

Socio-economic perspectives of male sexual challenges and inter-spousal communication within a mono-cultural setting in Nigeria

AMOO, Emmanuel Olagunju
Demography and Social Statistics
School of Social Sciences, College of Development Studies,
Covenant University, Canaanland, Ota Ogun State, Nigeria
e-mail: amco50amoo@gmail.com OR emma.amoo@covenantuniversity.edu.ng
Mobile: +234 8035520849

Abstract

The study examined the socio-economic context of husband's sexual deficiency on husband-wife communication among the Yoruba in the southwest geopolitical zone of Nigeria. The study adopted a structured face-to-face interview among 145 couples in the ratio of 50:50 among couples with husbands that have sexual challenges and the control group. Four focus group discussions were also held among the wives and segregated by age (15-34 and 35-54 years). The mean age of the population is 40 years (husbands = 42 years and wives = 38 years). The study shows that income and employment status are significantly related to couple's communication at p-value less than 0.05. It also revealed that education and frequency of intercourse are vital predictors of inter-spousal communication notwithstanding the sexual condition of the husband (p-value of 0.000 each). The author therefore recommended that marriage counselors, social workers and other health official should target massive public awareness on male sexual diseases and equitable employment for all men who have sexual health challenges in order to stimulate mutual harmonious communication between husband and wife and enhance effective management of crisis at home fronts.

Key words: Male, sexual challenges, inter-spousal, communication, couple

Introduction

Sexuality and inter-spousal communication are crucial issues if the many problems of divorces, family violence and family disintegrations are to be nip in the bud. Intimacy in marriage is a life-long aspiration that every couple desires. However, the current dispensation where most marriages are threatened with crisis highlights how rarely these expectations are being fulfilled (John & Sharon, 2006). While considerable literatures exist on family, marriage, divorce and reproductive health as separate issues, the socio-economic perspectives of the interconnection between husband's sexual challenges and interspousal communication are not conspicuous in the literature.

Men's deficiencies in sexual activities have been sources of marital discontent and impulse for solitary life by husband or wife (Warwick, 2006; Bayer Healthcare, 2008; Bachmann & Kellogg-Spadt, 2010). This has culminated in husband-wife's disconnection, permanent segregation between couples and "would-be husbands and wives". However, the level of intimate communication between husband-wife could temper the imminent marriage breakups by enhances effective management of emerging disagreements between the couple. Wherever

husband-wife communication suffers, conjugal harmony becomes a mirage. Thus, a better understanding of interconnectivity between men deficiencies in sexual activities (within marriage) and level of husband-wife communication is exigent especially in the 'cultural-male-dominated' settings like sub-Saharan African region. This will enhance the development of policies that can improve enduring and harmonious conjugal relationship as well as the well-being of the family.

In traditional African setting, men are culturally regarded as the 'abler and stronger' in marriage, have their voices domineering and dictating the state of affairs in all family's spheres (Jejeebhoy, 2000; Isiugo-Abanihe, 2003; Rodrigues, 2004). Therefore, whatever affects him could possibly manifest not only in the immediate family but also on the community both in the short-run and in long-run. Given this scenario, certain questions require immediate answer. How does couple relates where the husband is faced with sexual problem, what is the variation in conjugal relationship where husband is experiencing sexual problems compared to marital relationship where husband is not experiencing sexual problems. What are the significant demographic characteristics that could influence conjugal rapport given the presence of sexual challenges? Thus, the examined the impact of husband's sexual deficiency on husband-wife communication in a mono-cultural setting. It is aimed, among others, at estimating the variations in inter-spousal communication between husband and wife where the husband is having sexual problems and where such problems do not exit. This is done to enhance enduring conjugal relationship irrespective of the circumstance of the husbands.

Literature Review and Theoretical framework

Several male sexual problems are dangerous to marital relationship. Testicular cancers for example, do not only cause sterility but also disrupt marital and sexual happiness in about 10-20 percent of men who are victims of the disease (Schover et al, 1985, Laumann, et al, 2005). On one hand, men with testicular cancer participate less in sexual activity. On the other hand, they always have lower sexual desire, experience more erectile dysfunction and hence difficulty in achieving orgasm. Over 82 percent of men with this disease experience reduction in semen volume (Schover et al, 1985; Dunn et al, 1999). Among other consequences of male sexual dysfunction are stresses, anxiety, wife's separation and divorce (Schover et al, 1985; Rust et al, 1988; Dunn et al, 1999; Center for Disease Control and Prevention (CDC), 2011). Studies have also confirmed relationship between sexual problems and marital happiness and that male sexual dysfunction like impotence and premature ejaculation play a much dominant role in marital discord (Rust et al, 1988; Davidson & Castle, 1998; Dunn et al, 1999; Murat et al, 2005).

Reproductive health diseases within marriage could mar the image of marriage as a lifelong commitment for harmonious and blissful living (Christian, 2006). However, while the issues of family, marriage, divorce and women's reproductive health have been given individual attention in literature, little or no attention has been paid to male sexual problem and interspousal communication by the researchers (Isiugo-Abanihe, 1994; Caldwell, 1996; Federal Ministry of Health (FMOH), 2002; Population Council and United Nations Population Fund, 2002; Isiugo-Abanihe, 2003; Bezeruk & Cassy, 2005).

However, the level of communication between spouses could enhance mutual understanding that can propelled adequate management of crisis within the marriage. Communication in this context is viewed as the act of transmitting or exchanging of thoughts, messages or information by speech, signals, writing, or behavior (Robert, 1997 and 1999; American Heritage Dictionary, 2000). It is regarded as interpersonal rapport which involves exchange of information between individuals through a common system of symbols, signs, or behavior (American Heritage Dictionary, 2000). In this context, communication is viewed as interpersonal rapport between husband and wife which entails exchange of thoughts, information and ideas in a mutual manner. Inter-spousal communication is thus conceptualized as the act of intimate discussion between husband and wife for the purpose of given information and making emotion or idea known to each other. This includes discussion on sexual matters and household chores or other family's issues. Inter-spousal discussion entails a mutual horizontal communication with mutual understanding and not necessarily 'bossy-instructional relationship'. Thus, a man and his wife are viewed as engaging in inter-spousal communication when relatively mutual communication exist between them and it is such indicted by the either of the spouses in the course of the interview.

The theory explored in this study is the "theory of marriage". The theory is premised on the notion that there exists a marriage market where a man and a woman tries to satisfy him/herself as much as possible and that the prospective marriage gains and costs are weighed before the marriage is consummated (Becker, 1973). In this marriage market, the singles evaluate prospective spouses on the basis of certain traits such as beauty, intelligence, income, education, family background, colour, age, etc and the expected gains from the marriage which include, among others, children, love, recreation, quality meal, companionship and health status (Becker, 1973; Warwick, 2006) including sexual health. In this regards, these characteristics evaluated by prospective spouses could be considered as motivators for marriage and at the same time represents incentives for enduring marriage (given that other factors are held constant). It could therefore be conjectured that where the expected gains fall short of expectations, the motivators and lubricants are by implication tampered with and thus opens the marriage to crisis.

On this basis, the author therefore contemplated that deficiency in any of these incentives or motivators would hamper the spousal rapport (including spousal communication), marital

satisfaction, management of disagreement and of course the duration of the marriage. Where these characteristics are favourable, the spouse's probability of staying or keeping the marriage remains high, and the converse is also assumed to be true.

However, considering these factors and the complexity involved in measuring all of them, the author singled out economic status (especially income) of the couple and its influence on spousal communication given the husband's sexual deficiency. The use of this variable is also in accordance with Keeley (1974) that confirmed the probability of separation and divorce to be negatively related to income (Keeley, 1974 and 1979; Becker, 1973). Thus, the study suspected socio-economic status of husband as fundamental correlate that is capable of dousing tension within the family whenever it arises. It is envisaged that income could enhance spousal communication, stimulate marital satisfaction and encourage enduring conjugal relationship notwithstanding the presence of the husbands' reproductive health dysfunctional.

Research Design

Both quantitative and qualitative research techniques were used. The qualitative segment employed a structured face-to-face interview among 145 couples. They were selected in the ratio of 50:50 among couples with husbands that have sexual challenges and those without sexual problems (i.e. the control group). Respondents in the former group were selected following a "key-informant-leading approach". Respondents in the control group were randomly selected from the 16 wards randomly selected from a local government area from a purposively selected state within the south-west geopolitical zone of Nigeria. Only four focus group discussions were held among the wives and this was segregated by age (15-34 and 35-54 years). Data obtained from qualitative segment through focus group discussions were transcribed and analyzed using 'systematic-content-analysis' technique which was moderated with 'content-observation approach'. The data from the survey were analyzed using a combination of univariate and analysis of variance techniques. However, relevant information from the focus group were categorized and inserted accordingly to complement the results from quantitative analysis. In addition, inferences were made upon the content of the communication. These procedures are in tandem with social sciences research and principles (Frankfort-Nachmias & Nachmias, 1992; Coeffey & Atkinson, 1996; Ritchie & Lewis, 2004).

Results and Discussions

Some of the salient features of socio-demographic conditions of the respondents are revealed in the survey. The sample consists of married couples who have lived together for at least six years. The mean age of the population is 40 years (husbands = 42 years and wives = 38 years). This implies that most of the respondents fall within the prime age bracket of life characterized by maturity, physical growth, power and vigor (Takashi & Jayne, 2002). The result revealed that Christianity accounted for 38.3 percent of the sampled population, 52.8 percent are Muslims while nine percent claimed that they belong to traditional religious affiliation. It also shows that

only few number of husbands that are experiencing sexual difficulty spend much time with their wives though “*most discussions are always sharp and brief*” as pointed out in the group discussion. Education profile reveals that only 6.2 of couples who have ‘husband with sexual challenge’ and 11.7 percent of the group where husbands do not experience sexual challenges have never attended school or know how to read and write. Those that have attained primary education are 31 percent among the couples whose husbands experience sexual problems while 38.6 percent are from respondents whose husbands have no sexual problems. The variation in secondary education among the two groups is marginal. 38.6 percent was obtained for those with husbands that have sexual problems and 40 percent among those without sexual challenges. While 24.1 percent have attained higher level of education among the group where husbands experience sexual challenges, only 9.7 have attained higher academic level among the control group.

Also, in an attempt to evaluate the economic status of the respondents, questions were canvassed for the average monthly income among other things. The result shows that about half of the respondents in each category earned below ₦40,000 per month. More than two-third earn below ₦60,000 monthly while only 8.3 percent receives income above ₦60,000 per month. Respondents without income constitute 12.8 percent of the population. This proportion is relatively in tandem with the proportion of respondents (13.4 percent) who are not working or the unpaid family workers and full-time house wives. Unemployment rate is 18.6 among those whose husbands have sexual challenges while the proportion without income among the group is 20 percent. Similarly, unemployment rate recorded for those whose husbands are not experiencing sexual problems is 6.9 percent while the same proportion (6.9 percent) receives no income among the group.

Employment status shows that higher proportions of respondents among the couple where husbands experience sexual challenges are not working compared to those couples where such experiences do not exist. The result revealed a ratio of approximate 19:7. Total unemployment rate as recorded in this survey is 12.8 percent. This rate is a relatively lower compared to the national unemployment rate of 19.8 percent indicated for Nigeria in 2010 (National Bureau of Statistics (NBS), 2010; Onuba, 2010; National Population Commission (NPC) & ICF Macro, 2010; Central Intelligence Agency (CIA), 2011; Okafor, 2011). However, this study does not show any interconnectivity between husband’s sexual deficiency and unemployment. It rather assesses the influence of employment status on inter-spousal communication in the presence or absence of husband’s sexual challenges. Overall, 87.2 percent of the respondents were working while 12.8 full time housewives, full time-students and out of jobs.

Table 1: Socio-demographic Profile of respondents by presence or absence of husband's sexual challenges

Socio-demographic Profile Location	Have Husband with sexual challenges		Have Husband without sexual challenges		TOTAL	
	No	%	No	%	No	%
Usual place of Residence						
Rural	47	32.4	50	34.5	97	33.4
Urban	98	67.6	95	65.5	193	66.6
Age Group						
15-34	45	31.0	20	13.8	65	22.4
35-54	87	60.0	60	41.4	147	50.7
55-74	13	9.0	65	44.8	78	26.9
Mean Age (Husband = 42, Wife = 38 years)						
Religious affiliations						
Christianity	50	34.5	61	42.1	111	38.3
Islam	78	53.8	75	51.7	153	52.8
Traditional	17	11.7	9	6.2	26	9.0
Employment Status						
Working	118	81.4	135	93.1	253	87.2
Not working	27	18.6	10	6.9	37	12.8
Educational Attainment						
No Schooling	9	6.2	17	11.7	26	9.0
Up to Primary School	45	31.0	56	38.6	101	34.8
Up to 2ndary School	56	38.6	58	40.0	114	39.3
Up to University	35	24.1	14	9.7	49	16.9
Sleeping Arrangement						
Sharing room	68	46.9	115	79.3	183	63.1
Separate room	77	53.1	30	20.7	107	36.9
Income Level						
Less than 20,000	26	17.9	28	19.3	54	18.6
N20,000 – N39,999	52	35.9	74	51.0	126	43.4
N40,000 – N59,999	23	15.8	24	16.5	47	16.2
N60,000 & above	15	10.3	9	6.2	24	8.3
No Income (Unemployed)	29	20.0	10	6.9	39	13.4
Rate of Discussing sexual matters						
Very often	8	5.5	23	15.9	31	10.7
Often	21	14.5	73	50.3	94	32.4
Not often	63	43.4	33	22.8	96	33.1
Not at all	53	36.6	16	11	69	23.8
Rate of discussing home affairs						
Very often	12	8.3	30	20.7	42	14.5
Often	40	27.6	96	66.2	136	46.9
Not often	57	39.3	14	9.7	71	24.5
Not at all	36	24.8	5	3.4	41	14.1
Total	145	100.0	145	100.0	290	100.0

Source: Field Survey 2010

The level of spousal communication was evaluated by the frequency of couple's discussion on sexual issues and other household affairs. These were captured using four Likert-scale of (1) very often, (2) often, (3) not often and (4) not at all. The result shows that there are variations in spousal discussion between the couples where the husbands are experiencing sexual problems and where the problems are not prevalent. It specifically indicated that discussion on sexual issues is more frequent among the couples where husbands have no sexual challenges. 50.3 percent of these couples discuss sexual issues more often compared to only 14.5 percent of couples where the problem exists. 36.6 percent would not discuss sexual issues at all in marriages where husbands have sexual problems against 11 percent in the control group. Only 22.8 percent rarely discusses sexual issues among those couples where husbands are not experiencing sexual problems while 43.4 percent rarely mention sexual matters where the husbands are experiencing sexual problems. This implies that couple evades sexual discussion where the husband is experiencing sexual deficiency compared to where they are not. This could simply be interpreted to imply that sexual issues are without restrictions in conjugal relations where husbands are not experiencing sexual problems compared to other group where husbands are experiencing sexual problems. The following excerpts indicate the reasons and perspective of the wives about men's sexual deficiency within conjugal relationships.

*"Husband's sexual problem is not a subject of discussion with your neighbours"
"The wife remains silent over it", "If the man hears that you have told anyone about the problem, he might scrape off your head."*

FGD – Women (35-54)

*"Those men that are affected tend to desexualize their wives".
"Coping with an impotent man is dangerous, they are always nervous, worry, aggressive and ill-tempered"*

FGD – Women (35-54)

*"No man can tell his wife or girl-friend that he is impotent". "No man has that boldness, it is ridiculous". "If she (the wife) discovers it, fine, if not, life continues".
"those men affected cannot confide in anyone about it."*

FGD – Women (35-54)

A sexually-deficient marriage is a 'marriage of imprisonment' "you can't abstain till eternity (throughout your life) except for spiritual reasons"

"No married woman would ever subscribe to everlasting abstinence". "Even if a man is aware, he will never dare marriage or partnership"

FGD – Women (15-34)

*"It is difficult to cope with such situation", "No one in the community would take you serious".
"Even if you dare to cope, you will be regarded or treated as outcast if your husband cannot father a child or you cannot become pregnant"*

FGD – Women (15-34)

“How do you produce (bear) children if your husband cannot “perform”. “The essence of marriage is children and happiness”. Children are the main source of happiness in the marriage”. “Omo l’asehinde, omo eni ni aso eni” (meaning: children are the heritage, they are the security at old age). “Even religious-wise, it is abnormal to be childless”.

FGD - All

Socio-economic perspectives

In the study location, children are highly valued as the ‘ultimate’ of marriage. It is believed that without children, the marriage cannot be described as fruitful. According to the theory of marriage, children are part of the expected gains from the marriage (Becker, 1973). Dissatisfaction in the bearing of children opens the marriage to crisis. Thus, the most economic consequence of husband’s sexual problem is inevitable distortion of the harmonious relationship expected from the conjugal union. This could however translate into separation, divorce or other health hazards associated with dissatisfactions in marriage or sexual relationships. The issue of re-marriage which is likely to follow (after the couple has separated) is encumbered with health challenges. This is because, re-marriages open divorcees to multiple sexual partnerships that could make them vulnerable to sexual transmitted infections (STIs) or HIV/AIDS. Taking into cognizance that prevention consciousness or usage is very low in this part of the world, whatever could expose individual to sexual infection like divorce or separation should be avoided.

Other expected gains and lubricants of enduring marriage include love, recreation, quality meal, companionship and sex. Where the communication is impaired or where wife and husband are incommunicado with each other, these factors suffer setback. If however, there is no adequate strategies to cope with these situations, this could result in continue husband-wife’s disconnection, permanent segregation between couples and destabilization of the entire community as a whole, knowing well that agglomerations of families make a community. Succinctly put, wherever husband-wife communication suffers, conjugal harmony becomes a mirage. Sexual dissatisfaction could arouse tension in the family. This could also degenerate to family violence and could be possible transferred to other member of the family especially if children are already involved.

Relationship between selected independent variables and inter-spousal communication among the couples with and without husbands that have reproductive health challenges (RHC)

The attempt to have the understanding of the impacts of selected independent variables on the dependent variable necessitated the testing of hypotheses. Analysis of variance (ANOVA) was computed to evaluate the impact of individual independent variables on inter-spousal communication. This is meant to provide inter-connection between key selected variables and husband-wife communication. Two-variable models were thus computed using a one-way ANOVA in order to assess the contribution of each variable to spousal communication given the husband’s experience of sexual challenges. However, for the purpose of simplicity, the results

were combined together to give a single tabular arrangement as depicts in table 2. Also, only relevant statistics such as F-ratio and significant value are presented for ease of understanding.

Specifically, this technique was adopted to confirm the differences in the means among the selected socio-demographic variables of respondents and their significance contributions to inter-spousal communication. The dependent variables frequency of discussing sexual issues and frequency of discussing other home affairs were re-computed into spousal communication to include response code of very often, often, not often and not at all. Data were then split by the presence or absence of husband's sexual challenges in order to evaluate the significant predictors to inter-spousal communication between those group/couples with male sexual problems and those couples where such problem is not in prevalence. The result as highlighted in table 2 shows those factors that significantly influence inter-spousal communication among couples where the husband is having or not having sexual health challenges.

Table 2: One-way ANOVA comparing relationship between selected independent variables and Inter-spousal Communication among the couples with or without husband that have sexual health challenges

Selected socio-demographic variables	Couples with MRHC		Couples without MRHC	
	F-ratio	Sig	F-ratio	Sig
Income level	2.126	0.045	1.841	0.084
Age group	3.377	0.037	6.364	0.002
Religious affiliations	4.657	0.011	3.655	0.028
Employment status	5.222	0.024	0.836	0.362
Occupation	33.888	0.000	6.561	0.000
Educational attainment	8.445	0.000	30.835	0.000
Usual place of residence	3.343	0.070	0.223	0.638
Family size	0.846	0.431	13.376	0.000
Frequency of intercourse	12.672	0.000	4.850	0.001
Duration of marriage	28.747	0.000	7.194	0.000
Sharing room	0.844	0.360	1.928	0.167

Source: Field Survey 2010

Among the couples where the husbands have sexual health challenges, income status, religion affiliation, employment status, occupation, frequency of intercourse and duration of marriage Income and employment status play dominant role in inter-spousal communication. They are statistically significant at p-value less than 0.05 as indicated in table 2. However, income status, employment status and sharing of the same room with spouse are not statistical significant in interspousal communication where there is no sexual challenge. The observation here suggests that the husband-wife communication could be strengthened if the husband is rich despite his sexual deficiency. Age is not statistically significant in husband-wife communication in the presence of sexual problem. However, it could exert influence among the control group.

The size of the family and frequency of intercourse are among the relevant factors in inter-spousal communication in non-sexually challenged couple. This confirms that current family size is a potent factor in interspousal communication at p-value of 0.000 where there is no sexual problem (Table 2). This could be true because the presence of children in the family is a good indicator that the husband has no disease or has no serious sexual health challenges. Children are considered as the ultimate aim of marriage in sub-Saharan Africa of which the locations of study are not exempted (Bledsoe & Cohen, 1993; Isiugo-Abanihe, 2003; Adewuyi & Ogunjuyigbe, 2003; Togunde & Newman, 2005; Zenaida & Fernando, 2007). Beside, in a culture where infertility is decorated with stigma and viewed as a curse (Gavin & Jenny, 2002; Isiugo-Abanihe, 2003; Warwick, 2006), it is logical that the couple especially the wife would not be comfortable with the situation and this may impair couple's communication.

In addition, the result revealed that educational attainment, occupation, frequency of intercourse, duration of marriage are determinant factors of inter-spousal communication in both scenarios where the husbands are having male reproductive challenged and where they are not experiencing sexual problem.

Conclusion and Recommendations

The study concludes that income and employment status played a key role in husband-wife communication where the husband is experiencing sexual problem whereas their influences are insignificant where sexual problems do not exit. It is expedient that couple's level of financial empowerment in terms of employment opportunity should not be treated as fringe socio-economic matter in an attempt to drive enduring conjugal relationship and well-being of the families. It is also shown that education and frequency of intercourse are important predictors of inter-spousal communication notwithstanding the sexual condition of the husband. All stakeholders should endeavour to work on enlightenment campaign that focuses on adoption of temporary or permanent non-sexual relationships among the couples if their circumstances demand such rather than divorce or separation. Also, the study confirmed that the usual place of residence, family size and living arrangement are not significant factors to be considered in husband-wife communication. The author therefore recommended that massive public awareness on male sexual diseases be embarked upon by both the governments and other stakeholders in order to promote husband-wife closeness. It is also paramount for the marriage counselors, social workers and other health official to focus on employment status as well as income as major determinants of interspousal communication as well as marriage sustenance. Government should focus equitable employment for all men who have sexual health challenges in order to stimulate mutual communication between husband and wife and enhance effective management of crisis at home fronts.

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