



Perception of Child-bearing Women on Child Spacing Information in Polygamous Homes in Kusfa Area of Zaria City, Nigeria

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ABSTRACT

Maternal mortality is a major cause of concern in developing countries. To reduce maternal mortality several public health agencies diffused child spacing information to the public. However, while most people accept and use child spacing information there remain some individuals that are resistant to it especially in developing countries. Resistance to information about child spacing is a major public health issue in developing countries, particularly in Nigeria. Using Chatman's (2000) theory of normative behavior as a theoretical framework to guide the investigation. This study therefore set out to explore the perception of child-bearing women on child spacing information in polygamous homes in Kusfa Zaria City. A qualitative research methodology was adopted. Data were collected using in-depth interview with ten child-bearing women. Purposive sampling was used to identify respondents. To be included as respondent the following three criteria must be met: 1) have to be child-bearing women in polygamous homes in Kusfa Area of Zaria city, 2) 20-45 years of age and 3) must have a minimum of four children over the last six years. Data from respondents were analyzed using thematic analysis. Findings revealed that, injection, pills, condom, IUD and implant were the type of child spacing information communicated to child-bearing women and perceived these type of child spacing information with apprehension and suspicion. This study posit that for a sustained acceptance and use of child spacing information there is the critical need for policy makers and information professionals to design child spacing information services based on the social and cultural dynamics of the Kusfa community Zaria city.

Keywords: Child Spacing Information; Child Spacing Information Behaviour; Health Information Behaviour; Information Resistance

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1. Introduction

Child spacing information is seen as a basic component of reproductive health and the best way to protect the mother against the danger of loss of life (Renne 2006; Zinser 2009). Child spacing information can significantly reduce maternal morbidity and mortality rate, prevention of high risk and or unwanted pregnancies that can be terminated through risky abortions, increase positive impact on women's overall health, and quality of life (Agudelo, 2004). However, despite all the above mentioned benefits in many developing countries, studies indicated that, low or non-use of child spacing information is the major causes of complication during pregnancy and childbirth (Bawah 2002; Davanzo et, al. 2004; Orji 2006). Complications during pregnancy and childbirth are leading causes of maternal mortality for women in most developing countries including Nigeria (McGinn, 2010).

According to Ahmed et al. (2012) child spacing information is any information communicated to the public about waiting period in-between pregnancies or births, the recommended period is 36-month. Meanwhile, a woman's body needs to rest following pregnancy through the use of child spacing method. In the same vein, MrGinn (2010) outlined the following as a child spacing methods: rhythm method, male or female condom, pill, injectable, implants, IUD, female sterilization, breastfeeding method. According to M-athe (2011) child spacing information described what each child spacing method is, how it works, how effective it is at preventing pregnancy, what the user can expect, how to use the method correctly and signs of complications to watch out for. He further stated that, individuals who wish to adopt child spacing methods are advised to consult medical practitioners in identifying contraceptive methods that will suit their conditions.

Also, it has been estimated that over 8.7 million women experienced complications during pregnancy and childbirth each year, worldwide. Of these figures 4.9 million women die, with approximately 79% of these death occurred in Africa

(NDHS, 2013). William (2010) lamented that Nigeria accounts for about 41% of all maternal mortality. To reduce maternal mortality scholars have approached the problem from health perspective and recommended the use of child spacing methods (Feyisetan 2000; Bawah 2002; Oyediran and Schoemaker 2005). While the health perspective has really, helped shaped better understanding of the problem by providing sufficient and effective child spacing methods, there are also still quite a large number of maternal deaths that occurred every year. Thus, in order to have an in-depth understanding of this maternal mortality, there is a compelling need to understand and find out the type of child spacing information communicated to child-bearing women in polygamous homes in Kusfa Zaria and their perception on each type of child spacing information communicated to them.

2. Statement of Problem

Maternal mortality is a major public health problem. Globally, it is estimated that over 8.7 million women experienced complications during pregnancy and childbirth each year. Of these figures 4.9 million women die, with approximately 79% of these death occurred in Africa (UNICEF 2015; NDHS, 2013). Nigeria accounts for about 41% of all maternal mortality (WHO,2015; William 2010). Also in Kaduna State, it was reported that over 12,944 women die annually, due to pregnancy-related complications (KSRHS 2014, NURHI 2015). Among the regions with high number of maternal deaths in Kaduna State is Zaria, which top the list with 6,100 cases. To reduce maternal mortality, scholars have recommended the period, techniques and strategies for a sustained acceptance and use of child spacing (Davanzo et, al. 2004; Orji 2006; Zinser 2009; MrGinn 2010). The recommended period is 36 months through the use of child spacing techniques or methods such as: implant, injection, pills, sterilization, vasectomy etc. (M-athe, 2011, Ahmed et al., 2012).

Moreover, National and International agencies in collaboration with Federal and State Governments have been spending huge amount of m-

oney to sponsor series of studies on child spacing and the findings are being disseminated through different mass media for the public to utilise it in order to reduce maternal deaths (KSRHS 2014). In spite of this laudable investment by the Agencies and Governments at all levels, maternal mortality still persist, in Kaduna and Zaria in particular. However, majority of the studies sponsored and recommended the use of child spacing to reduce maternal mortality are presented in isolation without the use of any theoretical framework. Using Chatman's (2000) Theory of Normative Behaviour as a theoretical framework, this study was set out to explore the perception of child-bearing women on child spacing information in polygamous homes in Kusfa Zaria City.

Research Question

The following questions guided the study:

1. What types of child spacing information are communicated to child-bearing women in Polygamous Homes in Kusfa Area of Zaria City?
2. What are the perceptions of child-bearing women in polygamous homes in Kusfa Area of Zaria city about the child spacing information?
3. How does Chatman (2000) theory of normative behaviour explain perception of child-bearing women on child spacing information in polygamous homes in Kusfa Area of Zaria City?

Description of the Study Area

The study was conducted in Kusfa Area of Zaria City. Kusfa, have population of 266 polygamous houses with 2,115 child-bearing women. Of these population 75% of the females were drop out at Primary six, some at JSS3 and got married at the age of 15, 16, 17 (Nuhu Dalibi Kusfa Zaria, 60yrs interview, 2nd January, 2017; NPC 2006). More so, the people of Kusfa Area of Zaria City are predominantly Hausa speaking Muslims, religious scholars and Muslim clerics (Umaru Malamin Mata Kusfa Zaria, 67yrs. Interview, 3rd January, 2017). Traditionally, nuclear and extended families are also very important in their culture, and relatives often live in close proximity.

However, in polygamous homes in Kusfa Area

of Zaria City bearing children is considered very significant, for many reasons. Infact, a woman's status is associated with motherhood. The more number of children a woman has, the more status she commands in the polygamous homes. On the contrary, childlessness is considered to be a social and cultural challenge. Thus, large families are common in polygamous homes in Kusfa Area of Zaria City (Sheik Usman Kusfa Zaria, 58yrs. Interview, 3rd January, 2017). Furthermore, many values and beliefs of child-bearing mothers in polygamous homes in Kusfa Area of Zaria City have cultural and religious origins, which have implications for child spacing use. It is for this reason that a woman cannot voluntarily use child spacing information as her status might be jeopardized if she should do so.

Theory of Normative Behavior

It is always important that a good research is linked to theory. This is because theory is used for choosing a methodological approach as well as for developing analytical tools for the research. There are a number of theories that can be used to explain the perceptions of people or group of people in a small world. In this study however, chatman's (2000) Theory of Normative Behaviour would be used to aid in the choice of the methodology and also in the analysis. The significance of the theory to the study and previous studies that used the theory will also be explained.

The purpose of Chatman's theory of normative behavior (2000) is to explain the routine events that occur in a small world (Chatman, 2000). Small worlds is described as "social environments where individuals live and work, bounded together by shared interests and expectations, information needs and behaviors and often economic status and geographic proximity as well" (Burnett, Jaeger, and Thompson (2008)). Chatman's theory of normative behavior comprises of four constructs: social norms, world view, social types and information behavior (Chatman, 2000).

Social norms: “Social norms are the standards with which members of a social world comply in order to exhibit desirable expressions of public behaviour” (Burnett, Besant and Chatman, 2001).

Worldview: Worldview is “a collective set of beliefs held by members who live within a small world” (Chatman, 1999). It is a taken-for-granted attitude which determines what events members of a small world must ignore or pay attention to (Chatman, 2000)

Social types: Social types “refers to the ways in which individuals are perceived and defined within the context of their small world” (Burnett and Jaeger, 2008). Chatman (2000) explained that this classification of persons is based on their behaviours and the roles they play within their small world.

Information behaviour: Information behaviour is defined as “a state in which one may or may not act on available or offered information” (Burnett, Beasant, and Chatman, 2001).

Previous studies that adopted theory of normative behavior

Several scholars adopted theory of normative behavior. This section discussed some of the previous studies that adopted Chatman’s (2000) theory of normative behavior.

A study conducted by Markwei (2013) carried out a research titled: Everyday Life Information Seeking Behaviour of Urban Homeless Youth in the market area of Accra, Ghana. Using Chatman’s (2000) theory of normative behavior, the research investigated the information needs, sources of information, patterns and problems encountered in information seeking of urban homeless. It determines how libraries and other stakeholders can meet the information needs of urban homeless youth. The study used qualitative methodology.

Another study conducted by Musa (2013) investigates the reason for resistance to polio immunization in Kano, Nigeria. From a social constructionism perspective and Chatman’s theory of normative behavior as a theoretical frame-

work. The study used qualitative research methodology.

Oltmann (2009) this study analyzes the research area of information access within library and information science and significant relationship between information access and information ethics. The study reviews the theory of normative behavior developed by Chatman (2000). The study adopted qualitative methodology. Because TNB is a rare example of a theory developed in LIS research and directly applied to information access, the author finally concludes with a critical assessment of the conceptual, methodological, and theoretical state of affairs and suggests some future directions for additional research.

Research Methodology

This study adopted interpretative research paradigm. In line with the research philosophical paradigm, interpretative research paradigm usually adopted qualitative research methodology. According to Musa (2013) qualitative research methodology refers to the method of inquiry employed to gather an in depth understanding of phenomenon and human behaviour especially feelings, perceptions or opinions, and the reason that governs behaviour. Qualitative research was considered to be appropriate, this is because the purpose of this study is to gain a thorough understanding of the perception of childbearing women on child spacing information in polygamous homes in Kusfa Area of Zaria city. Research design adopted for this study was case study. According to Akuezilo (2004) a case study method selects a small geographical area or a very limited number of individuals as the subjects of study. Participants from this study were recruited through purposive sampling technique. In purposive sampling, few participants are deliberately selected to reflect particular features of community within the population (Markwei 2013). Purposive sampling is appropriate for this study, particularly criterion purposeful strategy, because it offers a frame for selecting relevant polygamous homes that will uncover the perception of childbearing women

on child spacing information in polygamous homes in Kusfa Area of Zaria city. The respondents for this study were selected based on the following criteria: Must be a childbearing women, aged 20-40. Living in polygamous homes in Kusfa area of Zaria city and must have a minimum number of four children over the last six years. These indicated that the study focused on childbearing women who have never used child spacing information. Based on the above criteria, twelve (12) respondents in five (5) polygamous homes out of 266 polygamous homes met the study criteria and hence formed the sample for the study.

Data Collection

Data from this study were collected using in-depth interview. In-depth interview was forward to be a suitable for this study because it allow for asking open ended questions to a small sample and exploring individual experiences, perceptions or behaviours. A permission to conduct the interview was approved by the village head. Two women were used as a research assistant. The research assistants were trained and retrained on how to collect the data. This provided the researchers with rich in-depth information. By the time 12 participants were interviewed, the data was saturated. Marshal (2006) explains data saturation as the point when there are no new categories, themes, or explanations emerging. The data were transcribed for analysis.

Data Analysis

Data from this study were analysed using inductive approach. According to Graneheim and Lundman (2004) inductive approach is a process of condensing raw textual data into a brief summary format and establish clear links between the evaluation or research objectives and the summary findings (themes) derived from the raw data. The process of inductive analysis according to stages suggested by Graneheim and Lundman (2004) were adopted in this study.

Findings

1. Availability of Child spacing information

This category pinpoints the various types of Ch-

ild spacing information available and communicated to child-bearing women in polygamous homes. It is generated from one main sub-category: Type of Child spacing information. These are explained below:

Type of Child spacing information: These comprise information on the following methods: pills, IUD, implants, injections and condom. Of all the methods listed, pills and injection were the most commonly identified methods and communicated to them, as revealed by the following respondents: *"pills and injection are the most popular type of Child spacing information communicated to us in this community through radio, TV and health care providers"* other methods such as IUD and implants are periodically communicated to them on specific days, as explained by the following respondents: *"IUD and implants were normally communicated to us in this community through radio and TV on Wednesday and Friday weekly.....respondents further said.... in hospital all the four methods are communicated to us during health talk at the clinic"*

2. Fears and misinformation related to Child spacing methods

This category provides some explanations quotes from the participants' responses on the fear and misinformation attached to each type of Child spacing method. It is divided into two main sub-categories: fear of infertility and fear of side effects. Participants linked many of these fears to some of the Child spacing methods, as detailed by these respondents:

"there is some method that are not good which my mother told me not use it (implant and condom) because there will come a time when i might need to have children and i might not be able to get one in future"

Fear of Infertility about the Child spacing methods: This category was mentioned by the respondents as the possible consequences of most methods, it was strongly expressed around injectables, pills and intrauterine device (IUD). Participants believed that it was possible that Child spacing methods could cause permanent

infertility or reduce one's childbearing capacity, limiting the number of children they were able to conceive in their lifetime, as revealed by these respondents

"A device to stop births means if you want to stop giving birth permanently you can use Child spacing method, which does not fit with our cultural norms...the respondents further said... my mother-in-law told me if i use Child spacing methods it will make me sick and cause severe bleeding that can lead to die"

"My mum told me a story of her sister, she used injection and it doesn't work, later on she used pills her ovary will become dry and then she will not be able to have children....she then later die" Similarly, the intrauterine device (IUD) expressed by respondent it could shift during sexual intercourse; with serious implications for birth outcomes. Shifting of the method (IUD) would require surgery to remove, an outcome that was not only undesirable because of the invasive procedure, as elucidated by this respondent: *"I heard that if you want to use IUD you must go for an operation to be inserted, then if complications arise during or after, another operation to remove it and there is possibility to die during the operation"*

Fear of side effects about the Child spacing methods: Participants expressed apprehensions about Child spacing use and perceived it as foreign objects that could disrupt the natural processes of the body and create harm, a common side effect from using certain Child spacing methods was interpreted by these respondents: *"I heard of women who got pregnant after using the injection and she had some difficulties during giving birth, difficulties such as Headaches and high blood pressure as a result of this obstacle, she had to go to the hospital and undergo an operation"* other participants refer their beliefs about Child spacing use, as revealed by these respondents: *"we heard and believed that taking the pill causes bad side effects such as, fever, stomach aches and weight changes and failure to menstruate regularly"* Others that

afraid for the implants below are some of their responses:

"For the implants i have heard people say that they get lost inside the womb, i also heard that there is a small operation and that is an issue itself because it leads to anemia, the women i knew is a service provider who used an implant and when she wanted to have a child she couldn't conceive... it got lost in the flesh until now she is barren" Another respondent affirmed that: *"I heard that injection causes tumors in the stomach and cervical cancer"*

3. Suspicion of western people

This category provides some narratives related to the mission of western nations in promoting the use of Child spacing. It is generated from one main sub-category, western conspiracy. These are explained below:

Western conspiracy: This sub-category comprised explanations of allegations by religious teachers, parents, partners and childbearing women that the mission of promoting the use of Child spacing is part of a Western strategy to depopulate Muslim through Child spacing methods. Childbearing women in polygamous homes they were often characterized as misled by religious teachers, parents and partners and warned them against the use of Child spacing. These are their stories in their own words: *"Really, our elders and religious teachers in this polygamous homes and community are doubtful about Child spacing, because it came from the Western people. We viewed with suspicion as nothing like Child spacing is expected from them towards us, though the information is good, but our Islamic teachers told us not to use Child spacing"*

"My father told me Child spacing came from the United States of America to reduce the Muslim population." Another respondents gave example of polio incident and linked it with Child spacing: *"our farther and Islamic teachers warned us against polio immunization they said, never allowed anybody to enter our house in the name of polio, the some also for Child spacing"* These respondents detailed that: *"I could re-*

membered our islamiya teacher (religious teacher) told us when Child spacing devices were first introduced, his Islamic teachers strongly opposed it and warned them against its use, the same he (Islamic teacher) told us not to use any Child spacing methods, it's a Western means of reducing the Muslim Ummah (Muslim people)."

This opposition was expressed for many years and it has gained popularity to childbearing women in polygamous homes, as explicated by the following respondents: *"some years back our Imams (Islamic Clerics) delivered favorable sermons on Child spacing during fasting period, he condemned the polio vaccine and linked it to Child spacing of the West to reduce the population of black or Muslim people and warned us, including our elders by saying don't allow your sons or daughters to use Child spacing in future"* However, childbearing women also expressed suspicion of Child spacing methods, viewed it as a plot by Western means of reducing the Muslim population, as explained by the following respondents: *"They do not like Islam and anything that will increase the size of Muslims worldwide. Respondent further said.....These are ways of declaring war on Muslims so we have to be careful about what we hear when it comes to Child spacing"* suspicion of western people lead to distrust in mass media and health care providers.

4. Distrust in mass media and health care providers in disseminating and promoting Child spacing information

This category provides some explanations for the perceptions and understandings of the childbearing women toward the Child spacing information disseminated to them through mass media and health care providers. It details negative feelings toward the technique used in communicating Child spacing information. It is divided into two main sub-categories: mistrust of mass media toward promoting Child spacing information, suspicion of health care providers toward promoting Child spacing information. These are explained below:

Mistrust of mass media toward technique used in disseminating Child spacing information:

This category explains the discomfort, mistrust and inappropriate with the techniques adopted by mass media in communicating Child spacing information. Data from this study indicated action of childbearing women when seen or hear any Child spacing information through T.V and radio, as revealed by these respondents *"The way T.V broadcast the information on Child spacing it is not proper and unreliable. Sometimes i use to turn off my T.V because i do not like it, if you see how to insert IUD in a woman body is not good at all, it is unbelievable, this is just American propaganda to reduce the population of Muslim ummah, but with God that will never happen."* Other respondents explained that: *"sometime during news hour they use to advertised Child spacing method, most especially on how to use condom we don't like it, a times we use to change channel because we are watching with our children and if our children know or accustomed on how to use condom they may probably use it and have sex with other people outside."*

In the same vein these respondents explained their perception toward promoting Child spacing through radio. *"Sometimes dramas are aired in the radio (nagarta) in order to enlighten people on this issue (Child spacing) but if you listen to the drama wisely, you will not even believe what they said, because they are not putting it in a proper manner, sometime i use to off my radio if i hear anything related to Child spacing, since they do not want us to have a lot of children"* Another respondent explained that: *"I totally have doubt about the way Child spacing is communicated through radio, because there is no way or chance to ask question if you did not understand, they just advertised the way they like, I think this is just a plane by the western people to collaborate with the mass media workers to reduce Muslim"*

Suspicion of health care providers toward the technique used in communicating Child spacing information: This category explained

perceptions from participants who learned about Child spacing information during health talk at antenatal care visit and immunization when they brought to their babies in for a check-up at the clinic. Respondents expressed irrelevant and discontent with the techniques adopted by health care providers in communicated Child spacing information, as revealed by these respondents: *"I learned the information during health talk at the clinic most of the workers are not open their mouth to talk loudly you can't hear what they are saying and you cannot understand."* Other respondents explained that: *"I don't like the way this people (health care providers) communicated to us, because they are talking to us in public instead of talking to us individually "kasan" (you know) is a private issue....respondent said am not trust them"*

"I leaned the information on Child spacing methods at the hospital during immunization period from one the health care provider, but i don't even listening to her, i don't like it because the way she is talking to us shown that she ain't no respect to elders may be she doesn't have elders at home.....respondents further said my husband told me it's just a planned to reduce Muslim by the western people"

Discussion of Findings

This section discussed the research findings under the major category emerged including pertinent quotes from the respondents. The findings were arranged in line with the research question asked in the study.

Type of Child spacing information communicated to child-bearing women in polygamous homes in Kusfa Area of Zaria City

Broadly speaking, findings from this study indicated that most of the child-bearing women interviewed are aware of the Child spacing information communicated to them and how to use it, but due to religious and cultural norms which promote large families and in some cases forbid the use of Child spacing information. Not surprisingly, of all the methods listed only pills, condoms and injection were the most commonly identified methods and popular which is the

only type of Child spacing information communicated to them frequently through radio, TV, other methods like IUD and implants are the type of Child spacing information communicated to childbearing women periodically on specific days, normally weekly between Wednesday and Friday. The finding also indicated that, pills, condoms, implants and injections were always available and communicated to childbearing women during health talk at antenatal care visit.

Perceptions of Child-bearing Women on Child spacing Information in Polygamous Homes in Kusfa Area of Zaria City

Findings from this study indicated that child-bearing women in Kusfa Area of Zaria City perceived Child spacing methods with apprehension, as something that can be used to stop giving birth permanently. Meanwhile if a person wants to stop giving birth completely they can use Child spacing method. The findings also revealed that child-bearing women perceived and viewed Child spacing methods as a foreign object that could disrupt the natural processes of the body and create harm. It was also revealed that, most of the child-bearing women due to fear of the side effects and infertility have never had experience of Child spacing methods. They rather heard from other women who experienced, a certain problem during the time they were using any child spacing method, regrettably such damaging and discouraging information has reinforced the disapproval of any Child spacing method.

Also, it was indicated that religious teachers, community elders, parents and childbearing mother's partner were mistrust the western country and therefore, perceived the mission of introducing and promoting the use of Child spacing as part of the Western conspiracy to depopulate Muslim societies. This perception has greatly constituted the reason why child-bearing women in Zaria City viewed Child spacing information with suspicion. Finding from this study also revealed that, when Child spacing devices were first introduced, a large number of

Islamiya teachers (Islamic teachers) strongly opposed it and warned child-bearing women against its use. This opposition were been voiced for many years and it had gained popularity within the child-bearing women in polygamous homes Kusfa Zaria city. They informed child-bearing women that it is a foreign policy of the Western nation to stop us from producing more children, believing that, they have a hidden agenda.

Furthermore, it was revealed that child-bearing women were not comfortable with the technique adopted by health care providers in communicating the use of Child spacing methods in public during health talk at antenatal clinic. They held the view that such campaign ought to be a private talk instead of public as many of them could not pen their mind and talk in the public. More so, it was evident that the norms of child-bearing women in polygamous homes in Kusfa Zaria city do not favor open discussion of sex matters in public. Even though child-bearing women dislike anything that will promote the use of Child spacing methods believing that it is a Western conspiracy, this is why child-bearing women viewed health care providers as an agent of western nation with no credibility.

Finding from this study also indicated that child-bearing women in polygamous homes have shown negative feelings and mistrust toward the technique adopted by mass media in promoting Child spacing information, especially, on how to insert IUD and implant in a woman body. Similarly, child-bearing women were not comfortable with the technique adopted in disseminating and promoting Child spacing information through radio, complaining that, they were not placing it in a proper manner and there is no chance to ask a question. In both instance child-bearing women in polygamous homes habitually, dislike anything that would promote the use of Child spacing methods. They believed that, health care providers and mass media were mediators of western-base agencies who do not like Islam and anything that will increase the size of Muslims in Nigeria.

Explanation of the constructs of Chatman's (2000) theory of normative behavior about utilization of information on Child spacing among childbearing mother in polygamous homes in Kusfa Area of Zaria city

Chatman's (2000) theory of normative behaviour comprises four constructs, social norms, worldview, social types and information behavior. In this study, only two constructs (worldview, social types) was used to explain the perception of child-bearing women on Child spacing information in polygamous homes in Kusfa Zaria City. Moreover, the theory helped influences an individual's approach to understanding, making sense and use of information.

Worldview: Worldview is "a collective set of beliefs held by members who live within a small world" (Chatman, 1999). She further mentioned that, a worldview provides a sense of belonging and allows members to adopt a community approach to activities and events in their small world. Finding from this study revealed that child-bearing women in polygamous homes have a worldview rooted in the collective understanding and believed that Child spacing methods is a foreign objects that could disrupt the natural processes of the body and create harm. More so, it is possible that Child spacing methods could cause permanent infertility or reduce one's childbearing capacity, limiting the number of children they were able to conceive in their lifetime. The understandings of the child-bearing women in polygamous homes about Child spacing methods guide their worldview and they perceived information on Child spacing as irrelevant to their need in everyday life information seeking behavior. Chatman (1999) contended that members of a given small world would cross information boundaries only if "there is a collective expectation that the information is relevant".

More so, Religious teachers, partners and parents in polygamous homes Kusfa Zaria city, discouraged and warned child-bearing women from Child spacing use. They informed child-bearing women that it is foreign policy of the

Western people to stop us from producing more children. This suspicion about the Western people and the fear about the Child spacing methods, shared to child-bearing women from their religious teachers, parents and partners, are likely to adopt it and pass it on, to other young male and female in polygamous homes in Kusfa Zaria city in order to maintain their sense of belonging in their small world. Consequently study established the importance of the worldview in influencing or shaping the information behaviour in the small world of the child-bearing women in Kusfa, Zaria city.

Social types: social types “refers to the ways in which individuals are perceived and defined within the context of their small world”. The process of social typing according to Burnett and Jaeger (2008) occurs both within the boundaries of the small world and the society at large. They also suggest that the most important members of the small world are the insiders. Based on these explanations the two main groups of social types identified in the study are insiders and outsiders. The insiders are the child-bearing women, islamiya teachers (religious teachers) parents and partners. The outsiders include mass media including (agencies) and health care providers. The Chatman, theory of normative behaviour suggests that members in a small world would readily accept and disseminate information from a social type whose behaviour and connections or interactions within the small world are desirable (that is they conform to the worldview and norms within their world). The opposite is also true. Members of a small world would not willingly accept or believe any information coming from a social type whose behaviour and interactions are considered or deemed undesirable or whose behaviour are in conflict with their norms and worldview (Burnett et al., 2001). Findings from this study indicated that child-bearing women in polygamous homes readily accept and share information (such as information about the side effects of using Child spacing methods, infertility and also information about the western people, means of

reducing the Muslim Ummah) from their partners, relatives, parents and religious teachers based on their collective worldview, credibility and trust.

However, the findings of the study revealed that child-bearing women in polygamous homes in Kusfa Area Zaria City do not accept information from health care providers, mass media and sponsors. They perceived them as outsiders with ‘undesirable behaviors’ such as the technique adopted by health care providers and mass media in disseminating or communicating the use of Child spacing methods. In addition child-bearing women in polygamous homes also viewed health care providers and mass media as outsiders with suspicion of nothing good to expect from them. As Chatman (1999) explained the role of social types, i.e., that “most of us tend to reveal and exchange information among peers of our own type”.

Conclusion and Recommendation

Based on the findings of the study, it could be concluded that child-bearing women are living within the chatman (2000) notions of small world context. Small worlds is a social environments where individuals live and work, bound together by shared interests and expectations, information needs and behaviors. They also suggest that the most important members of the small world are the insiders. Based on these explanations, child-bearing women lived within a highly pro-natal context and many perceived the influential people in their lives and attached many positive values to large family and procreation, which were deeply rooted in socio-cultural practices and religious beliefs. These socio-cultural practices and religious beliefs consequently, made child-bearing women to stereotyped and consider the information on Child spacing communicate through mass media and health care providers as a Western conspiracy arrived at reducing the Muslim population. Nonetheless, this study also concluded that child-bearing women consider Child spacing methods as foreign objects that could disrupt the natural processes of the body and create harm.

This study posit that for a sustained acceptance and use of Child spacing information there is the critical need for policy makers and information professionals to design Child spacing information services based on the social and cultural dynamics of the Kusfa community Zaria city.

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