

Socio-Cultural Factors influencing Expectant Mothers' access and choice of Child Birth Setting/Maternity Services in Ibadan Metropolis, Nigeria

Emeka E. Obioha

Department of Social Anthropology and Sociology,
National University of Lesotho, Roma, Lesotho, Southern Africa
Email:eeobioha@yahoo.com

And

Abiodun C. Fashagba

Department of Sociology,
University of Ibadan, Ibadan, Nigeria

Abstract

In patriarchal societies a woman's right to take decisions on health and reproductive issues without the consent of a male member of the family is hardly a practice. Even with various women rights initiatives, it is still not certain, the extent to which expectant mothers influence the decision on where to have their babies. Against this background, this study investigated the social and cultural factors that influence expectant mothers' decision on the type of maternity to use for child birth. The study utilized secondary data sources and a survey of 150 mothers drawn from three purposively selected traditional, faith based and hospital maternity places in Ibadan. The study indicates the relative importance of husbands' approval, husbands' educational attainment, mothers' educational attainment, income variation, perception of safety of the birth place, pre-knowledge and preference for a particular birth place over other socio-cultural factors in influencing mothers' decision of child birth setting.

Key Words: Mothers, Access, Choice, Maternity Services, Nigeria

Extended Abstract

In most patriarchal societies including Nigeria, a woman's right to take decisions on health and reproductive issues without the consent of a father, husband or son depending on the circumstances is not guaranteed in the customary practice. Even with various women rights initiatives, it is still not certain, the extent to which expectant mothers influence the decision on where to have their babies. Against this background, this study investigated the social and cultural factors that influence expectant mothers' decision on the type of maternity to use for child birth. The study specifically examined the extent of masculine intervention in women's choice of childbirth setting; the influence of mothers' socio-economic status on the choice of childbirth setting; the extent to which proximity to childbirth setting influences mothers' choice of childbirth setting; the influence of the rate

of awareness of the existence and/or the practice(s) of childbirth settings on women's choice of childbirth setting and finally to examine whether the attitude of health workers influence mothers' childbirth setting selection. The study utilized secondary data sources and a survey of 150 mothers drawn from three purposively selected traditional, faith based and hospital maternity places in Ibadan metropolis as the main sources of data for the analysis.

The study revealed that the influence of husbands (or masculine intervention) is very overwhelming and important in reproductive decision making. That is, choice of childbirth setting is a function of the childbirth setting approved of by husbands. A majority of respondents described their husbands' involvement as proper while most of them even added that their husbands deserve the sole right of deciding the childbirth setting to be used because "He is the head of the family, "He is responsible for the financial running of the family" or "to allow peace reign in the house", as being differently put by this group of respondents.

Educational variation also influenced the selection of childbirth setting of the women in our study. There is the confirmation that the selected childbirth settings of women with different levels of educational attainment are different. Majority of the respondents met at the hospital setting had at least secondary education while majority of those met at the out-of-hospital childbirth settings were of low educational statuses of either primary or no educational attainment. The implication of this is that "the higher a woman's level of educational attainment the higher her probability of wanting to have an in-hospital childbirth setting and the lower the probability of her wanting to have an out-of-hospital childbirth setting."

It was also observed that more educated women have more contributory power in reproductive matters within the family. While most uneducated (primary or no formal education) women in our study saw their husbands' involvement in childbirth setting selection as being very important and felt childbirth setting selection right should be solely given to their husbands without contest because they (husbands) are "heads" of the family, on the contrary, all the more women with post-secondary education and majority of those with secondary education in the study favoured a joint selection of childbirth

setting by couples (husbands and wives) and they also claimed to be doing such with their husbands.

Economic position (income level) of the women in our study posed another influence on their choice of childbirth setting. There is an observed association between income level and women's choice of childbirth setting. Basically, women of high-income level were mainly found in the hospital setting while majority of those in the out-of-hospital childbirth settings is of low-income level. Almost all the out-of-hospital respondents described hospital setting as being "very costly" compared to the traditional birth setting.

Moreover, the study also found that how much knowledge or awareness of the existence of the childbirth setting also influenced the selection of childbirth setting. Our respondents therefore, settled for childbirth settings that they have appropriate knowledge of the practices. The implication of this is that awareness of the existence and/or practices of childbirth setting stands not as an ultimate factor but relates with other factors to influence the selection of childbirth setting of our respondents.

All the women in the study saw safety as an important reason for choosing their respective places or centres of childbirth. A majority of saw their chosen or selected childbirth settings as rendering the safest form(s) of service/practice. However, majority of the out-of-hospital respondents' saw the safety rate of hospital settings as either equating the rate of safety of their own selected or chosen childbirth setting or slightly better in few cases.

In sum, following the objectives, husbands' approval, educational variation, income variation, rate of awareness (knowledge) of the existence and practices, of childbirth setting(s) and perception of where maximum safety could be found make up the three major factors influencing the choice of childbirth of our respondents. On the other hand, proximity of childbirth setting from respondents' places of residence and attitude of health workers towards patients/clients, though may contribute to the factors affecting women's choice of childbirth setting, have or contribute no major influence on the choice of child birth setting of the women in ours study. Additionally, it was discovered that women with higher educational level or attainment have better contributory chances in reproductive decision making in Ibadan.