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Family Planning and the Malawian Male
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ABSTRACT
Malawi's fertility rate is a cause for concern, indicating the need for contraceptive and family planning methods. However, there is a low contraceptive rate among women and a consequent high degree of risk concerning pregnancy. The consequences of high fertility have a negative effect, both at the family and wider societal levels. It is men who traditionally take key decisions in relation to family size and therefore any successful family planning scheme should be targeted at the male. The article emphasises that men need to be made aware of the value of family planning in order to encourage their wives to use contraceptive methods.

Introduction
Malawi’s population has been growing at the rate of 3.7% during the 1977-87 intercensal period, compared to 2.9% during the 1966-77 intercensal period (Malawi Government, 1993a: viii). It is believed that if the population continues to grow at this rate, it would double in 19 years. Although the influx of refugees from the Mozambican civil war contributed significantly to the rapid population growth, when Mozambican refugees are excluded it is still high in the context of the country’s natural resources.

In 1982 the Malawi government approved the establishment of the National Child Spacing Programme as part of an overall Maternal and Child Health Programme. Attempts had been made in the 1960s to introduce family planning services in the country, but these had to be abandoned following misunderstandings between Ministry of Health officials on the one hand, and the public on the other. The public then viewed family planning as a disguised attempt at birth control which ran counter to traditional cultural values which stress the value of children to society (University of Malawi/UNFPA 1987:9). The central goal of the National Child Spacing Programme is to reduce maternal, infant and child mortality by lengthening birth intervals so as to promote the health of the mother and child (Malawi Government, 1993b:13). The lengthened birth intervals are supposed to reduce the number of children born to a woman during her reproductive life, which in turn means smaller families. A reduction in women’s total fertility would in the long run reduce the country’s population growth rate.

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The central argument of this paper is that in Malawi family planning will largely depend for its success on the active involvement of men, since it is men as husbands and brothers who ultimately control women’s fertility. The family planning programme should therefore target both men and women.

Malawian Society and Fertility

Malawi is a multi-ethnic country. However these ethnic groups can be placed into two broad categories: patrilineal and matrilineal social systems. The northern region is predominantly patrilineal, while the central and southern regions are predominantly matrilineal. In patrilineal social systems descent is reckoned through the male line. A man’s legitimate heir is his eldest son. Villages normally consist of patrilineages: brothers, their wives, unmarried daughters, and sons. Women born into the patrilineage leave at marriage to live in their husbands’ villages. A marriage is legitimised by the transfer of wealth, traditionally cattle, to the bride’s family. This is called lobola. Lobola effectively transfers a woman’s reproductive capacities from her own lineage to that of her husband’s agnatic lineage. In the event of the death of her husband, one of the brothers is traditionally expected to marry her to ‘perpetuate the name of the dead’ (University of Malawi/UNFPA, 1987:37). This means that the living brother fathers more children for his deceased brother. Barrenness in a woman is a valid reason for divorce and a man may demand the return of his cattle should his wife fail to bear him children. A woman’s worth in patrilineal social systems is reckoned in terms of the number of children she is able to produce for her husband’s agnatic lineage.

In matrilineal social systems descent is reckoned through the female line. Villages are traditionally made up of people tracing descent from a common ancestress. Traditionally men leave their own villages at marriage to live in those of their wives. This means that localised matrilineages lose their male members to other lineages in the neighbouring or distant villages. The departing male members of matrilineages are replaced by male members of other lineages who marry the women and father their children. Village headmen and lineage leaders whose positions require them to remain in contact with the people they lead, are exempt from the uxorilocality rule. Although traditionally a man is expected to live in his wife’s village until divorce or death of the wife, there are certain circumstances when he may be allowed to take away his wife from her village to settle in his own village, or any other place of their choice: these are, for example, shortage of land for food production, frequent child deaths and perpetual conflicts with other members of the wife’s family.

A woman in a matrilineal social system produces children for her own matrilineage. The children born in a marriage or even outside it belong to the mother’s matrilineage. This may explain why there are no large transfers of wealth made to
the wife’s group as part of marriage formalities. A husband in this setting is looked down as the typical man without prestige: a stranger whose duty is largely procreative (Mitchell, 1971:184; University of Malawi/UNFPA, 1987:22). It must be pointed out, however, that uxorilocally resident husbands may eventually assume important positions in the local community after a long stay. There are cases of such uxorilocally married men who have become advisors to village headmen (nduna).

A woman’s brother in a matrilineal social system is a very special person in her life: he is her guardian, helper and defender in all matters social and juridical. All these roles are summed up in the title nkhoswe. As nkhoswe he is answerable for the conduct of his sister and her children. His sisters and their children constitute his mbumba and are subject to his overriding authority (Mitchell, 1971:147). A man’s legitimate heir in a matrilineal social system is not his own son, but his eldest sister’s eldest son. It is this person who inherits the chieftaincy or village headmanship if the deceased held such a position, as well as his other property. The heir, however, may not inherit his deceased uncle’s agricultural holdings if these were acquired in the deceased’s wife’s village by virtue of marriage. This system of inheritance often causes conflicts between cousins, especially when the deceased’s own children feel the inheritor did not play a part in the accumulation of the property.

To a man in a matrilineal social system, having a large mbumba is a desirable thing since it constitutes a potential basis of political power. Segmentation and differentiation within the matrilineage leads to splits, hence to village break-up and the birth of new villages (Mitchell, 1971:153). Conflicts within the matrilineage usually stimulates a dissatisfied nkhoswe to gather his dependents together and to move off to found a new village. Given the fact that a large mbumba is a potential basis for a new village and a political position, some politically ambitious nkhoswe put pressure on their brothers-in-law and sisters to have many children (“kukuza mtundu”).

Whether in the patrilineal or matrilineal social system, child-bearing and nurturing are regarded as a woman’s prime responsibilities. Women are socialised into these roles at a very early stage through various initiation ceremonies such as msondo and chinamwali among the matrilineal peoples, and more informally among the patrilineal peoples. It is not clear why matrilineal peoples prefer the more formal approach to the socialisation of women into their child-bearing and nurturing roles, while the patrilineal social systems prefer to do this more informally.

To fulfil their reproductive roles in society, women need men to make them pregnant. This can be achieved through sexual intercourse within marriage, or outside it. However in most Malawian ethnic groups the socially accepted means of procreation is marriage. In the patrilineal social systems a girl who has had a child outside marriage fetches lower lobola than one who has not.
Marriage, however, entails the cession of a woman’s autonomy over reproductive decisions to her husband. The husband assumes control of his wife’s reproductive capacities and makes the reproductive decisions. The woman, who has been socialised to be subservient to her husband, is often powerless to question his decisions (see, eg Lappe and Collins, 1977:34). A woman in a matrilineal social system is up against two forces regarding her reproductive responsibilities: her own husband, and her own matrikin in the person of her nkoswe. These two forces may sometimes clash over a reproductive decision, for example, in a situation where a sister’s husband prefers a small family, and the wife’s brother, her nkoswe, wants a large mbumba. This conflict may resolve itself in divorce if the wife agrees with her brother; or the departure of the couple from the village to the husband’s village, or some other place where they can live without interference, if the wife does not agree with her brother’s attitudes.

Marriage exposes a woman to sexual intercourse and enhances her chances of falling pregnant, provided she is not infertile, not on contraception, and the husband is not impotent. Age at marriage, and the proportion married in a population of women, are believed to be fundamental determinants of fertility in a society (Hawthorn, 1970:19). The 1987 population census in Malawi indicates that almost 57% of Malawian females aged 10 and above are married (Malawi Government, 1993a: xvi). For women aged 25-29 years, marriage is almost universal (Malawi Government, 1993a: xix). The mean age at marriage for females is 18 years, while that for men is 23 years. The mean obscures major variations in age at marriage of women in the various ethnic groups: among the matrilineal Yao, and Lomwe of the southern region, and also among the Tonga of the northern region, a girl may get married soon after the onset of menses, which may be about 13 or 14 years. Such early marriage gives a woman a reproductive span of 30 years or more, hence high fertility. In 1993 the national total fertility rate (TFR) was estimated at 7.6 births per woman (Malawi Government, 1993b:3). In that same year it was estimated that 11% of all women and 13% of currently married women were using a method of family planning, either traditional or modern. However only 7.6 of currently married women were using modern methods of family planning which include contraceptive pills, condoms, injections, intrauterine cervical devices (IUCDs) and female sterilisation (Malawi Government, 1993c:7). The low contraceptive rate (CPR) among married women means that they are constantly at risk of pregnancy.

Ministry of Health officials attribute the low contraceptive prevalence rate to a number of factors:
(a) lack of knowledge about contraceptive technologies
(b) poor or intermittent availability of contraceptive technologies, eg contraceptive pills
(c) belief that children come from God and nothing should be done to interfere with procreation
(d) belief that children are the mortar that binds the couple together
(e) refusal by husbands to countenance the use of contraception by their wives since contraceptive technology allows women to be promiscuous ‘without being caught’, ie no pregnancy would result from the extramarital affair.

It is not possible at the moment to assign relative weights to the contribution of each of the factors above to the uptake of contraceptive technologies among women in the country; however, what is certain is that even if the married woman was aware of methods of contraception, it is unlikely that she would use any of them without the consent of her husband, because to do so would invite divorce if the husband is opposed to any form of family planning. In a society where the primary function of women is reproduction and their education is given low priority by families, most women have no independent means of economic support; divorce in this situation threatens the basis of a woman’s economic support, thus making it difficult to go against her husband’s wishes.

Consequences of High Fertility

High fertility of women results in large families and ultimately rapid increase in a country’s population. The consequences of high fertility can be felt at the level of the household as well as the level of the national economy. At the level of the household the following are some of the negative consequences:
(a) the family may not be able to clothe and feed a large number of children adequately on a low income. Undernourished children are physically weak and may not work hard at school or in farm activities
(b) a low income family with many children may not be able to send its children to school; uneducated children cannot get jobs and therefore are unable to escape the poverty trap
(c) parents may not be able to maintain close supervision of a large number of children, resulting in poor discipline and delinquency
(d) as children grow up and get married they will need their own pieces of land resulting in the subdivision of family holdings into tiny plots that may be too small to produce enough food for a family’s subsistence (see, eg Malawi Government, 1988: 22) (1).

Economists see several reasons to be concerned about rapid population growth, viz:
(a) it has an adverse effect on the growth of per capita income
(b) there is the possibility of increased unemployment and under-employment as the economy fails to absorb an ever-growing labour force
(c) rapid population growth, combined with limited employment opportunities in agriculture, creates a demographic explosion in cities, thus exacerbating social problems such as crime and squatter settlements.
rapid population growth results in a population age structure heavily weighted toward the dependent, or non-labour force age groups, which are not productive

resources may have to be shifted from productive investment into providing social services such as more schools and more health units for the rapidly-growing population (Zuverka, 1979: 74, 86).

Malawi is already experiencing many of the problems described above: for example, high unemployment rates as the economy fails to absorb an ever-growing army of school leavers and school dropouts; overcrowding in the schools and hospitals as government and non-governmental organisations fail to meet the increasing demand for those social services; the development of squatter settlements in the country’s three cities; and shortage of arable land (see, eg Malawi Government 1993b: 6-9). The child spacing programme is a response to these problems. However, the programme has tended to concentrate on women attending ante-natal and post-natal clinics. These women are advised on the dangers of frequent child bearing to the health of the mother as well as the child, and the methods of contraception that are available to control fertility. It is expected that the women will on return to their homes discuss with their husbands the information imparted to them at the clinics. If the husband is agreeable the couples are expected to return to the clinic for advice regarding the most suitable form of contraception for them. This approach assumes that the women will pass on to their husbands information acquired at the clinics, and that the husbands will listen to the maternal and child health argument and respond to it positively.

Targeting the Male

In Malawi, whether one is discussing a patrilineal or a matrilineal social system, males are brought up to believe that they are inherently superior to females and therefore tend to downplay the importance of new ideas originating from females, much more so when those ideas touch upon issues of reproduction and family size which affect a man’s social status. The number of children a man fathers is often taken as an indicator of his virility; and in a context where a woman’s ‘job’ is traditionally seen as that of having children, the health argument does not seem to be convincing to husbands when they can point out their own living mothers who have given birth to many children.

In order to succeed, the child spacing programme in Malawi must shift emphasis away from women to men who are the key decision makers both at the family and societal level. The men must be made to appreciate the necessity of child spacing before they can begin to accompany their wives to family planning clinics. This calls for an educational campaign to create awareness among men about the
relationship between large families and some of the economic and social problems that their families experience. It is thought that as head of family who has to provide shelter, provide clothes, buy or produce food, pay school fees and meet other financial costs, a man is more likely to be persuaded by arguments of an economic and social nature than arguments about the health of the mother and the physical quality of children.

Since different socioeconomic groups are likely to experience problems of large families differentially, it is necessary to target the family planning campaign at specific groups. In Malawi these groups would be low-income skilled and semi-skilled urban workers, smallholder farmers, and small-scale businessmen both in the formal and informal sectors. Professionals such as teachers, lawyers and doctors have higher levels of education than the average Malawian and access to more varied sources of information. They would acquire information on family planning through newspapers, pamphlets, books and radio and would know where to get advice through the same sources or social networks. There is no need, therefore, to target them in a systematic campaign. Evidence from elsewhere indicates that high income earners and professionals tend to have smaller families than low income earners because they want to protect their higher standards of living (Hawthorn, 1977:110), although there is no firm evidence the trend could be the same in Malawi.

The messages communicated to the various socioeconomic groups need to appeal to the males' culturally defined role as family heads, providers and decision-makers. The following messages need to be conveyed, with varying emphases, depending upon whether the specific socioeconomic group is in agriculture or non-farm occupation:

(a) The price of food, clothes and other commodities are constantly rising: it is therefore difficult for low income earners to feed and buy clothes for a large family without falling into debt.

(b) A low income family cannot buy all the food that makes healthy children: malnourished children are prone to diseases and therefore they cannot work hard at their studies or in farm activities.

(c) When a family has many children the land is soon shared out, resulting in holdings that may be inadequate for a family’s annual subsistence requirements and sale, resulting in food insecurity and poor or non-existent farm incomes.

(d) In modern times it is people with good education who get good jobs and good salaries: parents who expect their children to help them in their old age must give their children a good education, which is quite a burden if there are many of them.

(e) A large family requires a big house to avoid overcrowding: this bigger house has to be constructed, or rented, which, given present prices, is expensive.
The ‘Man to Man’ campaign mounted by the health non-governmental organisation (NGOs) Banja La Msogolo (BLM) is a step in the right direction in creating awareness among men about their responsibility in family planning. The approach involves visiting workers in their places of work and discussing with them family planning issues. However because of financial constraints the programme has been limited to Blantyre and Zomba, two of the four major urban centres in the country. It will take a long time to reach the rural areas. In our view the ‘Man to Man’ programme under BLM should remain urban-based, but it should be strengthened. The government and other donors should help out financially so that more staff can be recruited and logistics improved to enable it to expand to the other cities. In the case of rural areas where extension programmes of various types already exist there is in our opinion, no real need to create a special cadre of family planning motivators: family planning messages could be incorporated into existing agricultural extension and functional literacy programmes.

The extension workers and literacy tutors will obviously need to be given some training in population education to equip them for the additional responsibility. The advantage of using existing programmes is that it enables extension workers to relate the messages to specific problems experienced by the community. For example, as the agricultural extension worker teaches his farmers about good land husbandry practices, he should be able to point out the link among large families, shortage of arable land, continuous cultivation, loss of soil fertility and poverty. He should also be able to point out the link among large families, rapid population growth, deforestation and changing rainfall patterns. This may help family leaders to appreciate that too many people on the land can contribute to problems of poverty, desertification and poor rainfall.

Functional literacy primers already contain information on good farming practices, nutrition and child care and it should be easy to incorporate population issues. But the important point here is that the learner should not just read these facts, but must able to discuss them with the other learners so that they can appreciate the relationship between large families and some of the socioeconomic or environmental problems that they experience in their community. It should be possible, for example, under a topic on ‘Child Care’ for learners to discuss the causes of poor child care. Learners, through the discussion, would come to appreciate that too many children make it impossible for them to be looked after properly by their mothers, who have so much other work to do. Similarly under a topic on ‘Farm Land’ learners could be encouraged to look back to their own situations to see how their holdings have shrunk over the years, how fertility has declined, and yields have been reduced. In the process of discussion the learners would come to appreciate the contribution of rapid population growth to their problems. Under the approach being advocated here, the role of the literacy tutor goes beyond the teaching of numeracy and reading skills, to one of guiding the learners to relate some of the topics to their own real situations.
Conclusion

This paper has argued that efforts to bring down Malawi’s population must involve both men and women. The present system which has tended to concentrate on women as change agents is inadequate because women, especially married women, who are most exposed to the risk of pregnancy, do not really control their own reproductive capacities: it is males as husbands and brothers who have the decisive voice in the fertility of women in Malawian society. Since the balance of power relating to procreating is in favour of the male members of society, it is important that they are made to appreciate the value of family planning for the quality of life of the families that they head. Only when they appreciate the need for smaller families will they begin to encourage their women to seek contraceptive advice.

Footnote
(1) In patrilineal social systems land is traditionally subdivided among male children; while in matrilineal social systems it is subdivided among female children.

References