THE SOCIO-CULTURAL IMPLICATION OF INFERTILITY IN IGBO SOCIETY: ANAMBRA STATE AS EXAMPLE

By

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Abstract

Infertility is the inability of a couple to conceive within a certain period of time. It is one of the major complicated and complex problems that have ruined many families in Anambra State. It has led to many cases of divorce, separation, hatred, accusations, humiliation, disregard, disrespect, unhealthy atmosphere disunity and distrust among couples. The purpose of this study is to highlight and take an in-depth look at the ways the new generation handles Infertility problems. The research method is descriptive survey. The data analysis is governed by the fact that the researcher is a bonafide Anambra indigene and well-grounded in Igbo culture. Findings show that child bearing is the main reason for which every Anambra man marries; children are used as a parameter for marital success; whenever a programme is held for childless couples, the venue often filled up with people especially women who are either there for themselves, daughter, daughter-in-law, relation or friend; these women are also seen in the prayer houses and at hospitals looking for solutions to their problem of infertility; a good number of them visit native doctors and herbalists; these childless women are being maltreated either by their husbands or members of their family, or both. This study serves as a reference literature to historians, anthropologists, sociologists, students and teachers of Igbo culture who wish to investigate further on the topic. The researcher suggests that the psychologists and sociologists in the localities should research more on better ways to make infertile couples have interest in child adoption, make it more attractive to them, thereby making them accept child adoption without fear of social or cultural intimidation.

1.0 Introduction

A Family is a small unit that is made up of a father, mother and children. It could also include close relations called extended family. The family, in the belief of Christianity is an institution established by God for joy, happiness and procreation for married couples. In Igbo land, especially in Anambra State, relations are considered as family members.

Infertility is the inability of a couple to conceive within a certain period of time.In Anambra State, a childless couple can hardly be regarded as being successful no matter how the couple succeeds in their other endeavors. Africans, generally, especially the Igbo people are lovers of children in defiance of all hindrances. This means that anything one is doing in life, one should be sure of having children that will answer one's name. It is in this spirit that Mbiti (1975:104) says:

The Igbo people are a particular people. Marriage to them is deemed an inseparable factor for the continuation of family

line of descent children. This is a central point in Igbo marriage. The first and foremost consideration is the fertility of the couple. Parents long for this fertility, the father of the family requests this every morning in his kola-nut prayer. The mother begs for it while giving cut to her *Chi* during annual festivals.

In other words, if you ask ordinary Igbo man/woman why they desire to marry, the spontaneous answer will be "I want to marry in order to get my own children, to have a family like my parents". It has been observed that this great expectation of child bearing in marriage has not always come to pass for many couples. This observation is made through the number of women who come out to be prayed for the fruit of the womb (child bearing) in most crusades, retreats or conventions. The fact that children occupy a high value scale in the life of the people is shown in the emotional and psychological trauma these couples are passing through. They suffer in the hand of their immediate and extended family members. Infertility has caused a lot of unrest in many families in Anambra State such as disunity, distrust, separation, and divorce.

Seeing the havoc infertility had caused in many families in Anambra State, this aroused the researcher's curiosity to investigate the causes, effects and solutions to the problems of infertility.

The study reveals that the Igbo, more especially those in Anambra State, attach more importance to child bearing as far as marriage is concerned. To them, procreation is the main object and reason for marriage. That is why families feel upset when child bearing is delayed in any marriage. The main objective of every Igbo man is to have a child who will succeed him. Every Igbo man strives to have a successor for whom he will be remembered; hence, they answer these names: "Afamefuna" – (May my name not lost), "Objechina" – (Let not the compound closed), "Nnamdi" –(My father lives), Afunwaechetanna – (When a child is seen, the father is remembered), Nwabugwu – (Child is respect), Nwabuife – (Child is Something).

This research is organized into different sections: section one is the introduction to the study. Section two is the literature review where related literature to the study was reviewed. In section three, the researcher presents and analyzes the data collected. In section four, summary of findings and conclusion are discussed. This research will serve as a reference purpose to historians, anthropologists, sociologists, students and teachers of Igbo culture who wish to investigate further on the topic.

2.0 Review of Related Literature

In literature review, related literary works by scholars are reviewed. These included reviews of some text books, novels, theses, projects, seminar papers, journals and articles.

2.1 Infertility

A couple is considered infertile if the woman does not conceive a child after one year of unprotected well-timed intercourse or she has been unable to carry a pregnancy to a live birth. According to Jenkins (2005:19), Infertility can be defined as "the inability

of a couple to conceive within a certain period of time, usually one year". In the same vein, Papalia and Olds (1989:47), see infertility as "... inability to conceive after trying for 12 to 18 months".

It is also in the same vein that two sociologists, Laver & Laver (1994:340) define infertility as "The inability to conceive after a year of unprotected sexual intercourse". Another medical practitioner, Obi (2003:60) in his own assessment said; "infertility is usually defined as not being able to get pregnant despite trying for 1 year. It includes not being able to carry a pregnancy to term and have a baby".

A medical doctor Mifflin (2002:9) said:

Infertility is a measure used by physicians and others to identify couples who need to be evaluated to see whether medical services could help them have a baby. When neither spouse is surgically sterile, a couple is considered infertile if, during the previous 12 months or longer, they were continually married, had not used contraception and not become pregnant.

Here, the doctor is saying that infertility is different from sterility. Sterility is the inability to create offspring as a result of a procedure such as tubal ligation, hysterectomy or vasectomy while infertility is inability to conceive with appropriate, timed, and unprotected intercourse for twelve months without success. Infertility and sterility are linked or co-exist but they are not necessarily the same. For example, a woman that has a tubal ligation or hysterectomy is considered sterile; therefore, infertile. In contrast, a woman may not have infertility issues but if her male partner is sterile, the couple would suffer from infertility.

On the other hand, Jenkins (2005:27) says:

Infertility refers to a couple that has not achieved or is unlikely to achieve a conception within 12 months of unguarded sexual intercourse. Infertility is separate from the term sterility and subfertility. A sterile individual is likely to achieve a pregnancy without medical help. A sub-fertile individual may achieve a conception without medical help, but the chance of this is reduced in infertility.

The above definitions give one the insight of two concepts – sterility and infertility. Most times, people are confusing infertility with sterility. These are two different words with their respective meanings. That is why Denga (1982:60) ouestioned Jenkins definition of infertility above. He says:

The definitions are fine but I am doubtful if it will be widely accepted mainly by those relying on the American literature because of the following. In the proposed definition, the term "infertility" did not include the term "sterility" and sub-fertility. However, for years mainly in the American literature "sterility" has been used to indicate "absolute" total inability to have children". Should we assume that at present, with the modern Assisted Reproductive Technology (ART), there is no total inability to have children ...?

But it should be noted that the term "infertility" is never used when referring to "sterility" or "sub-fertility". Daya (2005:19), another medical practitioner also says:

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We should not change the widely accepted definition of sterility which says that, sterility is total inability to conceive. It was used by American Society for Reproduction medicine (ASRM) because we will unnecessarily add confusion to the literature. The normal reproduction process requires interaction between the female and male reproductive tracts. The woman ovulates and releases an egg from her ovaries to travel through the fallopian tube to her uterus (womb). The male produces sperm. Both the sperm and the egg normally meet in the woman's fallopian tube, where fertilization occurs. The embryo then implants in the uterus for further development. The problem of infertility could be with the woman, or with the man, or with both.

Therefore, sterility is out of the topic because with the help of Assisted Reproductive Technology, one will have a child while having infertility. Technically, secondary infertility is not present if there has been a change of partners.

The child bearing and raising of children are extremely important events in every human life and are strongly associated with the ultimate goals of completeness, happiness and family integration. It is widely accepted that human existence reaches completeness through a child and fulfills the individual's need for reproduction. Human infertility, compared with other species of animal kingdom is unfortunately high. According to recent studies by the World Health Organization (WHO), approximately 8% - 10% of couples are facing some kind of infertility problem. Globally, this means that 50 - 80 million people are facing the problem of getting an integrated family

2.1 Types of Infertility

There are three types of infertility. They are;

- a. Primary Infertility
- b. Secondary Infertility
- c. Sterility

9. Primary Infertility

Primary Infertility is infertility without any previous pregnancy.

10. Secondary Infertility

Secondary infertility is fertility problem occurring in a couple that has conceived on their own and had a child in the past.

11. Sterility

Sterilityis when there is no chance for a pregnancy. This is different from infertility which generally represents a reduced potential for pregnancy. Most childless couples with a female age under about 43 years that are having problems of getting pregnant are considered to be infertile but not sterile.

3.0 Analysis of Findings

In this section, we are going to present and analyze the data collected in the course of this research.

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3.1 Igbo View on the Causes of Infertility.

In Igbo traditional society, a woman who did not give birth to children is seen as being possessed by marine spirit called "Ogbanje" who has been giving birth to spiritual children. Another cause of infertility which is always the reason for not having children is considered as punishment from the spirit world in Igbo traditional society. It is often assumed that one who is infertile might have one time or the other in his lifetime incurred the wrath of gods or it could even be that his late father or relation did much evil here on earth which is still haunting his children. But evidence has shown that in some cases, people solve this problem by engaging in sacrifices to appease the spirits and deities who may have been behind their problem.

Some other causes of infertility are stress, heat to the genitals (for example, wearing of tight clothing, saunas or hot tubes) or harmful lifestyle habits like tobacco, alcohol or drugs such as marijuana. Short term illness, significant stressful periods and some medications may temporarily affect sperm counts. (Oral interview with Chief Agwubuike E. of Agulu)

3.2 Problems of Infertility among the Igbo People of Anambra State

In Anambra State, Infertility has led to many cases of divorce, separation, hatred, accusations, humiliation, disregard, disrespect, unhealthy atmosphere, disunity and distrust among couples. It has created tension in marriages and caused untold mental torture to couples especially women. Some couples have lost their place in the society because of the pressures they received from relatives and peers while some suffered depression and psychological trauma. Some couples quarrelled, fought and suffered physical abuse from their partners. One of the most outstanding problems is from Mother in laws who abused their daughter in laws just because they were not able to conceive and give them grandchildren after years of marriage.

3.3 Socio-Cultural Implications of Infertility among the Igbo People of Anambra State

In Anambra State, barren women cannot attain full womanhood and join appropriate age associations, since they cannot give birth. Where to live in their later years is also a major concern for infertile woman. Since a wife has no residence right in her husband's house after the man's death, except through her son. Not having a son means not having a rightful place as an older person. Many childless widows returned to their paternal compound, but lived in marginal conditions. In Anambra State, the major purpose of marriage is the replenishment of the lineage (kaama m gharaichi).

The infertility stigma even extends to a woman's death. Burial still remains a problem since expense are usually paid by the woman's son. Funeral costs for childless women are consequently paid by their paternal kin, resulting in small-scale and quiet burial rites.

Infertility may have profound psychological effects. Partners may become more anxious to conceive, ironically increasing sexual dysfunction. Marital discord often develops in infertility couples; especially, when they are under pressure to make medical decisions. Women trying to conceive often have clinical depression rates similar to women who have heart disease or cancer. Even couples undertaking IVF face considerable stress. Emotional stress and marital difficulties are greater in couples where the infertility lies with the man.

The consequences of infertility are manifold and can include societal repercussions and personal suffering. Advances in Assisted Reproductive Technologies, such as IVF, can offer hope to many couples where treatment is available, although barriers exist in terms of medical coverage and affordability. The medicine of infertility has unwittingly led to a disregard for the emotional responses that couples experience, which include distress, loss of control, stigmatization, and a disruption in the developmental trajectory of adulthood.

Social implication illustrate how the stigma of infertility can be disadvantageous to many aspects of a woman's life – from the inability to participate in certain activities to determining where and how she is ultimately buried. It is necessary for a woman to have a child for her self-respect, and her understanding of womanhood. For example, one woman lamented, "If they left me alone, I will not have any problem. They have convinced my husband who had been by my side to join them and now I do not know where he belongs to again. He now gets irritated quite easily. God, I cannot just bear this anymore". (A 25 year old primary infertility patient and a law graduate cried as she narrated her experience).

Other women related their unpleasant experiences likewise.

It has been quite terrible. I wish I was not married rather than go through all these. I can hardly concentrate on my duties these days, my appetite is very poor. The pressure is just too much; I just hope this will be over one day. You cannot believe that some illiterate women could stand up to me during meetings, abuse and derided me just because of my childlessness. (A 30 year old staff of the tertiary institution narrated her story).

Most of the respondents admitted going through emotional and psychological crisis with a feeling of worthlessness especially in the company of their peers. They feel lonely in the midst of friends and relatives. It is all a feeling of abandonment, frustration and depression.

3.4 Solution to Infertility for Childless Couples

In the past, if partners are struggling with conception, they may be interested in trying some procedures to help increase their chances of getting pregnant. A large percentage of couples face difficulties when it comes to getting pregnant, but many have found success with the old method whereby the woman will choose a man from her husband's place to impregnate her with her husband's consent. The woman will have sexual intercourse with a man to enable her get pregnant, if the problem is from her husband. But if the problem is from the woman, the man will marry another wife for them to have children of their own.

Some solutions in this present day are **child adoption** before the latest method which is **Assisted Reproductive Technology** (**ART**). ART involves a number of different procedures to help address infertility problems and increase the likelihood of pregnancy.

ODEZURUIGBO JOURNAL: VOLUME 3, NO. 1, 2019 (ISSN: 2672-4243)

3.4.1 Child Adoption: Child adoption is fast gaining ground in Nigeria among childless couples especially since 1990s. There has been an enormous surge of interest by couples in child adoption due to its acceptability in recent times. To this end, Obasa (1990:94) noted that "Western civilization has led to rapid changes in all spheres of African life in socio-economic, political and technological as well as the marriage institution". This is to the extent that demands for children in child institutions outstrips supply and couples are placed on the waiting list, some for more than two years waiting to adopt a child from Child Institution. In the past this practice was not popular as a result of the customs of the Anambra State, who perceive childlessness as a huge problem with the only option of couples divorcing or entering into a second marriage in order to have children of their own.

Childlessness is a potential cause of marital instability especially in Anambra custom where it is used as a parameter for marital success. This is because a marriage without a child is likely to be stressful for couples due to pressures from family members especially encouraging the husband to take up a second wife where the woman is suspected to be barren. Similarly, Denga (1982:44) posited that "The absent of children in the family especially when it is due to biological cause rather than a choice to remain childless threatens marital adjustment among people". Childless couples engage in behaviours that upset one another and in some cases, this may lead to a break up in their marriage. Therefore, in order to avert this, most couples have realized that one of the values of child adoption is its ability to prevent break-up of marriages especially for those suffering psychological and emotional problems.

3.4.2 Assisted Reproductive Technology: Assisted Reproductive Technology refers to a number of different procedures that can be used to overcome both male and female infertility problems. ART is specifically, defined as any procedure that involves manipulating both the egg and the sperm. This means that any treatment that involves removing, mixing, and replacing the sperm and egg is a form of ART. There are numerous types of ART procedures. A reproductive endocrinologist can help to determine which procedure is best suited for a patient.

4.0 Summary of Findings and Conclusion

In this section, the researcher is going to breakdown the findings of the research and as well make conclusion.

4.1 Findings

Through this study, the Igbo people of Anambra have seen how to handle childlessness or infertility in families. The method to adopt depends on the level of commitment to one's faith or belief. While some people (christians) abandoned their faith and are desperate about child bearing, others believed that it is God who gives children, thereby stick to their faith and look onto God, not minding what they may be passing through. Some childless men attached the childlessness to a wrath from the gods for one's offense. They do not waste time to consult native doctors to find out whatever offence they or their wife had committed. The emotional pains the couples passed through made them to do all things possible, provided that they will have a child.

Childlessness has been a problem to many couples in Anambra State. Even in the past, when people depended on the number of their wives and children for their farm work,

women without children suffered. In those days, people relied on freedom of polygamy, which is marrying as many wives as one has the capacity to take care of. In Anambra State customs, children are used as a parameter for marital success.

The researcher has revealed through the study that in the past, the problem of infertility is only a woman's problem; but nowadays, it has been found that men also suffer the same problem. These findings will be to an extent lessen the trouble and maltreatment being given to women.

It was also revealed that the Anambra State people have ways, which they see as the best solution to the problems of infertility in the past. Such ways are: marrying two or more wives, ghost-marriage and so on. All these tend towards keeping the family lineage going.

The findings also revealed that the Igbo people more especially those in Anambra State attach more importance to child bearing as far as marriage is concerned. To them, procreation is the main objective and reason for marriage.

4.2 Conclusion

The women bear the brunt of infertility and are stigmatized even when the males adamantly refuse medical evaluation. They undergo a lot of mental, emotional, psychological and physical pressures and often time falling prey to charlatans in their arduous quest for fertility. Doctors and gynecologists working in these areas should never lose sight of the emotional and psychological aspects of infertility and its management and utilized the opportunity of such clinical consultations to evaluate the psychological impact of the pathology on the couple and offer appropriate counseling.

There is need for community education on the physiological of involuntary childlessness and appropriate counseling of men in order to integrate them into infertility treatments. Meanwhile, government of Anambra State should realize that infertility management may be more important to the Anambra women than issues of their physical health irrespective of whether such physical illness could precipitate further morbidities or even death. In this way then, the targets of the millennium development goals as regards women's wellbeing will be realized.

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