

SOCIETY AND DEVELOPMENT

VOLUME 2 - Nos. 1& 2 2011

**An Interdisciplinary Journal of the
Nigerian Sociological Society**

**THE EFFECT OF INTERSPOUSAL COMMUNICATION ON
CONTRACEPTIVE USE AMONG MARRIED COUPLES IN ALIMOSHO
LOCAL GOVERNMENT AREA OF IPAJA, LAGOS STATE, NIGERIA**

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INTRODUCTION

Most African societies are patriarchal, with family structures in which husbands exert authority over their wives on most issues (Kritz and Gurak, 1991; Isiugo-Abanihe, 1994; Oyediran, 2002). Men and their kinsmen are the decision-makers on issues relating to reproductive health, while their women are expected to remain submissive. In this society, women hardly have a say on matters relating to the timing of the next birth, the number of children and when to stop childbearing except among a relatively small emergent highly educated career women. Because the views of women who bear the burden of pregnancy and child-birth are hardly sought in traditional societies, the number of children a woman bears is perceived to most often reflects the desired fertility of her husband and his relatives (Caldwell and Caldwell, 1987). Yet, traditionally, fertility and family planning research and programmes have focused on women's behaviours.

Gender differences in fertility desires have been attributed to the relative position of men and women in the male dominated cultures (Coombs and Chang, 1981; Koenig, 1984; Mitra, 1985; Mason and Taj, 1987), and might be reduced through effective spousal communication on fertility expectations of individuals in marital dyad. There has recently been a revival of interest in the relative roles played by men and women in reproductive decisions, particularly those concerning number of children and fertility regulation (Mott and Mott, 1985; Ezeh, 1993; Dodoo, 1993; Bankole, 1995; Bankole and Singh, 1998; Feyisetan, 1998; Odusola, 1998; Zulu, 1998). The studies provide an opportunity for examining gender differences in reproductive behaviours and fertility preferences, and an understanding of the husband's influence in decision-making regarding family size and contraceptive use. In male dominated societies like the Yoruba, women are not supposed to take independent decisions on reproductive issues. However, because of the relative decline in men's resources and women's increasing contribution to family resources in recent times, female participation in decision-making, including reproductive health matters, has changed among Yoruba women (Feyisetan, 2000).

The level of spousal agreement regarding fertility and family planning remains an area of scholarly contention. Although, high concurrence would be expected because of daily partners contact and common living conditions. Cross-national studies of couple's concurrence on contraceptive method use show frequent discrepancies between husbands' and wives' reports (Zulu Eliya, 1998).

Obviously, there is some degree of inadequacy of research to date to answer some important questions about Yoruba fertility, specifically, the contribution of inter-spousal communication. Although, some fertility decline has begun, high fertility and low contraceptive use continue to characterize the Yoruba-speaking people of South-western Nigeria, as well as other ethnic groups in Nigeria. This has been a major concern to planners, researchers and policy makers in most Sub-Saharan African countries due to the negative impact of high population growth on socio-economic development.

Thus, in transitional Yoruba society, the fertility desires within the marital dyad may have become an important predictor of the couple's fertility behaviour. For instance, Bankole (1995) observed that a husband's desire is dominant in predicting the couple's behaviour when the number of living children is small, while the wife's desire becomes dominant as the number of children increases. This implies that the pattern and level of interaction between husband and wife has become an important factor to examine despite the differences in reproductive goal of the marital partners. In addition, it is evident that fertility related decision-making is complex particularly in the Yoruba society. Therefore, current efforts in demographic and health surveys should be geared toward the use of husband-wife dyad (marital partners) rather than individuals as a unit of analysis. Since marital fertility involves participation of the wife and husband who may differ in their reproductive goals (in terms of number and sex composition of children, timing of having the children), successful planning and decision-making about fertility size and use of contraceptives require effective communication of both marital partners (Marsiglio and Menaphan, 1987; Nyblade and Menken, 1993; Gage, 1995; Feyisetan, 2000; Oyediran, 2002). Hence, the pattern and processes of a couple's communication can undoubtedly have major consequences for number of children, timing of birth and contraceptive adoption. Thus, communication between marital partners becomes the first step in a rational fertility decision-making procedure. Consequently, in seeking to understand the determinants of fertility behaviour in complex societies, such as the Yoruba, scholars are increasingly turning their attention to the micro environment within which women and couples live, based on the premise that those contexts set norms that guide fertility behaviour (Entwisle, Mason and Hermalin, 1986).

One of the chaotic areas in conjugal relationship is communication between husband and wife. No doubt, there are many studies on issues concerning husband and wife relationship, little has often been said on the degree and level of inter-spousal communication especially in this part of the world. On one hand, the basis of relationship is communication and joint decision within which the family is better enhanced with cordial and regular discussion between the duo (husband and wife). On the other hand, while it is believed that many women are favorably inclined to practice family planning but often decline to practice it because of not receiving enough encouragement from their husbands (Mitra, Kamal, Carpenter-Yaman and Harbison 1985). Their husbands may have favorable attitudes toward family planning but this favorableness is never communicated to their wives (Mitra, Kamal, Carpenter-Yaman and Harbison et al; 1985).

This study is significant in many ways because it will greatly benefit the Nigerian government, private organizations, the academic society, social scientists and policy makers for the following reasons: Firstly, since the effect of inter-spousal communication on contraceptive use among married couples is one of the major challenges of most Sub-Saharan Africa that has not received adequate attention up till date. Secondly, there are not many studies recently done by Scholars on the effect of inter-spousal communication on contraceptive use in both Africa and Nigeria. However, many studies were carried out on this subject for the past 8 years (almost a decade now) in other parts of the world.

Despite the aforementioned background, this study tries to answer these bothering issues of concern: Firstly, what has been the effect of inter-spousal communication on contraceptive use in Ipaja, Lagos state? Secondly, is/are there reason(s) for non-usage of contraceptives among the married couples in Ipaja, Lagos state?

Essentially, the main focus of this paper is to explore the effect of inter-spousal communication on contraceptive use among married couples in Alimosho local government area, Ipaja Lagos State of Nigeria.

Methodology: A total sample size of 250 married couples was randomly selected from 5- Enumeration Areas (E.As) in Alimosho Local Government Area of Ipaja, Lagos State, Nigeria. A multi-stage random sampling technique was used to select the married couples. Purposive sampling method was employed due to the fact that this research was a very sensitive one and in order to carry out the study effectively, married couples were randomly selected from these five enumeration areas. Already, Lagos state has been divided into Local Government Areas (L.G.As) which is further divided into constituencies. Each constituency is distributed into wards. However, Alimosho Local Government Area of Ipaja, Lagos state has been randomly chosen within which 5-Enumeration Areas (E.As) has been picked for this study. From each selected Enumeration Area, a house-listing/street numbering was done by using Primary Health Care/National Bureau of Statistics (PHC/NBS).The systematic random sampling method was employed to select the number of households where the married couples are residing. In short, 50 married couples were randomly picked from each Enumeration Areas which constituted the total sample size of 250 in 5-E.As. Information about demographic and socio-economic characteristics of respondents, whether the couples have ever been pregnant or not, whether the married couples have given birth, the number of children currently living with the married couples, whether the married couples have had their desired number of children, knowledge of inter-spousal communication and the sex of more children the respondents will have were collected from them with the help of questionnaires instrument. The technique employed in this research was a quantitative approach. The data was collected from a face-to-face interviewed via structured questionnaire that was carefully designed to incorporate all the necessary questions on the issues at hand.

Analysis of this recent study was based on 250 married couples that were interviewed on the effect of inter-spousal communication on contraceptive use in Alimosho Local Government Area of Ipaja, Lagos state. The data were analyzed with the aid of Statistical Packages for Social Scientists (SPSSversion I 5.0). After checking for incorrect responses, and missing values, descriptive statistics were calculated for all variables. Regression analysis was performed on the effect of inter-spousal communication on contraceptive use among the married couples in Alimosho Local Government Area of Ipaja, Lagos state and the results were interpreted accordingly. The data for the study was analyzed by using the information obtained through questionnaires and personal interviews. The variables of consideration on the frequency tables for this study includes: age, sex, religion, marital status, highest level of educational attainment, ethnicity and occupational categories respectively.

The study was carried out in Alimosho Local Government Area of Ipaja, Lagos State due to the proximity or closeness to the researcher, highly populated, one of the major centres of business, commerce and industry as well as being former capital of Federal Republic of Nigeria. The choice of Lagos State as the area of this study is due to the fact that it is a Yoruba Speaking dominated City just like other western parts of Nigeria (Oyediran, 2002).

Tables and Interpretations
Demographic and Socio-economic Characteristics of Married Couples
Table 1: Percentage distribution of respondents by age

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid 20-24	6	2.4	2.4	2.4
25-29	34	13.6	13.6	16.0
30-34	54	21.6	21.6	37.6
35-39	53	21.2	21.2	58.8
40 and above	88	35.2	35.2	94.0
Non response	15	6.0	6.0	100.0
Total	250	100.0	100.0	

Source: Field Report, April, 2010

The frequency table 1 shows the proportion of respondents by their age distribution. 2.4% of the respondents belong to age group 20-24. 13.6% fall within age group 25-29 age while 21.6% are between age 30 and 34. Also, about 21.2% are in the age group 35-39, 35.2% are 40 years and above. About 6.0% declined on their age.

Table 2: The sex of respondents

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Male	105	42.0	42.0	42.0
Female	145	58.0	58.0	100.0
Total	250	100.0	100.0	

Source: Field Report, April, 2010

The frequency table 2 shows that 42% of the respondents were males and 58% were females.

Table 3: The marital status of respondents

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Married	243	97.2	97.2	97.2
Separated	7	2.8	2.8	100.0
Total	250	100.0	100.0	

Source: Field Report, April, 2010

The frequency table 3 shows that 97.2% of the respondents are married and 2.8% are separated.

Table 4: The highest level of education of respondents

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Primary	16	6.4	6.4	6.4
Secondary	82	32.8	32.8	39.2
B.Sc Degree	101	40.4	40.4	79.6
Masters	24	9.6	9.6	89.2
Others	27	10.8	10.8	100.0
Total	250	100.0	100.0	

Source: Field Report, April, 2010

The frequency table 4 shows that 6.4% of the respondents acquired primary school qualification as their highest degree, 32.8% acquired secondary school qualification as their highest level of degree, 40.4% of respondents bagged B.Sc degree as their highest level of qualification, 9.6% of respondents bagged M.sc as their highest level of qualification while 10.8% had other qualifications like H.N.D and O.N.D.

Table 5: The occupation of respondents

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Civil servant	93	37.2	37.2	37.2
Self employed	129	51.6	51.6	88.8
Others	28	11.2	11.2	100.0
Total	250	100.0	100.0	

Source: Field Report, April, 2010

The frequency table 5 shows that 37.2% of the respondents are Civil servant, 51.6% are Self-employed, and 11.2% are into other occupation like working with Oil Company or lecturing in Universities or other higher institutions of learning.

Table 6: If the respondent has ever given birth

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Yes	220	88.0	88.0	88.0
No	30	12.0	12.0	100.0
Total	250	100.0	100.0	

SOURCE: Field Report, April, 2010

The frequency table 6 shows that 88.0% of the respondents have given birth and 12.0% of the respondents have not given birth.

Table 7: The sex of more children the respondents would prefer to have

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Male	88	35.2	35.2	35.2
female	56	22.4	22.4	57.6
None	43	17.2	17.2	74.8
Any	63	25.2	25.2	100.0
Total	250	100.0	100.0	

Source: Field Report, April, 2010

The frequency table 7 shows that 35.2% of the respondents would prefer to have more of male children, 22.4% of respondents would prefer to have more of female children, 17.2% of respondents would prefer not to have more sexes of children, and 25.2% of respondents would prefer to have any sex of children.

Table 8 Model Summary

(a) Predictors: (Constant), number of times the respondent communicate intimately with spouse in a week, if the respondent and spouse have regular discussion on contraceptive use

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.646(a)	.417	.412	21.30203

Table 9 ANOVA(b)

(a) Predictors: (Constant), number of times the respondent communicate intimately with spouse in a week, if the respondent and spouse have regular discussion on contraceptive use

(b) Dependent Variable: if yes, what effect it has had on their family planning

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	80186.702	2	40093.351	88.355	.000(a)
	Residual	112082.802	247	453.777		
	Total	192269.504	249			

Coefficients (a)

Table 10 (a) Dependent Variable: if yes, the effect it has had on their family planning

Model		Un-standardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		B
		1	(Constant)	-44.522	4.299	
	if the respondent and spouse have regular discussion on contraceptive use	45.389	3.428	.645	13.239	.000
	number of times the respondent communicate intimately with spouse in a week	.019	.063	.015	.301	.764

Hypothesis

Inter-spousal communication does not have a significant effect on contraceptive use: Inter-spousal communication has a significant effect on contraceptive use

Discussion of Results

From the above table 8, 9 and 10 respectively, the following deductions are clearly interpreted as follows: the regression analysis in table 8 indicated that there is positive relationship between inter-spousal communication and contraceptive use. This implies that the more couples communicate together, the more the likelihood of using contraceptive in their homes. Also, evidence from table 9 showed that inter-spousal communication is highly significant to contraceptive usage at $p=0.000(a)$. This means that inter-spousal communication must be observed for any choice of contraceptive use to happen among the married couples. Table 9 further buttressed that the number of times the respondents communicate intimately with their spouses in a week is also positively related to contraceptive usage. The results from table 10 showed that husbands and their wives communicate regularly on contraceptive use. However, when considering the number of times the respondents communicate intimately in a week, the relationship is not significant ($p=0.764$). Overall, since F -calculated (88.355) is greater than F -tabulated (4.71); then, we accept the alternate hypothesis () which says that there is a significant effect of inter-spousal communication on contraceptive use.

Conclusions

The primary focus of this paper was to empirically examine the effect of inter-spousal communication on contraceptive use among married couples in Alimosho Local Government Area of Ipaja, Lagos state, Nigeria. The paper is hereby concluded with evidences from frequency tables and model summary. Evidences from frequency tables include; firstly, the majority of married couples interviewed are 40years and above, more married women than men were interviewed, and most of the respondents are Christians in this study. Secondly, almost all the respondents are married; Yoruba respondents dominated in this study; most of the respondents acquired first degrees (B.Sc) from Universities; and the largest proportion of respondents are self-employed in this study. Thirdly, more married women have been pregnant in this study; most of the respondents have given birth; the largest proportion of respondents have had 3 children; and the majority of respondents have all their children living with them.

Fourthly, most of the respondents have had their desired number of children; they also prefer to have more males than females (they are sex-selective and gender-biased); and eventually, majority of respondents have the knowledge of inter-spousal communication in this study.

Alternatively, evidences from model summary include the following: firstly, that there is positive relationship between inter-spousal communication and contraceptive use. Secondly, that the number of times the respondents communicate intimately with their spouses in a week is also positively related to contraceptive usage. Thirdly, the husbands and their wives communicate regularly on contraceptive use. However, when considering the number of times the respondents communicate intimately in a week, the relationship is not significant.

Lastly, this study indicated that there is a significant effect of inter-spousal communication on contraceptive use among married couples in Alimosho Local Government Area of Ipaja, Lagos State, Nigeria.

Recommendations

The following are the recommendations suggested by the researcher: Firstly, the paper recommends that the present Democratic government in Nigeria should urgently allocate more funds to the health sector so as to boost the effectiveness of some family planning methods and consequently reduce the price of some reliable contraceptives. Secondly, there is an urgent need for Non-governmental organizations to create more grass-root awareness on radio, television and internet for couples mainly the husbands, to make them realize the positive effects that usage of contraceptives would have on the reproductive health of their wives.

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