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Socio-Cultural Framework on Women Role in Marriage and Reproductive Health Dynamics in Rural Areas: The Case of Some Selected Villages in Momo Division in the North West Region- Cameroon

Fonjong Lucy Udikoh Epse Djemna

Faculty of Letters and Social Sciences Department of Anthropology/Sociology, University of Maroua

Abstract:

This study dwells on literary and field data gathered on the role of the woman in some selected parts of Momo Division of the North West region of Cameroon. It demonstrates the contribution of socio-cultural hold to the contemporary model experienced in the role of the woman today as compared to the past. In acquiring the necessary qualitative data, we used lifestories, interviews, focus groups and observations. The goal of this study is to promote women since they are already integrated in the social system. Four villages from two clans in Momo Division were studied. Our study reveals that cultural contacts and information enhance social change. Rural sustainable development is highly recommended to maintain unique cultural ideas that could boom women participation as they stands as agents of development.

Keywords: Cultural Framework, Women Role. Marriage, Reproductive Health, Dynamics

1. Introduction

Though women are highly accepted in many societies, one of the major reasons is because of the great role they play in the society which is childbearing. Therefore the data presented here is in line with the information we received on the field base our topic. Meanwhile relating to this sphere of learning, Anne T. et al (1994) study the problems of women from infancy to old age. In their study, they set forth strategies for developing countries and their partners to improve on women's health and nutrition. This is through a set of cost effective instrumentation of health services that addresses the major causes of death and disability among women in developing countries. All over the world, several women die each year, and 90% of them in developing countries from pregnancy and childbirth related causes. (World Health Organisation Magazine on Women's Health, 1995) discuss this. In this light, it is quite unquestionable for some rural areas where one finds the woman though fairly emancipated, yet faces serious health problems as we witnessed on the field. Some of the problems faced by these women are in respect to the management of their fertility. Due to the biological indispensable place the woman handles in childbearing especially at conception and delivery, the woman stand as a subject of our study. However, it is necessary to point out in our study that, we are

not looking at the woman in her socio-cultural environment nowadays as compared to the past as she is being edified. This is so because she is today moving to new areas and meeting other cultures. Though edified in the process, cultural values and economic deprivation have seriously hindered her total empowerment in the reproductive domain. This necessitates a study because though women are indispensible in committee development, they are a susceptible group that needs to be protected from many types of illnesses. One of the most and important reason for this, as mentioned earlier is because the woman has a specific role to play in the society. Since this role concerns her health directly, there is a call for collaborative care and effort so as promote and encourage the woman.

2. Methodology

Our study population consisted of four villages from some two clans of Momo Division. These villages were randomly selected after an analytic scientific compilation of extensive field data and other materials gathered on gender - marriage and reproductive issues in Momo Division of the North West region. After exploring documents from research centers like SIL, IFORD, etc, we exploited the internet and got information from articles, books and other information on the theme of gender and the role of women. After gathering adequate information from documentaries, we proceeded to fieldwork in the above mentioned area, specifically in the Ngie and Meta clans where the villages were selected. Preliminary visits and discussions were done on the subject before intensive fieldwork. Our informants were from the ages of 40 and above and were questioned for at most three hours and at least forty-five minutes. Meanwhile they had the freedom to talk without divergence on the subject research on. At least 400 persons were questioned out of 500 who were solicited since some of them did not respect appointments due to other engagements. Men and women were interviewed and we used the purpose sampling in collecting our data. In all we had 150 men and 250 women to talk with. 15 focus groups were held with 12 members in the highest populated and 6 members recorded in the least populated. All respondents who were interested were questioned without discrimination of religion, class or profession.

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These permit us to collect dynamic views to enrich our data. Periods of transhumance like summer holidays and development meetings were exploited.

3. Presentation of Research Area

The Bamenda grassland cover the entire present day North West Region of the Republic of Cameroon, situated between latitude 5° 14' and 7° north and longitude 9° 145' and 11°10' east. The region is almost quadrilateral shaped. It is bounded to the West and North by the Gongola State of Nigeria, to the north-east and east by the Adamawa and Barnum regions respectively, and southwest and south by the Manyu Division. The region is divided into seven divisions. These include: Boyo, Bui, Dongo-Mantoung, Menchum, Mezam, Momo and Ngoketungia.

North West region in which Momo Division is found, is a highland area consisting of a plateau which stretches about one hundred miles and varies between ten and forty miles.

Culturally, the North West region is made of diverse ethnic groups with variety of dialects of which the Widikum ethnic group is one. Dominant cultural groups here are the Mankon found in Bamenda centre that is the administrative capital of the North West region as well as the Nso people found in Bui Division. Other cultural groups include: Nkwen, Bali, Wimbums and the Mbororo who are found all over the North West region. This study is focus on the Ngie and Meta communities of Momo Division in the North West region.

4. Socio- Cultural Views Influencing Marriage and Reproductive Health Dynamics

Looking at the factors that influenced dynamics in marriage and reproductive health as far as women role in contemporary Momo Division is concerned in the selected areas, the following were considered. These aspects described include:

5. Cultural Identity

There is the need to agree with the opinion that people's nutrition and health alternative medicine be well examined since it can help abolished some cultural identity linked to gender bias so that women should not be vulnerable to some health risk such as in reproduction. The fact that the gizzard is a very nutritive part of a chicken to pregnant women, but is reserve culturally only for a man is something to be examined. Snails for example among the Ngie people of Momo Division are considered as an impure source of meat. Yet, it is very rich in calcium and proteins for a pregnant woman and foetus. Snake and monkey meat as well are refused to women especially pregnant women for reason that the child will be possessed with the spirit of these animals. These are nutritive sources but are bias to the woman as culture stipulates.

6. Ethics

Ethic is a system of moral principles, rules of conduct. (AS Hornby, et al. 1963) In this context we are therefore saying that the North Region and Momo Division in particular operate under some norms and values governing the personality of a woman. (Jaggar, 1992) is one of the feminist philosophers who emphasize with other authors of feminist ethicists the fact that traditional ethics has failed or neglected women. Evidence is because feminists have developed a wide variety of gender-centered approaches consequently, marriage and reproductive health have to look into these approaches so that women's opinion should be given a thought in every phenomenon. However, some feminist ethicists stressed out the fact that issues related to women's traits and behaviours are particular in their care-giving ones.

Meanwhile, these contrast other feminist ethicists who emphasizes on the political, legal, economic or ideological causes and effects of women's second-sex status. In addition to the above, traits such as hierarchy, domination, culture, transcendence, product, asceticism, war and others are masculine attributes. Whatever the indication it may be all feminist ethicist are sharing the same goal. Thus, being the creation of gendered ethics that aims to eliminate or at least ameliorate the oppression of any group of people. This is very particular of women. Just like many will ask, one of the questions usually raised is that of the nature of determining "feminine" that is to say if traits are the product nature or biology or outcome of social conditioning.

In another point raised, a gender role with the masculine sex roles endangers many of great risk of HIV through high-risk conduct. This is supported by the approach of feminist ethnics. By this approach, it is an endeavor to improve, reformulate or rethink traditional ethnics to the point in which it has depreciated and devalued the morality of women experiences. In this review, Alison Jaggar, a feminist philosopher flaws customary ethics for stepping down women in the following: less concern is given to women's as opposed to men's issues and interest.

One major reason to gender is food bias and decision making. In addition to the above point, traditional ethics deem it unimportant. Some activities such as housework, child care, infirm and caring for the elderly are seen as being normal for the woman to do. Besides, women are looked upon not as morally mature or deep as men. Also, cultural ethics overrates masculine traits like independence, autonomy, intellect, will, among others. Though men are faithful to their wives, as ethics demands, a clan such as Meta with men's dominion, it is more likely that some men than women have numerous sex partners and if sexual activities are unprotected, it can result to HIV or STIs for affected persons (Fieldwork 2011). However, the experience of those who go in for formal and informal education is different giving way to a change in mentality. Consequently, the introduction of new institutions such as education, travels, etc in marriage and reproductive health permit people to see and react to circumstances differently. For example instead of believing that witchcraft or sorcery is responsible for a situation of bareness, people rather go for medical diagnosis and treatment.

7. Poverty

In history, most problems of poverty had been mostly accepted as inevitable as traditional modes of production were insufficient to give an entire population a comfortable standard of living. Of the 1.3 billion people who live in absolute poverty around the globe, 70 percent are women. For these women, poverty doesn't just mean scarcity and want. It means rights denied, opportunities curtailed and voices silenced. This opinion can be accorded when we consider the following:

- According to the United Nations Millennium Campaign to divide world's poverty by the year 2015, women could work two-thirds of the world's working hours. The overwhelming majority of the labor that sustains life growing food, cooking, raising children, caring for the elderly, maintaining a house, hauling water is done by women, and universally this work is accorded low status and no pay. The ceaseless cycle of labor rarely shows up in economic analyses of a society's production and value.
- Where women work for money, women earn only 10 percent of the world's income reason being that they may be limited to a set of jobs deemed suitable for women invariably low-pay, low-status positions.
- Women own less than one percent of the world's property. Where laws or customs prevent women from owning land or other productive assets, from getting loans or credit, or from having the right to inheritance or to own their home, they have no assets to leverage for economic stability and cannot invest in their own or their children's futures.
- In addition, according to the United Nations Population Fund, women make up two-thirds of the estimated 876 million adults worldwide who cannot read or write; and girls make up 60 percent of the 77 million children not attending primary school. Education is among the most important drivers of human development: women who are educated have fewer children than those who are denied schooling (some studies correlate each additional year of education with a 10 percent drop in fertility). They delay their first pregnancies, have healthier children (each additional year of schooling a woman has is associated with a 5 to 10 percent decline in child deaths.

Though there is no save-free society from poverty, especially in Africa, many part of Momo Division due to improved communication networks such as roads, telephone, travels, etc, suffer from rural exodus. The need to stress on the problem of accessibility at the economic, social, and nutritional levels and the need for the poor to have the best health even at the cheapest means should be the preoccupation of our government.

Besides, no doubt (WHO 2000) adds that elderly women may have heavy family and caring responsibilities which cause stress and fatigue while preventing wider social and economic participation; and their incomes may be low because they can no longer take paid work. They may also not understand their rights to access community and private sector services, such as local clinics. Even when they are aware of these services, nominal amounts for clinic visits and drugs may not be affordable. Access is further restricted for older women living in rural areas, who are often unable to travel the long distances to the nearest health facility. Older men are particular disadvantaged by their tendency to be less tied into social networks than women and therefore unable to seek assistance from within the community when they need it. Therefore, it is imperative that health is a main social apprehension. For, health does not only refer to diseases but also to the physical and psychological well-being. To that effect, this includes stakeholders and unveils contradictory monetary and humanist interest such as beliefs on HIV/AIDS as well as marketplace regulations and the right to health for all.

In addition to this, the 2008 World Health Report produced by the World Health Organisation (WHO) also stressed the gap between existing potentialities and inequalities in the distribution of health care, even if people are healthier and live longer than 30 years ago. The substantial progress that has been made in health care in recent years has been uneven, with improvements in some regions of the world living side-by-side with a decline in significant number of countries, at global level health systems are not spared from the rapid pace of transformations that are an essential element of globalisation.

The economic and political crises question the role of states and institutions in guaranteeing access, provision and funding. Uncontrolled merchandizing of health care has thus the effect of blurring the boundaries between public and private stakeholders, while the negotiation of rights of access to health care is becoming increasingly politicized. There is reason to believe that health systems, as they currently operate, are disjointed from the principle of health for all will scarcely contribute to equity and social justice.

For this reason, lack of reference health units and doctors in the available health units is an indication of lack of social equity to health. Though there is a lacking in terms of well equipped health units the introduction of communication networks create a possibility of movement to other part of the country or world where these amenities are found. Thus this is a contribution to our study.

8. Religion

Dutifully, according to (Halpern, Joyner, Udry, & Uchindran, 2000; Afxentiou & Hawley, 1997, religion has been shown to positively influence adolescent sexual behavior through its associations with decreased likelihood of sexual initiation, teen pregnancy, and teen birth. Several studies show that male and female adolescents who regularly attend church are less likely to be sexually experienced at a young age.

However, Ku et al. (1998) in their study, observed a positive relationship between religiosity and sexual experience. They found that adolescent males who place high importance on religious and moral beliefs were significantly more likely to have had sex in the four weeks prior to the survey interview.

In addition, religion has had a major influence in the field of sexual reproductive health most notably the US Christian right and the Catholic Church (and to lesser extent Islam). These groups have led what is being described as a "backlash against human rights" and in particular sexual & reproductive rights (Long, 2005), and with significant financial power, have wielded political power and influence. Conservative attitudes towards sexuality have led to US government funding restrictions for services for sex workers, and a promotion of narrow sex education programmes. While for young people, it is focusing on abstinence as opposed

to more comprehensive approaches, particularly in Africa. The Vatican's stance against contraception has compromised the promotion of condoms for STI/AIDS prevention, although this may be about to change. Pro-life movements linked to both have hampered efforts to reduce unsafe abortions. These religious groups have used concepts of "culture" and "tradition" to oppose sexual and reproductive rights (Long, 2005).

Meanwhile, among females, they are less likely to have a teenage birth (Manlove et al., 2000). Male and female adolescents who attend church regularly and have peers attending the same church are significantly more likely to delay sexual initiation than their counterparts who do not attend church (Mott et al., 1996). Reasons being that they are build to think and act differently. In addition, female teens that are reported like to attend religious services also are less likely to have sexual intercourse at an early age (Miller, Norton, et al., 1997). Adolescents who place higher levels of importance on religion and prayer are at a lower risk of early sexual initiation.

Religious affiliation does seem to have some influence, the bulk of the literature suggests that religion is a more important factor. This is because many who get involve do not give in to other social activities especial pop culture like going to cinema as example. Therefore, though there is instability witnessed among the Ngie nowadays, social institutions as a result of cultural dynamics create room for stability where necessary. Religious knowledge put in practice for example can help avoid cases of abortions which have very sympathetic impact on the local community.

9. Social Development

Social Development is a broad term that describes actions taken to build positive outcomes and prevent negative social outcomes that can adversely affect a community. These outcomes include issues ranging from crime, poverty, gang activity, school disengagement, teen pregnancy, addictions and substance abuse, obesity, and poor health. The aim of social development is to improve the availability of support systems in the community that **prevent** negative outcomes before they occur or buffer (lessen) their impact. For example, rather than reacting to a crime after it has already happened, measures are taken within the community that prevent crime from ever occurring.

Good prevention starts with parents before they have children and very directly once conception has occurred. Evidence suggests that negative environments not only affect pregnant mothers but can very directly alter the architecture of the brain of the unborn child. These events and circumstances forever change the pathways of development and ways of interacting with the world and the people in it. In other words, adverse events and circumstances affect a child's capacity to learn, their behaviour and their health.

Recent research by Development Plans and Policies in Pakistan-Syned Anser has suggested that there is a 17:1 return on investment in the early years for vulnerable children and a 1:8 return for the remainder of the population. Social development is about creating environments that enable children and youths to thrive and not merely survive.

Besides, Peter (1999), and his group it is clear that a better understanding of problems linked to social development, including poverty reduction and gender inequality could be a very good tool in reproductive health and women. In alternative medicine, there is freedom of choice, but then this not enough, there is a burden to know why some people are attached to some treatment for healing. Even in contraceptives such particularity in traditional methods with increased bio-medical healing system especially in reproductive health is a need for concern.

Furthermore, World Bank (1996) looks at the signpost of women's health status in India, describing aspects affecting women's well being and working policies for ameliorating the nutrition of Indian girls and women. Thus, looking at our topic with reference to the views of the above authors, it would be realized that cultural dynamics has helped many people with the provisions of some social amenities like schools and health units to improve living conditions.

10. Demographic And Health Surveys

Using data from the 2008 National Demographic and Health Survey, Lagman stated that Twenty-two percent of married Filipino women have an unmet need for family planning services, an increase by more than one-third since the 2003 National Demographic and Housing Survey. Our women are having more children than they desire, as seen in the gap between desired fertility (2.5 children) and actual fertility (3.5 children), implying a significant unmet need for reproductive health services, stated Ateneno de Manila Professors. The Bill provides that the State shall assist couples, parents and individuals to achieve their desired family size within the context of responsible parenthood for sustainable development and encourage them to have two children as the ideal family size.

Bernardo Villegas carried out study on *Myth of Unmet Family Planning Needs*, citing development economist. Basing itself on demographic surveys, Likhaan, a non-government organization for women's health, stated that the most common reasons why women with unmet need in the Philippines do not practice contraception are health concerns about contraceptive methods, including a fear of side effects. 44% reported these reasons in 2008. The second largest category of reasons is that many believe they are unlikely to become pregnant—41% in 2008. Their specific reasons include having sex infrequently, experiencing lactational amenorrhea (temporary infertility while nursing) and being less fecund than normal.

In relation to this perception some authors such as Pavalavalli G. et al. (1970), as demonstrated will be important in our work. The popularity of monition and utilization of DHS data among policy makers is one of their preoccupations. Equally, increasing the international population database to promote survey methodology which occurs in participating countries is necessary. In addition, the skills and resources necessary to conduct high demographic and health surveys in these countries are equally handled. When a survey is said to be national, the tendency is that some areas in that region may not be affected due to problems of accessibility. But since the study have been generalized, as Pavalavalli G. and his group demonstrated just like Cynthia B. (1992) one is bound to buy the idea though we are not saying that it is their case. But we are trying to say here that the selected cases in Momo are just a small portion of the people of Cameroon, thus there is a need for a detailed study of all groups before publications.

11. Social Vulnerability

The concept of social vulnerability, in its turn, has been widely used and applied to a variety of phenomena (Delor and Hubert, 2000). Ecologists, environmentalists and earth scientists apply the concept to conditions which are conducive to greater risks and negative consequences derived from the occurrence of natural phenomena – such as earthquakes, hurricanes, etc.

According to Filgueira (1998, 123-129), social vulnerability is that which make people more susceptible to conditions of unemployment, insecurity, and poverty. It is also widely applied to specific groups of the population – women, children, and the elderly – who are thought to be more susceptible than others to certain phenomena, such as illness or maltreatment. On a population, (Ford, 2002) Social scientists, particularly in Latin America, apply the concept to the conditions forced upon some social groups due to structural adjustments and macroeconomic changes. The term vulnerability has various meanings. Etymologically it means to be susceptible to become hurt, to receive a blow, physically or morally. In more general terms, it refers to the property of materials, human individuals, social groups, complex systems, etc., which turns them unstable under the action of external disturbances (see Ford, 2002).

Some definitions of vulnerability include not only a negative dimension associated to greater risks, but also a positive one related to the characteristics influencing the ability of people and communities to respond to, cope with, and adapt to an adverse stimulus or event (Ford, 2002, p. 12; see also Delor and Hubert, 2000, p. 1562).

This ability is known under other theoretical perspectives as resilience, a term increasingly used in the social sciences and particularly important in terms of social policy (Kotliarenko *et al.*, 1997; OPS, 1999). The concept of resilience designates the ability to emerge from adversity, to adapt, to recuperate from adverse circumstances. It can be used to address phenomena at various levels, including communities, families and, particularly, individuals. Vulnerability and resilience can be understood as the negative and positive pole of the same concept (Kotliarenko *et al.*, 1997, p. 11), but resilience can also be used to relate individual responses to social vulnerability; more particularly, to designate the protective factors operating at the individual level, which allow some members of the same community to resist, cope with, adapt to, and emerge from the adverse conditions of social vulnerability prevailing in their community.

We propose that this propensity for early pregnancies varies between socio-cultural contexts, and this variability is linked to specific social and family characteristics of the contexts, which predispose or, on the contrary, protect women from giving in to early marriage, birth or crude abortions.

In other words, we would maintain that there are certain social factors that help to explain why adolescent pregnancy, abortion or marriage choices are so much more prevalent in certain social groups that in others. We aim to reveal and demonstrate, through specific case studies of socio-cultural dynamics in marriage and reproductive issues in each of them. These characteristics make them more susceptible to health risks. As a matter of fact, social vulnerability is closely linked empirically with poverty in most cases, but the relationship is a conditional and not a necessary one.

There are ways in which vulnerability can be minimized even within poverty. Universal access to health service vices, education, and social security is one. Developing and intensification of social safety nets is another, amongst others. For that reason the importance of the concept of social vulnerability. What we are proposing is that social vulnerability, as defined here is a more useful concept for understanding differential rates, meanings, and implications of changes in marriage and reproductive issues. We want to go further from the empirical relationship between indicators of poverty and changes in order to gain a better understanding of the processes leading to the fact that adolescent pregnancy and, particularly adolescent childbirth, are so much more prevalent in poor sectors of the population than in non-poor sectors.

12. Some Initial Findings And Discussion

Thus, from our study, we saw on the field that a change in knowledge, attitudes and practices in the community has improved lifestyles, through communications, some good roads networks, development, which has caused many people to move from the rural sector to the urban sector. As we can see in this age, people of the North West region of Cameroon people due to movements have come in contact with other cultures. To that effect, these cultures have brought in new modes of lifestyles which they are now experiencing due to their influenced on them. Like others, social, economic, culture, unemployment, etc are some of the reasons for this movement of people. Consequently, the creation of some social amenities in rural communities has as well brought in other people with different cultural backgrounds and new elements.

As a result, some localities in Momo Division by embracing other cultures, they have brought modifications to some cultural traits or a total move. It is in this light that we are about to discuss our role of the woman in our problem. Although the story is not fully over, some of the reasons for which the woman faced difficulties include: illiteracy, poverty, and this has caused many to stay in poor sanitation conditions, poor clinical visits, etc. Thus such circumstances are leading to poor health conditions, and especially in reproductive health and some marital problems which we are to examine in our study.

To begin with, in the economic domain, the rural woman in Momo Division is exposed to exacerbate workloads which are further provoked with the already difficult life the woman faces especially in childbearing. Illustrating this aspect, North West Province and its rural community in general depends on agricultural and cash products like cocoyam, coffee, palm oil, palm wine for income generating activities. Here, the woman is the main actor in the collection, production, transportation and marketing of most of these crops. Some of the experienced incur hard times today that would not permit only one partner to run the home financially. Due to stressing times, many of these women in our research area, are still faced with family pressures and demands which they deem it necessary to meet at home. To this effect, the tendency of the woman to depend only on the husband's earning is sidetracking. Accordingly, some have given themselves to small trading which in most cases needs trekking and in the course of this some have lost pregnancies. Besides, some have given themselves to very tedious farms even in distanced areas which equally forced them to carry heavy load for survival and marketing. After gathering little sums of money in savings or groups they contribute for the running home like buying books, or dresses and even food for her home.

Furthermore, on the field, we observed that in many cases of illness, the rural woman even found in good health environmental services, the women are not able to stand some medically bills that are requested especially in bigger health units. This is due to their economic backing even though they may be found in very delicate health situations like child bearing. To this effect, they resort to low cost health units or unclear health sources despite the risk, unable to be medically attained; this could sometimes bring complications to some reproductive health issues for lack of proper prenatal care. Some of the reasons behind are the cultural implications to expose every transaction to the husband such that she must depend only on what the husband provides. Where provisions are limited the woman or family may be bound to suffer.

Besides, some people out of ignorance or negligence have abandoned their health to fate. Some believed that their mothers have delivered some if not a good number of their children at home without clinical visit. Consequently, they move with this idea making it very difficult to convince them to do the contrary. They even forget to know that the village life is very natural and it could be possible, but not in town where people consumed many conditioned food stuff. The impact of climate change and livelihood of people in urban area are different even to those in the rural area due to industrial activities.

This is because, though culture still plays some role in homes, many people do not yield to due to the influence of new institutions such as religion, modern education or travels. Experienced from living standards in town and even in the localities has drastically increased since the 80s. This has made life difficult such that the place of polygamous marriages is fast disappearing for example. As a result people are more and more restricting families than it was the case before. Consequently, the woman has taken upon herself to provide for her home like has been the case in polygamous unions even if her husband provide. Even as more evident, in a town sample, out of a number of 35 women assembled only 2 cases testify of being married and are in a polygamous union. The idea of polygamous unions has left the mind of many because some men had taken a woman to be a slave whom they could kick out any at moment. Besides, the economic situation of many Cameroonians cannot permit them to keep more than one wife as before. Even the love for children is being reduced due to financial constrains.

As well, it has been experienced from what we gathered as information that the relationships that exist among children from such homes are very unpredictable. Talk not of the possibility of feeding; there is a very poor language and interaction among children or mothers at times. Older children from the first wife could avoid the junior ones which the father could be considering will help in the upbringing. Also, the strife and conflicts of such unions has resulted to very poor health situations or sudden death of some people. Engaged in a discussion with a middle age man on this issue of polygamy in the past and that of today, this was his opinion as shown below.

In Cameroon, today, life is very hard. It is just because one is already out here and I think there is no going back. Only to accommodate, feed and educate children from a monogamous union is a very heavy burden. Is it taking a second party that one would cope? Even if there is what we call "second office", that is a simple case which is not even pronounced. If there were means, there could be no reason to reduce the number of children one is thinking of having. - Narrated Cletus.

Socially speaking, sometimes only the pressure from in-laws and other relations are some of the sources of women's economic problems. It could be possible that a woman meet a man she loves and get married to. While they live happily as a coupled, children come in thus bringing other people. In-law's coming to welcome the children would sometimes bring their own needs along at times. Women at times are pressured with economic and time constrains in which these in-laws presents their needs by so doing, their marital roles could change, with the woman trying to bring a forceful contribution. In the course of trying to solve this problem she may incur a difficulty thus causing problems which health is one. The presence or coming of in-laws into homes at times imposed burdens on the couple who might be barely living for survival since many do not have well paid jobs. Some women in such circumstances are given to stress or depression especially if their financial background cannot support this. A nursing mother in that condition may not be in a good health state. Consequently, the child could be affected psychologically or even physically since the mother may was not well treated.

Culturally, women do not only think of themselves but their children even first in terms of needs. Thus, poverty among women does not necessarily mean that they do not have money. But when the money they have is not adequate to solve the health problems that they are having including those of their children. In such situations, they cannot decide on their own alone. The husband must be the finally say since they are in a patrilineal society. Thus, in a situation of an emergence, a woman can't handle without the husband's view which is quite risky in a complicated health issue as she must wait and receive instruction from her husband before taking an action. Besides, a woman carries as a social burden to bring up the children to live according the demands of the community. To that effect, they impact moral, social and therapeutic norms on their children alongside the language and appropriate standards of the age with the father though it weights much on the mother. Such conception is due to the fact that the child spend most of his/her early life with the mother since the father is always out of home to handle major issues.

Furthermore, another area of difficulty is data disparities in the difference between the legal definition of marriage which is what is recorded in the administrative data and the sociological perception of marriage by people of this community. With the help of other members of the household as to what marriage constitutes and the explanation given for this, we recount some reasons for women dilemma.

The role of the woman in relation to our study, permit us to realise the fact that health attainment is a capacity to resist disease. But this cannot be achieved without health institutions, which are able to provide adequate health care. Access to health services is essential to every community as this reflects their socio-economic and political structure. The overarching question is the influence of change and out reaching standing results. To this effect we are looking at some of the socio-cultural frameworks that bridged us to instability.

13. Suggested Measures To Gender And Sustainable Development

When one take a close look at things handled, we see that women are at the heart of development as they control most of the non monetary economy (subsistence, agriculture, bearing children, domestic labour, etc.) and play an important role in the monetary economy (trading, wage labour, employment, etc (Yawa, 1995). Everywhere in the world, women work both around the home and outside the home. The most topical issue in international developmental programme is women. The reason being that, the woman as a person is an agent of reproduction of life itself. This places her in the position of the life blood of the entire humanity.

She is the first teacher, the sustained and maintainer of the home, the peace maker, the symbol of beauty and major molder of the character of the child. She is a mother of the human race. As mothers and wives, women do exert considerable impact on the productivity of male workers. As workers in their own rights, they can conveniently be linked to the rejected stone in the Bible which has become the cornerstone of the house. By their sheer psychological, physiological and intellectual make up, they do perform more than mere complimentary roles in the production process (Jeminiwa, 1995).

Most of these contributions by women had not been recognized until recently when the United Nations declared the Decade for Women (1976-1985) making it mandatory on governments to focus on issue of women as an integral component of national development. In 1979, the United Nations General Assembly adopted the convention on the elimination of all forms of discrimination against women Consequently, subsequent conferences on women were held in Copenhagen, Denmark 1980, Nairobi in kenya 1985 and Benjing in China 1995 However, an international news magazines 'Africa Today" reported in July 1995 that the full implementation of all the strategies and recommendations of the various conferences on women issues had still not been achieved and enthusiasm was waning. According to the magazine, the UN itself reported that only six out of the 184 ambassadors to UN are women and only four out of the 32 UN specialized agencies and programmes are headed by women.

Looking at the concept of culture which has been defined in various ways, these various definitions range from its simplistic forms to its complex forms. Culture is being universally defined and understood as the totality of ways of life of a people or a society. Sociologists, anthropologists and historians have offered a variety of meanings of culture and the traits inherent in it. Clyde (1951) opined that culture represents the distinctive way of life of a group of people. While an American anthopologist, Harries (1971) defines cultures as abstraction that summaries the pattern ways in which the member of a population thinks, feel and behave. Asimalafe (1983) refused to accept Harries definition in its totality but rather defined culture as "the total ways of life of a people that help to think, promote, implement, shape and predict their destiny".

Therefore with the concept of culture, the role of the woman inclined a requirement for sustainable, effective and efficient development. This is the application of extension of services; consequently, educating professional women and performing developmental programs for example, female farmers. This could be aimed at women gaining access to extensional services, communicating with women group and encouraging female farmers to participate at extensional activities' programs. Some recommendations are regarded as necessary considerations for agricultural extension system and developmental programs to empower women: The base of developing programs should be on special realities, conditions and recognizing women's need in agriculture. The base of programs should be on the total number of data given from gender need assessment. Access to extensional services and their participation at designing and developing extensional programs, should be made especially for female farmers. Valuing the extent of incompatibility, usefulness and effects of extensional programs for women at agriculture. Employing women as professional and semi-professional staff and field agents is necessary and suitable for extensional services. Offering educational services of extension to female staff at the management fields to convey information and techniques. Offering extensional services as a form of communication with rural women groups in order to try to develop agriculture and participation (Rivera and Corning, 2001).

One of the strategies that could be raised, in order to accelerate investment process and reinforce financial foundations as well as save it, at deprived and rural areas, has been empowering and eradicating poverty of rural societies through efficiency with emphasis on micro-credits application (Shahnaj and Sajedur, 2009). Micro-loans as a useful tool to fight against poverty and starvation, has proven its capabilities and values to develop these areas. These tools have the ability to change and improve human life, especially that of poor people. Giving micro loans, saving accounts and various banking services to low income and poor families make them believe that by accessing these services, their income will increase; so they can protect themselves against barriers of unexpected problems and their current level of life, and also invest on nutrition, housing and their children's education (Varzgar and Azizi, 2001).

Nowadays, micro-credits and supplying micro financial resources have changed humans' life and caused the revival of different societies in the poorest and richest countries of the world. Thus, we can see a growth in humans' power to access common financial services. By accessing a wide range of financial tools, families according to their priorities invest on cases, such as costs of education, healthcare, healthy and good nutrition or housing. Applicants for Microfinance resources mostly involved family supervisor women, pensioners, homeless people, frugal workers, small farmers and micro entrepreneurs. These people are divided into four groups: Poor, very poor, relatively poor and vulnerably poor. Whenever repayment is afforded, bond terms and accessing of data in this classification will change. In order to supply the sustainable financial needs of various customers, procedures and operation structures will be developed (Fami, 2001). Generally, in most countries, micro finance sources are considered for poor women.

Extension systems, especially at third world countries, have been neglected from human dimension and development. It has been said severally that "extension" has ineffective functions, due to the lack of adequate sources, inappropriate staff's education, shortage of educational resources, mass and reference of non-extensional responsibilities, conflicts between extension staff and others; but it has not been pointed out why akin consideration has not been given to contacts and learners (men and women), why rural women's issue is not reflected on information feedback system and why institutions and extensional organizations do not have appropriate technology according to their needs. Ellen et al. (2009) used the approach called "credit sand education" at

Bolivia, Ghana, Honduras, Mali and Thailand. This approach was used for empowering women through financial services with education. In this approach, women were familiar with importance of credits through education and extension, and also they were familiar with ways to access credits through establishing different groups. Shahnaj and Chaudhury (2009) in their research "credits and its role on empowering women" concluded that there is a meaningful relation between attending credits programs and empowering women at economical dimensions. Woroniuk and Schalkwyk (1998) in their own research believe that now, micro credits, micro finance sources and small business units are the most effective mechanisms used to decrease poverty. Meanwhile, others conducted a research titled "do credits programs empower women? The results showed that corporation at credits programs help in empowering women. Ruhal et al. (2010) found that those who joined credit funds had more ability than those who did not.. Besides, methods such as asking male farmers to allow their wives attend farm meeting and home meeting, asking local leaders to create an impact on women about public meeting time, using local leader's ideas about educational needs and extensional services for female farmers, educating women by group method sand women organizations at female farmers' centers, can be useful. Employing female propagators provides more desirable environment for women's participation in learning, and is even useful in societies where there are cultural limitations between men and women. Furthermore, women are more comfortable while talking with female propagators as compared to male propagators. However, dealing with the following issues can be among the major duties of extension organizations in achieving extension goals: like reviewing extension-education.

Also, it is useful in increasing rural men's technical know-ledge, and in facilitating the propagator's educational duties about educating male farmers. We can use many ways while educating rural women: educating them by male propagators, employing female propagators, using cooperation and assistance of female extension workers and employing female officers of other active institutions in the village. However, appropriate methods should be chosen according to cultures, customs and beliefs of rural residents.

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Furthermore, women are more comfortable while talking with female propagators as compared to male propagators. However, dealing with the following issues can be among the major duties of extension organizations in achieving extension goals: in reviewing extension-education there are needs for appropriate educational organizations, barriers and problems about rural women's extensional educations. Reviewing the economic, cultural and social effects of educating rural women and also the technical-vocational education for rural women development. Reviewing the role of rural women's income on the economic life of the family and nation, and increasing per capital income and currency. Obviously, these issues would be practical under the reality of one principle in humane development, which is creating educational opportunities and providing educational facilities for rural women.

14. Conclusion

Though we pointed out the different areas in this paper where the ideas are in line with the some authors mentioned, the dynamics being experience will permit us through this work to see if it is also experienced in other areas apart from marriage and reproductive health. Besides, we focus on the impact of change on the different gender roles, sex and the community as a whole. But the reason for non-martial childbearing nowadays ranges from perception and delays in marriage, contraceptive effectiveness and use, and there have been attitudinal changes. Coupled to the social condemnation or stigma that unmarried mothers used to face at one time, it has diminished sharply. Evidence is so much such that many are not ashamed of taking the status of being single-parent. A critical view of increasing number of educated and working class women is one of the sources of influenced. Reason being that women spend time pursuing their education and when they have achieved their goal, most of them think time is catching up with them. Therefore not seeing marriage coming after, their only alternative is to have their children so as to spend their hard earn money on them than waste only on some anxious egoistic family members.

In addition, many people are perceiving marriage as becoming outdated due to modernism and replication of western cultures. Consequently, many find cohabitating as well as having children without marrying to be a preferred lifestyle. People with constant marital conflicts and those with troubled homes as a result of children are not left out. Testimonies from many sources as a result of what people see hear or do discourages many from even thinking of marriage. In most cases, the fact that these working class women can make ends meet won't make them want to give a thought to marriage.

This study therefore explores social responsibility and consequences implicated in Momo, building of natality which is matrilinealy traced. As well, it brings out the link between Momo constructions of fertility and gender, institution of matrilineality in the past as well as what we see today.

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