

## Perception of primary school councillors on infertility and associated factors among couples in Onitsha education zone of Anambra State

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### Abstract

Infertility is a sad experience to have. Infertility among married couples in Onitsha Education Zone of Anambra State has been traced to emanate from infectious diseases mainly sexually transmitted infections. Complications from previous surgical operations, closure of cervical holes, inability to ovulate, tubal blockage, abnormalities in male reproductive organs, poor sperm production and deposition. Married couples with infertility problem suffer psychological and emotional stress like anger, fear, anxiety, frustration and depression. They also suffer some social effects like stigmatization and rejection. This study is aimed at ascertaining the perception of infertility and associated factors among married women and men in Onitsha Education Zone of Anambra State. A sample of 520 women and 400 men used for the study were selected through proportionate stratified random sampling techniques. To ensure effective representation, the researcher sampled married women and men according to the three Local Government Areas that make up Onitsha Education Zone of Anambra State. The instrument used for data collection was a self-structured questionnaire validated for face and content validity by two experts from the Department of Measure and Evaluation Chukwuemeka Odumegwu Ojukwu University, Igbariam Campus. The research used a trial test and a Pearson product movement correlation technique to determine the reliability at 0.85 and 0.82 for married women and men respectively. From findings of the study the researcher hereby recommends, practice of personal hygiene, treatment of infertility problems by specialist doctors, health education given to members of Onitsha Education Zone of Anambra State and the general public about infertility and its associated factors.

**Keywords:** Married couples, infertility, associated factors

### Introduction

Every married couple marries mainly with the hope of getting children. And for them to accomplish this dream, it means that the couple must be fertile, that is the man should be able to pregnant a woman, and the woman should be able to conceive. When couples are married they anxiously look forward to get their own babies. For many this dream is achieved, but for some it is a difficult task and to others, an impossible dream (Luigi, 2002) <sup>[6]</sup>. Some men have the cause of inability to pregnant a woman and for the woman to conceive that are caused in their body from birth (congenital). Some suffer this condition due to conditions that set in later in their life (acquired). Some have causes that are treatable while others have causes that are not treatable, Uro (2000). These conditions lead the researchers to look into this problem of infertility and its associated factors and to find out the knowledge and feeling of married couples towards infertility and associated factors in Onitsha Education Zone of Anambra State.

Himmel (1997) <sup>[4]</sup> defines infertility as the failure of a married couple to get pregnant after trying to do so for at least for one year. Pearson (2003) sees infertility as when someone is unable to have a baby. Robert (2007) <sup>[10]</sup> divides infertility into primary and secondary infertility. Primary infertility has to do with a situation where neither man has ever impregnated a woman nor a woman ever conceived for once. Secondary,

infertility on the other hand, means that one or both spouses have previously conceived or impregnated a woman before but are unable to conceive again or impregnate a woman after a full year of trying to do so.

Infertility is a sad experience for one to have; couples that are infertile experience distressing emotions common to those who are grieving a loss of someone. Their major reactions include depression, anger and frustration; relationships may suffer not only with their spouses/partners, but also with friends and family members. Philip (1995) <sup>[9]</sup> says that in many cultures inability to conceive or impregnate a woman bears a stigma, and in closed social groups a degree of rejection may cause considerable anxiety and disappointment. Luigi (2002) <sup>[6]</sup> narrates the experience that Pat had after undergoing an operation on his scrotum. He says, "the disappointment Pat shares with his wife is matched only by the emotional damage infertility has done to his self-esteem." He adds, "there is nothing that hits into the very essence of what a man is more than this."

Infertility in women could be caused by many factors. Majority of the infertility problems in women according to Uro (2000) <sup>[11]</sup>, include:

- closure of cervical hole from birth, joining together of the uterus;
- hormonal imbalance;
- breast secretion;

- irregular uterine surface;
- ovarian cyst;
- sperm antibodies;
- blood incompatibility;
- pelvic infections;
- pelvic inflammatory disease;
- complications from previous abdominal or pelvic surgery;
- tubal blockage from infectious diseases e.g chronic gonorrhoea and other STI;
- women without vaginal hole;
- inability to ovulate (release egg every month);
- thyroid problem (hyperthyroidism or hypothyroidism);
- fibroid (non-cancerous tumor that grow into the womb);
- Side effect of drugs like non-steroidal anti-inflammatory drugs;
- chemotherapy drugs used for the treatment of cancer;
- Neuroleptic medicine used for the treatment of psychosis (antipsychotic); and
- Age.

Secondly, infertility in the family can be due to the problems of the man. In Onitsha Education Zone of Anambra State and other Igbo land, infertility is usually ascribed to the woman with the effect that men hardly present themselves to the doctor for adequate investigation and treatment. These usually make solution to the couples' nightmare difficult. According to Uro (2000) <sup>[11]</sup>, "at times the situation is brought to light when the woman re-marries and gives birth." This research is meant to unveil the causes of infertility in man with a view to raising consciousness on male infertility and hence better treatment modalities. It is also meant to avert lopsidedness and over castigation of the female by their husband's friends and in-laws. He further outlines causes of infertility in men as follows:

- Poor sperm production;
- Premature ejaculation;
- poor erection;
- no sperm cell;
- disease of the testes;
- trauma to the testes as a result of accident, fall or kick to the testes;
- Infections due to, tuberculoses, gonorrhoea or viral infections tumors: like prostate gland cancer, liver problems like excess iron (Haemochromatosis);
- excessive intake of oestrogen or liver cirrhosis;
- surgical removal of the testes;
- High temperature due to high fever, wearing tight and plastic pants, use of hot bath regularly on the scrotum;
- chromosomal abnormalities;
- klinefelter's syndrome (testes small and produce no sperm);
- Abnormalities of the male organs (e.g wrong penis opening at the tip or under chypospadias or epispadias) in either case it does not allow for proper sperm deposition;
- sexual problem impotence due to psychological stress; and
- Alcoholism and other social habits help to inhibit sperm production.

According to Oyolu (1998) excessive alcohol intake depresses the libido while chronic venereal disease also depresses the testicles and cause infertility.

Furthermore, infertility has profound psychological effects. Partners may become more anxious to conceive, ironically increasing sexual dysfunction. Marital disorder often develops in infertile couples especially when they, are under pressure to make medical decisions. Women trying to conceive often have clinical depression rates similarly to women who have heart disease or cancer. Emotional stress and marital difficulties (conflicts) are greater in couples where the infertility lies with the man (Khan, Khalid, Janesh, Gupta, Gray & Mires, 2005) Friedman (1993) <sup>[2]</sup> opines that women are typically seen by others as well as themselves as the emotional caretakers. Women feel responsible not only for everyone's bad feelings, but also for anything bad that happens. When women try to repress feeling their emotions can become more ominous until they finally feel out of control. Their emotions can become a monster about to swallow them whole. Men are traditionally seen as the financial providers of the relationship and are responsible for protecting the family from real or imagined danger. Men tend to focus their energy back into their work place where they feel they can have more success.

Goddijn (2004) <sup>[3]</sup> reports that couples experience intense feelings such as pain, anger, fear, frustration which combined with the message of their dealing with things in some way dysfunctional or "Craze" causes them to feel anxiously depressed, as feeling spill out, they feels out of control. Couples are hesitant to admit problems in their marriage feeling that having difficulty coping would mean that their marriage is also a failure.

Again, Domar (2007) <sup>[1]</sup> reports that in many cultures, including local government areas, inability of the woman to conceive or a man to impregnate bears a stigma. In closed social groups a degree of rejection may cause considerable anxiety and disappointment. In an effort to end the shame and the secrecy of infertility, some respond by actively avoiding the issues altogether. In a survey conducted by pharmaceutical company Merck launched in October 2011 in Redbook 61% of the respondents hid their infertility problems from families and friends nearly half didn't even tell their mother. Based on the above problems the researcher was poised to find out the perceptions of women and men on infertility and associated factors among married couple in Onitsha Education Zone of Anambra State using the following research questions and null hypothesis.

### Research Questions

1. What are the mean perceptions of women on infertility and associated factors among married couples in Onitsha Education Zone of Anambra State?
2. What are the mean perceptions of men on infertility and associated factors among married couples in Onitsha Education Zone of Anambra State?

### Hypothesis

Ho<sub>1</sub>. There is no significant difference the mean perceptions of women and men on infertility and associated factors among married couples in Onitsha Education Zone of Anambra State.

### Research Method

This study was carried out in Onitsha Education Zone of Anambra State. Descriptive survey design was adopted for the study. The population of this study was made up of 750 and 610 married women and men respectively drawn from the

three Local Government Areas in Onitsha Education Zone of Anambra State. The research adopted proportionate stratified random sampling techniques to sample the married women and men. In order to ensure effective representation of the population, the researcher sampled married women and men according to the three (3) Local Government Areas comprising Onitsha North, Onitsha South and Ogbaru. Six hundred 600 (80%) of 750 married women and 460 (75%) of 610 married men were sampled for the study. After administering the questionnaire on the respondents, only 520 for married women and 400 for married men were returned and used for the study. The researcher used self-structured questionnaire made up of two sections. Section one sought information on personal data of the respondents while section two made up of fifteen items sought information on the perception of infertility and associated factors among married women and men in Onitsha Education Zone of Anambra State, respectively weighted on a four (4) point rating scale for the study. The instrument for data collection was validated for face and content validity by two experts from the Department of Measurement and Evaluation in Chukwuemeka Odumegwu Ojukwu University,

Igbariam Campus. The instrument through a trial test and the use of Pearson product moment correlation technique had a reliability of 0.85 and 0.82 for married women and men respectively.

The researcher with the help of three research assistants, one drawn from each of the three LGAs distributed 600 (80%) and 460 (75%) copies of the questionnaire, for married women and men. 570 and 400 copies of the questionnaire were returned and was used for the study. A 4-point rating scale was used for analysis with a mean cut off mark of 2.5 and above considered as agreed and less than 2.5 considered as disagreed. The data collected were analyzed using mean (X) and standard deviation (SD) while the hypothesis was tested at 0.05 level of significance using t-test. The decision rule on the hypothesis was to reject the null hypothesis if the calculated value of t-test is greater than the critical or calculated value, vice versa.

**Results**

**Research Question One:** What are the mean perceptions of women on infertility and associated factors among married couples in Onitsha Education Zone of Anambra State?

**Table 1:** Mean Perceptions of Women on Infertility and Associated Factors Among Married Couples in Onitsha Education Zone of Anambra State

S. no	Questionnaire items	Male ( $\bar{x}$ )	S.D	Female ( $\bar{x}$ )	S.D
1.	Infectious diseases	3.02	0.11	2.64	0.12
2.	Complications from surgical operations in women	2.62	0.31	2.71	0.12
3.	Hormonal imbalance	2.51	0.21	3.02	0.31
4.	Sperm antibodies	2.58	0.32	2.50	0.14
5.	Blood incompatibility	3.01	0.14	2.63	0.15
6.	Pelvic infection	2.57	0.16	2.72	0.14
7.	Tubal blockage due to infections	2.72	0.12	2.63	0.11
8.	Inability to ovulate	3.04	0.34	2.58	0.31
9.	Thyroid problems and fibroids	3.00	0.31	2.64	0.16
10.	Infertility can cause marital conflict	2.08	0.12	2.51	0.11
11.	Infertility can cause marital frustration	2.74	0.12	2.74	0.13
12.	Infertility can cause psychological stress	2.88	0.14	3.82	0.15
13.	Infertility can cause emotional stress	2.55	0.11	2.66	0.12
14.	Infertility can cause stigmatization	2.56	0.32	2.73	0.30
15.	Infertility can cause rejection in family	3.08	0.15	2.84	0.11

As shown in table I, all the items were rated above 2.50 criterion score. This means that all the respondents agreed with the researchers on infertility among women and the associated factors regarding married couples in Onitsha Education zone of

Anambra State.

**Research Question Two:** What are the mean perceptions of men on infertility and associated factors among married couples in Onitsha Education Zone of Anambra State?

**Table 2:** Mean Perceptions of Men on Infertility and Associated Factors Among Married Couples in Onitsha Education Zone of Anambra State

S. no	Questionnaire items	Male ( $\bar{x}$ )	S.D	Female ( $\bar{x}$ )	S.D
1	Poor sperm production and disposition	3.40	0.21	2.62	0.12
2	Abnormalities in male reproduction organ	2.52	0.31	2.71	0.30
3	Premature ejaculation	2.62	0.21	2.75	0.14
4	Poor erection	2.67	0.20	2.64	0.15
5	Diseases of the testes	2.51	0.14	2.60	0.12
6	Infectious disease	2.71	0.15	2.70	0.12
7	High temperature due to high fever	3.01	0.11	2.74	0.10
8	Sexual problem impotence	3.04	0.12	2.88	0.11
9	Alcoholism	2.77	0.15	2.84	0.14
10	Infertility can cause marital conflict	2.81	0.12	2.62	0.11
11	Infertility can cause marital frustration	2.94	0.31	2.88	0.09
12	Infertility can cause psychological stress	2.95	0.21	2.91	0.18
13	Infertility can cause emotional stress	2.73	0.13	2.70	0.12
14	Infertility can cause stigmatization	2.52	0.14	2.71	0.13
15	Infertility can cause rejection in family	2.64	0.31	2.60	0.21

As shown in table 2, all the items were rated above 2.50 criterion score. This means that all the respondents agreed with the researchers on infertility among married couples and the associated factors in Onitsha Education zone of Anambra State.

**Hypothesis**

Ho<sub>1</sub>: there is no significant difference between the mean perception of men and women on infertility and associated factors among married couple in Onitsha Education Zone of Anambra State.

**Table 3:** Mean Perception of Men and Women on Infertility and Associated Factors Among Married Couple in Onitsha Education Zone of Anambra State

Variable	X	SD	N	Df	t-crit.	t-cal.	Std error	A	Decision
Married women	2.83	1.11	520	918	1.96	0.27	0.07	0.05	Not significant
Married men	2.81	0.95	400						

As shown in Table 3, the t-cal of 0.27 is less than the t-crit of 1.96 at 918 degree of freedom and 0.05 level of significance. This indicates no significant difference in their mean perceptions.

**Discussion of Results**

This study investigated the perceptions of women and men on infertility and associated factors among married couple in Onitsha Education Zone of Anambra State. The findings of the study indicated poor sperm production and deposition, abnormalities in male reproductive organ constitute the major cause of male infertility. Further findings also showed that marital conflict, frustration and depression cause psychological and emotional stress to married couples, stigmatization and rejection are the major factors or social effects of infertility among married couples.

The findings of the study agree with Uro (2000) [11] who found closure of cervical hole from birth, joining together of the uterus; hormonal imbalance; and breast secretion as the major causes of infertility among women. He also found poor sperm production; premature ejaculation; poor erection; no sperm cell; and disease of the testes as among the major causes of infertility among men.

The social effects or factors associated with infertility were reported by Goddijn (2004) [3] who found that couples experience intense feelings such as pain, anger, fear, frustration. Furthermore, he found the most couples that experience infertility in marriage suffer stigmatization and rejection which make them feel anxiously depressed and dejected.

**Conclusion**

The study made it clear that most of the infertility problems emanated from infectious disease and complications from surgical operations in women. It is also clear that poor sperm production and deposition, abnormalities in male reproductive organ constitute the major cause of male infertility. This study brought to lime light that marital conflict, frustration and depression cause psychological and emotional stress to married couples. Stigmatization and rejection is seen as the major cause of social effect of infertility among married couples.

**Recommendations**

Couples especially women, should maintain a high level of personal hygiene and that of their reproductive system. Couples with infertility problems should go to the specialist doctors for treatment. They should not hide themselves. Family members, friends and In-laws should not reject or stigmatize couples with infertility problems. Every infection should be

handled immediately by a specialist doctor. Health agencies should extend health education programme to the zone and other places to educate married couples on the need for them to always go for medical checkups.

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