

THE ROLE OF FERTILITY BEHAVIOUR IN POVERTY REDUCTION IN NIGERIA: EVIDENCE FROM 2013 DEMOGRAPHIC AND HEALTH SURVEY

ONIPEDE WUSU, PhD* & EMMANUEL O. AMOO, PhD***

*DEPARTMENT OF SOCIOLOGY, LAGOS STATE UNIVERSITY, PMB 0001, LASU POST OFFICE; +234 8025750341; <u>onipedewusu@yahoo.com</u> **DEMOGRAPHY AND SOCIAL STATISTICS PROGRAMME, COVENANT UNIVERSITY/

A PAPER PRESENTED AT THE 55TH ANNUAL CONFERENCE OF THE NIGERIAN ECONOMIC SOCIETY (NES), SHERATON, ABUJA,10-13 NOVEMBER



PRESENTATION OUTLINE

- Introduction
- Research Questions
- Study Hypothesis
- Methodology
- Results
- Concluding Remarks
- Policy Implications



INTRODUCTION



 There is consensus over the possibility of improved socioeconomic conditions leading to fertility decline (<u>Merrick</u> 2002;Sinding 2009).



 However, the likelihood of fertility decline leading to a significant improvement in socio-economic conditions remains a subject of intense debate (<u>Merrick 2002</u>; <u>Sinding 2009</u>)





 We know little about the nature of the association between fertility behaviour and poverty in Nigeria.



- Total fertility rate declined marginally from 6.0 in 1990 to 5.5 in 2013 (NPC& Measure DHS ICF, 2014), Population still over 174 million.
- The national is said to be growing at about 5% or 6%
- Yet poverty level in Nigeria has become a major embarrassment. Over 65% of Nigerians were classified poor by the National Bureau of Statistics (NBS, 2011).





Could traditional fertility behaviour be one of the significant factors obliterating the impact of the growth rate of the economy on the living conditions of ordinary Nigerians thereby slowing the rate of poverty reduction?



RESEARCH QUESTIONS

• What is the association between indicators of fertility behaviour and poverty reduction in Nigeria?

• What role can change in fertility behaviour play in poverty reduction amongst Nigerians?



• The postulation examined is that the nature of fertility behaviour significantly influences poverty reduction in Nigeria.



• The study analysed the 2013 Nigeria Demographic and Health Survey data.

- The analysis utilised the male and female recode files:
 - Males= 17,359; Females38,948
 - between ages 15 and 49 years.



METHODOLOGY (Contd.)

• The dependent variable in the analysis is the wealth index, used as the indicator of poverty reduction.

• It has five categories (poorest, poorer, middle, richer and richest). We reclassified the first three categories into 'poor', coded '0' and the last two into 'rich', coded '1'.



METHODOLOGY (Contd.)

• Independent variables: age at first marriage, age at first childbirth, number of living children, marital status and use of modern contraceptives.

• Confounding variables : age, education, employment, geopolitical regions, religious affiliation, age at first sex and place of residence.



METHODOLOGY (Contd.)

* Data Analysis Involved:

• Univariate

• Bivariate: Chi-square Technique

• Multivariate: Logistic Regression Technique



RESULTS

^o <u>Univariate Analysis</u>

- The highest proportion of the respondents were in the 15-19 age group (Females= 20.3% and Males = 21.4%).
- Majority of the respondents were from rural areas (Females= 60.1% and Males = 58.8%).
- Secondary education was the most popular among females (37.0%) and males (48.3%).
- Majority belonged to the poor wealth status (females = 56.8% and males = 53.1%).



RESULTS (Contd.)

Bivariate Analysis

- Women and men not using modern contraceptives and currently married indicated highest proportion poor (p<0.001).
- The proportion poor declined with increasing age at first marriage among both males and females (p<0.001).
- The higher the age at first childbirth the higher the proportion in the rich category (p < 0.001).
- the highest proportion poor were males and females who reported having at least five living children (p < 0.001).



RESULTS (Contd.)

Multivariate Analysis (Females)

- Currently married women (OR = 1.145, p < 0.05; 1.382, p<0.001), (Ref. = Never married).
- Women using modern contraceptives (OR= 3.833, p<0.001; 1.519, p<0.001), (Ref. = Not using).
- Age at first childbirth (OR=1.014, p<0.001; 1.018, p<0.05).





RESULTS (Contd.)

Multivariate Analysis (Males)

- Use of modern contraceptives (OR = 4.294; 1.875, p<0.001), (Ref.=Not using)
- Age at first marriage (OR = 1.115; 1.050, p < 0.001).

• The number of living children OR = 0.946; 0.898, p < 0.001).



CONCLUDING REMARKS

- Modern contraceptive use, age at marriage and first childbirth exhibited significant and positive association with poverty reduction indicator among both women and men in the data.
- The number of living children exhibited a negative relationship with poverty reduction.
- The analysis suggests that traditional fertility behaviour is playing a critical role in the incredible poverty level vis-à-vis the reported appreciable economic growth in the country.

LAGOS STATE UNIVERSITY

CONCLUDING REMARKS (Contd.)

• Apparently, the rapid rate of population growth (2.5%) as a result of the high fertility rate in the country, that fertility rate as high as 5.5, is one of the critical factors that is likely obliterating the positive effect of the reported economic growth in Nigeria in the last few years (<u>National Population</u> <u>Commission and ICF 2014</u>; <u>Population Reference Bureau 2014</u>).



CONCLUDING REMARKS (Contd.)

• The implication is that if more women and men would adopt modern fertility behaviour, the probability is high that the country could experience a rapid rate of poverty reduction.

• Thus, overall, the findings support the study hypothesis that fertility behaviour is significantly associated with poverty reduction in Nigeria.



POLICY IMPLICATIONS

• Therefore, social policy targeting poverty reduction in Nigeria must incorporate effective reductionate population policy.

• Direct and indirect involuntary population policy will be more appropriate rather the present laissez-faire approach.

THANK YOU

LAGOS STATE UNIVERSITY

FOR LISTENING