Title: Definitions and the Experience of Fertility Problems: Infertile and Sub-fertile Women, Childless Mothers, and Honorary Mothers in Two Southern Nigerian Communities

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Definitions and the Experience of Fertility Problems: Infertile and Sub-fertile Women, Childless Mothers, and Honorary Mothers in Two Southern Nigerian Communities

Although infertility causes women considerable grief, social stigma, and economic deprivation, scholars have paid little attention to infertility’s definitions that may depart from the standard Western usage and how such definitions influence the way women experience the condition. This article, by listening to individual women’s experiences of infertility in two Nigerian communities, examines these definitions and differentiates between culturally salient categories of infertility. In distinguishing between different kinds of childless women and those with low fertility, we intend to enhance understandings of infertility by considering women’s subjective understandings of the condition and thus moving beyond the current medical definition. By comparing women’s experiences in two different ethnic groups in Nigeria, we show how distinct forms of kinship structures and social organizations shape the ways low fertility is defined, managed, and experienced. [infertility, Nigeria, Africa, motherhood]

Nnu Ego and her new husband Amatokwu were very happy; yet Nnu Ego was surprised that, as the months passed, she was failing everybody. There was no child.

—Buchi Emecheta (1979)

“You are being senseless,” burst out Obiora. “How many months were we feeding you? You barren and senseless woman! You forget that you are childless. You would not raise your voice in this house if you were sensible.”

—Flora Nwapa (1981)

Introduction

Social science scholarship increasingly recognizes infertility as a devastating problem for women in many parts of the world (Inhorn and Van Balen 2002), particularly in the high-fertility context of sub-Saharan Africa (e.g., Boerma and Mgalla 2001; Feldman-Savelsberg 1999; Hollos and Larsen 2008). Regardless of its medical causes, infertility causes women in African societies personal grief and frustration, social stigma, and often serious economic deprivation. Scholars and writers, however, have paid little attention to
infertility’s definitions that may depart from the standard Western usage and how such definitions influence the way women experience the condition. The above quotes from two eminent Igbo women novelists, for example, illustrate the significance and consequences of failing to produce a child. It is difficult, however, to discern divergences between biomedical definitions and local meaning of terms like “barren,” “infertile,” and “failing everybody” by not having a child in Igbo culture.

In previous articles (Hollos et al. 2009; Hollos and Whitehouse 2008) we have documented a number of prominent differences between two Nigerian communities in their responses to infertile women but did not focus on local definitions of infertile conditions. In the current article, by listening to individual women’s experiences of infertility, we examine these definitions and differentiate between culturally salient categories of infertility. In distinguishing between different kinds of childless women and those with low fertility, we intend to enhance understandings of infertility by considering women’s subjective understandings of the condition and thus moving beyond the current medical definition. By comparing women’s experiences in two different ethnic groups in Nigeria, we show how distinct forms of kinship structures and social organizations shape the ways low fertility is defined, managed, and experienced.

The communities studied are Amakiri (pseudonym), an Ijo community in Delta State, and Lopon (pseudonym), a Yakurr community in Cross River State. In both, the paramount principle that organizes social life is kinship. A major difference between these localities is that descent in Amakiri is patrilineal, traced through the father’s side, whereas in Lopon it is double unilineal, traced through both parents’ sides. Patrilineal descent in Amakiri breaks up the local clan (IBE) into distinct groups or lineages, each of which traces descent from a common ancestor. These lineages serve as the basis for individual and group identity. In Lopon, descent is double unilineal, meaning that individuals trace descent through both the mother’s and the father’s side. Ties to more than one descent group define individual identity, and people emphasize the maternal or paternal side according to circumstances. While these principles of descent allow some flexibility and are by no means the only factors governing social life in our communities of study, they nonetheless set the scene for everyday relations, practices, and values, including ideas about children.

**Background**

**Research on Infertility in sub-Saharan Africa**

Our research builds on demographic and anthropological research showing how social and economic contexts influence local meanings of fertility and infertility. Much of this literature is situated in the broader anthropological discourse on reproduction (e.g., Ginsburg and Rapp 1995). There is ample documentation that women primarily bear the social consequences of infertility, especially in sub-Saharan Africa (Inhorn and van Balen 2002). As Inhorn (1994, 1996) has shown for Egypt, women receive the major blame for reproductive mishaps. Feldman-Savelsberg (1999) reports that among the Bangangte in Cameroon, infertility is grounds for divorce, depriving a woman of access to her husband’s land. Infertile women are treated as outcasts, and their bodies are buried on the outskirts of the town among the Ekiti Yoruba of Nigeria (Ademola 1982) and among the
Aowin of Ghana (Ebin 1982). Cornwall (2001:145) refers to a survey in Nigeria where respondents generally agreed that “a woman who has not given birth to a child may as well never have been born.”

In the Sudan (Boddy 1989), children are a source of power for women in relation to men, and infertility threatens their power and the social order. More recently, Johnson-Hanks (2006:81) has shown that even highly educated Beti women in Cameroon so conflate honor and respectability with fertility that women who have not borne a child by age 20 are routinely brought to ritual specialists for infertility treatments, regardless of whether they have been intentionally managing their fertility to avoid pregnancy (Johnson-Hanks 2006:249).

Similarly, fertility has been shown to be important in the progression of women through life stages and thus in the creation of their identity as mature persons. A childless woman among the Tswana in Botswana (Suggs 1987), for example, cannot attain full adult womanhood, similar to our findings for Ijo women (Hollos et al. 2009). For a woman in the Upper Zambezi, “childlessness is a tragedy that she cannot escape biologically nor socially because it threatens the continuity of her lineage” (Silva 2009:180).

Social mechanisms can alleviate some of these problems and help women deal with infertility. These include voluntary associations and cults that support women with infertility problems. Infertile women also respond to their conditions in locally specific (healers, fostering, and adoption) and in biomedical arenas and through their kinship networks (Gerrits 1997; Green 1994; Kielman 1998; Sundby and Jacobus 2001). Because women suffer the greatest consequences of infertility, they actively use resources at their disposal and devise strategies not only to challenge but also to alter oppressive systems (Bledsoe 1990; Bledsoe et al. 1994; Greenhalgh 1995:31; Kielman 1998; Upton 1999).

Problematizing Infertility

In Western biomedicine, the clinical definition of infertility is the absence of conception after 12 months of regular unprotected intercourse (Collins et al. 1983). The World Health Organization recommends 24 months of unprotected intercourse as the preferred definition of the condition (Larsen 2005; Rowe et al. 1993). A distinction is made between primary and secondary infertility. The former denotes the infertility of women who have never conceived and the latter that of infertile women who have conceived at least once; women with a single miscarriage or spontaneous abortion are considered to have secondary infertility.

As Inhorn points out, “although such standard definitions may have utility in Western settings, they can be shown to be an arbitrary cultural construction with limited utility for the rest of the world” (2002:12). While they facilitate the comparison of cross-national or regional rates across time, they presume that “fertility problems in Botswana are the same as those in Nigeria, Venezuela, and Bangladesh and that problems documented in the 1960s are the same as those documented in the 1990s” (Leonard 2002:199). In reality, however, these purportedly universal definitions of infertility may have little relevance for individuals experiencing infertility in non-Western settings. Leonard (2002), for example, describes Chadian women’s perceptions of fertility problems as including difficulty in proving one’s fertility shortly after marriage, loss of
reproductive potential (through miscarriage, stillbirth, abortion, etc.), and bearing “too few children.” All three of these diverge from the WHO definition of primary or secondary infertility and indicate the need to define reproductive problems in the local context.

Clearly, the diverging definitions of biomedicine and local social constructs are useful in different contexts. Medical definitions are useful for doctors and nurses to evaluate treatment and causes. They also help demographers make population projections and comparisons. Understanding particular contexts of infertility, however, depends on understanding local social constructs.

In our work in Nigeria, we began with the medical definition of infertility and supposed a major difference between primary and secondary infertility, presuming that the latter would present much less of a problem for women in both communities. We soon became aware that these definitions are not completely applicable in our contexts and have consequently decided to follow more locally appropriate conceptualizations of childlessness and subfertility. These concepts emerged from our discussions with women both with and without children.

Research Settings and Methodology

Settings

We conducted the research in two communities in southern Nigeria, in Amakiri, an Ijo community, and in Lopon, a Yakurr community.

Amakiri. Amakiri is located on the western bank of the Forcados branch of the Niger River. Based on a 2005 household survey, it has a population of approximately 7,000. Its seven quarters are patrilineal descent groups comprising segments of the clan to which all Amakiri Ijo, as well as Ijo from surrounding villages, belong (Hollos and Leis 1989).

Descent among the Amakiri Ijo is patrilineal, with lineage exogamy. Women who marry into a patrilineage are perceived as bearers of sons who will be founders of a lineage. To compensate these women’s elders for the loss of the women’s labor and childbearing capacities, a bridewealth is paid, which assures that any children they bear will belong to the Amakiri lineage. Women, thus, are important in the lineage structure only as mothers. By this act, the men whose children they bear become ancestors and take their place in the lineage’s genealogy. Behaviors including residence, inheritance, and participation in family councils are based on the patrilineage.

Amakiri’s economic base is horticulture, with a number of secondary occupations. In the western Delta, there is no oil, thus oil wealth is absent from the community. The two primary economic activities, farming and fishing, as well as trading, are done almost exclusively by women. Men hold most secondary and tertiary occupations. Because of men’s low cash intake for daily needs, the household depends largely on women’s activities.

Lopon. Lopon is a local government headquarters with a population of about 120,000. The town is composed of five semi-autonomous divisions, which are the
residential territories of patrilineal groups. Political organization within these areas follows patrilineal principles but, within the town as a whole, political authority resides with priests of fertility spirits representing 23 independent matrilineal clans. This theocratic council is headed by a paramount chief with jurisdiction over the entire town (Forde 1964; Obono 2001).

Like other Yakurr, residents of Lopon are a double unilineal people: They reckon descent through the matrilineal line for some purposes (e.g., ritual observance, marriage payments, and inheritance) and patrilineally for others (e.g., allocating land, houses, and cooperative labor). Full siblings normally belong to the same patrilineage and matrilineage. However, because of the rules of exogamy, fathers belong to the same patrilineage but different matrilineage as their children, while mothers and their children belong to the same matrilineage but different patrilineages. Thus, both lineages have an interest in women’s childbearing but neither consider it their exclusive right.

Although agriculture remains the main economic activity of its inhabitants and access to land is still determined by rules of kinship, Lopon has emerged as an important site in north–south distribution networks for perishable cash crops. Women perform most agricultural tasks as well as much of the town’s trading.

Methods

In addition to extensive ethnographic and demographic research in both communities, between 2005 and 2007 we used a combination of qualitative and quantitative methods focused specifically on the issue of infertility. After enumerating households in both communities, we surveyed 246 women in all categories of infertility (for the definition of categories, please see below) in Amakiri and 280 in Lopon. Our sampling methods may not have enabled us to reach all women in these conditions, but we are confident that we came close to it.

In-depth interviews with a subsample of approximately 25 infertile (in all categories of infertility) and 25 fertile women were conducted in each community in the summers of 2005 and 2006. The current article is based on the analysis of these life-history interviews, which enabled women to discuss intimate problems and allowed us to retrieve information they possessed but may not have been able to articulate explicitly. The narration of these stories is meant to provide the reader a sense of what it means to be a member of a particular culture, a view of both the structural and the psychological processes that the life stories mirror. We considered this approach particularly appropriate for understanding infertility’s impact on individual lives and women’s attempts to cope since it lets them give their own analytic accounts of their experiences. The interviews were conducted by Hollos in Amakiri and Whitehouse in Lopon, with the help of a research assistant. Interviews were conducted in English with the younger women and in Ijo and Yakurr with the older ones and translated by the research assistants.

Interview texts were thematically coded following a bottom-up approach (Strauss and Corbin 1990). During this phase of analysis, respondents’ answers were regrouped across individuals in categories, reflecting issues related to infertility. A number of particularly salient areas emerged in these women’s lives, including attainment of womanhood, marriage, divorce, employment, and migration, help with work, fostering,
and old-age support. The interviews also allowed us to understand the categories of infertility used by the residents of these two communities and their impact on the above areas in a woman’s life course.

Below, we present the salient areas of a woman’s life as they emerged from interviews and discuss the effects of various categories of infertility or inadequate fertility in both communities, chronologically from young womanhood to old age. This study was approved by Brown University’s Institutional Review Board and by the Ethics Committee of the University of Ibadan, Nigeria.

**Findings**

*Amakiri Women’s Experiences*

*Attaining Womanhood.* The Ijo recognize a number of named stages in the life cycle. Individuals advance from one stage to another through a combination of physiological and mental development and certain additional criteria, depending on the particular stage. Young women enter the stage of *ereso* around the age of 13, usually marked by the onset of their menses. Their progression to the next stage of *erera* depends on being married and having given birth to a child. Before her first child is born, a mother usually undergoes a clitoridectomy in the seventh month of pregnancy. Women circumcised each year used to perform a special dance, known as the *seigbein*, during the town’s annual spring festival, which marked their entry into the *erera* stage.

Although most women no longer participate in this dance, circumcision is still considered important. Women who have not given birth and are consequently uncircumcised cannot attend women’s association meetings, reserved for *erera*, and until recently could not even be buried in town land. This severely disadvantages childless women who thus remain in limbo between the two stages. They are eventually too old to be *ereso* but cannot be considered *erera*, given that they did not fulfill the major criterion of mature womanhood—giving birth to a child. In recent years, more and more girls have had their circumcision done prior to becoming pregnant, which solves the problem of their burial but not of their progression to the next stage.

In the accounts of older childless women, concern over their circumcision figures prominently. Ibadan (85) was first married at 15. After three years without becoming pregnant, she decided to undergo circumcision, thinking “this would help me get a child.” She even did her *seigbein*, but “it did not help. I never became pregnant and so I was still not able to join the *erera* in their meetings.”

While circumcision and the *seigbein* were not major concerns for younger women, inability to progress in the life stages, and particularly to participate in the women’s association meetings, was a great concern. For example, Tubolayefa at 31 is beginning to feel she is too old to remain in the *ereso* stage. She has been married for over 10 years but refused to be circumcised or perform the *seigbein*, saying “these things have no interest for me.” What is of interest to her, however, is being considered a grown-up woman who can take her place along the others in the rotating credit association, in cooking and dancing at funerals, and, in general, being part of adult women’s activities, none of which are possible without having given birth.
This is an area where women with one or two children, even if they are considered subfertile, have advantages over childless women. Even one child gives them entry into the era stage, regardless of whether that child survives into adulthood. Similarly, women called “childless mothers,” who gave birth at least once but whose child died, have the same advantage, as demonstrated by Edith (75), mother of twins who both died soon after birth. Since then she has been suffering as a childless woman in most respects (no help around the house, deprivation in old age), but her entry into the era stage was assured.

Marital Relations and Divorce. The vast majority of interview subjects were married according to Ijo custom, a long, elaborate process consisting of a number of cash payments and libations by the groom’s family to the bride’s. At one point, the bride moved into the groom’s compound and started serving as an apprentice cook to his mother, preparing to take over once she had a child and became a mature woman. As time passed and no pregnancy followed, relations with the husband and his relatives soured. The consequence of difficult marital relations is often divorce or permanent separation. The relationship histories of childless or subfertile women and of childless mothers alike consist of frequent separations and remarriages; a wife often leaves after facing her husband’s mistreatment, his family’s ostracism, and co-wives’ taunts, or because the husband sends her away as “useless.” This pattern holds equally true for childless women, childless mothers, and subfertile women, especially those with only daughters.

As an example of a childless woman’s marital history, Nancy (65) was married to a trader in Lagos and, realizing her marriage was in jeopardy since she couldn’t get pregnant, she “married” two other women for her husband. She paid the bridewealth herself, which was not a great amount but it made her legally the “owner” of the 10 children these women eventually bore with the husband. However, when the husband moved back to his hometown with the wives and children, he did not want Nancy to go with them, so she had no choice but to return to Amakiri at age 50. The bridewealth she paid was never refunded. Thus, the patrilineal ideology of the Ijo undermined a mechanism through which childless women in other African societies obtain their “own” children (Amadiume 1987).

Childless mothers did not fare any better, and after the death of their children were treated like the other childless women by their husbands. After the death of her twins, Edith moved back to her father’s compound where she still lives.

Of the subfertile women, Court (80) was married to her husband for several years without having a child. The husband eventually brought in other wives, none of whom became pregnant either. When he died, Court was inherited by his younger brother. When she didn’t get pregnant by this husband either, the family started ostracizing her, even though none of his other wives had children by him. She finally resorted to having sex with another brother of her late husband and delivered a daughter. This briefly made life more bearable, but when no second child (or son) followed, the ostracism resumed and she returned to her parents’ home, leaving her daughter behind. After this “nobody came for me, they knew about my condition. But I didn’t mind, I was already disappointed in two men.”
Migration. Being in limbo in Ijo society, childless women inevitably leave the community, most frequently to become petty traders in large urban centers, later returning to Amakiri in their old age. Trading is done primarily to accumulate funds to afford costly infertility treatments. Emigration is practiced to a lesser extent by subfertile women, who often leave the community although with a different goal in mind. Because of this tendency to migrate, most younger, childless and subfertile women are absent from the community and it is from the stories of the older women who have returned that these life paths are revealed. We lack data to quantify outmigration either by infertile women or others, but it is fairly certain that fertile married women migrate out of the community only rarely and usually with their husbands.

Monica (54) was a petty trader most of her life, living with her husband in various towns. After her marriage failed due to her inability to have children and she found her situation in Amakiri unbearable, she returned to the north of Nigeria to trade independently and to try various treatments. After two years of saving money, she opened a small restaurant in Abuja. She did well for a while but as she got older, she found the hours difficult and returned to Amakiri.

Another reason for leaving the community is for further education. We found this was a major reason for subfertile women to migrate. Several of the younger childless as well as the subfertile women attended Teachers’ College in nearby Bomadi after they were married, since as Rosalind said, “there was nothing better to do without a child, so I thought that I may as well do something useful.”

Economic Activities. Most women in Amakiri are traders and farmers with only a few years of primary school education. Some, however, have gone as far as secondary school or teacher’s training and a few even have university degrees. We found that childless and subfertile women are more likely to be in this group, although many no longer reside in the community.

Josephine (48) is one of those who stayed in Amakiri, mostly because she has been able to get a job there. She was married for several years before conceiving her first child. In the meanwhile, she attended secondary school. She eventually gave birth to two daughters but had difficulty conceiving more children. Because she felt that this enabled her to continue her education, she registered at the Teacher’s College an hour’s distance from Amakiri. She left the children with her husband who cared for them with the help of a housegirl. “This would not have been possible if I had more children,” she said. After receiving her degree, she was hired by the local elementary school and returned to Amakiri.

Although all agricultural land in Amakiri is owned by patrilineages, as daughters of these lineages, women can acquire private houses and movable property through their own economic activities. Most women aspire to this and try to accumulate wealth to pass on to their own children or to have security in old age. Very few succeed, however. Those who do are more likely to be either childless or subfertile, and the property they accumulate is the result of trading activities. Their properties then revert back to the patrilineage upon their death.

A prime example of this is Apalaere (60), who, after her marriage failed, moved to Lagos and started out as a petty trader, selling provisions, toilet paper, kerosene, and soft drinks, all in order to be able to afford infertility treatments. After a few years of
failing to get pregnant, she switched to selling cloth, which eventually took her as far as London, Liverpool, and Germany. Finally, she ended up importing used cars from Germany. Thus, she became a wealthy trader, buying several buildings and constructing a new two-story building in Amakiri.

One activity related to economic well-being is attendance at family meetings. Issues addressed include land disputes with neighbors, allocation of common family land, and the burial of kin. Childless mothers are eligible to attend, but women without children rarely do so and claim that they are not regarded as equal members. This disadvantages them vis-à-vis other family members regarding the division of common resources, such as building plots and agricultural land. Subfertile women, however, are more likely to attend, especially if they have at least one son.

Workload and Foster Children. Nigerian households require many hands to function. It is virtually impossible for one person to fetch water and firewood, cook meals, wash clothes and keep house, thus children are usually recruited for all menial tasks. Even in a polygynous compound or in their father’s home, childless women, and, to a lesser extent subfertile women, have a serious disadvantage in performing these daily tasks. Their recourse is to foster in relatives’ children, whom they agree to raise and school in return for help with daily chores. This arrangement would appear to be advantageous for all parties concerned: The childless woman receives not only help but the love and loyalty of a younger person, and the children receive the care and attention of a devoted adult. In the long run, however, the relationship rarely turns out to be what the woman hoped for and it certainly does not alleviate the yearning for a child.

Most Amakiri women fostered children from their own patrilineage, either their brothers’ or their father’s children, emphasizing the strength of patrilineal descent among the Ijo.

Apalaere first raised two of her brother’s children and then two from her father’s brother. All stayed with her in Lagos while she was trading. “This was however not like having children of my own,” she said. Although she carried them on her back as infants and schooled them, they have all abandoned her now that they are grown. Similarly, Agnes has been raising a niece and two nephews since she moved back to Amakiri. These children do their chores and help her around the house. “But it isn’t the same as your own children. You can never satisfy other people’s children whom you have not borne. They read something into every statement you make, they don’t love you,” she said.

Permanent adoption (as opposed to fostering) from outside the patrilineage in Amakiri is not an option for acquiring a child. The strictly patrilineal ideology of the Ijo is strongly opposed to this, given that these children come from unknown ancestors and are not “of the blood.”

Old Age. The major concern of childless women, unless they have managed to accumulate property through their trading activities, is where to live and how to survive in their old age. As most of these women are divorced, they have no rights to live in their husbands’ homes. They do have residence rights in their fathers’ compounds as daughters of the family and this is where they usually end up. By the time they return to Amakiri, however, their fathers are frequently deceased and the women are at the mercy of their brothers and their wives. Very often they live in marginal conditions, in back rooms or
fallen-down buildings, uncared for or even maltreated. As we saw, their foster children usually abandon them, and several are dependent on the good will of strangers for food and sustenance. Subfertile women fare little better unless they have a son. Their daughters are married patrilocally elsewhere and have no rights to bring their mothers to live with them.

A prime example of old-age misery is Ibadan, who lives in one room of a large compound inherited and owned by her nephew Newman. Until Newman retired from the military, Ibadan collected the rent from a number of other tenants in the building and ran a small trading stand in front of it. Once Newman returned, he claimed the rent money and took Ibadan’s stand as his own, saying that by right it belonged to the owner of the compound. This left Ibadan destitute and dependent on food handouts for survival.

Since among the Ijo, as in the Upper Zambezi the “social worth of life is retrospectively appraised at one’s funeral” (Silva 2009:189), and having several generations of descendants present is the ultimate achievement in a person’s life, funerals of childless women are sad affairs. The funeral of a woman (or man) with children lasts for several days and nights, with children and grandchildren dancing around the corpse, which sits embalmed in a hut constructed for this purpose. The descendants shave their heads and once the corpse is buried, stand around and ritually vocalize.

These elaborate rituals are not performed for women who have no descendants. Miefa (65), a childless woman, came home to Amakiri following the death of her husband after living in Lagos for many years. She moved into a back room of her brother’s compound and died of rheumatic arthritis after a short period. Her brother felt that there was no need for an elaborate wake or embalming, so he conducted her wake the same day and buried her the next. The brother’s children were present, but there was no dancing or ritual vocalizing since Miefa, as a childless woman, could not become a revered ancestor.

Lopon Women’s Experiences

Attaining Womanhood. While the Yakurr do not recognize named life stages, an important transition point prerequisite here for becoming a mature woman. Traditionally, a bride relocated to the groom’s household only on becoming pregnant, and the marriage ceremony was performed during pregnancy. Pregnancy was followed by circumcision (kukpol), after which the woman’s transition from childhood to adulthood was celebrated.

Particular rituals exist, however, to help infertile women achieve full adult status. Instead of kukpol, a special form of circumcision known as kekpolpam was performed for women who did not become pregnant and included additional prayers and sacrifices to chase away their infecundity. Today, circumcision is performed rarely, but this custom suggests a more supportive social environment for childless women in Lopon than in Amakiri. An unmarried woman today can become sanen if she is considered old enough, and none of our childless interview subjects in Lopon complained about an inability to partake in adult women’s activities.

What does cause discomfort and pain for these women, especially the childless, is the annual celebration of the town’s first fruit or harvest festival, leboku, in August. The festival embodies the town’s fundamental fertility ethos. This presents a difficult experience for infertile women: In Veronica’s words, “the month of August is one of
apprehension, anxiety, dread and denial for childless women.” However, a community mechanism that helps alleviate this pain is the kekonakona society, a support group for barren women that facilitates these women’s participation in community life. Members of this group dance at leboku and are blessed by the town’s paramount chief. While membership in the society is reserved for descendants of particular matrilineal groups and the society today has all but died out, its existence symbolizes the fact that childlessness is publicly acknowledged as a condition requiring support.

Subfertile women have no problems becoming sanen since, as in Amakiri, only one child is required to progress to the stage of mature womanhood. We did not encounter the category of childless mothers in this community because having had a child was not a necessary step to mature womanhood as in Amakiri.

Marital Relations and Divorce

When it is discovered that a woman is unable to bear a child, her marriage often becomes strained. Most of these marital relations, however, are not as fraught as in Amakiri. Many women reported that their husbands loved them in spite of their barrenness and even married them despite knowing of their fertility problems. For example, Veronica (49) said that her husband “married me, even when my inability to conceive became common knowledge in Lopon society.” Others said that their husbands did not mistreat them after discovering their infertility. Grace (53) said her husband “was by my side throughout,” while Adai (60) stated “my husband never treated me badly. Quite the contrary, he even preferred me to his other wife (who had children) and so the other woman eventually left.”

Polygamy is the most frequent result of the wife’s inability to have (enough) children, but also seems far more frequent in Lopon’s general population than in Amakiri. Ideally, co-wives get along with each other and help raise each other’s children. Childless women are allowed (and asked) to participate fully in this. Joyce (45) and Veronica (49), for example, were co-wives for several years and, according to Joyce, “our relationship had been so warm and trusting that Veronica had been the one who brought me from my home to join our husband during the marriage ceremonies and helped the husband with the money for the bridewealth.” Not all co-wife relationships are harmonious. Susan’s co-wife, for example, accused her of causing the death of her first child. Their husband Payo, however, took Susan’s side since “he knows that I am not the kind of person who would cause harm.”

Many childless or subfertile women’s marriages do end in divorce. Subfertility in this double unilineal group is unrelated to the inability to bear sons since daughters are just as much desired, if not by the husband, then by the wife’s matrilineage. The divorce can be initiated by either the wife or the husband, but are rarely acrimonious according to our interview subjects. Serena (35) left her husband when she could only conceive one child, a son, although when she left she had to leave her son behind. She moved to her mother’s compound and was looking for a man who may give her daughters who, she thought, would more likely to take care of her in her old age.

With very few exceptions, these women remarry and try to make a success of their new marriages. Moreover, they do not blame infertility as the sole cause of divorce. Susan, for example, left her first husband after 12 years of marriage because he did not
encourage and support her “progress in life,” the opening of a small restaurant. She soon remarried but her first husband’s children by a different woman still visit her regularly and help her with chores.

Women who do not remarry or are between marriages in this community have a choice of residence, given the double unilineal descent system that affiliates individuals with their mother’s as well as with their father’s side. They can return to their father’s compounds or move in with their mothers or other matrilineal relatives. Ada (48), who was married three times and finally gave up on men, stays with her mother in her late father’s younger brother’s house. Grace (53) moved in with her only child (a daughter) after divorcing her second husband. This daughter is married with three children, and Grace happily helps care for her grandchildren.

Migration

Owing to the relatively lower stigma and of a wider array of possible living arrangements, including remarriage and staying with either patrilineal or matrilineal relatives, childless and subfertile women in Lopon tend not to leave the community with the same frequency as their counterparts in Amakiri. Whereas the life histories of the childless Amakiri women often recount their moving from smaller towns to increasingly larger ones, Lopon women are less likely to leave their hometown in the event of childlessness and divorce. Women do go elsewhere for schooling or to accompany their husbands, but none of our interviewees described having left Lopon on their own, whether for trade, medical treatment, or any other reason. Consequently, there are almost no 30- to 50-year-old childless or subfertile women in Amakiri, but that category of women manage to lead satisfactory, if not happy, lives in Lopon.

Economic Activities. Perhaps owing to the lack of emigration (leaving home to trade being Nigerian women’s main strategy for wealth accumulation), none of the childless or subfertile women we interviewed in Lopon owned her own house or other buildings. Like their Amakiri counterparts, however, Lopon women with few or no children appear especially likely to further their educations. For example Mary (50), who was unable to conceive again after giving birth to a son, subsequently paid for her own studies, earned a university degree and teaching certificate, and eventually became a primary school headmistress. “If I had more children I would not have been able to go to school this long,” she stated.

Foster Children and Adoption. With the exception of two of our interview subjects who fostered their (ex-) husbands’ children, all childless Lopon women fostered their sisters’ children, showing a strong matrilineal connection in this community. Obandi (36), a childless woman, took in two children from her junior sister after her divorce. She is now breastfeeding the youngest of these who was left as a baby. “I will not tell her that I did not give birth to her,” she said.

Although fostering is a common practice, as in Amakiri it also has its downside. As Ada (48) said:
At my stage it is difficult to live alone. Someone must help with the dishes and run errands for me. But just when you are getting used to the child, the parent comes along and says they want their child back, and that is how life has been treating me.

The solution that Lopon women found to this problem is adoption. While none of our Amakiri women even entertained the idea of adoption because of the difficulty of bringing a strange child into the patrilineage, this alternative seems to be accepted by the double unilineal Yakurr, who may either adopt from neighboring villages or from the orphanage at Calabar, 100 kilometers away. Margaret (55) said that “my husband went to Calabar to adopt a child for me. He was eight months old. Now he is 12 years old. This was like having my own child. I was breastfeeding him. He carries the name of my husband.” A woman in this situation is considered an honorary mother, given that she has raised a child since birth, gave her sustenance, and behaved in every way as the child’s mother.

Old Age. Where to live in old age is also a concern for Lopon women. Without a child to house and care for them, these women feel vulnerable since their husbands could ask them to leave at any time and they have no right to remain in their husbands’ compounds once the husbands die. Most move to their father’s home. The major difference between Lopon and Amakiri, however, is that in Lopon, a childless or subfertile woman with no sons can also join her mother’s compound and receive help from maternal relatives. A number of our informants expressed a preference for doing so, even while living in their paternal compounds, saying that they were closer to those on the mother’s side.

Others who are well cared for in the father’s compound say that their maternal family visits and helps them, while younger childless women also help their mothers. Mary (50), who lives in her own house, said she cared for her mother before she died and was “much closer to my mother’s family than to my father’s.”

The result of these alternative avenues for care and support in old age is that none of our interview subjects in Lopon expressed the same desperation and fear of old age as did our Amakiri subjects. Yet subfertile women did enjoy advantages over childless women in this respect. Even a woman with only one child or an adopted child typically expressed complete confidence in her future ability to depend on that child for support in old age. This was a type of security that childless women, even those who fostered in many children, could not anticipate.

The funerals of childless women in Lopon did not differ from those of mothers with many children. This was most likely due to the fact that both their patri- and matrilineages were engaged in organizing the ritual. Especially for very old women, their many positive qualities were recounted at their funeral by younger family members, deemphasizing her lack of status as an ancestress. One cause for this might also be that these childless older women, unlike those in Amakiri, did not migrate out but spent their entire life in the community and were therefore much better known to their younger relatives.
Discussion

Both communities can be characterized as pronatalist: Individuals desire children to be able to control dependents on which their” status and security depend greatly” (Goody 1971; Guyer 1993, 1995). In one Igbo community, Smith (2004) calls this the “importance of having people,” meaning that it is the extended kin networks that function to “allow individuals and kin groups to gain access to the resources of the state and the wider economy through social networks that have their roots in the family, the lineage and the local community” (2004:228). Miers and Kopytoff (1977) called this phenomenon “wealth in people,” and the Amakiri Ijo talk about the importance of “having people behind you.”

The result of this pronatalism is that the lives of childless or subfertile women are not satisfactory in either Amakiri or Lopon. However, important distinctions exist in the perception, definition, and treatment of women with fertility problems in these communities. We hypothesize that these differences stem from the way kinship systems define relationships, with the double unilineal descent system of the Yakurr providing more flexibility for strategizing relations than the rigidly patrilineal system of the Ijo. In this system, women are valued not only as child bearers but also as possible links to other lineages.

In Amakiri, women are basically considered bearers of children for the patrilineages, with the bridewealth paid by the groom’s patriline serving to affiliate these future children to the lineage. Women who have never given birth are therefore characterized as “useless.” They cannot attain the status of mature womanhood or join associations and they face difficult marital relations, ostracism, and divorce; consequently, most migrate out of the community. Some manage to accumulate wealth or attain a higher level of education but most fear a lonely and marginal old age. The Ijo term for “barren” (tubofaere) is derogatory and denotes women who have never been pregnant.

There is a difference in the respect given to women who have had even one child, even if that child died. The biological process of gestation and birthing confers an adult status on these women, allowing them to undergo initiation and to function as mature female members of their community. This is not to say that these so-called childless mothers’ lives are necessarily happy. These women, similar to those who have never given birth, seem to spend their lives searching for a (subsequent) pregnancy and a child. Nevertheless, they are able to claim a status that is quite different from that of barren women.

In Lopon, women with fertility problems have similar issues, but the impact is mitigated by the double unilineal descent system in which women are affiliated with their matrilineal kin, and by institutions that openly support childless women. Women seem to be appreciated here not only for their childbearing capacities but also for the linkages they provide to other kin on their matrilineal side, another form of “having people.” We did not find a significant difference between the status of barren women and childless mothers in Lopon. There, community mechanisms alleviate the stigma attached to never having been pregnant, and barren women join associations just as their fertile counterparts do. This is largely due to the performance of a special form of circumcision reserved for barren women. Moreover, due to a more supportive social environment, with
or without this ritual, unmarried and childless women can attain full womanhood if they are considered old enough.

Subfertility is distinguished from childlessness in both communities, but it is considered a greater problem in Amakiri than in Lopon, despite a desire for many children in both. Having just one child (or a child of the wrong gender) is more problematic in strongly patrilineal Amakiri than in Lopon, where the double unilineal affiliation (and consequently a strong matrilineal link) makes it less crucial to bear sons.

Finally, to mitigate the effects of childlessness, adoption is a solution in Lopon. This is not an option in Amakiri, since biologically unrelated children are not allowed to become members of the patrilineage. This alternative is acceptable to the Yakurr who filiate the child to the husband’s patrilineage and the wife’s matrilineage as they do biological children. The Yakurr consider the adoptive women honorary mothers, particularly if they acquired the children as babies.

What the women in the two communities have in common are attempts to mitigate the effects of fertility problems by searching for alternative paths to prestige. These include leaving the community and becoming traders in larger towns or, more recently, acquiring more education. In these attempts, they echo the behaviors of novelist Flora Nwapa’s two heroines, Amaka and Efuru.

Amaka, a childless woman, leaves her community and becomes a wealthy contractor in Lagos. She has affairs with various men to become pregnant and finally bears twin sons for a priest who will not leave the priesthood. Nevertheless, Amaka claims that “she is forever happy that he helped her proving to the world that she is a mother and a woman,” indicating that wealth without children is not enough. Efuru has one child who dies and her husband abandons her. She is a beautiful woman who is admired by her neighbors but can’t bear more children or get along with husbands. A sage finally diagnoses that a river goddess has chosen Efuru as her worshipper. The river goddess is wealthy and beautiful but never had a child. Efuru thus acquires an alternative occupation as a sort of priestess who, although without a child, is highly respected by the community.

In conclusion, categories of infertility used by residents of these two communities differ but also overlap and diverge from the Western biomedical definition. By these local conceptualizations, childless women are those who have never been pregnant or produced a live child. Childless mothers are those who have given birth to children who subsequently died. Subfertile women are those seen to have borne too few children, and, to some extent, too few children of the right sex. Honorary mothers are those who adopted children who were considered their own.

Suffering is indelibly associated with all these conditions, whether of women who have never conceived, women with too few children, or women without living children. Yet our research demonstrates the utility of differentiating between these categories based on criteria relevant to these women’s own communities. Many women who do not qualify as infertile or childless according to the biomedical standards widely used on survey instruments may face the same degree of social and economic marginality as women who do. If we wish to measure and compare the different plights of women in all of these categories constructively, more finely tuned definitions of the many conditions of infertility are certainly called for.
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