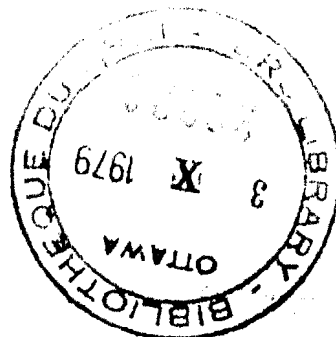


INFERTILITY AND SUBFERTILITY IN RURAL WESTERN NIGERIA



BY

DAVID A. OLATUNBOSUN, M. D.

in Collaboration with

J. O. Bolodeoku, M. D.

O. O. Arowolo, Ph. D.

and

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A Report submitted to the International Development
Research Centre, Ottawa, Canada.

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Final Report

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SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

This study was conceived and designed as an epidemiological survey of infertility and subfertility in a rural section of the Western part of Nigeria. Most studies of infertility and subfertility had been based on hospital admissions in urban centres and it would have been misleading to attempt to estimate the prevalence of infertility from such studies. Notwithstanding this fact, attempts to study the prevalence of any condition or even to conduct a census in a developing country, such as Nigeria, are not without their own problems.

The socio-economic profile of a rural area consisting of 3 contiguous villages with an estimated total population of approximately 100,000 was determined from a random selection of 1231 households consisting of 8227 persons. From these persons 597 heads of household and 1431 women of reproductive age (14 to 49 years) completed questionnaires relevant to the study of fertility.

The results of the study proved disappointing in the sense that infertility and subfertility turned out to be quite rare in these communities. The prevalence of secondary infertility was about 2% and that of primary infertility about 1 per cent. In only 15 cases was primary infertility encountered. The study has thus confirmed the high fecundity of Yoruba Nigerian women in this part of the country.

The incidence twin births, for example, in Yoruba women is one of the highest in the world (Bulmer, 1960; Nylander, 1969).

Child mortality is still frighteningly high. This has placed a high cultural value on children. The desire for many children as an insurance against future losses is still very strong. Childlessness poses severe problems for the infertile woman, thus, whilst marriages in general are quite stable, a higher proportion of women with infertility tend to marry more often than those with children.

There is virtually no knowledge of modern contraceptive methods and with the high rate of child loss and the widespread practice of polygamy there is at present little necessity to practice contraception. Family spacing is carried out by breast feeding during which there is also a cultural taboo against sexual intercourse. It is believed that semen will be excreted in the breast milk and this is poisonous to the baby. This is a good deterrent to sexual intercourse and cannot be lightly dismissed in the face of the high rate of infant mortality, and the desire to preserve children. Every effort should be made to encourage breast feeding by these women.

The overall high fertility of these women and the high percentage of the dependent population (nearly 50 percent under

the age 15) strongly point to a more positive population policy by the Nigerian authorities. It is no longer sufficient to give official tacit approval to family planning; more direct involvement in population control is now needed.

An analysis of the levels of educational attainment reveals that at all stages in the educational system females are worse off than males. For example, only half as many boys are the girls who complete primary education. There is need for more effort to persuade the girls to stay longer at school. This might facilitate the process of introducing modern family planning methods.

The present rate of population growth is not compatible with the expressed wish of the Nigerian government for rapid economic advancement of the country.

Useful practical lessons have been learned from the study. The first is the need to obtain the confidence of the people to be interviewed. Questionnaires should be as simple as possible and, whenever possible, interviewers should be recruited from the communities being studied. A study of a primarily medical "problem" like infertility would benefit from contributions from other disciplines such as sociology and the behavioural sciences. People in these disciplines should be brought in from the beginning.

ACKNOWLEDGEMENTS

It is a pleasant duty to acknowledge, with gratitude, the help received from the following persons and (regretably) others we cannot individually name, that has enabled us to successfully complete the project.

We thank the Board of Governors of the International Development Research Centre (IDRC) Ottawa, Canada, for providing the funds; Dr. John Gill and Mr. David Henry, IDRC Headquarters Staff, Ottawa, for their personal interest and advice, Dr. Patrick Kelly, IDRC, West Africa, Bamako, Mali, and Dr. and Mrs. John Friesen IDRC, East Africa, Nairobi who paid us much valued visits.

The support and encouragement of the Vice-Chancellor, University of Ibadan, Professor T.N. Tamuno, and the Dean of Medicine, Professor B.O. Osuntokun are deeply appreciated.

To the Alakire of Ikire, the Alapomu of Apomu and the Onikoyi of Ikoyi, the three traditional rulers of the communities that we studied, we say thank you and wish you long and peaceful reigns. Without your permission and support the project would have been doomed to fail from the very beginning. We are also grateful to the Chiefs and the people of the three Communities for their warm welcome and willing cooperation.

The officials of the Western State Ministry of Health and the staff of the Rural Health Centre at Ikire provided us with an "operations base" for the survey. We thank all of them for the courtesy of their facilities which were unstintingly provided.

Mr. I.A. Ogundele, the Council Manager of Aiyedade District Council (the official name for the local government area or county) deserves special mention. He arranged our initial meetings with the community leaders and paved the way for our "take off". Without him we could not have been able to commence let alone complete the project.

Dr. I.I. Ekanem, Mr. Tunde Yusuf, Dr. Patrick Ibeziako, Dr. O.A. Dada, Dr. O.A. Ladipo, Professor A.O. Osoba acted as consultants in various capacities to the project. We wish to thank them for their valuable contributions.

The Secretarial assistance of Mr. Bandele Jegede, Mr. Dele Gbadamosi, Mr. Kola Babalola, Mr. Ogundiran and Mrs. L.A. Oshilaja is deeply appreciated.

Happily for all concerned, Infertility and Subfertility turned out to be unimportant public health problems; but we hope that the lessons learned in conducting a survey of this nature would prove beneficial to others. It is also our hope that the information obtained about the socio-economic conditions of the people would assist planners in dealing with the development problems of our rural communities.

C H A P T E R I

Introduction

The demographic problem of the African continent has always been seen in the context of the rapid increase in the population growth or the "population explosion". However, in recent years, it has become increasingly evident that there are indeed parts of the African continent such as Gabon, West Cameroon, Zaire and the Central African Empire where there is a slow rate of population growth. In these areas, infertility and subfertility constitute major public health problems.

In November, 1973, a workshop was held in Ibadan, Nigeria, under the auspices of the International Development Research Centre (I.D.R.C.), Ottawa, Canada, and the United Nations Economic Commission for Africa to look into the problem of correlates of subfertility and infertility in Africa. It was confirmed from the proceedings of the workshop that there were, indeed, areas of subfertility and infertility in Africa, but it was difficult to produce a composite picture because of differences of definition and of methodology of study and approach (Adadevoh, 1974). And, where subfertility and infertility could be identified as public health problems, the clinical and pathological antecedents were often obscure. Furthermore, current estimates of the prevalence of infertility and pregnancy wastage were largely based upon

demographic data derived from census surveys and a few epidemiological and clinical studies.

In order to examine these problems in greater depth and to develop a standard protocol for surveying the prevalence of infertility and subfertility in the community, the I.D.R.C. initiated a project based in a rural community in Western Nigeria, "to study the prevalence of and socio-economic factors affecting subfertility and infertility, and also to investigate possible clinical and pathological factors in infertility and subfertility". A parallel programme was to be based in Lagos to study the same problems in an urban setting.

The peculiar problems of data collection in studies of this nature have been discussed by previous workers and can be summarised as:

1. Enumerators have imperfect education, training and often knowledge of what is being done.
2. Deliberate falsification of data in "political censuses".
3. Cultural resistance to providing certain answers
 - (a) Wrong information about wives and children in harems.
 - (b) Likelihood of pregnant women lying about dead children so as not to bring ill luck upon the foetus

(c) Apprehension about further taxation.

4. Age errors.

For example, in Freetown, Sierra-Leone, males probably report only a fraction of their fertility outside marriage, and female fertility is also under-reported (Harriell-Ford, 1975). Also in Nigeria, it is regarded by women as bringing bad luck to say how many children have died (Morgan, 1975) and such fears are said to be greater among pregnant women whose under reporting is the highest of all (Trevor 1975). However, in spite of these handicaps, it is still possible to conduct meaningful demographic research and obtain usable data provided adequate precautions are taken (Morgan 1975) and confidence of the community is won.

To tackle these problems, a multidisciplinary team including a demographer, sociologist, gynaecologist, venerologist and physicians was assembled.

Three possible locations for the survey were considered. Ibarapa, a community about 100 kilometers south-west of Ibadan (Figure 1) was well known as the base for the community medicine project of the Medical Faculty, of the University of Ibadan. The population had been interviewed and studied so many times over and were attuned to the needs of epidemiologists. A household census was already available. Ilora, a small village about 45 kilometers north of Ibadan was probably the village with the longest continuous link with University of Ibadan

NIGERIA



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Figure 1

Medical School. The Department of Preventive and Social Medicine had been holding clinics there for many years. Ikire was the third choice. No previous medical team from Ibadan had, to our knowledge, visited there. It was geographically the nearest to Ibadan (30 kilometers) of the three. It was on balance decided to carry out the survey at Ikire. The term "Ikire" includes, in our context, two other adjacent and contiguous villages, Ikoyi and Apomu, which, although of smaller size each has its own traditional ruler and chiefs.

Having decided on Ikire, our team made a site visit soon after. A look round the area revealed that the communities were in fact homogenous and random clusters of households based on the aerial map could be picked for the household surveys (Figures 2 and 3). We were helped in our task by the previous numbering of the households for tenement rate assessment.

Our next task was to explain the objectives of our survey to community leaders and to solicit their help and cooperation. This cooperation was vital because our interviewers were to enter households and ask questions of a very personal nature. We also wanted to explain that our interviews were connected mainly with the health of the people and not for tax collection. Furthermore, all our interviewers would be female. The reports of our initial visits Ikire are in Appendix I and Appendix 2.

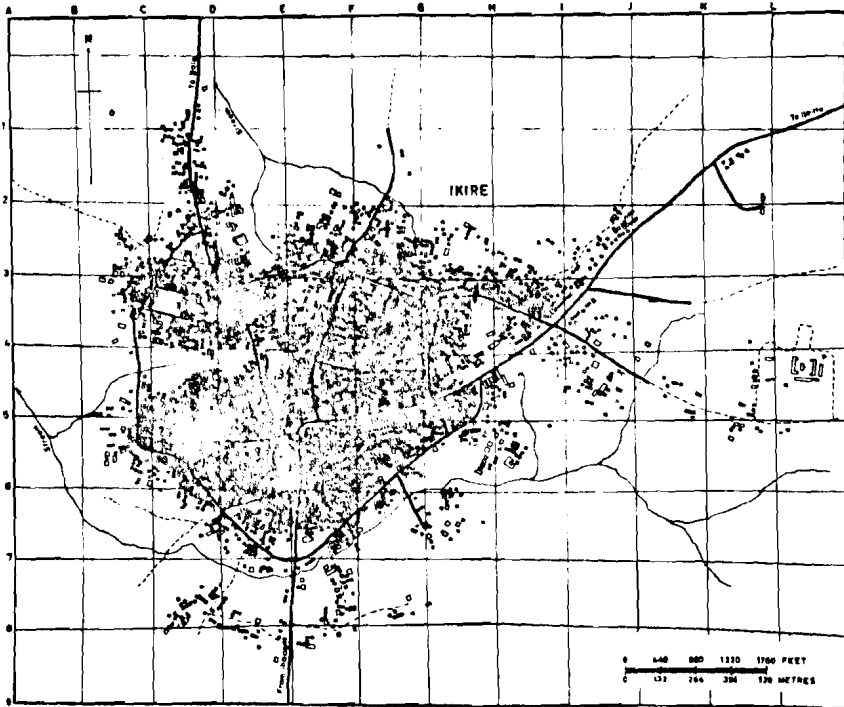


Figure 2: Aerial Map of Ikire

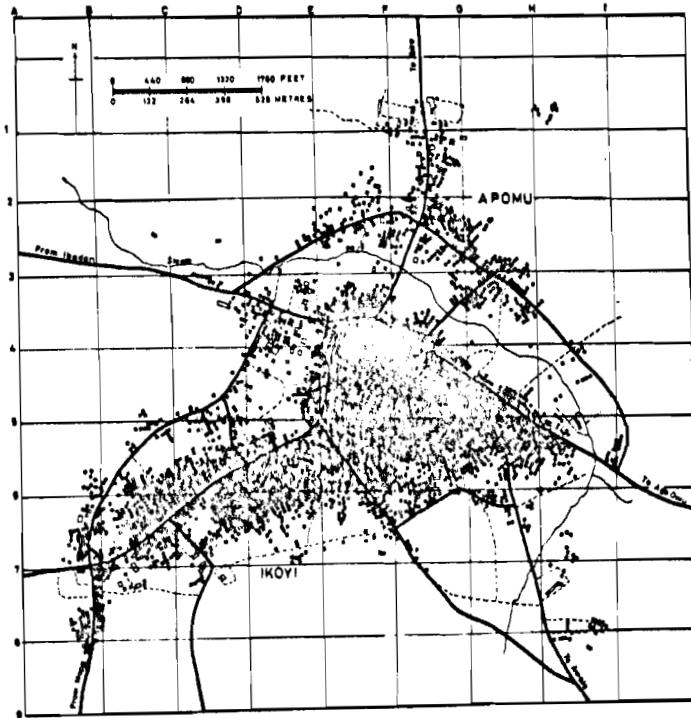


Fig. 3: Aerial Map of Apomu/Ikoyi

The interviewers were recruited from the communities. We were assisted in this by the Health Visitor. The interviewers were mostly nurses and teachers. They were literate in both English and Yoruba.

The next step in the project was the designing of a questionnaire that would form the basis of our survey. The questionnaire consisted of two parts; the first was a household questionnaire in which we carried out a demographic survey of a sub-sample of a population. This questionnaire was primarily directed to the heads of households and their ages, how many bedrooms were available, the type and quality of the house, whether it was built of mud or concrete, thatched or iron roof, how many birth and deaths occurred in the previous twelve months. The second part was the fertility questionnaire which was directed primarily to the women of reproductive age between the ages of 15 and 49 years.

The questionnaires were designed initially in a way that the responses could be directly coded for computer analysis but at the preliminary trial during which the interviewers were being trained, it was discovered that this approach would not be feasible. Appendix 3 shows the first household questionnaire and Appendix 4 the original fertility questionnaire, we therefore had to redesign the questionnaire in such a way that the questions, even though they did not differ from what were in the original questionnaire were greatly simplified.

For example instead of asking "are you married now?", Code 01 for married, 02 separated, 03 divorced, 04 widowed, the women were asked in the simplified questionnaire to state exactly their marital status. At the completion of the interviews these data were then recoded as in the first original questionnaire. Appendices 5 and 6 are the redesigned questionnaires.

The data were coded and punched on computer cards for analysis. The codes are shown in Appendices 7, 8 and 9.

The "raw data" as they were retrieved from the computer are reproduced in Appendices 11, 12 and 13. Appendix 11 is the "Marginals" for the fertility survey showing the population characteristics of the households in the survey. Appendix 12 is the response to the household questionnaire by the heads of households and appendix 13 is the response to the fertility questionnaire by the women of reproductive age.

There is still scope for more cross tabulations and cross-correlations among the variables. With a total number of 50 variables in the questionnaires, the number of cross tabulations possible is very large indeed, almost approaching infinity!

What follows in this report is an abstraction of the salient factors that we think are directly related to

fertility in the population that we have studied.

It is our hope that the "raw data" in the appendices would provide a "secondary source" for demographers and social scientists for further cross tabulations which, no doubt, would reveal interesting facts relating to marriage, the family and the society in this rural part of Western Nigeria.

C H A P T E R I I

Research Design

The problem to be investigated, as indicated in the introductory chapter, concerns the social, economic and pathological correlates of sub-fertility and infertility in a human population. It was clear from the start that we did not have the requisite resources for a national survey of the population to determine the prevalence of sub-fertile and infertile conditions and the factors that may be cited in association of their incidence. In the circumstance the study had to be narrowed down in scope rather than content. The scope was reduced to any Yoruba settlement, town or village, that may be expected to generate information on variables associated with fertility behaviour and practice.

After due considerations for size of population, convenience of contact with survey locality, and the socio-economic environment in which fertility might be a problem, the research team chose a conglomeration of towns in the Aiyedade District Council area of Oyo State. The three towns are in a contiguous location and it would take a native resident to determine where one town merges into another. Identified as Ikire, Apomu and Ikoyi, the fact of geographic contiguity does not in any way obliterate

individual social and political identity.

Population: The 1952/53 census records show a total population of 35,513 for the three towns. This was shown to have increased to 96,684 at the 1963 census; a momentous growth rate of 9.1 per cent per annum between 1952 and 1963.

The estimates are shown here separately for each of the localities at the two census dates. If the 1952 census exercise

<u>Locality</u>	<u>Population</u>		<u>Annual Growth</u>
	<u>1952</u>	<u>1963</u>	<u>Rate (%)</u>
Ikire	20,118	54,022	9.0
Apomu	10,400	27,196	8.7
Ikoyi	4,995	15,466	10.3
Total	35,513	96,684	9.1

did not undercount the population and the 1963 figures were not exaggerated as in generally suspected, such high rates of population growth associated with these localities would call for a massive net in migration balance even if the rate of natural increase had remained at high levels.

Since vital statistics are not available it is not feasible to list the above proposition.

Sampling: Sample size, set at 2,000, was predetermined. This is to facilitate international comparability of similar (survey) researches being conducted in other parts of the world. The sample, population was defined as 'couples'

but in the process of sample selection female elements in the sample of couples were defined as women aged 15-50 years, who were residing in households. The essence was to capture women within the conventional child bearing age group. Only heads of households, currently married with spouse present were considered eligible and were interviewed jointly with eligible women previously operationalized.

The procedure for selection of elements that constitute our units of analysis was indirect; or essentially a multi-stage sampling process. To identify households at all, it was necessary to identify dwelling units. Given the structural forms of houses in this environment like in most settlements in Nigeria, it is almost an impossible task to list all dwelling units in this area within the limits of time. Indeed even if time was not a constraint the difficulty of identifying dwelling units in an environment in which there is no known, formal process of distinguishing between one building and another, would have been very great. In the circumstance, Area Sampling became expedient.

Adequate base maps covering the area of study were not easy to come by. The sketches available were pieced together and modified somewhat after the initial reconnaissance survey of this area. The final forms of the base maps upon which area sampling was based are shown in Figs. 2 and 3. Grid lines were then super imposed upon the base maps to determine clusters of houses from which dwelling units were identified. Selection of Grid Squares

was preceded by a pre-survey estimate of the population of an average square. Random selection of squares was done without replacement - especially a simple random procedure.

The elements that constitute the units of analysis were defined within the context of the household. A household was defined as persons living under a common roof who eat from the same pot. Hence, it is possible for a dwelling unit to harbour more than one household. It was also realized that since the design of the survey is to elicit information on the social, economic, demographic and environmental/biological characteristics of couples the temptation to study these households could not be resisted. Indeed, background information on households was deemed useful in explaining conditions of relative infertility in the population. It was not necessary to stratify the area into residential categories, given the relatively homogeneous pattern of housing observed in the area. From the 9 randomly selected grid squares out of a total of 90 built-up grid squares, 1231 heads of households were identified and interviewed. These household heads in turn provided information on other household members, to complete Part I(b) of the Household Questionnaire Schedule. Approximately 1 in

every 2 identified household heads was selected to be interviewed on issues of relevance to this study. This generated a sample of 597, representing those who completed Part I (a) of the schedule. At least one eligible woman was selected from each of the 1231 households for which interviewing was successful; and where there was more than one eligible woman in a household a maximum of two female interviews was granted. In all, a total sample of 2030 resulted from interview of household heads and eligible women in 1231 households. Altogether, 8, 227 persons were identified as residing in these households; implying an average of 6.7 persons per household and 1.6 eligible women per head of household.

The three towns were regarded as an areal unit, and as such no attempt was made to select sample proportional to size of locality. Persons were, of course, identified as of their origin and place of residence to permit comparative analyses of survey data by locality if need be.

The Questionnaire: Interviewing was conceived in three parts, namely (1) Investigation of the household environment, (2) The socio-demographic structure of the household population and (3) Investigation of current and retrospective fertility patterns and the social, economic demographic and medical factors associated with conditions of infertility and sub-fertility.

Two questionnaire schedules were prepared to incorporate questions in the three-part interview design (See Appendix). Part I is divided into two sections; section (a) to be administered to selected household heads and section (b) to all heads of households. Since the sample of household heads derived from the household record form, interviewing started with completion of section (b). Indeed, the household record form, section (b), provided the sampling frame for selection of couples. First, one in every two heads of household interviewed in Part I section (b) was selected to complete the Part I(a), and at least one eligible woman was selected for interview from every selected head of household. All wives of selected heads of households were eligible.

Interviewers were instructed not to substitute for absent or unco-operative respondent heads of households but make recalls or educate such elements when necessary. In order to enhance the needed high level of confidence and co-operation with interviewers, these field workers were carefully selected from the local population. The assumption being that familiar faces would be more acceptable to the local people than, unknown, strange interviewers; and that unknown faces might aggravate the usual misapprehension of the motives for interviewing. Field supervisors were, however, drawn from well trained, seasoned interviewers who were also undergraduate students of Ibadan University. They were

to ensure that the approved sampling procedure was followed and that questions were asked in the right way. Part of the training programme included tests in ability to translate the English Language version of the Questionnaire into the local, Yoruba Language. Only candidates who demonstrated a thorough grasp of ~~the~~ two languages were appointed as enumerators/interviewers. The first week of the survey was devoted to Pilot Study: to test the acceptability of the questions and identify other structural problems in the field that might hamper the success of the investigation.

One of the problems identified relates to the design of the questionnaire schedule. The Fertility Questionnaire appeared rather 'professional'; it was not easy to put the technically worded demographic questions across to respondents. In fact some of the interviewers found certain demographic terminologies incomprehensible. The schedules were re-designed accordingly. One structural problem was identification of dwelling units belonging to particular heads of households. In some instances two or more buildings are connected by walls and ownership may belong to one family (extended structure), harbouring more than one head of household. This made listing of housing units rather difficult while attenuating the problem of operational definition of a household. The decision to interview every eligible element in clusters was to ease this type of structural problem. Even then, areas defined as clusters by grid co-ordinates were very difficult to delimit on the ground. The survey team adopted the conventional solution of approximating close land-marks

or bench-marks to be boundaries of the grid squares selected.

Medical Inquiry: Part of the design of the survey was to identify elements manifesting pathological features with respect to fecundity impairment. A section of the Fertility Questionnaire schedule was designed to elicit pertinent information on certain biological factors that may be cited in association with sub-fertility and infertility. Persons with known, identifiable pathological problems were located on the schedule and noted for further medical examination, advice and treatment. Records of such patients are to be separately analysed.

CHAPTER III

Characteristics of the Population in the
households from whom the sub samples were selected
for detailed interviews relevant to fertility

In the preceding chapter it was stated that 1231 household heads were identified and interviewed from 9 randomly selected grid squares from the aerial maps of the 3 villages. The total population in the households was 8,227 persons. As an introduction to the survey, the socio-economic characteristics of these persons are described in this chapter. Details of the data from which the tables and figures are summarised are in appendix 11. "Marginals For Fertility Survey".

Age and Sex Distribution

The population "pyramid" by age and sex is shown in Figure 4 p.27. The picture is typical of an under developed country that is not practicing family planning and contrasts with that of Sweden which is a technologically developed country with a long history of Family Planning see (Fig. 5 p.28). The population in these communities is predominantly young in age, indeed nearly half of them (48.9%) are below 15 years in age, and only 3% are above 50 years.

AGE AND SEX DISTRIBUTION OF HOUSEHOLD POPULATION BY PERCENTAGE.

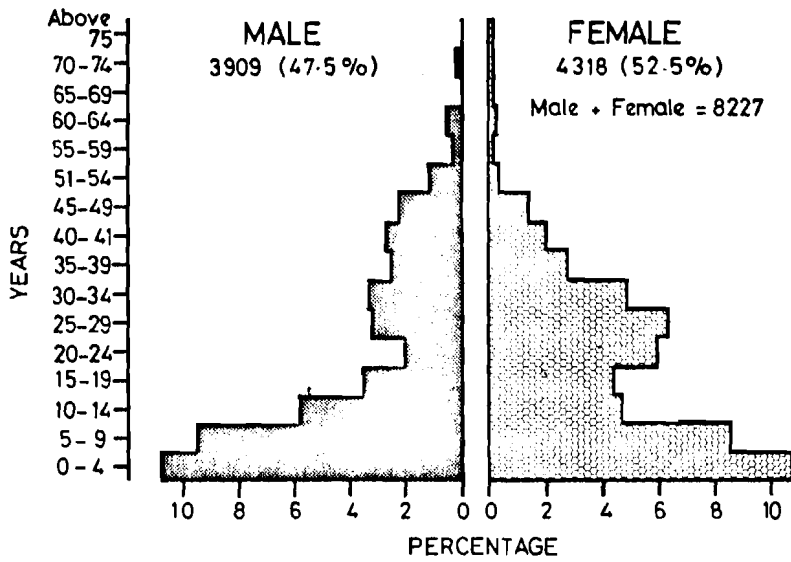


Figure 4

Comparative population pyramids of a developing and a developed country

Age Structure

A country with a recent history of high fertility (here, Mexico) has an age structure resembling a broad-based pyramid that rests on the youngest age groups and steeply tapers to a point at the oldest age groups.

By contrast, a country with a history of low fertility (here, Sweden) has an age structure that yields an almost rectangular appearance in moving up from the base of the youngest to the oldest age groups. Wars and other phenomena that produce temporary fluctuations from the secular trend result in slight irregularities in the sides.

In the high-fertility situation, there are always more people in the next lower age band. In the low-fertility situation, the adjacent numbers are roughly equivalent, lending a certain demographic stability to the social structure.

Sources: Based on United Nations, *Demographic Yearbook for 1970 and 1971*.

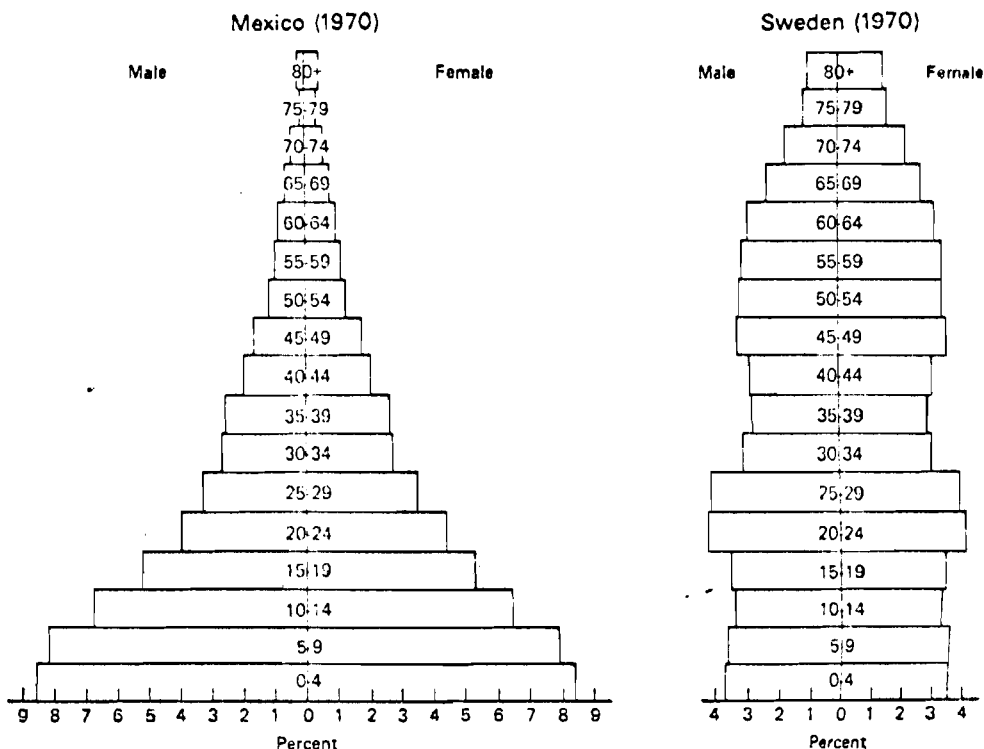


Fig. 5

There is a "notching" of the pyramid in the age groups between 20 and 29 years, when there are proportionately more females than males in the population. The explanation for this, as will be seen later, is that the males have had more years of schooling than the females and this have acquired the "educational ticket" to neighbouring towns, e.g. Ibadan, in search of such employment that only large Urban Centres can provide. In many instances, these hopes are largely unfulfilled, thus producing the Urban unemployment and under employment that is a feature of rapidly growing cities in the underdeveloped countries.

The shortage of males in these age groups (20-29 years) could be a cause of infertility and subfertility in societies that do not practise polygamy because some females would have to remain unmarried. In these communities however, this problem does not arise because of the wide spread practice of polygamy. Indeed, the average number of wives per head of household was 1.60.

Marital Status

The Marital Status of the population was as follows:-

Married	3486 persons	42.4%
Unmarried	4717 "	57.3%
Widowed	23 "	0.3%
Separated	1 person	0.0%
Total	<u>8227 persons</u>	<u>100%</u>

The age and sex distribution of the married (by percentage) persons were as follows:-

<u>Age Groups</u> <u>(Years)</u>	<u>Male</u>	<u>Female</u>
0-14	0	0
15-19	5.5	53.9
20-24	38.9	91.6
25-29	87.4	99.8
30-34	99.3	99.8

Marriages earlier than 15 years are very uncommon for both sexes, and females marry about ten years earlier than males.

Types of Marriage

The laws of Nigeria recognise four types of marriages namely, customary, Church, Moslem and Civil in a marriage Registry. Whilst a marriage is still legally valid and has not been dissolved, it is an offence for any one who has been married under the Church or the Marriage Ordinance in a Registry to take on another wife.

Those who have married under customary law or under Moslem law are allowed to practice polygamy although Moslem law limits the number of wives to four. There is, however, no limit to the number of wives under the Customary law. It is also an offence for those already married under Customary or Moslem law to contract marriages in a Church or a Civil Marriage in a Registry if the previous marriage(s) is still subsisting. The types of marriages (by percentage) were follows:-

	<u>Male</u>	<u>Female</u>
Customary	29.2	41.2
Church	0.7	0.7
Moslem	4.8	7.7
Registry	0.0	0.0
Consent only	0.0	0.2
Not applicable	65.3	50.2

A further analysis of the data showed that the factor of education did not affect the type of marriage.

Household Record

The breakdown of the categories of people living in the households were as follows:-

	<u>Number of persons</u>	<u>As % of total</u>
Heads of household	1231	15.0
Wife	1972	24.0
Son	2445	29.7

Daughter	2104	25.6
Father of household head	6	0.1
Mother of household head	56	0.7
Relative	395	4.8
Visitor	2	0.0
	<hr/>	<hr/>
Total	8227	100.0
	<hr/>	<hr/>

Relationship of Females with
Heads of Households

The relationships of the females in the population to the heads of households (by age distribution and percentage) are shown in the following tables:-

<u>Age groups (Years)</u>	<u>Wife</u>	<u>Daughter</u>
0-14	0	94
15-19	48.6	46.1
20-24	84.6	11.5
25-29	94.6	2.7
30-34	96.5	1.0
35-39	95.7	0.4

As the age groups increase, the proportion of females who are wives of household heads increases, correspondingly the proportion of daughters still at home decreases.

From the table, it can be seen that female marriages earlier than 15 years are very rare.

Relationship of Males with
Heads of Households

The age distribution of males in the population (by percentage) who are heads of households and the relationship of other males to the household heads are as follows:-

<u>Age groups</u> <u>(Years)</u>	<u>Head of Households</u>	<u>Son</u>
0-14	0	94.1
15-19	1.7	79.6
20-24	23.5	61.7
25-29	76.2	15.7
30-34	90.4	5.1
35-39	93.3	1.5
40-44	95.4	0.9

The data presented in this table show that it is unusual to be a head of a household earlier than 20 years, thus most males in the age groups 0-20 are sons of household heads. As in the pattern for females, as the males become older they marry and leave home although more males stay longer at home than females of the same age groups because of the later age at marriage of males.

Level of Education

The educational attainments of the population were as follows:- (By percentage).

	<u>Male</u>	<u>Female</u>
Unable to read and write	55.6	75.0
Some Primary Schooling	24.2	16.1
Completed Primary School	14.1	7.5
Secondary School or Teacher Training College	4.7	1.1
Professional	0.6	0.1
University	0.1	0.0
Koranic School	0.7	0.1

The educational attainments can be broken down, roughly by age, into adults and young people. The adult group corresponds to heads of households and their wives, and the young persons group corresponds to sons and daughters as shown in the following table:-

Level of Education for Household Members
(By percentage)

	<u>Household head</u>	<u>Wife</u>	<u>Sons</u>	<u>Daughters</u>
Unable to read and write	58.4	84.8	55.3	65.8
Some Primary School- ing	10.7	5.2	30.6	26.3
Completed Primary School	21.0	8.3	10.1	6.4
Secondary School or Teacher Train- ing College	7.3	1.0	3.1	1.3
Professional Train- ing	1.4	0.1	0.1	0.0
University	0.2	0.0	0.1	0.0
Koranic School	0.8	0.0	0.7	0.2

There is a high drop out rate from Primary School which is more pronounced for the girls than the boys. At all levels in the educational system females are worse off than males.

Occupation

Since the analysis of the data showed that 91.9% of sons and 94.4% of daughters were unemployed only the occupations of the heads of household are tabulated below:- (by percentages)

	<u>Heads of Household</u>	<u>Wife</u>
Unemployed	0.8	7.5
Unpaid Family Work	0.2	4.0
Trading	14.1	52.9
Unskilled Work	3.8	0.5
White Collar	0.9	1.0
Farming	34.1	29.9
Crafts	15.0	1.2
Service	5.7	0.2
Professional	22.5	3.5
Undefined	2.8	0.3

CHAPTER IV

Characteristics of the 597 households Heads

Who Completed Part 1(a) of the Schedule

1. Quality of Housing

The houses were arbitrarily classified into poor or fair depending on the type of material used in their construction. Houses with mud walls and roofed with either thatch or corrugated iron sheets were classified as poor and those whose walls had been plastered with cement ^{or} were made of cement blocks, were classified as fair. By this classification 510 were poor and 84 were fair. The responses in respect of 3 houses were not available for coding.

2. Modern Facilities

To determine what degree of modernity existed in the households, the heads were asked which of the following arbitrarily chosen indices of modern civilisation were available in their households. Electricity, Running Water, Inside Lavatory, Electric Iron, Electric/Gas Cooker, Wrist Watch/Alarm Clock, Refrigerator, Radio and Television Sets. Households which had at least four of these items were classified as "Modern", those with fewer were called "substandard". Only 11 households

were modern by this classification. It was a bit odd that 9 out of the 11 modern households were classified as "poor" because of the materials used in their construction.

It might be added that the rural electrification programme of the State Government has brought electricity to these villages since the completion of this survey, more households would now therefore be able to instal some of those symbols of modernity which are dependent on the use of electricity.

The Total Number of Residents in the households was 4133 comprising 1940 males and 2193 females. The average number of residents per household was 6.96. The "poor" households had an average 6.8 people per household whilst the average number per "fair" household was 7.8. These data indicate that the better quality households had more people than the poorer ones. This might be an index of the wealth of the households heads in the better households enabling them to support more dependants.

The Average Number of Literate people per household was 3.22 for the fair housing and 2.66 for the poor housing. Literacy was defined as the ability to read or write English, Yoruba or Arabic. The degree of proficiency attained was not determined. The heads of the "fair" households might be those, who themselves, had attained some level of sophistication and were thus appreciative of the benefits of education.

5. Polygamy, 58.4 percent of the heads of households had only one wife and 41.6 percent ^{were} polygamous. A higher proportion of household heads in poor housing had more wives than those living in fair housing. Could it be that more wives per household head reduced the income needed to modernize the houses?
6. Vital Statistics: Number of births, deaths, still-births, abortions per household using the heads of households as sources of information.

A total number of 250 live births were reported in the past 12 months by the heads of the households, 121 of these births were male and 129 were female giving a female/male ratio at birth of 1.07 to 1.00. Thirty two deaths were reported in the households in the preceeding 12 months comprising 16 males and 16 females. 17 of these deaths were children (both male and female) under one year of age.

Only one still-birth was reported. This is difficult to explain. Still-birth is well recognised among the Yoruba people and there is no confusing it with any another cause of infant death. The most common prayer among the Yoruba people is ^{that} a pregnant mother and her baby would cry aloud. The baby that does not cry at birth is the still-birth. It is thus possible that there may have been under reporting of still-births due to

an unconscious desire to suppress unhappy memories. But when one takes into account the rather high rate of infant mortality in the fertility questionnaire and the low still-birth incidence reported, it is possible that low still-births may be a feature of obstetric practice in this environment. There is need for a study of the medical causes of still-births such as the toxæmias of pregnancy, iso immunisation, etc. in this environment.

Twenty two miscarriages and one abortion were reported. The proportion of 22 miscarriages to 250 live births is high, it is apparent that there may have been some over-reporting. A miscarriage is pregnancy loss after 28 weeks conception when the foetus is deemed to be capable of survival, whilst an abortion is pregnancy loss before the conceptus is 28 weeks. Some of the "miscarriages" could in fact have been "still-births".

All previous studies of abortion have acknowledged the difficulty of obtaining accurate information on its prevalence in any community. Studies of abortion in Nigeria have dealt with hospital records in urban communities (Akingba, 1977). The report of only one case of abortion by the household heads reinforces the need for more detailed studies of abortion in

rural communities in Nigeria. It would be of interest to know if urban - rural differences exist and what are the determinants.

7. Sexual Habits. 584 heads of households experienced no difficulty in performing sex act. Of the 12 who had some difficulty, 8 had poor erection and 4 had failure to ejaculate.

The frequency of sexual intercourse per week was calculated as a function of quality of housing. The household heads in the poor type of housing had an average intercourse frequency of 4.35 times per week and those in fair housing 4.49 times per week. Sexual behaviour among the Nigerian populations has not been the subject of serious study either as a subject of socio anthropological interest or as a determinant of fertility. In this survey, the quality of housing apparently had no effect on the frequency of sexual intercourse. Furthermore, cross correlations between sex frequency and other variables are indicated.

8. Medical History of House-hold heads with particular reference to the sexually transmitted diseases.

The part of the survey which dealt with the heads of households included a medical questionnaire. The reason for this was to obtain some insight into their health problems and to evaluate the contributions of the male factor to

female infertility. To a specific question, "Have you had gonorrhoea before?", 25 out of 597 heads of household (4.2%) replied 'yes'.

By gonorrhoea, they meant symptoms of urethritis, acute or chronic, particularly with discharges, and also related to recent sexual intercourse.

Although some of them claimed to have been cured by traditional herbal medication, all the 25 expressed the desire to be further examined at the University College Hospital, Ibadan where modern medical facilities were available.

The clinical and laboratory findings in those who were examined at the hospital were as shown in the following tables.

Past History of Venereal Disease

Serial No.	Age	Age at Onset of "VD"	Years since symptoms	Treatment	Outcome	No. of wives
1.	68 years	59 years	9 years	Traditional	Cured	1
2.	35 "	32 "	3 "	Drugs	Doubtful	2
3.	40 "	20 "	20 "	Traditional/Drugs	Cured	2
4.	60 "	50 "	10 "	Traditional	Doubtful	2
5.	40 "	32 "	8 "	Drugs	Cured	3
6.	30 "	24 "	6 "	Traditional	Cured	2
7.	40 "	30 "	10 "	Traditional/Drugs	Doubtful	3
8.	40 "	25 "	15 "	Traditional	Cured	4
9.	60 "	59 "	1 year	Unknown	Doubtful	4
10.	40 "	20 "	20 years	Traditional	Doubtful	2
11.	40 "	32 "	8 "	Traditional/Drugs	Doubtful	2
12.	60 "	45 "	15 "	Unknown	Doubtful	3
13.	45 "	25 "	15 "	Traditional	Cured	2
14.	50 "	-	-	Unknown	Doubtful	2
15.	45 "	35 "	10 "	"	Doubtful	2
16.	60 "			"	Doubtful	3
17.	25 "			"	Doubtful	1

Note: Traditional methods include herbs taken by mouth or externally to wash the penis. Western style treatment includes various drugs including anti biotics but the dosage is often inadequate and thus clinically ineffectual.

Symptoms and Signs

Symptoms and Signs	No. of Patients	%
Enlarged Inguinal Lymphnodes	3	17.6
Scars from ruptured inguinal abscess	2	11.8
Splenomegaly	1	5.9
Backache	4	23.5
Dysuria	3	17.6
Loss of Libido	3	17.6
Inability to get erection	2	11.8
Extramarital Sexual Intercourse	4	23.5

LABORATORY INVESTIGATIONS

I

BACTERIOLOGICAL TESTS

(a) Microscopy of Urethral Smears

Findings	Gonococci Neisseria	Pus cells +++	Secondary Organisms	Trichomonas Vaginalis
No. of Patients	0	5	3	3

(b) Microscopy of Urine Sediments

Findings	Numerous wbc/HPF	Numerous Rbc/HPF	Schistosoma Ova	Squamous epithelium
No. of Patients	4	2	1	1

(c) Cultures yield no gonococci

II

SEROLOGICAL TESTS

	Type	Results	No. of Patients	
a.	Lymphogranuloma Venereum CFT	Positive	3	1
		Unreliable	9	5
b.	Treponeme Haemagglutination Test	Positive	2	1
		Negative	15	8
c.	VDRL Test	Negative	17	10

The positivity of the LGV CFT in three patients suggests the presence of lymphogranuloma venereum antibodies in their sera and hence proof of a previous infection with this virus. The equivocality of the test in nine other patients was due to the presence of anticomplementary factors in their sera. This however, does not rule out the presence of LGV antibodies in two of the patients (Nos. 11 and 15) who had scars suggestive of previous suppurative inguinal buboes, which further strengthens the argument for a past infection with lymphogranuloma venereum.

The complement fixation test is known to remain positive for a long time in untreated cases. When treated, the antibody titre is expected to drop slowly or drastically within a few months, but individual variations do occur. One would however, not overlook the fact that immunity following recovery from the disease is somewhat obscured by the frequent persistence of the organism in spite of the presence of antibody.

This survey afforded the opportunity to study the relevant history and pathology of sexually transmitted diseases in the male heads of household in a rural community in Western Nigeria. These males have been infected at one time or the other in the past, or have been reinfected in the more recent past or currently exposed to an infection. The group is largely polygamous. The number of wives per male

ranged from 1 to 4 with only two having a wife each. The study involves seventeen males aged between 25 to 68 years with a mean of 45.8 years. The age of the subject at onset of venereal disease ranged from 20 to 59 years, (mean 34.9 years) in five of them (29.4%) whose group had their first contact with the disease after marriage. The others contacted the disease prior to marriage.

The desire expressed by all of them to be further medically examined at the University College Hospital in Ibadan in spite of their claims to successful treatment initially, suggests the presence of sequelae, chronicity or episodes of reinfection since the first contact. Episodes of reinfection were most likely because of relevant pathological findings in the urine sediments as well as the positive unretrothral smears of 14 patients (82.4%). Urethral stricture was present in one patient.

The demonstration of the flagellate *Trichomonas vaginalis* microscopically in the centrifuged random urine samples of three patients is significant. Had early morning urine samples been used, perhaps the flagellates would have been seen in some other patients as well. It is known that the infection with these flagellates is usually transmitted sexually and is asymptomatic in the males who thus serve as a reservoir of infection. Thus, after an apparent cure, they

are reinfected by their wives, who invariably would not have been treated along with the husbands. This calls for a general health education amongst this rural and polygamous community.

The LGV complement fixation Test was positive in one of the patients with *Trichomonas vaginalis*, whilst the presence of LGV antibodies was not unlikely in a second patient also infected with the flagellates, had there not been anticomplementary factors in his serum, however, painless inguinal lymphnodes were observed in this patient. It is also known that the infection with LGV is transmitted during coitus and that majority of infection, especially in the males heal spontaneously, the inguinal lymphadenitis may persist for weeks or months. Since the disease is often unrecognised for months or years after onset in the female who can transmit it to her husband or other males, she remains a constant source of reinfection. But for the anticomplementary factors present in the sera of most of the patients probably more cases of LGV antibodies would have been detected. In view of this and the silent course it runs in the female as well as the disastrous consequences, there is a case for screening with the Frei test in the females in this community with a view to treating them.

It is noteworthy that bacteria *Neisseriæ gonorrhoea* were not isolated from any of the urethral smears, but significant

number of pus cells were observed in the smears from 7 patients (41.2%). This finding is usually associated with non gonococcal urethritis following sexual intercourse. It is known that nonspecific urethritis appears in the acute and subacute forms, the latter being more common. Many cases go unnoticed or untreated because of their mild symptoms. Two of the patients who had pathological urethral smears typical of nongonococcal urethritis presented with mucopurulent urethral discharge suggestive of the subacute type. The clinical symptoms and urine findings of these two patients became normal only after a three week course of oral tetracycline therapy. It is also known that a number of these infections are self-limiting and complications occur in both mild and severe infections.

Thus, the absence of gonococci from urethral smears and culture as well as the absence of the typical thick and creamy urethral exudate are difficult to explain.

Alternatively, it may be suggested that these patients have had access to antibiotic treatment of inadequate dosage and uncertain duration. It may well be the fact that there is a low incidence of gonococcal infection in this socially, economically and educationally not so advanced rural community.

The Treponeme Haemagglutination Test (TPHA) was positive in one patient and weak positive in another. Both males were 68 and 50 years old respectively. The former made his first contact with venereal disease nine years ago, while the latter was infected 20 years ago for the first time.

The nonspecific test, VDRL, was negative in both of them. The younger patient had bilateral painless and enlarged lymphnodes and a moderate splenomegaly, otherwise no other significant clinical features suggestive of primary, secondary or tertiary syphilis. The older patient had no clinical or physical abnormalities except for a positive LGV complement fixation test, and the weak positive TPHA test. Unlike the specific test (TPHA) for syphilis which only reveals the presence of antibodies in the serum, the nonspecific test, VDRL, is useful in diagnosing rising or falling antibody titres depending on the progress of the disease.

In conclusion, the survey has revealed the apparent rarity of venereal disease due to gonococcal *Neisseriae*, and possibly also that due to *treponema pallidum*, with a likelihood of the preponderance of the nongonococcal urethritis, lymphogranuloma inguinale and *Trichomonas vaginalis* in these rural males. It was only in one case of schistomiasis that the nonspecific urethritis was from a secondary cause. Multiple venereal diseases were common in each male, probably because of the polygamous nature of the community, whereby it is suggested that each wife serves as a reservoir for one or the other type of infection which could be transmitted to the male.

CHAPTER V

Characteristics of the women of reproductive age
who completed the fertility questionnaires

The questionnaires completed by 1,431 women of reproductive age, defined as being between 15 and 49 years, were analysed. The questionnaires completed by one respondent aged 14 and by another aged 54 years were omitted from the tabulations. 679 (47.3%) of the women were domiciled at Ikire and 759 (52.5%) lived at Ikoyi - Apomu. The age distribution of the women, in 5 year groups to smooth out errors in recalling exact dated of birth is shown in the table on page 63.

972 women (67.8%) were born in the village where the interview took place and 451 (31.5%) were born else-where. These were surrounding towns and villages and all the women who took part in the survey were Yoruba.

Marital Status

Almost all the women (1,423 or 99.3%) were currently married at the time of the interview, 8 (0.6%) were widowed and one had been separated from her husband. About 94% of the women got married for the first time between the ages of 14 and 25 years, and more than 50%, in fact, got married between the ages of 17 and 20.

The frequency distribution of the number of years that the women have been married is as shown in this table:-

<u>Number of years</u>	<u>Number of women</u>	<u>As % of total</u>
0 - 4	415	29
5 - 9	396	27.6
10 - 14	264	18.4
15 - 19	187	13.0
20 - 24	104	7.3
More than 24	66	4.7

The vast majority of the women 78.3% had been married only once. Those who had been married more than once were predominantly those who had fertility problems (see chapter VI). The results of the survey indicated that marriages and family life were quite stable.

Attitudes to Polygamy

To the question "how many wives do you think is ideal for a happy family"? Only 25.5% thought one wife was ideal.

The others overwhelmingly were in favour of polygamy. The number of wives, favoured by those who approved of polygamy, ranged from 2 to 25, however, only about 3% of these women were in favour of more than 4 wives.

Most of these women were, infact, in polygamous unions (about 60% of them) thus, their approval of polygamy as being ideal for marital happiness corresponded with the reality of their own marital situations. Furthermore, their own fathers, in 90% of the cases, had more than one wife. The overwhelming support of these women for polygamy is also not diminished by the fact that 62,5% of them were the first wives of their husbands. Being first wives, they could have objected to new additions to the family but they apparently chose not to do so.

Knowledge, attitudes and practice of Family Planning

To the question, what do you think is the cause of sterility in some women? The replies were as follows:-

	<u>Number of women</u>	<u>As % of total</u>
God's design or destiny	52	3.6
Sexual abuse	74	5.2
Old Age	3	0.2
Evil people, witchcraft, etc.	1	0.1
Biological Impairment	134	9.4
Marital Instability	7	0.5
Other	641	44.7
Don't know	520	36.3

The women were also asked: do you know of any means whereby an infertile woman can be helped to become pregnant?

The replies were tabulated as follows:-

	<u>Number of women</u>	<u>As % of total</u>
Hospital, Medical	773	54.2
Native doctor/herbalist	123	8.9
Prayer, Church, Mosque, etc.	35	2.5
Proper Sexual and Moral lessons	1	0.1
Other	60	4.2
Don't Know	427	30.0

Taken together, the replies to these two questions indicate a certain degree of awareness that infertility could have an organic or biological cause, and hospitals and scientific medicine can do something about the problem of infertility. It is also interesting to note that some of the women recognise a relationship between sexual abuse and infertility, this factor has been commented upon in medical circles (British Medical Journal Editorial 1974). Indeed, more women rate this factor more important than psychological factors such as destiny or witchcraft.

To the question, if you are suddenly aware that you are pregnant, what would you do about it? The replies were

as follows:-

	<u>Number of Women</u>	<u>As % of total</u>
I will be too happy to carry the pregnancy to term	1,128	78.3
I'll be disturbed but will carry the baby to term	149	10.4
I will procure an abortion	9	0.6
Don't know	135	9.5

The women who would procure an abortion, presumably were those who recently had children or who were breast feeding, during which period, there is a cultural taboo against sexual intercourse.

The reply to the question "Have you used any means to prevent you from becoming pregnant?" was Yes in 1.5% and No in 97.3%. 1.3% replied they did not know. When questioned further about what methods of contraception were used, 3.7% replied sexual abstinence; 2 women (0.1%) used charms prescribed by a traditional healer, one woman mentioned coitus interruptus and only 2 women used condoms.

It is obvious from these two questions that very little knowledge of modern contraception exists in these villages and almost no one is practising it. One can not offer any opinion at this stage on whether the women would practice modern contraception if the knowledge were made available and the means provided. As will be seen in the next section, there is still high premium placed on large numbers of

*For discussion of the role of abstinence in family planning among the Yoruba See Dow (1977).

children. This might be due to the very high rate of child loss, and the need for many children to replace these losses.

Expectations of Family Size

To the question "How many children do you expect to have altogether", the replies were tabulated as follows:-

<u>Number of children</u>	<u>No of Women</u>	<u>As % of total</u>
4 and below	147	10.2
5	80	5.6
6	389	27.1
7	24	1.7
8	196	13.7
9 and above	236	16.5
Don't know/ No response	361	25.2

The replies to this question demonstrate clearly the desire to have many children. There is of course, some difficulty here. The Yoruba people wish for abundance of wealth and children in a metaphorical sense without assigning specific numbers to the desired number of children. 7 is also an unlucky number as shown in the table. Still, the desire for many children is obvious. It will require a lot of effort to persuade even those whose desires are comparatively modest, say 4 children, that even these may be too many if Nigeria is to reduce her present population growth rate to manageable levels.

The ratio of boys to girls among the present children of the respondents was 1.17 to 1. To the question "would you have more children in order to achieve the ideal sex composition of your children?" 89.7% replied Yes, 5.8% replied No and 4.6% did not know. This is hardly surprising.

Age of Menarche, Menstrual History

The age of first menstruation or the menarche in 1288 women (95.3%) ranged from 10 to 15 years with the mean at 13.9 years. This value is similar to previous studies of the age of menarche in Nigerian girls. (for a recent review see Olatunbosun et. al.). Menstruation was reported as regular in 83.3% of the women, not regular in 3%, with heavy bleeding in 0.3% and painful in 1.2%.

Sexual Habits

The pattern of sexual intercourse was probably similar to that of the male heads of households although no direct comparisons have been made. The frequency of sexual intercourse per week ranged from 0 in 13.8% to 24 in 0.1% of the women. However, between these two extremes are the following, shown in the Table, which are probably more representative of the practice of the majority of the women. 85.2% reported no pain or difficulty, 1.6% experienced pain and the others probably did not engage in sexual intercourse.

Frequency of Sexual Intercourse per week

<u>Number of Times</u>	<u>Number of Women</u>	<u>As % of Total</u>
0	198	13.8
1	232	16.2
2	608	42.4
3	199	13.9
4	110	7.7
More than 4	81	6.0

The effect of age on the frequency of sexual intercourse is shown in the following table.

<u>Age groups</u>	<u>Average frequency per week</u>
15 - 19	2.7
20 - 24	2.6
25 - 29	2.5
30 - 34	2.4
35 - 39	2.2
40 - 44	2.2
45 - 49	2.3
All age groups	2.4

There is a gradual decrease in the frequency of sexual intercourse with age among the women who admitted practicing it. This might be due to a tendency to abstain for longer periods as one became older or the attention of the husband was directed more to the younger wives.

Breast feeding

The replies to the question "How long do you breast feed your baby" in 1226 or 85% of the women were as follows:-

<u>Duration of breast feeding</u>	<u>Number of women</u>	<u>As % of total</u>
6 months	17	1.3
12 "	175	13.7
18 "	253	19.9
24 "	658	51.6
30 "	23	1.8
36 "	144	11.3
42 "	1	0.1
48 "	3	0.2

The replies in 158 women were not coded either because they were not breast feeding at the time of the interview or had not ever done so.

The effect of age on the duration of breast feeding was as follows:-

<u>Age group (Years)</u>	<u>Average duration of breast feeding (Months)</u>
15 - 19	19.8
20 - 24	21.1
25 - 29	21.9
30 - 34	22.6
35 - 39	23.1
40 - 44	25.6
45 - 49	26.3
All age groups	22.9

The average duration of breast feeding increases regularly with age. A similar trend has been reported in a recent study of Yoruba women in parts of the Western State and in Ibadan (Dow, 1977), some of the factors that may be responsible for this trend have also been discussed, the most important of which might be increasing modernity of the ~~all~~ all age groups rather than the factor of education alone (Dow, 1977).

When the prolonged period of breast feeding is taken together with the question "Do you have sexual intercourse when you are breast feeding" to which 91.3% replied No", it is obvious that lactation plays a significant role in family spacing in these women. 39 women (2.7%) admitted to having sexual intercourse during breast feeding. This percentage was evenly distributed among all age groups.

Every effort should be made to encourage prolonged breast feeding in these communities. Apart from its role in family spacing, there are also good nutritional reasons for doing so. Breast milk is the most important source of protein available to children in these communities. It is cheap, clean and relatively sterile. However, in recent years, commercial interests have been mounting promotional efforts to persuade women in tropical countries, who ignorantly identify their use with modernity, to substitute imported powdered milk for breast milk.

These imports are often not cheap, and require clean water, which in most rural communities is not available, for reconstitution. Gastro-intestinal infections often accompany their uninformed use. Previous studies have also shown that Lactose intolerance develops at the age of two years which co-incides with the age at which most children are weaned (Olatunbosun and Adadevoh, 1972).

CHAPTER VI

Fertility and subfertility

The data on births, and fertility are summarised in the following tables with explanatory notes where applicable.

LIFE TABLE SHOWING BIRTHS, CHILD LOSS AND SURVIVING CHILDREN

Age (Years)	<u>BIRTHS</u>			<u>CHILD LOSS</u>			<u>SURVIVING CHILDREN</u>	
	Number of Women	Total Number of Children Ever born	Average Per Woman	Total Dead	Average Per Woman	% Not Surviving	Number of Children	Average Per Woman
15 - 19	113	86	0.76	7	0.06	8.1	79	0.70
20 - 24	314	523	1.67	61	0.19	11.7	462	1.47
25 - 29	363	1037	2.86	175	0.48	16.9	862	2.37
30 - 34	278	1027	3.69	216	0.78	21.0	811	2.91
35 - 39	162	675	4.17	143	0.88	21.2	532	3.28
40 - 44	112	502	4.48	160	1.43	31.9	342	3.05
45 - 49	89	413	4.64	136	1.52	32.9	277	3.11
Total	1431	4263	2.98*	898	0.63	21.1	3365	2.35

*Comparative data for average live births previously published are Oyo 2.44, Ife 2.75, Ibadan 3.05 and Lagos 4.0. (Please see Table 9.3 page 195 Population Growth and Socioeconomic change in Africa. Edited by J.C. Caldwell and published by the Population Council, New York.)

PERCENTAGES OF WOMEN AGED 15 TO 49 AND THE NUMBER OF
SURVIVING CHILDREN

NUMBER OF SURVIVING CHILDREN

<u>Ages of Women (Years)</u>	0	1	2	3	4	5	6	7	8	
15 - 19	34.6	18.3	1.8	0.7	0	0	0	0	0	
20 - 24	30.8	39.1	29.9	10.0	2.2	1.2	0	0	0	
25 - 29	10.8	19.1	34.4	33.9	25.7	6.0	11.4	8.3	0	
30 - 34	6.9	10.6	15.7	29.4	30.2	35.7	17.1	0	0	
35 - 39	6.9	4.0	6.8	13.5	17.9	26.2	42.9	50.0	100	
40 - 44	5.4	5.0	5.5	7.6	14.0	14.3	17.1	16.7	0	
45 - 49	4.6	3.1	5.5	4.8	9.5	16.7	11.4	25.0	0	
Column Total	130	322	381	289	179	84	35	12	1	1431
% of Total	9.1	22.5	26.6	20.2	12.5	5.9	2.4	0.8	0.10	100

NOTE

130 women or 9.1 percent of the total reported no surviving children at the time of the survey. These include those who were infertile and those who had no surviving children as a result of high infant mortality rate. The majority of these women 76.2 percent of them were in the age group 15 to 29 years of marriage. Only 4.6 percent of these 130 women, i.e. those with presumably completed fertility in the age group 45 to 49, could be regarded as being permanently childless.

PERCENTAGE DISTRIBUTION OF THE WOMEN RESPONDENTS
CORRELATED WITH NUMBER OF LIVE BIRTHS

<u>Number of</u> <u>Live Births</u>	<u>Number of</u> <u>Women</u>	<u>As % of</u> <u>Total</u>
0	94	6.6
1	247	17.2
2	310	21.6
3	269	18.8
4	196	13.7
5	142	9.9
6	94	6.6
7	47	3.3
8	19	1.3
More than 8	14	1.1

The incidence of primary infertility defined as 0 live births is 6.6 percent. This is further broken down by age and duration of marriage in the next table.

PERCENTAGE OF MARRIED WOMEN AGED 15 to 49 YEARS

REPORTING NO LIVE BIRTHS CORRELATED WITH AGE AND DURATION
OF MARRIAGE

<u>Age of Women</u> <u>Years</u>	<u>DURATION OF MARRIAGE IN YEARS</u>						
	1	2	3	4	5	6	7
15 - 19	58.9	0	0	0	0	0	0
20 - 24	39.7	41.7	0	0	0	-	0
25 - 29	1.4	50.0	0	0	0	-	0
30 - 34	0	8.3	50	0	0	-	0
35 - 39	0	0	50	66.7	0	-	0
40 - 44	0	0	0	33.3	100	-	0
45 - 49	0	0	0	0	0	-	100
Total Per- centage	100	100	100	100	100	0	100
Total number of Women	73	12	4	3	1	0	1

The total number of women reporting no live births 94 represented 6.6 percent of the women. Only 7 of them were in the age group 25 to 29 years, one of these women had been married for only one year and the remaining 6 had been married for 2 years. The incidence of childlessness among women in the age group 25 to 29 years is extremely low (7 out of 363 or 1.9%) when compared with recent data obtained in central and West Africa by Belsey (1976). The incidence of childlessness in women aged 25 to 29 ranged from 6.8% in Southern Kivu Province of Zaire to 50.7% in the Bas-Vele region of that country.

NUMBER OF WOMEN AGED 15 TO 49 YEARS
REPORTING ONE LIVE BIRTH CORRELATED WITH DURATION
OF MARRIAGE

<u>Duration of</u> <u>Marriage Years</u>	<u>Number of</u> <u>Women</u>	<u>As % of</u> <u>1431 Total</u>
1	149	10.4
2	59	4.1
3	16	1.1
4	10	0.7
5	6	0.4
6	6	0.4
Total	246	17.2

The total number of women reporting one live birth is 246. This is broken down by age in the next table.

PERCENTAGE OF MARRIED WOMEN REPORTING ONE LIVE BIRTH
CORRELATED WITH AGE AND DURATION OF MARRIAGE

<u>Age of Women</u> <u>Years</u>	<u>DURATION OF MARRIAGE IN YEARS</u>					
	1	2	3	4	5	6
15 - 19	36.2	5.1	0	0	0	0
20 - 24	58.4	27.1	31.3	0	0	0
25 - 29	5.4	54.2	31.3	0	0	0
30 - 34	0	8.5	31.3	50	0	16.7
35 - 39	0	5.1	6.1	40	16.7	33.3
40 - 44	0	0	0	10	83.3	50
45 - 49	0	0	0	0	0	0
Total Percentage	100	100	100	100	100	100
Total Number of Women	149	59	16	10	6	6

NUMBER OF WOMEN AGED 15 TO 49 YEARS REPORTING
2 LIVE BIRTHS CORRELATED WITH DURATION OF MARRIAGE

<u>DURATION OF</u> <u>MARRIAGE YEARS</u>	<u>NUMBER OF</u> <u>WOMEN</u>	<u>AS % OF</u> <u>1431 TOTAL</u>
1	54	3.8
2	165	11.5
3	45	3.1
4	28	2.0
5	6	0.4
6	7	0.5
7	2	0.14
TOTAL	307	21.5

The total number of women reporting 2 live births is 307. This is broken down by age in the next table.

PERCENTAGE OF MARRIED WOMEN REPORTING 2 LIVE BIRTHS

CORRELATED WITH AGE AND DURATION OF MARRIAGE

DURATION OF MARRIAGE IN YEARS

<u>Age of Women Years</u>	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>
15 - 19	13.0	1.8	0	0	0	0	0
20 - 24	68.5	49.1	2.2	0	0	0	0
25 - 29	16.7	41.8	35.6	10.7	0	0	0
30 - 34	1.8	6.7	55.6	42.9	0	0	0
35 - 39	0	0.6	4.4	39.3	22.2	0	0
40 - 44	0	0	0	7.1	66.7	28.6	0
45 - 49	0	0	0	0	11.1	71.4	100
Total Percentage	100	100	100	100	100	100	100
Total No. of Women	54	165	45	28	6	7	2

NUMBER OF WOMEN AGED 15 TO 49 YEARS REPORTING
3 LIVE BIRTHS CORRELATED WITH DURATION OF MARRIAGE

<u>Duration of</u> Marriage Years	<u>Number of</u> Women	<u>As % of</u> 1431 Total
1	6	0.4
2	122	8.5
3	79	5.5
4	32	2.2
5	20	1.4
6	10	0.7
Total	269	18.8

The total number of women reporting 3 live births is 269. This is broken down by age in the next table.

PERCENTAGE OF MARRIED WOMEN AGED 15 to 49 YEARS
REPORTING 3 LIVE BIRTHS CORRELATED WITH AGE AND
OF MARRIAGE

DURATION OF MARRIAGE IN YEARS

<u>Age of Women Years</u>	1	2	3	4	5	6
15 - 19	0	2.5	0	0	0	0
20 - 24	50	28.7	1.3	0	0	0
25 - 29	0	62.3	44.3	3.1	0	0
30 - 34	50	6.5	45.8	43.8	0	0
35 - 39	0	0	8.8	43.8	20	0
40 - 44	0	0	0	6.3	60	50
45 - 49	0	0	0	3.0	20	50
Total Percentage	100	100	100	100	100	100
Total Number of Women	6	122	79	32	20	10

NUMBER OF WOMEN AGED 15 TO 49 YEARS REPORTING
4 LIVE BIRTHS CORRELATED WITH DURATION OF
MARRIAGE

<u>Duration of Marriage</u> <u>(Years)</u>	<u>Number of</u> <u>Women</u>	<u>As % of</u> <u>1431 Total</u>
1	3	0.2
2	37	2.6
3	63	4.4
4	50	3.5
5	25	1.7
6	13	0.9
7	3	0.2
Total	194	13.6

The total number of women reporting 4 live births is 194. This is broken down by age in the next table.

PERCENTAGE OF MARRIED WOMEN AGED 15 TO 49 YEARS REPORTING
4 LIVE BIRTHS CORRELATED WITH AGE AND DURATION OF MARRIAGE

DURATION OF MARRIAGE IN YEARS

<u>Age of Women</u> <u>Years</u>	1	2	3	4	5	6	7
15 - 19	0	0	0	0	0	0	0
20 - 24	0	21.6	4.8	0	0	0	0
25 - 29	66.7	75.7	46.0	6.0	4.0	0	0
30 - 34	33.3	2.7	42.9	58.0	12.0	0	0
35 - 39	0	0	6.3	32.0	28.0	0	0
40 - 44	0	0	0	4.0	40.0	38.5	0
45 - 49	0	0	0		16.0	61.5	100
Total Percentage	100	100	100	100	100	100	100
Total Number of Women	3	37	63	50	25	13	3

WHETHER PREGNANT WITHIN PREVIOUS 18 MONTHS

BY PERCENTAGE RESPONSE

Age of Women	Yes	No	Other Response	Row Total Number of Women
15 - 19	67.3	31.0	1.8	113
20 - 24	65.0	32.8	1.6	314
25 - 29	58.3	40.6	1.1	362
30 - 34	48.9	49.6	0.7	278
35 - 39	34.8	64.6	0.0	161
40 - 44	19.6	77.7	2.7	112
45 - 49	28.1	70.8	1.1	89
Column Total	730	679	17	1431
As % of Total	51.0	47.4	1.2	100

OUTCOME OF PREGNANCY WITHIN LAST 18 MONTHS (BY PERCENTAGE)

AGE OF WOMEN YEARS	LIVE BIRTH BABY ALIVE	LIVE BIRTH BABY DEAD	MISCARRIAGE	STILL BIRTH	STILL PREGNANT	OTHER
15 - 19	9.6	4.5	5.3	0	14.6	4.9
20 - 24	29.0	4.5	15.8	33.3	28.7	14.6
25 - 29	30.7	22.7	5.3	33.3	26.2	22.8
30 - 34	18.1	18.2	31.6	33.3	18.9	21.0
35 - 39	7.0	22.7	21.1	0	7.9	14.0
40 - 44	3.0	13.6	5.3	0	1.8	12.5
45 - 49	2.6	13.6	15.8	0	1.8	9.9
Column Total	531	22	19	3	164	534
As % of Total	37.1	1.5	1.3	0.2	11.4	37.3

The incidence of pregnancy wastage and infant loss appears to be quite low, about 3%. It thus appears that the high prevalence of child loss occurs later on at weaning when malnutrition and its attendant effects begin.

OUTCOME OF FIRST PREGNANCY (BY PERCENTAGE)

AGE OF WOMEN YEARS	LIVE BIRTH BABY ALIVE	LIVE BIRTH BABY DEAD	MISCARRIAGE	INDUCED ABORTION	STILL BIRTH	OTHER
15 - 19	5.5	3.3	8.7	33.3	33.3	36.7
20 - 24	22.6	13.0	17.4	33.3	44.4	28.4
25 - 29	27.7	22.3	17.4	33.3	11.1	9.2
30 - 34	20.1	23.4	30.4	0	11.1	5.5
35 - 39	11.8	12.0	0	0	0	8.3
40 - 44	7.4	10.3	13.0	0	0	7.3
45 - 49	4.6	15.8	13.0	0	0	4.6
Column Total	1101	184	23	3	9	109
As % of Total	76.8	12.8	1.6	0.2	0.6	7.6

The "other" response includes women who have not yet had their first delivery and those who were still pregnant. It is remarkable that more than three quarters of the pregnancies resulted in a successful outcome. This is indicative of the quality of obstetric care provide at the rural health centre.

OUTCOME OF SECOND PREGNANCY (BY PERCENTAGE)

AGE OF WOMEN YEARS	LIVE BIRTH BABY ALIVE	LIVE BIRTH BABY DEAD	MISCARRIAGE	INDUCED ABORTION	STILL BIRTH	NOT APPLICABLE
15 - 19	1.7	0.0	7.1	0	0	27.6
20 - 24	17.0	10.4	14.3	0	25	40.5
25 - 29	29.7	24.2	21.4	33.3	25	15.1
30 - 34	23.5	23.6	21.4	66.7	25	6.6
35 - 39	13.6	14.8	0	0	0	4.3
40 - 44	7.9	14.8	14.3	0	25	3.7
45 - 49	6.3	12.1	21.4	0	0	2.3
Column Total	875	182	14	3	4	351
As % of Total	61.2	12.7	1.0	0.2	0.3	24.5

OUTCOME OF THIRD PREGNANCY (BY PERCENTAGE)

AGE OF WOMEN YEARS	LIVE BIRTH BABY ALIVE	LIVE BIRTH BABY DEAD	MISCARRIAGE	STILL BIRTH	NOT APPLICABLE
15 - 19	0.5	0	0	0	16.7
20 - 24	7.4	5.3	9.2	11.1	38.9
25 - 29	28.8	23.7	4.8	44.4	22.9
30 - 34	28.8	23.7	33.3	33.3	9.4
35 - 39	15.8	21.4	14.3	0	5.2
40 - 44	10.4	13.0	19.0	0	4.2
45 - 49	8.2	13.0	19.0	11.1	2.6
Column Total	608	131	21	9	660
As % of Total	42.4	9.1	1.5	0.6	46.4

Annals

Some Correlates of Number of Live Births

Effect of Duration of Marriage on Number of
Live Births

Duration of Marriage Years	Number of Women	Average number of Live Births
0 - 4	415	1.01
5 - 9	396	2.31
10 - 14	264	3.56
20 - 24	104	5.05
More than 24	66	5.09

It is not surprising that there is a progressive increase in the average number of live births with increasing lengthening of duration of marriage.

EFFECT OF POLYGAMY OF NUMBER OF
LIVE BIRTHS

The question - how many wives does your husband have including yourself? correlated with average number of live births.

Number of wives	Number of women	As % of Total	Average number of live births
1	569	39.7	2.6
2	483	33.7	3.3
3	211	14.7	3.5
4	111	7.7	2.4
5	11	0.8	2.8
6	10	0.7	2.8
More than 6	9	0.7	3.1

The total percentage does not add up to 100 because of no response in some of the women. Polygamy does not have any adverse effect on fertility.

Number of Times Married Altogether
Correlated with Number of Live Births

Number of times married	Number of women	As % of Total	Average No. of children
1	1122	78.3	2.97
2	168	11.7	0.43
3	10	0.7	4.6
Other including response	132	9.2	2.72

There is probably no correlation between number of times married and average number of children although more women desirous of children are more likely than women of proven fertility to marry more than once.

Effect of Position Among Wives
On Number of Live Births

The question "what is your position among your husband's wives" correlated with average number of live births?

Position among wives	Number of women	As % of total	Average No. of children
First	896	62.5	3.12
Second	376	26.2	2.98
Third	98	6.8	2.62
Fourth	37	2.6	2.73
Fifth	2	0.1	1.0
Sixth	2	0.1	1.0
Seventh	1	0.1	1
Eight	1	0.1	1
Ninth	2	0.1	1.5

The first wife is usually the eldest among the wives and has been married longest; hence the highest average number of live births. The later additions to the number of wives have not been married long enough thus the low average for these women.

Effect of Respondent's Attitude to
Sterility on Live Births

Cause of sterility	No. of women	As % of total	Average No. of Live Births
No Response	1	0.1	5
God's design or Destiny	52	3.6	2.3
Sexual Abuse	74	5.2	2.7
Old Age	3	0.2	1.7
Evil People	1	0.1	3.0
Biological Impairment	134	9.1	2.5
Marital Instability	7	0.5	2.9
Other Reasons	641	44.7	2.4
Don't know	520	36.3	2.2

Women's attitude to sterility has no effect on live births.

Effect of how many wives father had on respondents
number of live births

<u>Number of</u> <u>wives</u>	<u>Number of</u> <u>women</u>	<u>As % of</u> <u>Total</u>	<u>Average Number</u> <u>of Live Births</u>
1	172	12.0	2.71
2	521	36.4	4.6
3	260	18.2	2.9
4	242	16.9	3.1
5	44	3.1	3.3
6	56	3.9	3.4
7	13	0.9	4.0
8	24	1.7	3.8
More than 8	96	6.7	4.0

The number of fathers wives had no effect on number of live births.

Number of people in husbands household Vs. Number of
Live Births

<u>No. of</u> <u>people</u>	<u>No. of</u> <u>women</u>	<u>As % of</u> <u>Total</u>	<u>Average No.</u> <u>of Births</u>
1	12	0.8	1.42
2	80	5.6	1.0
3	131	9.1	1.9
4	172	12.0	2.5
5	152	10.6	3.11
6	137	9.6	2.8
7	129	9.0	3.4
8	124	8.7	3.5
9	91	6.4	3.7
10	78	5.4	3.6
11	40	2.8	4.0
12	54	3.8	4.1
13	48	3.3	3.3
14	26	1.8	4.3
15	38	2.7	3.9
16	14	1.0	3.2
17	8	0.6	3.0
18	11	0.8	3.5
19	9	0.6	3.3
20	17	1.2	3.3
More than 20	7	0.5	3.1

There is no correlation between number of people in husbands household and average number of live births.

Effect of Religion on Live Births and Child Loss

<u>Religion</u>	<u>Number of women</u>	<u>As % of Total</u>	<u>Average No. of Live Births</u>	<u>Average No. of Child Loss</u>
Moslem	1,188	83.0	3.0	0.71
Christian				
Protestant	220	15.4	3.3	0.71
Christian Catholic	23	1.6	2.9	0.38
Traditional*	1	0.1	4.0	3.0

The traditional religions beliefs of the Yoruba recognise the existence of a supreme Being, Olodumare, the Great Creator. Man cannot have direct access to this Being thus the need for lesser gods or Orisha as mediators. These gods are not worshipped for their own sakes. See Olodumare, God in Yoruba belief Idowu, (1962).

Religious beliefs had no effect on average number of live births but Christian Catholics had lowest average of Child loss.

CHAPTER VII

Medical examination and case histories
of women complaining of infertility

At the end of the medical history section of the fertility questionnaire, the interviewers were requested to indicate whether or not the respondent was to be referred to University College Hospital in Ibadan for further medical attention. The reasons for referral were not limited to those pertaining to fertility. 72 women (5.0% of the total) expressed the desire to be seen at the U.C.H. The questionnaires of these women were individually examined by a team of 3 doctors (2 gynaecologists and the author) and the case histories of 45 of them were adjudged to be related to infertility. 30 women were thought to have problems of secondary infertility and 15 primary infertility. The clinical histories are summarised in the tables.

Secondary Infertility

The average age of the women was 33 years with a range of 25 to 48 years. The average duration of marriage was 13.4 years with a range of 6 to 25 years. Ten women were in monogamous unions and the remaining 20 were in polygamous marriages. Nine women had no living children and the remaining 21 had one living child each. Six women claimed to have had "miscarriages" in the previous 18 months. This should be accepted with great caution because the "Miscarriages" may, in fact, have been missed menstrual periods rather than actual pregnancies which spontaneously aborted.

However, the remaining 24 women admitted that they had not been pregnant within the preceding 18 months.

Six of the women (20%) were married more than once. This proportion is higher than in the population as a whole and demonstrates the social pressures to which subfertile and infertile women are subjected in this culture. These women had resorted to changing husbands in the expectation and hope of fulfilling motherhood through "trying elsewhere". The prevalence of secondary infertility in this survey is only 2.0% and is quite low.

Primary Infertility

Fifteen women were identified as cases of primary infertility from the questionnaires. The average age was 31.3 years with a range of 20 to 47 years. The average duration of marriage was 13.8 years with a range of 4 to 30 years. Three of the women were in monogamous unions. Four out of the 15 women (26.6%) had been married more than once, indeed, one woman had been married thrice and another four times. As indicated in the preceding section, women desirous of having children tend to marry more than once in the hope of achieving motherhood in a subsequent marriage.

By the time arrangements were completed to transport these women from the villages to the University Hospital, where the facilities for detailed clinical and laboratory investigations were available, four of the women had become pregnant and successfully delivered of live babies, five were not available either because they were out of town or had left the husband (one case) and the case histories of the six who were examined at the hospital are summarised below.

Clinical Case Histories - Primary Infertility

1. A.A. Aged 35. Has been married for 15 years. Husband is Produce Inspector Officer. Has two other wives; one has two children aged 6 and 4 years respectively and the other has a child a few months old. Had a dilatation and curettage operation in another hospital in Ibadan in 1970, as part of investigation for infertility. Coital habits : 4 times a week. Reports effluvium seminis. Clinical examination showed no abnormality in all the systems but abdominal examination revealed a uterine fibroid the size of a 14 week pregnancy.

2. S.J. Aged 35. Has been married twice in the past 17 years. The first lasted 7 years and the second is in its 8th year. Present husband is a 60 year old farmer with 3 other wives. Has been separated from the present husband for the past 6 months and was living with her father. Both husbands had children by other wives. Had consulted two other hospitals for investigation of her infertility. Coital frequency : four times a week. Clinical investigation showed a right sided ovarian cyst. Microscopy of vaginal discharge revealed the presence of *Trichomonas vaginalis*. Was treated with Metronidazole and tetracycline.

Serial Number	Age - Years	Current Marital Status	Duration of Marriage Years	Number of Husbands Wives	Rank among wives	Living children sex & age	Number of dead children and cause	Outcome of pregnancy within past 18 months	Frequency of Coitus per week	Reason for Referral U.C.H. Clinical diagnosis
<u>Secondary Infertility</u>										
1.	25	M	11	2	2nd	One F. 8	One 4 F. Convulsions and 5 days F. "	None	2	Infertility
2.	29	M	12	2	2nd	None	15. Unknown	None	2	Married twice. Duration - First marriage 3 years. No living children
3.	32	M	12	3	3rd	One F 10	None	None	2	Infertility for 10 years
4.	41	M	22	3	1st	One F 18	M. 2½ years Convulsions	None	1	Infertility
5.	48	M	25	1	1st	None	M.5 Small pox	None	2/month	No living children. Infertility
6.	34	M	11	2	2nd	One F 10	One Miscarriage at 3 months	None	2/month	Infertility
7.	28	M	8	4	3rd	None	4 dead children all under one year	None	12	Married twice. Duration - First marriage 3 years. High rate of child loss.
8.	30	M	8	1	1st	None	2 dead at 3 years each	None	1	No living children. Frequent miscarriages
9.	32	N	15	2	2nd	One F 5	One dead. Male at 3 years	None	2	Infertility Effluvium Seminis
10.	25	M	10	2	2nd	One M 4	2 miscarriages	Miscarriage	1	Infertility Frequent miscarriages
11.	30	M	10	1	1st	One M 4	4 dead of neonatal convulsions	None	1/month	High rate of child loss
12.	32	M	8	2	2nd	One F 7	3 dead of convulsion	None	Anytime	High rate of child loss
13.	32	M	8	1	1st	One F 6	Miscarriage	Miscarriage	1/month	Infertility
14.	37	M	20	6	5th	None	3 dead	None	1	Married twice. First marriage lasted 5 years. No living children
15.	35	Widowed	15	3	1st	One F 12	1 dead	None	None	Last child 12 years ago Rainfall menstruation Frequent miscarriages
16.	45	Married	16	3	3rd	One M 7	None	None	2	Married twice. First Marriage lasted 15 years. Infertility
17.	41	Married	25	3	1st	None	One still birth One miscarriage	None	1	No living children. No successful pregnancy
18.	33	Married	12	1	1st	One M 12	None	None	Any time	Infertility 12 years

CLINICAL HISTORIES OF INFERTILITY CASES (cont'd)

Serial Number	Age - Years	Current Marital Status	Duration of Marriages Years	Number of Husbands' Wives	Rank among wives	Living children sex & age	Number of dead children and cause	Outcome of pregnancy within past 18 months	Frequency of Coitus per week	Reason for Referral U.C.H. Clinical diagnosis
19.	26	Married	6	2	2nd	One F 4	Two at less than 3 months of convulsions and failure of lactation respectively	Miscarriage	1	Frequent miscarriage and high rate of child loss
20.	30	"	10	2	1st	One M 9	None	Miscarriage	4	Infertility
21.	30	"	12	2	2nd	One M 11	One F 4 convulsions	None	2	Infertility
22.	30	"	16	2	2nd	One F 12	One M 2, fever	None	3	Married twice. First marriage lasted 12 years. Infertility
23.	30	"	10	1	1st	None	Three	Miscarriage	2	Married twice. First marriage lasted 6 years, during which she had 3 live births all dead. No living children. Frequent miscarriages.
24.	25	"	8	2	1st	One M 6	One neonatal	None	2	Infertility
25.	41	"	24	1	1st	One F 23	None	None	6	Infertility
26.	30	"	10	1	1st	None	One M 3	None	3	No Living children Efluvium Seminis Infertility
27.	35	"	15	3	2nd	One F 10	One M 4 and one F. 5 months - convulsions	None	3	Infertility Frequent miscarriages
28.	35	"	15	3	2nd	None	One M 3, and one M 1½ Measles	None	2	No living children. Infertility
29.	30	"	14	1	1st	One F 6	One F 3 Gastroenteritis	None	2	Infertility
30.	40	"	20	1	1st	One F 15	None	Miscarriage	1	Infertility

Primary Infertility

1.	25	"	7	1	1st	None	None	Miscarriage	3	Married twice. First marriage lasted 6 years. Frequent miscarriages. Infertility
2.	36	"	20	3	1st	None	None	None	1	Married twice. First marriage lasted 14 years Primary Infertility
3.	29	"	14	8	4th	None	None	Miscarriage	4	Frequent miscarriages No children

Serial Number	Age - Years	Current Marital Status	Duration of Marriage Years	Number of Husbands' Wives	Rank among wives	Living children sex & age	Number of dead children and cause	Outcome of pregnancy within past 18 months	Frequency of Coitus per week	Reason for Referral U.C.H. Clinical diagnosis
5.	44	Married	25	3	3rd	None	None	None	2	Primary Infertility
6.	35	"	17	6	1st	None	None	None	3	Primary Infertility
7.	20	"	7	2	2nd	None	None	None	4	Primary Infertility
8.	30	"	10	2	2nd	None	None	None	1	Primary Infertility
9.	26	"	7	2	1st	None	None	Miscarriage	4	Primary Infertility
10.	30	"	15	3	2nd	None	None	None	1	Semen coming out of vagina before menstrual period
11.	47	"	30	3	3rd	None	None	Miscarriage	1	Married four times. Duration - First marriage 7 years, second 9 years, third 4 years. Current marriage is in its 10th year.
12.	39	"	16	2	2nd	None	None	None	3	Primary Infertility
13.	22	"	6	1	1st	None	None	Miscarriage	3	Primary Infertility. Frequent miscarriage
14.	24	"	8	1	1st	None	None	None	2	Primary Infertility
15.	45	Separated	21	3	1st	None	None	None	0	Married thrice before separation. Duration - First marriage 9 years, second 7 years and third 5 years. Primary Infertility

3. B.A.A. Aged 30. Married for 10 years altogether.
This is her second marriage, the first lasted 9 years. First husband had 4 wives and 8 children. She is the only wife of her second husband but he too was previously married. Coital frequency : twice weekly. Had laparotomy in 1966 at University College Hospital, Ibadan. Previous history of "miscarriages" in 1971 and 1975; both after two months amenorrhoea. Clinical examination showed no abnormal findings, apart from para umbilical abdominal scar.
4. S.A. Aged 32. Married for 12 years altogether. This is her third marriage, the previous two lasted 4 years each. This present marriage is, however, to her first husband. She is the third wife of her husband who has had 7 children by the other two wives. Coital frequency is 3 times a week. In 1971 she was seen by a doctor at a Rural Health Centre who prescribed some tablets for her. Clinical examination showed no abnormal findings. Microscopic examination of vaginal discharge revealed *Trichomonas vaginalis* and Yeast forms for which she was treated with Metronidazole and Nystatin.
5. M.A. Aged 42. Married for 22 years to farmer who is now 60 years old. Husband has another wife who also has no children. Coital habits not stated. Clinical and laboratory examinations revealed no abnormal findings.

6. E.O. Aged 30 years. Married for 7 years to husband who has another wife. This wife has an 18 month old child. Coital frequency : 3 times a week. Clinical examination showed bilateral cystic ovaries which were not significantly enlarged.

All the patients with both primary and secondary infertility were transferred to the infertility clinic of U.C.H. for further investigation and follow up. The protocol for the clinical examination of the patients in the survey is shown in Appendix

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A P P E N D I C E S

Visit to Ikire - 13th June, 1975

The following members of the Planning Committee for the study were at Ikire.

Dr. D.A. Olatunbosun

Dr. O.A. Dada

Dr. J.O. Bolodeoku

Dr. P.A. Ibeziako

Dr. O.A. Ladipo

Dr. O.O. Arowolo

Mrs. S.A. Marinho

Dr. I.I. Ekanem (Ife University)

Professor B. Kwaku Adadevoh

Dr. Ekwere of the Health Centre, Ikire met the team along with Mrs. Fadahunsi, Nursing Sister. The team was fortunate that the visit coincided with the visit of Dr. Ifedayo Adetosoye of the Statistical/Epidemiological Unit, Ministry of Health, Western State. We were informed that only two months ago a successful health campaign week had taken place. The Planning Committee for this campaign included a number of persons from the village and the slogan for the campaign was "HEALTHY LIFE IS A HAPPY LIFE". It was therefore felt that our visit was timely. After explaining the essence of our mission, it was agreed that we should meet the Council Manager, Mr. I.A. Ogundele. Unfortunately, he was away on duty travel

but we spoke to his Secretary, Mr. Odewenwa. The purpose of our visit on the survey seemed to have been well received and a staff of the Council was allocated to show us round the area comprising of the three villages - Ikoyi, Apomu and Ikire. This familiarisation tour provided additional background for planning the strategy for the survey. We met casually with one of the Chiefs who received us enthusiastically.

Dr. Olatunbosun and Dr. Arowolo will lead another team to Ikire Thursday, 19th June at 10.00 a.m. an appointment was made for them to meet with the Council Manager, Mr. I.A. Ogundele

Dr. Adetosoye was enthusiastic about the project and promised to have an earlier discussion with the Controller of Medical Services, Western State of Nigeria - Dr. Akinsete. Next week an official meeting with Akinsete will take place.

The draft questionnaire was remodified and shortened.

B.K. Adadevoh, M.D.

Visit to Ikire on Thursday, 19th June, 1975

Members: Dr. D.A. Olatunbosun
 Dr. O.O. Arowolo
 Miss F. Gbadebo)
 Miss T. Johnson) Interviewers
 Miss O. Koleoso))
 Miss A. Banjo))
 Miss M. Adeboye)

Dr. Arowolo and myself were received in his office by the Council Manager of Aiyedade District Council area, Mr. I.A. Ogund who informed us that he had arranged for us to meet the rulers of Ikire, Apomu and Ikoyi at the Town Hall in Ikire.

The meeting at the Town Hall was opened with a short devotion by an Alhaji who asked for God's blessings on our work and on all the people of the town. Dr. Arowolo and I were introduced to the Alakire and his chiefs and we paid traditional obeisance to these elders. The female members of our team were also introduced. The rulers of Ikoyi and Apomu were not present at the meeting but sent their senior chiefs to represent them.

The Council Manager is a senior administrative officer sent by the State Government to assist the local authorities with the local administration. He is directly paid by the state government and can be reassigned to other local government areas or to other duties in the administrative

service of the state. Before this innovation the local authorities were staffed by people of relatively poor education. Corruption and inefficiency were common. The new arrangement of having trained administrators, often university graduates, as council managers has received enthusiastic support of the people of the state. Development efforts are on the increase and the process of transformation of the rural areas is making a promising start. However, as the Council Manager, Mr. Ogundele pointed out, finance is a major constraint to accelerated development. The tax base is narrow because of the exodus of young people (often the educated ones) to Ibadan, Lagos and other big cities in search of employment.

Mr. Ogundele spoke in Yoruba and explained that the project of our visit was to survey the health needs of the people. Our visit was a follow-up to the successful health campaign week recently held in the area. We were to ask questions about the people, how they lived and what illnesses were present. This would enable the Government to plan effectively for their needs. It was emphasised that we were from Ibadan University and had no connection with the Government revenue department. To emphasise this, the interviewers were all to be females.

Dr. Arowolo spoke next. He in fact, was born at Ode-Omu, one of the villages in the District Council Area, 25 km. from Ikire on the way to Osogbo. The presence of Dr. Arowolo in the

team was an unexpected bonus. As a native of the area he was able to emphasise our interest in the improvement in the health of the people of the area.

Dr. Olatunbosun explained that females were selected as interviewers because certain questions relating to child health and maternity were better asked by females from females. Those who needed medical care would receive free treatment at U.C.H. The team also had two gynaecologists who could assist those who needed help with problems of infertility.

At question time, a senior chief wanted to know whether our main concern was with the health of the women alone. The reply was that we were interested in everybody. It was also explained that we could not possibly visit every household. Those who were not visited should not take offence at this.

The Alakire and the chiefs offered their fullest co-operation and wished us well. He promised to summon a meeting of all the households in Ikire so that everyone would know of our survey and assist us in our task. The representatives of the Onikoyi and Alapomu promised to do the same at Ikoyi and Apomu.

The Health Sister, Mrs. Fadahunsi, two of her midwives, and the Dispensary Attendant were also present at the meeting. The Council Manager thanked the chiefs for attending the meeting. He also promised to assist us in whatever way he could.

The meeting ended with prayers by Muslim and Christian leaders.

Later at the Council Offices the Council Manager gave us aerial maps of Ikire, Apomu and Ikoyi to assist us in selecting the clusters for our survey.

The next visit is planned for Friday, 27th June, 1975 to meet Mrs. Fadahunsi and the local interviewers she has selected.

D.A. Olatunbosun, M.D.

19th June, 1975.

SUBFERTILITY AND INFERTILITY SURVEY

Department of Chemical Pathology,
University of Ibadan.

(Part I)

HOUSEHOLD QUESTIONNAIRE

Name of Locality

Household No.

Address of Household

.....

.....

Head of Household:

 Name

 Sex

Name of Interviewer

Duration of Interview (Minutes)

Date of Interview

Language of Interview

.....

Outcome of Interview:

 1. Completed

 2. Refused

 3. Not Completed

If 2 or 3, give reasons

.....

.....

.....

.....



4. (To be completed by the Interviewer)

Quality of housing:

Mud

Brick

Concrete

Tuatch

Title

Iron Sheet

5. Number of births within the household during the past twelve months to be listed below:

No.	Mother's Age (in complete) Years	Sex		Foetal Deaths		
		Male	Female	Miscarriage	Still birth	Aborti
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

6. Number of deaths within the household during the past twelve months - to be listed below:

Name of the deceased	Age at the time of death (in years)	Sex	Cause of death
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			

Interviewer's Guide:

- (a) For column (7) the following marital conditions are applicable
- Married
 - Never married/unmarried
 - Divorced
 - Separated
 - Widowed
- (b) Type of marriage (column 8) refers to any or a combination of the following:
- Customary (Native Law and Custom)
 - Court (Registry)
 - Church
 - Moslem Tradition
 - By consent only
- (c) A person's occupation may belong to any of the following categories:
1. Unemployed
 2. Unpaid family work
 3. Trading
 4. Unskilled work (viz-labourer, miner, etc.)
 5. White collar (viz. teachers, nursing personnel, etc.)
 6. Farming/Fishing
 7. Craftwork
 8. Service
 9. Professional (viz graduate teachers, doctors, etc.)
 10. Poorly defined occupation.
- (d) Level of Education:
1. Unable to read and write
 2. Some Primary Education but not completed
 3. Completed Primary Schooling
 4. Secondary School/Teacher's College
 5. Professional Training
 6. University
 7. Koranic School only.

SUBFERTILITY AND INFERTILITY SURVEY

Department of Chemical Pathology,
University of Ibadan

(Part II)

FERTILITY QUESTIONNAIRE LEVEL I

Only couples aged between 15 and 49 years at the time of Survey are considered eligible. The wife is considered eligible for fertility interview, and representing the 'couple' as such. Where a man has more than one wife all his wives are eligible and must be interviewed.

Name of Locality:
Household No:.....
Family No:
Language of Interview:
Comments:
.....
.....
Interviewer:

(Part I)

1. When were you born? _____ 19_____
Day Month Year

2. Age last birthday (State in years)

--	--

(If respondent does not know her age the interviewer should probe further and make an estimate. Record age in 2 above).

3. Where were you born?

--	--

01 Locality of interview

02 Elsewhere rural

03 Elsewhere urban

4. How long have you been living in your current place of residence, i.e. place of interview?
(Code in years, 01, 02, etc.)

--	--

Marital Conditions:

5. (a) Are you now
01 married
02 separated

--	--

03 divorced
04 widowed
05 unmarried (i.e. never married, single)
06 In de facto relationship?

(b) If married, how old were you when you first married?
(code in years) 01, 02, 03

--	--

(c) How long ago did you get married?
(code in years, 01, 02, 03, etc.)

(d) If unmarried but was married before
when do you hope to marry?
.....
.....

(e) At what age do you think is proper for a
girl to marry?
(code in years)

(f) How many wives do you think is ideal for a
happy family?
(code 01, 02, 03, 04, etc.)

(g) How many wives does your husband have now,
including yourself?
(Code 01, 02, 03, 04, etc.)

(h) What is your position among the wives?
01 1st
02 2nd
03 3rd
04 4th

(code as appropriate for any other position,
e.g. 07 for 7th, 11 for 11th, etc.)

(i) How many times have you been married altogether?
(Code number 01, 02, 03, etc.)

(j) State length of stay in each union (i.e. marriage)
and live births.

1st marriage	.....	years	.....	live births
2nd	"	.....	"	" "
3rd	"	.....	"	" "

(k) How many wives does (or did) your father have?

(code number 01, 02, 03, etc.)

--	--

6. How many people (including all other wives, their children, yourself and your children) now make up your husband's family (Household)?

(code in numbers 02, 03, 04, etc.)

--	--

Fertility and Mortality

7. State the age and sex of each of your living children.

No.	Age	Sex	Comments
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			

8. If any of your children had died state age at the time of death and sex.

No.	Age	Sex	Possible cause of death
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			

9. (a) Have you been pregnant within the last 18 months?

- 01 Yes
- 02 No
- 03 No response

--	--

(b) If Yes, what has been the outcome of the pregnancy (or pregnancies)?

- 01 Live birth, baby still living
- 02 Live birth, baby dead
- 03 Miscarriage (involuntary abortion)
- 05 Still Birth
- 06 Still pregnant

10. What were the outcomes of your last three pregnancies?

Possible Outcomes	Ist Pregnancy	2nd Pregnancy	3rd Pregnancy
1. Live birth/baby living			
2. Live birth/baby dead			
3. Miscarriage			
4. Induced Abortion			
5. Still birth			

11. Suppose you suddenly realize that you are pregnant what would you do?

--	--

- 01 I'll be too happy/carry pregnancy to term.
- 02 I'll be disturbed but will carry the baby.
- 03 Procure abortion
- 04 No response.

12. What do you think is the cause of sterility in some women?

.....

.....

.....

.....

13. Do you know of any means by which fertility can be induced in a sterile woman?

if so, how?

.....

.....

14. How many children do you expect to have altogether?

(Code number)

--	--

15. What do you think is the ideal (the best) sex composition of children in a family?

.....boys girls

16. What is the sex composition of your children now?

..... boys girls

17. Would you have another baby (or more babies) in order to achieve the ideal sex composition stated in (15)?

.....

18. Have you ever used any means to prevent you from becoming pregnant?

- 01 Yes
- 02 No
- 03 No response.

--	--

19. If yes, what means did you use?

.....
.....
.....

20. State the duration of each means mentioned in (18)

Means	Duration (in months)	Reason of discontinuation
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		

21. What is your religion?

- 01 Moslem
- 02 Christian - Protestant
- 03 Christian Catholic
- 04 Traditional
- 05 No religion
- 06 No response

--	--

Signature of Interviewer

Date:

8. Medical History (For Male Head of Household or
Husbands only)

Previous Illness and Operations

Abdominal Operations.

Hernia.

Tuberculosis.

Sexual History

How many wives of childbearing age do you have

Any difficulty with performing Sex: Yes/No

Poor Erection

Failure to ejaculate

How many times per week do you have sexual intercourse

How many times a week per wife

Have you had gonorrhoea before

If Yes where was it treated?

Is it permanently cured?

If No do you wish for further treatment?

Note Please write Name and household number here if
he wants further medical help.

Interviewer's Guide:

(a) For column (7) the following marital conditions
are applicable.

Married

Never married/unmarried

Divorced

Separated

Widowed

- (b) Type of marriage (column 8) refers to any or a combination of any of the following:
Customary (Native Law and Custom)
Court (Registry)
Church
Moslem Tradition
By consent only
- (c) A person's occupation may belong to any of the following categories:
1. Unemployed
 2. Unpaid family work
 3. Trading
 4. Unskilled work (viz-labourer, miner etc.)
 5. Farming/Fishing
 6. Craftwork
 7. Service
 8. Professional (viz graduate teachers, doctors etc.)
 9. Poorly defined occupation.
 10. White collar (viz., teachers, nursing personnel, etc.)
- (d) Level of Education:
1. Unable to read and write
 2. Some Primary Education but not completed
 3. Completed Primary Schooling
 4. Secondary Schol/Teacher's College
 5. Professional Training
 6. University
 7. Koranic School only

Marital Conditions:

4. (a) Are you now
 married (Please put X against correct one)
 separated
 divorced
 widowed
 unmarried (i.e. never married, single)
- (b) If married, how old were you when you first married
- (c) How long ago did you get married?
- (d) If unmarried but was married before, when
 do you hope to remarry?

- (e) At what age do you think is proper for a girl
 to marry?
- (f) How many wives do you think is ideal for a
 happy family?
- (g) How many wives does your husband have now,
 including yourself?
- (h) What is your position among the wives?
 (Put X against correct one)
- | | | | |
|-----|-----|-----|-----|
| 1st | 2nd | 3rd | 4th |
| 5th | 6th | 7th | 8th |
- (i) How many times have you been married altogether?
- (j) State length of stay in each union (i.e. marriage)
 and live births.
- | | | | | |
|--------------|-------|-------|-------|-------------|
| 1st marriage | ..... | years | ..... | Live births |
| 2nd " | ..... | " | ..... | " |
| 3rd " | ..... | " | ..... | " |
- (k) How many wives does your father have?
5. How many people (including all other wives, their
 children, yourself and your children) now make up
 your husband's household?

Fertility and Mortality

6. State the age and sex of each of your living children

No.	Age	Sex	Comments
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			

7. If any of your children had died state age at the time of death and sex.

No.	Age	Sex	Possible cause of death
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			

8. (a) Have you been pregnant within the last 18 months?

- Yes
- No
- No response

(b) If Yes, what has been the outcome of the pregnancy (or pregnancies)?

- Live birth, baby still living
- Live birth, baby dead
- Miscarriage (involuntary abortion)
- Still birth
- Still pregnant

9. What were the outcomes of your last three pregnancies?

Possible outcomes	1st Pregnancy	2nd Pregnancy	3rd Pregnancy
Live birth/baby living			
Live birth/baby dead			
Miscarriage			
Induced Abortion			
Still birth			

10. Suppose you suddenly realize that you are pregnant what would you do?

(Put X against correct one)

- I'll be too happy/carry pregnancy to term
- I'll be disturbed but will carry the baby
- Procure abortion
- I don't yet know what I'll do.

11. What do you think is the cause of sterility in some women?

.....

.....

.....

12. Do you know of any means by which an infertile woman can be helped to become pregnant?

.....

.....

.....

13. How many children do you expect to have altogether?

14. What do you think is the ideal (the best) sex composition of children in a family?
..... boys girls
15. What is the sex composition of your children now?
..... boys girls
16. Would you have more children in order to achieve the ideal sex composition stated above.
.....
17. Have you ever used any means to prevent you from becoming pregnant?
Yes _____
No _____
No response _____
18. If yes, what means did you use? _____
19. State the duration of each means mentioned in (18)

Means	Duration (in months)	Reason of discontinuation
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		

20. What is your religion? Please put x against correct one.

- Moslem
- Christian - Protestant
- Christian Catholic
- Traditional
- No religion
- No response

MEDICAL HISTORY

Previous illness and operations

Please put x against correct ones.

Abdominal Operations

Tuberculosis in any part of the body

Does anybody in your household suffer from tuberculosis?

Menstrual History

Age of first menstruation

When last did you have your menstrual period days

Menstruation Regular

Not Regular

Heavy bleeding

Painful.

Vaginal discharge: Present.

Coitus: (Sexual Intercourse)

How many times a week

Any difficulty or pain?

Breast Feeding How long do you breast feed your baby

.....;

Do you have sexual intercourse when you are breast feeding?

Vaginal discharge: Do you have any vaginal discharge?

Yes/No

If the answer is Yes, describe.

.....

.....

Note If patient is to be referred to U.C.H. for infertility please write the name and household number there.

Name Household No.

Date Signature of Interviewer

APPENDIX 7

CODES FOR QUESTIONNAIRE FOR HEADS

OF HOUSEHOLDS

PART I(a)

- Columns 1 - 4: Questionnaire Number (0001 - 1800)
- Columns 5 - 6: Question 1, How many rooms are available to the members of your household?
Code: (Code number, 01, 02, 03, etc.).
- Columns 7 - 8: Question 2, How many people make up your household?
Code: (code number of resident, 01, 02, 03, 04, etc.)
- Columns 9 - 10: Question 3 (Count the number of modern facilities available and recode, 01, for "modern" i.e. with more than 4 of the listed facilities, 02, for sub-standard if less than 4 of the listed facilities.
- Columns 11 - 12: Question 4, Quality of housing -
Code: If house is mud structure code 01 for poor 02, other, fair, good, etc.
- Columns 13 - 14: Question 5, Number of live births within the past 12 months.
Code: 00 for none; 01 for one; 02 for Two, etc.
- Columns 15 - 16: Question 5 contd. Number of male children born live.
Code: (00, 01, 02, 03, etc.).
- Columns 17 - 18: Question 5 contd. Number of female children born live.
Code: (00, 01, 02, 03, etc.).
- Columns 19 - 20: Question 5 contd. Number of still births.
Code: (00, 01, 02, 03, etc.)
- Columns 21 - 22: Question 6, number of miscarriages (involuntary abortions).
Code: (00, 01, 02, 03, etc.)
- Columns 23 - 24: Question 6 contd. number of induced abortions
Code: (00, 01, 02, etc.)
- Columns 25 - 26: Question 7, number of deaths within the household
Code: (00, 01, 02, 03, etc.)

- Columns 27 - 28: Question 7 contd. number of male deaths.
Code: (00, 01, 02, etc.)
- Columns 29 - 30: Question 7 contd. number of female deaths
Code: (00, 01, 02, etc.)
- Columns 31 - 32: Question 7 contd. number of infants - under
1 year (male and Female) who died.
Code: (00, 01, 02, 03, etc.)

Household Record

- Columns 33 - 34: Number of residents in the household
Code: (01, 02, 03, 04, etc.)
- Columns 35 - 36: Number of male residents
Code: 01, 02, 03, etc.
- Columns 37 - 38: Number of female residents
Code: 01, 02, 03, 04, etc.
- Columns 39 - 40: Number of the household members married
Code: 00, 01, 02, etc.
- Columns 41 - 42: Number of household members belonging to
other marital conditions (i.e. unmarried, widow
widowed, divorced, separated).
Code: 00, 01, 02, etc.
- Columns 43 - 44: Number employed.
Code: 00, 01, 02, etc.
- Columns 45 - 46: Number employed (including all unemployed
persons and unpaid family workers.
Code: 00, 01, 02, 03, etc.
- Columns 47 - 48: Number literate (able to read and write,
excluding Koranic only).
Code: 00, 01, 02, 03, etc.
- Columns 49 - 50: Number illiterate (unable to read and
write, and Koranic education only).
Code: 00, 01, 02, 03, etc.

Causes of Death

- Columns 51 - 52: Question 7 contd.
- 01 Fever and other infectious diseases
 - 02 Post-delivery and Post-delivery infections
 - 03 Tuberculosis
 - 04 Post-surgery (traditional or modern)
 - 05 Accidents
 - 06 Others
 - 07 No response

Question 8: Medical History

- Columns 53 - 54: Abdominal operations
- 01 Yes
 - 02 No
 - 00 No response
- Columns 55 - 56: Hernia?
- 01 Yes
 - 02 No
 - 00 No response
- Columns 57 - 58: Tuberculosis?
- 01 Yes
 - 02 No
 - 00 No response
- Columns 59 - 60: How many wives of childbearing age do you have?
Code: 00, 01, 02, 03, etc.
- Columns 61 - 62: Any difficulty with performing sex?
- 01 Yes
 - 02 No
 - 00 No response
- Columns 63 - 64: If so, what?
- 01 Poor erection
 - 02 Failure to ejaculate
 - 03 Not applicable/No response

- Columns 65 - 66: How many times a week do you have sexual intercourse?
Code: 00, 01, 02, 03, etc.
- Columns 67 - 68: How many times a week per wife?
Code: 00, 01, 02, 03, etc.
- Columns 69 - 70: Have you had gonorrhoea before?
01 Yes
02 No
00 No response
- Columns 71 - 72: If yes, where was it treated?
01 Hospital/Medical Establishment
02 Native Medicine/Doctor's Place
03 Self Medication at home
00 No response/Not applicable
- Columns 73 - 74: Is it permanently cured?
01 Yes
02 No
00 Not applicable/no response
- Columns 75 - 76: If no, do you wish for further treatment?
01 Yes
02 No
00 Not applicable/no response

APPENDIX 8

CODES FOR HOUSEHOLD RECORD

("MARGINALS FOR FERTILITY SURVEY")

PART I(b)

Columns 1 - 4: Household Questionnaire Number (0001 - 1500)

Columns 5 - 6: Householder or resident
Serial Number (01 - 99)

Columns 7 - 8: Relationship with head of household
Code: 01 Head of household/husband
02 Wife
03 Son
04 Daughter
05 Father
06 Mother
07 Relative
08 Visitor
09 Other

Columns 9 - 10: Sex of resident
Code: 01 Male
02 Female

Columns 11 - 12: Age of resident in years
Code: 01 1 year
02 2 years
:
:
:
:
99 99 years

Columns 13 - 14: Marital status of resident
Code: 01 Married
02 Never married/unmarried
03 Divorced
04 Separated
05 Widowed

Columns 15 - 16: Type of marriage
Code: 01 Customary (Native Law & Custom)
02 Court (Registry)
03 Church
04 Moslem Tradition
05 By consent only
06 Not applicable

Columns 17 - 18: Occupation

Code: 01 Unemployed
02 Unpaid family work
03 Trading
04 Unskilled work
05 White Collar
06 Farming/Fishing
07 Craftwork
08 Service
09 Professional
10 Poorly defined occupation

Columns 19 - 20: Level of Education

Code: 01 Unable to read and write
02 Some Primary Education but not completed
03 Completed Primary Schooling
04 Secondary School/Teachers' College
05 Professional Training
06 University
07 Koranic School only

APPENDIX 9

CODES FOR FERTILITY QUESTIONNAIRE

PART II

- Columns 1 - 2: Locality
Code 01 Ikire
02 Ikoyi - Apomu
- Columns 3 - 6: Questionnaire Number 0001 - 2000
- Columns 7 - 8: Question 1 (Estimated Age to be coded in number of years)
Viz: 01 1 year
02 2 years
,
,
,
99 99 years
- Columns 9 - 10: Question 2: Where were you born?
To be coded 01 Place of interview
02 Elsewhere.
- Columns 11 - 12: Question 3: Length of stay at the place of interview: Code in number of years
01 1 year
02 2 years
03 3 years
,
,
99 99 years
- Columns 13 - 14: Question 4: (a) Marital Condition
Code: 01 Married
02 Separated
03 Divorced
04 Widowed
05 Unmarried (i.e. never married, single).
00 No response
- Columns 15 - 16: Question 4: (b) Age at first marriage -
Code: Age in years, viz:
01, 02; and for not applicable.

- Columns 17 - 18: Question 4: (c) How long ago did you get married?
Code in years, 01, 02, 03 etc. 00 not applicable.
- Columns 19 - 20: Question 4: (d) If unmarried but was married
before when do you hope to remarry?
Code in years, 01, 02, 03 etc.
00 - not applicable
99 Don't know
- Columns 21 - 22: Question 4: (e) At what age do you think
is proper for a girl to marry?
- Code: 01 Below 10 years
02 10 - 15 years
03 16 - 20 years
04 21 - 25 years
05 26 - 30 years
06 Over 30 years
07 Not response, No idea, Others.
- Columns 23 - 24: Question 4: (f) How many wives do you think
is ideal for a happy family?
Code Number 01, 02, 03, etc.
00 Don't know/no response/Other.
- Columns 25 - 26: Question 4: (g) How many wives does your
husband have now, including yourself?
Code number 01, 02, 03, etc.
00 not applicable
99 No response.
- Columns 27 - 28: Question 4: (h) What is your position among
the wives?
- Code: 01 1st
02 2nd
03 3rd
04 4th
:
:
:
00 Not applicable
99 No response
- Columns 29 - 30: Question 4: (i) How many times have you
married altogether?
Code number 01, 02, 03 etc. 00 Not applicable
99 No response.
- Columns 31 - 32: Question 4: (j) State length of stay in
each union (i.e. marriage) 1st Marriage:
Code number of years 01, 02, 03, 04 etc.
- Columns 33 - 34: Number of live births in 1st marriage
Code: 00, 01, 02, 03, 04 etc.

- Columns 35 - 36: For subsequent marriages add total duration of stay in union(s) and code in years
01, 02, 03 etc. 00: Not applicable
99 No response
- Columns 37 - 38: Number of children born in subsequent marriages/unions
Code: 00, 01, 02, 03 etc.
- Columns 39 - 40: Question 4(k): How many wives does your father have?
Code: Number 01, 02, 03, etc.
00 no response/don't know.
- Columns 41 - 42: Question 5: How many people now make up your husband's household?
Code: 01, 02, 03 etc.
- Columns 43 - 44: Question 6: Number of living children (Code 01, 02, 03, etc.).
- Columns 45 - 46: Question 7: Number of children dead
Code 01, 02, 03 etc.
- Columns 47 - 48: Total number of live-births
(Add 6 and 7 and code: 01, 02, 03, 04 etc.).
- Columns 49 - 50: Question 8(a): Have you been pregnant within the last 18 months?

01 Yes
02 No
03 No response
- Columns 51 - 52: Question 8(b): If yes, what has been the outcome of the pregnancy (or pregnancies)?
Code: 01 Live birth, baby still living
02 Live birth, baby dead
03 Miscarriage (involuntary abortion)
04 Still birth
05 Still pregnant
06 Not applicable/No response/Other.
- Columns 53 - 58: Question 9: What were the outcomes of your last three pregnancies

- Columns 53 - 54: 1st pregnancy
Code: 01 Live birth/baby living
02 Live birth/baby dead
03 Miscarriage
04 Induced abortion
05 Still birth
06 Not applicable/no response
- Columns 55 - 56: 2nd Pregnancy
Code: 01 Live birth/baby living
02 Live birth/baby dead
03 Miscarriage
04 Induced abortion
05 Still birth
06 Not applicable/no response
- Columns 57 - 58: 3rd Pregnancy
Code: 01 Live birth/baby living
02 Live birth/baby dead
03 Miscarriage
04 Induced abortion
05 Still birth
06 Not applicable/no response.
- Columns 59 - 60: Question 10: Suppose you suddenly realize that you are pregnant, what would you do?
Code: 01 I'll be too happy/carry pregnancy to term
02 I'll be disturbed but will carry the baby
03 Procure abortion
04 I don't know, Other
- Columns 61 - 62: Question 11: What do you think is the cause of sterility in some women?
Code 01 God's design, destiny
02 Sexual abuse
03 Old age
04 Evil people, witchcraft, etc.
05 Biological impairment
06 Marital instability
07 Other
08 Don't know/no response
- Columns 63 - 64: Question 12: Do you know of any means by which an infertile woman can be helped to become pregnant?
Code: 01 Hospital, medical
02 Native doctor/herbalist
03 Prayers - Church, Mosque, etc
04 Proper sexual moral lessons
05 Other
06 Don't know/no response.

- Columns 65 - 66: Question 13: How many children do you expect to have altogether?
(Code Number 01, 02, 03 etc.)
- Columns 67 - 68: Question 14: Ideal sex composition:
Code: Boys - Colum 67 (number 1, 2, 3, 4 etc.)
Code: Girls - Column 68 (number 1, 2, 3, etc.)
- Columns 69 - 70: Question 15: What is the sex composition of your children now?
Boys: Column 69 (Code number 1, 2, 3 etc.)
Girls: " 70 (Code number 1, 2, 3 etc.)
- Columns 71 - 72: Question 16: Would you have more children in order to achieve the ideal sex composition?
Code: 01 Yes
02 No
03 Don't know/no response
- Columns 73 - 74: Question 17: Have you used any means to prevent you from becoming pregnant?
Code: 01 Yes
02 No
03 No response/not applicable
- Columns 75 - 76: Question 18: If yes, what means did you use?
Code: 01 Sexual abstinence
02 Charms by native doctor
03 Rythm
04 Withdrawal (coitus interruptions)
05 Condoms
06 Jellies, Creams, foams
07 Douching
08 Diaphragm
09 Pills
10 I.U.D. (loop, coil)
11 Sterilization
12 Abortion
13 No response/not applicable
- Columns 77 - 78: Question 19: Duration of the most extensively used means
Code: 01 Less than six months
02 6 - 12 months
03 13 - 24 months
04 More than 24 months
00 not applicable/no response

Columns 79 - 80: Question 20: What is your religion?

Code: 01 Moslem
02 Christian - Protestant
03 Christian - Catholic
04 Traditional
05 No religion
06 No response

CONTINUATION CARD: MEDICAL HISTORY

Columns 1 - 2: Previous illness/operations
Code: 01 Abdominal operations
02 Tuberculosis

Columns 3 - 4: Does anybody in your household suffer
from tuberculosis?
Code: 01 Yes
02 No
03 Don't know/no response

Columns 5 - 6: Age of first menstruation
Code: In years viz: 9, 10, 11, 12, etc.

Columns 7 - 8: When last did you have your menstrual periods?
Code: number of days (01, 02, etc.)

Columns 9 - 10: Menstruation
Code: 01 Regular
02 Not regular
03 Heavy bleeding
04 Painful
05 Never menstruated
06 No response/not applicable

Columns 11 - 12: Vaginal discharge:
Code: 01 Present
02 Not present
03 Other, don't know etc.

Columns 13 - 14: Coitus
Code: Number of times a week
Viz: 01, 02, 03, 04 etc.

Columns 15 - 16: Any difficulty or pain?
Code: 01 Yes
02 No
03 Never had sex
04 No response, Other.

- Columns 17 - 18: Breast feeding
Code: Length of time in number of month
(01, 02, 03, etc.)
- Columns 19 - 20: Do you have sexual intercourse when you are
breast-feeding?
Code: 01 Yes
02 No
03 Not applicable/no response.
- Columns 21 - 22: Is patient to be referred to U.C.H.
for infertility?
Code: 01 Yes
02 No
03 Other

Appendix 10

INFERTILITY INVESTIGATION

PART A

Name: Hospital No.

Date First Seen: Age:

Address:

Type of Accommodation: (State whether husband and wife actually live together)

Marital Status: Single/Engaged/Married/Divorced/Sept./Widowed

If Married, date of present marriage:

GYNAECOLOGY

Menarche:

Menstrual Cycle:

Blood loss: Scanty/Normal/Heavy

Dysmenorrhoea: Yes/No

If Yes: Spasmodic/Congestive

Last Menstrual Period:

PAST OBSTETRIC HISTORY: Para

Previous Pregnancies

Date of Birth	Period of Gestation	Mode of Delivery	Puerperium	Sex of Baby	Alive/Dead (State age at death)

PAST MEDICAL HISTORY: Diabetes/T.B./P:I.D./V.D./Mumps

(Please give details including treatment and dates).

Name: Hospital No.

Previous Operations: Appendicectomy/Gynaecological Operations

HUSBAND: (Present husband if married more than once)

Age: Occupation:

No. of wives:

No. of children (with their ages. Group by mothers)

Past Medical History: Diabetes/T.B./Mumps/M.D.

Operations: Herniorrhaphy/Circumcision

(Cross out those not applicable. Please give details).

FAMILY HISTORY: (Particular attention to Diabetes, T.B.)

SIBLINGS: (a) Sisters (State number of children of everyone)

(b) Brothers " " " " " "

PREVIOUS MARRIAGES OF PATIENT: (Give durations and state number of children)

Name: Hospital No.

SOCIAL HISTORY OF PATIENT:

Contraceptive Practice (Types & Periods of Use).

Coital Habits: Timing (Relationship to Menses).

Frequency

Satisfactory: Yes/No

Dyspareunia: Yes/No

Post-Coital Bleeding: Yes/No

Any other remarks

H O B B I E S:

SYMPTOMS REFERABLE TO OTHER SYSTEMS:

R. S.

C.V.S.

U.S.

A1.S.

PREVIOUS INVESTIGATIONS: Yes/No

(See Section C)

INFERTILITY INVESTIGATION

PART B

Name: Hospital No.

PHYSICAL EXAMINATION

General Condition;

Height Weight

Voice

Breast Development

R.S.

C.V.S. Pulse:

Abdomen

PELVIS:

Vulva

Vaginal Walls;

Cervix: Erosion/Chr. Cervicitis

Uterus:

Ademexa

Vaginal discharge: (Direct Microscopy results)

INFERTILITY INVESTIGATION

PART C

..... (Dates should be given for investigations)

A. (Previous Investigations: (Details to include, Types, & Dates with results)

B. 1. Current Investigation:

Chest X-ray

2. Urinalysis

3. Blood P.C.V.
 Group
 Genotype
 V.D.R.L.

4. Cytology (State type)

5. Vaginal Swabs

6. Cervical Mucus (Appearance, quality, the Fern test etc.)

7. Male Fertility Test

(a) Seminal analysis (Bottle Specimen)	1st	2nd	3rd	4th
Date				
Time collected				
Time examined				
Volume				
Microscopy: Motility				
Morphology				
Pus Cells				

Name: Hospital No.

Examiner's Impression

(b) Sim's (Post-Coital) Test:

Date

Time

Time examined

Microscopy: Motility

Morphology

Pus Cells

Trichomonas

--	--	--	--	--

Reference to Urologist: Yes/No

Urologist's report:

8. D. & C. (or Endometrial Biopsy)

L.M.P.

Date of Operation

Findings

Histology Report

Culture

9. Hormone Assay

Name Hospital No.

10. Tubal Examination:

(a) Insufflation: L.M.P.

Date of Investigation

Interpretation (include graph, if
available)

Salpingogram

11. Laparoscopy:

- Uterus

- Tubes (R)

(L)

- Ovaries (R)

(L)

- Peritoneum

- P.O.D.

INFERTILITY INVESTIGATION

PART D

Name: Hospital No.

TREATMENT: (Please give details with dates)

FOLLOW-UP (with dates)

APPENDIX 11

M A R G I N A L S F O R
F E R T I L I T Y S U R V E Y :

IKIRE, APOMU AND IKOYI
(JULY - SEPTEMBER, 1975)

I.D.R.C. PROJECT

FREQUENCY DISTRIBUTION HOUSEHOLD RECORD

VARIABLE VAR001 RELATIONSHIP WITH HEAD OF HOUSEHOLD

	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
HEAD OF HOUSEHOLD	1231	15.0	15.0	15.0
WIFE	1972	24.0	24.0	38.9
SON	2445	29.7	29.7	68.7
DAUGHTER	2104	25.6	25.6	94.2
FATHER	6	0.1	0.1	94.3
MOTHER	56	0.7	0.7	95.0
RELATIVE	395	4.8	4.8	99.8
VISITOR	2	0.0	0.0	99.8
OTHER	16	0.2	0.2	100.0
TOTAL	<u>8227</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VARIABLE VAR 002 SEX OF RESIDENT

	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
MALE	3909	47.5	47.5	47.5
FEMALE	4318	52.5	52.5	100.0
	<hr/>	<hr/>	<hr/>	<hr/>
TOTAL	8227	100.0	100.0	100.0
	<hr/>	<hr/>	<hr/>	<hr/>

VALID OBSERVATIONS - 8227

MISSING OBSERVATIONS - 0

VARIABLE VAR 003 AGE OF RESIDENT

VALUE YEARS	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
1.00	711	8.6	8.6	8.6
2.00	321	3.9	3.9	12.5
3.00	358	4.4	4.4	16.9
4.00	379	4.6	4.6	21.5
5.00	345	4.2	4.2	25.7
6.00	350	4.3	4.3	30.0
7.00	294	3.6	3.6	33.5
8.00	256	3.1	3.1	36.6
9.00	231	2.8	2.8	39.4
10.00	261	3.2	3.2	42.6
11.00	114	1.4	1.4	44.0
12.00	256	3.1	3.1	47.1
13.00	117	1.4	1.4	48.5
14.00	118	1.4	1.4	50.0
15.00	241	2.9	2.9	52.9
16.00	100	1.2	1.2	54.1
17.00	75	0.9	0.9	55.0
18.00	171	2.1	2.1	57.1
19.00	62	0.8	0.8	57.9
20.00	336	4.1	4.1	61.9
21.00	37	0.4	0.4	62.4
22.00	128	1.6	1.6	63.9
23.00	72	0.9	0.9	64.8
24.00	75	0.9	0.9	65.7
25.00	440	5.3	5.3	71.1
26.00	89	1.1	1.1	72.2
27.00	72	0.9	0.9	73.0
28.00	145	1.8	1.8	74.8

FREQUENCY DISTRIBUTION HOUSEHOLD RECORD

29.00	35	0.4	0.4	75.2
30.00	505	6.1	6.1	81.4
31.00	19	0.2	0.2	81.6
32.00	82	1.0	1.0	82.6
33.00	30	0.4	0.4	83.0
34.00	37	0.4	0.4	83.4
35.00	289	3.5	3.5	86.9
36.00	41	0.5	0.5	87.4
37.00	21	0.3	0.3	87.7
38.00	56	0.7	0.7	88.4
39.00	31	0.4	0.4	88.7
40.00	303	3.7	3.7	92.4
41.00	16	0.2	0.2	92.6
42.00	38	0.5	0.5	93.1
43.00	19	0.2	0.2	93.3
44.00	8	0.1	0.1	93.4
45.00	159	1.9	1.9	95.3
46.00	30	0.4	0.4	95.7
47.00	17	0.2	0.2	95.9
48.00	39	0.5	0.5	96.4
49.00	46	0.6	0.6	96.9
50.00	88	1.1	1.1	98.0
51.00	5	0.1	0.1	98.1
52.00	16	0.2	0.2	98.3
53.00	5	0.1	0.1	98.3
54.00	4	0.0	0.0	98.4
55.00	19	0.2	0.2	98.6
56.00	8	0.1	0.1	98.7
57.00	5	0.1	0.1	98.8
58.00	2	0.0	0.0	98.8
59.00	4	0.0	0.0	98.8

FREQUENCY DISTRIBUTION HOUSEHOLD RECORD

	60.00	49	0.6	0.6	99.4
	62.00	3	0.0	0.0	99.5
	63.00	2	0.0	0.0	99.5
	64.00	2	0.0	0.0	99.5
	65.00	9	0.1	0.1	99.6
	68.00	1	0.0	0.0	99.6
	70.00	14	0.2	0.2	99.8
	73.00	1	0.0	0.0	99.8
	74.00	1	0.0	0.0	99.8
	75.00	3	0.0	0.0	99.9
	80.00	5	0.1	0.1	99.9
	82.00	1	0.0	0.0	99.9
	83.00	1	0.0	0.0	100.0
	85.00	1	0.0	0.0	100.0
	90.00	1	0.0	0.0	100.0
99 or above	99.00	2	0.0	0.0	100.0
		<u>8227</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 8227

MISSING OBSERVATIONS - 0

VARIABLE VAR 004 MARITAL STATUS OF RESIDENT

	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
MARRIED	3486	42.4	42.4	42.4
UNMARRIED	4717	57.3	57.3	99.7
SEPARATED	1	0.0	0.0	99.7
WIDOWED	23	0.3	0.3	100.0
	<u> </u>	<u> </u>	<u> </u>	<u> </u>
TOTAL	8227	100.0	100.0	100.0
	<u> </u>	<u> </u>	<u> </u>	<u> </u>

VALID OBSERVATIONS - 8227

MISSING OBSERVATIONS - 0

VARIABLE VAR 005 TYPE OF MARRIAGE

	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
CUSTOMARY	2919	35.5	35.5	35.5
REGISTRY	1	0.0	0.0	35.5
CHURCH	58	0.7	0.7	36.2
MOSLEM	519	6.3	6.3	42.5
CONSENT ONLY	8	0.1	0.1	42.6
NOT APPLICABLE	<u>4722</u>	<u>57.4</u>	<u>57.4</u>	<u>100.0</u>
TOTAL	<u>8227</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 8227

MISSING OBSERVATIONS - 0

VARIABLE VAR 006 OCCUPATION

	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
UNEMPLOYED	4627	56.2	56.2	56.2
UNPAID FAMILY WORK	94	1.1	1.1	57.4
TRADING	1383	16.8	16.8	74.2
UNSKILLED WORK	71	0.9	0.9	75.2
WHITE COLLAR	12	0.1	0.1	75.2
FARMING	1166	14.2	14.2	89.4
CRAFTSWORK	283	3.4	3.4	92.8
SERVICE	92	1.1	1.1	93.9
PROFESSIONAL	445	5.4	5.4	99.3
UNDEFINED	54	0.7	0.7	100.0
	<u>8227</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VARIABLE VAR 007 LEVEL OF EDUCATION

	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
	1	0.0	0.0	0.0
UNABLE TO READ OR WRITE	5414	65.8	65.8	65.8
SOME PRIMARY EDUCATION	1642	20.0	20.0	85.8
COMPLETED PRIMARY EDUCATION	874	10.6	10.6	96.4
SECONDARY OR TEACHER	234	2.8	2.8	99.2
PROFESSIONAL TRAINING	25	0.3	0.3	99.6
UNIVERSITY	5	0.1	0.1	99.6
KORANIC	31	0.4	0.4	100.0
	1	0.0	0.0	100.0
TOTAL	<u>8227</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

APPENDIX 12

RESPONSES OF HEADS OF HOUSEHOLDS WHO
COMPLETED QUESTIONNAIRES RELEVANT TO FERTILITY.

HOUSEHOLD QUESTIONNAIRE Part I(a)

Variable VAR002: How many people make up your household?

VALUE	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
1.00	1	0.2	0.2	0.2
2.00	29	4.9	4.9	5.0
3.00	67	11.2	11.2	16.2
4.00	96	16.1	16.1	32.3
5.00	72	12.1	12.1	44.4
6.00	58	9.7	9.7	54.1
7.00	52	8.7	8.7	62.8
8.00	50	8.4	8.4	71.2
9.00	40	6.7	6.7	77.9
10.00	26	4.4	4.4	82.2
11.00	13	2.2	2.2	84.4
12.00	17	2.8	2.8	87.3
13.00	23	3.9	3.9	91.1
14.00	12	2.0	2.0	93.1
15.00	23	3.9	3.9	97.0
16.00	2	0.3	0.3	97.3
17.00	6	1.0	1.0	98.3
18.00	3	0.5	0.5	98.8
19.00	1	0.2	0.2	99.0
20.00	5	0.8	0.8	99.8
22.00	1	0.2	0.2	100.0
TOTAL	597	100.0	100.0	100.0

VALID OBSERVATIONS - 597

MISSING OBSERVATIONS - 0

FREQUENCY DISTRIBUTION HOUSEHOLD QUESTIONNAIRE

VARIABLE VAR003: Modern Facilities (as in Question 3)

	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
Uncodable Information	72	12.1	12.1	12.1
Modern	13	2.2	2.2	14.2
Sub-Standard	510	85.4	85.4	99.7
Missing	<u>2</u>	<u>0.3</u>	<u>0.3</u>	<u>100.0</u>
	<u>597</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 597

Missing OBSERVATIONS - 0

Modern facilities have at least 4, Substandard have less than 4 of the following:- Electricity, Running Water, Inside Lavatory, Electric/Gas cooker, watch/alarm clock, Refrigerator, Radio, Television set.

FREQUENCY DISTRIBUTION HOUSEHOLD QUESTIONNAIRE

VARIABLE VAR004: Quality of housing (as in Question 4)

	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
No Response	1	0.2	0.2	0.2
Poor	505	84.6	84.6	84.8
Fair	<u>91</u>	<u>15.2</u>	<u>15.2</u>	<u>100.0</u>
TOTAL	<u>597</u> ===	<u>100.0</u> =====	<u>100.0</u> =====	<u>100.0</u> =====

VALID OBSERVATIONS - 597

MISSING OBSERVATIONS - 0

FREQUENCY DISTRIBUTION HOUSEHOLD QUESTIONNAIRE

VARIABLE VAR005: Number of live births within the past 12 months
(Question 5)

VALUE	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
0.0	384	64.3	64.3	64.3
1.00	183	30.7	30.7	95.0
2.00	25	4.2	4.2	99.2
3.00	3	0.5	0.5	99.7
4.00	<u>2</u>	<u>0.3</u>	<u>0.3</u>	<u>100.0</u>
TOTAL	<u>597</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 597

MISSING OBSERVATIONS - 0

FREQUENCY DISTRIBUTION HOUSEHOLD QUESTIONNAIRE

VARIABLE VAR006: Number of male live births within the past
12 months (Question 5)

VALUE	ABSOLUTE FREQUENCY (PERCENT)	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
0.0	486	81.4	81.4	81.4
1.00	101	16.9	16.9	98.3
2.00	<u>10</u>	<u>1.7</u>	<u>1.7</u>	<u>100.0</u>
TOTAL	<u>597</u> ====	<u>100.0</u> =====	<u>100.0</u> =====	<u>100.0</u> =====

VALID OBSERVATIONS - 597

MISSING OBSERVATIONS - 0

FREQUENCY DISTRIBUTION HOUSEHOLD QUESTIONNAIRE

VARIABLE VAR007: Number of female children born live (Question 5)

VALUE	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
0.0	484	81.1	81.1	81.1
1.00	100	16.8	16.8	97.8
2.00	10	1.7	1.7	99.5
3.00	<u>3</u>	<u>0.5</u>	<u>0.5</u>	<u>100.0</u>
TOTAL	<u>597</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

FREQUENCY DISTRIBUTION HOUSEHOLD QUESTIONNAIRE

VARIBALE VAR008: Number of still-births (Question 5)

VALUE	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
0.0	596	99.8	99.8	99.8
1.00	<u>1</u>	<u>0.2</u>	<u>0.2</u>	<u>100.0</u>
TOTAL	<u>597</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 597

MISSING OBSERVATIONS - 0

FREQUENCY DISTRIBUTION HOUSEHOLD QUESTIONNAIRE

VARIABLE VAR009: Number of miscarriages in past 12 months
(Question 6)

VALUE	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ. (PERCENT)
0.0	576	96.5	96.5	96.5
1.00	19	3.2	3.2	99.7
3.00	1	0.2	0.2	99.8
(Missing)60.00	<u>1</u>	<u>0.2</u>	<u>0.2</u>	<u>100.0</u>
TOTAL	<u>597</u> ===	<u>100.0</u> =====	<u>100.0</u> =====	<u>100.0</u> =====

VALID OBSERVATIONS - 597

MISSING OBSERVATIONS - 0

FREQUENCY DISTRIBUTION HOUSEHOLD QUESTIONNAIRE

VARIABLE VAR010: Number of Abortions in past 12 months (Question 6)

VALUE	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
0.0	596	99.8	99.8	99.8
1.00	<u>1</u>	<u>0.2</u>	<u>0.2</u>	<u>100.0</u>
TOTAL	<u>597</u> ===	<u>100.0</u> =====	<u>100.0</u> =====	<u>100.0</u> =====

VALID OBSERVATIONS - 597

MISSING OBSERVATIONS - 0

FREQUENCY DISTRIBUTION HOUSEHOLD QUESTIONNAIRE

VARIABLE VAR011: Number of deaths within household (Question 7)

VALUE	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
0.0	568	95.1	95.1	95.1
1.00	26	4.4	4.4	99.5
2.00	<u>3</u>	<u>0.5</u>	<u>0.5</u>	<u>100.0</u>
TOTAL	597	100.0	100.0	100.0
	===	=====	=====	=====

VALID OBSERVATIONS - 597

MISSING OBSERVATIONS - 0

FREQUENCY DISTRIBUTION HOUSEHOLD QUESTIONNAIRE

VARIABLE VAR012: Number of Male deaths (Question 7)

VALUE	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
0.0	582	97.5	97.5	97.5
1.00	14	2.3	2.3	99.8
2.00	1	0.2	0.2	100.0
	---	---	---	---
TOTAL	597	100.0	100.0	100.0
	==	====	====	====

VALID OBSERVATIONS - 597

MISSING OBSERVATIONS - 0

FREQUENCY DISTRIBUTION HOUSEHOLD QUESTIONNAIRE

VARIABLE VAR013: Number of female deaths (Question 7)

VALUE	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
0.0	582	97.5	97.5	97.5
1.00	14	2.3	2.3	99.8
2.00	<u>1</u>	<u>0.2</u>	<u>0.2</u>	<u>100.0</u>
TOTAL	<u>597</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 597

MISSING OBSERVATIONS - 0

FREQUENCY DISTRIBUTION HOUSEHOLD QUESTIONNAIRE

VARIABLE VAR014: Death of Number of infants (male and female)
under 1 year of age (Question 7)

VALUE	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
0.0	582	97.5	97.5	97.5
1.00	13	2.2	2.2	99.7
2.00	<u>2</u>	<u>0.3</u>	<u>0.3</u>	<u>100.0</u>
TOTAL	<u>597</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 597

MISSING OBSERVATIONS - 0

FREQUENCY DISTRIBUTION HOUSEHOLD QUESTIONNAIRE

VARIABLE VAR015: Household Record number of Residents in household

	VALUE	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
Missing Value	0.0	1	0.2	0.2	0.2
	1.00	2	0.3	0.3	0.5
	2.00	28	4.7	4.7	5.2
	3.00	72	12.1	12.1	17.3
	4.00	93	15.6	15.6	32.8
	5.00	75	12.6	12.6	45.4
	6.00	54	9.0	9.0	54.4
	7.00	57	9.5	9.5	64.0
	8.00	51	8.5	8.5	72.5
	9.00	39	6.5	6.5	79.1
	10.00	26	4.4	4.4	83.4
	11.00	12	2.0	2.0	85.4
	12.00	20	3.4	3.4	88.8
	13.00	22	3.7	3.7	92.5
	14.00	11	1.8	1.8	94.3
	15.00	19	3.2	3.2	97.5
	16.00	3	0.5	0.5	98.0
	17.00	5	0.8	0.8	98.8
	18.00	2	0.5	0.5	99.2
	19.00	3	0.5	0.5	99.7
	20.00	2	0.3	0.3	100.0
	TOTAL	<u>597</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>
		===	=====	=====	=====

VALID OBSERVATIONS - 597
MISSING OBSERVATIONS - 0

FREQUENCY DISTRIBUTION HOUSEHOLD QUESTIONNAIRE

VARIABLE VAR016: Number of Male Residents in Household

VALUE	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
1.00	99	16.6	16.6	16.6
2.00	164	27.5	27.5	44.1
3.00	110	18.4	18.4	62.5
4.00	92	15.4	15.4	77.9
5.00	52	8.7	8.7	86.6
6.00	27	4.5	4.5	91.1
7.00	21	3.5	3.5	94.6
8.00	15	2.5	2.5	97.2
9.00	6	1.0	1.0	98.2
10.00	6	1.0	1.0	99.2
11.00	1	0.2	0.2	99.3
12.00	1	0.2	0.2	99.5
13.00	1	0.2	0.2	99.7
18.00	1	0.2	0.2	99.8
50.00	1	0.2	0.2	100.0
	<hr/>	<hr/>	<hr/>	<hr/>
TOTAL	597	100.0	100.0	100.0
	===	=====	=====	=====

VALID OBSERVATIONS - 597

MISSING OBSERVATIONS - 0

FREQUENCY DISTRIBUTION HOUSEHOLD QUESTIONNAIRE

VARIABLE VAR017: Number of Female Residents in household

VALUE	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
0.0	3	0.5	0.5	0.5
1.00	105	17.6	17.6	18.1
2.00	133	22.3	22.3	40.4
3.00	110	18.4	18.4	58.8
4.00	65	10.9	10.9	69.7
5.00	63	10.6	10.6	80.2
6.00	37	6.2	6.2	86.4
7.00	34	5.7	5.7	92.1
8.00	18	3.0	3.0	95.1
9.00	10	1.7	1.7	96.8
10.00	11	1.8	1.8	98.7
11.00	3	0.5	0.5	99.2
12.00	1	0.2	0.2	99.3
13.00	2	0.3	0.3	99.7
30.00	1	0.2	0.2	99.8
50.00	1	0.2	0.2	100.0
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TOTAL	597	100.0	100.0	100.0
	====	====	====	====

VALID OBSERVATIONS - 597

MISSING OBSERVATIONS - 0

FREQUENCY DISTRIBUTION HOUSEHOLD QUESTIONNAIRE

VARIABLE VAR018: Number of Household members who are married

VALUE	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
0.0	1	0.2	0.2	0.2
1.00	2	0.3	0.3	0.5
2.00	321	53.8	53.8	54.3
3.00	139	23.3	23.3	77.6
4.00	67	11.2	11.2	88.8
5.00	34	5.7	5.7	94.5
6.00	17	2.8	2.8	97.3
7.00	4	0.7	0.7	98.0
8.00	6	1.0	1.0	99.0
9.00	2	0.3	0.3	99.3
10.00	1	0.2	0.2	99.5
12.00	1	0.2	0.2	99.7
20.00	1	0.2	0.2	99.8
60.00	1	0.2	0.2	100.0
TOTAL	<u>597</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 597

MISSING OBSERVATIONS - 0

FREQUENCY DISTRIBUTION HOUSEHOLD QUESTIONNAIRE

VARIABLE VAR019: Number of household members who are unmarried
widowed, divorced or separated

VALUE	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
0.0	32	5.4	5.4	5.4
1.00	78	13.1	13.1	18.4
2.00	105	17.6	17.6	36.0
3.00	102	17.1	17.1	53.1
4.00	66	11.1	11.1	64.2
5.00	61	10.2	10.2	74.4
6.00	43	7.2	7.2	81.6
7.00	31	5.2	5.2	86.8
8.00	22	3.7	3.7	90.5
9.00	14	2.3	2.3	92.8
10.00	16	2.7	2.7	95.5
11.00	10	1.7	1.7	97.2
12.00	12	2.0	2.0	99.2
13.00	2	0.3	0.3	99.5
14.00	1	0.2	0.2	99.7
18.00	1	0.2	0.2	99.8
30.00	1	0.2	0.2	100.0
	---	---	---	---
TOTAL	597	100.0	100.0	100.0
	===	=====	=====	=====

VALID OBSERVATIONS - 597

MISSING OBSERVATIONS - 0

FREQUENCY DISTRIBUTION HOUSEHOLD QUESTIONNAIRE

VARIABLE VAR020: Number of household members who are employed

VALUE	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
0.0	4	0.7	0.7	0.7
1.00	63	10.6	10.6	11.2
2.00	255	42.7	42.7	53.9
3.00	125	20.9	20.9	74.9
4.00	66	11.1	11.1	85.9
5.00	29	4.9	4.9	90.8
6.00	24	4.0	4.0	94.8
7.00	14	2.3	2.3	97.2
8.00	3	0.5	0.5	97.7
9.00	6	1.0	1.0	98.7
10.00	3	0.5	0.5	99.2
11.00	1	0.2	0.2	99.3
12.00	2	0.3	0.3	99.7
15.00	1	0.2	0.2	99.8
80.00	1	0.2	0.2	100.0
	<hr/>	<hr/>	<hr/>	<hr/>
TOTAL	597	100.0	100.0	100.0
	===	=====	=====	=====

VALID OBSERVATIONS . - 597

MISSING OBSERVATIONS - 0

FREQUENCY DISTRIBUTION HOUSEHOLD QUESTIONNAIRE

VARIABLE VAR021: Number of household members who are unemployed
(including all unemployed and unpaid family Workers)

VALUE	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
0.0	28	4.7	4.7	4.7
1.00	80	13.4	13.4	18.1
2.00	99	16.6	16.6	34.7
3.00	107	17.9	17.9	52.6
4.00	78	13.1	13.1	65.7
5.00	62	10.4	10.4	76.0
6.00	45	7.5	7.5	83.4
7.00	29	4.9	4.9	88.4
8.00	19	3.2	3.2	91.6
9.00	15	2.5	2.5	94.1
10.00	9	1.5	1.5	95.6
11.00	10	1.7	1.7	97.3
12.00	7	1.2	1.2	98.5
13.00	6	1.0	1.0	99.5
14.00	1	0.2	0.2	99.7
30.00	1	0.2	0.2	99.8
50.00	1	0.2	0.2	100.0
TOTAL	597 ***	100.0 =====	100.0 =====	100.0 =====

VALID OBSERVATIONS - 597

MISSING OBSERVATIONS - 0

FREQUENCY DISTRIBUTION HOUSEHOLD QUESTIONNAIRE

VARIABLE VAR022: Number of literate household members (able to read and write but excluding koranic only)

VALUE	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
0.0	116	19.4	19.4	19.4
1.00	139	23.3	23.3	42.7
2.00	130	21.8	21.8	64.5
3.00	78	13.1	13.1	77.6
4.00	43	7.2	7.2	84.8
5.00	37	6.2	6.2	91.0
6.00	20	3.4	3.4	94.3
7.00	14	2.3	2.3	96.6
8.00	8	1.3	1.3	98.0
9.00	3	0.5	0.5	98.5
10.00	4	0.7	0.7	99.2
11.00	2	0.3	0.3	99.5
12.00	1	0.2	0.2	99.7
40.00	1	0.2	0.2	99.8
80.00	1	0.2	0.2	100.0
TOTAL	<u>597</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 597

MISSING OBSERVATIONS - 0

FREQUENCY DISTRIBUTION HOUSEHOLD QUESTIONNAIRE

VARIABLE VAR023: Number of illiterate household members (unable to read and write, and Koranic education only

VALUE	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
0.0	13	2.2	2.2	2.2
1.00	36	6.0	6.0	8.2
2.00	92	15.4	15.4	23.6
3.00	112	18.8	18.8	42.4
4.00	102	17.1	17.1	59.5
5.00	62	10.4	10.4	69.8
6.00	59	9.9	9.9	79.7
7.00	47	7.9	7.9	87.6
8.00	15	2.5	2.5	90.1
9.00	20	3.4	3.4	93.5
10.00	13	2.2	2.2	95.6
11.00	7	1.2	1.2	96.8
12.00	8	1.3	1.3	98.2
13.00	4	0.7	0.7	98.8
14.00	2	0.3	0.3	99.2
15.00	1	0.2	0.2	99.3
16.00	1	0.2	0.2	99.5
17.00	2	0.3	0.3	99.8
50.00	1	0.2	0.2	100.0
TOTAL	<u>597</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 597

MISSING OBSERVATIONS - 0

FREQUENCY DISTRIBUTION HOUSEHOLD QUESTIONNAIRE

VARIABLE VAR024: Causes of Death

	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
Not applicable	574	96.1	96.1	96.1
Fever	17	2.8	2.8	99.0
Accidents	2	0.3	0.3	99.3
Others	3	0.5	0.5	99.8
Missing	<u>1</u>	<u>0.2</u>	<u>0.2</u>	<u>100.0</u>
TOTAL	597	100.0	100.0	100.0
	===	===	====	=====

VALID OBSERVATIONS - 597

Missing OBSERVATIONS - 0

Note: Tuberculosis was not listed as a cause of death.

FREQUENCY DISTRIBUTION HOUSEHOLD QUESTIONNAIRE

MEDICAL HISTORY

VARIBALE VAR025: Any abdominal operations (Question 8)

	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
No response	1	0.2	0.2	0.2
Yes	10	1.7	1.7	1.8
No	<u>586</u>	<u>98.2</u>	<u>98.2</u>	<u>100.0</u>
TOTAL	<u>597</u> ===	<u>100.0</u> =====	<u>100.0</u> =====	<u>100.0</u> =====

VALID OBSERVATIONS - 597

MISSING OBSERVATIONS - 0

FREQUENCY DISTRIBUTION HOUSEHOLD QUESTIONNAIRE

VARIABLE VAR026: Hernia?

	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
Yes	4	0.7	0.7	0.7
No	597	99.2	99.2	99.8
No response	1	0.2	0.2	0.2
	<hr/>	<hr/>	<hr/>	<hr/>
TOTAL	597	100.0	100.0	100.0
	===	=====	=====	=====

VALID OBSERVATIONS - 597

MISSING OBSERVATIONS - 0

FREQUENCY DISTRIBUTION HOUSEHOLD QUESTIONNAIRE

VARIABLE VAR027: Tuberculosis?

	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
Yes	5	0.8	0.8	0.8
No	591	99.0	99.0	99.8
No response	1	0.2	0.2	100.0
	—	—	—	—
TOTAL	597	100.0	100.0	100.0
	===	====	====	====

VALID OBSERVATIONS - 597

MISSING OBSERVATIONS - 0

FREQUENCY DISTRIBUTION HOUSEHOLD QUESTIONNAIRE

Sexual History

VARIABLE VAR028: Question: How many wives of child bearing
age do you have?

VALUE	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
0.0	4	0.7	0.7	0.7
1.00	350	58.6	58.6	59.3
2.00	167	28.0	28.0	87.3
3.00	53	8.9	8.9	96.1
4.00	18	3.0	3.0	99.2
5.00	2	0.3	0.3	99.5
8.00	2	0.3	0.3	99.8
20.00	1	0.2	0.2	100.0
TOTAL	597	100.0	100.0	100.0

VALID OBSERVATIONS - 597

MISSING OBSERVATIONS - 0

FREQUENCY DISTRIBUTION HOUSEHOLD QUESTIONNAIRE

VARIABLE VAR029: Any difficulty with performing sex?

	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ PERCENT)
Missing Value	1	0.2	0.2	0.2
Yes	6	1.0	1.0	1.2
No	589	98.7	98.7	99.8
No response	1	0.2	0.2	100.0
	—	—	—	—
TOTAL	597	100.0	100.0	100.0
	===	=====	=====	=====

VALID OBSERVATIONS - 597

MISSING OBSERVATIONS - 0

FREQUENCY DISTRIBUTION HOUSEHOLD QUESTIONNAIRE

VARIBALE VAR030: If you have difficulty with performing sex
What is the difficulty

	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
Poor Erection	8	1.3	1.3	1.3
Failure to ejaculate	4	0.7	0.7	2.0
No response	584	97.8	97.8	99.8
Missing value	1	0.2	0.2	100.0
	<hr/>	<hr/>	<hr/>	<hr/>
TOTAL	597	100.0	100.0	100.0
	===	=====	=====	=====

VALID OBSERVATIONS - 597

MISSING OBSERVATIONS - 0

FREQUENCY DISTRIBUTION HOUSEHOLD QUESTIONNAIRE

VARIABLE VARO31: How many times a week do you have sexual intercourse?

	ACTUAL NUMBERS	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
	0.0	3	0.5	0.5	0.5
	1.00	53	8.9	8.9	9.4
	2.00	145	24.3	24.3	33.7
	3.00	86	14.4	14.4	48.1
	4.00	117	19.6	19.6	67.7
	5.00	8	1.3	1.3	69.0
	6.00	65	10.9	10.9	79.9
	7.00	75	12.6	12.6	92.5
	8.00	26	4.4	4.4	96.8
	9.00	4	0.7	0.7	97.5
	10.00	5	0.8	0.8	98.3
	12.00	3	0.5	0.5	98.8
	14.00	1	0.2	0.2	99.0
	15.00	1	0.2	0.2	99.2
	20.00	1	0.2	0.2	99.3
No Response	30.00	1	0.2	0.2	99.5
	99.00	3	0.5	0.5	100.0
		=====	=====	=====	=====
	TOTAL	597	100.0	100.0	100.0
		===	=====	=====	=====

VALID OBSERVATIONS - 597

MISSING OBSERVATIONS - 0

FREQUENCY DISTRIBUTION HOUSEHOLD QUESTIONNAIRE

VARIABLE VAR032: How many times a week per wife?

ACTUAL VALUES	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
0.0	5	0.8	0.8	0.8
1.00	119	19.9	19.9	20.8
2.00	247	41.4	41.4	62.1
3.00	121	20.3	20.3	82.4
4.00	52	8.7	8.7	91.1
5.00	7	1.2	1.2	92.3
6.00	9	1.5	1.5	93.8
7.00	23	3.9	3.9	97.7
8.00	7	1.2	1.2	98.8
10.00	2	0.3	0.3	99.2
11.00	1	0.2	0.2	99.3
14.00	1	0.2	0.2	99.5
16.00	1	0.2	0.2	99.7
20.00	1	0.2	0.2	99.8
No response	99.00	<u>1</u>	<u>0.2</u>	<u>100.0</u>
TOTAL	597	100.0	100.0	100.0
	===	=====	=====	=====

VALID OBSERVATIONS - 597

MISSING OBSERVATIONS - 0

APPENDIX 13

F E R T I L I T Y Q U E S T I O N N A I R E

I K I R E , A P O M U A N D I K O Y I

VARIABLE VAR 001 LOCALITY OF INTERVIEW:

	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
IKIRE	679	47.4	47.4	47.4
IKOYI-APOMU	753	52.5	52.5	99.9
	<u>1</u>	<u>0.1</u>	<u>0.1</u>	<u>100.0</u>
TOTAL	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS ÷ 1433

MISSING OBSERVATIONS - 0

VARIABLE VAR 002 AGE DISTRIBUTION (YEARS) WOMEN OF
REPRODUCTIVE AGE

VALUE	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
13.00	1	0.1	0.1	0.1
15.00	21	1.5	1.5	1.5
16.00	12	0.8	0.8	2.4
17.00	8	0.6	0.6	2.9
18.00	55	3.8	3.8	6.8
19.00	17	1.2	1.2	8.0
20.00	158	11.0	11.0	19.0
21.00	17	1.2	1.2	20.2
22.00	67	4.7	4.7	24.8
23.00	31	2.2	2.2	27.0
24.00	41	2.9	2.9	29.9
25.00	204	14.2	14.2	44.1
26.00	39	2.7	2.7	46.8
27.00	38	2.7	2.7	49.5
28.00	67	4.7	4.7	54.2
29.00	15	1.0	1.0	55.2
30.00	193	13.5	13.5	68.7
31.00	13	0.9	0.9	69.6
32.00	32	2.2	2.2	71.8
33.00	19	1.3	1.3	73.1
34.00	21	1.5	1.5	74.6
35.00	107	7.5	7.5	82.1
36.00	19	1.3	1.3	83.4

37.00	5	0.3	0.3	83.7
38.00	23	1.6	1.6	85.3
39.00	8	0.6	0.6	85.9
40.00	76	5.3	5.3	91.2
41.00	11	0.8	0.8	92.0
42.00	14	1.0	1.0	93.0
43.00	5	0.3	0.3	93.3
44.00	6	0.4	0.4	93.7
45.00	50	3.5	3.5	97.2
46.00	10	0.7	0.7	97.9
47.00	11	0.8	0.8	98.7
48.00	10	0.7	0.7	99.4
49.00	8	0.6	0.6	99.9
54.00	1	0.1	0.1	100.0
	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>
TOTAL				

VALID OBSERVATIONS - 1433

MISSING OBSERVATIONS - 0

VARIABLE VAR 003

PLACE OF BIRTH

	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
Place of Interview	972	67.8	68.3	68.3
Elsewhere	451	31.5	31.7	100.0
Missing	10	0.7	Missing	100.0
TOTAL	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 1423

MISSING OBSERVATIONS- 10

VARIABLE VAR 005

MARITAL STATUS

	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
No Response	1	0.1	0.1	0.1
Married	1423	99.3	99.4	99.4
Widowed	8	0.6	0.6	100.0
Separated	1	0.1	Missing	100.0
Unmarried	<u>0</u>	<u>0.0</u>	<u>Missing</u>	<u>100.0</u>
TOTAL	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 1432

MISSING OBSERVATIONS - 1

VARIABLE VAR 006

AGE AT FIRST MARRIAGE

VALUE	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
0.0	1	0.1	0.1	0.1
2.00	1	0.1	0.1	0.1
5.00	1	0.1	0.1	0.2
10.00	4	0.3	0.3	0.5
11.00	5	0.3	0.3	0.8
12.00	23	1.6	1.6	2.4
13.00	43	3.0	3.0	5.4
14.00	75	5.2	5.2	10.7
15.00	233	16.3	16.3	26.9
16.00	137	9.6	9.6	36.5
17.00	178	12.4	12.4	48.9
18.00	181	12.6	12.6	61.5
19.00	128	8.9	8.9	70.5
20.00	252	17.6	17.6	88.1
21.00	42	2.9	2.9	91.0
22.00	40	2.8	2.8	93.8
23.00	28	2.0	2.0	95.7
24.00	17	1.2	1.2	96.9

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25.00	33	2.3	2.3	99.2
26.00	2	0.1	0.1	99.4
27.00	3	0.2	0.2	99.6
28.00	1	0.1	0.1	99.7
29.00	2	0.1	0.1	99.8
30.00	2	0.1	0.1	99.9
32.00	1	0.1	0.1	100.0
TOTAL	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 1433

MISSING OBSERVATIONS - 0

VARIABLE VAR 007

HOW LONG AGO DID YOU GET MARRIED (YEARS)

	YEARS	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
No response	0.0	4	0.3	0.3	0.3
	1.00	91	6.4	6.4	6.6
	2.00	62	4.3	4.3	11.0
	3.00	64	4.5	4.5	15.4
	4.00	64	4.5	4.5	19.9
	5.00	118	8.2	8.2	28.1
	6.00	85	5.9	5.9	34.1
	7.00	79	5.5	5.5	39.6
	8.00	65	4.5	4.5	44.1
	9.00	52	3.6	3.6	47.8
	10.00	111	7.7	7.8	55.5
	11.00	38	2.7	2.7	58.2
	12.00	59	4.1	4.1	62.3
	13.00	42	2.9	2.9	65.2
	14.00	34	2.4	2.4	67.6
	15.00	119	8.3	8.3	75.9
	16.00	37	2.6	2.6	78.5
	17.00	24	1.7	1.7	80.2
	18.00	25	1.7	1.7	81.9
	19.00	15	1.0	1.0	83.0
	20.00	89	6.2	6.2	89.2

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	21.00	20	1.4	1.4	90.6
	22.00	25	1.7	1.7	92.3
	23.00	7	0.5	0.5	92.8
	24.00	7	0.5	0.5	93.3
	25.00	40	2.8	2.8	96.1
	26.00	14	1.0	1.0	97.1
	27.00	7	0.5	0.5	97.6
	28.00	9	0.6	0.6	98.2
	29.00	2	0.1	0.1	98.3
	30.00	17	1.2	1.2	99.5
	31.00	4	0.3	0.3	99.8
	32.00	1	0.1	0.1	99.9
	33.00	2	0.1	0.1	100.0
MISSING	72.00	1	0.1	Missing	100.0
	TOTAL	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 1432

MISSING OBSERVATIONS - 1

VARIABLE VAR 008

IF UNMARRIED, TIME (IN YEARS) THAT
IT IS HOPED TO REMARRY

	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
Not applicable	1431	99.9	99.9	99.9
1 Year	1	0.1	0.1	99.9
3 Years	1	0.1	0.1	100.0
TOTAL	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 1433

MISSING OBSERVATIONS - 0

VARIABLE VAR 009

AT WHAT AGE DO YOU THINK IT IS PROPER
FOR A GIRL TO MARRY?

	VALUE	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
Don't know	0.0	28	2.0	2.0	2.0
	1.00	3	0.2	0.2	2.2
	2.00	415	29.0	29.0	31.1
	3.00	488	34.1	34.1	65.2
	4.00	85	5.9	5.9	71.1
	5.00	7	0.5	0.5	71.6
	7.00	39	2.7	2.7	74.3
	10.00	3	0.2	0.2	74.5
	12.00	8	0.6	0.6	75.1
	13.00	10	0.7	0.7	75.8
	14.00	10	0.7	0.7	76.5
	15.00	132	9.2	9.2	85.7
	16.00	21	1.5	1.5	87.2
	17.00	16	1.1	1.1	88.3
	18.00	23	1.6	1.6	89.9
	19.00	4	0.3	0.3	90.2
	20.00	109	7.6	7.6	97.8
	21.00	3	0.2	0.2	98.0

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22.00	3	0.2	0.2	98.2
23.00	2	0.1	0.1	98.3
24.00	1	0.1	0.1	98.4
25.00	20	1.4	1.4	99.8
28.00	1	0.1	0.1	99.9
30.00	2	0.1	0.1	100.0
TOTAL	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 1433

MISSING OBSERVATIONS - 0

VARIABLE VAR 010 HOW MANY WIVES DO YOU THINK IS IDEAL
FOR A HAPPY FAMILY?

	VALUE	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
Don't know	0.0	46	3.2	3.2	3.2
	1.00	365	25.5	25.5	28.7
	2.00	668	46.6	46.6	75.3
	3.00	43	3.0	3.0	78.3
	4.00	243	17.0	17.0	95.3
	5.00	7	0.5	0.5	95.7
	6.00	12	0.8	0.8	96.6
	8.00	15	1.0	1.0	97.6
	10.00	6	0.4	0.4	98.0
	12.00	2	0.1	0.1	98.2
	20.00	4	0.3	0.3	98.5
	25.00	1	0.1	0.1	98.5
No Response	99.00	<u>21</u>	<u>1.5</u>	<u>1.5</u>	<u>100.0</u>
	TOTAL	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 1433

MISSING OBSERVATIONS - 0

VARIABLE VAR 011

HOW MANY WIVES DOES YOUR HUSBAND HAVE
NOW, INCLUDING YOURSELF?

	VALUE	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
Not applicable	0.0	22	1.5	1.5	1.5
	1.00	569	39.7	39.7	41.2
	2.00	483	33.7	33.7	74.9
	3.00	211	14.7	14.7	89.7
	4.00	111	7.7	7.7	97.4
	5.00	11	0.8	0.8	98.2
	6.00	10	0.7	0.7	98.9
	8.00	3	0.2	0.2	99.1
	9.00	1	0.1	0.1	99.2
	10.00	1	0.1	0.1	99.2
	11.00	4	0.3	0.3	99.5
No response	99.00	7	0.5	0.5	100.0
	TOTAL	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 1433

MISSING OBSERVATIONS - 0

VARIABLE VAR 012

WHAT IS YOUR POSITION AMONG THE WIVES

VALUE	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
Not applicable 0.0	18	1.3	1.3	1.3
1.00	896	62.5	62.5	63.8
2.00	376	26.2	26.2	90.0
3.00	98	6.8	6.8	96.9
4.00	37	2.6	2.6	99.4
5.00	2	0.1	0.1	99.6
6.00	2	0.1	0.1	99.7
7.00	1	0.1	0.1	99.8
8.00	1	0.1	0.1	99.9
9.00	2	0.1	0.1	100.0
TOTAL	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 1433

MISSING OBSERVATIONS - 0

VARIABLE VAR 013

HOW MANY TIMES HAVE YOU BEEN MARRIED
ALTOGETHER?

	VALUE	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
Not Applicable	0.0	121	8.4	8.4	8.4
	1.00	1122	78.3	78.3	86.7
	2.00	168	11.7	11.7	98.5
	3.00	10	0.7	0.7	99.2
	4.00	2	0.1	0.1	99.3
	5.00	1	0.1	0.1	99.4
No Response	99.00	9	0.6	0.6	100.0
	TOTAL	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 1433

MISSING OBSERVATIONS - 0

VARIABLE VAR 014 LENGTH OF STAY IN EACH UNION (i.e. MARRIAGE)

VALUE LABEL	VALUE	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
Not applicable	0.0	91	6.4	6.4	6.4
	1.00	99	6.9	6.9	13.3
	2.00	64	4.5	4.5	17.7
	3.00	86	6.0	6.0	23.7
	4.00	75	5.2	5.2	29.0
	5.00	113	7.9	7.9	36.8
	6.00	89	6.2	6.2	43.1
	7.00	86	6.0	6.0	49.1
	8.00	55	3.8	3.8	52.9
	9.00	53	3.7	3.7	56.6
	10.00	105	7.3	7.3	63.9
	11.00	36	2.5	2.5	66.4
	12.00	60	4.2	4.2	70.6
	13.00	37	2.6	2.6	73.2
	14.00	26	1.8	1.8	75.0
	15.00	103	7.2	7.2	82.2
	16.00	31	2.2	2.2	84.4
	17.00	19	1.3	1.3	85.7

	18.00	19	1.3	1.3	87.0
	19.00	15	1.0	1.0	88.1
	20.00	62	4.3	4.3	92.4
	21.00	17	1.2	1.2	93.6
	22.00	16	1.1	1.1	94.7
	23.00	2	0.1	0.1	94.8
	24.00	7	0.5	0.5	95.3
	25.00	32	2.2	2.2	97.6
	26.00	9	0.6	0.6	98.2
	27.00	1	0.1	0.1	98.3
	28.00	7	0.5	0.5	98.7
	29.00	1	0.1	0.1	98.8
	30.00	11	0.8	0.8	99.6
	31.00	4	0.3	0.3	99.9
	32.00	1	0.1	0.1	99.9
No Response	99.00	1	0.1	0.1	100.0
	TOTAL	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 1433

MISSING OBSERVATIONS - 0

VARIABLE VAR 015 NUMBER OF LIVE-BIRTHS IN FIRST MARRIAGE

VALUE LABEL	VALUE	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
	0.0	220	15.4	15.4	15.4
	1.00	283	19.7	19.7	35.1
	2.00	301	21.0	21.0	56.1
	3.00	254	17.7	17.7	73.8
	4.00	154	10.7	10.7	84.6
	5.00	102	7.1	7.1	91.7
	6.00	66	4.6	4.6	96.3
	7.00	31	2.2	2.2	98.5
	8.00	11	0.8	0.8	99.2
	9.00	5	0.3	0.3	99.6
	11.00	3	0.2	0.2	99.8
	12.00	1	0.1	0.1	99.9
	15.00	1	0.1	0.1	99.9
	20.00	1	0.1	0.1	100.0
	TOTAL	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 1433

MISSING OBSERVATIONS - 0

VARIABLE VAR 016

TOTAL DURATION OF MARRIAGE IN SUBSEQUENT
UNIONS.

	VALUE	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
Note Applicable	0.0	443	30.9	30.9	30.9
	1.00	72	5.0	5.0	35.9
	2.00	51	3.6	3.6	39.5
	3.00	51	3.6	3.6	43.1
	4.00	49	3.4	3.4	46.5
	5.00	82	5.7	5.7	52.2
	6.00	64	4.5	4.5	56.7
	7.00	57	4.0	4.0	60.6
	8.00	46	3.2	3.2	63.9
	9.00	40	2.8	2.8	66.6
	10.00	78	5.4	5.4	72.1
	11.00	26	1.8	1.8	73.9
	12.00	44	3.1	3.1	77.0
	13.00	31	2.2	2.2	79.1
	14.00	25	1.7	1.7	80.9
	15.00	70	4.9	4.9	85.8
	16.00	27	1.9	1.9	87.6
	17.00	16	1.1	1.1	88.8
	18.00	17	1.2	1.2	90.0
	19.00	7	0.5	0.5	90.4
	20.00	49	3.4	3.4	93.9

	21.00	13	0.9	0.9	94.8
	22.00	16	1.1	1.1	95.9
	23.00	4	0.3	0.3	96.2
	24.00	6	0.4	0.4	96.6
	25.00	23	1.6	1.6	98.2
	26.00	2	0.1	0.1	98.3
	27.00	2	0.1	0.1	98.5
	28.00	7	0.5	0.5	99.0
	29.00	1	0.1	0.1	99.0
	30.00	7	0.5	0.5	99.5
	31.00	2	0.1	0.1	99.7
	32.00	2	0.1	0.1	99.8
	33.00	2	0.1	0.1	99.9
No Response	99.00	<u>1</u>	<u>0.1</u>	<u>0.1</u>	<u>100.0</u>
	TOTAL	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 1433

MISSING OBSERVATIONS - 0

VARIABLE VAR 017 NUMBER OF CHILDREN BORN IN
SUBSEQUENT MARRIAGES/UNION

VALUE	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
0.0	521	36.4	36.4	36.4
1.00	195	13.6	13.6	50.0
2.00	224	15.6	15.6	65.6
3.00	190	13.3	13.3	78.9
4.00	130	9.1	9.1	87.9
5.00	82	5.7	5.7	93.6
6.00	51	3.6	3.6	97.2
7.00	23	1.6	1.6	98.8
8.00	7	0.5	0.5	99.3
9.00	5	0.3	0.3	99.7
11.00	3	0.2	0.2	99.9
15.00	1	0.1	0.1	99.9
20.00	1	0.1	0.1	100.0
TOTAL	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 1433

MISSING OBSERVATIONS - 0

VARIABLE VAR 018 HOW MANY WIVES DOES YOUR FATHER HAVE?

	VALUE	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
No Response	0.0	68	4.7	4.7	4.7
	1.00	172	12.0	12.0	16.8
	2.00	521	36.4	36.4	53.1
	3.00	260	18.1	18.2	71.3
	4.00	242	16.9	16.9	88.2
	5.00	44	3.1	3.1	91.3
	6.00	56	3.9	3.9	95.2
	7.00	13	0.9	0.9	96.1
	8.00	24	1.7	1.7	97.8
	9.00	10	0.7	0.7	98.5
	10.00	5	0.3	0.3	98.8
	11.00	3	0.2	0.2	99.0
	12.00	7	0.5	0.5	99.5
	13.00	1	0.1	0.1	99.6
	14.00	1	0.1	0.1	99.7
	15.00	2	0.1	0.1	99.8
	18.00	1	0.1	0.1	99.9
	20.00	1	0.1	0.1	99.9
	26.00	1	0.1	0.1	100.0
	82.00	1	0.1	MISSING	100.0
	TOTAL	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 1432

MISSING OBSERVATIONS - 1

VARIABLE VAR 019		NUMBER OF PEOPLE IN HUSBAND'S HOUSEHOLD			
	VALUE	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
No Response	0.0	55	3.8	3.8	3.8
	1.00	12	0.8	0.8	4.7
	2.00	80	5.6	5.6	10.3
	3.00	131	9.1	9.1	19.4
	4.00	172	12.0	12.0	31.4
	5.00	152	10.6	10.6	42.0
	6.00	137	9.6	9.6	51.6
	7.00	129	9.0	9.0	60.6
	8.00	124	8.7	8.7	69.2
	9.00	91	6.4	6.4	75.6
	10.00	78	5.4	5.4	81.0
	11.00	40	2.8	2.8	83.8
	12.00	54	3.8	3.8	87.6
	13.00	48	3.3	3.3	90.9
	14.00	26	1.8	1.8	92.7
	15.00	38	2.7	2.7	95.4
	16.00	14	1.0	1.0	96.4
	17.00	8	0.6	0.6	96.9
	18.00	11	0.8	0.8	97.7
	19.00	9	0.6	0.6	98.3

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20.00	17	1.2	1.2	99.5
21.00	1	0.1	0.1	99.6
22.00	2	0.1	0.1	99.7
28.00	1	0.1	0.1	99.8
30.00	1	0.1	0.1	99.9
32.00	2	0.1	0.1	100.0
TOTAL	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 1433

MISSING OBSERVATIONS - 0

VARIABLE VAR 020

NUMBER OF LIVING CHILDREN

VALUE	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
0.0	130	9.1	9.1	9.1
1.00	322	22.5	22.5	31.5
2.00	381	26.6	26.6	58.1
3.00	289	20.2	20.2	78.3
4.00	179	12.5	12.5	90.8
5.00	84	5.9	5.9	96.7
6.00	35	2.4	2.4	99.1
7.00	12	0.8	0.8	99.9
8.00	1	0.1	0.1	100.0
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TOTAL	1433	100.0	100.0	100.0

VALID OBSERVATIONS - 1433

MISSING OBSERVATIONS - 0

VARIABLE VAR 021 NUMBER OF CHILDREN DEAD

VALUE	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
0.0	840	58.6	58.6	58.6
1.00	339	23.7	23.7	82.3
2.00	159	11.1	11.1	93.4
3.00	62	4.3	4.3	97.7
4.00	15	1.0	1.0	98.7
5.00	10	0.7	0.7	99.4
6.00	5	0.3	0.3	99.8
8.00	1	0.1	0.1	99.9
9.00	1	0.1	0.1	99.9
10.00	1	0.1	0.1	100.0
TOTAL	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS -- 1433

MISSING OBSERVATIONS ~ 0

VARIABLE VAR 022

NUMBER OF LIVE BIRTHS

VALUE	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
0.0	94	6.6	6.6	6.6
1.00	247	17.2	17.2	23.8
2.00	310	21.6	21.6	45.4
3.00	270	18.8	18.8	64.3
4.00	196	13.7	13.7	77.9
5.00	142	9.9	9.9	87.9
6.00	94	6.6	6.6	94.4
7.00	47	3.3	3.3	97.7
8.00	19	1.3	1.3	99.0
9.00	8	0.6	0.6	99.6
10.00	1	0.1	0.1	99.7
11.00	3	0.2	0.2	99.9
12.00	1	0.1	0.1	99.9
13.00	1	0.1	0.1	100.0
TOTAL	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 1433

MISSING OBSERVATIONS - 0

VARIABLE VAR 023 WHETHER PREGNANT IN PREVIOUS 18 MONTHS

	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
Not Applicable	5	0.3	0.3	0.3
Yes	730	50.9	51.0	51.4
No	679	47.4	47.4	98.8
No Response	17	1.2	1.2	100.0
	1	0.1	MISSING	100.0
	1	0.1	MISSING	100.0
	<u> </u>	<u> </u>	<u> </u>	<u> </u>
TOTAL	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 1431

MISSING OBSERVATIONS - 2

VARIABLE VAR 024 OUTCOME OF PREGNANCIES IN PREVIOUS
18 MONTHS

	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
No Response	160	11.2	11.2	11.2
Live Birth, Baby living	531	37.1	37.1	48.2
Live Birth, Baby dead	22	1.5	1.5	49.8
Miscarriage	19	1.3	1.3	51.1
Still Birth	3	0.2	0.2	51.3
Still pregnant	164	11.4	11.4	62.7
Not applicable/ No response/ Other	<u>534</u>	<u>37.3</u>	<u>37.3</u>	<u>100.0</u>
TOTAL	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 1433

MISSING OBSERVATIONS .. 0

VARIABLE VAR 025

OUTCOME OF FIRST PREGNANCY

	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
No Response	4	0.3	0.3	0.3
Live birth/ Baby living	1104	76.8	76.8	77.1
Live birth/ Baby dead	184	12.8	12.8	90.0
Miscarriage	23	1.6	1.6	91.6
Induced Abortion	3	0.2	0.2	91.8
Still birth	9	0.6	0.6	92.4
Not applicable/ No Response	<u>109</u>	<u>7.6</u>	<u>7.6</u>	<u>100.0</u>
TOTAL	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 1433

MISSING OBSERVATIONS 0

VARIABLE VAR 026 OUTCOME OF SECOND PREGNANCY

	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
No Response	4	0.3	0.3	0.3
Live birth/ Baby living	875	61.1	61.1	61.3
Live birth/ Baby dead	182	12.7	12.7	74.0
Miscarriage	14	1.0	1.0	75.0
Induced Abortion	3	0.2	0.2	75.2
Still birth	4	0.3	0.3	75.5
Not applicable/ No Response	<u>351</u>	<u>24.5</u>	<u>24.5</u>	<u>100.0</u>
TOTAL	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 1433

MISSING OBSERVATIONS - 0

VARIABLE VAR 027 OUTCOME OF THIRD PREGNANCY

	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
No Response	4	0.3	0.3	0.3
Live birth/ baby living	608	42.4	42.4	42.7
Live birth/ baby dead	131	9.1	9.1	51.8
Miscarriage	21	1.5	1.5	53.3
Still birth	9	0.6	0.6	53.9
Not applicable/ No response	<u>660</u>	<u>46.1</u>	<u>46.1</u>	<u>100.0</u>
TOTAL	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 1433

MISSING OBSERVATIONS - 0

VARIABLE VAR 028 ATTITUDE TO SUDDEN AWARENESS OF PREGNANCY

	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
No Response	1	0.1	0.1	0.1
I'll be too happy to carry preg- nancy to term	1122	78.3	78.3	78.4
I'll be disturbed but will carry the baby to term	149	10.4	10.4	88.8
Procure abortion	9	0.6	0.6	89.4
I don't know, Other	135	9.4	9.4	98.8
	9	0.6	0.6	99.4
	4	0.3	0.3	99.7
Not applicable	1	0.1	0.1	99.8
	1	0.1	0.1	99.9
	2	0.1	0.1	100.0
	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>
TOTAL	1433	100.0	100.0	100.0

VALID OBSERVATIONS - 1433

MISSING OBSERVATIONS - 0

VARIABLE VAR 029 WHAT DO YOU THINK IS THE CAUSE OF STERILITY IN SOME WOMEN?

	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
No Response	1	0.1	0.1	0.1
God's design, destiny	52	3.6	3.6	3.7
Sexual abuse	74	5.2	5.2	8.9
Old Age	3	0.2	0.2	9.1
Evil people, witchcraft etc.	1	0.1	0.1	9.1
Biological impairment	134	9.4	9.4	18.5
Marital instability	7	0.5	0.5	19.0
Other	641	44.7	44.7	63.7
Don't know/ No response	520	36.3	36.3	100.0
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TOTAL	1433	100.0	100.0	100.0
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VALID OBSERVATIONS - 1433

MISSING OBSERVATIONS - 0

VARIABLE VAR 030

DO YOU KNOW OF ANY MEANS BY WHICH AN
INFERTILE WOMAN CAN BE HELPED TO BECOME
PREGNANT?

	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
No response	2	0.1	0.1	0.1
Hospital, Medical	773	53.9	54.2	54.4
Native doctor/ Herbalist	127	8.9	8.9	63.3
Prayer-Church, Mosque etc.	35	2.4	2.5	65.8
Proper Sexual Moral Lessons	1	0.1	0.1	65.8
Other	60	4.2	4.2	70.0
Don't know/ No response	427	29.8	30.0	100.0
	5	0.3	Missing	100.0
	3	0.2	Missing	100.0
TOTAL	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 1425

MISSING OBSERVATIONS - 8

VARIABLE VAR 031 HOW MANY CHILDREN DO YOU EXPECT TO HAVE ALTOGETHER?

	VALUE	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ PERCENT)
Not applicable	0.0	232	16.2	16.2	16.2
	1.00	2	0.1	0.1	16.3
	2.00	9	0.6	0.6	17.0
	3.00	11	0.8	0.8	17.7
	4.00	125	8.7	8.7	26.4
	5.00	80	5.6	5.6	32.0
	6.00	389	27.1	27.1	59.2
	7.00	24	1.7	1.7	60.9
	8.00	196	13.7	13.7	74.5
	9.00	9	0.6	0.6	75.2
	10.00	87	6.1	6.1	81.2
	11.00	1	0.1	0.1	81.3
	12.00	80	5.6	5.6	86.9
	13.00	2	0.1	0.1	87.0
	14.00	7	0.5	0.5	87.5
	15.00	4	0.3	0.3	87.8
	16.00	3	0.2	0.2	88.0
	18.00	2	0.1	0.1	88.1
	20.00	38	2.7	2.7	90.8
	24.00	2	0.1	0.1	90.9
	30.00	1	0.1	0.1	91.0
No response	99.00	<u>129</u>	<u>9.0</u>	<u>9.0</u>	<u>100.0</u>
TOTAL		<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 1433

MISSING OBSERVATIONS 0

VARIABLE VAR 033 WHAT IS THE SEX COMPOSITION OF YOUR CHILDREN NOW? (BOYS GIRLS

BOYS	GIRLS	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ. (PERCENT)
0	0	129	9.0	9.0	9.0
0	1	172	12.0	12.0	21.0
0	2	74	5.2	5.2	26.2
0	3	27	1.9	1.9	28.1
0	4	10	0.7	0.7	28.8
1	0	155	10.8	10.8	39.6
1	1	202	14.1	14.1	53.7
1	2	96	6.7	6.7	60.4
1	3	49	3.4	3.4	63.8
1	4	8	0.6	0.6	64.3
1	5	5	0.3	0.3	64.7
1	7	1	0.1	0.1	64.8
2	0	95	6.6	6.6	71.4
2	1	130	9.1	9.1	80.5
2	2	76	5.3	5.3	85.8
2	3	27	1.9	1.9	87.6
2	4	7	0.5	0.5	88.1
2	5	2	0.1	0.1	88.3
3	0	36	2.5	2.5	90.8
3	1	33	2.3	2.3	93.1
3	2	26	1.8	1.8	94.9

BOYS	GIRLS	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ. (PERCENT)
3	3	12	0.8	0.8	95.7
3	4	4	0.3	0.3	96.0
4	0	14	1.0	1.0	97.0
4	1	20	1.4	1.4	98.4
4	2	8	0.6	0.6	99.0
4	3	2	0.1	0.1	99.1
4	4	1	0.1	0.1	99.2
5	0	5	0.3	0.3	99.5
5	1	2	0.1	0.1	99.7
5	2	3	0.2	0.2	99.9
6	0	2	0.1	0.1	100.0
		<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 1433

MISSING OBSERVATIONS - 0

VAR 034 WOULD YOU HAVE MORE CHILDREN IN ORDER
TO ACHIEVE THE IDEAL SEX COMPOSITION?

	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
	31	2.2	2.2	2.2
Yes	1286	89.7	90.1	92.3
No	83	5.8	5.8	98.1
Don't know/ No response	27	1.9	1.9	100.0
	1	0.1	Missing	100.0
	1	0.1	Missing	100.0
	4	0.3	Missing	100.0
TOTAL	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 1427

MISSING OBSERVATIONS - 6

VARIABLE VAR 035 HAVE YOU USED ANY MEANS TO PREVENT YOU
FROM BECOMING PREGNANT?

	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
Yes	21	1.5	1.5	1.5
No	1394	97.3	97.3	98.7
Don't know/ No response	18	1.3	1.3	100.0
TOTAL	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 1433

MISSING OBSERVATIONS - 0

VARIABLE VAR 036 METHODS OF CONTRACEPTION USED

	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
	1	0.1	0.1	0.1
Sexual abstinence	53	3.7	3.7	3.8
Charms by native doctor	2	0.1	0.1	3.9
Withdrawal (coitus interruptive)	1	0.1	0.1	4.0
Condoms	2	0.1	0.1	4.1
No response/ Not applicable	1373	95.8	95.9	100.0
	1	0.1	Missing	100.0
TOTAL	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 1432

MISSING OBSERVATIONS - 1

	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
Less than 6 months	1393	97.2	97.2	97.2
	1	0.1	0.1	97.3
6 - 12 months	7	0.5	0.5	97.8
13 - 24 months	29	2.0	2.0	99.8
More than 24 months	<u>3</u>	<u>0.2</u>	<u>0.2</u>	<u>100.0</u>
TOTAL	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 1433

MISSING OBSERVATIONS - 0

VARIABLE VAR 038 WHAT IS YOUR RELIGION?

	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
Moslem	1188	82.9	83.0	83.0
Christian-Protestant	220	15.4	15.4	98.3
Christian-Catholic	23	1.6	1.6	99.9
Traditional	1	0.1	0.1	100.0
	1	0.1	Missing	100.0
	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>
TOTAL	1433	100.0	100.0	100.0

VALID OBSERVATIONS -1432

MISSING OBSERVATIONS- 1

VARIABLE VAR 039

MEDICAL HISTORY

PREVIOUS ILLNESS

	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
None	1408	98.3	98.3	98.3
Abdominal Operations	21	1.5	1.5	99.7
Tuberculosis	<u>4</u>	<u>0.3</u>	<u>0.3</u>	<u>100.0</u>
TOTAL	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 1433

MISSING OBSERVATIONS - 0

VARIABLE VAR 040

DOES ANYBODY IN YOUR HOUSEHOLD SUFFER FROM TUBERCULOSIS?

	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
No response	94	6.6	6.6	6.6
Yes	6	0.4	0.4	7.0
No	426	29.7	29.8	36.8
Don't know/ No response	905	63.2	63.2	100.0
	<u>2</u>	<u>0.1</u>	<u>Missing</u>	<u>100.0</u>
TOTAL	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 1431

MISSING OBSERVATIONS - 2

VARIABLE VAR 041 AGE OF FIRST MENSTRUATION YEARS)

	VALUE	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
No response	0.0	80	5.6	5.6	5.6
	1.00	3	0.2	0.2	5.8
	2.00	1	0.1	0.1	5.9
	3.00	1	0.1	0.1	5.9
	4.00	2.	0.1	0.1	6.1
	8.00	1	0.1	0.1	6.1
	9.00	7	0.5	0.5	6.6
	10.00	42	2.9	2.9	9.6
	11.00	38	2.7	2.7	12.2
	12.00	155	10.8	10.8	23.0
	13.00	189	13.2	13.2	36.2
	14.00	228	15.9	15.9	52.1
	15.00	370	25.8	28.8	77.9
	16.00	120	8.4	8.4	86.3
	17.00	78	5.4	5.4	91.8
	18.00	44	3.1	3.1	94.8
	19.00	21	1.5	1.5	96.3
	20.00	30	2.1	2.1	98.4
	21.00	7	0.5	0.5	98.9
	22.00	3	0.2	0.2	99.1

23.00	8	0.6	0.6	99.7
24.00	1	0.1	0.1	99.7
25.00	1	0.1	0.1	99.8
46.00	1	0.1	0.1	99.9
51.00	1	0.1	0.1	99.9
58.00	1	0.1	0.1	100.0
TOTAL	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VARIABLE VAR 043

PETTERN OF MENSTRUATION

	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
No response	9	0.6	0.6	0.6
Regular	1194	83.3	83.3	83.9
Not regular	43	3.0	3.0	87.0
Heavy Bleeding	5	0.3	0.3	87.3
Painful	17	1.2	1.2	88.5
Never menstruated	1	0.1	0.1	88.6
No response/ Not applicable	163	11.4	11.4	99.9
	1	0.1	0.1	100.0
	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>
TOTAL	1433	100.0	100.0	100.0
VALID OBSERVATIONS	- 1433			
MISSING OBSERVATIONS	- 0			

VARIABLE VAR 045 FREQUENCY OF SEXUAL INTERCOURSE
PER WEEK

VALUE LABEL	VALUE	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
	0.0	198	13.8	13.8	13.8
	1.00	232	16.2	16.2	30.0
	2.00	608	42.4	42.4	72.4
	3.00	199	13.9	13.9	86.3
	4.00	110	7.7	7.7	94.0
	5.00	16	1.1	1.1	95.1
	6.00	13	0.9	0.9	96.0
	7.00	26	1.8	1.8	97.8
	8.00	15	1.0	1.0	98.9
	9.00	1	0.1	0.1	99.0
	10.00	6	0.4	0.4	99.4
	12.00	2	0.1	0.1	99.5
	14.00	1	0.1	0.1	99.6
	24.00	1	0.1	0.1	99.7
no response/Other	99.00	5	0.3	0.3	100.0
	TOTAL	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 1433

MISSING OBSERVATIONS - 0

VARIABLE VAR 044

VAGINAL DISCHARGE

	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
No response	8	0.6	0.6	0.6
Present	356	24.8	24.9	25.5
Not present	358	25.0	25.0	50.5
Don't know	708	49.4	49.5	100.0
	1	0.1	Missing	100.0
	1	0.1	Missing	100.0
	1	0.1	Missing	100.0
	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>
TOTAL				

VALID OBSERVATIONS - 1430

MISSING OBSERVATIONS - 3

VARIABLE VAR 046 DIFFICULTY OR PAIN WITH SEXUAL INTERCOURSE

	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
	70	4.9	4.9	4.9
Yes	23	1.6	1.6	6.5
No	1221	85.2	85.2	91.7
No response/Other	112	7.8	7.8	99.5
	4	0.3	0.3	99.8
	1	0.1	0.1	99.9
	1	0.1	0.1	99.9
	1	0.1	0.1	100.0
	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>
TOTAL				

VALID OBSERVATIONS - 1433

MISSING OBSERVATIONS - 0

VARIABLE VAR 047 LENGTH OF TIME SPENT IN BREAST
FEEDING (months)

	MONTHS	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
No response	0.0	118	8.2	8.2	8.2
	1.00	1	0.1	0.1	8.3
	2.00	4	0.3	0.3	8.6
	3.00	5	0.3	0.3	8.9
	4.00	3	0.2	0.2	9.1
	5.00	2	0.1	0.1	9.3
	6.00	2	0.1	0.1	9.4
	7.00	1	0.1	0.1	9.5
	8.00	2	0.1	0.1	9.6
	9.00	11	0.8	0.8	10.4
	10.00	3	0.2	0.2	10.6
	11.00	5	0.3	0.3	11.0
	12.00	153	10.7	10.7	21.6
	14.00	1	0.1	0.1	21.7
	15.00	7	0.5	0.5	22.2
	16.00	5	0.3	0.3	22.5
	17.00	4	0.3	0.3	22.8
	18.00	236	16.5	16.5	39.3
	19.00	1	0.1	0.1	39.4
	21.00	4	0.3	0.3	39.6
	22.00	2	0.1	0.1	39.8

	23.00	1	0.1	0.1	39.8
	24.00	650	45.4	45.4	85.2
	26.00	1	0.1	0.1	85.3
	30.00	22	1.5	1.5	86.8
	36.00	144	10.0	10.0	96.9
	42.00	1	0.1	0.1	96.9
	48.00	3	0.2	0.2	97.1
	60.00	1	0.1	0.1	97.2
ot applicable	99.00	40	2.8	2.8	100.0
		<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>
TOTAL					

VALID OBSERVATIONS - 1433

MISSING OBSERVATIONS - 0

VARIABLE VAR 048 DO YOU HAVE SEXUAL INTERCOURSE WHEN YOU ARE BREAST FEEDING?

	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
No response	65	4.5	4.5	4.5
Yes	39	2.7	2.7	7.3
No	1306	91.1	91.3	98.5
Not applicable/ No response/Other	21	1.5	1.5	100.0
	1	0.1	MISSING	100.0
	1	0.1	MISSING	100.0
	<u> </u>	<u> </u>	<u> </u>	<u> </u>
TOTAL	<u>1433</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>

VALID OBSERVATIONS - 1431

MISSING OBSERVATIONS - 2

VARIABLE VAR 049 IS PATIENT TO BE REFERRED TO U.C.H.?

	ABSOLUTE FREQUENCY	RELATIVE FREQUENCY (PERCENT)	ADJUSTED FREQUENCY (PERCENT)	CUMULATIVE ADJ FREQ (PERCENT)
No response	665	46.4	46.4	46.4
Yes	71	5.0	5.0	51.4
No	694	48.4	48.4	99.8
Other	3	0.2	0.2	100.0
	<hr/>	<hr/>	<hr/>	<hr/>
TOTAL	1433	100.0	100.0	100.0
	<hr/>	<hr/>	<hr/>	<hr/>
VALID OBSERVATIONS	- 1433			
MISSING OBSERVATIONS	- 0			