

The Ibani of Rivers State, Nigeria, have a high incidence of maternal and infant mortality/morbidity, which is linked to the perceptions, attitudes and practices of the people with regard to pregnancy. This exploratory study of pregnancy outcomes among the Ibani examines the processes leading to these outcomes and their contextual definition. It offers an in-depth and comprehensive understanding to the investigation of this phenomenon through an interdisciplinary approach.

The specific objectives of the study include: (1) a description of the cumulative effects of the pregnancy-postpartum processes on pregnancy outcomes; (2) an assessment of the relationship between male role and pregnancy outcomes; (3) an investigation of the effect of socioeconomic status of women on pregnancy outcomes; (4) an examination of the influence of child spacing on pregnancy outcomes; and (5) an examination of the relationship between access and use of maternal health facilities and pregnancy outcomes. The voluntaristic social action theory by Talcott Parsons and the systems theory by Ludwig Von Bertalanffy enable the study to highlight the links between socio-cultural variables and pregnancy outcomes by showing the strength of their separate and collective relationships.

Data were collected through in-depth interviews, focus group discussions (FGDs), case studies, unobtrusive observation and the survey questionnaire. The qualitative data were analyzed through manual content analysis to identify what pregnancy outcomes were associated with specific socio-cultural variables, while the quantitative data were analyzed by descriptive and multivariate techniques, utilizing ordinary least squares (OLS) and logistic regression.

The findings show that the factors affecting pregnancy outcomes among the Ibani of Rivers State include communal and individual values, norms and practices, and that their persistent influence signals a need to investigate their separate and

combined influences on pregnancy outcomes. The results show that there are 4 principal types of pregnancy outcomes among the Ibani, which are Type-1 representing maternal and infant survival; Type-2 which is synonymous with maternal survival but infant mortality; Type-3 which is the same as spontaneous abortion; and Type-4 which represents maternal mortality but infant survival. The specific results are that: (1) individual and communal activities defining each stage in the pregnancy-postpartum continuum are instrumental to understanding pregnancy outcomes; (2) pregnancy outcomes among the Ibani do not necessarily derive from spousal communication and gender discourse because women whose husbands were solely responsible for decisions on child spacing recorded more Type-1 outcome (87.7 percent) than those whose husbands did not; (3) multiple marriages express the pronatalist ethos of Ibani society; (4) female education does not show any consistent association with pregnancy outcomes because Ibani women who had primary and secondary school levels of education (73 percent) exhibited more Type-1 outcome than women of lower and tertiary education; (5) age at marriage, high nutritional status and access to traditional birth attendants (TBAs) are among the principal factors contributing to Type-1 pregnancy outcome among Ibani women; (6) duration to source of prenatal care does not show consistent relationship with pregnancy outcomes because Ibani women who got to their sources of care between 30 and 59 minutes had more Type-1 outcome than those who got to their sources within 30 minutes; and (7) the limitations imposed by pregnancy on women's economic activities exert strong influence on birth spacing.

Through the convergence of Demographic, Ethnographic and Medical data, the study shows that pregnancy outcomes result from the cumulative effects of complex social and cultural factors in Ibani society. In this way, it advances the

technical and theoretical interests of demography and contributes to understanding of how macro-level factors impinge upon individual-level events like pregnancy outcomes.