

Grandmothers: Othermothering Responsibilities in Kenyan Rural Communities¹

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ABSTRACT: We based this article based on the results of a more ample investigation in the Eastern Province in Kenya. In this study, we used an interview guide and participant observation from 20 grandmothers, to record interactions between them and their orphaned grandchildren, as well as amongst themselves. We were also interested in the way women and children created awareness on AIDS through verbal communication and networks.

RESUMEN: Este artículo se basa en los resultados de una investigación más amplia en la Eastern Province en Kenya. En este estudio utilizamos una guía de entrevistas y observación participativa con 20 abuelas, con el objetivo de reportar las interacciones entre éstas y sus nietos huérfanos, así como entre ellas. También nos interesó la manera en que las mujeres y los nietos creaban conciencia acerca del SIDA a través de la comunicación verbal y las redes.

Key words: Grandmothers, othermothering, HIV-AIDS, orphans.

Palabras clave: abuelas, otras maternidades, VIH-SIDA, huérfanos.

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INTRODUCTION

This paper is based on the findings reported in a larger study titled *Grandmothers Called out of Retirement* in Embu District, Eastern Province, Kenya. In the larger study, unstructured interview guide and participant observation were used to collect data from 20 grandmothers, paying attention to interactions between grandmothers and orphaned grandchildren and also amongst themselves. The study also focused on how the women and youth were creating awareness about AIDS through conversations and networking. The larger study generated several different research findings on grandmothering and othermothering. The present paper concentrates on three aspects of these findings, namely: othermothering; challenges; and coping strategies. While examining othermothering, I pay attention to community mothering and how this ancient African approach to mothering had been abandoned due to exposure to a Western way of life that becomes part of the educated elite in Africa. There are numerous challenges that the participants face, mainly financial, particularly related to the health of the children, not to mention the psychological challenges due to the loss of their children, who might have been their only breadwinners. The participants have devised different strategies to deal with financial and health issues, as well as psychological challenges, and this is what will be discussed in the paper.

I situate my discussion on the following two questions: How can local communities develop strategies to deal with AIDS orphaned children in Africa, and in particular Kenya? How can the observers extend emotional, financial and psychological support without appearing to create a dependency syndrome?

The paper is based on an anti-colonial theoretical framework in order to analyze how colonialism destroyed the African cultural norms by introducing institutions that have distorted the

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social organization of African families. I note that, with or without colonization, African societies would have changed, and the social organization would have shifted in particular ways that can only be speculated today. I use anti-colonial thought to explore the challenges that African societies have been subjected to due to colonization, and how they resisted and dismantled the colonial structures.

When I use an anti-colonial thought as a framework to analyze the grandmothers' role as caregivers of their orphaned children, I do so for two reasons: 1) a reclaiming reason, where I see grandmothers stepping back into their traditional roles which were hitherto denied to them due to urbanization. This reclaiming is important as it has enhanced the bond between grandchildren and grandmothers. The cementing of this relationship, indicated by the rising understanding of the grandmothers' ways among children is consistent with the anti-colonial framework; 2) The second reason is celebratory. The responsibilities that grandmothers and other-mothers embrace are celebrated — though ironically — after the death of the childrens' parents. They come amidst a retinue of other intervening processes such as industrialization, commercialization, urbanization and globalization that depress, fragment and devalue familial ties, traditions and Indigenous education. The assumption of mothering roles by grandmothers and others is in this sense a confirmation of the resilience of Indigenous values and education. The use of anti-colonial analysis is buttressed rather than undermined by this. In comparison to post-structural analysis, gender analysis or post-colonial thought, anti-colonial analysis appears in my view to be the most appropriate theoretical base for these experiences.

The paper is organized in five sections. Section two discusses the anti-colonial theoretical framework focusing on the way it speaks to grandmothering in Kenya. Section three deals with the methods of the study, while section four reports the findings

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and section five discusses them further. A final section concludes the study by highlighting its key arguments and pointing the way forward.

ANTI-COLONIAL THEORETICAL FRAMEWORK

The anti-colonial framework has provided me with tools with which to analyze the grandmothers' voices of resistance. This is because it is a social theory that questions the configurations of power embedded in knowledge production (Dei, 2000), and examines power relations inherent in the interrelations of subordinate, colonized groups or societies to dominant, colonialist societies or cultures. It is the writings and voices that speak about people's experiences of domination, migration, suppression, colonialism, neo-colonialism and resistance (Dei, 2000, Ashcroft, 1995). In the case of the grandmothers, it tells the stories of the way they assumed a role that had been taken away from them because they did not have enough education or even the language to communicate with their grandchildren. It provides a space for these grandmothers to speak about how they watched their children die of a disease they could not treat with herbs that they used when they were growing up. It gives a space for the grandmothers to voice their frustration with the government agencies. It rewrites history and is part of the schools of thought that depict Indigenous knowledge or traditional ways of knowing, learning or teaching, legitimating and validating them.

An anti-colonial discourse is shaped by the experiences of colonial subjects who question the concept of universal standards by pointing out, or recognizing its limited scope and perspective (Amadiume, 1987; Smith, 1999; Dei, 2000). In this paper, the theory is shaped by the realities of the grandmothers who in some cases sold their land and their livestock to educate their

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departed children and now find themselves destitute and no one to turn to except their impoverished neighbors or government agents. In addition, the framework challenges the institutional powers and imperial structures that are in place even now in a country like Kenya — 46 years after the political independence — that are a relic of colonial experience. This study attempts to use anti-colonial theory as a form of resistance against this order of things by placing the grandmothers' voice at the centre of its analysis. The high number of orphans is a phenomenon which presents an opportunity to genuinely consider the use of African values as an integral part of the new governance structures. In this respect, we assess the impact of HIV/AIDS on vulnerable women such as grandmothers. The knowledge and skills that they acquire in the process of caring for orphans are analyzed, especially because they relate to African cultural norms. The section below provides an overview as to how the structures were dismantled, and why the grandmothers find themselves in the situation they are in today.

A BRIEF OVERVIEW OF KENYA'S COLONIAL PAST

In Kenya, the British colonizers established their hierarchical social structure based on race and class. By appropriating the best lands and confining local populations to native reserves, and recruiting male labourers to work away from their homes, the colonists established entrenched colonial production systems. One of the roles the colonial chiefs undertook was to recruit men from their communities to work as labourers, on railway or shipping constructions, or as porters or performing similar menial labour (Miles, 1989, cited in Loomba, 1998: 126-27). For the Kenyan women who worked the land, the loss of their men to the towns and cities meant a shift in male-female responsibili-

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ties. Moreover, the administrators of the colonial regime enforced a patriarchal dominated political system which strengthened the gender hierarchy in Kenyan society. The British colonizers imposed “the creation of African chiefs, contrary to the custom hitherto prevailing in most Kenyan communities” (Loomba, 1998: 126). Finally, the implementation of English common law resulted in the loss of women’s autonomy and proprietary capacity (Mikell, 1997: 20). Colonial systems thus shaped gender division of labour in post-colonial Kenya. By introducing policies that entailed dislocation of labour, colonization interfered with established family structures. Mercantile colonial production with its coercion of men into plantation farms, mine or domestic services, drastically shifted procreation, traditional norms and socialization of children, a trend that has persisted partly accounting for grandmothers and caregivers roles. In the last forty years, the trend in Kenya has been that the young educated families go to the cities, leaving behind grandparents in the rural areas. Because of extended separation between families in rural and urban setting, there was often an imperceptible fragmentation represented in its most salient form through declining competence in the local language of the grandchildren.

Occasional visits made by the urban and western educated population are often inadequate to develop bonds between children and their grandparents. The fragmentation has continued unabated for reasons that are not clear. However, my guess is that some of the lack of language competence would be in some measure instigated by parents who through education associated the acquisition and use of English or French to a superior lifestyle that they sought for their children. The belief that colonial languages are superior to local languages is at least in part fueled by the misguided colonial mentality that speaking these languages brings one closer to the white culture of their colonizers. The alienation younger generations from their grand-

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parents, and the lack of competence in local languages make no contribution to their lives. Its entrenched nature is thus part of the mental colonization which is eloquently presented by Ngugi wa Thiongo in his *Decolonizing Your Mind* (1985)

Although patriarchy and male-dominated structures had existed in African societies, the colonial systems fed them. Research shows that colonial governance subverted traditional female roles even in Islam dominated communities of (Ogundipe-Leslie, 1993: 109). Other studies show that traditional matrilineal power systems were replaced by male-centered ones (Sofola, 1998: 61). In addition, colonial systems perpetrated inequalities which were a classic anti-thesis of the European politics, “featured a centralization of bourgeois power, liberty, equality, fraternity and popular rule based on universal suffrage” (Courville, 1993:37). Gender inequalities intensified rather than declined as women were restricted to low status labour sectors through the curtailing of their educational opportunities. Missionaries, for example, segregated men and women by offering women education that emphasized home based activities such as crocheting and baking (Aidoo, 1998: 44). Currently, in Kenya the impact of inequitable education and governance systems that were established by colonial systems are still evident. It is important in this area to assess the role of grandmothers in confronting the challenges of HIV/AIDS, an epidemic that has drastically increased fatality among the parenting generation with the concomitant orphan burden.

RESEARCH SETTING AND METHODOLOGY

In the summer of 2005 I left Canada for Kenya to start my one year sabbatical study leave at a local university, and to begin my research in Embu, on grandmothers called out of retirement. The research work was carried out in two locations, Gaturi and

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Ngandori in the Embu district, one of four districts in East Kenya. Geographically and agriculturally, the district is part of the fertile and well-watered highlands that border the slopes of Mount Kenya. It is situated 250 kilometers North of Nairobi, the Kenyan capital, and is accessible via a tarmac road. The Embu district has approximately 100 thousand people, the majority of whom are engaged in subsistence farming. Both cash crops (tea and coffee) and subsistence crops (maize, beans, potatoes, arrowroot, cassava and banana) are grown on small-scale holdings.

This article is inspired by an earlier study that focused on cultural appropriate counseling services for people living with HIV in Zambia and Uganda (Wane and Kavuma, 2002). It provides a sequel to this study by assessing the role played by grandmothers living with orphans in HIV/AIDS endemic areas. The paper focuses on the data drawn from 20 grandmothers within a radius of 50 miles. Data was collected using participant observations and unstructured interviews permitting an in-depth study of respondents. Several studies (Hammersley and Alkinson, 1989; Jorgensen, 1989; Marshall and Rossman, 1989) have proven the appropriateness of participant observation in the study of behavior and attaching meaning to it. In this respect, our study used a variety methods, including observing, listening and questioning to decipher social organization of rural family structures dealing with the loss of a family member through HIV/AIDS. The role of grandmothers or other mothers as caregivers to orphans amidst this rising death toll is reinforced through observations. Admittedly, the dictum of studying the social world in a “natural state” as presented by Hammersley and Atkinson (1989) was a daunting requirement. However, through participant observation it was possible to participate in the traditional activities of women of the area such as cooking, fetching water, collecting firewood or picking tea leaves or coffee berries. These activities

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had grown increasingly unfamiliar to me because of my extended absence from the location.

We used snowballing recruitment, which allowed us to visit 44 homes. The research design was heavily influenced by feminist research methodology that depended on context as a guide to the selection of research methods. Being familiar with the cultural milieu of the locality, I collected data, bearing in mind what is socially acceptable for a person of my age and gender. For example, I took advantage of the cultural permission of dropping by without notice to make preliminary inquiries for an interview. I always considered the context to determine whether it was appropriate or not to request for an interview. Thus, whenever it was appropriate, I would make myself comfortable and showed no indication of being in a hurry; this allowed us to bond with participants by sharing our experiences; it also served to reassure them that I was one of their own and build trust. Each of the participants was interviewed either at their homestead or while assisting in cooking, eating or picking tea, coffee or walking to collect water or firewood. Traditional protocols were followed, including offering participants customary gifts of a packet of tea leaves, a kilo of sugar and, in some instances a two lb bag of corn flour. Most of the interview was unstructured and organic: after establishing the necessary rapport, my assistant or I would ask for their name or the name of the deceased children. We would always emphasize the fact that it was all right if it was too painful to share their experiences with us. In addition, the participants were asked about the source of their annual income, a subject which was also approached with caution because most people do not talk about the amount of money they make or receive from friends. As a result, the figures that the women shared with us were approximate and not the actual income. Most of the information was gathered through unrecorded conversations as the participant declined to be tape

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recorded, and transcripts of the conversations were reconstructed after a day's observation.

Out of the 44 homes, only 20 women agreed to participate in the research or had time to be part of it. All the participants were asked to provide their name, age, level of education, annual income, and the number of grandchildren they were looking after. Initially, especially in the cases of elderly women it was problematic to ask them for their names or ages. It is considered extremely rude to ask a grandmother for her name or age. Most of the grandmothers scolded me for asking these questions. However, after some prolonged conversations, when I mentioned that this was for official purposes, that is, writing and reporting the findings of my research as well as working with them to source for some financial support they agreed to give me their names (since the time of this research, I have connected many grandmothers and caregivers with many people in Canada who are now assisting the children).

FINDINGS

As noted earlier, the research findings were numerous, however, for this paper I only concentrated on three outcomes. In order to determine if a particular finding was worth reporting, a minimum of five women had to mention or talk about it in detail. That is, the number of times a topic was mentioned or discussed determined the significance of the issue and the need to analyze it. The biographical data that was collected from participants was considered critical in understanding the demography of those that carry the HIV/AIDS burden. Table 1 reports the results of this analysis. For ethical reasons the table uses pseudonyms to identify participants.

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TABLE 1
GRANDMOTHERS BY THEIR DEMOGRAPHIC CHARACTERISTICS

Name	Age	Education	Annual Income	No. of Children
Kirinyaga	85	No	\$300	5
Kirimiri	75	No	\$100	4
Tata	50	Grade 12	\$1200	3
Muthoni	37	Grade 8	\$500	2
Gatune	70	No	\$110	3
Amanita	72	No	\$170	5
Wambeti	50	Grade 2	\$60	5
Nyokavi	72	No	\$120	3
Wanjiku	75	No	\$60	2
Nyawira	47	Grade 12	\$1200	2
Mutugia	76	No	\$60	2
Fatuma	70	Grade 4	\$400	4
Nginda	77	No	\$100	5
Kimiri,	80	No	\$400	3
Karimi	65	Grade 5	\$800	1
Zuppedi	72	Grade 7	\$800	2
Wendo	18	Grade 9	\$120	3
Mweria	65	No education	\$400	2
Furaha	56	No education	\$200	5
Mwendia	76	No education	\$50	2

The age range of the participants was 85 to 18 years of age. Their annual income ranged between \$1 200 and \$60. The women who had the highest incomes were teachers who had grade 12 education and who had a teacher's certificate. The women with least education had the lowest annual income. That means there is some coalition between education and ability to earn. The women with \$300 and above owned small tea farms. The section below

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highlights some of the findings mentioned earlier such as community and other-mothering.

Mothering as a practice is pivotal to human existence as articulated by Ogundipe-Leslie (1994), quoted by Busby (1996) stated:

We are closer to human suffering through the experiences of motherhood and womanhood. We gain more compassionate hearts thereby, and history has shown that women demonstrate more probity and commitment in situations of responsibility (p. xvi).

Other-mothers are women who provide care for children who are not biologically their own. The institution of other-mothers is a common practice among many African communities despite colonial disruptions as demonstrated by grandmothers and other caregivers. Women who served as other-mothers were of varied ages. Contrary to James (1993) claim that other-mothers are over the age of forty, some of caregivers were under the age of forty, and thus less likely to have a sense of community culture and tradition. Collins (2000) refers to other-mothers as women who hold the family infrastructure through the care of members of their family or community. They can be sisters, aunts, neighbors, grandmothers, cousins, or any other woman who steps in and takes the responsibility of mothering. Community other-mothers have filled voids in the lives of children in African communities, in particular during slavery and now in the era of HIV/AIDS. The thread that runs through the stories of women providing other-mothering is altruistic motivation by taking in children. Nyawira, for example states:

I am not a relative of this child; however, his mother was a good friend of mine. I have to look after my friends' child because it could have been me. I see this child as my own. I have taught

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him how to do gardening, pick tea, light fire and look after the cattle. I make very little money, and I am still able to care for this child. What makes it difficult looking after him is my late friend's relatives. They want to take the child away from me. They are very poor and all that I want to do is help — that's all —, but they think I have other reasons. I do not get any help from the government. However, I believe God will provide for me and my two children.

Nyawira is keen to assist the friend's child, so are the child's relatives — because these relatives feel that it is their responsibility to assist the child of their late sister. However, from Nyawira's quote, the relatives have no means of even looking after themselves. At least with her, she has an annual salary of a primary school teacher. The stories also speak of determination as illustrated by Wendo, who is only eighteen with an annual income of \$120 but is confronted with the care of three siblings.

I had no choice but to grow up after my parents died. I am the eldest in the family [...] the good thing is that my two brothers and sisters listen to me. After school we all go and work as casual laborers that is why we have managed to keep together [...]

The participants saw the practice of other mothering as an age old African tradition that they relish. Kirinyaga, for example says: "I have accepted the children since they have been left to me even before the death of my daughter. I do not feel that it is a burden because my blood flows in their veins. They are all I have [...]".

Low incomes were a great challenge confronting women who were providing other-mothering services to orphans. Of the 20 respondents, 10 were earning annual incomes of less than \$200. A significant majority (16) were earning less than \$500. In most cases their income sources were also unreliable with 15 of them who participate in supplying farm laborers as tea pickers, an activity that was vulnerable to weather and market changes. Thus,

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many of them were living from hand to mouth and depending on credit to pay for their sustenance. Kiringaga neatly summarizes this situation,

The very challenges that I usually experience are finances, it's hard to live without a stable income. I have an account with Nene, the owner of Ungani shop. He allows me to take items like flour, sugar, cooking oil from the store then pay at the end of the month when I make money from picking tea. I wish that the government can help us, because I believe that the government can make things easier especially for my grandchildren. I don't think about myself anymore, I am just so concerned about my grandchildren.

There was a widely held perception that government should provide assistance through paying educational and health fees for the children as illustrated by Kirimiri's contention,

I hope the government will come to our rescue because on my own I cannot provide the necessary means to see these children go through their education. As you can see I am old and do not have much strength. I do not want you to feel sorry for me. Many times I get some help from my relatives, however, they have very little and most of times they live from hand to mouth.

Despite their hardships, the grandmothers and other-mothers found hope and inspiration in carrying out their responsibilities as mothers to the children they looked after. The grandmothers had high aspiration for their children despite very limited financial circumstances. This is captured by Kirinyaga who declares,

My grandchildren are my inspiration. I was able to re-focus about life when I lost my own children. There were times that I could not take it anymore because of financial problems; however, I have to always remind myself that there is a good reason on why

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I am in this situation right now. It is extremely hard to take five children at my age, but I know that I am not alone. I have my God, and for sure He will help me. I want them to have a wonderful future wherein they can experience the fullness of life. The government could give us food, clothes and medicines.

In some cases, however, other-mothers saw the children as a privilege. For example, Fatuma lives in a beautiful home in comparison with other grandmothers and she has a well taken care of the vegetable garden. She expressed her gratitude for having such grandchildren. When we asked her she said that:

They [the grandchildren] reminded me of my children; [...] It may be hard sometimes, however, I believe that God has a good reason why He gave us these children. Whenever they are sick we take them to the nearest hospital, or use herbs to treat them. My husband has been very supportive in caring of these children and we are doing everything we can to make sure they have a good future. We have taught our grandchildren to be faithful to God because if they have fear in God they would not do anything that would disappoint Him. Before they go to sleep at night we pray and ask for God's help [...] We have taught these children principles of cooperation, and team spirit. We tell them that co-operation and team work can make things happen and they are mainly taught through household chores. We have tried our best to divert their attention from the death of their parents.

There were other surprising results as well. Karimi's case is particularly instructive in this respect. She is married to a retired teacher. They live in a relatively good house and appear to have accepted their situation. They hold strong to the conviction that they have this through God's will and they have educated the children, one having attained university education. Karimi summarizes her hope by stating:

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This is not an easy situation, but we believe God will provide for these children. I know that God really cares for us. He performs miracles everyday of our existence. Further, I believe that God exists especially when I look at that banana tree — the plant that provided food for my grandchildren [...] Life is difficult, however, I am very grateful for the life of my grandchildren because we are old and these children have been very helpful to us. We help each other. Our only wish is that all the children get a good education so that they can support themselves once we are gone. We want these children to have a steady income before they start a family.

The study also investigated how women involved in other-mothering were coping with their new roles. Going through the data, it is clear that there is immense faith among the participants. Various traditional coping strategies were also employed to deal with stress that arose out of the other-mothering responsibilities. An extract from four women illustrates in quite a clear manner the use of traditional coping strategies.

Many times when my grandchildren fall sick, I have no money to take them to government hospitals. I rely on what my grandmother taught me. I prepare herbs and give them to the children. For instance, an avocado is very medicinal or even Aloe Vera. We have all the roots, leaves and bulks of trees, but we ignore these gifts that God has given us. I use them, because they are given freely (Kirimi).

I taught my grandchildren how to cook, pick tea leaves and how to make porridge. It is not easy to teach children about traditional way of life because when they go to school they learn something different. For example, they like to drink coca-cola and I know this drink has no value, it is all sugar, but they think this is being modern. They get upset with me when I insist that they follow our traditional teaching — what I have decided

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to do is teach them through action and when they do well, I give them a reward (Gatune).

I taught my children how to pick tea. With this skill, at least they can make some money as casual laborers. They like to learn, although I have to do it over and over again, its fun. Traditional ways of living will not help you to get a job in the city, but it will help you to survive in the village — the knowledge will enable them to look after their families later on in life (Nginda).

I teach my grandchildren [...] the importance of land because through it, we get our food [...] build our home [...] it is everything. To me the family plot is very sacred. I have also taught them how to respect the elderly and be polite to every human being (Muthoni).

DISCUSSION OF RESULTS: AFRICAN² FAMILY HOUSEHOLDS THREATENED

Carole Boyce Davies (1986) states that in African society, motherhood is crucial to a woman's status. It is through motherhood that a woman is esteemed. For the African family, the steady replacement of the old extended family networks by a nuclear family, the emergence of female-headed households, and families headed by children as a result of the impact of HIV/AIDS present challenges that were unimaginable barely three decades ago. The old African wisdom that a child belongs to the community is under threat. Why is the African family system being threatened?

For most people, it is usually through the family that children acquire cultural values and norms. In the past, they were taught social, economic, and political roles as well as their individual

²Africa is not a homogeneous society; it does not have a monoculture, therefore the AIDS situation differs from country to country.

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rights and social obligations. Traditional methods of instruction were oral narratives, including myths, fables, legends, riddles, lullabies, and proverbs. The mothers used lullabies as a means of instruction. According to Kenyatta (1965), the whole history and tradition of the family and clan were embodied in these lullabies; by singing them daily, the children would assimilate this early teaching without strain.

The various rites of passage were the final institutions of learning. In Kenya, for example, the piercing of the ears for both boys and girls marked the passage from childhood to adolescence. Before this, both boys and girls were under their mother's care. After the ritual of ear piercing, the boys were placed under the guidance of their fathers, while the girls were left with their mothers to learn through role-playing, imitation, and observation. The family set-up, with its traditional teachings and rites of passage prevented promiscuity and premarital sex. Men and women were made aware of the dangers of premarital and extramarital sexual behaviors.

The introduction of colonial/missionary education in Africa marked the beginning of the erosion of African values and norms. The imposed education served to segregate and promote division between genders. Boys were provided with vocational education that prepared them to work as blue-collar workers. Girls were given education that would enable them to be "good" wives. They were taught domestic science or basic hygiene. The children were taken away from their homes and placed in either boarding schools or day schools (Nathani, 1996; Wane, 2000, 2008, 2009). This was completely contrary to the indigenous methods of educating where instruction is simultaneous with everything in life. I do not want to romanticize the Indigenous African education, but faced with a crisis such as AIDS, it is important to look at the mistakes that have been made and search for answers in pre-colonial, colonial and neo-colonial eras.

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Needless to say, African cultures and societies would have evolved even if there had been no colonization. However, the changes brought about by colonizers disrupted the traditional functioning of many African societies and made it much easier for people to engage in behaviors that would have been unthinkable in traditional societies. Today, the traditional African family has been fragmented under the pressure of social and economic transformation brought on by urbanization and by a shift away from subsistence agriculture. As a result, many rural families are headed by females as husbands migrate to the cities in search of jobs, a trend that started with the coming of the colonizer.

CONCLUSION

Africans cannot go back to where they were before colonialism. However, an assessment of the disintegration of social structures and the need for new governance made up of culturally appropriate guidelines would provide new directions. Africans need to sit back and take stock of what has happened, not to lay blame on the colonizer but to establish new ground rules to regulate their societies. These ground rules could be established by borrowing from African traditions and what currently constitutes an African culture, which is a combination of many cultures.

The AIDS epidemic is forcing a redefinition of the role of the extended family, particularly that of grandmothers. In the past, their role was holistic in nature; they occupied a very central place in the life of a child. They did not have to work to support their grandchildren. With the outbreak of AIDS, this role has been changed to that of sole supporters of the orphaned children. This is because family support networks have become depleted with the loss of adult working family members. For instance, Muthoni

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felt that she did not have the strength or the energy to struggle to support her grandchildren. She loved these children, and she had performed her role as teacher of the traditions with diligence. She wanted to continue with this role of educating her grandchildren. However, this role changed with the deaths of both her daughter and her son-in-law.

Grandmothers have come to represent the best of the extended family. In the natural order of things, it has always been assumed that when couples raise their children they are investing in their own future, as the roles will be reversed in their old age. The AIDS crisis has changed all that. The grandparent's role as caregiver is no longer temporary, as 70% of grandparents who become guardians can expect to be saddled with the responsibility of raising children until they reach adulthood.

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