

Male Involvement in Childcare: A Qualitative Exploration of Men's Opinion in Nigeria

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ABSTRACT

Background: Traditionally, women assume the sole responsibility of improving child health. The patriarchal nature of the African society gives men more socioeconomic power and control at home, making the importance of investigating male involvement in child-care practices a priority. This study explored the opinions of community dwelling fathers on male involvement in child-care practices.

Methods: A community-based study was carried out among fifty-nine married men aged 21-49 years in Sepeteri, Saki East LGA, Oyo State. Eight focus group discussions (FGDs) were conducted using a FGD guide. We explored the knowledge of childcare practices, men's roles in childcare and readiness to partake in childcare practices among the participants. The resulting data were analyzed thematically, using direct manual content analysis.

Results: Eight FGDs were conducted among 56 married men, 50 of the respondents believed that mothers are responsible for taking care of the children while men have to provide money and shelter for the family. Willingness to participate in childcare practices was low due to some societal perceptions around male involvement in such activities. However, a few respondents agreed to secretly helping out with household chores.

Conclusion: Male involvement in childcare practices was observed to be poor among the study group. To optimize child health and welfare in our society, there is a need for health education and health promoting-interventions that will enable men participate in childcare practices.

Keywords: Child Care, Family, Roles, Male Involvement, Nigeria

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Introduction

Childcare refers to the provision of time, attention, and support to meet the physical, mental, and social needs of a growing child in the household and community (1). Care practices necessary for good growth and development in children under the age of 5 years include care for women; young child feeding, food preparation, personal hygiene practices, and home childcare practices (2). These activities require human, economic, and organizational resources and support from the family and community (2, 3). Although it is usually the mothers who are largely concerned and involved in household chores and child-care activities (4, 5), it is equally important to engage men in these activities.

Men play very important roles at home, including making decisions about family size (6, 7), utilization of available health care services (8), and involvement in childcare practices (9), which varies from one society to another (10), as well as exercising control over household resources and determining if and how much money women receive to cater for their health and other needs (11, 12). Factors discovered to be linked with the involvement of men in childcare and related matters include younger child age, maternal and paternal employment, paternal education, and being in control of the decision on family size (13, 14).

In Nigeria and Africa, the patriarchal nature of the society (5), has resulted in men having greater socioeconomic power than women, leading to autonomy of decision-making among the male gender in many cases (6). A man's role in many African homes is limited to the provision of money, discipline, and general oversight (8, 9, 15). Different studies have shown that higher male involvement in childcare is associated with improved receptive language skills, higher cognitive skills, higher infant weight gain for preterm infants, improved social and adaptive behavior, higher academic achievement, fewer behavioral problems, reduction of childhood illnesses, and a lower likelihood of neglect (16-23).

Given that there is limited research assessing the

involvement of fathers in childcare practices and accompanying influential factors within the African setting, as well as lack of studies that have utilized fathers' self-report of these factors, this study sought to explore the opinions of community dwelling fathers on male involvement in childcare practices. This study used a qualitative method of data collection, which is focus group discussion (FGD).

Methods

Study Design

The study was a community-based qualitative study, using FGD.

Study Instrument

A semi structured interview guide comprising open-ended questions and suitable probes was designed and utilized for all the discussions. Relevant information on: respondent's perception towards male involvement in childcare practices, willingness to participate in childcare practices, the roles men play in childcare and factors associated with their participation were collected. For ease of communication, the guide was translated to the local language- *Yoruba* and subsequently back translated to English. This was to make sure that the original meanings were not lost before administration.

Study Area

The study was conducted in Sepeteri; a *Yoruba*-speaking town in Saki East Local Government Area of Oyo State, South-Western Nigeria. Saki East LGA has a total population of 144,025 (24), and the majority of the inhabitants are farmers while a small fraction are traders and civil servants.

Study population

The study population was made up of married men living in Sepeteri.

Eligibility criteria

All married men who gave consent and had given birth to a live child in the last two years preceding the study were considered eligible for the study. Men who did not live with their wives or

were single were excluded from the study.

Sampling technique and data collection

A purposive sampling technique was used to recruit a total of 56 community dwelling married men. This sampling method was utilized for ease of data collection particularly because not all the men had a definite location, utilizing the random sampling method in this situation could only be theoretically possible. Before data collection, the research team underwent a two-day training to develop and pilot test the study instrument (FGD guide), and also to improve the interviewing skills of the interviewers. The results of the pilot interview were used for content and face validation of the FGD guide. An initial visit to trade union leaders had also been made to seek and obtain their permission. Existing social groups and associations in the areas e.g., Okada Drivers Association, and Sepeteri Butchers' Association were used to facilitate the recruitment of married men to the study. Participants were divided into eight focus groups consisting of 6-8 men, a moderator, a recorder and an observer. The FGD guide explored respondent's perception towards male involvement in childcare practices, willingness to participate in childcare practices, the roles men play in childcare and factors associated with their participation were collected. The discussions were facilitated by the moderator who ensured that every member of the group participated equally, the recorder was responsible for recording the discussion with a digital voice recorder in addition to writing down notes on paper. The observer took note of the non-verbal expressions of the discussants. The discussions were conducted in Yoruba language.

Data analysis

The FGDs were transcribed verbatim from the audio recordings and translated to English by the facilitator. Transcripts were quality checked and back translated to English to ensure that the original thoughts and contents were maintained and to ensure fidelity. Coding was an iterative process following a thematic framework approach to qualitative data analysis. We initially read through all the transcripts to familiarize ourselves

with the data and independently coded two of the transcripts inductively, using the manual method. We then came together to reconcile the codes and developed a code book for the remaining transcripts. This code book was used to independently code the remaining transcripts.

Result

Socio-demographic characteristics of the participants

A total of 56 men were recruited into the study. All were married and majority had some form of formal education, but only five had post-secondary education. Most of the respondents were self-employed with a few of them having semi-skilled occupations at the local government.

Table 1. Socio-demographic characteristics of the participants

Characteristics	n	(%)
Education		
Primary	6	10.7
Secondary	45	80.3
Tertiary	5	8.9
Occupation		
Self-employed	45	80.3
Semi-skilled	11	19.6
Age		
20- 49	30	55
50 and above	26	45
Total	56	100

The resulting discussions were grouped into six main themes as follows: respondents' understanding of male involvement in childcare practices, perception towards male involvement in childcare practices, willingness to participate in childcare practices, roles men play in childcare practices, factors affecting roles of fathers in childcare practices, and ways of improving male involvement in childcare practices.

1.Respondents' understanding of male involvement in childcare practices

Most fathers had poor understanding of male involvement in childcare practices. They largely saw it as the financial responsibility of men.

"As the father of the child, I make sure that there is money in the house, so that she can buy all she needs whenever she is taking the child to the

hospital”.

“It is their (women’s) God given role; our own duty is to be there to discipline the child and to provide shelter, food and money to run the house”.

Furthermore, our respondents were of the opinion that male involvement in childcare practices signifies reversal of roles in which the husbands take over the roles of their wives and then the women become the husbands.

“It is when a husband takes over the work of his wife in taking care of the children.”

“I also feel it is when a man stops fulfilling his role as a breadwinner and then helps his wife in doing difficult duties at home and takes care of the children”.

2.Perception towards male involvement in childcare practices

As a result of the notion of women’s God given role to take care of children, our respondents saw it as culturally unacceptable or weakness on the part of the man involved in childcare.

“Any man, who backs a child for his wife, is not a man”.

“How can I do something that will make me become a laughing stock in the community?”

“It is not our culture to become nannies who will feed the babies, clean up for babies, change diapers and bathe babies... it is against our culture”

Nonetheless, a few others were of the opinion that it is not out of place to be involved in childcare.

“If my wife is ill, I don’t think it is too much to take over childcare activities, after all, the father owns the baby anyway”.

3.Willingness to participate in childcare practices

Many of our respondents were unwilling to participate in household chores, feeding, or strapping the baby to the back. Vigorously shaking his head, one particular man said,

“May God not let me back a baby (i.e., to strap a baby to the back), I cannot back a baby, any man doing such a thing is captured by terrestrial powers!”

“God forbid, I will never back a child!”

Nonetheless, some were of the opinion that these often-neglected activities by men have potential benefits on child and family health, and as such they do not mind being involved.

“I am willing to help her with the housework. She will not be able to do everything by herself.”

“If it will make my wife feel better and live long, then I am willing to support her so that I can enjoy our union better”.

4.Men’s roles in childcare practices

A very prominent issue is the fact that men do not expect their wives to demand help with childcare activities.

“If she demands for it, then she will not get the help, but if I want to help in taking care of my child, then the offer has to come from me”.

Hospital visits, and staying back at home with the kids when the woman is away was considered unnecessary by some and acceptable by others.

“Providing money for my wife is my duty, when a man sits at home to watch over the children, then, there is a problem”.

“A woman should be supported when she is pregnant by taking care of the older child and providing all the money she needs”.

“One should also be willing to participate by staying at home with her and the children and not travelling unnecessarily.”

5.Factors associated with participation in childcare practices

Some factors associated with participation in childcare practices were directed at particular roles e.g., accompanying a woman to the hospital.

“A man will feel ashamed to follow his wife to the hospital. This is because he may be the only man there. He will be ashamed.”

“There is no time to follow a woman to the clinic. The man has to go to his workplace”.

Other reasons were seen as generally influencing the roles men play in childcare practices e.g., societal perceptions and expectations.

“People consider it a woman’s matter; for the wife and mothers-in-law. The man is expected to

just make money available.”

“It is unheard of a man to be doing the housework. Even if the baby is sick, he can only help her do the heavy works like fetching water from a well. Even so, they must be seen doing it together and not him alone.”

6. Recommendations to improve male involvement in childcare practices

Our respondents were very emphatic in speaking about what can be done to improve their involvement in childcare practices. They specifically touched on how community-level interventions will go a long way in improving expected outcomes.

“Community leaders and heads should be role models for others. If they do so, especially in the villages and towns, other men will start to get more involved in assisting their wives with childcare practices.”

“Discussing the issue during the town meetings is also a good opportunity to enlighten men on the need to be involved more in taking care of their children and helping their wives at home.”

“Role plays and enlightenment programs can also be staged for men in the communities, so that they will know there is no harm in participating in childcare practices.”

Discussion

In this study, we explored the opinions of community dwelling fathers on male involvement in childcare practices.

Poor knowledge and understanding of childcare practices

Our results reflect poor knowledge and understanding of childcare practices among study participants. As has been reported in other similar cultural setting (24-26), and according to most respondents, a man's role at home does not extend beyond financial provision for upkeep of the child and family and he does not get involved in household chores, babysitting, feeding and other related childcare practices. This is, however, in contrast to what is obtainable in western societies, where fathers are seen to be increasingly involved in childcare activities beyond finances (14, 27, 28).

Willingness to participate in childcare practices

The negative perceptions observed in the study affected the willingness of the fathers to participate in childcare activities, and this can be because of the societal stigma or cultural misconceptions attached to other helpful acts that men can be engaged in. The respondents were strongly opposed to participating in activities like changing diapers, bathing, or strapping a baby to the back, since it will make them feel less superior to their spouses. In this part of the world, unfounded beliefs that as head of family, fathers are not supposed to participate in some of these childcare activities are commonplace (24, 29). It could be due to the disparity between the preconceived roles that males and females can play respectively, which is usually clearly defined from childhood. For instance, boys are less likely allowed to be involved in household chores like cooking, caring for younger children and the elderly, or cleaning (30, 31). Therefore, fathers in such societies consider it demeaning to be closely involved in childcare.

Men's roles in childcare practices

Generally, our respondents were supportive of the need for men to play active roles in childcare after all; *“omo o kii nile baba ko maa nile iya”* i.e., it takes the cooperation of both mother and father to take care of the children. However, a huge gap has been reported between this knowledge and their actual practice. Interestingly, our respondents agree to engage in some childcare activities on the condition that their wives did not initiate a request for their involvement, or in the absence of outsiders or relatives.

Women whose spouses are involved in childcare practices have been shown to enjoy many social and health benefits. For instance, the confidence conferred on nursing mothers, which is known to maintain breastfeeding, is reported to be improved when there is active support from their male spouses (23, 32, 33). Apart from meeting the financial requirement for the welfare of their children, men can actively be involved in childcare by: rendering assistance at home, looking after the

children when the woman is in the kitchen, employing a housemaid, providing a means of transport for the woman and children, etc.

Limitation: A convenience sampling of men residing in a rural community was done; this may limit the generalisation of findings to other men of different backgrounds.

Weakness: our small sample size may be a weakness of the study and findings may not be significantly representative, we recommend that more studies using a large data set should be encouraged. **Strength:** we used a qualitative method of data collection (Focus Group Discussions) which helped us to unravel in-depth information from the participants.

Conclusion

Contrary to the western world, male involvement in childcare practices is a strange concept in this part of the world. One effective way to change this narrative is to engage men in a series of public enlightenment programs, especially at the community level because of the influence of societal perceptions and expectations on men.

To the best of the authors' knowledge, this is the first study to evaluate and report the opinions and influential factors on the involvement of men in childcare practices in this environment. We used a convenience sample of rural dwelling fathers in this survey, and this is a limiting factor to the generalization of study outcomes to men from other backgrounds. However, the identified factors that have important implications for inciting

behavioral change can help to guide stakeholders at all levels in dispelling and correcting misconceptions about male involvement in childcare practices. Our findings provide a framework for health education and health promoting interventions that will help men participate in childcare.

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Following the Helsinki Declaration of 1964 (34), we obtained informed consent from each participant after careful explanation of the study aim and provision of full assurance of data confidentiality. As a form of incentive, we provided the respondents with insightful talks about the importance of male participation in childcare activities after completing the study.

Conflicts of interest

The authors declare that there is no conflict of interest.

Authors' contributions

O. O. C conceptualized and designed the study, O. O. C and A. A. M collected and analyzed the data, and O. O. C, A. A. M and T. O. I wrote and revised the manuscript. All authors approved the final draft of the manuscript.

References

1. Kulwa KB, Kinabo JL, Modest B. Constraints on good child-care practices and nutritional status in urban Dar-es-Salaam, Tanzania. *Food and Nutrition Bulletin*. 2006; 27(3): 236-44.
2. Fleischer Michaelsen K, Weaver L, Branca F, et al. Feeding and nutrition of infants and young children: guidelines for the WHO European region, with emphasis on the former Soviet countries. 2003.
3. Schulz R, Eden J. National Academies of Sciences, Engineering, Medicine. Family caregiving roles impacts. *Families Caring for an Aging America* Washington, DC: National Academies Press (US). 2016.
4. Doucet A. Gender roles and fathering. *Handbook of father involvement: Multidisciplinary perspectives*. 2013; 2: 297-319.
5. Akanle O, Adesina JO, Ogbimi A. Men at work keep-off: male roles and household chores in Nigeria. *Gender and Behaviour*. 2016; 14(3): 7833-54.
6. World Health Organization. Special Program of Research, Development and Research Training in Human

- Reproduction. Who decides on family size? Safe Mother. WHO.
7. Bodin M, Käll L. Is it an issue before it's a problem? Investigating men's talk about fertility. *Sociology of Health & Illness*. 2020; 42(7): 1611-25.
 8. Yaya S, Okonofua F, Ntoimo L, et al. Men's perception of barriers to women's use and access of skilled pregnancy care in rural Nigeria: a qualitative study. *Reproductive health*. 2019; 16(1): 1-12.
 9. Funk T, Källander K, Abebe A, et al. 'I also take part in caring for the sick child': a qualitative study on fathers' roles and responsibilities in seeking care for children in Southwest Ethiopia. *BMJ open*. 2020; 10(8): e038932.
 10. McMunn A, Martin P, Kelly Y, et al. Fathers' involvement: Correlates and consequences for child socioemotional behavior in the United Kingdom. *Journal of Family Issues*. 2017; 38(8): 1109-31.
 11. Fawole OI, Adeoye IA. Women's status within the household as a determinant of maternal health care use in Nigeria. *African Health Sciences*. 2015; 15(1): 217-25.
 12. Kalisa R, Malande OO. Birth preparedness, complication readiness and male partner involvement for obstetric emergencies in rural Rwanda. *The Pan African medical journal*. 2016; 25.
 13. Coates EE, Phares V. Predictors of paternal involvement among nonresidential, Black fathers from low-income neighborhoods. *Psychology of Men & Masculinity*. 2014; 15(2): 138.
 14. Kansime N, Atwine D, Nuwamanya S, et al. Effect of male involvement on the nutritional status of children less than 5 years: a cross sectional study in a rural southwestern district of Uganda. *Journal of Nutrition and Metabolism*. 2017; 2017.
 15. Adongo PB, Tapsoba P, Phillips JF, et al. The role of community-based health planning and services strategy in involving males in the provision of family planning services: a qualitative study in Southern Ghana. *Reproductive health*. 2013; 10(1): 1-15.
 16. Yogman M, Garfield CF, Bauer NS, et al. Fathers' roles in the care and development of their children: the role of pediatricians. *Pediatrics*. 2016; 138(1).
 17. Rollè L, Gullotta G, Trombetta T, et al. Father involvement and cognitive development in early and middle childhood: A systematic review. *Frontiers in psychology*. 2019; 10: 2405.
 18. Deng Q, Li Q, Wang H, et al. Early father-infant skin-to-skin contact and its effect on the neurodevelopmental outcomes of moderately preterm infants in China: study protocol for a randomized controlled trial. *Trials*. 2018; 19(1): 1-11.
 19. McWayne C, Downer JT, Campos R, et al. Father involvement during early childhood and its association with children's early learning: A meta-analysis. *Early Education & Development*. 2013; 24(6): 898-922.
 20. Jeynes WH. A meta-analysis: The relationship between father involvement and student academic achievement. *Urban Education*. 2015; 50(4): 387-423.
 21. Opondo C, Redshaw M, Savage-McGlynn E, et al. Father involvement in early child-rearing and behavioural outcomes in their pre-adolescent children: evidence from the ALSPAC UK birth cohort. *BMJ open*. 2016; 6(11): e012034.
 22. Davis J, Vyankandondera J, Luchters S, et al. Male involvement in reproductive, maternal and child health: a qualitative study of policymaker and practitioner perspectives in the Pacific. *Reproductive health*. 2016; 13(1): 1-11.
 23. Dubowitz H, Black MM, Kerr MA, et al. Fathers and child neglect. *Archives of Pediatrics & Adolescent Medicine*. 2000; 154(2): 135-41.
 24. Dillip A, Mboma ZM, Greer G, et al. 'To be honest, women do everything': understanding roles of men and women in net care and repair in Southern Tanzania. *Malaria journal*. 2018; 17: 1-8.
 25. Jorosi-Tshiamo WB, Mogobe KD, Mokotedi MT. Male involvement in child care activities: a review of the literature in Botswana. *African journal of reproductive health*. 2013; 17(4).
 26. Kevane M. Gendered production and consumption in rural Africa. *Proceedings of the National Academy of Sciences*. 2012; 109(31): 12350-5.
 27. Moore T, Kotelchuck M. Predictors of urban fathers' involvement in their child's health care. *Pediatrics*. 2004; 113(3): 574-80.
 28. Hook JL, Wolfe CM. New fathers? Residential fathers' time with children in four countries. *Journal of family issues*. 2012; 33(4): 415-50.
 29. Lowe M. Social and cultural barriers to husbands' involvement in maternal health in rural Gambia. *The Pan*

- African medical journal. 2017; 27.
30. Evans R. Children's caring roles and responsibilities within the family in Africa. *Geography Compass*. 2010; 4(10): 1477-96.
 31. Putnick DL, Bornstein MH. Girls' and Boys' labor And Household Chores In Low-And Middle-Income Countries. *Monographs of the Society for Research in Child Development*. 2016; 81(1): 104.
 32. Mannion CA, Hobbs AJ, McDonald SW, et al. Maternal perceptions of partner support during breastfeeding. *International breastfeeding journal*. 2013; 8(1): 1-7.
 33. Rempel LA, Rempel JK. The breastfeeding team: the role of involved fathers in the breastfeeding family. *Journal of Human Lactation*. 2011; 27(2): 115-21.
 34. World Medical Association Declaration of Helsinki Ethical Principles for Medical Research Involving Human Subjects WHO. WHO; 2001.