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Family Planning Practice and Factors Influencing Family Size among Mwaghavul Ethnic Group of Plateau State

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Abstract:

This research was designed to look at family planning in relation to family size with a view to curtail population growth in Nigeria and Africa in general. The initial idea was to determine the relationship between family size and family planning, child-sex preference, family size determinant factors in relationship to family size. A well-structured questionnaire/interview was employed to elicit information from the sample respondents of 200 household from a random sampling technique among the Mwaghavul ethnic group. The data were subjected to chi-square statistical method, using SPSS V. 17.0 (SPSS, Inc. Chicago, IL, USA) to analyse the result. The study revealed that family planning, child-sex preference and determinant factors of family size were found to be significant at $P > 0.05$ (95% confidence level). This shows that the driving force to large family size has great effect in pushing population growth in all aspect, even though, family planning has contribute to child spacing to a great extend but not to reduce size of family. Family size is a complex issue to control in a society where religion, culture and education were tie to belief. However, it recommended that families be sanitised on the need to adapt to small size of family to mitigate the effect of large family.

Key words: Family size, Family Planning, Child-Sex, Mwaghavul

1. Introduction

Nigeria with a high rate of population growth has been driven by high fertility rates, which have fallen much less rapidly than the crude death rate. The country's total fertility rate has declined only slightly, from 6.3 births per woman in 1981-82 to 5.7 births per woman in 2008 (NDHS, 2008). The persistence of high fertility has been the subject of considerable investigation during the past decade. Family planning has been identified by the World Health Organisation (WHO) as one of the six essential health interventions needed to achieve safe motherhood and by United Nations Children Fund (UNICEF) as one of seven strategies for child survival. Both women and men's use of contraception have been going on for centuries. Traditional methods such as coitus interruptus is described in Bible, periodic abstinence was used in ancient India and the precursor to the condom was used by the Egyptians back in 1350 BC (Edwards, 1994). Non-consent of partners to family planning methods ranked next to fertility concerns as barriers to family planning use in the study. If one considers that concerns about the effect of family planning on fertility may also have been hinged on information originating from partners of respondents in the study, the importance of partners' dispositions towards family planning interventions would be further appreciated (Adeleye, et al, 2010).

A notable factor worthy of concern is the low level of contraceptive usage; it is clear that the increase in contraception use has largely taken place in the southern part of the country; northern Nigeria has some of the lowest levels of modern contraceptive use in the entire world, only about 3% of married women of reproductive age use modern contraception (USAID, 2009).

The trend of family sizes has been drastically increasing, especially in the Northern Nigeria even with the awareness of family planning and policies of precise number of children a household should have, still number of children is on an increase per head. Several studies confirm high levels of knowledge about various contraceptive methods in Northern Nigeria. For example, a 2003 evaluation report of the Centre for Development and Population Activities (CEDPA)/Packard's reproductive health/Family planning project in Kano notes that more than nine of ten survey respondents of both men and women knew of at least one method. Women's knowledge of at least one method was lower than men but still relatively high at 86%. Both men and women were more likely to know about female than male sterilization. (Merrill and Aisha, 2010)

However, the acceptance of family-planning is influenced by many socio-cultural and demographic factors at levels of individual, family and society (Parek and Rao 1984; Bhujan 1991). Among these different factors, education is considered to exert most profound effect on family planning acceptance and fertility. It is usually maintained that education not only provides opportunities

for personal advancement and awareness of social mobility but it also provides a new outlook, freedom from tradition, the willingness to analyse institutions, values and patterns of behaviour and the growth of rationalism (Bhujan,1991). In other words, education is the most dynamic and influential tool for inducing positive attitude among couples towards the methods and measures of family planning (Shukla, 2006; Rajni Dhingra, et al 2010)

Family size is basically influenced by a host of factors; The NDHS (2003), and NFFPHS (1991), spelt out these factors: age of marriage, parity, education, lastborn, region, residence, wealth, previous birth, fertility, maternal and child health, and level of awareness. Adherence to one religion or the other is universal in Nigeria and this has a profound influence on the way of life of the people including reproductive issues. Religious beliefs and injunctions came out as one of the reasons for the number of children that people desire (Latifat, 2010). Most of those who mentioned religion as a factor in their small family size desires stated that it is a sin against God to have many children that one cannot cater for their needs adequately. Clearly, the current economic instability and the concomitant general hardship in the country, as well as the health need of the respondents, account for the most popular reasons why desire small family size in North-Western Nigeria. Adherents to Islamic faith and indigenous religions have higher family size preferences than do Christians, perhaps because the former are more likely to come from polygamous homes (G. James and Isiugo-Abanihe, 2010).

This research work examine family planning and factor influencing family size among specific Mwaghavul ethnic group in plateau state, bearing in mind their education attainment.

To come up with a scientific viable fact about family planning and factors influencing family size in the study area, hypotheses were stated;

1.1. Hypotheses

- There is no relationship between family planning and family size.
- Child-sex does not influence family size.
- No relationship exists between family size and its determinant factors in the study area.

2. Materials and Methods

The data for the present study was obtained from 200 households, selected from a predominantly Mwaghavul communities in North-central Plateau, Nigeria which lies between latitudes $8^{\circ} 55' 28''$ and $9^{\circ} 45' 05''$ North of the Equator and Longitude $9^{\circ} 0' 29''$ and $9^{\circ} 17' 38''$ East of the Greenwich meridian. The study area possessed all sort of culture belonging to Mwaghavul people and their religious (Christian, Moslem and tradition). The economy of the area was agricultural based that has made great impact towards the survival of Plateau State. There are some civil servants and business individuals. Data were collected on demographic and socio-economic characteristics of respondents, knowledge and practice of family planning, child-sex preferences and factors influencing family size through in-depth interviews and well-structured questionnaire. The data were entered into a personal computer and analysis was done through SPSS v.17.0 (SPSS.inc. Chicago, IL, USA), using Chi-square statistical test to verify the hypotheses and empirical conclusion was drawn.

3. Results and Discussion

The data on demographic and socio-economic characteristics of respondents are summarised and result shown on table I.

Socio-Demographic Data	Frequency	Percentage %
Sex of Respondents		
Male	120	60
Female	80	40
Age of Respondents		
21-30	22	11
31-40	74	37
41-50	54	27
51-above	50	25
Religion		
Christianity	151	75.5
Islam	42	22
Traditional	7	3.5
Forms of Marriage		
Monogamy	188	64
Polygamy	72	36
Numbers of Wives		
One	138	69
Two	32	16
Three	20	10
Four & above	10	5
Educational Attainment		
Primary school	42	21

Secondary school	64	32
Tertiary	83	41.5
None	17	55.5
Occupation		
Farmers/Herders	82	41
Business/Trade	42	22
Civil servant	46	20
Artisan	12	6
Retried/Pensioner	14	7
Unemployed	8	4

Table 1: Respondents Demographic and Socio-Economic Information
Source: Researcher's field work, 2013

Note: data for analysis can be made beyond the table, because only required information for socio-demographic were captured for analysis.

The socio-demographic data from the respondent on table 1 revealed that male accounted for 60%, learning 40% for female and active labour force were found to be 75% between the ages 21-50. The people of Mwaghavul were more of Christian with about 75.5%, monogamous type of marriage was majorly in practice with 64 % and the level of educational attainment is high, they are seen as the most learnt ethnic group in the state; 41.5% had tertiary education, 32% has secondary school and 21% with primary education respectively. Farming is their source of income worth about 41% and 22% among them are business persons.

- Knowledge and Practice of family planning

Family size	Do you and your partner practice family planning?					
	Yes	%	No	%	Total	%
1 – 3	30	15	5	2.5	35	17.5
4 – 6	84	42	12	6	96	48
7 – 9	89	19.5	6	3	45	22.5
10 and above	14	7	10	5	24	12

Table 2: Respondents of family size and family planning practice
Source: Researcher's field work, 2013

Note: data for analysis can be made beyond the table, because only required information for family size and family planning were captured for analysis.

There is an indication of high practice of family planning is the study area as shown on table 2. 83% of all the farming sizes practice family planning with their partners, with 42% for family size (4-6) while 7% for family size (10>). It was also observed (10>) family size were the highest non-practice of family planning with partner. These result thus, reflected a portrait of knowledge, ignorance and misconception about family planning. The active population of study area had the knowledge and practice family planning to a greater extent. Inactive labour force, perhaps were ignorant or had misconception of the purpose of family planning. Though, substantial knowledge has been discovered from the study which further supported by calculated chi-square. [$\chi^2=9.778$, sig.1] showing a great significant relationship between family planning and family size.

Family size	Do you think child-sex preference influences your choice of family size					
	Yes	%	No	%	Total	%
1 – 3	5	2.5	30	15	35	17.5
4 – 6	36	18	60	30	96	48
7 – 9	17	8.5	28	14	45	22.5
10 and above	11	5.8	13	6.5	24	12

Table 3: Respondents' child-sex Preference
Source: Researcher's field work, 2013

Note: data for analysis can be made beyond the table, because only required information for respondents' child-sex was captured for analysis.

Child –Sex preference are assumed to have greater effect on desired family size and table 3 shown that 30% out 42% of (4-6) family size were not influence by child-sex preference, while 2.5% out of 17.5% of (1-3) family size agreed to the opinion that child-sex affect their family size. About 65.5% of all category of family sizes said that child-sex have no influence of their family size. Thus, chi-square test shows no significant relationship between child-sex and desired family size of respondents in the study, it could be as a result of enlightenments via level of educational attainment

Family size	What influences your choice of family size?									
	Religion	%	Culture	%	Education	%	Others	%	Total	%
1 – 3	9	4.5	6	3	16	8	4	2	35	17.5
4 – 6	18	9	25	12.5	42	21	11	5.5	96	48
7 – 9	11	5.5	16	8	12	6	6	3	45	22.5
10 and above	14	7	6	3	-	-	-	-	24	12
	52	26	53	26.5	70	35	21	10.5	200	100

Table 4: Determinant factors influences respondents' family size

Note: these data were summarized base on determinant factors influences family size in the study area.

Table 4 Family size are influenced by host of factors as stated by NDHS (2003), the study revealed that 35% believed that education had influence their choice of family size. This agreed with Bhujan (1991) “ that education is considered to exert most profound effect on family planning acceptance and fertility” 26.5% of respondents said religion and 26% were on the opinion that culture has influence on their of family size while 10.5% went for other factors. For all the family sizes, (7-9) family size had the highest percentage with 21% out of 96% while (1-3) family size has lowest percentage of 2%. However, (10>) family size revealed that religion and culture were main factors affecting their choice of family size. The computation of chi-square agree with the percentage and shows strong relationship ($\chi^2=29.075$. sig. at 0.05)

4. Conclusion

Family size is a complex issue to control in a society where religion, culture and education are tie to belief. Consequently, sexual issue is certainly a difficulty matter to discuss among couple or married people. This has made the knowledge and practice of family planning to be one sided. Mostly, discussion focuses on child spacing rather than limiting the number of children or encouraging small family size going by the current economic instability and concomitant hardship in the country. Government and policy-maker should enact policies that will support stable population growth in communities that are associated similar situation.

5. References

1. Bhujan, K.C.(1991) ‘Social Mobility and Family Planning Practices in Rural Bangladesh-A case Study’. The Journal of Family Welfare, 37(4): 46-58
2. James. G and Isiugo-Abanihe, (2010) Adolescents’ Reproductive Motivations and family Size Preferences in North-Western Nigeria. Asian Journal of Medicine Science. 2(5): 218-226.
3. Latifat, D.G.(2010) Fertility Transition in Nigeria: Exploring the Role of Desired Number of Children. African Population and Health Research Center Nairobi, Kenya
4. Merrill, .W and Aisha. A.(2010) Literature Review: Islam and Family Planning with a Special Emphasis on Northern Nigeria, Final Report: development Research and Projects Centre (DRPC)
5. <http://www.usaid.gov/pdf-docs/PNADL911.pdf>
6. Nigeria Demographic and Health Survey (2008) Abuja, Nigeria: National Population Commission and ICF Macro, 2009. U.S. Agency for International Development (USAID), 2009. Analyzing Family Planning Needs in Nigeria: Lessons for Repositioning Family Planning in Sub-Saharan Africa Rutter et. al.(1976)
7. Parek HJ. and Rao DS.(1984) ‘Role of Husbands in Family Planning’. Journal of Community Medicine, 23: 22-24
8. Rajni Dhingra, et al.(2010) ‘Attitude of Couples towards Family Planning’ Journal of Human Ecology, 30(1):63-70. Kamla-Raj
9. Shukla, M.,(2006) Importance of Women’s Literacy for Effective Implementation of Population Education Programme <http://www.literacyonline.org/products/ili/weddocs/manju2.html>.