FERTILITY TRANSITION IN NIGERIA: EXPLORING THE ROLE OF DESIRED NUMBER OF CHILDREN.

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ABSTRACT

Fertility transition is on in Nigeria as is the case in other parts of Sub-Saharan Africa. Speculations are rife as to the factors that are driving the observed fertility changes. This study investigates if and how ‘desired number of children’ influences the observed fertility changes in Nigeria. The study utilized information collected from twenty-four focus group discussion (FGD) sessions across the country to explore the role of desired number of children in the observed changes in fertility in the country. Results show that although people are revising the number of children they are having downward, the desired number of children is high in the country. The high desired number of children is mainly promoted by religion and culture while changing socio-economic factors greatly limit the actual number of children people have. The number of children desired by the Nigerian people is still high and does not play any reducing role in the observed fertility changes. This study shows that this is a challenge for policies and programme interventions that aim to lower the number of children that people desire for sustainable and continued fertility decline in Nigeria.
INTRODUCTION

Persistent fertility decline is obviously on in Sub-Saharan Africa (SSA). The transition is also not uniform in the region as there is wide variation in fertility rates among the countries. For instance, the demographic and health surveys (DHS) conducted between 1998 and 2003 show that: total fertility rate (TFR) was 2.9 in South Africa; 4.0 in Zimbabwe; 4.4 in Ghana; 5.7 in Nigeria and 6.8, 6.9 and 7.2 in Mali, Uganda and Niger respectively (Measuredhs, 2007). Even though fertility rates are declining in the region, they are still considerably higher than in any other regions of the world

The main support for the observed high African fertility has been adduced to: the African traditional society and religion, which stressed the importance of ancestry and descent and the separation of cost of childrearing and reproductive decision-making (Caldwell, Orubuloye and Caldwell, 1992; Makinwa-Adebusoye, 2001). This high value that is traditionally placed on children is of great concern because it has sustained the high fertility rate in the region and made it resistant to the forces that brought about fertility decline elsewhere (Caldwell, Orubuloye and Caldwell, 1992; El Badry, 1992; Kalipeni, 1995). Nonetheless, the region has recorded a number of successes by pursuing vigorously the programmes of action from the various population and development as well as family planning and reproductive health fora aimed at achieving sustainable fertility patterns worldwide.
Fertility norms, usually reflected by the demand for children and often measured by number of desired children is an essential component of a comprehensive framework for the analysis of fertility determinants (McCarthy and Oni, 1987; Feyisetan and Bankole, 2005; De Rose and Ezeh, 2005). Desired number of children is a response to the question “If you could choose the number of children to have in your whole life, how many would that be (irrespective of the number he/she already has)?” Although, the measure is said to be prone to rationalization (upward adjustment in stated desired family size so that it is close or equal to actual number of children) and non-numeric bias (under reporting of average family size because some women are unable or unwilling to respond to the question on desired family size) (Bongaarts, 1990), it remains very relevant in the estimation of actual fertility.

Total fertility rates (TFR) in Nigeria dropped from 6.32 in 1990 to 5.82 by 2003. There is substantial disparity between socio-demographic groups in the country. In general fertility rates in the rural areas, the north, among respondents with less than secondary level of education and among currently married women are much higher than the national average. The mean desired number of children also follows a similar pattern but with lesser magnitude of variation within groups than as observed in the TFRs. Element of rationalization is suggested in the observed pattern of increase in the mean number of children desired as age and the number of surviving children of respondent’s increases (Ibisomi, 2007).
The theory of demographic transition posits a future decline in fertility when fertility desires decline and become much lower than actual fertility (Bankole and Feyisetan, 2005). However, there has been marginal increase in the mean number of children desired over time in Nigeria. This has been attributed to the high percentage of non-numeric responses particularly in the 1990 NDHS data set. The mean desired number of children was also found to increase as percentage of non-numeric responses decreases over the years (Ibisomi, 2007). This suggests that the mean desired number of children, which is below the TFR (by available data sets), could perhaps be at par or above the TFRs if non-numeric responses are eliminated. The marginal increase in the mean number of desired children can thus not be attributed solely to non-numeric responses. The question then is: ‘what role does the number of children desired by the Nigerian populace play in the observed fertility changes in the country’?

**METHODOLOGY**

The study made use of information collected from focus group discussion (FGD) sessions conducted across the country. This study being national in scope, drew participants from Imo (Orlu and Orsu), Kano (Kano Municipal and Karu) and Oyo (Egbeda and Eruwa) States of the South Eastern, Northern and South Western geographical zones of Nigeria respectively. These three zones were selected because they depict the three main ethnic tribes in Nigeria. The Hausa is in the North, The Ibo in the South East and the Yoruba in the South West.

The FGD sessions were conducted at both rural and urban areas in each of the zones. A small town was used for urban and a typical village as rural in each of the zones. This
was to ensure, as much as possible that it is actually the views of the indigenous population that was sought. The participants in the FGDs were men aged 35 to 59 and women aged 35 to 49 years. The participants were further stratified by level of education. In total, there were 8 sessions in each of the zones and the participants were classified as follows:

1. Urban males, aged between 35 and 59 with less than completed secondary education.
2. Urban males, aged between 35 and 59 with completed secondary or higher education.
3. Urban females, aged between 35 and 49 with less than completed secondary education.
4. Urban females, aged between 35 and 49 with completed secondary or higher education.
5. Rural males, aged between 35 and 59 with less than completed secondary education.
6. Rural males, aged between 35 and 59 with completed secondary or higher education.
7. Rural females, aged between 35 and 49 with less than completed secondary education.
8. Rural females, aged between 35 and 49 with completed secondary or higher education.

Recruitment involved the contact people on the ground going round to identify the people that had the required characteristics and inviting them for the sessions. Overall, eight (4 for men and 4 for women) FGD sessions were conducted in each of the geographical zones. A total of eighty-nine (89) men and eighty-five (85) women participated in the twenty-four (24) focus group discussion sessions.
Discussions were held in the local language most understood by the participants. Each session had between 5 and 8 participants and lasted between one and half and two hours. The sessions were recorded on tapes and notes were also taken by note-takers. The tapes were transcribed verbatim in the local languages and then translated into English and typed out on a computer. These were then analysed manually.

In presenting the findings of this study, a description of some of the characteristics of the focus group discussants is provided and then excerpts from the sessions’ which are basically summaries of discussants’ opinions are presented. Effort is also made to represent differences in opinions wherever they occur and direct quotations are made from the discussions to illustrate points made.

**FINDINGS**

**Basic characteristics of FGD participants**

Table 1 shows that a total of eighty-nine men and eighty-five women took part in the twenty-four focus group discussion sessions. In the South East, the men are two years older and on the average, have 0.4 living children more than the women. In the North and the South West, the ages of the men and women are similar. While the number of living children is also similar between the sexes in the South West, the women in the North have about 1.3 children more than the men. Over half of the men and women from the South East and women from the North have more than four living children.
<table>
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<tr>
<th>FGD groups by region</th>
<th>Number</th>
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<th>Mean # of children</th>
<th># with more than 4 children</th>
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<td>Women - 12</td>
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<td>Women - 85</td>
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<td><strong>Total # with more than 4 children:</strong></td>
<td>Men - 31;</td>
<td>Women - 38</td>
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*Note:* S+ = secondary level of education and above; S- below secondary level of education.
Desired number of children

In the FGD sessions, the first discussion initiated was to explore societal expectation as well as individuals’ desired number of children. This is a very crucial determinant of eventual fertility outcome as when desires are high, actual child bearing will be high. The question asked was:

“In some communities, people might be expected to have a particular number of children. In some countries, for instance, no more than two children may be seen as desirable for most people. What would you say is the number of children people are expected to have in this community and what are the reasons for this particular number?”

The majority of the discussants do not believe in specifying the number of children they should have. This is deeply rooted in cultural tradition and religion. They see children as being given by God; hence, no one can basically say how many they want. These ideas are reflected in the discussion as follows:

“No one should say that ‘I will have only three or four’ because God that created us knows the best for us and we should accept what He gives to us whether seven, eight, nine or twelve” (Male, South East, Urban).

“In Islam, a person is not directed to have a certain number of children, so one is given the chance to have as few or as many children as he likes” (Male, North, Urban).

“In the Yoruba community we are expected to have as many as we can and that is why the slogan says, ‘you don’t count children’. We don’t like counting our children” (Male, South West, Urban).

After voicing their religious and traditional persuasions however, most discussants from the South East mentioned that people should have as few or as many as they could cater for and some go ahead to give numbers. Some discussants from the North also concur with the idea of people having as few or as many children as they can cater for. Some
illustrative numbers were also given in the North about some of the people living in the communities while in the South West, a sizeable number of the discussants gave numbers. The 1988 four-child population policy by the government was only referred to in the South West. This could have impacted on the number of children desired by this populace as most of them mentioned four as their desired number. Most of the discussants however attributed the desired number to other reasons. There was not much difference in the views and opinions of discussants by residence, sex or education on this issue.

“I think there is no number someone has that is enough for the person. It is only required of the person to have that which he can train. I think five is good” (Male, South East, Urban).

“Some people decide on having one, two or three children. After they have gotten the number they want, they stop. But only few of the people in our community have this idea” (Male, North, Urban).

“Four is the laid down rules but this is political not traditional. Traditionally, one can have as many as possible” (Female, South West, Urban).

**Reasons for the desired number of children**

The FGD sessions further explored ‘the reasons’ for the number of children desired. This is necessary to gain an insight into the issues that drive childbearing from the perspective of the discussants and also to be able to identify specific areas that programmes could be targeted (if necessary) for a sustainable fertility level in the country.

The majority of the discussants in the North were first of all of the opinion that the only reason to decide on a certain number of children is ill health of the woman. In general however, most of the discussants from all the regions recognised that the **economic**
situation in the country has changed and that steps have to be taken to be in tune with the situation in the country. Below are some of what the discussants said:

“No specific number except the woman is the type that suffers when giving birth. It is those couples that plan their family” (Female, North, Rural).

“Things have changed. The economy of the country is bad. It is better one has the number one can maintain” (Female, South East, Rural).

“In the North we didn’t have that idea, but presently due to economic problems encountered, people are now doing this (i.e. deciding on number of children) because of the problems being faced concerning how to cater for the family” (Male, North, Urban).

“The English say ‘cut your coat according to your size’. But nowadays, it is ‘cut your coat according to your cloth’. A truck full of children is a truck full of poverty” (Male, South West, Urban).

In addition to economic consideration, other reasons given for the desired number of children include:

**Effective guidance and control of the children.**

From the discussions, this is highly rated by majority of the discussants as they believe that too many children may not be manageable for a couple given the type of living arrangement and the social changes that have taken place in the society where community control of children is fast disappearing. Discussants were aware of the dangers and are scared of the consequences that could emanate from not doing a good job of giving an all round training to their children. They were particularly worried about the children turning into social misfits and not leaving a good legacy after their demise. The following are some of the discussants’ remarks:
“When you have many children and you’re unable to train them, there is no type of character that will not be in that family” (Female, South East, Rural).

“To be able to give them quality care because one wants the children that will survive him to be someone that will have good education and morals. So that by the time the parents are no more, they will leave behind a good legacy” (Male, South West, Urban).

**Religion**

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. Excerpts on this include:

“The main reason why people want to have many children is because of the prophet’s saying that: ‘marry and produce a good generation for I shall be proud of your great number on the Day of Judgment’” (Female, North, Rural).

“In the Bible God said marry, increase and multiply” (Male, South East, Urban).

**Old age care and provision**

From the sessions, this is a very important consideration in deciding the number of children. It has long been recognized and cited as one of the reasons for high fertility (Schoumaker, 2004). The majority of the discussants indicated the care that they expect to have from their children in terms of love, company and being there to render any assistance they might require in general. This consideration transcends region, residence, gender and education differentials among the discussants. The following are some of the views of the discussants on this:
“We have many children because if they grow up they will support us. Presently I am living with my son. My children are the ones taking care of feeding and clothing me since the death of my husband. That is why we are proud of having many children” (Female, North, Urban).

“Nobody knows how God will bless each child. And you don’t know who among them will support you later in life” (Male, North, Rural).

“We rely on children for old age. This is not like America where they pack their old people in a place and government is catering for them. The lesser children you have the lesser care that person will have in old age” (Male, South West, Urban).

**Family business needs**

It came out clearly that people consider the preservation of wealth and skills in the family when deciding on the number of children to have. The family’s manpower needs to sustain family work or business is also considered. This is particularly so for people in the North in general and those from rural areas in the South. The people in the North are engaged in both crop farming and livestock rearing while those from the South are mostly engaged in crop farming and at a lesser commercial scale than people in the North. Some of the quotations from the discussions are given below:

“In this part of the country, people want to have many children because in our own case we only know farming and livestock rearing and the children help us in our day to day activities like farm work and so on” (Male, North, Rural).

“Not having many children in the family makes domestic work to be very dull especially farm work because in Igbo land, we believe in farm work” (Male, South East, Rural).

“In this our community, we farm very well. So, we need children to help us on the farms” (Male, South West, Rural).
Death of Child(ren)

This has long been recognised as a vital determinant in reproductive decision-making (Legrand, Koppenhaver, Mondain and Randall, 2003; Randall and Legrand, 2003). This usually takes the form of insurance effect or child replacement. In the case of insurance, people have more than needed with the hope that even if some die, some will be left while for child replacement, another child is born when one dies. Child mortality effect is built into the decision-making of this populace (especially those from the South West) mainly through the form of insurance. Below are some of the opinions of the discussants on this issue.

“The reason why I said six is because, some may die. You don’t wait for that to happen before you take action. It is better to insure against it” (Male, South West, Rural).

“Supposing some of the children die, what does one do? That is why one should have more than four” (Female, South West, Rural).

Culture and customs

The sessions show that it is customary to have children in all the cultures especially for lineage continuation and securing inheritance. The sentiments attached to having children culturally include the prestige and respect accorded to parents in the community. It also includes some of the roles that the children perform for their parents in the community (such as representation). Some of the discussants are even of the opinion that for someone that has no child, it is better the person was not born because he cannot answer to being a man. Preference for at least a male child came up in the course of the discussion on lineage continuation as it was said that the girl child leaves the household
to take up her husband’s family name after marriage whereby depleting her biological household. The importance of this is captured by some of these quotations:

“The Yoruba regard children as legacy. They have as many as possible, so that whenever they pass away, they will have surviving children to take care of their possessions” (Male, South West, Urban).

“The Igbo man believes in numerical strength. One who has many stands the chance of the challenges of life” (Female, South East, Urban).

“I shall conclude this part of the discussion by saying that whosoever does not have a child throughout his lifetime, then, it is as if God has never created him. Because the moment he dies, everything concerning him dies forever” (Male, North, Rural).

Other reasons given for the desired number of children are that: the children may act as a support to each other later in life; some parents, especially those that have only one child prevail on their children to have many children; and that some people have few number of children because they fear that they might die early and leave behind many little children in hardship. The section concludes with this remark by one of the discussants:

“There will always be problems whether the family size is small or large” (Male, South East, Rural).

**DISCUSSION**

It is evident from the focus group discussion (FGD) sessions that people desire a high number of children. It is equally evident that people have been revising the number of children they are having downward due to the ‘supposed’ economic hardship in the country, which has put a constraint on giving quality education, training and care to a large number of children. There was no consensus as to a specific number of children that
people should have except in the South West where majority of the respondents mentioned four. The majority of the discussants are however of the opinion that people should behave responsibly by having the number that they can comfortably manage and cater for.

The focus group discussion on the reasons for the number of children desired also brought out the fact that their desires are strongly influenced by their perception of the value attached to children as well as the costs and potential benefits of children. Among the Yoruba of South West Nigeria as in most ethnic groups in Nigeria, children validate marriage (Makinwa-Adebusoye and Feyisetan, 1994). Children also confer a special status on women who may be honoured for their role in perpetuating the lineage. For example, some Igbo communities honour women who have successfully borne ten or more children. This parity ten custom bestows on a woman a special honour as a member of a privileged class (Odimegwu, 1998; Edewor, 2001).

CONCLUSION

The focus group discussion sessions show the leaning of the majority of the Nigerian people towards smaller family size could be reversed with improvement in the standard of living and liquidity in the country’s economy. This conclusion is informed by the fact that discussants clearly show that the large family size promoted by both culture and religion is mainly curtailed by the economic downturn in the country. This was aptly captured by the following quote from one of the discussants:
“It is the kind of job that one is doing that determines the number of children that one is going to have. If I have enough money, I will have many children even more than ten. But I will not be able to cater for them because the kind of job that I am doing does not permit me to have more than four” (Male, South West, Urban).

The number of children desired by the Nigerian people is still high and from evidence derived from this study, does not play a reducing role in the observed fertility changes in the country. This is a challenge for policies and programme interventions that aim to lower the number of children that people desire for sustainable and continued fertility decline in Nigeria.

REFERENCES


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