TITLE: INFLUENCE OF GENDER ATTITUDES ON THE FERTILITY ASPIRATION

OF ADOLESCENTS AND YOUNG MEN IN SELECTED SUB-SAHARAN AFRICAN

**COUNTRIES** 

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**Abstract** 

This paper examined the influence of gender attitudes on the fertility aspiration of adolescents

and young men in selected sub-Saharan African countries. Data for the study were derived from

most recent DHS surveys of a weighted sample of adolescents and young men (15-24 years) in

Nigeria (6,266), Uganda (2,238) and Rwanda (2,280). The percentage respondents who did not

approve wife beating under any circumstance was 28.3% for Nigeria, 51.34% for Uganda and

22.9% for Rwanda. The mean ideal number of children for the sample in Nigeria was 6.9 while

Uganda is 4.8 and Rwanda was 2.3. The IRRs showed that gender attitudes such as wife-beating

attitudes and decision-making significantly predict the fertility aspiration of adolescents and

young men in the selected countries. Certain adolescents and young men's socio-demographic

characteristics were also significantly associated with fertility aspiration in the countries.

Introduction

Fertility rates in sub-Saharan Africa remain the highest compared to the rest of the world, and

contraceptive prevalence is the lowest. According to UNFPA (2014) young people make up

slightly less than one quarter of world population and 89 percent of the world's 10 to 24 year-olds, live in developing countries. The population of age 15-24 in Nigeria was put at 57 million (UNFPA, 2014). Rwanda has a population of over 12million with median age of 19.4 years (United Nations Department of Economic and Social Affairs: Population Division). There are over 3 million adolescents aged 10-19 years, which is about 24.3% of the total population in Rwanda with 1 in 4 living in urban areas. In addition, the adolescents and young population in Uganda is about 34.8% of their 34.6 million population.

Many studies have shown men's strong influence and or dominance in fertility decision-making and outcomes (Derose, Bodoo and Patil, 2002; DeRose, 2003, Bamiwuye, 2015). Little is known on how gender attitudes can shape adolescents and young men fertility aspirations. Hence, there is the need for proper understanding of how socio-demographic factors and gender attitude as measured by wife-beating attitude influence the fertility aspiration of adolescent and young men in Nigeria and Rwanda using nationally representative and comparable data.

- 1. What are the levels and patterns of fertility aspiration of male adolescents and young men in the selected countries?
- 2. What are the socio-demographic factors that influence the fertility aspiration of adolescents and young men in the selected countries?
- 3. What are the effects of gender attitudes on fertility aspiration of male adolescents and young men in the selected countries?

Answers to these questions should provide a greater and better insight into the sociodemographic, gender attitude that influence the fertility aspiration of adolescents and young men in Nigeria, Uganda and Rwanda. The 2013 Nigeria Demographic and Health Survey (NDHS), 2016 Uganda Demographic and Health Survey (UDHS) and 2014-15 Rwanda Demographic and Health Survey (RDHS) data on men were analyzed for this study. Demographic and Health DHS data are cross-sectional, nationally representative household sample surveys. Data for adolescents and young men were extracted from the data of men aged 15-54 years. We analyzed data on a weighted sample of 6,266 adolescent and young men age 15-24 years in Nigeria 2,238 in Uganda and 2,280 in Rwanda. The Outcome Variable (OV) for the study is fertility aspiration. DHS used ideal number of children as an indicator for measuring fertility aspiration. This indicator has also been used severally in the literature (Upadhyay and Karasek 2010; Westoff 2010). The principal explanatory variable for the study is gender attitudes measured by the DHS as attitude toward wife beating. Details of the measurements are published in the final reports of DHS for both countries. MEASURE DHS granted the permission to access the data used for both countries. We used Venn diagram and three models of Poison regression in the analysis with the help the Stata software.

The mean ages of respondents for Nigeria, Uganda and Rwanda were 18.8 (sd=2.8), 19.0 (sd=2.86) and 19.0(sd=2.9) respectively. The percentage respondents who did not approve wife beating under any circumstance was 28.3% for Nigeria, 51.34% for Uganda and 22.9% for Rwanda. The mean ideal number of children for the sample in Nigeria was 6.9 while Uganda is 4.8 and Rwanda was 2.3.

For the sample in Nigeria, the mean fertility aspiration measured by ideal number of children differs significantly by level of education (F=206, p<0.001), place of residence (t=-11.3, p<0.001), region of residence (F=249.5, p<0.001), wealth status (F=288.8, p<0.001) and currently working status (t=-11.5, p<0.001). In addition, for sample in Uganda, the mean fertility

aspiration measured by ideal number of children differs significantly by level of education (F=21.38, p<0.001), place of residence (t=-4.5, p<0.001), region of residence (F=6.56, p<0.001), wealth status (F=6.65, p<0.01) and currently working status (t=-1.2037, p>0.05). While the mean fertility aspiration for adolescents and young men in Rwanda differ significantly by age (t=4.08, p<0.001), level of education (F=3.32, p<0.05) and region of residence (F=8.12, p<0.001). The mean fertility aspiration differs significantly by our principal explanatory variable – gender attitude measured by attitude towards wife beating for both countries – Nigeria (t=-5.61, p<0.001) Uganda (-0.79, p>0.05) and Rwanda (t=-2.41, p<0.05). Respondents who did not approve of wife beating under any circumstance consistently have lower aspiration for fertility in the three countries.

The results of the Model 1 from Poisson regression analysis showed that age of respondents, place of residence, education, and religion significantly predict fertility aspiration in Nigeria and Rwanda while marital status, region, residence and education significantly predict fertility aspiration in Uganda. In Models 2 and 3, both the unadjusted and adjusted IRR from Poisson regression showed that gender attitude is a significant predictor of fertility aspiration of adolescents and young men in Nigeria and Rwanda while results from the Model 2 in Uganda showed that the decision making significantly predict fertility aspiration while Model 3 showed that wife- beating is a significant predictor of fertility aspiration.

This research has proved that gender attitude influences adolescents and young men's fertility aspiration in the three sub-Saharan African countries of Nigeria, Uganda and Rwanda. Certain adolescents and young men's socio-demographic characteristics were also significantly associated with fertility aspiration in the three countries. To the best of our knowledge, fertility

aspirations of young people, especially male adolescents and young men are rarely discussed in the literature, especially using nationally representative and comparable datasets.

The fertility aspiration measures used in this study were consistent with those of Johnson and Gu (2009); Upadhyay and Karasek (2010) and Westoff (2010)

It is important to acknowledge an important limitation of this study: that DHS data being cross-sectional in nature makes it difficult to ascertain the cause-effect relationship between our explanatory variable and fertility aspiration. Despite this limitation, the study strengths are significant. First, it is a large, population-based study with national coverage. Second, DHS data are generally observed to be of great quality, as they were based on sound sampling methodology.

The importance of gender attitude especially in a patriarchal society cannot be under estimated in shaping and reshaping behavior to achieving a desirable fertility outcome in sub-Sahara Africa. Thus, the present study has added to the body of knowledge theoretically by providing information on the link between gender attitude of young men and their fertility aspirations in two countries with differing fertility and reproductive health outcomes. These findings call for special attention to societal values and norms on gender equality that encourage large family size.

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