

Maternity Leave Duration for Women in Formal Employments and Infants Vulnerability to Abuse from Care Givers in Nigeria

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Abstract

Shorter maternity leave has made the service of care givers popular in Nigeria. Recent findings show that some care givers now abuse infants. This study examined the impact of maternity leave duration on infants' vulnerability to abuse from care givers. This was a systematic review and literature were pooled from Scopus, AJOL, Google Scholar, PubMed and Web of Science search engines. The review was done in three stages: empirical, theoretical and conceptual reviews. Findings revealed that 6 in 10 children have been abused before reaching 18 years. Similarly, Nigerian nursing mothers are one of the least paid workers during maternity leave when compared with their counterparts in other African countries. There is a missing link between organizational laws in the country and maternity protection convention. The study recommended the need for stakeholders to re-address the missing links. Systems must be strengthened such that abuse cases are reported and offenders are punished according to the law. It's high time indigenous firms consider having a waiting room where nursing mothers could have their babies stay with nannies at a closer reach for optimal care. Finally, regulated body must be in place overseeing the sourcing and conduct of persons rendering care giving services.

Background

The idea of women taking up paid employment in the formal sector rather than being a full-time housewife is becoming popular in Nigeria. Among others, the reason for this, is the increasing economic hardship in the country, as the income of a single parent is not enough to cater for the needs of the entire family (Fallon, Mazar and Swiss, 2016; Verick, 2014). Similarly, it is a known fact that maternity leave duration in most of the organizations in Nigeria is usually 3 months (International Labour Organization - ILO, 2014; Udoma and Belo - Osagie, 2019).

In recent times, certain private firms have been found to call their female staffs who were observing maternity leave to return to work due to the need to meet up with the work demands or shortage of staffs in the organization. In other instances, some private firms only pay their female staffs half (50 percent) of their salaries during their maternity leave period. Hence, the mother and the child might likely be face with the challenge of malnourishment and inadequate care. While the three months' maternity leave is said to favour female workers in the public sector than those in the private sector as the former enjoys the complete three months with their full salaries paid to them, the later might face unfriendly situations from their employer.

Studies have shown that most of the organizational and labour laws in Nigeria are not “maternal-friendly” as nursing mothers usually finds it stressful and enormous to balance their responsibilities at work and the care of their tender infants (Thompson, 2016; Ogaboh, 2015). For instance, a nursing mother resumes and also closes at the same time with other regular staffs in most Nigerian organizations. It is not very common for organizations to allow nursing mothers in their employment to observe breastfeeding break, or make provision for waiting room where their babies and nannies can stay at a closer reach by the mother. Work-Family balance for most women in formal employments in Nigeria has been a very difficult task when compared to the experiences of their counterparts in developed countries like Bulgaria, where maternity leave is 58 weeks with 90 percent payment rate of salary been paid to the mother throughout the period (ILO, 2014; World Population Review, 2021). This is not only healthy for both mother and baby, but also the mother finds it easier to exclusively breastfeed her baby and can easily afford a balanced nutrition for herself and her infant.

Amidst all of these issues, one major question that comes to mind will be, who takes care of the infant whose mother (either private/ public employment) had to return to work after three months? The need for a care giver might likely be the next option for most mothers/families and this is no new thing to Nigerian couples/mothers. The care giver can be a hired staff, grand - mother, step – mother, brother, cousin, niece, father, uncle, sister, neighbor, service providers/staffs in the crèche/daycare or anyone trusted by the mother or both parents to take care of their child/children while they are away from home (Fallon et al, 2014; Walsh, 2010). Recent happenings have shown that some of these infants are being abused by their care-givers (Children's Bureau, 2021; Chitnis, 2018). Studies have revealed that mothers usually do not identify that the child is going through any form of abuse at the early stages until later as the parents/ mothers are usually busy with work and do not have enough time to look out for such signs or even sensitive to such signs (Chitnis, 2018; Walsh, 2010).

Statistics have shown that children within ages 0 – 11 months old (infants) are no more spared by perpetrators of child abuse or violence in Nigeria. Among many reasons that could lead to these occurrence, is the inability of the mother to spend quality time of care and nurture with their little ones. Nowadays, day care centers are filled with children who barely just start sucking breastmilk and whose mothers were to resume work after spending only three months of maternity leave. This has deprived many infants the privilege of having optimal or longer duration of breastfeeding, frequent immunization or vaccination as at when due, good nutrition, healthy bond between mother and infant, cognitive development, etc. (Fallon *et al*, 2016; Mehdizadeh, 2013).

Some form of abuse infants face in the hands of care givers are: defilement, torturing, malnourishment, beating, kicking, hitting, neglect, etc. Several video clips have been shared on social media platforms of care givers who defiled infants kept in their care while their parents were away at work. Others are video clips of care givers hitting or beating the infants in the absence of their parents/mothers. Research have shown that such experience of abuse might have both short and long-term negative impacts on the victim (Nwaomah and Nwaomah, 2017; World Health Organization – WHO, 2020). Therefore, this study seeks to explain the extent to which maternity leave duration of women in formal employment impacts on the level of vulnerability of their little ones (i.e., infants) to abuse from care givers.

Research Methods

This study was a systematic review of previous work done on the subject matter. So many literatures have been published on female labor force participation, organizational laws, domestic violence to people of different age groups in Nigeria, but little or none have been done by scholars to systematically disentangle the impact of maternity leave duration of women in formal employments on the level of exposure to abuse faced by their little ones in the hands of care givers. This study reviewed related and relevant literature and extracted data from the following search engines: google scholar, AJOL, PubMed, Web of Science and Scopus for a robust insight into the subject matter. The study also conducted an empirical, theoretical and conceptual review on the subject matter.

Theoretical Review

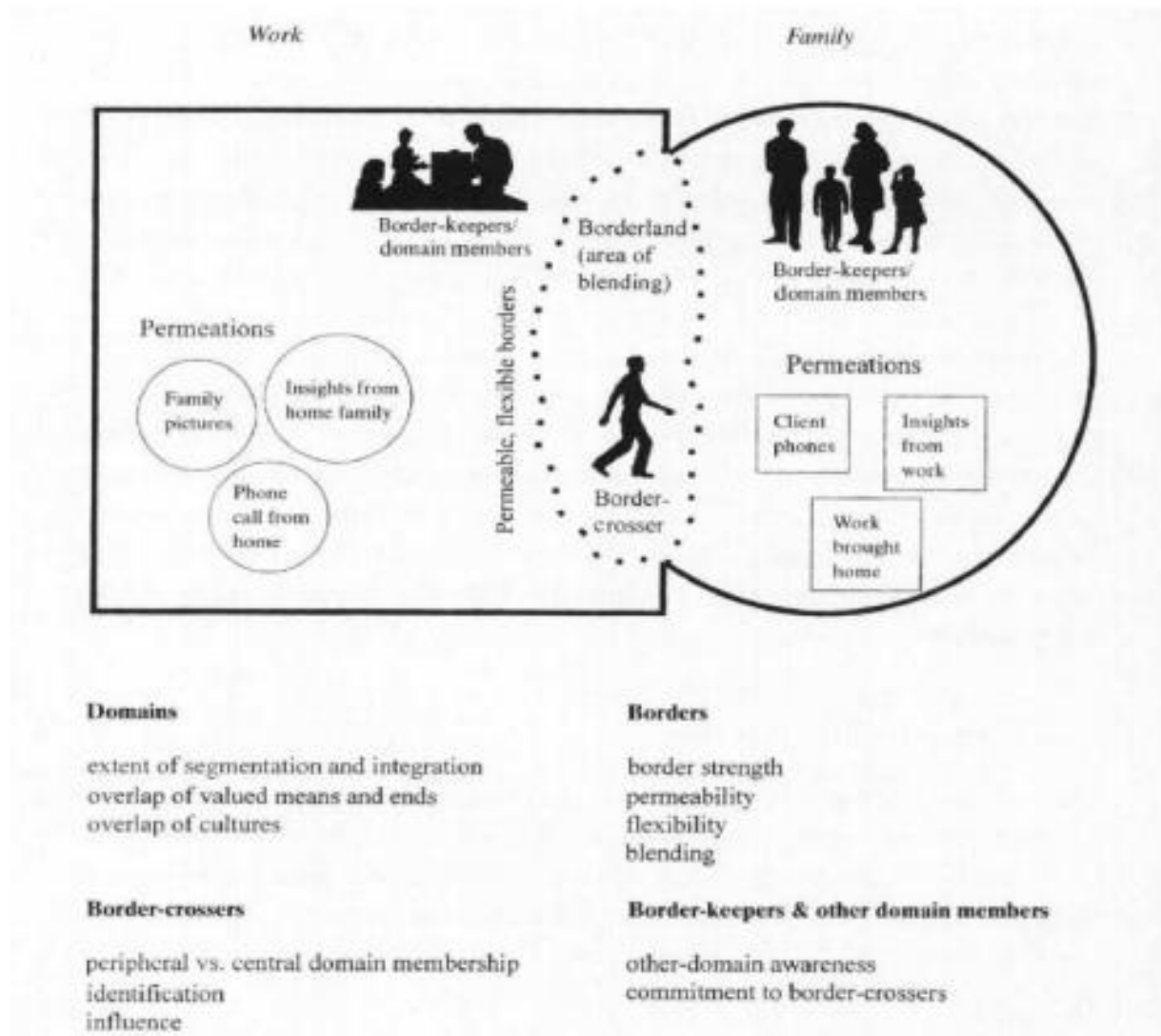
Work-Family Border by Clarke, S.C., (2000)

The theory recommended better ways of guaranteeing work-family balance. It provided the template for proper integration of work and family – without overlap. The assumptions of work border theory drives satisfaction and good functioning of the worker at home and at work with limited personal and group conflict. The theory defined tangible boundaries between time spent at work and at home. It specifies boundaries between time, place, and individual's association with work versus family.

In the work of Brett and Stroh (1995), they argued that when the border linking the family and work is not specifically mapped out, then pressure from the workplace have the capacity to interfere with the balance in the family. According to the Work-family border theory of Clarke, the family and work domains will usually conflict in contention for attention and available limited

resources. Hence, the family and work domains operate from different cultural systems. The border between the family and home domains provides the bases for classifying workers into those who cross the borders and employees who keep the borders.

Figure 1: Work – Family Balance Theory of Clarke



The Ecology of Childhood (1973) - Urie Bronfenbrenner

Bronfenbrenner posited that the world in which the child grows has a major influence on his/her development. He described this as a two-way influence. The personality and behaviour of the child will influence the way people in the environment would interact with that child. He explains that the interactions between environmental factors could affect the child's development. The theory revealed that, it's not just the influence of the parents on the child or the childcare centre on the

child but the way the parents and educators relates with the child. This process of interacting influence is known as reciprocal interaction.

Duration of Maternity Leave and Entitlements: Cross Country Comparison

Table 1, presents the length of maternity leave for the Organization for Economic Cooperation and Development – OECD and African countries. Among the OECD countries, the United States have a poor maternity protection for nursing mothers as well as Portugal where maternity leave is 6 weeks although with 100 percent salary pay. The table revealed that the country with the longest weeks of maternity leave in Africa is South Africa (17 weeks with 60 percent pay on the average) with the least number of weeks in Tunisia (4 weeks with 66.7 percent salary pay during the period). In Nigeria, as previously mentioned maternity leave is 12 weeks with 50% payment on the average. About 70 percent of countries in Africa observed the 14 - 12 weeks of maternity leave with a pay of 100 percent on the average to nursing mothers.

Unlike, countries in Africa, there were countries in the OECD where mothers were observing maternity leave for a period as long as 58 weeks (Bulgaria), 43 weeks (Greece) and 39 weeks (United Kingdom). Some of other countries like Czech Republic, Hungary, Germany, Ice Land, etc., even paid nursing mothers parental and home care leave allowance.

Nigerian Labour Laws and Maternity Leave

Maternity Leave

According to the Nigerian labour Act, Decree No. 21, 1974, amended 1989, female workers are entitled to twelve (12) weeks of maternity leave, to cover pre and post maternity period. That is, six (6) weeks is taken before the delivery after providing a medical certificate from a registered practitioner and six (6) weeks after delivery. Maternity leave may begin six weeks before delivery after providing medical certificate from registered practitioner providing relevant information about likely due date of delivery. Maternity leave can be extended in case of illness, certified by the registered medical practitioner, that arise out of pregnancy or confinement and make her unfit for work (Law of the Federation of Nigeria, 1990; Compendium of Nigerian Labour Laws, 1997; Wage Indicator Network, 2021).

Income

Female workers on maternity leave are entitled to minimum of 50 percent of their regular gross monthly salary. Although, the worker must have spent at least six months of continuous service with the employer before enjoying such privilege (Law of the Federation of Nigeria, 1990; Compendium of Nigerian Labour Laws, 1997; Wage Indicator Network, 2021).

Free Medical Care

The employer is not obliged to provide medical care for pregnant workers. It is not the duty of an employer to pay any expenses related to pregnancy and confinement of the worker. Prior to

recruitment, every worker must be medically examined by a registered medical practitioner at the expense of the employer.

The maternity care is provided to insure worker employed continuously for at least six months by the same employer on provision of a medical certificate. Maternity care is provided for up to four live births. The scheme is managed by the National Health Insurance Scheme (Law of the Federation of Nigeria, 1990; Compendium of Nigerian Labour Laws, 1997; Wage Indicator Network, 2021).

No Harmful Work

There are no specific legal provisions on protecting health and safety of pregnant workers. Women are generally not allowed to work at night except those who are employed as nurses and those holding managerial position. Night means a period of eleven or more consecutive hours that includes the interval between 22:00 to 05:00 (in case of industrial undertaking) or a period of nine or more consecutive hours that includes the interval between 21:00 to 04:00 (in case of agricultural undertaking) (Law of the Federation of Nigeria, 1990; Compendium of Nigerian Labour Laws, 1997; Wage Indicator Network, 2021).

Protection from Dismissals

It is not lawful for the employer to dismiss a pregnant worker, an employee who has recently given birth or during any period of special maternity leave. A full time female worker cannot be dismissed by the employer for her absence due to sickness which is attributed to pregnancy or delivery and is confirmed by the medical certificate (Law of the Federation of Nigeria, 1990; Compendium of Nigerian Labour Laws, 1997; Wage Indicator Network, 2021).

Right to Return to Same Position

There is no legal provision regarding right to return to the same position after availing maternity leave. However, it is mentioned that a worker cannot be dismissed during the term of her maternity leave which means that right to return to work is implicitly guaranteed under the law (Law of the Federation of Nigeria, 1990; Compendium of Nigerian Labour Laws, 1997; Wage Indicator Network, 2021).

Breastfeeding breaks

Nursing workers are entitled to breastfeeding breaks of at least 30 minutes twice a day. Law does not specify the age of the child until which nursing breaks are provided to the mothers. No mention of breaks being paid or not (Law of the Federation of Nigeria, 1990; Compendium of Nigerian Labour Laws, 1997; Wage Indicator Network, 2021)

Table 1: Summary of Paid Leave Entitlements Available to Mothers

OECD Countries			African Countries		
Countries	Length (Weeks)	Average Payment rate (%)	Countries	Length (Weeks)	Average Payment rate (%)
Australia			Algeria	14	100%
Austria	16.0	100.0	Angola	13	100%
Belgium	15.0	65.6	Benin	14	100%
Canada	16.0	47.7	Botswana	12	50%
Chile	18.0	100.0	Burkina Faso	14	100%
Colombia	18.0	100.0	Burundi	12	100%
Costa Rica	17.3	100.0	Cameroon	14	100%
Czech Republic	28.0	59.4	Cape Verde	9	90%
Denmark	18.0	52.4	Central African Republic	14	50%
Estonia	20.0	100.0	Chad	14	100%
Finland	17.5	74.8	Comoros	14	100%
France	16.0	95.7	Congo	15	100%
Germany	14.0	100.0	Côte d'Ivoire	14	100%
Greece	43.0	61.8	Democratic Republic of the Congo	14	67%
Hungary	24.0	70.0	Djibouti	14	100%
Iceland	17.3	77.9	Egypt	13	100%
Ireland	26.0	27.3	Equatorial Guinea	12	75%
Israel	15.0	100.0	Eritrea	9	
Italy	21.7	80.0	Eswatini	12	100% for 2 weeks; unpaid remainder
Japan	14.0	67.0	Ethiopia	13	100%
Korea	12.9	84.1	Gabon	14	100%
Latvia	16.0	80.0	Gambia	12	100%
Lithuania	18.0	77.6	Ghana	12	100%
			Guinea	14	100%
			Guinea-Bissau	9	100%
			Kenya	13	100%

Table 1: Summary of Paid Leave Entitlements Available to Mothers

OECD Countries			African Countries		
Countries	Length (Weeks)	Average Payment rate (%)	Countries	Length (Weeks)	Average Payment rate (%)
Luxembourg	20.0	100.0	Lesotho	12	100%
Mexico	12.0	100.0	Libya	14	50% (100% for self-employed women)
Netherlands	16.0	99.2	Madagascar	14	100%
New Zealand	22.0	47.5	Malawi	8	100%
Norway	18.0	95.5	Mali	14	100%
Poland	20.0	100.0	Mauritania	14	100%
Portugal	6.0	100.0	Mauritius	12	100%
Slovak Republic	34.0	75.0	Morocco	14	100%
Slovenia	15.0	100.0	Mozambique	9	100%
Spain	16.0	100.0	Namibia	12	100%, with a maximum
Sweden	12.9	77.5	Niger	14	100%
Switzerland	14.0	58.3	Nigeria	12	50%
Turkey	16.0	66.7	Rwanda	12	100% for 6 weeks; 20% remainder
United Kingdom	39.0	29.8	São Tomé and Príncipe	9	100%
United States	0.0	0.0	Senegal	14	100%
OECD average	18.4	-	Seychelles	14	Flat rate for 12 weeks; unpaid remainder
Bulgaria	58.6	90.0	Sierra Leone	12	100%
Croatia	30.0	100.0	Somalia	14	50%
Cyprus	18.0	72.0	South Africa	17	60%
Malta	18.0	85.6	Sudan	8	100%
Romania	18.0	85.0	Tanzania	12	100%
EU average	22.0	-	Togo	14	100%
			Tunisia	4	66.7
			Uganda	10	100
			Zambia	12	100
			Zimbabwe	14	100

Source: OECD, (2020)

Source: Addati, Cassirer and Gilchrist, (2014)

Maternity Protection and Optimal breastfeeding

Breastfeeding is said to be a human right. One of the benefits infants are denied when their mothers resume on or before the three months' maternity leave is inadequate optimal breastfeeding. Hence, most working mothers and their infants/ very young children globally, including Nigeria are denied their right to be supported optimally (International Baby Food Action Network -IBFAN, 2014).

Optimal breastfeeding is known to be one of the focus of maternity protection based on the International Labour Organization Maternity Protection Convention [ILO] No.183 and 191 in the year 2000. Back dated to 1981, the ILO convention No.156 and 165 were tailored to cover labour force participation and family responsibilities (Wage Indicator Network, 2021). In summary, maternity protection includes; childbirth related maternity leave, health protection at work for pregnant and breastfeeding women; cash and medical benefits; employment protection and non-discrimination; breastfeeding support after the return to work. It also includes a number of what are often called family-friendly or work–family balance policies and practices at the workplace level, including a range of flexible or reduced hours working arrangements; paternity and parental leave; and child-care support (IBFAN, 2014; Lewis, Stumbitz, Miles, and Rouse, 2014).

The reasons for maternity protection are to protect the health of mothers and their babies and minimize (and ultimately eradicate) the difficulties and disadvantages that working women face because of giving birth. Maternity protection is an important aspect of the ILO's Decent Work Agenda and is necessary for sustaining social reproduction and economic production, which are interdependent. There are both a human rights and a business case for maternity protection to be enshrined in national regulation and put into practice in enterprises. Effective maternity protection is a necessity for individual women, providing a measure of job security during the early stages of motherhood, enabling them to sustain employment, escape or avoid poverty and contribute to labour forces and economies. Maternity protection is also vital for sustaining healthy and equitable populations as well as healthy economies and economic development (Lewis, Stumbitz, Miles, and Rouse, 2014).

Maternity protection supports gender equality and contributes to dismantling barriers which prevent women from obtaining economic autonomy on an equal footing with men. It means defending women's rights to participate in the workplace, to choose their job and to retain their job status. Moreover, it entitles women to work in dignity, and in conditions that bar discrimination and discriminatory practices based on their sex and their reproductive role. It signifies fair salaries that meet their basic needs as well as those of their families, including when they are on maternity leave (International Baby Food Action Network -IBFAN, 2014).

Cognitive and Psychomotor Development

Among many factors that aid proper development and functioning of an infant brain is the parent-child interaction as well as the environment of the child. Experts have shown that the brain of an infant develops rapid within the early years and might be vulnerable to external factors ranging from nutritional status, socioeconomic influence, parents or mother to-child bond, relationship with the care giver, etc. (Lumen Learning, 2020). As mentioned earlier, mothers are expected to

resume to work after the three months of maternity leave and hence, infants are left under the care of someone other than the parents. Studies have shown that infants do not usually have pleasant experiences with care givers which might have negative impact on the children. Some of these infants are usually not properly fed by their care givers which might expose them to neurodevelopmental effects (National Academy of Sciences, 2015; Yang, Yang, Zheng, Song and Yi, 2021; Tierney and Nelson, (2009).

Yang, Yang, Zheng, Song and Yi (2021), established that parenting includes the care provided by the family essential for the promotion of the child's health, nutritional needs, emotional support and developmental stimulation. They posited that parenting environment is key in every child's development and this is well rooted in the Ecological Systems Theory.

Empirical Review

Prevalence of Infant/Child Abuse

Findings from a 2014 national survey report on Violence Against Children (VAC) conducted by the National Population Commission, Nigeria, with support from UNICEF and the US Centers for Disease Control and Prevention revealed that 6 out of 10 Nigerian children had experienced at least one form of abuse before reaching age 18 years (NOIPOLLS, 2017). An opinion poll survey also conducted by NOIPOLLS limited in 2017 showed that about 50 percent of the respondents attested to the fact that they have witnessed incidence of child abuse in their localities. Despite the prevalence of child abuse, 78 percent of those who reported they have witnessed child abuse claimed ignorance as regards awareness of organizations providing supporting services to victims of child abuse while only 22 percent reported that they had knowledge of such organizations.

Further, studies have shown that child abuse especially those affecting infants are less reported in the country, some of which might be due to ethnic and cultural diversities, religious affiliation and lack of awareness of the appropriate quarters to channel such complaints (Assim, 2020; Nwaomah and Nwaomah, 2017). Nigeria adopted the Child's Rights Act in 2003, giving legal consent to the United Nations Convention on the Rights of the Child and the African Charter on the Rights and Welfare of the Child. As a country operating from the federal system of government, legislature in each state was engaged with the responsibility of ensuring that the law takes effect in its constituency. As at 2020, only 25 of the 36 states in Nigeria have internalized or passed the Child's Right Act (Assim 2020; NOIPOLLS Limited, 2017). The remaining 11 states yet to pass the law are all northern states. Report shows that there are no signs of upcoming discussions or deliberations about the Act by those states' legislatures (Assim, 2020).

Types of Abuse

The following are some of the types of abuse children face from their care givers:

- i.) **Physical Abuse:** This include slaps, shoves, hits, punches, pushes, being thrown down stairs or across the room, kicking, twisting of arms, choking, and being burnt or stabbed (Haastrup-Ashagidigbi, 2020).
- ii.) **Psychological/Emotional Abuse:** This include a range of controlling behaviours such as continual humiliation, threats against children or being threatened with injury or death. Psychological theories focus on personality traits (i.e., sudden bursts of anger, poor impulse control, and poor self-esteem) and mental characteristics of the offender. Various theories suggest that psychopathology and other personality disorders are factors, and that abuse observed or experienced as a child lead some people to be more violent in adulthood. A study suggested a psychological profile of men who abuse their wives, arguing that they have borderline personalities that are developed early in life (Mboho and Udoh, 2018).
- iii.) **Sexual Abuse:** This form of violence include rape, sexual assault with implements, being forced to watch or engage in pornography, enforced prostitution, and being made to have sex with friends of the perpetrator.
- iv.) **Neglect:** Neglect occurs in situation when the care giver fails to provide proper care to the child. Although, experts have argued that neglect is a parental issue and as well persons who have been given the responsibility of caring for the child, especially, teachers, foster care providers, etc. (Australian Institute of Family Studies – AIFS, 2021; Idogo, 2011).

Impacts of Abuse on the Child

There are numerous negative impacts of abuse on a child and this might either manifest immediately or in later years. Children suffer injury, frequent illness, impaired lifelong physical health challenge/ disability, mental health, fear, depression, anger, lack of trust/insecurity, malnourishment and even death as a result of violence or abuse from their care givers. Studies have shown that children who experienced abuse are more likely to be violent adults. Hence, violence is being passed down from one generation to the next. It is therefore important to break the cycle of violence to create positive multi-generational impacts (Nwaomah and Nwaomah, 2017; World Health Organization – WHO, 2020).

Malnutrition of Infants by Care Givers

The 2020 Global Nutrition report on Malnutrition has revealed that about one – quarter of children below the age of five years (i.e., 149 million children) are stunted. In 2020, Nigeria was ranked among countries with higher prevalence rate of stunting among children in the world – 36.2 percent (WHO, 2020). Malnutrition affects gastrointestinal function. In poor societies, most of the children experience impaired intestinal function and environmental enteric dysfunction leading to delay in their development. Findings from a study conducted by Jimoh, Anyiam and Yakubu (2018), also found that there is an association between nutrition and hearing and language domain.

Malnourished children were reported to have delay in maturation of the auditory pathways and this damages the central and peripheral hearing.

Children left in the hands of care givers have been found to suffer from malnutrition. Some of the care givers due to lack of professionalism in discharging their duties are not patient enough when feeding the infants. In other instances, the food meant for the child is eaten or trashed by the care giver for reasons best known to them (this might be in reaction to the offence of the parent of the child, wickedness/unfaithfulness, covetousness, etc.) while the child is left to starve.

Perpetrators of Child Abuse and Risk Factors

Empirical findings have shown that perpetrators of child or infant abuse could be the father, step-father, step-mother, close relatives, friends, acquaintance/neighbor and foster care givers. According to the Australian Bureau [ABS] of Statistics Personal Safety Survey (2005), participants who had experienced physical abuse before the age of 15, 55.6% experienced abuse from their father/stepfather and 25.9% experienced abuse from their mother/stepmother. While, foster carers, teachers or child care providers were charged with neglect. Contrary to other types of abuse, research suggests that a far greater number of child sexual abuse offences are perpetrated by adults who are not in a caregiver role (ABS, 2005; US Department of Health and Human Services [US DHHS], 2005).

Findings from the ABS Personal Safety Survey (2005) indicated that for participants who had experienced sexual abuse or defilement before the age of 15, only 13.5% identified that the abuse came from their father/stepfather, 30.2% was perpetrated by other male relative, 16.9% by family friend, 15.6% by acquaintance/neighbour, and 15.3% by other known person (ABS, 2005).

Findings from the research work of the Children's Bureau (2020), identified the following risk factors to increase the rate of infant abuse by caregivers: substance use, unresolved mental health issues, difficulty bonding or nurturing with the child, prior history of child abuse or other trauma.

Risk Factors for Perpetration

Risk factors are characteristics that may increase the likelihood of experiencing or perpetrating child abuse and neglect, but they may or may not be direct causes. A combination of individual, relational, community, and societal factors contribute to the risk of child abuse and neglect. Although children are not responsible for the harm inflicted upon them, certain factors have been found to increase their risk of being abused and or neglected (Centers for Disease Control and Prevention – CDC, 2021). The following risk factors are adapted from the Centers for Disease Control and Prevention, (2021). Several risk factors under each sub-heading; individual, family and community have been highlighted. For the purpose of this study, emphasis will be placed on the “*Individual risk factors*”.

Individual Risk Factors

- Caregivers with drug or alcohol issues
- Caregivers with mental health issues, including depression

- Caregivers who don't understand children's needs or development
- Caregivers who were abused or neglected as children
- Caregivers who are young or single parents or parents with many children
- Caregivers with low education or income
- Caregivers experiencing high levels of parenting stress and economic stress
- Caregivers who use spanking and other forms of corporal punishment for discipline
- Caregivers in the home who are not a biological parent
- Caregivers with attitudes accepting of or justifying violence or aggression

(Source: Adapted from the Centers for Disease Control and Prevention – CDC, 2021)

Conclusion and Recommendations

Findings from this study have shown that perpetrators do not spare infants (children within ages 0 – 11 months) from show of violence. Also, the study has been able to reveal that duration of maternity leave affects both the mother and child in one or the other. Nigerian nursing mothers are one of the lowest paid during maternity leave in Africa compared to their counterparts in other countries. Nursing mother finds it difficult to balance work demands and the care of their newborn, while the infant is denied opportunities to optimal breastfeeding, healthy nutrition and cognitive development.

It is important to note that one way in addressing the subject matter is for the Nigerian government and other stakeholders like the Nigerian Labour Congress, etc., to re-address the missing link in organizational law and maternity protection acts. This is a human rights issue. It is therefore, imperative for duty bearers to provide an enabling environment and policies that must be converted into practice.

This study, therefore, recommended that systems must be strengthened such that abusers of children are brought to book as deterrent for others. Organization should also consider having waiting room(s) where nursing mothers could come with their babies and nannies without losing focus at work. The Nigerian Labour Congress, should put forth as part of their goal ensuring that organization allow nursing mothers to maximize the three months' maternity leave with at least minimum 50 percent pay as stated in the Labour Law Act. Finally, regulated body must be in place overseeing the sourcing and conduct of persons rendering care giving services in the country.

Limitation of the Study/Suggestion for Further Study

This study was unable to conduct a survey or interview sessions due to lack of funding. Findings from the survey or interviews could have shed more light on the subject matter, add to the robustness of the study and served as supporting evidence that could inform policies.

Hence, there is need for further studies to conduct interviews or surveys in examining issues surrounding impact of maternity duration on the level of vulnerability of infants to abuse from care givers to gain in-depth knowledge of the subject matter.

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