Couple's agreement and disagreement on fertility intention: an insight into the reproductive decision process in a polygamous community in Northern Malawi

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ABSTRACT

There is now widespread agreement of the importance of men's role in reproductive decision making. A number of studies have argued that the translation of fertility preference into reproductive decision – the couple's fertility decision making process - is different in polygamous than in monogamous union. Studies investigating the dominance of men's preferences over women's preferences, in cases of couple disagreement found mixed evidence of the effect of polygamy. However, an often cited limitation of these studies has been the inability to link husband's intention with each of his wives in a polygamous union. By linking fertility-intention questions to an on-going Demographic Surveillance Site in Karonga district in Northern Malawi we will investigate wife's and husband's fertility preferences by marriage characteristics. An analysis of the use of contraception and level of agreement and disagreement is then performed to gain an insight on the reproductive decision making process of polygamous couples [148].

EXTENDED ABSTRACT –COMMENTS WELCOME BUT PLEASE DO NOT CITE WITHOUT AUTHORS' PERMISSION

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Introduction

Despite the strong effort of family planning programmes in the past 30 years to lower fertility in Sub-Saharan Africa, the fertility level remains high with almost 30 percent of married women having an unmet need for contraception (Bongaarts 1994; Westoff, 2006; Cleland et. al. 2006). Some commentators argue that the lack of proper targeting of family planning programmes, and specifically the lack of attention to men, is the main reason for the persistently high level of unmet need (Ezeh, 1993; Ezeh, 1997; Ezeh, 1998; Agadjanian and Ezeh 2000; Dodoo & van Landewijk, 1996; Dodoo, 1998a; Dodoo, 1998b; Adamchack & Adebayo, 1987; Bankole, 1995). This interpretation has been substantiated by evidence of the role of men in reproductive decisions (Ezeh, 1993; Omondi-Odhiambo, 1997; Dodoo, 1996; etc..).

A number of studies have argued that couple's fertility decision making process (the translation of fertility preference into reproductive decision) is different in polygamous unions than in monogamous unions (Dodoo, 1998; Agadjanian, Vi. And Ezeh, A. C. 2000; Mott and Mott, 1985, Garenne and van de Walle. 1989; Anderton and Emigh, 1989). Some studies, while attempting to ascertain the dominance of men's preferences over women's preferences in case of disagreement, found mixed evidence for this hypothesis (Dodoo, 1998; Ezeh, 1993; Bankole and Singh, 1998; Speizer, 1995).

Few studies have examined this issue in the context of polygamous couples. Bankole and Singh (1998) analysing DHS data from 18 countries compared husband and wife agreement of fertility intention including husband and wife agreement in a polygamous relationship. Bankole and Singh (1998:18) suggest that their analysis might understate 'the extent of agreement between couples in polygamous union' due to the impossibility of linking husband's intention with each of his wives. According to these authors couples in monogamous or polygamous relationships do not appear to significantly differ in their fertility intentions even after statistical adjustment for the possible underestimation of agreement due to the impossibility of linking husband's intention to each of his polygamous wives.

Dodoo (1998a) analysing two rounds of data from Ghana and Kenya (1988, 1989 and 1993 of Ghana and Kenya) compares reproductive intention of men and women by marriage type. In this study, Dodoo finds little evidence to support his expectation of higher contraceptive use when men rather that women want no more children. Furthermore, he finds weak evidence that men's preferences are more influential in determining contraceptive use among the polygamous than among the monogamous. Related to the latter findings, he speculates that women in polygamous marriages may have more decision-making autonomy than anticipated. Dodoo's (1998a) was unable to relate men's preference to each of his wives. Hence a polygamous man's preferences was assumed to apply equally to all wives. This assumption is clearly unrealistic. Dodoo himself pointed out need for more research on the meaning or implications of disagreement.

This study uses data collected between October 2008 and May 2009 from a module on fertility intention linked to an on-going Demographic Surveillance Site in Karonga district in Northern Malawi. Data on marriages, fertility and fertility intention are analyzed and wife and husband's fertility preferences are compared. An analysis of the use of contraception and level of agreement and disagreement is then performed to gain an insight into the reproductive decision making process of polygamous couples.

This study builds upon previous analysis of the effect of couples' agreement and reproductive decision in that it is possible to link responses of each couple in the context of a polygamous relationship. To our knowledge this is the first time such exploratory analysis has been done in a polygamous community.

Background

According to the latest Malawi Demographic Health Survey (MDHS) in 2004 the Total Fertility Rate was 6.0 children per woman. In the past 20 years fertility has decreased from 7.6 children per woman reported in the Family Formation Survey in 1984 to 6.3 in 2000 and 6.0 in the recent 2004 MDHS. This fall in fertility has been attributed to changes in family policy adopted by the Banda government which started to promote spacing, rather than limiting the number of births which was banned by the previous pro-

natalist regime. Spacing proved to be acceptable for the Malawian culture. It was only in late 1994 that the child spacing program was replaced by a family planning program with the explicit aim of reducing fertility (Chimbwete et al. 2005), following democratic elections. Nonetheless, fertility is still very high in Malawi compared to most African countries.

High fertility is accompanied by moderate use of contraception and high level of unmet need. In the latest 2004 Malawi DHS only 32.5 per cent of women reported using any method of contraception. As a result of this low level of contraception, one birth in every 5 is reported to be unwanted. Between 2000 and 2004 the reported ideal family size decreased from 5 children per woman to 4.1, and at the time of the survey 35 per cent of women said that they wanted no more children.

Using annual data from the Household Demographic Surveillance System (HDSS) from Karonga for 2005, 2006 and 2007 we estimated the Total Fertility Rate and found an overall level of 5.74 children per woman¹, with a mean Age at First Marriage of 18 years and the mean age at first birth of 20 (Dube, et al. 2009). Previous analyses do not show any cohort difference in the two indicators and the level of fertility appears to remain high with little sign of a downward trend (Dube, et al. 2009).

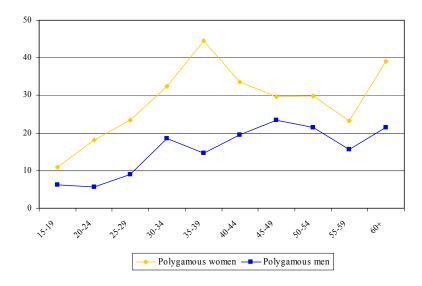
According to an ethnographical studies in northern Malawi (Peltzer, 1987), the community is patrilineal and the residence after marriage is usually patrilocal. This study notes that the young generation of newly married couples is increasingly likely to live with neither the husband's or wife's relatives. This is in contrast with southern Malawi, which is predominantly matrilineal and newly married couple tend to live with or near the wife's relatives. Polygamy is widespread with 15 per cent of men and 27 per cent of women in a polygamous relationship (Marston, et al. 2009).

Ezeh (1997) has stressed that it is important to consider the fluidity of marriage type in the African context. The probability to be married in a polygamous union varied by age group with the highest probability (23 per cent) in the men's sample found at ages 45-49. For women the highest rate of polygamous unions is found in the 35-39 years age group with almost half sharing their husband with one or more wives.

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¹ We could not analyse data for 2008 as the migration data for this year are not yet completely updated.





Source: KPS, data from November 2007 to May 2008.

Reinforcing Ezeh's (1997) point on the fluidity of marriage 20 percentage of women in a polygamous union have more than one co-wife and 15 percent of polygamous men have more than 2 wives. The highest percentage recorded for women is for the 40-44 years old group, where almost a third of women in polygamous unions have more than one co-wife (see Table 1).

Table 1: Number of wives for men by age group and number of co-wife for women in a polygamous relationship, 2007/2008.

Age Group		Women Proportion wi	th X co-wives	Men Proportion with X Wives				
	Number	1	2+	Number	2	3+		
15-19	29	86.20	13.80	1	100.00	0.00		
20-24	90	86.70	13.30	13	92.30	7.70		
25-29	120	87.50	12.50	37	97.30	2.70		
30-34	135	83.00	17.00	76	86.80	13.20		
35-39	118	78.00	22.00	46	93.50	6.50		
40-44	77	70.10	29.90	46	82.60	7.40		
45-49	46	71.70	28.30	43	83.70	16.30		
50-54	32	71.90	28.10	27	70.40	29.60		
55-59	14	85.70	14.30	14	92.90	7.10		
60+	64	70.30	29.70	68	76.50	23.50		
TOTAL	725	79.87	20.13	371	85.2	14.8		

Source: KPS, data from November 2007 to May 2008.

Data and method

This study uses data collected between October 2008 and May 2009 from a module on fertility intention linked to an on-going Demographic Surveillance Site near Chilumba a small port-village in the south of Karonga District, northern Malawi. The HDSS population numbered 33,113 individuals on 1st January 2007, in an area of 135 km².

The history of KPS stretches back to 1979 when a cohort study of leprosy was initiated with funding from the British Leprosy Relief Association (LEPRA). The KPS assumed responsibility for tuberculosis diagnosis and outpatient care from 1982, and became a large WHO-supported vaccine trial in 1986, also incorporating studies of HIV and skin diseases other than leprosy. By the late 1990s, HIV was a major health problem in Karonga. The HDSS baseline census was conducted in 2002-2004 following which the population has been under continuous surveillance. Using the HDSS, a population-based adult HIV and behaviour survey started in the HDSS area in September 2007, as part of a work programme which is focused on HIV and infectious disease control in a rural African population (see Jahn et al. (2007) for details on the data collection procedure).

As part of a study funded by the Hewlett/ESRC "Unintended Childbearing and family welfare in rural Malawi" (RES- 183-25-0013) a set of questions to measure retrospective and prospective fertility intention of couples was designed in July and August and piloted from September to October. During the pilot the questionnaire was modified in order to improve clarity and use appropriate wordings to make sure that the meaning of the questions were appropriately conveyed in the local language. The questionnaire was then back-translated from English to Tumbuka aided by the team of interviewers during the pilot. The data were then entered from October the 30th 2008. The design of the study permits the linking of couples' intentions and assessing the extent of agreement between couples in monogamous and in polygamous relationships.

Women were asked a number of questions on their current fertility (total number of children ever born and surviving) about their marital status (including how they got married; i.e. church/ traditional wedding, inherited, etc..). Men, equally, are asked questions on total number of children and number of children with each of their current wives if in a polygamous relationship. A set of questions has also been introduced to ask

about ever and current use of contraception. The module includes a section on retrospective 'wantedness' of the last born child (if a child was born in the last 3 years) or current pregnancy. A section on prospective fertility intention was introduced in order to assess whether or not the husband and wife separately wish to have another child and the preferred timing of the next birth. These questions are followed by questions on what each partner thinks is the desire of their spouse. Furthermore, respondents who want no more children are also asked the reason and to state whether the occurrence of a future birth would leave major consequences and if so, of what nature. A similar set of questions have been introduced in the men's questionnaire including separate preference questions for each wife.

Between October 2008 to May 2009, the data collection completed field work and data entry in 8 out of 25 enumeration areas, 81 per cent of the eligible population of these areas were found². We obtained information on marital history for 3253 15-49 year old women and a fertility history for 3194 women. 61 % of the eligible men in the population were found. We collected marital and fertility history data for 2754 men. The data on fertility intentions were collected in an Adult Behavioural Survey (ABS) which was linked to Household Sero-Survey (HSS) for HIV. For this reason, the individual records had to be anonymised and a HSS study number assigned. The individual identity could only be matched with other household socio economic variables through a separate file which allows the linking of the HSS study number and the individual id code, whereas information on individual id of each spouse was collected in the Socio-Economic Survey which ran a month before the ABS. We could match 60 % all the couples' responses. The mis-match was partially due to the mis-reportings of husband's information or because the husband or wife were living outside the Continuous Registration System area, the husband did not reported the correct numbers of wives, could not remember the marriage date or of her date of birth.

WRITE WITH SIAN, ALL THE STEPS WE DID TO DO THE MATCHING.

² We fully completed data collection and data entry, including data entry checks for reporting group 1, 2, 3, 8,9, 10, 12, 13. The response rate was partially affected by the fact that fertility intention questions that were introduced in a sexual behavioral questionnaire plus the survey was administered directly with the respondent and not through a proxy respondent, the fieldwork was run only though the day and some individual was not found. the survey procedure allowed 3 household visits to attempt to find the eligible population.

PRELIMINARY Results

In our data, 73 per cent of women were currently married and 84 per cent ever married. For men, 59.3 per cent are currently married, 63 per cent ever married, 15 per cent of currently married had more than one wife. The mean age at first marriage is 18 for women and 23 for men. Marriage is almost universal with only 3 per cent of women above 25 having never married. The data show high marital turnover with 28 per cent ever married women aged 15-49 having more than one marriage; this value varies by age group with 45 percent of 45-49 years old women having more than one marriage and 35 per cent of 30-35 years old group. Similarly for men, 48 per cent of men had more than one marriage and 20 per cent had 3 or more marriages in their life time.

The questionnaire collected data on children ever born and children surviving. Results show that 18 per cent of all women and 6 per cent of married women don't have any children. Considering the percentage of women who are childless by the end of their reproductive period to be indirect measure of primary infertility, 2 per cent of married women remain childless by age 40 (similar findings with data as the 2004 MDHS). Infertility is often associated with higher marital instability and an increased probability to marry in a polygamous marriage or to acquire a co-wife. However, Hemmings (2007) analysing 2002-2004 census KPS data found that infertile women were no more likely than other groups of women to be polygynously married. Hemmings (2007) suggests that this finding could be explained by the fact that polygynous marriages involving infertile women were highly susceptible to marital instability and short lived marriages. This is partially confirmed by high divorce and remarriage rates that characterized the high marital turnover found in this area.

Table 2: Percentage distribution of all women and currently married women by number of children ever born (CEB), and mean number of children ever born and mean number of living children, according to age group, Karonga ABS/FIS 2008 October-May 2009.

		<u> </u>										Mean
			3.7		c 1:11					37 1		number
		,			of childi	en ever	born		1	Number	Mean	of
Age	0	1	2	3	4	5	6	7+	Total	of	number	living
							111011			women	of CEB	children
							WOMI				1	
15-19	68.3	25.2	6.1	0.3	0	0	0	0	100	682	0.38	0.36
20-24	10.8	26.3	35.9	21.9	4.4	0.3	0	0	100	638	1.83	1.70
25-29	3.3	6.4	19.9	19.9	27.0	10.7	3.3	0.5	100	577	3.17	2.93
30-34	1.1	2.6	8.1	8.1	23.2	26.8	17.8	5.8	100	465	4.4	4.0
35-39	2.4	3.5	4.8	4.8	15.2	17.9	21.9	26.3	100	36	5.1	4.60
40-45	1.7	2.0	3.4	3.4	8.3	16.8	13.4	48.1	100	291	6.1	5.27
45-49	2.3	2.3	1.1	1.1	6.8	11.9	11.9	57.4	100	176	6.74	5.48
Total	18.0	12.8	14.2	13.5	12.0	10.1	7.6	11.5	100	3198	3.18	2.84
				C	URREN	ITLY N	MARRI	ED WO	MEN			
15-19	33.3	52.8	13.1	0.7	0	0	0	0	100	282	0.81	0.74
20-24	4.3	25.1	39.8	24.7	5.3	0.4	0	0	100	530	2.01	1.87
25-29	2.1	5.0	18.8	29.9	27.9	11.8	3.7	0.6	100	515	3.29	3.05
30-34	0.7	1.5	7.5	12.2	23.2	29.2	19.2	6.5	100	401	4.54	4.16
35-39	2.1	2.1	4.9	4.9	11.5	17.8	25.5	31.1	100	286	5.50	4.91
40-45	1.3	1.8	1.8	5.8	5.8	16.1	13.9	53.4	100	223	6.37	5.54
45-49	1.7	1.7	0.8	3.4	5.9	11.0	7.6	67.8	100	118	7.23	5.82
								_		_		
Total	6.0	13.8	16.7	15.6	13.5	11.9	8.9	13.5	100	2355	3.68	3.30

The mean number of children ever born is 3.2 for all women and 3.7 for married women (see Table 2). The mean number of children surviving gives an indication of the level of child mortality. Data show that on average by the end of their reproductive life women loose around 1.5 children. The level of fertility appears to be higher for women married in a polygamous relationship than for women married in a monogamous partnership with 4.5 children compared to 3.43 children (see Table 3).

Table 3: Mean number of children ever born and children surviving by age group for currently married women by marriage type. ABS/FIS 2008-2009.

	All 15-49 wom	en Currently in	All 15-49 wom	en Currently in
	polygamou	<u>ıs</u> marriage	monogamo	<u>us</u> marriage
	Mean number of	Mean Number	Mean number of	Mean Number
	CEB	children living	CEB	children living
15-19	1.05	1.05	0.79	0.72
20-24	2.00	2.12	1.96	1.83
25-29	3.65	3.35	3.10	2.97
30-34	4.40	4.00	4.60	4.22
35-39	5.74	5.15	5.37	4.79
40-44	6.48	5.51	6.31	5.55
45-49	7.00	5.64	7.33	5.84
Total	4.52	4.01	3.43	3.09

The number of children ever born is 7.2 for men in a polygamous marriage compared to 3.5 for men in a monogamous marriage and 4.0 for all marriage (see Table 4). However, considering the fluidity of marriages the true level of fertility by marriage type should account for the life time exposure in each marriage type.

Table 4: Mean number of children ever born and children surviving by age group for currently married men by marriage type. ABS/FIS 2008-2009.

	CURRI	ENTLY MA	RRIED		RENTLY IN		CUI	RRENTLY IN A	1
				POLYGA	MOUS MAR	RIAGE	MONOGA	AMOUS MARE	RIAGE
	Mean	Mean	Obs	Mean	Mean	Obs	Mean	Mean	Obs
	number	Number		number	Number		number of	Number	
	of CEB	children		of CEB	children		CEB	children	
		living			living			living	
15-19	0.50	0.43	14	ı	ı	-	0.50	0.42	14
20-24	1.01	0.93	214	2.44	2.44	9	0.95	0.83	205
25-29	2.11	1.94	359	3.82	3.44	35	1.92	1.78	324
30-34	3.61	3.30	311	5.40	4.88	59	3.19	2.93	252
35-39	4.70	4.20	219	7.66	6.88	36	4.19	3.66	183
40-44	5.76	4.82	198	7.97	6.57	38	5.23	4.40	160
45-49	6.68	5.74	125	11.04	9.42	21	5.79	5.0	104
50-55	7.48	6.07	106	10.71	8.71	21	6.68	5.42	85
55-60	8.11	6.32	67	11.15	8.92	13	7.40	5.70	54
60+	6.52	5.71	21	10.3	9.83	6	5.00	4.06	15
Total	4.03	3.49	1634	7.21	6.23	288	3.48	3.02	1396

High fertility is accompanied by moderate use of contraception. 35 per cent of currently married women use any type of contraceptive method and 33.3 use a modern method. Current use was lower amongst women married in a polygamous marriage with 28 per cent using a modern method compared to 35 per cent of women in an

monogamous marriage. The three most common modern methods used are condom (36 per cent), Injections (32 per cent) and female sterilization (18 per cent).

RETROSPECTIVE FERTILITY INTENTIONS

The fertility intentions questions were designed to collect data on retrospective and prospective fertility intention. The retrospective fertility intention questions were designed to collect pregnancy intention for currently pregnant women and for women who had a birth in the past 3 years. Specifically women were asked "At the time you became pregnant with last child (born in the last 3 years) or in the current pregnancy, did you: 1. Want to become pregnant, 2. Want to wait until later, 3. Want no more children at all." Results show that 68 per cent of women wanted the pregnancy, 27 per cent wanted to wait and only 2.9 per cent preferred not to have the pregnancy. Those figures are partly in line with the national figure revealing a reticence in declaring a pregnancy unwanted. The government only recently started to mention limiting in their family planning policy, after years when only spacing was considered acceptable for the Malawi culture. According to the DHS 57 per cent of women wanted the pregnancy, 20 per cent wanted it later and 20 per cent wanted no more. However, the data from the current study show a different pattern from that the national level, with only 3 per cent women declaring a pregnancy unwanted. An anthropological study conducted in this study area highlights the prevailing ethos of 'loving the child' and found that women rarely declare a child unwanted, preferring to mention health or financial reasons for not wanting a child (Hemmings, 2007). Indeed, the study reveals as the most cited reasons for wanting to wait or wanting no more children: women's health (30 per cent), a preference to have an optimal child spacing (29 per cent) or for financial reasons (12 per cent). Amongst married women 76 per cent stated that the husband wanted the pregnancy, 13 per cent believe that husband preferred to wait and less than 2 per cent believe that husband did not want the pregnancy. 36 per cent of women who wanted to wait believe that their husband wanted the pregnancy at that time whereas 51 believes that he would agree with her.

Matching husband and wife responses reveals...

IDEAL FAMILY SIZE

The mean ideal family size for women with one child is 3.4 children per women compared to 5.6 children for women with 6 or more children. Data also reveals that half of the women with 6 children would like to have less than 6. The desired family size does not appear to vary by typology of marriage. Data also does not show a preference for the gender composition of the children and this applies for all marriage types (results not shown).

Table 5: Percentage of all women by ideal number of children and mean ideal number of children for all women, currently married, married in a polygamous relationship, married in a monogamous relationship according to the number of living children, ABS/FIS 2008/2009.

			VING CHI	LDREN -	WOMEN			
Desired for children	0	1	2	3	4	5	6+	Total
0	4.5	2.86	0.6	1.3	2.4	3.0	3.0	2.6
1	2.4	3.3	0.6	1.1	0.2	1.7	0.4	1.4
2	24.1	17.8	15.0	5.5	6.2	3.0	6.8	11.9
3	21.6	22.2	17.9	15.6	6.2	6.8	6.4	14.7
4	26.5	33.2	40.0	32.6	3.9	18.8	20.6	30.5
5	6.1	12.7	14.3	25.5	21.8	30.1	10.7	15.9
6	2.4	4.6	7.4	11.4	13.	17.8	23.6	10.8
7	1.1	1.5	2.4	4.8	6.2	14.5	28.1	7.7
Non Numeric Response	11.5	1.7	1.6	2.2	2.8	4.4	3.6	4.35
All women	3.10	3.4	3.9	4.5	4.5	5.1	5.6	4.20
Number	547	447	489	444	404	279	449	3059
All currently married	3.54	3.6	3.9	4.5	4.5	5.1	5.6	4.4
Number	168	355	415	380	347	242	385	2292
Married Polygamous	3.	3.7	3.9	4.6	4.4	5.3	5.8	4.7
Number	12	35	86	84	104	65	124	510
Married Monogamous	3.5	3.6	3.9	4.4	4.5	4.	5.6	4.3
Number	156	320	329	296	243	177	261	1782

For men with one child the ideal family size is around 4 children, the ideal family size varies according the typology of marriage, the ideal family size amongst currently polygamous men in the population is around 7 children, compared to 5 for men in a monogamous relationship (see Table 5). However, this question on ideal family size for polygamous men refers to the family size he would like to have considering all his wives. In the questionnaire we also ask the ideal family size for each polygamous men with each

of his wife (data to be analyzed). Also for men we do not find any preference on the gender composition of the children and this applies for all marriage types (see Table 6).

Table 6: Percentage of all men by ideal number of children and mean ideal number of children for all men, currently married, married in a polygamous relationship, married in a monogamous relationship according to the number of living children, ABS/FIS 2008/2009.

	NUMB	ER OF L	IVING CI	HILDREN	- MEN			
Desired for children	0	1	2	3	4	5	6+	Total
0	5.7	1.6	1.3	1.7	2.1	2.4	5.7	3.9
1	1.9	1.6	0	0.4	0	0	0	1.0
2	18.5	.2	8.1	1.7	3.1	4.9	4.6	11.3
3	20.3	24.4	24.4	13.5	4.2	4.9	3.7	15.3
4	26.8	32.9	32.9	41.1	25.1	10.5	12.5	26.4
5	8.1	14.6	14.6	15.9	23.6	23.5	6.8	12.9
6	4.3	7.6	7.6	9.9	20.4	20.9	14.2	9.5
7	3.9	5.4	5.4	8.1	19.9	29.0	47.8	13.4
Non Numeric Response	10.3	2.8	2.8	1.7	1.6	37.0	4.5	6.1
All Men	3.46	4.07	4.47	4.81	5.53	5.91	7.05	4.53
Number	1078	307	289	234	188	156	335	2587
All currently married	4.19	4.13	4.46	4.82	5.55	5.89	7.04	5.21
Number	170	272	263	224	184	153	324	1590
Married Polygamous	6	3.5	5.27	6.22	6.04	6.68	7.6	6.93
Number	5	2	11	18	22	29	105	192
Married Monogamous	4.13	4.14	4.42	4.69	5.49	5.70	6.77	4.98
Number	165	270	252	206	162	124	219	1392

PROSPECTIVE FERTILITY INTENTIONS

All the non pregnant currently married women were asked: "Do you want to have (more) children any time in the future? If YES, How long would you like to wait before having another child?" 45 per cent of currently married women want no more children, and 83 per cent of women with 6 or more children. The percentage of women married in a polygamous marriage who want no more children is higher than the percentage for women married in a monogamous marriage (55 per cent compared to 41 per cent, respectively, see Table 7)).

Table 7: Percentage of currently married women by desired for children, according to the number of living children, ABS/FIS 2008-2009.

	NUM	BER C	F LIV	NG CH	LDREN			CURRENTLY MARRIED			
Desired for children	0	1	2	3	4	5	6+	ALL	Poly-	Mono-	
									gamous	gamous	
Want No More	20.5	10.7	23.3	35.4	53.7	66.7	83.2	45.0	55.7	41.8	
Have another: this year	30.7	9.3	4.9	5.0	3.8	2.7		4.93	5.0	4.9	
Have another: 1-2 years	20.5	17.3	16.2	11.2	6.8	4.0	2.1	9.9	7.4	10.7	
Have another: 2-3 years	5.1	32.5	24.4	15.9	10.7	3.6	2.6	14.9	10.5	16.2	
Have another: 3+ years	5.1	23.2	23.8	23.9	14.6	9.3	2.1	15.9	10.5	17.6	
Unsure	12.8	5.5	6.6	8.5	9.7	12.9	5.7	7.9	9.6	7.4	
Missing	5.1	1.4	0.8	0	0.6	0.9	3.1	1.3	1.3	1.3	
Total	100	100	100	100	100	100	100	100	100	100	
Number	39	289	365	339	309	225	382	1948	458	1490	

Note: currently married non pregnant women.

Amongst women who would prefer to wait before the next pregnancy, 30 percent want the pregnancy relatively soon (within the next 2 years), whereas more than 50 per cent preferred to have a children after 2 years. The most common reason for wanting to wait was concerns related to her own health or health of the child (30 per cent and 11 per cent), financial reasons (18 per cent) or child spacing (29 per cent). In order to gauge to effect of a mistimed pregnancy we included additional questions to capture how strong the respondent felt about this consequence (only one response allowed); precisely the respondent was asked: "If you had a child in the next year, will there be serious consequences? If YES, which consequences?". 10 per cent of all currently married women stated that they did not want another child because of fear of serious financial implication, 14 per cent did not want another for implication on her own health, another

2.4 per cent for fear of consequences on children's health. 20 per cent of women wanted the next birth later and stated that if mistimed the pregnancy would have serious consequences. Overall, among women who stated that they did not want another child or wanted to wait for the next pregnancy, 30 per cent thought that if a pregnancy did occur it would not have serious consequences. Women married in a polygamous relationship were more likely to cite women's health as a reason for not wanting another children (20 per cent compared to 13 per cent amongst those married in a monogamous relationship.

Table 8: Degree of 'unwantedness' of future pregnancies by typology of marriage, ABS/FIS 2008- 2009.

	Curre	ntly	Curren	tly	Curren	tly	
Degree of UNWANTENESS	marri	ed -	married	1	marrie	f	
	ALL		Polyga	mous	Monog	Monogamous	
	%	Obs	%	Obs	%	Obs	
Want NO more							
- YES serious financial consequence	10.8	200	12.6	55	10.2	145	
- YES serious conseq. on own' health	14.3	265	19.3	84	12.7	181	
- YES serious conseq. for children's health	2.4	44	2.7	12	2.2	32	
- YES other serious consequences	4.0	75	5.5	24	3.6	51	
- NO consequences	14.4	267	17.0	74	13.6	193	
Want LATER							
- YES serious financial consequence	2.4	44	1.6	7	2.6	37	
- YES serious conseq. on own' health	7.6	140	4.8	21	8.4	119	
- YES serious conseq. for children's health	9.2	170	6.9	30	9.8	140	
- YES other serious consequences	0.8	15	0.5	2	0.9	13	
Want SOON, but YES serious consequences	4.2	78	4.4	19	4.1	59	
Want soon or later, NO consequence	17.6	326	11.5	50	19.5	276	
Undecided	8.4	155	10.1	44	7.9	111	
Missing	3.9	73	2.9	13	4.2	60	
Total	100	1852	100	435	100	1417	

Note: SOON refer to wanting i 1-2 years, LATER more than 2 years (2-3. 3+), Other serious consequences: Marriage instability, own education, children's education, other. Currently married women, non pregnant who don't want a child in the next year.

There is a significant difference in the level of current use of contraception by degree of 'unwantedness', 57 per cent of the women who stated that did not want any more children and thought that the pregnancy would have serious consequences use a modern method of contraception, compared to around 40 per cent of women who stated that wanted no more or wanted to wait but did not feel that an unwanted or mistimed pregnancy would have serious consequences. MORE HERE

Table 9: Current use of modern method of contraception by degree of 'unwantedness' of future pregnancies, ABS/FIS 2008- 2009.

Degree of UNWANTENESS	Current use	of Modern Methods of n
		YES
Want NO more	%	Obs
- YES serious financial consequence	35.5	200
- YES serious conseq. on own' health	43.0	265
- YES serious conseq. for children's health	52.3	23
- YES other serious consequences	57.3	43
- NO consequences	37.0	99
Want LATER		
Want LATER, YES serious financial consequence	50.0	22
Want LATER, YES serious own health consequence	40.7	57
Want LATER, YES serious conseq. for children's health	38.8	66
Want LATER, YES other serious consequences	40.0	6
Want SOON, but YES serious consequences	46.1	36
Want soon or later, NO consequence	42.6	139
Undecided	25.1	39
Missing	53.4	39
Total	40.7	754

43 per cent of currently married women believe that the husband wants no more children and half of the women married in a polygamous relationship believe that the husband want no more children.

Table 10: Wife's view of husband fertility preference for currently married women, ABS/FIS 2008-2009.

	CURRI	ENTLY I	MARRIED -	WOMEN		
Wife's view of husband desired	ALL	Obs	Polygamo	Obs	Monogamous	Obs
			us			
Want NO more	43.7	852	49.3	226	42.0	626
Want next year	6.8	134	7.2	33	6.7	101
Want 1-2 years	8.26	161	7.6	35	8.5	126
Want 2-3 years	10.32	201	8.3	38	10.9	163
Want, 3+	8.5	165	5.2	24	9.5	141
Husband not sure	2.2	42	2.6	12	2.0	30
Respondent DK	11.2	218	12.2	56	10.9	162
Missing	8.9	175	7.4	34	9.5	141
Total	100.0	1948	100.0	458	100	1490

Comparing the fertility preference of women and their view of the husband preferences shows that 72 per cent of women who want no more children believe that

also their husband wants no more, whereas less than 10 per cent of women who want no more believe that their husband would like a child sometime soon. Similar findings are for women married in polygamous relationship with the exception that a higher proportion of women married in a polygamous relationship who want no more children do not to state a view regarding their husband's preferences compared to women who do not want any more children who are married in a monogamous relationship (12 per cent compared to 6 per cent, results not shown). We introduced a question to assess whether relatives participate or 'make pressure' in the couple's decision to have another child. Interestingly, we found that 10 per cent of women stated that relatives contribute to the couple's decision, and amongst them the women's relative from paternal side are more likely to 'make pressure' for having another child. Precisely, 60 per cent of those who received some form of pressure mentioned women's relatives from paternal side, 25 per cent women's relatives from maternal side, and 15 per cent received pressure from brothers, sisters or friends. As previously mentioned, ethnographic studies in the area reports that the community is patrilineal and the residence after marriage is usually patrilocal (Peltzer, 1987). Children belong to their father's family if he had made requisite payments during the marriage (Hemmings, 2007).

Table 11: Wife and Wife's view of husband fertility preference for currently married women, ABS/FIS 2008-2009.

	Wife's viev	v of husband	desired						
Wife's desired	Want NO	Want	Want	Want	Want,	Husband	Respondent	Missin	Total
	more	next year	1-2	2-3	3+	not sure	DK	g	
			years	years	years				
Want NO more	72.8	4.3	2.1	3.0	2.1	1.5	8.2	5.8	100
Want next year	3.1	61.5	1.0	0	0	3.3	4.2	27	100
Want 1-2 years	13.5	7.2	54.4	4.6	0.5	1.0	8.3	10.3	100
Want 2-3 years	12.7	4.1	7.3	48.6	6.9	0	11.7	8.6	100
Want, 3+	30.9	1.6	2.9	5.1	36.0	4.1	10.9	8.3	100
Undecided	30.9	3.2	3.2	5.1	7.0	7.1	36.7	6.5	100
Missing	12.0	4.0	4.0	0	8.0	0	4.0	68.0	100
Total	43.7	6.8	8.2	10.3	8.5	2.1	11.9	8.9	100

NEXT STEPS:

- compare responses,
- logistic models to see whether the use of contraception is higher or lower depending on husband/wife response and their level of agreement or disagreement (including running separately for currently polygamous, currently monogamous).

REFERENCES

Agadjanian, Vi. And Ezeh, A. C. 2000. Polygyny, gender relations, and reproduction in Ghana. *The Journal of Comparative Family Studies*. 31(4): 427-441.

Anderton, D. L. and Emigh, R. J. 1989. Polygymous Fertility: Sexual Competition Versus Progeny. *The American Journal of Sociology*. 94(4): 832-855.

Bankole, A. 1995. Desired Fertility and Fertility Behaviour among the Yoruba of Nigeria: A Study of Couple Preference and Subsequent Fertility. *Population Studies*. 49: 317-328.

Bankole, A. and Singh, S. 1998. Couples' Fertility and Contraceptive Decision-Making In Developing Countries: Hearing the Man's Voice. *International Family Planning Perspectives* 24(1): 15-24.

Bongaart, J. 1994. *Population Policy Options in the Developing World*. The Population Council Working Papers No 71. New York: The Population Council.

Cleland, J. Bernstein, S. Ezeh, A., Glasier, A. Innis, J. 2006.family Planning: the unfinished agenda. Sexual and Reproductive Health 3. *Lancet*. 368:1810-27.

Dodoo, F. N-A. and van Landerwijk, P. (1996) Men, Women, and Fertility Question in Sub-Saharan Africa: An Example from Ghana. African Studies Review. 39(3):29-41.

Dodoo, F. N-A. 1998a. Marriage Type and Reproductive Decisions: A Comparative Study in Sub-Saharan Africa. *Journal of Marriage and the Family*. 60(1): 232-242.

Dodoo, F. N-A. 1998b. Men Matter: Additive and Interactive Gendered Preferences and Reproductive behaviour in Kenya. *Demography*. 35(2):229-242.

Dube, A. Banda, E. Msoma A., Floyd S., Molesworth, A. Baschieri A. 2009. Fertility Pattern in Karonga HDSS, Malawi. INDEPTH Fertility Monograph.

Ezeh, A. C. 1993. The Influence of Spouses over each others contraceptive change in developing countries. *International Family Planning Perspectives*. 26(3):100-109.

Ezeh, A. C. 1997. Polygyny and Reproductive Behaviour in Sub-Saharah Africa: A contextual Analysis. *Demography* 34(3):355-368.

Hemmings, J. 2007. Infertility and Women's Life Courses in Northern Malawi. Unpublished PhD Thesis. Centre for Population Studies. London School of Hygiene and Tropical Medicine.

Garenne, M. and van de Walle. 1989. Polygyny and Fertility Among the Sereer of Senegal. *Population Studies*. 43(2): 267-283.

Jahn A et al. 2007. Evaluation of a village-informant driven demographic surveillance system. *Demographic Research* **16**: 219-48

M Marston, E Slaymaker, I Cremin, S Floyd, N McGrath, I Kasamba, T Lutalo, Nyirenda, A Ndyanabo, Z Mupambireyi and B Zaba 2009. 2009. Trends in Marriage and time spent single in sub-Saharan Africa a comparative analysis of six population-based cohort studies and nine Demographic and Health Surveys. *Sex Transm Infect*. 85(Suppl I):i64–i71.

National Statistical Office [Malawi], and ORC Macro. 2005. Malawi Demographic and Health Survey, 2004. Calverton, Maryland: NSO and ORC Macro.

Omondi-Odhiambo, 1997. Men's participation in family planning decisions in Kenya. Population Studies. 51(1):29-40.

Peltzer, K. (1987). Some Contributions of Traditional Healing Practices Towards Psychosocial Health Care in Malawi, Eschborn: Fachbuchhandlung für Psychologie Verlagsabteilung.

Reniers, G. (2003). Divorce and remarriage in rural Malawi. *Demographic Research* Special Collection1, article 6.

Speizer, I. S. 1995. A Marriage Trichotomy and its Applications. *Demography*. 32(4):533-542.

Moot, F. L. and Mott, S. H. 1985. Household Fertility Decision in West Africa: A Comparison of Male and Female Survey Results. Studies in Family Planning. 16(2):88-99.

Westoff, C. F. 2006. New estimates of unmet need and demand for family planning. *DHS Comparative Report* 14. Calverton, Maryland: ORC Macro.