

PN-1007-782
~~DABBS~~



PDP Policy Brief

Contraceptive Use, Infant Mortality and
Nutritional Status: An African Perspective

Report of a seminar sponsored by
the United States Agency for International Development
in conjunction with
the Battelle Population and Development Policy Program
Held February 27, 1981

Battelle PDP Program
International Development Study Center
2030 M Street, N.W.
Washington, D. C. 20036

Contraceptive Use, Infant Mortality and
Nutritional Status: An African Perspective

Preface

This seminar was the third and last in a series designed to communicate the results of social science projects funded by USAID since August 1977 on the determinants and consequences of fertility. The purpose of the seminars was to highlight the policy relevance of the research findings for policy-makers and program planners at USAID and other international assistance organizations.

At this seminar, Dr. Robert Morgan and Dr. Barbara Janowitz presented their study results. Certain findings of both papers discussed in the seminar relate to the Child Survival Hypothesis. The Child Survival Hypothesis assumes that when families experience high levels of infant and child mortality, they have greater numbers of additional children as insurance against mortality. Although working with the same hypothesis, the two researchers draw different conclusions. Dr. Morgan's research findings tend to reject the hypothesis, whereas Dr. Janowitz's research supports it. A significant part of the discussion focused on problems of formulating policy given data limitations. In general, the need for policy relevant social science research was acknowledged.

Although this seminar was the last in the current series, we hope to hold a second series. We look forward to your continued participation in any future seminars.

Jatinder Cheema
Margot Zimmerman
Anne Kubisch
March 27, 1981

"Distribution of Modern Contraceptive Use in a Medium Income Rural Population in Nigeria, in the Absence of an Adequate Health Care Delivery System: A Preliminary Determination of the Relationship Between Modern Contraceptive Use and Levels of Nutrition, Child Mortality and Fertility"

Robert W. Morgan, Boston University

The purpose of Dr. Morgan's research is to examine the relationship between (a) contraceptive use and levels of child nutrition, child survival, and family fertility, and (b) to test the Child Survival Hypothesis.

Dr. Morgan's research findings are important because data results: a) draw attention to the complex nature of the relationship between mortality and fertility, and b) highlight unanticipated findings which raise further questions about the principal variables and the methodologies used.

Dr. Morgan's research findings do not support the Child Survival Hypothesis.

Rather, the findings suggest that:

1. Fertility levels rise with modernization; they are lowest in those families still attached to traditional life styles;
2. Greater 'Perceived Child Survival Chances' correlate somewhat with higher fertility and lesser practice of family planning.

Interesting unanticipated findings show that:

1. Larger than expected numbers of respondents were unfamiliar with modern contraceptive techniques, and were unaware of family planning services available in the area;
2. Although use of modern contraceptives was low, traditional, socially permitted mechanisms (such as prolonged breast feeding and extended postpartum stay at the mother's home) are widely practiced;
3. Husbands provide better data than their wives.

Policy Implications

Dr. Morgan's findings have relevance for both future programs and new research directions. Programmatically, findings suggest that new types of family planning service initiatives are required. These include programs in which: a) families are educated about contraceptive techniques and have been made aware of the availability of services; and b) existing acceptable social methods are reinforced and combined with modern methods when the family is motivated.

The research implications of Dr. Morgan's findings suggest that mortality and fertility do not interact in the expected manner during the modernization transition period in some developing countries. Existing research tools need to be refined and new ones developed in order to obtain more accurate data on mortality.

"The Determinants of Contraceptive Use, Reproductive Goals and Birth Spacing in Relation to Mortality, Breast-Feeding and Previous Contraceptive Behavior"

Barbara Janowitz, International Fertility Research Program

Dr. Janowitz's research is based on the assumption that infant and child survival influences fertility and contraceptive behavior. In order to validate this assumption, the researchers (a) examine the relationship between previous pregnancy outcomes, breast feeding, and past contraceptive use to birth spacing, desired fertility and future contraceptive plans; and (b) analyze the relative importance of motivation and biological factors on pregnancy intervals.

Although data limitations and methodological problems were discussed first by Dr. Janowitz and later by the seminar participants, the results suggest the following general findings:

1. Breast feeding has a significant impact on the length of pregnancy intervals;
2. The survival status of the last two pregnancies affect the desire for additional children; and
3. Fertility intention and the outcome of the most recent pregnancy impact upon planned contraceptive use.

Policy Implications

Efforts to reduce infant mortality have implications which extend beyond family planning concerns to issues pertinent to the health and development status of the country. From the policy perspective, family planning services, integrated with maternal and child health, will contribute to

(a) improving infant nutrition; (b) encouraging mothers to breast feed and plan their families after weaning their infants; (c) promoting spacing through prolonged breast feeding; and (d) motivating postpartum women to use family planning, especially if the last child has survived.

Discussion

The discussion following the presentations evolved around issues of methodology, policy guidelines and program implications. The question basic to all three issues was: "Can policy be based on research data given the limitations of incomplete information and inadequate methodologies?"

Three conclusions referred to methodological approach. (1) Countries such as those in Africa provide new challenges for social scientists to develop research tools and methodologies which can more accurately obtain the needed information on mortality and fertility behavior. (2) Pilot research projects designed to carry out in-depth analyses may be more appropriate in some instances. Dr. Morgan's research provided one example where fertility behavior did not respond to modernization in the expected manner, i.e., fertility did not appear to decline with increased modernization. This suggests that classical models are not necessarily applicable to traditional societies. (3) Social scientists need to identify problems and design research that has clear relevance to policy decisions and can provide guidance for program development in international population assistance.

The two papers discussed in the seminar provide support for introducing population policies which integrate family planning and maternal and child health in the context of an African setting. According to Morgan's research, Nigerian women are already taking steps to contracept in socially acceptable ways. It seems then that the political risks of encouraging modern methods as part of a family planning and maternal and child health program is relatively low.

Programmatically, the findings from these two research papers suggest the need for: a) education, motivation and information oriented family planning programs in Africa; b) contraceptive services integrated with existing socially accepted and practiced birth spacing techniques; c) programs to improve the nutritional status of the children; and d) programs designed to reach postpartum women.

Participant List

February 27, 1981

Bob Adams, AID
Adrienne Allison, AID
Barnett F. Baron, Commentator, Population Council
Nancy Birdsall, World Bank
Sarah K. Brandel, Overseas Development Council
Art Braunstein, AID
Dennis N. W. Chao, Research Triangle Institute
Jatinder Cheema, Rapporteur, Battelle
Susan Cochrane, World Bank
James Crawford, The Pathfinder Fund
John Crowley, AID
Michael Dalmat, Centers for Disease Control
Lea Dunston, AID
Moye W. Freymann, University of North Carolina
Cynthia Gilley, Battelle
James Heiby, AID
Barbara Janowitz, Presentor, International Fertility Research Program
William H. Jansen, AID
Mary Kent, Population Reference Bureau
Anne Kubisch, Battelle
William Paul McGreevey, Moderator, World Bank
Elizabeth Maguire, AID
Robert W. Morgau, Presentor, Boston University
Abdel R. Omran, Commentator, University of North Carolina
Katherine Piepmeier, AID
Toni Richards, National Academy of Sciences
Leonard H. Robinson, Jr., Battelle
James Scheuer, U.S. House of Representatives
Sara Seims, AID
Conrad Taeuber, Georgetown University
Bill Trayfors, Commentator, AID
Nadia Youssef, International Center for Research on Women
Margot Zimmerman, Battelle

A'