



Childlessness and Its Socio-Cultural Implication on Married Couples within Some Selected Yoruba Communities in South-West Nigeria

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ABSTRACT

Childlessness has major psychological and social implications for affected persons, especially in settings where fertility is highly valued. While a number of studies have documented how childlessness is perceived in these societies and the multitude of adverse consequences suffered by affected individuals, studies have not made a clear distinction between voluntary and involuntary childlessness in these settings. A semi-structured questionnaire was used to elicit information on socio-demographic characteristics of the respondents, socio-cultural implication of childlessness on married couples, causes of childlessness on married couples, perception of married couples towards childlessness, and effects of childlessness on married couples and what are the coping strategies adopted by these childless couples from the selected Yoruba communities, the study explores both voluntary and involuntary childlessness. Findings show that not having children, whether voluntarily or not, contributes to a kind of invisibility and poverty in Nigeria. Regardless of the reason, voluntary childlessness evoked strong negative feelings among family members. The study also shows the broad definition given to voluntary childlessness in Nigeria as including individuals that are childless because they chose to stay with an infertile partner and also those who could not have biological children and chose not to adopt. However, the study noted a more tolerant attitude to involuntary childlessness, suggesting possible changes in perceptions of the condition. Symbolic interactionist theory was adopted.

Keywords: Childless, Married Couple, Fertility, Traditional belief systems, Infertility

INTRODUCTION

Childlessness has varied consequences through its effects on societies and on the lifestyles and life chances of individuals. The childless lifestyle enhances life satisfaction for some individuals, while diminishing it for others, for whom parenthood was a personal goal. For societies, childlessness is a factor in low birth rates and population decline, with which are associated diminishing labour force entries and rising proportions in older ages.

¹ Childlessness: A condition of being without offspring or children

Childlessness is therefore a consideration for policy makers, both because of its demographic impact and because of its effects on the lives of individuals. The latter become most apparent in the older ages, where childlessness means that family resources for support of the disabled or frail are less assured (World Health Organization, 1999).

Studies of the advantages and disadvantages of childlessness in later life suggest that well-being is not necessarily dependent on children, because the childless can meet their expressive (emotional) needs through greater contact with other relatives, friends, and neighbours, as well as with organizations such as clubs and churches. However, the childless in poor health appear to have a higher risk of social isolation or of admission to aged care institutions.

This implies that the support networks of the childless elderly are less effective in providing instrumental (practical) support, at least when the need is continuing. Although the majority of the elderly do not necessarily see family care as the best alternative, without the prospect of periodic help from children, or their assistance as a last resort, the childless must be more reliant on formal services or institutional care. Thus, as cohorts with high proportions childless reach the older ages, family-centered approaches to aged care become less effective. In the late twentieth century, many of the aged in industrialized countries had few close relatives, which brought to the fore questions about their access to support. The decline of childlessness among later cohorts is now reducing the prevalence of such problems.

However, by the 2020s, similar concerns about the adequacy of personal resources will confront the 1950s cohorts, as childlessness continues to shape their destiny. The proportions childless are unlikely to fall below 10 percent in any of the more developed countries for which data are available.

Merriam Webster dictionary (2002) marriage is the legally or formally recognized union of a man and a woman. Though a universal phenomenon, cultural differences abound in the formation of the family and the universal features are important. Everybody makes choices on a daily basis; some of them are as simple as choosing a lunch menu but others are as serious as whom to marry. These choices, big or small, shape our lives and future. Whether or not to become a parent is one of the significant and serious choices.

For most people, getting married and starting a family- having children-is not a matter of choice; they are a rite of passage.

In marriage, childlessness is one aspect of the diversity inherent in contemporary experience of marriage and the family. For most of history, childlessness has been regarded as great personal tragedy involving much emotional pain and grief, especially when it is resulted from failure to conceive or from the death of a child. With this greater diversity, once common pressures for childbearing have given way to greater social acceptance of remaining single or married without children. Before conception was well understood, childlessness was usually blamed on the woman and this in itself added to the high level negative emotional and social effects of childlessness.

Some wealthy families also adopted children as a means of providing heirs in case of childlessness or where no son had been born, the monetary incentives offered by westerners desire for children is so strong that a commercial market in the child laundering business exists.

Nonetheless, childlessness is a concern, partly because of its implications for the maintenance of societies and partly because of its unwanted consequences for individuals. However, societies regard children as the most important asset in every successful marriage and for this reason; childless couples become an object of ridicule in their communities. The dynamics of culture and human relationships have made researchers to observe many influences, manifestations, happenings and occurrences in marriage stability within the Yoruba community.

However one of the general cultural beliefs in Yoruba marriage is that procreation is the basic aim of marriage, for them marriage and procreation are inseparable. However, modernization has not weakened the deep rooted tradition of having a child as soon as possible after marriage.

According to Owo (1994), having many children makes one feel contented and important and also usually respected by others for not being childless. Marriage which fail to produce children often end in divorce. It is also describe as the dissolution or abrogation of marriage. Psychologically, Owo (1994) explained that childless couples especially the women are always depressed about their condition; they always feel bad because most of the blames are levied against them. The pains suffered by childless couples attract sympathy.

Every action, utterances and words from either the husband, his relations especially those of the mothers, brothers and sisters in-law are carefully analyzed and deeply interpreted to have been directed to the very fact that they have no child. They misconstrue people's idea and statement about themselves and read meanings into them.

Most couples avoid people in order to evade the embarrassment they suffer; they feel embarrassed when people out of ignorance ask them about their children, some pick-up quarrel in such situations while others end up in committing suicide. Also, majority of childless men or women go mental. It is based on these assertions that the researcher intends to carry out the study, in order to investigate the impact of childlessness on married couples.

Problem

Throughout the world and particularly in African societies, the word "childlessness" sends interest to the ears of listener and a sense of pity is immediately aroused in the mind. Children are regarded as great treasure to their parents, relations and their immediate community. Many people suffer from childlessness for so many reasons such as drug abuse, hard drugs effect, contraception, numerous abortions, and some are genetically inherited. Unfortunately in Nigeria, it is the woman who suffers most even when she is not the problem.

She is constantly under stress, frustration and disappointment. She loses respect and may be ridiculed. She is always tensed and sorrowful. Nigerian men simply refuse to accept that they could be the problem and the women in their desperation from social pressures have been forced to help their men to bring in children from outside. Childlessness causes constant fights, misunderstanding and suspicion in the marriage. Sex becomes mechanical and unfulfilling. The risk of being sterile can be a heavy burden. The woman risk divorce and in some cases gets rivals.

The number of childless couples is tremendously on the increase, this is evident to the fact that attempts to initiate a move which would have been directed towards adoption is taken with serious resistance in some places mostly by couples without even a child. Meanwhile, most couples are childless as a result of the degree of their waywardness while they were youths or younger and unmarried, such as illicit use of drugs in order to avoid pregnancy (Ugwuanyi, 1999).

According to Nwapa (1996), some couples attribute their problem of childlessness to the supernatural, the hope in God that gives children to remember them at the appropriate time while some couples usually fall back to adoption, they are comfortable for being biologically infertile, they no longer want to know the cause of their infertility and solve it or get rid of it (Diemere et al, 2000). However, there is difficulty in the way childless couples have been communicating with friends who do have children. They describe as negative (although sometimes well-meant) remarks within the couples' social worlds, for instance at birthday parties and other social gatherings.

It is possible for childless couples to participate in the 'world of children', especially if couples have good friends or relatives who have children and on the cultural aspects of childlessness such family becomes isolated and the wife faces inheritance restrictions on property and burial rights, also there is usually marital instability including fear of the husband taking a second wife, divorce and physical abuse by partner. Various studies had been carried on the impact of childlessness on married couples, but none had been written about the selected Yoruba cultural communities, this is a gap which this study intends to fill. This study intends to add to the existing knowledge about impact of childlessness on married couples in the selected Yoruba communities in South-West, Nigeria.

BRIEF REVIEW OF LITERATURE

Childlessness is the term for people - men and women - having no children. Childlessness may have personal, social and/or political significance. Approximately 70-80 million couples worldwide are currently infertile (Balen, 2009) and it can be estimated that tens of millions of couples are primarily infertile or childless. For most people, having children is immensely important; not being able to have children is a major life problem. There is also a large group of women and men, who have children, possibly from a previous relationship, who desperately wants to have another child. A considerable body of research in Western countries has shown that involuntary childlessness has strong psychological consequences (Greil, 1997).

Most of the studies carried out in this domain point in the same direction. There are various psychological and psychosomatic effects, and especially women are affected with. The most

frequently mentioned effects are distress, raised depression and anxiety levels, lowered self-esteem, feelings of blame and guilt, somatic complaints, and reduced sexual interest. For a small minority of women and men in the Western world these effects are at a clinical level or can be considered extremely serious (Greil, 1997). Children are obviously important to people all over the world, especially in societies lacking in such inventions as life insurance and socialized medicine.

Children may serve as insurance against personal disaster in old-age or infirmity; they may be the means to build useful alliances or to acquire greater wealth, they can be entertaining; they may be a source of status or a sign of virility or fertility; children often strengthen the bond of marriage, and for many people, children may be a source of meaning in life and a palliative for distressing cognitions about death. When a married couple proves to be childless, it is usually a great blow to them and often other people around them.

Childlessness is one aspect of the diversity inherent in contemporary experience of marriage and the family. Childlessness is a concern, partly because of its implications for the maintenance of societies and partly because of its unwanted consequences for individuals. Like any other social phenomenon, childlessness needs to be understood within historical, social, and cultural circumstances as well as individual and relational characteristics (Kelly, 2009).

In industrialized countries, childlessness was more prevalent at the start of the twentieth century than at the end of the twentieth century. It was, however, less conspicuous because it occurred in conjunction with a large family system; that is, where some had four or more children, partly offset the childlessness of others, keeping birth rates relatively high. In the present situation, one reason why the effects of childlessness are now more apparent is that smaller families are more prevalent, with pronounced preferences for two children; relatively few couples have four or more. Childlessness can now make the difference between maintaining population numbers and precipitating long term decline.

Causes of Childlessness

Medically, there are different causes and risk factors for couple's childlessness. According to Eisenberg (2011), infertility for men is most often caused by low or no sperm count and blockage of the tubes that transport sperm. Infertility in women on the other hand, is caused by a range of other factors such as problem with ovulation, blockage of fallopian tubes and physical damage to the uterus. Sexually Transmitted Diseases (STD), advanced age, smoking, and excess alcohol use are also mentioned as risk factors of infertility. However, a considerable number of people in the majority world have limited level of knowledge about the medical causes of infertility.

The problem is thus usually perceived as caused by other factors than medical ones. Some associate infertility with supernatural powers and others associate it with diseases or with the absence of reproductive organs. A study by Oknofuaa et al. (1997) on the social meaning of infertility in Southwest Nigeria showed that there are several traditional beliefs regarding the causes of infertility. Social scientists, however, are still debating the relative importance of voluntary and involuntary factors in the upturn in levels of childlessness, although individual self-fulfillment and freedom of choice have been seen as important (Poston and Kramer 1983).

In the United States, Poston and Gotard (1977) attributed the early part of the rise in childlessness mainly to voluntary factors "linked to broader changes in the fabric of society regarding fertility control, contraceptive technology, female work preferences and patterns, and sexual and family norms".

There has probably always been a mixture of voluntary and involuntary factors in childlessness. It cannot be assumed that in the past marriage and family formation was universally desired, or that in the present, all are able to achieve their particular marital and reproductive goals. Nor is there an absolute distinction between voluntary and involuntary outcomes, especially since childlessness often results from delaying childbearing, rather than from a single decision never to have children (Poston and Trent 1982; Morgan 1991).

Overall, the rising prevalence of childlessness is one aspect of the diversity of life-cycle experience among people of reproductive age. It arises from a combination of varied phenomena including: the decline of social pressures to marry and bear children, inability to find a partner, lack of interest in finding a partner, insufficient commitment in relationships, concern about the durability of

relationships, concern about the prospects for children in insecure environments, financial problems and constraints, difficulties in combining parenting and employment, dislike of children, postponement of childbearing, declining fecundity at older ages of family formation, and pursuit of careers and material consumption.

Impacts of Childlessness on Individuals

Psychological

People trying to cope with involuntary childlessness may experience symptoms of distress that are similar to those experienced by bereaved people, such as health problems, anxiety and depression (Stearns, 2009)

Political

Specific instances of childlessness, especially in cases of royal succession, but more generally for people in positions of power or influence, have had enormous impacts on politics, culture and society. In many cases, a lack of a male child was also considered a type of childlessness, since male children were needed as heirs to property and titles.

Social

Socially, childlessness has also resulted in financial stress and sometimes ruin in societies which depend on their offspring to contribute economically and to support other members of the family or tribe (Matthews, 1986). In the 20th and 21st centuries, when control over conception became reliable in some countries, childlessness is having an enormous impact on national planning and financial planning (Gilbert, 2007).

Associated Stigmas

In a society that encourages and promotes parenthood, with its current social norms and culture, childlessness can be stigmatizing. The traditional idea that couples should reproduce and want to reproduce is still widespread in Nigeria. Childlessness is considered deviant behavior in marriage and this may lead to adverse effects on the relationship of the couple, as well as their individual identities when pertaining to the lack of children being involuntary. This transition is from the anticipated parenthood to an unwanted status of non-parenthood. Such a transition may require the individual to readjust their perspective of self and/or relationship role with their significant other (Miall, 1986).

Education

Childless persons tend to have higher level educations than those that do have children. Due to their higher education these childless couples also tend to have professional and managerial positions.

Finances

As a result of their higher level educations, higher paying jobs, and dual income, childless couples tend to have greater financial stability as compared to those with children. On average, a childless couple spends 60 percent more on entertainment, 79 percent more on food and 101 percent more on dining out. Childless couples are also more likely to have pets and those that do tend to spend a good deal more money on them (Gilbert, 2007).

Quality of Living

Childless persons typically eat healthier than those with children, consuming more meats, fruits, and vegetables. Happiness may also play a distinctive role in the comparison to people with children and those without. Different studies have indicated that marital happiness dramatically decreases after a child is born and does not recover until after that last child has left the house.

A study at the University of Wisconsin-Madison found that working outside the home and receiving less support from extended family, as well as other factors, has increased the level of stress associated with raising children and decreased overall marital satisfaction as a result. Childless couples were more likely to take vacations, exercise, and overall live a healthier life style than those that have children (Gilbert, 2007).

Social and Cultural Impacts of Childlessness on Married Couples

According to Ugwanyi (1999), the number of children a man has determines the socio-economic importance of the man. Childlessness demoralizes some of the affected couple's zeal to accumulate wealth, this is because they view that wealth accumulated would go to the community when they die, because of this, most of the couples squander their money while they are still alive. Also culture

measures the political strength by the number of children a man has, childless couples are not recognized in the society they find themselves in a political desert.

Ugwanyi (1999), explained that children help to render valuable services and this create source of income on their father's farm land, cattle, rearing and in agricultural pursuit, besides this, the females are source of income to their parents when they get married. Cultural beliefs come in various forms and the cumulative effect of these beliefs is a set of taboos and norms whose counteracting effect results in childlessness (Larsen, 1996).

Analysis and findings has shown the perception of childlessness in sub-Saharan Africa and the adverse effect of this on women who takes the blame for a couples' childlessness. The findings agree with that of (Larsen, 1996; Dyer et al. 2002). The consequences of childlessness are more profound in women as compared to men (Inhorn 1994). It is generally believed that men cannot be infertile so far as he can sustain an erection. Fertility and potency are often thought to be synonymous.

According to Orubuloye et al (1996), if a man cannot father a child, a male member of the family can always assist him in doing so. This is done in the western countries and it is called surrogate motherhood or fatherhood as the case may be. Having child is clearly more important than loyalty to one's spouse, which is evidenced by the common practice of divorce because of childlessness. The findings are in keeping with other qualitative and quantitative studies which indicate an overwhelmingly negative implication of the inability to procreate (Sabatelli, 1988; Kemmann et al. 1998).

THEORETICAL FRAMEWORK

Symbolic Interactionist

The symbolic interactionist approach was adopted as a theoretical orientation. The approach is anchored on the idea that people do not respond directly to the world around them, but to the meaning they bring to it. Furthermore, the approach assumes that society, its institutions and social structure exist as a result of human interaction (Blumer, 1969). This means that reality is what members of society agree to be reality and this is shaped in social interaction.

During such interactions, objects and symbols are developed and used (Blumer, 1969), which denotes things in the real world whose meaning is defined by the actor. Therefore, different objects have different meanings for different individuals. For example, people interact on the basis of how they see and understand a situation and the meaning they attach to the situation or encounter.

Consequently, each person's definition of the circumstances surrounding the interaction influences others definition. This means that the meaning attach to social interaction can be modified because people bring their own definitions of situations. These definitions shape the way people see and experience the world.

Consistent with Blumer's view, every time social interaction occurs, people creatively construct their own understanding of it whether "real" or not and behave accordingly. Furthermore, these shared meaning and or understanding do not necessarily need to be accepted by all-hence the capability and autonomy for unique and independent choices. This aforementioned view agrees with the assertion of Thomas and Thomas (1928), that "if men define situations as real, they are real in their consequences", allowing for the possibility of individuals' definition of situation in which people modify meanings and symbols.

For example, in doing gender, the interactionist approach contend that concepts used to collectively categorize people do not exist in actuality but emerge through socially constructed process. Thus, concepts such as gender are found in the meaning people bring to them, since gender emerges not as an individual characteristic but something consummated through the process of interaction with others. People, therefore basically do gender and doing gender is an interactional aspects of daily life that take place in social situations with others (Fenstermaker, West and Zimmerman, 2002).

Doing gender is therefore consistent with Goffman's dramaturgic view, an offshoot of the interactionist approach which maintained that to understand social interaction is to consider it as a performance in a theatre, where different strategies are adopted by actors to impress people by showcasing information and cues to others in order to present themselves in a favourable light (Goffman, 1977).

Therefore, it is assumed that differences in gender reaction between men and women may be associated with the fact that from early childhood these groups are usually gender segregated even on their roles and ways of reaction. Girls are expected to be emotional and anytime they acted tough they are scorned for being tomboyish.

It is further assumed that this segregation is likely to create a gendered subculture that may strengthen the perception of gender difference and possibly erode the common ground upon which status-equal genders are formed. Hence, differences in reaction are more likely to be noticed, defined and acted on. This difference in reaction may also be connected with familial and community treatment overtime as a result of the possible definition and meaning collectively held by community members on who is defined as being infertile.

METHODS

Descriptive survey design was used through the administration of a designed questionnaire. This study selected both married couples that are blessed with child/children and those that are childless for its sample population from the selected Yoruba communities.

The selected communities were big communities in south-west, Nigeria, where people from different ethnic spheres are found. Therefore, the communities were purposively selected for this study.

The sample size for this work is 120 respondents which were selected using multi-stage sampling procedures. The respondents were married couples selected from four areas in the selected communities, which are Area A; Area B; Area C and Area D. 12 respondents were also selected for the in-depth interview. Below is the distribution showing sampling procedures and sampling size.

Table 1: Distribution of selected Respondents

SELECTED COMMUNITY ²	HOUSES IN THE COMMUNITY	SELECTED RESPONDENTS	TOTAL NUMBER OF RESPONDENTS
Area A	3	10	30
Area B	3	10	30
Area C	3	10	30
Area D	3	10	30
Total	12	40	120

Source: Field survey (2016)

² Pseudonyms (A, B, C, D) have been assigned to these communities to conceal their real identities and maintain confidentiality of information obtained as required by the ethical consideration.

For data collection the quantitative and qualitative research instrument of data collection was adopted for this study. The quantitative research instrument used for the study is the structured questionnaire which is divided into two parts: the first part contains the respondent’s demographic characteristics while the second part contains the main questions which are linked with the research objectives formulated for this study. The researcher administered the questionnaire on the respondents personally as well as having a face to face contact with the respondents. For the qualitative research instrument of data collection, the in-depth interview was used, while for the secondary data, the use of journals, internet, and newspaper was used.

In analyzing the data, both the univariate and bivariate data analysis techniques was applied using the special package for social sciences (SPSS) version 15.0 software. While qualitative data was content analysed and where necessary the respondents were quoted verbatim.

For the univariate data analysis, simple percentage and frequency distribution was applied, while the chi-square was used for the bivariate data analysis in order to elucidate information that has to do with relationship in two or more variables.

To address the specific objectives of the study, copies of the questionnaire were administered to 120 respondents in the areas of study, 12 in-depth interviews were conducted with some selected key representatives who must have been married for five from the area under study, namely, area A, area B, area C and area D which were purposively selected. Out of the 120 copies of the questionnaire, 106 copies were returned, which translates to 88.3% response rate.

Out of the 106 copies returned, 2 copies were not duly completed and so could not be used for analysis. A total of 104 copies which were duly completed, were analysed for this study. Quantitative data were analysed using descriptive and chi-square test statistics at 5% level of significance, while qualitative data were content analyzed.

RESULT OF FINDINGS

Socio-economic and demographic characteristics of the respondents

The table below reveals the gender distribution of respondents which shows that 42.3% of respondents were male, while 57.7% were female. The age distribution of respondents shows that majority of the respondents 57.7% were within the age ranges of 31-40, 20.2% were within age ranges of 41-50 years, 14.4% were within age ranges of 21-30 years. The least age ranges 7.7% were 50 years and above. As regards the religion of the respondents, result shows that 26 (25.0%) of the respondents practice Islamic religion, while majority of the respondents 75.0% were Christians.

Results on educational qualifications of the respondents show that highest percentage 77.9% of the respondents had tertiary education, while 22.1% of the respondents had education to secondary level. The monthly income result shows that 48.1% which constituted majority of the respondents earn N41,000.00 and above monthly, this was followed by 23.1% who earn between N30,000 – N40,000, 22.1% earn between N10,000 – N20,000, while, the least 6.7% (N21, 000 and N30, 000) respectively.

Socio-Demographic Characteristic of Respondents

Table 2: Socio-Demographic Characteristics of the Respondents

Sex	Frequency	Percentage
Male	44	42.3
Female	60	57.7
Total	104	100.0
Age	Frequency	Percentage
21-30 years	15	14.4
31-40 years	60	57.7
41-50 years	21	20.2
Above 50 years	8	7.7
Total	104	100.0
Religion	Frequency	Percentage
Christianity	78	75.0
Muslim	26	25.0
Total	104	100.0
Level of education	Frequency	Percentage
Secondary level	23	22.1
Tertiary level	81	77.9
Total	104	100.0
Income	Frequency	Percentage
10,000-20,000	23	22.1
21,000-30,000	7	6.7
31,000-40,000	24	23.1
41,000 and above	50	48.1
Total	104	100

Source: Field survey (2016)

The result from table below shows that social problems accounted for 55.8% as the major cause of childlessness by the respondents, infertility from both partners accounted for 22.1% and this was followed by infertility and abortion by women with 7.7% respectively. However, 6.7% of the respondents chose all of the above.

Table 3: Showing the causes of Childlessness by Respondents

What are the causes of Childlessness	Frequency	Percentage
Infertility from men/husbands	8	7.7
Infertility from both partners	23	20
Abortion by women/wives	8	7.7
medical Problems	58	55.8
All of the above	7	6.7
Total	104	100

Source: Field Survey (2016)

This implies that Childlessness is a basic issue caused by some medical problems. This opinion supports the observation of Eisenberg (2011), which suggest that childlessness for men is most often caused by low or no sperm count and blockage of the tubes that transport sperm. Childlessness in women on the other hand, is caused by a range of other factors such as problem with ovulation, blockage of fallopian tubes and physical damage to the uterus. Sexually transmitted diseases, advanced age, smoking, and excess alcohol use are also mentioned as risk factors of infertility. However, a considerable number of people in the majority world have limited level of knowledge about the medical causes of infertility.

In probing further, a respondent who had been childless for three years, said:

Whatever the cause, as a result of existing social and gender norms, women are often blamed if a couple is childless. A woman may suffer any or a combination of the following as a result of being childless - distress, depression, lowered self-esteem, social stigma, open ridicule, isolation, economic deprivation, physical violence, threats from husbands and husbands' family, rejection, abandonment and divorce (IDI/Female/Area C/2016)

Table 4: Showing Effect of Childlessness on Married Couples

Effect of childlessness of married couples	Frequency	Percentage
Marital instability	15	14.4
Divorce	7	6.7
Stigmatization/discrimination	12	11.5
All of the above	70	67.3
Total	104	100

Source: Field Survey (2016)

The results from the above table shows that majority of the respondents 67.3% indicated 'All of the above' (marital instability, divorce and stigmatization) as effect of childlessness on married couples. However, 14.4% of the respondents chose marital instability and 6.7% and 11.5% chose divorce and stigmatization respectively. This finding corroborate with the work of Van Balen and Bos, (2001), who opined that Childlessness has major psychological and social implications for couples and especially for women in settings where fertility is highly valued.

Studies have also shown that infertile women suffer more health complaints including sexual dysfunction compared to fertile women (Waziri-Erameh and Omoti, 2006). Thus, childlessness could have lifelong impact on women and could affect their quality of life negatively. On the other hand, childlessness of the male as a result of infertility is often not acknowledged (Okonofua, 2002) and is less visible.

Further, there are other socially sanctioned ways in which men can mask their infertility. Childless men may therefore be less traumatized. However, in cases where the infertility of a man is known in the society, such man may also suffer different kinds of trauma and stigma.

Table 5: Socio-cultural implications of childlessness on married couples

Implications of childlessness on couples	Frequency	Percentage
Lineage is closed	2	1.9
Couples are despised	42	40.4
All of the above	43	41.3
No response	17	16.3
Total	104	100.0

Source: Field survey (2016)

The result from the above table on implications of childlessness on couples shows that 41.3% which constituted majority of the respondents chose all of the above i.e. lineage is closed, couples are despised, no leadership role assigned to them as the implication of childlessness. A close number of respondents 40.4% believed that couples are despised in the community. However, only 1.9% of the respondents chose that the lineage is closed.

Further buttress this, one respondent from Area B said:

I am involved and I know what happens to a woman who does not have a child. She is not respected in our community and cannot share in our inheritance (IDI/Female/Area B/2016)

This also suggests that childless couple were not in some cases, regarded as member of such family and may most likely experience close lineage as well as despised by other members of the their immediate family and the society as well. In some cultures, childless men have lesser status in the community compared to their peers with children and their views may not be considered or they may not be allowed to contribute to societal discussions (Upton, 2001). In Nigeria, high premium is traditionally placed on having children and this is celebrated in the society by rites and rituals (Feyisetan and Bankole, 2002; Makinwa-Adebusoye, 2011; Odimegwu, 1998; Pearce, 1999).

Table 6: Table showing respondents' response on the prevention of Childlessness

Childlessness can be prevented	Frequency	Percentage
Yes	62	59.6
No	42	40.4
Total	104	100

Source: Field Survey (2016)

The table above shows that majority of the respondents 59.6% indicated 'Yes' that childlessness can be prevented. Only 40.4% of the respondents indicated 'No'. The respondents that indicated 'Yes' gave suggestions that childlessness can be prevented by praying and having faith in God. Others suggested that help should be sought from health professionals.

Also, a respondent from area D was of the opinion that:

Every woman is unique. Seek advice and know your body well. Today apart from the four common theories on Fertility Awareness Methods, recent studies appear to suggest that there are specific days in the year in which a woman in her fertility period can be pregnant. Know your days and act accordingly (IDI/Male/Area D/2016)

Generally, suggestions made by the respondents on the ways by which childlessness can be prevented include:

- Seeking medical advise
- Advising and counseling of the couples
- Prayers and family support
- Awareness
- Faith in God

CONCLUSION

Conclusively, it is important to note that infertility questions go beyond the core of the individual in African setting. Nevertheless, how men and women respond and the language they use reflect their individual experiences. Listening to their accounts and experiences, one cannot help but imagine the physical and emotional challenges they face on a daily basis in their homes and the community at large. For those who have chosen a treatment option, it is important to understand that infertility treatment in Nigeria is not an easy option because of the emotions and physical difficulty involve and with every failure, the feelings of never becoming a parent are re-visited, in some cases even after success.

Childlessness has major psychological and social implications for affected persons, especially in settings where fertility is highly valued. This study have documented how childlessness is perceived in the selected communities and the multitude of adverse consequences suffered by affected individuals, Using quantitative and qualitative methods from this communities, this study explores socio-cultural implication and perception and acceptance of childlessness in these communities , focusing on both voluntary and involuntary childlessness.

Findings show that not having children, whether voluntarily or not, contributes to a kind of invisibility and stigmatization in Yoruba's' communities. Regardless of the reason, voluntary childlessness evoked strong negative feelings among people of those communities. The study also shows the broad definition given to voluntary childlessness by the people, as including individuals that are childless because they chose to stay with an infertile partner and also those who could not have biological children and chose not to adopt. Childlessness is not yet well embraced in Yoruba communities, where pro-natalist culture is still very strong.

Treatments used by infertile individuals in the selected communities studied vary from being traditional and spiritual to the latest and advanced medical treatments. When people face the problem of infertility in most parts of the communities, they try traditional and spiritual practices rather than medical treatment. A study by Okonofua et al., (1997) in Nigeria, Yoruba, for instance, showed that many childless couples use a variety of traditional and religious treatments; while medical treatments are less often used.

Another study in the same community by Koster-Oyekan (1999) found out that infertile women prefer to seek treatment from local herbal and spiritual specialists and churches. When it is not possible to have one's own child, adoption or fosterage is commonly practiced by many in the selected communities as a mechanism to satisfy parenthood needs.

Adoption and fosterage are solutions for infertile couples to avoid public discrimination and to fulfill parenthood needs (Rutherford & Jenkins, 2002). However, while some people consider adoption as equivalent with biological parenthood, others consider it as of less valuable and incomparable with biological parenthood, arguing that the adopted children cannot be real children for adopters due to their felt needs for biological generational continuity. However, voluntary childlessness and adoption are unacceptable in many parts of the world (Inhorn, 2003).

In Egypt, for example, one of the reasons that make adoption unacceptable as a substitute to real motherhood is the fact that birth parents may come to reclaim the adopted child and thus feelings of emotional affinity and kinship between adoptive parents and adopted children will not emerge. Moreover, as a woman should have a child of her own body in order to achieve the real womanhood identity, substitute mothering (fostering or adoption) can never take the place of "normal" motherhood (Inhorn,2003).

Similarly by Hollos (2009) communities demonstrate that foster children are considered as a valuable source of labour but they cannot be compared to biological children in terms of social status, emotional satisfaction, or old age security.

According to (Inhorn, 2003) aspects of infertility in Africa showed that most childless women didn't see fostering as a permanent solution (Gerrits, 1997).

RECOMMENDATIONS

A couple is assumed to have problems if after two years of regular and active sexual life, there is no pregnancy. It is, therefore, advisable that you have regular sex. Also appreciate the fact that some

women with short or irregular menstrual periods may ovulate during menses. It may, therefore, be advisable to have sex even during their period. There is nothing wrong with it.

Avoid herbal concoctions that are not certified by specialists. Most will worsen your condition. Instead, seek medical attention.

Today surgery, hormone treatment and Assisted Reproductive Technology have reduced childlessness but their success depends on factors such as age, health status of couples and even luck. You may adopt or have surrogate. If all attempts fail, couples should accept their condition and stay strong. Knowing that you can never have children is not easy but denying it actually hurts more. Take interest in other people's children in the neighbourhood, social organization and church. They will benefit from your time and your interest. Parenthood is not about biology but about love and care. As you show care and love you become a true model of parenthood.

You may also develop new interest and get involved in activities like sports club, music and travel to meet people with kids. It helps you to blend in instead of alienating yourself from the rest of society. Never think that God does not love you. Instead He has given you what in His perfect plan, is the best for you.

Today we hear of children butchering their parents. God knows your end from the beginning and may be saving you from tragic things you may not know of. If you learn to accept your situation, others will accept you. If you don't have kids, you have each other. Cherish and deepen the love you share. Children are visitors who will come and go. No doubt studies show childless couples in later life, have higher levels of social participation than older couples who are parents. The love you share with or without children is the only key to a happy marriage.

Those that, for whatever reason, are affected from involuntary childlessness do have options available to them. A person or persons that have the necessary components to reproduce may have a low sperm count or problems with ovulation could look into options such as artificial insemination or intracytoplasmic sperm injection (ICIS) (Stearns, 2010).

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