

Malawian women's perceptions of fertility difficulties

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Credit: Lancaster University

Young women in Malawi who reported difficulties conceiving and/or carrying a child to term turned to traditional healers, churches and mosques, as well as medical clinics, for help says new research from Lancaster University.

The paper looks at [women](#)'s own assessments of their ability to conceive and carry a pregnancy to term—that is, self-identified infertility—in Malawi. It considers both the characteristics of [young women](#) who report infertility and, among these women, what kind of help-seeking strategies they employ.

Dr. Jasmine Fledderjohann's research, "Self-reported Fertility Impairments and Help-Seeking Strategies Among Young Women in Malawi," is published today in *Global Public Health*.

"This study is innovative because it focuses on women's own perceptions of fertility impairments, rather than measures based on women's fertility histories," says Dr. Fledderjohann.

"This is important because women's own assessments of their ability to conceive and carry a pregnancy to term often don't align with what measures based on fertility histories would suggest. People act based on their perceptions, and it's essential to consider women's own views of their bodies."

She explains that because it is a population-based sample—rather than a clinic-based sample—it also includes women—often less privileged women—who may not access clinical spaces.

"And the results are also innovative because they indicate that use of multiple help-seeking strategies is common—an insight that is not possible using facility-based samples that only focus on one kind of help-seeking," adds Dr. Fledderjohann.

The paper analyzes survey data for 1,349 Malawian women aged 16-26 to explore the prevalence and predictors of self-reported difficulties conceiving and/or carrying a pregnancy to term and help-seeking strategies.

Although it is a fairly young sample, nearly 13% of those who had ever tried to conceive reported experiencing a fertility impairment. Some women as young as 16 reported a fertility impairment.

The older a woman was, the more likely she was to report a fertility

impairment. On the other hand, more highly educated women and those with more living children were less likely to report an impairment.

Of women who reported an impairment, 85.5% sought help. Nearly half of these (47.9%) sought help from a hospital or clinic, and a large fraction (44.4%) went to a traditional healer.

A further quarter (24.8%) reported praying or visiting a church or mosque to seek help conceiving or carrying a pregnancy to term. There is overlap in these figures because more than one-quarter employed multiple help-seeking strategies.

"Much of the existing literature looks at only one form of help-seeking at a time, but these findings highlight that a large minority of women use multiple help-seeking strategies, not just one," says Dr. Fledderjohann.

Infertility is commonly defined in [clinical settings](#) as the inability to conceive or maintain a pregnancy after 12+ months of regular intercourse. However, having too few children is itself defined as infertility in some sociocultural settings, while having more children may reduce the social pressure to conceive again.

One-in-four couples in the Global South experience infertility, with some of the highest rates of infertility in the world found in sub-Saharan Africa.

Infertility can have devastating psychosocial and [economic effects](#), including elevated levels of depression, anxiety, grief, stigmatization, [domestic violence](#), marital discord, poverty, lower quality of life and well-being, poorer health, and low self-esteem.

"Making treatment and support available to individuals who struggle to conceive is therefore vital not only for securing reproductive health, but

also for improving health and well-being more broadly," explains Dr. Fledderjohann.

Yet evidence on help-seeking strategies of individuals in sub-Saharan Africa who self-identify as having difficulties conceiving is rare.

The availability and quality of biomedical tests and treatments for infertility has been growing in SSA, and both men and women are increasingly using clinical services for fertility impairments. However, [infertility](#) remains a neglected public health issue.

"Examining help-seeking strategies in isolation (for example, using clinic-based samples and focusing on biomedical responses) provides an incomplete picture of the range of strategies with which women who perceive an impairment may engage," concludes Dr. Fledderjohann.

More information: Jasmine Fledderjohann, Self-reported fertility impairments and help-seeking strategies among young women in Malawi, *Global Public Health* (2021). [DOI: 10.1080/17441692.2021.1965179](#)

Provided by Lancaster University

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