

SOCIO-CULTURAL CONSEQUENCES OF BEING CHILDLESS; PERSPECTIVES ACROSS AFRICA AND EUROPE

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Abstract

Childlessness has major psychological and social implications for affected persons, although the implications vary across cultures. Whereas in some part of the developed European societies individuals voluntarily decides not to have a child or children with reasons including the opportunity to pursue careers and self-fulfillment; this has become normalized with little irritation or concern by the public. Contrary in developing societies especially in Africa childlessness connotes a multitude of adverse implications as the society predicates marriage essence on procreation; therefore, a childless couple tends to lose their place within society with dire informal social sanctions melted at them. While several studies have documented how involuntary childlessness is perceived in some societies and the multitude of adverse consequences suffered by affected individuals, some other studies have also examined the tendencies of voluntary childlessness, studies have not made a clear perception of childlessness across the two continents of Africa and Europe. The paper presented three theoretical perspectives explaining childlessness ;the Second demographic' theory was adumbrated by Lesthaeghe and van de Kaa, Preference theory by Catherine Hakim and symbolic interaction theory traced to Max Weber. From the secondary data analysis, it was found that fact there is a higher rate of accepted childlessness in Europe than in Africa. The paper, therefore, concluded that Childlessness though a global phenomenon differs in rate and acceptability in different continents. Whereas changing cultural norms and relationship patterns are disposing women into voluntary childlessness in developed nations, it is completely different in most developing societies, therefore any discussion on childlessness must be society focused.

Keywords: Childlessness, Social, Cultural, Consequences, childless couple

Introduction

Roland (2007) was of the view that childlessness has recently emerged as a major factor contributing to low birth rates raising the prospect of population decline in developed countries. It is pertinent to state that currently,

childlessness is on the increase globally. For instance, Bos (1995) stated that approximately 70-80 million couples worldwide are currently infertile. It can be estimated that tens of millions of couples are primary infertile or childless (Boivin et al., 2007). However, the situation could be for a different reason with divergent outcomes. Balan and Vos (2009), sustained that for most people, having children is immensely important; not being able to have children is a major life problem. However, Rybin'ska and Morgan (2018) argued that childlessness in some societies especially the US could be a result of the choice to postpone childbirth by couples to allow them the opportunity to pursue other life goals. Giddens (1991) suggested that these child-free years create space and opportunity for exploration of non-familial social roles, these may include education, career and even leisure, he went further to suggest that these activities translate into greater individualization of life course biographies which are mostly achieved by being childless.

The changing trends in population have remained of concerned to state actors, researchers, scholars and agencies involved in societal development. The concern emanates from obvious reasons that population differentials could determine other social-economic outcomes within a nation. Several indices demonstrate population trends such as migration, deaths and fertility – childbirth. The implications of fertility which is the focus of this paper have tremendous consequences little wonder why states had at some point or the other formulated policies to regulate fertility. For instance, the one-child policy in China which *Scharping, (2003) explained as a policy that for systematic birth planning structure designed to put in check the size of China's population. The policy is argued to be the most deadly measure of population control. According to Scharping, (2003) the one-child policy practised in China then is dissimilar from the typical family planning procedures of most other countries (which focus on providing contraceptive options to help women have the number of children they want), it rather sets a limit on the number of children parents could have. This policy aimed to curb a then-surgingly population and alleviate social, economic, and environmental problems in China (da Silva, 2006). There is a general decline in fecundity leading to childlessness in most developed societies for certain reasons. Although childless situations do exist in most developing societies the concern for the situation differs from that of the West or developed societies owing to the different socio-cultural explanations attributed to childless circumstances within these societies. Whereas in most developed societies of the West childlessness which has become a modern trend is largely voluntary Kreyenfeld and Konietzka (2017) in most developing nations childlessness circumstances are mostly attributed to certain myths and realms of existence Rasak and Oladipo (2017), this makes the experience and outcome of childlessness quite different in this societies.*

Definitions and concepts regarding children and childlessness

It is however pertinent to ascertain the meaning of childlessness and its certain connotations as applicable. The investigation of (in) fertility presents several conceptual and practical difficulties, due to definitional uncertainties and lack of adequate data. Tanturri, Mills, Rotkirch, Sobotka, Takács, Miettinen, Faludi, Kantsa, Nasiri (2015), argued that childlessness connotes absence of biological children. However, the concept of childlessness as the absence of an offspring includes other various situations with divergent implications in understanding reproductive strategies (De Rose, 1996; Houseknecht, 1983). Childless adults form a heterogeneous group, whose common trait is a “non-event” (De Rose, 1996). In this instance the idea of childless is associated with nonparents, this does not include those for example, and that leaves with the children of their spouse. Some persons without a living are also considered childless. Some terms are most often used loosely to suggest childlessness, for instance, terms such as infertility, sterility, and infecundity are associated with childlessness sometimes. In addition, certain social demographic cum medical ideas could underpin the definitions such as language, medical and societal influence could shape the understanding of childlessness. Ganguly and Unisa (2010) were of the view that from the English language perspective, the inability to bear any children is also known as primary infertility this is typically seen as the inability to conceive or the lack of ability to sustain pregnancy till childbirth.

Infertility in medical studies is only defined as the inability to conceive. More so, Ganguly and Unisa (2010) further suggested that in the English demographic language, the term “infecundity” refers to the inability to conceive after several years of exposure to the risk of pregnancy. According to WHO (1975) conception, the inability to conceive within two years of exposure to pregnancy is the epidemiological definition recommended by the World Health Organization (WHO, 2001). Clinical studies often use one year of exposure. It is common in demographic studies to use five years. The term "infecundity" is sometimes referred to as "infertility" because in the English demographic language, "fertility" is the term used to describe the quantity of offspring rather than the physiological ability to reproduce. The definitions above seem more or less not to confirm childlessness situations as emanating from non-biological dimensions. Nonetheless, childlessness emanates from biological factors however it is pertinent to state that it could also arise as a result of voluntary deliberate actions of couples who despite having sexual intercourse, are biologically fertile to conceive and bore a child yet do not have children. They achieve this through the use of contraceptives which may include condoms, withdrawal of ejaculation during sex and other birth control measures. Some scholars usually define childlessness in contrast with parenthood; defined as a state which includes people who already have at least one biological child, but also people who enjoy parenthood, through adoption, fostering or having stepchildren (Hakim, 2005). In some studies also those who plan to have

children are defined as parents. However, according to Wasoff (2007), this classification raises certain issues: it presents these statuses as static and assumes that future outcomes are coherent with currently stated preferences. Recent research studies have identified a gap between preferences for childbearing and realized fertility and clarifying the ways intentions are implemented or not (e.g., see REPRO project: Philipov et al. 2009); classifying together those who state a desire to have children with actual parents ignores differences between these groups (including attitudes and values), which may impact on the likelihood of going on to have children (Simpson, 2007; Philipov et al. 2009). For this reason, we stuck on the classical demographic definition of both childlessness (the lack of any biological children) and parents (having at least a biological child).

Theoretical Explanations

Depending on their objectives, cultural orientations, societal impact and overview different scholars has explained the issues of childlessness from their orientation and inclinations. Few theories comprehensively explain contemporary fertility behaviour and even fewer have direct overarching explanations for childlessness (Donno and Tanturri, 2015). This paper adopts two strands of cultural theories - Post-Material Values Theory and the Second Demographic Transition and Preference Theory; the study also explored a perspective from the economic theory - Rational Choice Theory and lastly, it adopts the Symbolic Interactionist

Post-Material Values Theory and the Second Demographic Transition

The 'second demographic' theory was propounded by Lesthaeghe and van de Kaa who coined the term in (1986); this was the phrase in the title of the introductory chapter of a special volume (published in Dutch) on the demographic situation in low fertility countries. They initially, offered the second transition as a possible phenomenon. Van de Kaa (1987) having to examine demographic change in 30 European countries, argued that "the principal demographic feature of this second transition is the decline in fertility from somewhat above the 'replacement' level of 2.1 births per woman to a level well below replacement."

The basic assumption of the theory portends certain demographic reconceptualization that altered earlier held fertility notions such as marriages which were previously upheld as the only family structure became weakened over the period, resulting from high divorce rates and a rise in cohabitation. Also a shift in family relations from 'king-child with parents' to 'king-couple with child' i.e. adoption as against childbirth some worth gained relevance: a shift from preventive contraception to self-fulfilling contraception. The uniform family (the conjugal family) starts giving way to more pluralistic forms of families. At this stage, other forms of marriage types that do not necessarily

encourage or demand childbirth evolved. For instance, the gay, lesbian etc forms of union emanated within society the attendant consequences or effect is drastic low birth rates. The shifts have been identified by Zaidi and Morgan, (2017) to run in phases. Phase 1 (1955 – 1970): Increasing divorce; fertility decline; contraceptive revolution; stop in declining age at marriage. Phase II (1970–1985): Rise in premarital cohabitation; rise in non-marital fertility. Phase III (1985-onward): Divorce rates plateau; decline in remarriage; recuperation of 30+ fertility, which pushes period fertility rates up.

More so, analyzing the perspective of the second demographic theory, Tanturri, Mills, Rotkirch, Sobotka, Takács, Anneli, Faludi, Kantsa, and Nasiri (2015), argued that the theory described low fertility as the result of profound cultural changes, in particular, the passage from traditional value systems that maximize the well-being of the family, to systems that favour self-realization and individual options. In any case, the self-actualization drive of especially women became more subscribed into and this was can be rightly attributed to the rise in feminism. Women envisaged that being unmarried or engaging in marriage arrangements that require no childbirth will more or less allow them ample opportunity to pursue personal goals especially career interests with high economic and social status rewards. *Post-Material Values Theory* argues that changes in partnership and parenting behaviour have been driven by the growth of values of self-realization, the satisfaction of personal preferences, and freedom from traditional forces of authority such as religion. Analyzing the transformations in intimacy, Giddens (1992) contends that contemporary partnerships ('pure relationships') are characterized by egalitarianism and individualism, with parenthood no longer an intrinsic aspect of such relationships. On the validity of the second demographic theory, many qualitative studies provide evidence that the voluntary childless frequently report their desire for independence, freedom and spontaneity, for a life without constraints (McAllister and Clarke 1999, Tanturri 2006). Other studies suggest, however, that these statements might be the result of an ex-post realization mechanism (Veevers 1980, Tanturri 2006), or rather a defensive strategy in response to negative stereotyping of women who remain childless (Simon 2006).

Supporting the empirical evidence on second demographic scholars has broadly articulated recent changes in union formation which are consistent with SDT expectations (Cherlin 2012: 585–586) as well as with what Cherlin (2004) called the “deinstitutionalization of marriage”. Secondly, the age at marriage has increased worldwide (Ortega 2014); Asian countries like Japan, Korea and Taiwan are now some of the latest-marrying countries in the world (Raymo et al 2015) and even African nations are experiencing a rapid increase in age at marriage (Shapiro and Gebreselassie 2014). Further, there is no Western country where the proportions of never-marrying have not increased from their

levels in the early 20th century (van de Kaa 2002; Cherlin 2014). The decline in rates of first marriage rates has been even more dramatic in East Asian countries with economic growth matching Western nations, although variations by socioeconomic class remain (Raymo et al 2015). In China age at marriage increased dramatically in the 1970s, but, has experienced relatively little marriage change (albeit in the expected direction) since. Marriages remain nearly universal and within a narrow age range (Raymo et al 2015).

But when one looks more closely at the data questions arise. First, although marriage rates did decline in most industrialized countries after the middle of the 20th century, these trends show a modest reversal in the vanguard nations of the SDT (Sweden and Denmark) as early as the 1990s (van de Kaa 1994). Second, the mean age at marriage in low and middle-income countries is currently reaching the level that wealthier countries had reached in the 1970s (Cherlin 2014), with several countries in Africa experiencing age at marriage nearly as high as that in contemporary Europe. Perhaps postmodern values are diffusing to new settings spawning an earlier start of the SDT (Lesthaeghe 2010: 244–45), in a way analogous to what Thornton calls “developmental idealism” (2001). Or more likely, high/rising ages at marriage are a response to greater economic crises and uncertainty (Shapiro and Gebreselassie 2014) or women’s dissatisfaction with the conflicts of rapidly changing economic participation and persistent traditional gender roles (Frejka et al 2010; Jones and Yeung 2014).

As is known there is no theory without criticism of the underlying argument of the second demographic theory which argued that the underlying mechanism producing the SDT (a shift to postmodern values) is not reliably present before expected changes (in family and fertility). But more fundamentally, the assumption can be challenged on the premise of a search for all-powerful exogenous forces that produce predictable stages in the unilinear movement toward an "end-stage". This end-stage resembles the contemporary country with the widest acceptance of postmodern values. Van de Kaa (1994) and later Lesthaeghe (2010) admitted that the SDT's proposed sequence of changes in family and fertility and the inter-connectedness between key components was overly rigid. Lesthaeghe recently stated that the SDT should not be taken as a “teleological grand script with a standard scenario” but rather as a “general narrative that leaves room for many sub-narratives” (Lesthaeghe, 2010).

Preference Theory

The Preference theory was propounded by Catherine Hakim (1998). The theory is a multidisciplinary perspective hinged on (mainly a sociological) perspective. The theory follows to examine and articulate the choices of women concerning investment in productive or reproductive work. The major assumption is that women are varied and also in the first epoch of their life they develop different

choices or preferences concerning childbearing and lifestyle, and these will also determine the consequential divergent behaviour. Social forces within the society goes a long way in shaping these behavioural outcomes. For instance, the weakening of moral and social norms encourages women to follow their genuine propensities, some rejecting being a mother, and society does not stigmatize them. According to Catherine, (2000) they are five major theoretical assumptions embedded in the theory which are five socio-economic conditions that jointly create a new scenario:

1. The contraceptive revolution gives women reliable control over their fertility for the first time in history.
2. The equal opportunities revolution gives women genuine access to all positions and occupations for the first time in history
3. The expansion of white-collar occupations, which are more attractive to women.
4. The creation of jobs for secondary earners, such as part-time jobs, working at home, teleworking, and annual hour's contracts.
5. The increasing importance of attitudes and values in affluent modern societies, which gives everyone the freedom to choose their lifestyle.

More so, the theory posits that in rare nations that have achieved the new scenario for women which she identified as (Britain and the Netherlands only), the women present honest choices how they resolve the conflict between paid jobs and a major investment in family. There are three main choices which include: women who priorities their careers and espouse achievement value (a work-centred life) who remain childless voluntarily constituting (20%); women who priorities family life and sharing values (a home-centred lifestyle) and often have many children and little paid work (about 20%); and the majority of women who seek to combine paid jobs and family work in some way without giving absolute priority to either activity or the accompanying values (the adaptive lifestyle) (Marshall, and Gordon, 2009). In substantiating the perspective Hakim (2004) (carried out two national surveys, in Britain and Spain, to test the theory, and showed that questions eliciting personal preferences can strongly predict women's employment decisions and fertility. However, a contrasting observation was made about women's behaviour which did not predict their attitudes, showing that lifestyle preferences are not *post hoc* rationalizations. This study also showed that other sex-role attitudes do not have the same impact on women's behaviour; notably, the patriarchal values measured by most social surveys, including the European Social Survey, have virtually no impact on women's personal choices and behaviour

There are several scholars attracted to the preference theory, likewise, they are many who has also considerable criticism. The perspective has majorly been critiqued for not demonstrating causality, that the observed preferences cause changes in fertility patterns, and that it has been suggested that actual fertility

may change values and preferences. It has also been suggested that the observed effect of lifestyle preferences on achieved fertility may be absorbed by other factors when controlled for. A follow-up study by *Rabušic, Chromková Beatrice-* (2007), "found that Hakim's typology does not work well in the Czech Republic", that there were no important differences in fertility between the three groups in that country. A second follow-up study, surveying eleven European countries, found support for the theory in only two countries (Britain and Denmark) (*Vitali, Billari, Prskawetz, Testa, 2009*). Furthermore, since preferences might also be the outcomes of given constraints, it remains questionable whether this 'theory' would hold (Crompton and Harris 1998).

Symbolic Interactionist Theory

The symbolic interaction theory, also unknown as symbolic interactionism, is one of the major frameworks in sociological theory. From the theory, the basic assumption rallies on the meaning people develop and attach to their social world created through continuous interaction. Although symbolic interactionism traces its origins to Max Weber's assertion that individuals act according to their interpretation of the meaning of their world, it was the American philosopher George Herbert Mead who elaborated and introduced this perspective to American sociology in the 1920s.

The symbolic interactionist approach was adopted as a theoretical orientation for this paper largely on its proposition that people do not respond directly to the world around them, but to the meaning, they bring to it. Furthermore, the approach espouses that society, its institutions and social structure are created through human interaction (Blumer, 1969). 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 based on how they see and understand a situation and the meaning they attach to the situation or encounter. For the theory, it simply means that our reality is what members of society agree to be reality and this is conceived and shaped through social interaction. The social reality and conception or perception of fertility are largely socially construed especially within developing societies whereby at some instance involuntary infertility is rather not attributed to biological deficiency but rather certain realms of myths and cosmological immortal existence which presupposed controls the affairs of mortals. Consequently, each person's definition of the circumstances surrounding the interaction of childbirth influences others definitions. This means that the meaning attached to social interaction can be modified because people bring their definitions of the situations. These definitions shape the way people see and experience the world. Consistent with the theory, in most developing societies the state of infertility and its attendant's consequences are socially defined through a conceptualization of barrenness which leads to

segregation and discrimination. Such society mostly African where fertility and childbirth is a socially desirable norm, infertility is consequently defined in interactions as an abnormality. As abnormality, the outcome of behaviour towards such are negative sanctions which come in different forms the climax being divorce. More so, African studies have validated the major assumption of infertility in developing societies as preconceived abnormality requiring negative sanctions, findings from of these studies shows that in most occasions infertility situations are mostly blamed on the woman who is perceived as unable to conceive nor bore a child and at a certain point would be dejected disgracefully without any form of compensation or recognition. In a society that shames divorces, these situation attracts stigma depression and loss of social value and self-confidence. For instance, an empirical study by (Ibisomi and Mudege, 2014) in Nigeria revealed a high proportion of acceptance that infertility leads to disorientation at (33%). Also, the view that lifestyle and risky behaviours could have implications on fertility was shared by (25%) of those who also attributed the cause to induced abortion and STIs. Sixteen per cent of the respondents attributed the aetiology of infertility to spiritual forces such as the devils, witches, and ancestral spirits while 22% in-correctly highlighted the use of OCPs and IUCD as causes of infertility.

Consistent with Blumer's view, every time social interaction occurs, people creatively construct their understanding of it whether "real" or not and behave accordingly. Furthermore, these shared meanings 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 the situation in which people modify meanings and symbols. 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 the reaction are more likely to be noticed, defined and acted on. This difference in the reaction may also be connected with familial and community treatment over time as a result of the possible definition and meaning collectively held by community members on who is defined as been infertile.

Results: Childlessness across the Globe a Comparative Data Overview

To understand the differences in childless, a data comparative analysis will be presented in this section. The data will review selected African countries prevalence rate of accepted childlessness with that of Europe. The source of data will be from exiting qualitative studies in both continents. First, the African dimension will be presented followed by that of Europe thereafter a graphical illustration of the two will be presented. In most developing societies and even

in developed clime it is generally not very possible to have a comprehensive compiled national or regional data of childless women of any age cohort. Therefore this study derived its data from multiple sources by reviewing existing secondary data relevant to the issue of childlessness. This is done through existing studies on childlessness in Europe and Africa which were extracted to analyze and relevant inferences made. For the developing nations predominantly African nations the study relied on an existing comparative study by Rutstein, and Shah (2004) the study was on Infecundity, Infertility, and Childlessness in Developing Countries. Although the study presented data on the prevalence of childlessness within the developing nations from about 47 surveys. This paper selected data from 10 countries within the African continent.

Table 1. Percentage of women who want no (more) children and percentage of women whose ideal number of children is zero among women with no living children and all women, Demographic and Health Surveys 1986-2001 in the African continent.

Country	Wants no (more) children	Among women with no living children	Among all women
Egypt	1.0	0.0	0.1
Morocco	1.3	1.1	0.8
Benin	1.0	0.2	0.4
Burkina Faso	0.3	0.1	0.1
Ethiopia	5.4	5.6	3.5
Guinea	1.7	0.3	0.3
Nigeria	2.0	1.5	0.8
Zimbabwe	4.2	1.3	0.6
Niger	0.8	0.2	0.0
Uganda	1.0	0.9	0.3

Source: Adapted by the student from Rutstein and Shah (2004)

The last two columns of Table 1 show another way to look at women's desire for no children. In the next-to-last column are women whose ideal number of children is zero among those who have no living children. For several countries, the proportion is less than 2.0 per cent. From lowest to highest, they are Egypt (0.0 per cent), Nigeria (1.5 per cent), and Ethiopia (5.6 per cent). The country with high percentages of women with no living children whose ideal number of children is zero is in the North African region of Ethiopia. The last column shows the percentage of all women whose ideal number of children is zero, irrespective of the number of children they have. The pattern tends to follow that of the women with no living children.

For the European perspective data was sourced from Fahey and Spéder (2004) on Eurobarometer Survey 2002. Similar to our approach on the African analysis though the data from the survey presented issues from several European nations this study selected information for (10) nations.

Table 2: Proportion (%) of women in age-groups 18–34 and 55 and over with 'none' as the ideal number of children

Country	Age 18–34	Age 55 and over	Among all women
Austria	13	6	19
Belgium	9	6	15
Germany	17	5	22
Hungary	4	1	5
Italy	4	2	6
Netherlands	12	6	18
Portugal	4	2	6
Slovak Republic	3	1	4
Spain	4	4	8
United Kingdom	4	4	8

Source: Adapted by the student from the 2001/2002 Eurobarometer Survey

Another way to look at childlessness is to take into account the preference of women towards the phenomenon of childbirth especially with a focus on the extent of its desirability which seems to be the trend in modern societies. To put it more directly, is childlessness emerging as an ideal situation? Using data from the 2001/2002 Eurobarometer survey, it is possible to assess whether 'none' emerges significantly as the ideal number of children. In table 2, we are presented with a European survey of the percentage of women answering 'none' as the ideal number of children with the same percentage for women aged these women are within the age bracket of 18 - 55 and the total for each country. While Germany has the highest rate at (22%); Slovak republic recorded the lowest.

Although the years between the two tables differ and other intervening variables such as effects of social change in education, religion, career and life desires would have greatly differed between these two epochs in the two different continents. However, the time frame laps within the same generation and as exact data between the two would probably be provided by further research as it's not in existence at this time the existing data would therefore form the basis of the following analytical comparison.

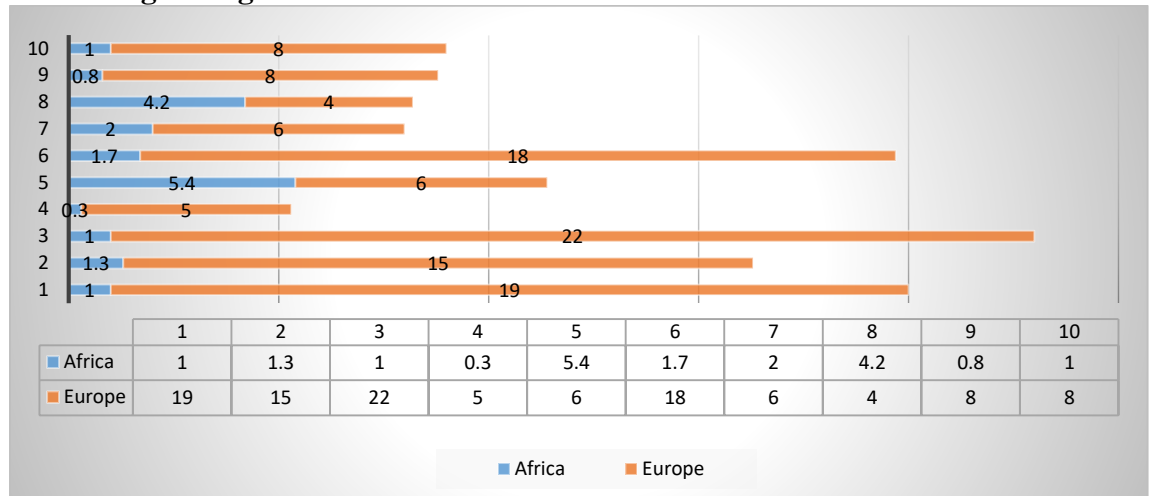
Table 3. One-Sample Test comparing the significant level between none desirability of children between Africa and European women

	Test Value = 0					
	t	df	Sig. (2-tailed)	Mean Difference	95% Confidence Interval of the Difference	
					Lower	Upper
Africa	3.611	9	.006	1.87000	.6984	3.0416
Europe	5.246	9	.001	11.10000	6.3137	15.8863

From the table above at a confidence level of 95% for the two continents, it could be observed that European women have a higher significant level at .001

towards accepting childlessness circumstances than their African counterparts at .006.

Figure 1: A comparative Presentation of the Extent of normalized accepted Childlessness Situation between African and European Women of both Children given age and above.



Source: Adapted data from the two continents

The figure above illustrates the fact that from secondary data there is a higher rate of accepted childlessness in Europe than in Africa.

Childlessness in Europe and Africa A Comparative Literature Exploration

As a result of the divergent reasons behind childlessness the consequences of childlessness also varies between societies at different times. It is pertinent to state that the perception and attitude towards childless circumstances and their outcomes differ among cultures, nations and continents however childlessness in every society has consequences. In some societies especially developed societies infertility or childlessness in recent times is mostly a voluntary behaviour Roland (2007), affirmed that the circumstance of childlessness because of its far-reaching implications towards society continuity and the source of care for individuals, including the aged, handicapped has made the issue a major concern of the century. Additionally, in most European societies it has been observed that people's experiences of marriage and the family have a lasting influence on their life chances. At present, many of the aged in more developed countries have few close relatives, which brings to the fore questions about their access to support (Coleman, 1996; Kreager, 2004).

The idealization in most African nations with low knowledge on biological causes of childless divers greatly from what is obtainable in Europe and other parts of the world. This is why Bamidele and Pelumi (2017), argued that the

problem with infertility or childlessness is 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, supported this view by showing 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-fulfilment and freedom of choice have been seen as important (Poston and Kramer 1983). Due to the perception of other causes less of voluntary bases in most developing societies which mostly value childbirth especially among married couples, the perception of childless couples is worthy of note. For instance, a study by Fahintola et al (2018) revealed that the majority of the participants said they empathize with women who have challenges of infertility. Some of them however believed that they are suffering from their sins and should be dealt with carefully to prevent the transfer of curses to others. "Such a couple can never wish you well. They usually maltreat other people's children. It is better to avoid them." The findings support the assumption of the Symbolic Interactionist perspective with the view that childlessness is rather more of a spiritual symbolic interaction depicting punishment from God by denying the lady in question the gift of childbirth. In the United States, Poston and Gotard (1977), attributed the early part of the rise in childlessness mainly to voluntary factors. It is mostly linked with broader modernization in the society regarding fertility control, with the development of advanced contraceptive technology, female work preferences and choice, changing sexual and family norms such as the emergent of gays and lesbians with their rights.

Similarly in Europe as with America's childlessness is viewed and reacted to differ from that of Africa where childbirth is mostly valued as a gift from God as such every upright couple without sin must receive. In Europe the spread of childlessness in the last decades is accompanied by attitudes and value change as in many countries not having a child is now acceptable and even desirable (Sobotka and Testa, 2008). Although there is a high prevalence and social acceptance of childlessness in recent decades in Europe, however Tanturri, Mills, Rotkirch, Sobotka, Takács, Miettinen, Faludi, Kantsa, and Nasiri (2015) argued that even in Europe the rate differs. Using data from the European Social Survey in 20 countries, a recent study by Merz & Liefbroer (2012) shed light on how this social acceptance is shaped, the extent to which approval of childlessness differs across Europe, and what factors cause potential cross-national variation. The approval of voluntary childlessness is highest in northern and western European countries, followed by southern Europe, and that approval rates are lowest in formerly communist eastern European countries. The majority of respondents strongly disapprove of voluntary childlessness in Bulgaria, whereas in Great Britain a majority neither approved

nor disapproved. By contrast, in Denmark, a majority of respondents approved the choice of having no children (Merz & Liefbroer 2012). Results from multilevel models were largely in line with expectations derived from Second Demographic Transition theory concerning traditional orientation, age, religiousness, education, and stage of Second Demographic Transition in a country. The results also corroborated individual-level expectations on the role of gender and socioeconomic status based on New Home Economics theory. It would be interesting to study whether the increase of social acceptance allows a more rapid spread of the phenomenon.

Conclusion

Childlessness though a global phenomenon differs in rate and acceptability in different continents. Whereas changing cultural norms and relationship patterns are disposing women into voluntary childlessness in developed nations, it is completely different in most developing societies. In most African societies the paper unveils evidence to support the fact that the continent considers childbirth as most desirable whereas barren couples are considered to be facing sanctions from the Gods who has denied them the gift of childbirth little wonder Africa is experiencing rapid population growth while Europe is declining and ageing. Also, the attendant consequences differ across the globe although they seem to be a global concern on childlessness concerning societal continuity; certainly a genuine burden, also labour force is rapidly dropping and companies are increasingly outsourcing. Despite these, an increasing margin of women in Europe within fecundity age are voluntarily preferring to remain childless to pursue other life goals their African counterparts has no such luxury of voluntary childlessness in most cases. Also, the situation might have differed greatly owing to the social organization of most of these societies. Indeed raising concern for childlessness in Europe is with the worry about care during old age and family bonds however with a certain level of social security many seem to worry less. This is contrary within Africa where an individual's social security is the children therefore childbirth seems the only guarantee for a meaningful life in old age or handicapped situation. Therefore for proper understanding of childlessness, it is pertinent to examine the predominant continent and national context as the outcomes are not always the same globally.

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