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Nigerian international migrants: A qualitative discourse on fertility preferences and outcomes

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Abstract

The movement of people across international boundaries have been recognized as having serious implication for life-style that migrants experience and manifest after returning from sojourning. This was a qualitative survey of female Nigerian international migrants and their fertility preferences and outcomes. The study explored how the role of length of stay abroad affected their fertility preferences, age at migration and fertility preferences and outcomes and the effect of culture on fertility preferences and outcomes. Results indicated that the length of stay created a change in the migrant's fertility preferences adopting the fertility regime of the country they migrated to. Age at migration was also recognized as playing a significant role in changing the fertility preferences and outcomes of migrants. It is therefore pertinent to note that migration plays a dominant role in changing the fertility preferences of migrants. (Afr J Reprod Health 2022; 26[10]: 83-93).

Keywords: International migrants, fertility preferences, outcomes, Nigeria

Résumé

Le mouvement des personnes à travers les frontières internationales a été reconnu comme ayant de sérieuses implications pour les styles de vie que ces migrants expérimentent et manifestent après leur retour de séjour. Il s'agissait d'une enquête qualitative sur les migrantes internationales nigérianes et leurs préférences et résultats en matière de fécondité. L'étude a exploré comment le rôle de la durée du séjour à l'étranger affectait leurs préférences en matière de fécondité, l'âge au moment de la migration et les préférences et les résultats en matière de fécondité. Les résultats ont indiqué que la durée du séjour a créé un changement dans les préférences de fécondité des migrants adoptant le régime de fécondité du pays vers lequel ils ont migré. L'âge au moment de la migration a également été reconnu comme jouant un rôle important dans l'évolution des préférences en matière de fécondité et des résultats des migrants. Il est donc pertinent de noter que la migration joue un rôle dominant dans la modification des préférences de fécondité des migrants. (*Afr J Reprod Health 2022; 26[10]: 83-93*).

Mots-clés: Migrants internationaux, préférences en matière de fécondité, résultats, Nigeria

Introduction

Migration (human) is the movement of people from one place in the world to another for the purpose of taking up permanent or semi-permanent residence, usually across a political boundary. Migrations have occurred throughout human history, beginning with the movements of the first human groups from their origins in East Africa to their current location in the world. The relatively permanent movement of people across territorial boundaries is referred to as *in-migration* and *out-migration*, or *immigration* and *emigration* when the boundaries crossed are international. The place of in-migration or immigration is called the

receiver population, and the place of out-migration or emigration is called the *sender population*¹.

The distinction between internal and international migration is crucial because they happen for different reasons. Structural barriers are more likely to impede the mobility of a potential international migrant than an internal migrant, international migration involves more administrative procedures, greater expenses, and more difficulties associated with obtaining employment, accessing state services, learning a new language, and the likes. This is what the motivations behind international migration are usually stronger than those behind internal migration². Migration occurs on different scales:

intercontinental (between continents), continental (between countries on a given continent), and interregional (within countries). One of the most significant migration patterns has been rural-urban migration—the movement of people from the countryside to cities in search of opportunities. While there are different potential systems for categorizing international migrants, one system organizes them into nine groups: temporary labour migrants; irregular, illegal, or undocumented migrants; highly skilled and business migrants; irregular migrants; refugees; asylum seekers; forced migration; family members; return migrants; and long-term, lowskilled migrants³. These migrants can also be divided into two large groups, permanent and temporary. Permanent migrants intend to establish their permanent residence in a new country and possibly obtain that country's citizenship. Temporary migrants intend only to stay for a limited period of time, perhaps, until the end of a particular programme of study or for the duration of their work contract or a certain work season. Both types of migrants have a significant effect on the economies and societies of the chosen destination country and the country of origin.

Migration is considered one of the defining global issues of the early twenty-first century, as more and more people are on the move today than at any other point in human history. In the twentyfirst century, the movement of people will become even more significant as a result of the following factors: economic liberalization, economic decline, demographic changes, and emergence of "migrant networks', emergence of transnational migration and because few countries manage migration effectively⁴. According to⁵ the, the number of international migrants was estimated at 214 million in 2010. If this number continues to grow at the same pace as during the last 20 years, it could reach 405 million by 2050. While there are several factors influencing migration, contemporary migration predominantly is economically motivated.

Migration in Africa is dynamic and extremely complex. ⁶captured some new and important trends associated with Africa Migration in recent decades. He notes that the traditional pattern of migration within and from Africa — male-dominated, long-term, and long-distance — is increasingly becoming feminized. The relatively

new phenomenon of female migration constitutes an important change in gender roles for Africa, creating new challenges for public policy. Anecdotal evidence reveals a striking increase in migration by women, who had traditionally remained at home while men moved around in search of paid work. A significant proportion of these women is made up of migrants who move independently to fulfill their own economic needs; they are not simply joining a husband or other family members. The increase in independent female migration is not confined by national borders. This emergence of migrant females as breadwinners puts pressure on traditional gender roles within the African family.

along African men, with participate in migration as a family-survival strategy. The increasing scarcity of traditional male labour has also promoted new roles for the women they leave behind. As the job market in destination countries became tighter during the 1980s and 1990s, and remittances thinned out, many families had to rely on women and their farming activities for day-to-day support⁶. These women became the de facto resource managers and decision makers, particularly within the agricultural sector. The gendered division of family labour has also been upset by the loss of male employment through urban job retrenchment and structural adjustment, forcing women to seek additional incomegenerating activities to support the family.

In Africa, males outnumber females among international migrants. The proportion of females among international migrants in Africa has generally been lower than the average for the world as a whole. However, the proportion of females among international migrants in Africa has been increasing steadily and faster than that at the world level. By 2000, it was estimated that 46.7 percent of the 16 million international migrants in Africa were female; contrary to the 42 percent of 1960 when the number of international migrants on the continent stood at nine million. In 1960, Africa had the lowest proportion of females among international migrants in comparison to other major areas. For example, in 1960, 45 percent of all international migrants in Latin America and the Caribbean and 46 percent in Asia were female. By the proportion of females among international migrants in Asia (43 percent) was lower than that of Africa (47 percent) but in all

other major areas female migrants constituted more than 50 percent of the international migrant population⁷.

At the regional level, Southern Africa has traditionally had the lowest proportion of females among the international migrant stock (42 percent in 2000, from 30 percent in 1960). During the 1960s, the reliance of the coal and gold mines of the Republic of South Africa on male migrant workers was largely responsible for the strong predominance of men among international migrants. In the 1970s, however, the government of South Africa began to reduce the dependence of the mining sector on foreign labour, with the result that the number of temporary migrant workers employed by the Chamber of Mines declined steadily and the female proportion of the overall international migrant stock increased.

According to⁸ females were also underrepresented significantly among the international migrant stock of Eastern and Western Africa; they constituted 41 to 42 percent of all international migrants in those regions in 1960. However, the proportion of females in those regions increased steadily after 1960 to reach nearly 48 percent in both regions by 2000, a figure only slightly below the world average of 49 percent. In contrast, the proportion of females declined steadily among the international migrants in Northern Africa, passing from 49.5 percent in 1960 to nearly 43 percent in 2000. Decolonization and the continued dominance of temporary worker migration in that region probably accounted for such a trend. Lastly, in Middle Africa, the proportion of females among international migrants was estimated to have remained nearly unchanged since 1960 at close to 46 percent.

The West African sub-region shares similar characteristics. With the exception of Nigeria and Cote d'Ivoire, the scales of population and economy of countries are small; so is the private sector normally the engine of growth and employment generation. The limited capacity of the public sector to provide viable employment opportunities for the rapidly growing labour force results in large numbers of unemployed youths. The majority of the people live in rural areas, are illiterate and work on subsistence agriculture that employs about 70 per cent of the labour force.

West Africa has experienced a variety of migrations caused by population pressure, poverty,

poor economic performances and endemic conflicts. Contemporary patterns of migration in West Africa are rooted in socio-economic, political, historical and cultural factors which have shaped the direction of development and types of economic activities. Accoding to 9the main traditional countries of immigration are Côte d'Ivoire and Ghana. In the early 1970s, Nigeria also became a major migration-receiving country, encouraged by oil-led employment in various sectors of the economy. The major labour exporting countries have been and still are Burkina Faso, Mali, Guinea Conakry, Cape Verde and Togo. The situation in Cape Verde is unique in that the Diaspora outnumbers the resident population¹⁰. Senegal has been a labour-exporting and labourreceiving country. All these have changed in recent years. For instance, Senegal has become a transit country for migrants seeking to enter the European Union countries clandestinely via Las Palmas to Spain. Ghana and Nigeria, turned labour-exporting countries when economic conditions deteriorated in Ghana in the late 60's and in Nigeria in the middle 80's. Ghana is currently experiencing return migration of its nationals in response to the government's progressive economic policies, and political stability in the country.

Women migrants are drawn to the wage labour market (both formal and informal) as a survival strategy to augment meagre family income. Among the educated, emigration of unaccompanied married females has blossomed, this being a particular and recent phenomenon in the sub-region's migratory scene. Traditional maleshort-to-long-distance dominated migratory streams in West Africa are increasingly getting feminised. Independent female migration has become a major survival strategy in response to deepening poverty in the sub-region. The phenomenon of females migrating independently, even internationally, enables them to fulfil their economic needs rather than simply joining their professional women husbands: some emigrating from Nigeria, Senegal and Ghana leaving husbands behind to cater for their children. This development is a turnaround in traditional sex roles.

Commercial migration, a dominant feature of the migration configuration in the sub-region, is essentially female-dominated, helping to promote intra-regional trade and serving as the lifeline for small-country economies of especially Benin, Gambia and Togo. Outside the sub-region, it is essentially male dominated. Migrants from the Sahel, especially Senegalese and Malians, initially used to migrate to France, then to Zambia and Zimbabwe and now to South Africa and USA, non-traditional English-speaking destinations¹¹.

Trafficking in children from Togo, Nigeria and Mali to Cote d'Ivoire's plantation and as domestic servants in Gabon; and of women from Ghana, Nigeria, Mali and Sierra Leone as exploited sex workers in countries of the European Union has also taken root. Trafficking in girls is reportedly rampant in the so-called "Triangle of Shame", the Niger/Chad/Nigeria border. Hundreds of trafficked girls from Edo State, Nigeria, end up in the sex industry in Italy.

International migration in Nigeria predates the nation's colonization, irrespective of the difficulties encountered in classifying the moves as either internal or international and of getting accurate data¹² (Ishola, 2011). The problem arises from the fact that Nigeria could not have been identified as a nation because, in that era, different ethnic groups and/or nationalities lived under different kingdoms and empires within the geographical space now referred to as Nigeria. However, international migration was evident in the movements of indigenes that were involved or were victims of slave-raiding and slave trading, inter-ethnic conflicts and warfare. Also, legitimate trading, nomadic herding of livestock, and pilgrimage to religious places in the Arabian Peninsula, brought about diverse human mobility and migration within and across borders of existing empires and kingdoms. The dynamics of the unhindered spatial movements of people within and outside empires/kingdoms in Nigeria and Africa at large were encouraged by the lack of welldefined boundaries between existing empires and kingdoms.

Although Nigeria is traditionally an important destination for migrants in the subregion, there are more people emigrating from, than immigrating to, Nigeria. The net migration rate (per 1,000 people) has increasingly become negative in recent years, decreasing from -0.2 in 2000 to -0.3 in 2005. This trend is expected to continue. According to recent estimates, the net migration rate will decrease to -0.4 in 2010¹³

(UNPD, 2009). Estimates made by the Development Research Centre on Migration, Globalisation and Poverty (DRC), based on the 2000 Census Round, indicate that 1,041,284 Nigerian nationals live abroad¹⁴ (DRC, 2007). Most Nigerians abroad live in Sudan (24%), rather than the United States (14%) or the United Kingdom (9%). Many Nigerian emigrants also settle in neighbouring Cameroon (8%) or Ghana (5%)¹⁵ (Afolayan, 2009).

Although it is difficult to obtain information on the skills level of emigrants, there are some indications that the propensity to emigrate is particularly high among the highly skilled. According to the latest estimates in 2000, 10.7 per cent of the highly skilled population who were trained in Nigeria work abroad, mostly in Organisation for Economic Co-operation and Development (OECD) countries. In the United States and Europe, 83 per cent and 46 per cent, respectively, of the Nigerian immigrant population are highly skilled. On the average, 64 per cent of the Nigerian emigrant population have tertiary education¹⁶ (Docquier and Marfouk, 2006). In the medical field, 14 per cent of physicians who trained in Nigeria worked abroad, 90 per cent of whom live and work in the United States and the United Kingdom¹⁷ (Clemens and Pettersson, 2007).

There has been a marked increase in the number of Nigerians emigrating for educational purposes. From 2000 to 2006, the number of Nigerian students abroad more than doubled, from 10,000 to 22,000 (UNESCO, 2008). The majority of these Nigerian students (approximately 6,000) study at universities in the United States. Based on the past growth rates of student migration, some studies estimate that the Nigerian student population in the United Kingdom may increase from 2,700 in 2007 to 30,000 in 2030¹⁸ (Economist Intelligence Unit, 2009).

The pressure to emigrate is likely to continue, especially as a result of demographic factors. Despite declining official unemployment rates (from 12% in 2005 to 9.9% in 2008), labour supply is still outstripping demand and this is likely to continue in the near future. Nigeria is one of the ten most populous countries in the world and has one of the fastest population growth rates (2.38% in 2008)¹⁹ (Library of Congress, 2008). Unless the labour market is able to absorb the surplus labour

resulting from population growth, unemployment is likely to increase and give rise to more emigration.

Migration barely features in Nigeria's main development plans²⁰. The data sources available for the Migration Profile of Nigeria revealed that most of the data available are stock data and outdated. The 1963 and 1991 censuses and the 1991 Postcensus Enumeration Survey (PES), which were carried out by federal government institutions, do not always examine the standard four migration variables: place of birth; citizenship; previous place of residence; and place of residence at a prior fixed date. A relatively comprehensive data source for Nigeria was the 1991 PES of the National Population Commission²¹. There is no known collated official data on Nigerian emigrants from any of the Nigerian ministries or agencies. Embassies may collect data, but these are not made available to the public. Another challenge to developing a database is the issue of confidentiality in collecting and sharing migration data, as well as the lack of unified documentation at the local, regional and international levels.

The estimated numbers of international migrants were 447,411 (1990), 751,126 (2000) and 972,126 (2005). However, over the years, the net migration rate has been negative, at -0.2, -0.2 and -0.3 per 1,000 people in 1995, 2000 and 2005, respectively. In essence, these figures indicate that more people are moving out of the country as emigrants than those coming in as immigrants. This trend has been confirmed in recent years and will further increase in the future. In fact, in 2010, the net migration rate was projected to be -0.4 per 1,000 people. This percentage is quantifiable in 60,000 more emigrants than immigrants, which almost doubles the figures recorded in 2005²² (UNPD, 2008). There has been an increase in the total number of emigrants leaving the country. In 1991, 458,222 people left²³; more recently, the number doubled to 1,147,228 in 2005 and 2,637,164 in 2006^{24} . Type of emigrant from Nigeria are refugees/asylum-seekers, labour migrants, students, tourists and visitors, irregular migration.

Trafficking and smuggling in persons from Nigeria has taken varied forms and has been on the increase over the years. The trafficking network is based on a strong link, involving different categories of actors and contacts at the source, Nigeria, and destinations, mostly countries in southern Europe²⁵. Nigerian women and girls are trafficked to North Africa, Saudi Arabia and Europe, most notably to Austria, Belgium, Greece, Italy, the Netherlands, Norway and Spain. Edo State of Nigeria is a primary source area for women and girls who are trafficked to Italy for sexual exploitation (United States Department of State, 2008). Most of the trafficked women in Europe are believed to be from Edo State, with Italy being the most important destination for trafficked persons from Nigeria, followed by the Netherlands, Spain, Germany and Austria²⁶.

It is against this backdrop that the present study undertook to qualitative review the age at travelling abroad and its effect of fertility preference and outcome, migration abroad and fertility preference and fertility outcome, length of stay abroad, fertility preference and fertility outcome.

Methods

The study adopted a cross sectional descriptive survev method involving the qualitative instruments - Focus Group Discussion (FGD) and In-depth interview (IDI). Benin City - a city also called Edo - is the capital of and largest city in Edo State Southern Nigeria. Benin City is situated on a branch of the Benin River and lies along the main highways from Lagos to the Niger Bridge at Asaba and the eastern states and 200 miles by road east of Lagos. The city is also linked by roads to Sapele, Siluko, Okene, and Ubiaia and is served by air and the Niger River delta ports of Koko and Sapele. It has a population of 1, 085, 676²⁸. The city is approximately twenty-five miles north of the Benin River and it is the centre of Nigeria's rubber industry, while processing palm oil is also an traditional (en.wikipedia.org/wiki.Benin_City retrieved 19th April 2012). A total of 760 respondents were sampled. They consisted of 296 returnees. The returnees were divided into two categories: voluntary (210) and forced (86) returnees. The returnees were contacted on days of their regular meetings, workshop and seminars.

There was no evidence that voluntary returnees were organizing themselves at the state level. Consequently, a household survey was conducted, using the Enumeration Areas (EAs)

demarcated for the 2006 population census for the three Local Government Areas (LGAs) making up Benin City, to identify voluntary returnees. Ten EAs were selected systematically from two LGAs each and nine EAs from the third, making a total of 29 EAs for the three LGAs. A sample frame was drawn up from which eligible respondents were systematically selected. The snowballing technique was employed to make up for the difference.

research Seventy subjects, purposively, constituted participants/discussants for the FGDs. They were selected from the sampling frame generated from the register available in Idia Renaissance (IR), Committee for Support of the Dignity of Women (COSUDOW) and National Agency for the Prohibition of Traffic in Persons (NAPTIP). The hat and draw method was used to select the proposed number of respondents. The FGD was conducted in seven sessions, ten participants/discussants per session.

Fifteen knowledgeable officials (4 from IR, 3 from NAPTIP, 3 from COSUDOW & 5 from community leaders), identified through key informants were selected and engaged in IDI. The data collected through tape recording from FGD and IDI were transcribed and categorized. Manual content analysis was used to analyse the qualitative data.

Results

Age at migration, fertility preference and fertility outcome

Schaafsma and Sweetman ²⁹ demonstrates that timing of migration is central to understanding immigrant fertility. More specifically, he argues that estimates of immigrant fertility rates are dependent on *when*, in the life course, women are migrating. If child immigrants assimilate in the host country relatively fast through schools and peer groups, they will more likely adopt the fertility patterns of the native born. In addition, age at immigration may also matter if there are critical ages at which individuals learn a particular behaviour or skills that are crucial for assimilation^{30,31}.

These were the responses from an indepth interview

the environment has a way of influencing women who travelled abroad earlier in their age... One thing that can be noticed about African female migrants is that, wherever they find themselves, they still want to maintain their culture. However, that would not rule out traces of adaptation to foreign cultures or practices. Travelling earlier in their lives, migrant women usually prefer to have fewer children because of the environment they find themselves. The environment has a profound influence on their family size decisions; they prefer to have fewer children as against those who travelled older'. (IDI- Idia Renaissance).

I do know that when they get abroad, women who travelled at younger age are usually influenced by the Western ways of life and on return they usually decide to have limited number of children with no preference for the sex of a child. In a nutshell, those that travelled older, usually start having their children here in Nigeria before travelling abroad-(IDI-NAPTIP).

Since they travel abroad much early, younger migrants have higher tendency in imbibing Western culture/value of having fewer number of children than older migrant women. Sex of a child does not really matter to women who migrate at younger age as a matter of fact. But for those who travelled much older, you will discover that some of them have already gotten their children here and they have made up their mind and so they are not really bothered about what happens to them abroad because they would have gotten the number of children they want to have before migrating. (IDI- Community Leader).

Return migration, fertility preference and outcome

It is argued that children of a particular sex are often desired to provide certain utilities, such as financial, social, or psychological benefits. In less developed countries, for example, sons are presumed to have greater economic net utility than

daughters, since male offspring are better able to provide assistance in agriculture and to serve as the traditional social security system³². In a patrilineal society, like Benin City, sons are valued for continuing the family name. Daughters, on the other hand, should be more reliable in providing old-age assistance. In addition, they are frequently desired as help with household tasks or with the care of younger siblings. Blau³³ contends that even modernization does not necessarily "neutralize" sex preferences.

So, return-migrants who hitherto were not perturbed by the sex of children at destination can be pushed to reorient themselves as such, thereby accounting for larger family size. The finding here does not confirm diffussionism. According to this theory, migrants are expected to diffuse acquired fertility values at the place of origin after their return. On the contrary, the migrants were influenced instead by the dominant fertility behaviour at origin.

When I went to Spain two years ago, I discovered that people there do not give birth to many children. They only have two or three. So before I left for Spain, I had this idea that I will give birth to 5 children, because in my family we are 8 in number, so I thought that having many children was not a big deal. When I got back to Nigeria, with the influence I had there (in Spain)-seeing them having fewer number of children-made me decide to have 2 or 3 children because I cannot train a large number of children as a mother (FGD-Idia Renaissance).

Well, from what I have seen with those who have travelled out and return back, they don't really want to have too many children. They are always satisfied with small family size; they don't want too many children. And as for the sex preference, they don't really worry much. It can be all male or all female or even mixed, they don't care. They prefer having just 2 or 3 children (IDI- NAPTIP).

Length of stay

The interruption in childbearing caused by migration may be followed by accelerated fertility among migrants³². Evidence has been found of a

temporary disruption followed by rising fertility from studies focusing on the effect of migration on fertility for migration to developed countries^{34,35}. In the short run, fertility may follow the *disruption model*, which postulates an initial drop in couples' fertility around the time of migration (explained in part by moving costs) and fertility later adopted^{36,37}. The two models (disruption and adaptation) can be combined, and it may be possible to observe an initial drop in fertility at the time of immigration, followed by a subsequent rise in fertility bypassing that of natives and a gradual decline to converge to the host country's levels. The response maintained that:

When you stay longer abroad, your lifestyle will definitely change in fashion... That is, the way you think. People will even start mimicking you on return. On the aspect of fertility, for example, I was dating my boyfriend in Nigeria before I travelled and had planned having 5 children. My boyfriend would normally tell me that he wanted 3 children while I always wanted more. But abroad I got used to their lifestyle; the way they space their children for like 2 or 3 years which is quite different from how it is here in Nigeria. After giving birth, a year after, Nigerian women conceive again. So when I came back to Nigeria, my mentality changed and I decided to have 2 children because I will be able to take care of them properly. (FGD- Idia Renaissance).

Mode of return

Forced returnees who have children now are the ones who had children before travelling abroad for fear of not having children again when they return. This is due to the fact that they normally do not access medical care abroad. Most of them only come out at night for their business (prostitution) and also self-induced abortion whenever pregnant. They cannot afford to get pregnant let alone have children because it is bad for business. This category of migrants usually abuse contraceptive, which cause damage to their ability to have children in future. For this reason, they prefer to have children

before migration. And in most cases, they prefer having not more than one or two children (IDI- NAPTIP).

That is to say that forced returnees make fertility preparation before embarking on labour migration abroad. They ensure that they have one or two children first at home usually out of wedlock, in order to guarantee future procreation. They are aware of the medical hazards associated with and repercussions of prostitution, including abuse of contraceptives and self-induced abortion.

Disruption accounts for the difference in reproductive behaviour between forced returnees and voluntary returnees. Forced returnees usually face unemployment, separation from partner or spouse, exposure to all manners of sexual abuses and are more likely to be single for reason of their occupation (prostitution). All these influences can force reproductive decision down. According to one interviewee "... they usually have children before migration while those without children stay unmarried because of the stigma of their profession". Voluntary returnees, on the other hand, are mostly more economically independent and are more likely to possess legal migration documents. They are more likely to have stable family life than forced returnees.

Outcome

Of course when returnees decide to have a certain number of children, at the end of the day, majority of them stick to it and achieve it. Although some of them would still be influenced by our African mentality. For instance, mother in-law, siblings and friends may influence them to have more children for fear of the unknown. While some bow to pressure, majority of them do not (IDI- Idia Renaissance).

And because they are mostly financially independent, they easily stick to their fertility preference regardless of their male partners' decisions. They do not consider husband as a necessity apart from being partner in procreation (IDI- NAPTIP)

In other words, despite social pressure, most migrants still continue to stick to their fertility decision for smaller family size, especially because they are usually financially independent. Male role in this decision is minimal, since male partners are considered as mere partners of procreation.

According to Nauck³⁸, fertility preference, conditioned by a combination of background factors, constitutes causal precursor contraceptive use, while the latter is the implementing mechanism for translating existing preference into actual fertility. Thus, preference for family size drives contraceptive use and inversely relates to fertility outcomes. Data on the difference in contraceptive knowledge and use show that respondents whose knowledge of family planning methods was high also demonstrated higher contraceptive use, which is a factor in fertility delay and decline for women generally.

This unusual relationship between migration and fertility outcomes in sub-Saharan Africa has been predicted by Kulu ³⁹

The lower fertility rates among better educated and urban women are primarily caused by later age at first union and by higher prevalence of contraceptive practice. However, higher levels of education and urban residence are also associated with shorter durations of postpartum abstinence and breastfeeding and perhaps with lower levels of pathological sterility. This tends to offset the fertility-inhibiting effects of later marriage and greater extent contraceptive practice. In fact, this offsetting effect can be so large as to result in a rise in fertility with increasing education in some strata.

Corroborating this fact, an IDI interviewee observed that:

Because they have lived in the western society, their behaviour at that initial time of their return is influenced by what they have experienced at the other end. But with time when they are fully reintegrated back into the society of origin, then one may not be able to differentiate between those who have lived abroad before and those who have never migrated (IDI- NAPTIP).

That is, the influence of social milieu in the acculturative process of returnees is forceful and, perhaps, inevitable. This means that, with time and

regardless of social context, female migrants change their fertility behaviours in line with the social environment they find themselves, whether destination or origin.

The research investigated why reasons why returnees desired larger family size than non-migrant and yet have smaller family size. An intervening variable - contraceptive use - was discovered to mediate between fertility preference and actual fertility outcome.

The qualitative data (IDI) also lend credence to this revelation:

Returnees who have travelled abroad are very used to family planning methods and, you know, in the Western countries they have many options. There are various options for family planning available and are very comfortable, easily accessible abroad. ...here (Nigeria), we have various options too, but we hardly use them. Most migrants don't want to get abroad and start nursing children. They are mostly abroad for business and so they are very used to using family-planning methods to prevent pregnancy.

It's very clear that women who haven't travelled before, though having good knowledge of family planning methods, they don't normally use them as much as who have travelled abroad before...Those who have travelled before have a reason for going and then, they really want to stick to their goals, but women here (Nigeria), especially young ones usually do not just go to the clinic to request for contraceptives. This is especially true for unmarried women. Married women here in Nigeria usually have good knowledge of family-planning methods, but are mostly deterred by the belief that family planning has great effect on childbearing. This is why you see Nigerian young mothers conceiving six months after having a child delivery. Some after one year, especially those who have not travelled abroad. Unlike migrants, non-migrants are so scared of effect of family-planning methods because they have so many misconceptions about these methods. But those who have lived

overseas before seem to be very enlightened and they are not scared of the effect of any contraceptives. (Community leader-IDI)

Evidently, from the foregoing IDI report, contraceptive options are equally available at place of origin as much as the destination. Also, knowledge of these family-planning methods is the same for migrants and non-migrants. However, women at destination are more likely to use these various options than those at origin. Non-migrants and unmarried women are less likely to patronize clinic for the purpose of getting contraceptives than migrants and married women.

Conclusion

While migration is a potent determinant of low fertility owing to the simultaneous working of acculturation and disruption effects, international migration reduces actual fertility outcomes by inducing better contraceptive knowledge and use. However, it is important to note that fertility behaviour is dynamic and changes from one social milieu to the other as a result of exposure (and or re-exposure) to different fertility values. Women who returned with preference for smaller family size showed propensity to revert to large family size preference which is dominant at place of Because fertility behaviour constantly changes with social environment, migrants are less likely to become change agent to place of origin as per fertility values as assumed by the study's theory. Consequently, deliberate intervention would be required to enable returnees retain the fertility behaviour they acquired abroad.

Recommendations

Efforts to promote an official desired family size should be targeted at women generally (migrant and non-migrant) since, as indicated from the study, returnees will normally re-acculturate to dominant fertility behaviour after their return. As it is today, fertility remains high in Nigeria and stood at 5.7 children on the average, about 1.8 children above nationally desired fertility for the country. High fertility poses serious danger to the quality of life for people and jeopardizes the ability of future generations to meet their own needs⁴⁰. To reduce the total fertility rate therefore, policy maker and

change agencies must direct more efforts to promoting programmes and encouraging preference for smaller family size and adequate child spacing, through the use of family planning methods especially modern methods. Knowledge on modern method for preventing and delaying pregnancy should be increased through education. The subject can be included in schools curricula, sermon in religious institution and topics in social and cultural forums. These methods should be made available by subsidizing the cost and also made easily accessible especially in areas where unmet need for contraceptive is high. Effort should also be made to re-orientate women particularly younger and unmarried ones who feel ashamed to purchase or use contraceptives.

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