. Friends | 5. Staff of Iwo General Hospital |
| 2. Press | 6. Husband |
| 3. Television | 7. Other (Please specify) _____ |
| 4. Radio | |

29. ~~Many~~ couples do something to delay or prevent a pregnancy, so that they can have just the number of children that they want, and have them when they want them; would you say that you approve, disapprove or feel uncertain about this?

- | | | |
|------------|---------------|--------------|
| 1. Approve | 2. Disapprove | 3. Uncertain |
|------------|---------------|--------------|

If answer to question 29 is 1, ask question 30.

30. Why?

1. The health of the mother is at stake
2. Better care can be given to each child
3. The family's economic situation
4. To help family happiness
5. Family already has enough children
6. So that the mother can work
7. So that husband and wife can be free to do other things
8. Small population is good for the country
9. Other (Please specify) _____

If answer to question 29 is 2, ask question 31.

31. Why not?

1. It is harmful to health
2. It is against religion
3. Costs too much

4. Too much trouble
5. Large family is better off
6. Morally wrong
7. Husband disapproves
8. Large population is good for the country
9. Other (Please specify) _____

32(a) Have you ever attended a family planning clinic? 1. Yes 2. No

(b) If Yes, name the Clinic _____

(c) Would you say that your husband gave you moral or financial support before you attended the Clinic?

- | | |
|--------------|---------------------------|
| 1. Moral | 3. No support |
| 2. Financial | 4. Does not know about it |

33(a) Have you ever used any method to keep yourself from becoming pregnant?

- | | | |
|--------|-------|---------------|
| 1. Yes | 2. No | 3. Don't know |
|--------|-------|---------------|

(b) How many children did you have at the time you first started using a method? _____

- | | | |
|----------|---------|--------------------|
| 1. One | 4. Four | 7. Seven |
| 2. Two | 5. Five | 8. Eight and above |
| 3. Three | 6. Six | |

(c) For how long did you use it before you had the next child?

34. Why did you use the method? _____

35(a) Are you still using this method now? 1. Yes 2. No

(b) If no, why not?

1. My last child is old, I want a new one
2. I am no more in School
3. It makes me fat unnecessarily
4. Because of other side effects
5. My husband asked me to stop it
6. Other (Please specify) _____

(c) If Yes, why are you using the method?

1. Because I am in School
2. I have got enough children
3. Because the child I am nursing now is young
4. Because my husband said he has got enough children
5. I am the only wife of my husband
6. Others (Please specify) _____

36. The major impediment to effective implimentation of family planning in Nigeria today is:

1. Illiteracy on the part of many Nigerians.
2. Religious factors.
3. Lukewarm attitudes of the government towards family planning programmes.
4. Contraceptives not readily available
5. No information/Don't know
6. Other (Specify) _____

* We thank you for finding the time to attend to us.

'LAYI RAIMI

Interviewer's Comment: _____
