

Doctoral thesis

Doctoral theses at NTNU, 2021:251

Sesilie Smørholm

# Pure as the Angels, Wise as the Dead

The Culture of Infancy in Zambia

**NTNU**  
Norwegian University of Science and Technology  
Thesis for the Degree of  
Philosophiae Doctor  
Faculty of Social and Educational Sciences  
Department of Education and Lifelong Learning



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ISBN 978-82-326-5769-8 (printed ver.)  
ISBN 978-82-326-5826-8 (electronic ver.)  
ISSN 1503-8181 (printed ver.)  
ISSN 2703-8084 (online ver.)

Doctoral theses at NTNU, 2021:251

Printed by NTNU Grafisk senter

## **Preface**

My interest in the lives and experiences of children in Zambia started 17 years ago when I did my Cand. Polit. degree in social anthropology, and it has continued to grow throughout the years. I am grateful that I have been given the opportunity to write this thesis and contribute to the anthropology of infancy in African contexts. I hope that my descriptions of how people in Ng'ombe live their lives and take care of their babies will add some colour to the portrait of African Childhoods.

I hope that the readers can share my respect and admiration for people in Ng'ombe. And I hope, and believe, that my descriptions do justice to their lived experiences. I know that there is so much more to learn.

I would like to express my deepest gratitude to Mrs. Ester Magawa and her family who allowed me to become part of their family. Thank you for your generosity and care. I consider your home to be my home in Zambia. I am equally indebted to all the families in Ng'ombe who let me become part of their lives and share with me their thoughts and knowledge. A special thanks goes to Itai Mwila, my good friend in Ng'ombe, who assisted me for longer periods both in Ng'ombe and during one month of fieldwork in Chakubamba and Tindivu village in Luangwa Boma. Thank you for your seriousness in work and for brightening my days. And thank you for being so patient with me.

I am also grateful to Braimford Nkamba and Joyce Nkamba for their hospitality during both fieldworks, to Mr. Chakonta and his wife Mrs. Nalungwe for hosting and assisting me in Kasiwe village in Northern Province. Thanks to Mrs. Phiri (amake Helen), who brought us to her home in Tindivu village, and her parents Mr. And Mrs. Mwanza, who hosted us during my fieldwork in Luangwa Boma. Thanks also to Patricia Mulenga for her skilful assistance in Ng'ombe.

Many people have contributed to the formation of the ideas in this thesis in positive ways. Firstly, I am grateful to Professor Anne Trine Kjørholt, my main supervisor at the Norwegian Centre for Child Research. She has provided tremendous support throughout the project. This thesis has benefitted from her extensive insight in discourses on early childhood, as well as her critical thinking, on point comments, and advice. She

encouraged and motivated me when the road seemed too long. I am very grateful to my co-supervisor Associate Professor Jan Ketil Simonsen who also supervised my Master's thesis and helped me form many of the ideas that this project rests on. His thorough feedback and his profound insights in Zambian cultures have sharpened my thinking and writing. I had the privilege of being accompanied by Anne Trine and Jan Ketil in the field, and we have had many inspiring discussions. It has been a privilege having the two of you as my supervisors.

Professor Mapopa Mtonga (late) and Dr. Chileshe Mulenga (late) at the University of Zambia supported and shared their knowledge with me during both of my fieldworks. I miss both of you.

External reviewers provided valuable feedback during mid- and end seminars. Professor emerita Alison James contributed to shaping the ideas during the initial stages of the research, and Professor Kjersti Larsen's thorough reading and comments provided valuable directions to complete the writing. This thesis includes three journal articles and one book chapter that have benefitted from the insights and comments of the editors and anonymous reviewers. My thanks also go to Gerda Wever at the Write Room Press for helpful and efficient language revisions. I would like to extend my gratitude to the Norwegian University of Science and Technology for funding this project. And to National University of Singapore who hosted me for two years during the writing process.

The Norwegian Centre for Child Research (NOSEB) has been a stimulating and including workplace, and I have really enjoyed the company of my friends and colleagues at NOSEB. Thank you for all the inspiring discussions and laughter!

Special thanks go to my good friend Emily Yordanova, who joined me in the field in Zambia. We were together in Tindivu village, and we had a great time touring Zambia. She also did a second round of proofreading the chapters and one article in this thesis.

Finally, I would like to convey my warmest thanks to my family. To my mother and to my father who always believe in and support me. To my beloved Øystein; thank you for your unwavering support and patience. You gave me the extra strength, motivation, and time to keep me going and complete this work. And to our wonderful children Eline and

Leander, thank you for bringing so much joy to my life! Thank you all for providing me with the most important things in life.

*Trondheim, February 2021*

*Sesilie Smørholm*





## **Summary of thesis**

This thesis explores how parents in Ng’ombe township in Lusaka, Zambia, care for their babies and understand their bodies and sociality. Special attention is paid to babies’ growth and development, as well as the process of becoming a social person. The thesis is based on two years of ethnographic fieldwork conducted during two separate periods. Methods included participant observation, focus group discussion, unstructured and semi-structured interviews, as well as participatory methods such as photos and drawings.

The four articles included in the thesis describe how people in Ng’ombe see their babies to be born with a guardian spirit of a person who once lived. Newly born babies are seen as pure and innocent spiritual beings who are closer to the world of the dead than the world of the living. They possess other insights than adults. As such, they are, as expressed by a senior community member, “pure as the angels” and have “the wisdom of the dead” (see Article 2). As they grow and start paying more attention to their mother, they gradually become social members of the community of the living (see Article 1). During this period of transition, they are in constant need of adult’s care and protection. This thesis describes how parents in Ng’ombe, who on a day-to-day basis face challenges of meeting their children’s basic needs of food and medication, struggle to keep their babies alive. It also describes how mothers and older siblings mourn the loss of babies who leave the world too early (see Articles 3 and 4). By providing alternative models of infancy and maternal grief, I aim to challenge narrow definitions of the human “nature” and “needs” and demonstrate that human development and bereavement cannot be defined and evaluated as “natural facts”.



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# PART I

*When the baby is completed  
with all body parts.*

*The guardian spirit is ready  
to enter the body.*

*The mother will know  
when she feels its first kick.*

*It is now fully developed  
It has a spirit  
we can call it a mwana (a baby)*

Yana Thesa





## Chapter 1

# How it all starts

## An introduction

When a man and a woman are together,  
heated and aroused  
blood will be released from their spines.

Like the quick tongue of a chameleon,  
the woman's blood will snatch the man's blood  
Their bloods will melt together, forming a lump.

In the beginning it will look like a tadpole  
you can only see the spine.  
You see; everything begins with the spine.

Yana Thesa

### **Everything starts with the spine**

Yana Thesa<sup>1</sup>, who is a senior traditional birth attendant, knows that the curved spine is one of the first visible human body parts, and regards the formation of the spine as marking the beginning of human life. When all the body parts of the baby have fully developed, and the mother can feel its first strong kicks, the baby is defined as a *mwana* (baby). It now has a guardian spirit (*mzimu*) who is about to re-enter life. It is soon ready to be physically born and start its journey into becoming a full member of the community of the living.

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<sup>1</sup> It should be noted that while most residents of Ng'ombe belongs to groups from Zambia's Eastern Province, Yana Thesa is a Mambwe from the Northern province of Zambia. Even though people from the East generally do not associate the reproductive fluids to emerge from the spine, her statement stands out as representative for how parents, traditional herbalists and birth attendants from Eastern province conceptualized how human bodies emerge and gradually comes into being.

The spine of the newly born baby is soft and flexible, and the mother must carefully support its body and head. As the baby grows stronger, and the spine and neck harden, it will be able to control its head and look at its surrounding. It will smile to the mother and search for eye contact. This is also a beginning; the beginning of life as a family- and community member.

I was introduced to Yana Thesa in 2004 when I did my first fieldwork in Lusaka for my Master's thesis for the fulfilment of Cand. Polit degree in anthropology. I was then focusing on the lives and experiences of children who had lost one or both parents. Already at this time I became fascinated by the wealth of knowledge that traditional birth assistants, such as Yana Thesa, had about human reproduction, the beginning of life, the important transitions in life, and the ceremonies that mark them. In 2005 I left Ng'ombe with many unanswered questions and a strong wish to return.

This thesis focuses on how people in Ng'ombe understand the beginning of life; how babies come into being, how they should be cared for and how they influence the lives of those around. It also explores how babies gradually become social members of the community. Particular attention is given to the meanings that people hold to their bodies, their sociality, and their spirituality. To grasp complex cultural meanings associated with babies I am going to focus both on cultural representations and on everyday practices. I have particularly been inspired by Alma Gottlieb and Robert LeVine's descriptions of how cultural contexts shape and give meaning to childrearing practices. Their work demonstrates how human life is inherently social, and how studying the life of children, both younger and older, must include their caretakers, as well as the broader cultural context in which their lives unfold.

In this chapter I will reflect upon how the "spine" in this dissertation came into being, and how it, so to say, gradually has developed from a seemingly unwieldy lump of ideas and observations to gradually finding its shape and purpose. This will be done through reflecting on my research choices and experiences, as well as my position as a researcher. I will start with describing why I ended up in Ng'ombe and reflect on what motivated me to study children in an African context. I will then turn to a discussion as to why anthropologists and researchers in the interdisciplinary field of childhood studies should

include infants in their research, as well as how anthropology can contribute to theories of loss and bereavement, particularly in an African context.

## **Two periods of fieldwork in Ng'ombe**

Anthropologists generally acknowledge that gaining knowledge about human life and behaviour is a cumulative process, and that returning to the field can bring new understandings and deeper insights. This thesis draws on a longitudinal perspective on the lives of people in Ng'ombe. It is based on two years of fieldwork divided between two separated periods. The first was in 2004/2005 for my Master's degree, and the second was in 2009/2010 for my PhD degree. When starting my Master's study, I had the privilege of being invited to participate in a larger collaborative regional project in Southern Africa entitled "Children, AIDS and Communal Coping Strategies" supported by NORAD. My Master's thesis, titled "Children and Bereavement: Experiences of Orphanhood in Contemporary Zambia", concerns the everyday life experiences of children in Ng'ombe who had lost one or both parents. The thesis focuses on how adults in Ng'ombe perceive and respond to children's bereavement, and on how children express and cope with bereavement.

When returning to Ng'ombe to do fieldwork for my PhD degree it was relatively easy to gain trust and be included into the community. It seemed like the bonds I shared with people had just grown stronger over the years. We had nourished our relationship by exchanging letters, and, with some phone calls. For Christmas I had sent small gifts, showing that they were still in my thoughts. I believe that my return was another confirmation that my relationship with the community was important and serious. Many of the preadolescent and teenager girls that knew had grown into adulthood and became young mothers themselves. I therefore had the privilege to see how their lives had changed and how becoming a mother had brought new perspectives and new statuses. This also gave me the opportunity to participate in their everyday lives at an early stage of the research, helping in the house and with the baby. As the mothers already knew me well, they easily shared with me their experiences and knowledge of babies and of being a mother. Through participating in people's everyday life, I aimed to learn about the social practices and activities of babies and their caretakers, as well as the mother and babies'

network of relatives and neighbours. Insight in the social and cultural life of infants requires a holistic perspective, and I therefore aimed at covering many aspects of everyday life, such as interaction between infants and caretakers, practices related to feeding and nutrition, ritual activities, and more. My main methodological tool during both fieldworks has been observation of daily interaction and practices. In anthropology, it is generally acknowledged that we can only get an “insiders’ perspective” by living together with and participating in the everyday lives of those we study for an extended period. The ethnographic method also includes informal interviews and conversations, life-histories, and group conversations. This is paired with the writing of fieldnotes, and sometimes tape recording and filming. It can also include more quantitative methods, such as diverse household surveys (for a comprehensive description of ethnographic methods, see for instance Bernard and Gravlee 2014). For me, it was through the rather unstructured method of “hanging out”, of joining the flow of daily life paired with asking questions and writing notes, that I learned the most. This involved, amongst others, helping mothers out with daily chores, such as looking after the baby, joining people on visits, playing with children, and listening to people’s everyday conversations. The method of participant observation has both been important in building a sense of trust and intimacy with people, and it provided insight in their concerns and interests, which again came to guide the whole research process. Moreover, participating in the everyday lives of people allowed me to explore the rather messy divergences of daily practice and develop understandings that may not easily be obtained in more structured interviews.

### **Why Ng’ombe?**

Originally, my plan was to do research in a rural site in Zambia, not particularly in a poor urban township. I grew up in a small village in Norway and have always felt more at home away from the urban crowd. I liked the idea of doing fieldwork in an area where I could easily get an overview of the geographical and social context, where I could stay in a local household, participate in people’s everyday routines and become a member of the community. And I wanted to be in a beautiful place with lush nature and farmland. Yet, I ended up in densely populated Ng’ombe, where getting an overview of the network of dusty roads and narrow paths is almost impossible. A place where kinship ties stand out as more fragmented than in the village. -Ng’ombe; with its omnipresent loud bustle of

people and music. A township where people advised me not to go due to safety reasons. In 2001, local leaders estimated that the compound had three or four armed robberies per night (Nchito and Myers 2004).

When I arrived in Zambia as a Master's student interested in how losing one or both parents impacted children's lives, I soon realized that there were several reasons to do fieldwork in one of Lusaka's many townships. Firstly, the HIV prevalence was twice as high in urban areas than in the rural areas, and Lusaka province had one of the highest HIV prevalence in Zambia (Zambia Statistics Agency, 2018). In addition, the social impacts of losing parents was potentially higher in poor urban townships where families are economically vulnerable and the extended family safety nets are weakened (Foster and Williamson 2000). I already had a few contacts in Lusaka, including my local supervisor. It was therefore relatively easy to find a local household where I could stay and a research assistant. Of all the townships in Lusaka, Ng'ombe Township was chosen because of the proximity to the house I was staying, as well as the campus of the University of Zambia.

Except for maybe the first couple of chaotic weeks, I have never regretted the choice to do fieldwork in Ng'ombe Township. As a participant observer, anthropologists are totally dependent on getting along with people of the community we want to understand. It is crucial that we can understand and sympathize with their feelings and ways of expressing themselves; that we can identify with their joys and problems in life (Wikan 1976). I have been fortunate as I felt an immediate closeness and familiarity with people in Ng'ombe. As a young Master's student, I was quickly "adopted" by the couple whom I stayed with. Another family in Ng'ombe also took me under their wings and provided guidance, security, and care, as if I was their own daughter and sister. For my own, and the hosting families' safety, I could not move in permanently in one household, but I have spent several nights in the different households around Ng'ombe, and I could take part in their family life in the late evenings and early mornings. And the urban pulse, the bustle and sounds of urban life, and some of the smells (such as those of burning charcoal and fried kapenta<sup>2</sup>) have not only become familiar, but enjoyable, to me. I have also spent three

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<sup>2</sup> A local species of freshwater sardines.

months in two rural areas: a village in the Northern province, close to Mbala, and a village in the Eastern province, in Luangwa valley. This gave me an opportunity to compare the conditions that shape early childhood and caretaking practises in urban and rural environments and study kinship ties and migration between these areas.

### **Why the study of babies?**

Both the multidisciplinary field of childhood studies and anthropology have paid little attention to the very beginning of life when it comes to the meanings associated with the regeneration of life, the everyday life of babies, and babies' experiences. Researchers who have paid attention to the lives of babies, such as and Leslie Butt (1999), Alma Gottlieb (2000), Loise Holt (2017) and Heather Montgomery (2000), suggest that one of the reasons for this neglect can be found in the tendency in anthropology and childhood studies to focus on the individual agency, competence, independency and children's voices; a perspective that infants do not easily seem to fit in. Butt writes

Infants seem unworthy of critical theoretical attention because Euro-American ideas about infant health have been grounded in beliefs that infants are biologically consistent persons. Passive, biologically immature, and limited in their abilities, infants have been defined primarily through their physiological status (1999:82).

While the focus on agency and independency has opened doors for children to be taken seriously in academic research, the same focus also leads to an exclusion of children who do not achieve the ideal of independency and autonomy (Tisdall 2012). Adrian James points out that the significance of age is seldom explored in childhood studies as it draws us dangerously close to the developmental perspective; "a perspective that was directly challenged and largely rejected by the new paradigm that informed the social study of childhood" (2010: 490). Children's rights to participation, as stated in the UN Convention on the Rights of the Child, ratified by UN in 1989, is a powerful global discourse and a cornerstone in childhood studies. Critique drawing on feminist perspectives, has been raised towards the immense emphasis on children's voice in research and global policies for being anchored to particular notions of what it means to be a human being (Kjørholt 2005). Competence and agency are connected to individual autonomy, and ideals of

human beings as rational subjects, with the ability to verbally formulate needs and wishes, representing a particularistic notion of the human being. The embodied, relational subject constructed within a web of interdependent relationships to others is thereby rejected and left behind (Vetlesen 1996, Kjørholt 2004). Generally, childhood studies therefore tend to use the same theoretical and methodological framework that focuses on the voices and independent agencies on all children, regardless of how old they are. Those who cannot express themselves in words, and who do not seem to take part in the push-and-pull negotiation between themselves and others, are easily overlooked (Gottlieb 2000, Holt 2017).

Due to the relative absence on studies on infants in social sciences, much of the scientific and public debate on the youngest children is dominated by psychological theories developed in western contexts on what “normal” and healthy development is. This is often paired with notions of the “best ways” that parents can raise their children, which again guides diverse policies related to childcare (LeVine 2007). Even though the majority of children in the world grow up in Asian and African contexts, these theories still dominate discourses and policies on “a good childhood” (Kjørholt and Penn 2019). There is a need for cross-cultural studies on variations in what it means to be a young child in different social-cultural contexts, and on the diversity of perspectives and practices on child-rearing and development, revealing how different cultural contexts and parental ideas and practices impact young children’s lived experiences (Gottlieb 2004, LeVine 2007). As argued by Barlow and Chapin, studies of parental ideologies and practices of childrearing will not only raise awareness of cultural diversity, but also of potential universals of human development, “a picture less constrained by purportedly universal models of child development that were built on (and reinforce) particular psychologies of children’s development and mothering in the West” (2010a: 333).

The study of babies also has the potential to offer insights in how both children and adults are inevitably embedded in a world of structures, cultural models, and social bonds, and be more fruitful than research that merely focus on individual agency, independency, and states of being. This has been pointed out by Holt (2017) who argues that a study of infants, who are clearly vulnerable, dependent, and somatic beings, constantly growing

and developing, can unpack and enrich our understandings of human agency to include processes of development and change. Similar arguments have also been made by Gottlieb, who writes “If we pay sufficient attention to indigenous ideologies regarding infants as well as to their day-to-day lives, infants may steer us toward the balanced assessment of structure and agency that so many of us crave” (Gottlieb 2000: 128).

Including babies in our studies will not only offer new insights about the lives of children, but also new insights in what it means to be a human being in different cultural contexts. This has been pointed out by Kaufman and Morgan (2005), who write that the study of babies and the regeneration of life has the potential to articulate a range of knowledge about the cultural meaning associated with bodies, persons, and sociality. Existential questions tend to be articulated more clearly when we are faced with the margins of life. For the researcher, studying these periods can therefore be immensely stimulating as it allows us to rethink categories that we see as “natural” and self-evident, such as the limits between life and death and between self and others, as well as the making and remaking of bodies and persons. Studies of reproduction and the beginning and end of life can be key sites “for understanding the ways in which people re-conceptualize and re-organize the world in which they live” (Van Hollen 2003:5).

Even though there is still a need for research on the lives of babies and their caretakers, there has since the mid twentieth century been a general shift in anthropology and cultural psychology towards studying parental ideologies and cultural meanings of child-rearing. These deal with caregivers’ own views of caregiving, including the ideas and goals they have on how to raise their children so that they can become competent members of the community (See for instance Frankenberg 2012, Quinn 2005, as well as the articles presented in *Ethos* special issue on mothering edited by Barlow and Chapin 2010b). This thesis can be seen as a response to Alma Gottlieb’s (2000) plea for more cross-cultural research on the lives of babies, and I have aimed to contribute to a growing field of research on the lives of babies and their caretakers. Through providing an example of an alternative model of infancy, I wish to challenge narrow definitions of the nature and needs of babies and children and demonstrate that human development is not necessarily a “natural fact”.



## **Why the study of loss and bereavement?**

During the first weeks of fieldwork for my Masters degree I wrote “Life and death in Ng’ombe never seem very far apart”. Several times during a week I would pass by houses where a person had just passed away, and people gathered to mourn (locally known as a “funeral house”). Later I would hear children singing funeral songs during their everyday activities, such as the following emotionally moving song that was sung polyphonic by three neighbouring girls as they were playing with dolls.

My heavy load, I lifted it already myself.  
My mother where has she gone?  
My mother where has she gone?  
She’s gone to sleep.  
She’s gone to sleep where?  
In the grave, yes, where no one comes back.

In Zambia, death is not necessarily associated with old age. Much of this is due to the relatively high HIV prevalence; 11,5 % of all adults are infected by the HIV-virus. This has led to a high number of orphans, estimates suggesting 350 000 (UNAIDS 2019). Also, the child mortality rate in Ng’ombe is relatively high with 6 % of all children dying before they reach the age of five. However, in the last years there has been an important reduction in the under-five mortality rate. In 1990, one of every five children died before they reached five, something which is manifested in the experiences and memories of women who had children at that time (UNICEF, key statistics).

There are several detailed studies on how rituals facilitate the important transitions between life and death (for a review see Metcalf and Huntington 1991 and Robben 2017). However, there is a lack of anthropological studies on how experiences and expressions of grief vary both within and between cultures (Rosaldo 1989, Wikan 1988). Even though Sub-Saharan Africa has the world’s highest rates of child mortality, very few researchers have paid attention to how parents who lose their baby perceive, handle, and express their loss (Sturrock and Louw 2013). And similarly, while much has been written about the structural and economic impact of HIV/AIDS, the psycho-social impact of losing one’s parents has generally been neglected (Foster and Williamson 2000, Stein 2003).

As I started searching for literature from African contexts on the psychosocial effect of losing a parent, I soon realized that not much has been written on the topic. Moreover, the studies that I *did* find about the topic often refer to the “culture of silence” surrounding parental death, and end up making explicit judgements on the psychological ill-health of bereaved children, using words such as “disfranchised”, “hidden”, “disabled” and “neglected” about their experiences of grief and mourning (see for instance Daniel 2005a, b, Denis 2008, Fox 2001, Howard et.al., 2006, Makame et.al. 2002, Marcus 1999, Sengendo and Nambi 1997, Van der Heijden and Swartz 2010, Wood et.al. 2006). Except for the work of Jónína Einarsdóttir (2004), which I will return to in the theoretical chapter, there are also few anthropological studies that address mothers’ experiences of infancy loss in an African context. Researchers who studied maternal expressions of grief have, similarly to dominating research on parental loss, tended to suggest that cultural practices that “prevent” mothers from talking openly about their loss, also prevent mothers from dealing with their loss in healthy ways (Meyer et.al. 2018, Obi et.al. 2009, Sisay 2014). In these studies, emotions are perceived as universal facts; biological and physical, not historical, social, and cultural.

Saville-Troike states that stereotypes and misunderstandings occur “when the patterned use of sounds and silence by members of one speech community are interpreted according to the norms and rules held by members of another” (1985:14). Studies that assume lack of speech to be harmful run the risk of implicitly making judgements about the mental health of culturally different people by using other psychological schemas as a normative device. I strongly believe that anthropological research can contribute to the study of bereavement in important ways, particularly in contexts where loss and bereavement are experienced and expressed in other ways than the ways that we assume to be “natural”. For instance, several anthropologists have pointed out that children and adults of all cultures learn when to talk and when to remain silent, both silence and talk must therefore be socially imposed. Handling difficult emotions with silence is therefore just as “natural” as dealing with them through speech, and verbalizing feelings related to grief and loss cannot be assumed to be “natural”, “necessary” and “for the best” (Basso 1970, Saville-Troike 1985, 2003 and Tannen 1985). Moreover, as pointed out by Wikan, the actions, words, and silences of people that may seem different to us may resonate and become

understandable for us if we start by asking the basic question “what is at stake?” for those involved (Wikan 1992). Her statement echoes similar arguments particularly developed by anthropologists who focus on how people’s emotional experiences must be seen as both subjective and embodied, as well as collective and shared (Jackson 2004, Kleinman and Kleinman 1991, Lutz and White 1986). In his writings on how people in war struck Sierra Leone deal with adversity, Jackson argues that it is not the anthropologist’s task to try to create justice in a world full of injustice so that the world can be changed. Our task is to “do justice to the way others experience the world, and whatever is at stake for them” (2004:54). Anthropologists are in a privileged position to study the emotional lives of others as our methods depend on establishing close, trusting and affective bonds with people so that we can access what has been termed as “an insiders perspective”. In the case of loss and bereavement, to understand what is at stake for those we study demands an insight into the web of interdependent social relations that people are part of, local perceptions of the health risk factors of bereavement, and understandings of how others can assist the bereaved so that the suffering is not unnecessarily deepened or prolonged (Wikan 1992).

## **Presentation of the articles**

### Article 1. Persons in the Making, Perceptions of the Beginning of life in a Zambian community

To be published in *Ethos, Journal of the Society for Psychological Anthropology*. The article is accepted on the condition that two minor changes “to improve the articles readability” are made (decision letter from editor dated 18.02.2020).

This article focuses on how people in Ng’ombe make sense of the beginning of life, starting from conception until the baby becomes a full member of the community. Of central importance are notions of development. These are concepts that are given meaning and motivation through ideas and metaphors of cultivation, and the careful managing of reproductive substances. In the article I investigate and discuss thinking and practices related to childcare and growth in a Zambian context, contrasting ideas of child development related to theories originating from research conducted in Europe and North

America. The article includes a critical discussion of international developmental projects that aim to improve parental practices in contexts outside Europe.

Article 2. Pure as the Angels, Wise as the Dead. Perceptions of Infant's Agency in a  
Zambian Community.

Published in a special issue of *Childhood, Beyond Pluralizing African Childhoods*.

This article explores how people in Ng'ombe perceive unborn and newborn babies' spirituality and personhood, as well as their developing bodies. I critically discuss concepts that have long been of central importance in the cross disciplinary field of childhood studies, such as children's agency, independency, and being. The article looks at three representational cases where babies seem to exercise a great deal of agency. However, people see babies as highly vulnerable beings whom actions must be understood in relation to a dependency on others. Defining their acts of agency as part of individual capacities thus becomes highly problematic. In conclusion, I call for more relational assessments of children's agencies that not only focus on children as independent and complete social actors, but also integrate concepts of relationality, as well as experiences of dependency and vulnerability.

Article 3. Suffering Peacefully; Experiences of Infancy Death in Contemporary Zambia.

Published in *Ethos, Journal of the Society for Psychological Anthropology*.

The Article was also selected by the editors of *Ethos* to represent the journal in the annual edition of *Déjà Lu*.

This article explores how mothers in Ng'ombe experience and express the loss of a newborn baby. The discussion is based on two contrasting cases of mothers' expressions of loss and bereavement. In the first case the mother was not encouraged to express her bereavement and be part of the burial, while in the second case the mother expressed herself in words and by crying, and a normal funeral was held. Both cases illustrate how mother's expressions of bereavement are guided by local perceptions of the nature of babies, as well as cultural norms of when to cry and express bereavement, and when not to. In both cases, silence is interconnected with notions of "letting go" and of "suffering peacefully", on focusing on the here and now, on the future, and not on what used to be.

This will, according to people in Ng'ombe, have a positive effect on the mother's emotional healing and the baby's transition to the world where it came from.

## **Appendix**

### Book Chapter 4. Children's Drawings in Ethnographic Explorations: Analysis and Interpretations.

Sesilie Smørholm and Jan Ketil Simonsen.

*Published in Geographies of Children and Young People. Methodological Approaches.*

This chapter is written for a larger work on methodological approaches in childhood research. It provides insight into the possibilities of using children's own drawings to understand their emotional experiences. Based on drawings made by the children in Ng'ombe, it shows how knowledge and meaning-making must be seen as a product of human activity, which the researcher is also part of. An understanding of children's diverse expressions must therefore be based on profound understanding of the sociocultural context in which children live, as well as the situation of research with the children in terms of relations of power. Against this background we can explore how drawing is a meaning-making activity that can aid children to reflect upon and negotiate complex ideas such as those of time, place, and relations between people.

I have decided to include this book chapter as part of my thesis. However, since the focus of this publication is a methodological discussion related to use of drawings in ethnography with older children, I see it as a bit beyond the key theme of my thesis. I have therefore decided to present it in the appendix, conveying that the chapter has a different status and focus than the other three publications. However, I see an added value of this publication, shedding light on, and extending the insight into the everyday lives of babies and their caretakers. The methodological discussion is related to older children who have experienced the loss of their parents or baby siblings. Moreover, the chapter discusses how children's drawings can provide insights into their experiences of loss and bereavement, thus supplementing and giving added value to Article 3. I will elaborate on my reasons for the choice of including this book-chapter in my thesis, pointing to three main reasons for including it.

Firstly, older siblings are highly involved in the caring for their young siblings, feeding, carrying, bathing, disciplining, and playing with them. Much of my written fieldnotes include detailed descriptions of the multiple ways in which siblings care for their younger siblings, and the interaction between them. I have also paid attention to how older siblings experience and grieve the loss of a baby sister or brother. However, in this thesis, older siblings are left in the shadow of care practices and interpretations of adult caretakers, and I see this as one of the knowledge gaps of this thesis. Including older siblings in my analyses would add depth and substance to my exploration of the lives of babies, and I hope to include the practices and perspectives of older siblings in future writings. Article 4, however, includes a description of how an older sister became the main caretaker of her baby brother when his twin brother died. It describes how the sister tried to protect her brother from the devastating effects of bereavement, and how the two of them developed close and mutual bonds during this difficult period. It also provides insight in her understanding of babies, their vulnerability and dependency of others, and particularly the parents. And last, but not least, it shows how the older sister navigated and negotiated her own life situation during immense hardship.

Secondly, by describing how adults handle children's bereavement, the chapter offers a broader understanding of how people in Ng'ombe handle difficult emotions. Similar to mothers in Ng'ombe who have lost a newborn baby, children are generally not encouraged by adults to talk about their loss, and most are not allowed to participate in the funeral. But the chapter also includes descriptions of how some individuals and families cope with bereavement in alternative ways, allowing children to participate in the funeral of their late parent and to express their bereavement verbally. And even though parents might tell bereaved children not to remember the loss of a loved one, children have rich memories of the life they used to live and express their memories in various ways. Talking about a late parent and crying is one of the many ways in which children express themselves. I have seen many similarities in how children and adults expressed bereavement, including how other community members assist the bereaved to manage difficult emotions. These insights became important to my understanding of how mothers handle grief and added depth to my understanding of human interdependency and vulnerability.

Thirdly, the chapter includes methodological and ethical reflections on studying sensitive topics such as loss and bereavement. It emphasizes the importance of respecting the cultural norms and values that guide the ways in which people deal with difficult emotions. Moreover, the chapter address the importance of paying attention not only to what people say in interviews and conversations, but also to how people communicate in silence. The methodological discussion thus illuminates that silence is culturally meaningful, and that including silence in our analyses provides important insights into how people express themselves and handle difficult emotions.

### **Aim of the thesis and main research questions**

This thesis aims to contribute to our knowledge on the lives of babies and their caretakers in a Zambian community. This is done through exploring local understandings of babies: their bodies, health, spirituality, growth, and sociality. It seeks to answer questions like: How do people in Ng'ombe think and give meaning to the nature of babies? How does local conceptualizations of infancy and babies shape the caretaker's choices with respect to the needs and well-being of newly born babies? How do caretakers understand and handle the death of a baby?

In similar ways to other anthropological studies, this thesis is motivated by a wish to gain insight in other ways of thinking, other ways of understanding, other ways of acting and other ways of feeling. It follows the classical anthropological stand that other modes of living that might seem strange and unnatural to an outsider, become highly meaningful when studied in the cultural context in which these practices are embedded (Geertz 1975). Even though the anthropological "crises of representation" that question the authoritative voice of the anthropologists to speak for and about "Others" (Clifford 1983, Clifford and Marcus 1986, Marcus and Fischer 1986) has had a tremendous impact on contemporary anthropology, the wish to imagine and understand the lives of other people remains at the very heart of anthropology. In the age of an ever-more interconnected world, cultural translation and the search of meaning continue to be important. Processes of globalization do not merely lead to creolization and cultural mixing in which ideologies become more flexible and fluid. It can also be the opposite; when contrasting ideologies meet, they might harden and become more clearly articulated (Anselme 2002). Moreover, processes

of globalization and modernisation are deeply embedded in relations of power and dominance, and western ideas and practises of modernity tend to ignore the wide range of cultural ideologies and ways of living, reducing world cultures and societies to possible manifestations of European and American cultures (Escobar 2004: 212, Hannerz 1989). These processes are not only about world imperialism, but also the global spreading of academic ideas and thinking. As pointed out by Rosman and Rubel “Professionalization combined with desires to create uniformity in method and theory throughout the social sciences always work against the idea of difference” (2003: 39).

My descriptions of how people in Ng’ombe understand and conceptualize the nature and needs of babies are motivated by a wish to challenge ideas of a universal “baby that somehow exists outside of culture”, so often described in the countless parenting manuals sold in bookstores, and published online, as well as in printed magazines and newspapers. These ideas also permeate the everyday lives of parents through national and international policy interventions across the world (Gottlieb 2004: xvi, DeLoache and Gottlieb 2000, Holt 2017).

The thesis is organized as follows: Chapter 2 contains a short presentation of the historical and contemporary context of Ng’ombe. In Chapter 3 I present key concepts and theoretical perspectives that have informed the empirical study this thesis is based on. The main focus is on anthropological research on young children in an African context, as well as some of the major debates in the interdisciplinary field of childhood studies. In Chapter 4 I discuss some of the methodological choices that I made before and during the study, including my position in the field. Particular attention was given to some of the challenges of studying what is not verbalized, including a discussion on some of the ethical issues of doing research on sensitive topics, such as grief and bereavement.

Based on my fieldwork, I have chosen to present an overview of everyday life of children and their caretakers in Ng’ombe to enrich the contextual description of importance for my analysis in a separate chapter (5). The articles included as part of this thesis will be further discussed in the concluding chapter (6).



## Chapter 2

# The setting

## Ng'ombe Township

I will now turn to the geographical, historical, and social context of Ng'ombe township in which the field research was carried out. This includes a description of the historical and economical context of Lusaka and Ng'ombe, as well as a note on the ethnic background of the residents of Ng'ombe. Towards the end of the chapter, I turn to some of the main health threats that people in Ng'ombe face. As far as I know, there are no studies that solely focus on the geographical, social, and historical context of Ng'ombe township, and it has not been easy to find detailed information on the township. I have therefore found it necessary to include some basic contextual information on Ng'ombe obtained during fieldwork for my Master's degree. I will begin with a brief overview of some of the existing literature on Ng'ombe. The list is, however, not exhaustive.

### **Sources of information on Ng'ombe**

Even though there are no full-length studies that provide rich contextual descriptions of Ng'ombe, several research projects have been conducted in Ng'ombe. The work of geographer Garth Myers (2017, 2011) on postcolonial processes of urbanization in Africa should be particularly noted. In his work he pays special attention to Ng'ombe, a township whose geographical location, vis-à-vis several spacious and affluent areas, illustrates well how "Lusaka, like many African cities, still bears the scars of colonialism" (28: 2011). In addition, there are several articles and research projects that describe some of the infrastructural challenges that Ng'ombe faces, such as challenges of flood risk (Nchito 2007), solid-waste management (Nchito and Myers 2004), electrical load shedding (Umar et.al. 2019) and challenges of quality water provision (Namafe 2012). Chileshe Mulenga provides detailed evaluation of upgrading and poverty reduction projects in Ng'ombe (Mulenga 2003, Mulenga et.al. 2004). There are also studies of the situation of women in Ng'ombe; their information needs (for example information on health issues and entrepreneurship) and the ways in which they obtain this information (Mulauzi 2017), as

well as studies on the topic of women who experience violence in relationships (Sichimba et.al. 2020). Of particular relevance is a study conducted by Maimbolwa et.al. (2019) on mothers in Ng’ombe’s experience with socio-economic factors associated with perinatal morbidity and mortality, as well as Sichimba and his colleagues psychological study of predictors of the quality of interaction between grandmothers and their infant grandchildren in Ng’ombe (Sichimba et.al. 2017).

It should be noted that the economical and historical background of Ng’ombe is far from unique in the context of Lusaka, and there are several relevant studies that provide descriptions of the history of Lusaka and its many townships (see for instance Mulenga 2003, Williams 1986). Karen Tranberg Hansen (1989, 1996, 1997, 2000) and Ann Schlyter (1999, 2009) should be particularly noted for their long and in-depth research in Mtendere and George township, as well as on the contemporary and historical contexts of Lusaka. Their work provides insight into what life looks like at the grassroot level for residents of high-density townships, as well as the ways in which national and international policies and economics manifest themselves in these townships.

## The history of Lusaka and Ng’ombe



Figure 1. Air photo of Ng’ombe and the bordering affluent, low density areas. Map data ©2020 Google, Mexar

At the time that Zambia was brought under British colonial rule in 1889, there were no major urban centres in the region. Most of the cities in Zambia were formed in the beginning of the 1930s when Zambia's copper industry started growing and emerged either along the railway line that was mainly designed to transport copper to the port in Durban, or around the copper mines. Lusaka formed along the railway line, and due to its central location, it was going to be the capital and administrative centre for what was then called Northern Rhodesia (Hansen 1982, 1997). Lusaka was at this time planned as a garden city with low-density areas and wide-open spaces with greeneries, a plan that never questioned the segregated nature of the city, divided between Africans and the Europeans. Rather the opposite; the system was intended to prevent Zambians from staying in town and make them return to their rural homestead when their working contract with the white settlers came to an end (Bigon 2011). The African population was only allowed to stay in Lusaka if they had a working contract with the white settlers and stayed on the land of their employer. Zambian women and the families of the workers were not allowed to stay in town as they were expected to look after the farm while their men worked in town. Men were at times allowed to return to their homestead during labour intensive periods, such as when tilling the soil, cutting trees for slash and burn and when harvesting. However, as more and more men migrated to town and colonial regulations made land less available, it became difficult for the remaining women, children, and old people to produce enough food to feed themselves and sell at the market.

From the 1920s onwards, and at the start of the Great Depression, malnutrition became a growing problem, and life in town seemed to hold higher prospects than life in the village (Hansen 1982, 1989). At this time, white farmers also struggled to sell their produce at the market. As a way to earn money, they engaged in a practice that was derisively called "kaffir farming"; that is "growing" huts for squatters who had to pay rent for staying on their land. These settlements were categorized as "informal" because they were unplanned and had not been permitted by the authorities. At the same time, they could not be demolished as they were situated on private property that was not regulated by the Town and Country building regulations. The majority of the workers staying in these areas did not return to the village after their working contract had ended but continued searching for work on their own. One of the advantages of these settlements was that the

families could live together (Hansen 1982). The population of Lusaka continued to grow rapidly after Zambia achieved independence in 1964, and the African population was granted the right to move freely into urban areas. As pointed out by Hansen (1982), squatter settlements became at this time “a response on the part of ordinary people to the changing structure of Zambia's economy, beginning with the colonial era when Zambia became a subordinate part of a system of capitalist production” (1982:117). In local parlance, these high-density townships are still termed *kamboni* “compounds”; a term that originated in colonial time when Zambians were only allowed to stay in the compound of their employer, far away from the white residential areas (Hansen 1982, 1989).

Ng’ombe Township, or Ng’ombe Compound, grew out of a worker’s compound on a ranch that was part of a white-owned farm estate. The fertile land where Ng’ombe is situated was particularly suitable for occasional pasturage to fatten cattle for the urban market. Hence, the name of the township, *Ng’ombe*; “bull” (Myers 2017). The township is located 11 km outside the Central Business District of Lusaka and shares boundaries with some of the wealthiest areas in Lusaka, such as Kalundu, Olympia Park and Roma, and the Mulungushi village complex. This has made Ng’ombe attractive as a place of residence for many of those working as domestic servants, gardeners, watchmen, and general workers in the surrounding rich areas (Mulenga et.al. 2004). Population censuses also show that the growth of Ng’ombe corresponds with the growth of the richer surrounding areas (Williams 1986). The yearly growth of Ng’ombe has been relatively high, even when compared to other urban areas in African countries (Chirwa and Nordal, 1998). According to Williams, the population in Ng’ombe in 1973 was 1513, and the census conducted in 2002 by Ng’ombe’s Residential Development Committee counted more than 70,000 (Nchito and Myers 2004). The latest national census from 2010<sup>3</sup> does not provide information on the exact population of Ng’ombe. Instead, it is categorized to belong to neighbouring Roma ward, which is a wealthy, low density area. Together they have more than 66 000 residents, and most of them live in Ng’ombe. As noticed by

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<sup>3</sup> The national Census of Population and Housing is published annually. However, due to the corona virus (COVID-19) pandemic, the 2020 Census has been delayed.

Mulenga et al. (2004) one reason for the large gap in the estimates of the population in Ng'ombe is the constant moving of people to and from the township.

Ng'ombe Township is divided in two residential areas:

1) New Ng'ombe: A planned extension established in the late 1990s through governmental and non-governmental upgrading and development projects (Mulenga et.al. 2004). This part of Ng'ombe has wide roads and relatively large houses with electricity. People call this area *maploti* because of the spacious, planned plots. Those who do not have piped water into the house have access to clean water through communal taps. New Ng'ombe is located adjacent to the oldest part, separated by the main road. A few public institutions, such as the communities only government-run health centre, are located along the road dividing the two parts. The health centre, which opened in 1988, has an out-patient department, maternity ward, which also offers prenatal and postnatal check-ups, and a voluntary counselling and testing (VCT) centre. Along the same road there is a bus station and a market that has expanded rapidly since the beginning of 2000 in line with the general high economic growth of Zambia.

2) Old Ng'ombe: Old Ng'ombe is an early extension of the original settlement, containing a police station, a large market, and a bus station. This part of Ng'ombe is the most densely populated area (Mulenga et.al. 2004). Most families in Old Ng'ombe stay in rented houses, and, as the family's income tends to vary according to work opportunities, many families end up shifting household quite often. Most people live in one or two-room houses, one room used as kitchen/living room, and the other as a bedroom. On average, houses are between 5 and 20 square metres. They are built with mud bricks or cement bricks with metal roof sheets, but often without windowpanes. Most of the houses do not have electricity, and food is prepared on braziers outside the house. People use a pit latrine located close to the house. Water is drawn from local wells or taps, which are rationed for a few hours daily. Some of the wells are shallow, and during the hot and dry season there is a danger of contamination resulting in intestinal diseases, including dysentery. Generally, residents in old Ng'ombe have low and unstable income as they earn their livelihood from informal economic activities such as domestic services for households in the surrounding wealthy areas, and also petty trading, tailoring, and renting out houses.

Most struggle to meet their basic needs such as food, housing, clothes, and medication (Mulenga et. al. 2004, Smørholm 2007)

### **The people from the East**

Many residents in Ng'ombe relate their background in the township to the colonial history. According to them, the caretaker of the farm that Ng'ombe initially emerged from, as well as most of the farm workers, descended from the Eastern province. Due to chain migration, the majority of the population of Ng'ombe are from the east, particularly Chewa, Tumbuka, Nsenga and Ngoni (Smørholm 2007). Hansen (1982) also points out that the geographical location of the townships in Lusaka tend to reflect ethnic geography; while the townships on the southern side of town have more people from southern ethnic groups, the townships located more to the eastern part of town, such as Ng'ombe, have more residents from the eastern ethnic groups. A survey published in 1978 indicated that 70 per cent of the population of Ng'ombe came from the Eastern province (Seymour et al., cited in Myers 2017). This group forms the largest element of Lusaka's population, and they speak Nyanja, which is the lingua franca of Lusaka (Hansen 1994).

In Zambia, the groups from the east generally see themselves as “one” and “united” as they share a similar cultural background. This is in contrast with the case of Malawi, where the Chewa and Tumbuka form separate political canalizations, competing for the same state resources. Here, the two groups form large groups. In Zambia, the Chewa and Tumbuka form relatively small groups, and cannot serve as political vehicles in and of themselves. Here, the groups from the eastern province rather tend to mobilize together in political debates (Posner 2004). However, there are still some cultural differences between the two groups. While the Chewa and Nsenga are matrilineal, the Tumbuka and Ngoni are classified as patrilineal. Amongst the Chewa, inheritance and succession go through the matriline, metaphorically called the *bele* (“breast”). In this system, the mother's parents and the mother's sisters and brothers (*amalume*) have a particular responsibility for the children (Peters 2010). Amongst the Tumbuka, on the other hand, inheritance runs from father to son, and the father's family is supposed to take particular responsibility in caring and bringing up the children (Friedson 1996, Munthali 2003, Mtonga 2012, Vail and While 1989). However, the Tumbuka were matrilineal until the

Ngoni invaded and dominated their area in the mid-nineteen century (Vail and White, 1989). Due to their history of being matrilineal as well as their closeness to the matrilineal Chewa and Nsenga, Zambian researchers such as Chondoka and Bota (2015) have claimed that Tumbuka are matrilineal. My early findings from Ng'ombe indicate that Tumbukas generally consider the mother's family to have just as many rights and obligations towards their children as the father's family. The responsibility they take for the children in the family depends more on the relative's resources and will to look after them. And the absolute majority of children who had lost their parents were under the care of their mother's family, particularly their mother's parents (Smørholm 2007).

According to Myers (2017) most residents of Ng'ombe have stayed in urban areas for a long time and have moved there from other townships in Lusaka or other towns in Zambia. Ng'ombe is highly multi-ethnic with people from different regions of the country. The boundaries between these groups are generally blurred, and there are few open conflicts based on ethnic background. Ethnicity is, so to say, not "a big issue" (Hansen 1994). This is not only the case for Ng'ombe, but for Zambia in general. Political scientists have partly related the relatively peaceful ethnic coexistence to Kenneth Kaunda's (one of Zambia's freedom fighters and the first president of Zambia) commitment to nonracialism and national unity. Later, dominating political parties have generally been multi-ethnic, receiving support from voters belonging to different ethnic groups. Maybe due to this political system, wealth and riches does not follow lines of ethnicity in Zambia (Hansen 1994, Posner 2004, 2005, Scarritt 2006). As noticed by Hansen (1994) people living in high density townships do not talk about ethnic differences and specificities. They talk about differences in wealth, in power, and in opportunities. They talk about themselves in contrast to the *apamwamba* (people at the top) living in *mayadi* (the yards), and understand their lives in contrast to those with resources enough to settle in low density areas with large, fenced yards (Hansen, 1994: 48, for a child perspective, see also Smørholm 2007, Smørholm and Simonsen, in press).

## **A geography of exclusion**

There are now more than 42 high density townships in Lusaka, and 70 % of the city's inhabitants' stay in such settlements (Nchito 2007). However, these townships occupy only 20 % the city's total area (Fallavier et.al. 2007). The lack of land for housing for those with lower income has forced people to live in overcrowded townships that lack access to basic services such as clean water and good infrastructure. The latest statistics on living conditions in Zambia indicate that 20.2 % of the population of Lusaka live in poverty (2010). However, the measurements of self-assessed poverty indicate that 70,5 % of the population in Lusaka see themselves as poor (Central Statistics Office (CSO) 2016). According to CSO, what impacts the household's economy most severely, second to the death of a breadwinner, is eviction from the house. In Lusaka, house rentals tend to be pushed up quite frequently as access to housing is lower than the demand (CSO 2016, Mulenga 2016). For most residents in townships such as Ng'ombe, whose absolute majority stay in rental houses, being evicted from the house is an omnipresent threat. One of the most used coping strategies for those who struggle economically is to buy cheaper food and reduce on the number of meals the family eats per day (CSO 2016). In a study conducted in three townships in Lusaka that are similar to Ng'ombe, almost 67 % of the 180 households included in the study revealed that they only had one or two meals a day (Simatele 2007). In addition, many households struggle to buy medical help for their family and have limited access to clean water and safe sanitation (Maimbolwa et.al. 2019, Mulenga et.al. 2004, Namafe 2012, Ncito 2007).





*Figure 2. Left: young mothers from Ng'ombe strolling along the wide, shaded avenues in an affluent area bordering Ng'ombe. Right: Ng'ombe township Photo: From Mulenga et al. 2003*

Several researchers have argued that the vulnerability of people living in townships such as Ng'ombe is a direct consequence of weak governance and the policies implemented to guide urban development. Lusaka City Council has a reputation for turning a blind eye to high density townships where improvement of living conditions is most needed (Hansen 1982, Myers 2011, Siamwiza 1986, Simatele and Simatete 2009). However, this should also be regarded in the context of the Council's lack of financial autonomy and the inadequate grants received from the government (Mulenga 2004). The dual nature of Lusaka inherited from colonial times, with a division between the planned (and previously all-white) areas and illegal settlements, persists today (Bigon 2013). This has also been pointed out by Myers, who states "The 'geographies of exclusion' that colonialism formed have hardly disappeared from the landscape of Lusaka. If anything, they have morphed into new forms" (2011: 39-40). Similarly, in her study of life experiences and life expectancies of young people in townships, Hansen writes that these generally have a feeling of being "stuck in the compound" (2005:8) as access to good healthcare, education, well-paid work, and private housing is a privilege granted to those living in the wealthier areas. People are also painfully aware that, even if you do manage to obtain a diploma, getting a job is first and foremost about having the right contacts. According to Hansen, young people living in such areas therefore experience urban life

“simultaneously as exclusion and inclusion. These processes intersect their sociospatial experiences, fuelling contradictions between their livelihoods and desires” (2005:3)

In the three last decades there have, however, been some positive changes in many of the high-density townships in Lusaka. Ng’ombe, for instance, has undergone several upgrading projects, often financed through international loans or donor organizations. Many of these upgrading projects have been facilitated and implemented by non-governmental organizations and include the construction of a community health centre, skills training centre, provision of micro-credit loans, and the sinking of boreholes in the township (Mulenga et.al. 2004)<sup>4</sup>. Due to rising copper prices, Zambia has also experienced a high economic growth in more than a decade, something which we might assume to have had a trickle-down effect on the lives of people in the townships of Lusaka. For instance, Lusaka has undergone a number of improvement projects focused on solid waste management, water and sanitation and road construction (UN-HABITAT 2009). At the same time, the World Bank (2020) states that the impressive economic growth has only benefitted a small segment of the urban population and had limited impact on poverty.

### **Major health threats in Ng’ombe**

Since the beginning of the 1990s, the HIV epidemic has impacted and continues to impact the lives of individuals, families, communities, and the society at large. When I went for the first time to Zambia in 2004, the HIV epidemic peaked with 65 000 AIDS-related deaths annually (UNICEF, HIV/AIDS Statistics). This was also the time that Africa, and particularly Sub-Saharan Africa, experienced what researchers, NGOs, and policy makers and the media called the “Orphan Crisis”. Researchers assumed a breakdown of the extended family (Foster 2000, Foster and Williamson 2000, UNICEF 2004), and orphaned children were presented as the ultimate victims of the pandemic; “the missing face of AIDS”, “living on the brink” (Hunter and Williamson 2000, UNICEF 2005).

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<sup>4</sup> It should, however, be noticed that several researchers have argued that so called foreign funded “development programs” are part of reproducing and producing long-standing power imbalance between the giver and receiver. Many of the neoliberal programs introduced in Africa have had devastating effects on the economies of these countries (See for instance Myers 2017).

However, the absolute majority of orphaned children<sup>5</sup> I met in Ng’ombe stayed with a caring relative who tried, despite lacking recourses, to provide them with care, shelter, food, and basic education (Smørholm 2007). In the last decade, ART (antiretroviral therapy) has become available for most people, and there has been a decrease in the number of new infections. The annual deaths in 2018 due to HIV/AIDS has therefore only 17 000 (UNICEF, HIV/AIDS Statistics); almost four times lower than in 2004.

The availability of ART and routine testing of pregnant women has also led to a decrease in the number of mother-to-child transmissions of HIV. A study from Livingstone indicates that while 19 % of all babies born by HIV positive mothers in 2009 tested positive on HIV, only 2% did the same in 2016 (Mutanga et al. 2020). The infant mortality rate has also decreased considerably in the last 20 years. When I did my first fieldwork in 2004, the under-five mortality rate was 12 % while in 2018 it had decreased to 5,8 % (UNICEF, key demographic indicators). However, studies indicate that the mortality rate is higher amongst children born in households with low economic status, and that the odds for dying are higher amongst the urban poor than those with the same economic status in rural areas (Madiese et.al. 2003). Some of the main causes of child illness and death in Zambia are pneumonia, fever (often associated with malaria), and diarrheal illnesses (Zambia Statistics Agency, 2018). These illnesses often manifest in overlapping ways.

Zambia conducts routine childhood immunization, and in townships like Ng’ombe, the clinic arranges two child health weeks annually for children under five. In addition to providing vaccinations, vitamin A and deworming, children are weighed. Those who are found to be underweight are normally referred to a clinic, and trained volunteers also offer recommendations when it comes to child health and nutrition. Like other government-run hospitals and clinics in Lusaka, the Ng’ombe clinic is understaffed and faces challenges of limited space. The rapid population growth puts them under increasing pressure. For instance, the maternity ward in Ng’ombe has, according to my observations, one midwife working nightshift. People in Ng’ombe who need medical attention normally go to the

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<sup>5</sup> The term “orphan” has become part and parcel of the Zambia’s vocabulary, and is normally used about a child who has lost at least one parent. However, there is no word in the local languages that is equivalent to the English term “orphan” (for a critical discussion on the concept orphan, see Smørholm 2007).

clinic early in the morning to line up, and some will wait until late in the afternoon. Some of the very poor also have problems accessing public health services as they cannot afford the minimal user charges or the prescribed medication (Maimbolwa et.al. 2019).

## Chapter 3

# Theoretical perspectives

As stated in the introduction, the aim of this thesis is to obtain insight in how babies in Ng'ombe are conceptualized, and the everyday practices they are part of, thus inscribing myself in, and further contributing to, a growing ethnographic literature on cross-cultural perspectives of what it means to be a young child and a human being in general. To understand what is seen as the 'nature' of babies, it has been necessary to include an investigation of local conceptualizations of what it means to be a human being and a person, the human life cycle and the relation between humans and the ancestors.

Some of the key analytical concepts of my thesis are development, growth, and personhood in early childhood, as well as mothers' experiences of bereavement after the loss of an infant. Anthropological perspectives have been a source of inspiration in all steps of the research process, from the formulation of research questions and focus, to fieldwork and key concepts and tools while interpreting and analysing. To investigate how babies are conceptualized and understood in Ng'ombe, I also draw on theoretical perspectives related to the interdisciplinary research field of childhood studies, emphasizing how childhood as a social phenomenon is anchored in a particular social, cultural, and economic context at a particular time in a particular place.

As many other social scientists and psychologists, I have been motivated by a reluctance to let narrow parameters of "normal" development and "normal" bereavement, parameters that mainly rest on research conducted in communities in the United States and western Europe, dominate our understanding of the lives of children and adults (Harkness, 1992, LeVine 2004, Schweder and LeVine 1984). Adding to our knowledge of how people in different cultures and under different conditions understand their babies' needs and wishes, and do their best to keep them happy and safe, will not only bring awareness to the cultural diversity of caretaking. It will also bring awareness to the simple, but often neglected, fact that people across cultural boundaries have something to

learn from each other, and that we can use this knowledge to support the care and development of children (Harkness and Super 2020c: 10).

I follow the classical anthropological stance that practices and cultural representations that seem unnatural and strange in the view of outsiders will only become comprehensible through detailed knowledge of the socially and culturally organized contexts that shape them and give them meaning. Clifford Geertz (1973, 1975) famously argued that every culture has categories of what is “normal”, “natural” and “common sense”; things that we tend to take for granted and consider as “self-evident”. “Common sense” implies a certain degree of authority as it stands out as the only “sensible” and meaningful understanding of a phenomenon. However, what stands out as common sense for people in one community is in fact anything but common. It is deeply structured by, and imbedded in, a specific historical and cultural context. Geertz suggests that ethnographers should try to understand the ‘structures of signification’ that inform people’s ways of thinking and acting (1973:18). These meaning systems must be understood as part of a complicated web of relations, which can be described through what Geertz termed “thick description”. My research draws on this line of thinking as it aims to provide insight into how understandings of the development and needs of babies, as well as human emotional experiences and expressions, are deeply constituted by culture.

I continue this chapter by presenting theoretical perspectives and former research that inspire my study of babies, and particularly focus on the two broad topics of child development and experiences of bereavement that have been of central importance to me. First, I explore relevant theories on the growth and development of babies. In addition to discussing anthropological research on the topic, I include a discussion of a selection of theories that have been developed in the field of childhood studies and cultural psychology. The second and highly related topic concerns cultural conceptualizations of babies and their personhood. Towards the end of this chapter, I turn to a discussion on relevant anthropological literature on experiences of loss and bereavement. I sketch out some of the main arguments that are relevant to my research, and particularly focus on the work of Jónína Einarsdóttir, Nancy Scheper Hughes and Unni Wikan which I have found particularly inspiring.

## **The culture of infancy**

The title of this thesis “Pure as the Angels, Wise as the Dead. The Culture of Infancy in Zambia” is inspired by the title of Alma Gottlieb’s (2004) monograph on infancy amongst the Beng of Cote d’Ivoire; “The Afterlife is Where we Come From. The Culture of Infancy in West Africa”. Similar to Gottlieb, I acknowledge “culture” to be a useful concept in the study of the lives of babies and their caretakers. Given the fact that anthropology is commonly defined as “the comparative study of culture and society, with a focus on local life” (Eriksen 2004: 8), using “culture” to understand human behaviour is far from unique. Most anthropologists use the concept of culture quite widely, drawing for instance on Clifford Geertz’s suggestion of culture to be “webs of significance” (1993: 5), which have been spun by ourselves and, as anthropologists hurry to add, we continuously spin. Culture is made up of shared meanings, which are shaped by and which shape how we understand and categorize the world and how we behave and act in it (Geertz 1993). Cultural meanings are produced and reproduced through everyday interaction and are subject to negotiation and constant change.

The view of culture to be a neatly integrated, shared system of meanings and practices, automatically and seamlessly passed on from one generation to the next has lost its ground in anthropological representations. It is the flexible and dynamic nature of cultures that makes cultures adaptive to change (See for instance Barth, 1967a and 1967b classical theories on social change). Studies of culture must therefore acknowledge the crucial dialectic between social structures and human agency, as well as the global flows of ideas, goods, technologies, and people. This includes discussions on how people experience and interpret processes of globalization and “modernization”; the ways they adapt and resist changes, and the constraints and opportunities that these processes offer for individuals and groups (Lewellen 2002).

The anthropological use of the concept of culture has, however, been widely criticized and even abandoned by some (see for instance Abu-Lughod, 1991). Of central importance is Clifford’s (1983) critique of the way anthropologists construct their ethnographic authority by focusing on the strange and exotic; and Clifford and Marcus’s edited work “Writing Culture” (1986), which challenged the invention of “us” versus “them”, and the

transformation of “others” into anthropological objects whose salient features are defined in frames contrastive to our own. Within the field of childhood studies, Samantha Punch (2016: 357) has warned that broad comparisons might lead to an “over homogenization” of childhoods across diverse cultures and societies. Dividing the world into broad categories such as those of the “Majority World” versus “Minority World” or “the Global South” versus “the Global North” makes it difficult to see the complexities of how people live, experience, and make sense of everyday lives. At the same time, she acknowledges that cultural generalizations allow for comparison, and enable us to ask the “larger questions”, such as those exploring states of autonomy and independency, individualism, and collectivism. In agreement with this, I add that cultural comparison (which is at the very heart of the anthropological endeavour) sheds light on the larger existential questions related to the nature of life and death, the nature of personhood, and the nature of experiences and expressions of emotions. A cautious exploration of such concepts will not only open up for understandings of differences between cultures and individuals, but just as important; on what is common and shared. It is, as Wikan points out “essential that we show the uttermost caution in how we deploy the term [culture], and that an integrated disposition to show “difference” is joined by no less urgent need to acknowledge the limits of otherness (Wikan 1992: 476). In many ways, the concept of culture is far from easy to dismiss as it touches upon the very “fundamental aspects of human existence”, and thus captures more than we can easily describe in our writings and analyses (Robbins 2013: 447). For a discipline with many subfields and interests, the concept of culture also remains as a unifying thread (Silverman, 2020).

Even though the critiques of the concept of culture are well-founded, I nevertheless find “culture” to be particularly useful in the study of infants; the ways their nature is understood and conceptualized and the practices they are part of. As pointed out by Harkness and Super (2020a), the customs and practices of childcare tend to be transmitted from generation to generation and are repeated over time, making them part of commonly accepted, and often unquestioned, cultural meanings. They write that:

To members of a culture, customs and practices of childcare seem obvious and natural solutions to everyday problems, developmental requirements, or social needs; their cultural nature become evident only when viewed from an outsider’s



perspective or when challenged in practice. Often these customs express deeply held beliefs and related emotions about the nature of the child and about the proper functions of a good parent (2020a: 16).

Through the analytical term *developmental niche*, Harkness and Super (Harkness et.al. 2010, Super and Harkness 1986, 2009) describe how cultural meanings, or ethnotheories, of the nature of children and the practices of childcare are mutually constitutive. As an example, they describe how Dutch parents hold that a balance between *rust* (rest), *regelmaat* (regularity), and *reinheid* (cleanliness) is important for babies' development and well-being, which again guides the ways they organize the children's lives and see themselves as parents. These parental ethnotheories have also been formalized in the guidelines in the national health-care system (Harkness and Super 2006). Parental ethnotheories include conceptualizations of children's development, and the successful transition from one developmental milestone to another, such as the shift from infancy to childhood (Harkness et al. 2010). These ideas guide the ways in which parents take care of and organize the everyday lives of their children, and thus how children learn and experience the world (Harkness et.al 2010, Harkness and Super 2020c).

Harkness and Super (2020a) emphasize that even if taken for granted, caregiver ethnotheories and practices of childcare are not static but change with time and with new generations. Sources of change can be the media, popularized findings of research, new economic and political circumstances, and access to education. And local understandings on the nature of children and practices of childcare change in response to processes of modernization and globalization. With new cultural flows, researchers acknowledge that processes of change are more rapid and more complex than previously assumed (de Haan et.al. 2020). At the same time, Harkness and Super remind us that child-care practices tend to be resilient to change; "culture change does not generally entail the simple replacement of one set of ideas or practices by another, but rather includes an active process of renegotiation and integration" (2020a: 15). Child-care practices are subject to constant negotiation and adaption, which makes them resilient to new circumstances and influences.

## **Anthropological explorations on infancy and child-care**

There are few systematic literature reviews that exclusively concern contemporary anthropological studies of infants. The field remains rather fragmented, and it has been challenging to get a complete overview of the field. However, several literature reviews on the anthropology of childhood also include rather extensive discussions on anthropological writings on infancy and early childhood (LeVine 2007, LeVine and New 2008, Montgomery 2009). Relevant is also Kaufman and Morgan's (2005) review on anthropological studies on the beginning and end of life. David Lancy's (2015, 2017) descriptions of the rich diversity of childhoods around the world should be particularly noticed for paying special attention to the cultural understandings of human reproduction, infancy, and caretaking. His works cover a wide range of topics related to how children in different cultures are valued and understood, as well as how they develop and learn (Lancy et.al 2010, Lancy 1996, 2014, 2015, 2017). Lancy demonstrates that the anthropology of childhood is growing into a rich field, something that contrasts the suggestions of Gottlieb (2000) and (Hirschfeld 2002) who have argued that anthropologists have little interest in the lives of infants.

Already in the 1930s, the "culture and personality school", initiated by researchers such as Margaret Mead and Ruth Benedict, explored human development and child rearing from a cross-cultural perspective, describing how development is not biologically determined but shaped by cultural expectations<sup>6</sup>. In line with the theories of Freud, they argued that the ways in which we are raised and treated as young children will have implications on what we become as adults (see for instance Whiting 1963). After its heyday, the culture and personality school has, amongst others, been criticised for uncritically accepting the Freudian thinking, and for studying childhood not for the interest in children themselves, but for understanding adulthood. However, the culture and personality school's argument that the ways in which children develop and become competent members of a community is subject to great cultural variation has been

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<sup>6</sup> For examples from the African context, see Fortes 1938, Read 1960, Richards 1956 and LeVine et.al. 1994.

inspirational to researchers interested in cross-cultural notions of early childhood such as Robert Levine, Charles M. Super, and Sarah Harkness.

The work of these researchers forms the backdrop to my own research as they staked a disciplinary territory for anthropological research on early child development and caretaking practices across cultures. LeVine, who started his career as one of the collaborators in the culture and personality school, has continued to be at the front of research on child-rearing practices and socialization. In *Child Care and Culture, lessons from Africa* LeVine and his colleagues (1994) compare childrearing amongst the Gusii in Kenya to middle-class America. One of their main findings was that, while mothers in America emphasize the importance of bonding with and stimulating the baby through eye contact, talk and play, Guusi mothers rarely play and talk with their baby, and eye contact tends to be avoided. Instead, mothers emphasize the importance of keeping the baby calm and content, and emotional arousals in the form of crying or laughing tend to be avoided. Summing up their findings, LeVine argues that in communities with high infant mortality rate such as the Guusi, people's attention will mainly be on the health and survival of the child. Infancy is here often characterized by physical contact between the mother and the baby, or other caretakers, and breastfeeding on demand, which lasts for up to two years. In other societies where parents can be more certain of the survival of their young children, more focus is given to maximizing other cultural goals and values, such as those of intellectual achievement and independency. However, as children in communities with high infant mortality grow older and stronger, more focus will be given to learning cultural values and morals. LeVine's work illustrates that childcare is not only about ensuring that the babies biological needs are met, but it also reflects the norms, beliefs, and values of the society, as well as the health risks associated with the beginning of life. The work of Robert LeVine forms the backdrop to my research, particularly in relation to how the relatively high risk of infancy death intersects with local understanding of the babies' nature and development and caretaking practices. At the same time, I found the childrearing practices in Ng'ombe to be different from what he described among the Guusi, particularly in terms of eye-contact, talk, and play.

While the interest in young children and parenting practices blossomed during the culture and personality school, it declined in the post-war period. In 2004, Alma Gottlieb wrote that she had only come across two full-length ethnographies devoted to infants in one single society; the aforementioned work of Robert LeVine (1994), as well as Barry Hewlett's (1991) descriptions of the strong and loving father-baby relationship among the central African Aka. Up to now, Gottlieb's descriptions of the everyday life of infants amongst the West African Beng is one of the most important contributions to the contemporary ethnography of infants. Her encouragement for anthropologists to pay attention to this period of life, and theories on how babies can contribute to anthropological thinking, has been highly inspirational to my own research. Analyses presented in three of the articles included in this dissertation is inspired by Gottlieb's descriptions of the spiritual lives of Beng babies (Smørholm 2016a, 2016b, nd.). Her study illustrates how the belief in reincarnation has great implications for the ways in which babies are understood and cared for, as well as the ways people understand human experiences and the life cycle (see also Einarsdóttir 2004, Keller 2003, Nsameng 1992). Gottlieb's studies also offer rich descriptions of daily practices of child-care, and how these practices are related to the local conceptualization of babies. For instance, she shows how frequent and elaborate bathing routines, body paintings and jewellery, as well as practices of nursing, open up for understandings of local notions of the physical and spiritual nature of babies and of what it means to be a good mother. According to Gottlieb, the Beng consider certain developmental milestones to be crucial, such as speaking of the first words, sprouting of the first tooth, crawling, and walking. These milestones must be understood in relation to local conceptualizations of the babies' spirituality and the cyclical nature of human lives, as well as local understanding of how life is regenerated. Jónína Einarsdóttir (2004), who writes about the Papel of Guinea-Bissau, also describes how the belief in reincarnation shape people's conceptualizations of babies, and the ways in which they are cared for. The Papel believe that babies inherit both the appearance and personality of the soul that is reincarnated in their body. According to her, it is this soul that establishes their humanness.

Another relevant study is Leslie Butt's (1998, 1999) monograph on the lives of babies amongst the Dani, who live in a secluded area of Indonesia. According to her, the growth

and well-being of babies are sites for negotiating notions of what it means to be a “good” parent. Moreover, Butt shows how the symbolic potential of infants also makes them a viable tool in political strategies. In Indonesia, the infant body and images of “normality” in terms of infant growth, have become powerful tools for the state to increase its governance over a marginal population in which infant growth has rhetorically, and often on the background of fabricated data, been classified as “abnormal”. And in the process, local women are labelled as inadequate mothers. The work of Butt is highly relevant for researchers, myself included, who critically call attention to the dangers of policies, practices and theories based on narrow hegemonic ideas about child development, growth and caretaking (for similar discussions on how poor parents are labelled as inadequate caretakers, see for instance Farmer 1988, Scheper-Hughes 1984, Morelli et.al 2018, as well as Smørholm nd.)

### **Child development in anthropology, childhood studies and psychology**

Even though the interdisciplinary field of childhood studies aims to study all children regardless of age, most attention has been paid to children above the age of six. As described in Chapter 1, one of the reasons for this can be that babies do not fit easily into the theoretical framework of childhood studies, which generally under-communicates the importance of age and change (see Smørholm 2016b). The field, which is also known as “the new sociology of childhood”, developed during the 1980s as a counter-paradigm to dominating theories of childhood in developmental psychology (James and Prout 1990b, James et.al. 1998, Jenks 1982, 1996 and Prout and James 1997a). Much critique was directed towards the influential theories of developmental psychologists such as Jean Piaget and Erik Erikson, who saw childhood as a process of universal stages where the successful completion of one stage forms the basis for the next one. Together with John Bowlby’s and Mary Ainsworth’s attachment theories, Piaget’s and Erikson’s theories remain greatly influential in the academic and public debates, as well as national and international policies on how parents can promote healthy development<sup>7</sup> (Bretherton 1996, Keller 2003, 2013a and 2013 b, Serpell and Nsamenang 2015)

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<sup>7</sup> In Scandinavia, which have long tradition of parental support programs, several manual-based parental training programs implemented by governmental social services draws on the thinking of developmental psychologists such as Erikson, Bowlby and Ainsworth. Examples can be found in programs such as the ABC program, Circle of Security and the incredible years (de Urolige Årene) (Rooth et.al. 2017)

Researchers belonging to the multidisciplinary field of childhood studies criticized development theories for seeing children as passive recipients of adult's knowledge. Rather than "being socialized", researchers have called attention to how children actively and independently acquire and use new knowledge (Prout and James 1990a; James et.al.1998). It was argued that children should be studied in their own right; for what they are here and now, and not what they will become. By taking children seriously, and listening to their voices, childhood researchers have demonstrated the diversity of the ways in which children actively influence their own and other people's life situation and well-being (See for instance Christiansen et.al. 2006, Corsaro 2003, Honwana and De Boeck 2005, Montgomery 2001).

The theories developed as part of the "the new sociology of childhood" paradigm, focusing on children's agency, independency and voices, have become greatly influential in childhood studies (Tisdall and Punch 2012). However, this critique against developmental psychology, positioning childhood studies as a 'new research paradigm' in the mid-1980s, has been criticized for oversimplifying the variety of different perspectives that embrace children as subjects within the discipline of psychology (Hobbs 2002, in Kjörholt 2004). Furthermore, early critique of the new childhood studies also addressed a key concept: agency, for being seen as an individual possession, based on the construction of the child subject as rational and autonomous (Lee 1998, Kjörholt 2003), linked to dichotomous constructions of children as either autonomous and competent, or as vulnerable, developing, and dependent (Kjörholt 2001, 2004). The UN Convention on the Rights of the Child, adopted by UN in 1989, was revolutionary because of the inclusion of participation rights, and it represents a powerful global political discourse. Participation rights are also a cornerstone in childhood studies, connected to a plea for children's voices in research and policy, making childhood studies a politicized and ideological discourse (Kjörholt 2004, Canosa and Graham 2019).

In the recent decades, several childhood researchers have critically discussed how dominating ideas on children's agency and independency have come to overshadow human states of interdependency and vulnerability, as well as the relational, contextual, and embodied processes in which children's agency unfolds (see for instance Abebe 2019,

Ansell 2016, Bluebond-Langner and Korbin 2007, Hammersley 2017, Holloway 2014, Holloway et.al. 2019, Holt 2017, James 2007, Kjørholt 2005, Tisdall 2017, Valentine 2011). From African contexts, researchers have explored a diversity of contexts and relational processes in which children's everyday life unfolds (Abebe 2008, 2013, Clemensen 2016, Kassa 2020, Phiri 2018). These studies not only see agency as a form of self-expression or autonomy, but also as relational, inflected with power and constituted by (and constituting) the social. For instance, researchers have explored how even the youngest children are included and participate in the activities of everyday life through play and work. This provides rich opportunities for learning through participation and observation, forming the basis for the early acquisition of necessary life skills (Clemensen 2016, Jirata and Kjørholt 2015, Nsamenang 1992, Serpell 1993, Tsamaase et.al 2020), learning appropriate ways of behaving and expressing emotions (Briggs 1970, Keller and Otto 2009), develop intelligence (Serpell 1993), and for the acquisition of language (Duranti, Ochs and Schieffelin 2014). There are also a number of studies on how children's work contributes a great deal to the household's economy, as well as how children's work is embedded in larger global economic, political and social processes (Abebe 2007, 2013, Abebe and Kjørholt 2009, Katz 2004, Twum-Danso and Ame 2012).

A growing number of anthropologists, childhood researchers, and psychologists have also come to acknowledge the importance of disciplinary cross-fertilization (Harkness and Super 2020b). Alan Prout, who was one of the pioneers in the "new sociology of childhood", encourages a blurring of disciplinary boundaries so that childhood becomes an irreducible 'combination' or 'assemblage' made up of both biological and social 'networks' (Prout, 2005: 113–16, see also James 2010). This will open up insights in how childhood is not only a social construction, but also a biological phenomenon characterized by physiological changes, and into how children are vulnerable and in need of protection and guidance. Moreover, if social studies of children are to be included in mainstream anthropology and psychology, we have to move beyond the idea of children as competent "beings", and beyond the idea that children alone can be informants of their own lives. This has been pointed out by Woodhead (2009) who argues that if anthropologists and childhood researchers are to omit terms such as development and socialization from our analytical vocabulary, we run the risk of remaining marginalized

in dominant academic and public discussions on the ways in which children are understood and treated across the world. Similarly, Montgomery (2000) argues that if the anthropology of childhood is not to become a “scientific ghetto”, separated from wider anthropological inquiries and theories, it needs to build strong links to broad topics such as age-sets, life cycles, personhood, and kinship (2000: 17).

The new perspectives that acknowledge children as dependent, social, and embodied beings who constantly change and grow, opens doors for the study of babies to be included in our research. For instance, researchers such as Holt (2017) and Lupton (2013) have shown how perspectives on interembodiment can enrich our understanding of early childhood. Their work, which draws on theories developed by Trevarthen (1998, 2008, 2011) and Merleau-Ponty (1962), demonstrates how including embodied experiences casts light on how babies orient themselves and how they experience the world and their relationships with others through the body. Lupton (2013) describes how babies and mothers define and constitute each other’s subjectivity and states of being; “The concepts of ‘infant’ and ‘mother’ define and are inseparable from the other, and each body’s ‘being-in-the-world’ is shaped by the other’s” (2013: 40). As Miller (1997) have pointed out, babies and caretakers ultimately “grow each other”; one cannot be understood without understanding the other.

In their comparative study of prenatal caretaking practices, LeVine and LeVine (2016) describe how the cultural practice of constant bodily contact between the mother and the baby, so commonly observed in Sub-Saharan communities, is central in promoting the baby’s and mother’s health and feeling of well-being. It also provides the infant with a unique environment for learning. Such views are supported by psychologist Tiffany Field (2010, 2014) who demonstrates that physical contact (“touch”) has a positive effect on an infant’s health and well-being; on their growth, heart rate, brain waves, and immune system. According to her, babies depend on touch to learn about the world, and it is through touch that the emotional bonds between children and their parents are established. Similarly, Tahhan elucidates the concept of “touch” as a “... complexly embodied and sensuous experience” (2013: 46). Touch should not only be understood as an isolated act where one individual touches another; as it also encompasses feelings of relational



belonging, oneness, and wholeness. These perspectives tend, however, to be ignored by research programs on positive parenting, which focus more on Western style verbal and visual interaction (Field 2014, LeVine and LeVine 2016). This is despite the fact that psychologists and health professionals have repeatedly demonstrated the importance of skin-to-skin contact for the infant and mother's health and well-being (for a review, see for instance Cleveland 2017).

Already during the 1970s, a number of psychologists pointed out the importance of seeing the child in context, and the limitations of experimental laboratory methods (see for instance Bronfenbrenner 1979; Kessen 1979; Vygotsky 1980). Through a subsequent number of cross-cultural studies, psychologists have demonstrated how developmental stages that have been assumed to be universal, such as motor development and cognitive growth and intelligence, are subject to great cultural variations (See for instance Keller 2013a and 2013b, Leseman 2020, Nsamenang 1992, Rogoff 2003, Serpell 1993, Super and Harkness 2009). Cross-cultural psychologists are therefore at the forefront in research that emphasizes the dynamic character of development as they include processual, contextual, social, and cultural aspects of children's development. They do not, however, deny the possibility of universal processes in human development, but emphasize that the contents of and the meanings given to these processes, vary according to historical, social, and cultural contexts. These researchers tend to question dominating "truths" about the "nature" of the child and the category of childhood, as well as the very construction of scientific knowledge (See the work of Marianne Block, Jerome Bruner, Dov Cohen, Alan Fiske, Steven Heine, Barbara Rogoff, Richard Shweder and Martin Woodhead). For instance, Robert Serpell (1993) shows how Zambian Chewa's conceptualizations of the development of intelligence and morals in children differs from those found in institutionalized schooling. The concept of *Nzeru*, which roughly translates as intelligence, not only encompasses cleverness, but also the ability to be socially responsible (*-tumikila*). A responsible child is someone who is trustworthy and honest, and who can listen, hear, understand, and obey. This capacity is recognized, tested, and cultivated through the practice of being sent on errands and thus being entrusted with responsibility. This practice is introduced from the time that the child starts to walk and can understand small requests of picking up things that are out of reach for the adult. In

line with Serpell, Nsamenang (1992) argues that African thinking on human development contrasts with mainstream psychological theories that focus more on individual capacities and achievements. According to him, African worldviews see human lifespan as divided in three cyclical phases; the first phase is spiritual selfhood which starts with conception, or even earlier in an ancestral spirit. The second is social selfhood, which starts with a rite of incorporation, and the third and last stage is biological death. Throughout life, all humans are also considered to go through several minor stages. Transformation between these stages is brought about by changes in physical and mental capacities and participation in social life. According to Nsamenang “such mentality primes Africans to guide child development as a process of gradual and systematic social integration”. He continues:

As children are initiated into and actively engage in cultural life, they gradually and systematically individuate into and assume levels of personhood, identity, and being (...) Within the African worldview, human beings not only need other humans but also social responsibility to individuate adequately and attain full personhood. Thus, a sense of self cannot be achieved without reference to the community of other humans in terms of being interconnected and enacting one’s social roles (2006: 295).

## **Babies and personhood**

The study of babies sheds light on broad topics that have been central to anthropologists and psychologists for decades, such as complex questions of the nature of humanity and personhood. Many anthropologists and philosophers, and also cultural psychologists such as Nsamenang, have described how the babies’ full personhood is not necessarily attributed at birth, but is a gradual process of social recognition, often indexed by the babies’ social capabilities. In their article that compares how babies are turned into social persons amongst the Native Amazonian Wari and northern Americans, Conklin and Morgan state

Every society must determine how its youngest will come to achieve the status of persons, how they will be recognized and granted a place within a human community...In all societies, the complexities and contradictions in normative ideologies of personhood are heightened during the transitional moments of gestation, birth and infancy, when personhood is imminent but not assured” (1996: 657-8).

According to Conklin and Morgan, North Americans generally look for biological and physical markers when defining the personhood of an unborn baby, such as the baby's ability to survive outside the womb. Moreover, human bodies are not seen as social and relational entities, but as independent and biological entities. Personhood is here "located in biology, in the capacity of the individual body to perform specific functions" (1996: 665). Amongst the Wari, in contrast, personhood is gradually obtained through the input of bodily fluids from other people. The mother's breastmilk is of central importance, but the father also plays a central role in feeding the mother so that she can produce milk for the baby. Similarly, Carsten (1995) describes how infants in Langkawi gradually become fully social persons through living and sharing food with others. This process starts in the womb when the baby is nourished through the mother's blood, and later through breastfeeding.

Theories on African notions of personhood have been developed by philosophers such as Gyekye (1992), Mbiti (1969) and Menkiti (1984). According to these researchers, being human is, according to African thinking, a biological and inborn capacity. All normal babies are automatically granted the status as human beings. The status of personhood, however, is socially attained and recognized. Menkiti writes "the African view of man denies that persons can be defined by focusing on this or that physical or psychological characteristic of the lone individual. Rather, man is defined by reference to the enviroing community" (1984: 171). Personhood in the African context is not considered a given; it is socially achieved and manifested, and thus relational (For a comprehensive discussion on African philosophy on personhood, see Molefe 2019). These scholars draw a clear distinction between being a human (given) and being a person (achieved). Being a human, or a potential human, and being a person are thus two different things (Molefe 2019: 39).

Scheper-Hughes writes that parents all over the world "enculturate" their babies, "turning the 'raw' and 'savage' neonates into 'cooked' and 'civilized' babies", and by this, granting them the status of social personhood (199: 413). Some, like Northern American parents, are eager to anthropomorphize and recognize their babies as independent persons with rights of their own. Babies are here defined as persons with individual rights (such as the right for protection and medical help) even from before being born (James 2000,

Mongomery 2020). There are, however, many cultures where parents are much slower in granting their babies the status of personhood. Gottlieb (1998, 2004) describes how the Beng believe in a spirit world, *wrugbe*, where people reside before being born and go to after death. Emerging from *wrugbe*, and thus, becoming a person, is a yearlong process that starts with the falling of the umbilical cord.

Until the umbilical cord stump falls off, the newborn is not considered to have emerged from *wrugbe* at all, and the tiny creature is not seen as a person. Hence if the newborn should die during those first few days, there is no funeral, and the fact is not announced publicly. In this case the infant's passing is not conceived as a death, just a return in bodily form to the space that the infant was still psychically inhabiting (Gottlieb, 1998: 124).

Similarly, Poole (1985) describes how infants amongst the Bimin-Kuskusmin of Papua New Guinea are considered as highly susceptible to illnesses, as well as spirits, witches, and sorcerers. They have a weak attachment to this life and to the kin, and their personhood is unstable and incomplete. To achieve personhood, the Bimin-Kuskusmin believe that the infant must go through a number of developmental stages that are associated with infancy, such as showing fear, anxiety, boldness, desire, will, shame and anger. These will enable the baby to gradually become part of the social, moral, and ritual community, and to be categorized as a person. In her description of child rearing practices amongst the Fulani, Michelle Johnson describes how the family of the newly born baby holds a naming ceremony for the baby seven or eight days after it has been born. This ceremony is highly important as “without a name, [a] baby is not a person” (2000: 183).

Of particular relevance to my research is also Lancy's (2014) argument that in many African communities where babies are seen as “not yet ripe”, they are also defined as “not-yet-persons”. As non-members of the community, they are defined as between and betwixt states of being, and thus liminal and incomplete. This liminality is often conceptualized in relation to two contrasting poles, expressed for instance in categories of being soft and hard, cold and hot, wet and dry. The infant's movement from one pole to the other is closely monitored and guided (2014:7). The Chewa, which is one of the dominant ethnic groups in Ng'ombe Township, is a prime example of a culture in which

personhood is delayed by several months after the baby has been biologically born (Gottlieb 2004: 45, referring to the work of Marwick 1968 and Kaspin 1996).

There are also a number of studies that show how delaying or denying personhood may justify maternal neglect or infanticide. From a Brazilian context, Scheper-Hughes (1992) describes how newly born babies are considered “less human” than older children and adults, and “incapable of real human suffering” (1992: 413). Compared to North American and European contexts, mothers are, according to Scheper-Hughes, rather slow to “personalize” the infants by attributing meanings to their facial- and bodily expressions, and by baptizing them and giving them a name. Ultimately, this conceptualization of new-born babies as non-human enables extremely poor mothers to hasten the death of their babies by neglecting their needs, by not feeding, holding, and comforting them. Practices of killing of babies who, due to physical abnormalities, were considered as nonhuman has been well documented in many parts of Africa (See for instance Colson (1958) from Zambia, Einarsdóttir (2004) from Guinea-Bissau, Gottlieb (1992) from Cote d’Ivoire , Howell (1979) for the !Kung of the Kalahari desert, Sargent (1988) from Benin, Parkin (1985) from Kenya, Dettwyler (1994) from Mali). Birth defects that justified the killing of babies could be being born breech, with upper teeth growing before the lower teeth, albinism, abnormally large body parts or other birth defects.

Einarsdóttir describes how the Papel believes that their babies are born with the soul of someone who once lived. However, in rare cases, their soul might be replaced by a spirit during pregnancy. These babies are termed *iran* (spirit) and thus also nonhuman (2004, 2005). As liminal beings, existing outside human time and space, they are feared to bring misfortune to the parents, family, and the community. The killing of such a baby can therefore not merely be seen as a result of parental neglect or hostility, but as an attempt to maintain social order. At the same time Einarsdóttir describes how the category *iran* is open to constant negotiation. According to her, Papel mothers do not easily “give up” on babies who are suspected of being non-humans; they negotiate their status, hope for a cure, resist traditional verification procedures, and they continue to breastfeed even when they are advised not to. And if the mother’s desperate attempts to keep her baby alive fail,

Einarsdóttir emphasizes that she does grieve, despite instructions to the contrary (2004: 163)

### **Anthropological studies on loss and bereavement**

There are a rich anthropological theories and studies on emotions, most dating back to the 1970s, 1980s and the beginning of the 1990s when the key theoretical positions were staked out (Abu-Lughod 1985, Briggs 1970, Lutz 1988, Lutz and White 1986, Levy 1973, 1984, M. Z. Rosaldo 1984, R. Rosaldo 1989, and Wikan 1990). Several reviews provide comprehensive overviews of these theories (see for instance Beatty 2013, 2014 and Robben 2018. See also Cecil (2020) for a comparative study on miscarriage, stillbirths, and neonatal death). In the following I will only sketch out some of the main arguments. One of the main theoretical stances in the anthropology of emotions is that, even though one might assume that some emotional categories are universal, the ways in which we interpret and express these emotions vary between cultures. This includes the ways in which we experience difficult emotions physically and mentally, and the words we use to make sense of them. Emotions and the ways in which we express them are embedded in socially constructed categories, and they are therefore both subjective and collective experiences. This has also been pointed out by Middleton, who writes:

Our emotional lives, ordered by culture, contribute greatly to our sense of identity, our motivation to act, and our interpretation of the acts of others. Our emotions are historically shaped sociocultural constructions more than they are personal possession. They are processional events tied fundamentally to other domains of culture. Emotions, like culture, are organized in distinctive patterns (1989:187).

The study of death and bereavement has a long tradition in anthropology, and particularly focuses on mortality rituals. Hertz was one of the first to argue that mortality rituals do not only refer to biological facts (death) and individual expressions of loss, but to social relationships and statuses of the living and deceased, notions of personhood, and the gradual transition from the world of the living to the afterworld (Hertz 1960[1907]). van Gennep (1960[1909]) argued that rituals were divided in three phases in which the first was characterized by separation of the dead and the mourners from the rest of the community. The last stage of the ritual, that of incorporation, marked that the dead had made the passage to the world of the dead, and that mourners could return back to the community. Life could proceed as normal and social order was restored. Similarly, Turner

saw rituals as “distinct phases in the social process” (1967: 20) in which people can adjust to major internal and external changes. A ritual thus has a creative function; “it actually creates, or re-creates, the categories through which men perceive reality” (1968:7). Quite a number of anthropological studies describe how rituals and ceremonies both manifest and transform personal experience of loss and allow for both expression and controlling of emotions (See for instance Bloch and Parry, 1982, Davies 2017, Geertz 1993, Rosenblatt et al. 1976, Turner 1967, Scheff 1979).

However, as Desjarlais (1992), Hollan and Wellenkmp (1994), Rosaldo (1984) and Wikan (1988) warn, public rituals may say little about the complex process of bereavement as experienced by individuals, or their emotional lives in general. Rosaldo (1984) argues that in these studies, loss and bereavement are described as routines or mechanic processes unfolding through prescribed acts. The agony and suffering, and the voices, silences and everyday actions of people tend to get lost. These researchers have therefore argued that an understanding of the experiences of loss and bereavement must also include descriptions of how meanings and memories are produced in people’s own everyday lives, conversations, and narratives. This includes people’s own concepts, discourses and bodily expressions, as well as esthetical expressions, such as music, paintings, drawings and poems, as well as material artifacts. A relevant example of such an approach is Hallam and Hockey’s (2001) descriptions of how material objects mediate memories and uphold the relationship one used to have with the deceased and give meaning to loss and bereavement. Even though their research refers to bereavement in a western context, their analyses can be extended to other contexts such as those of Ng’ombe, in which natural and material objects, such as flowers, clothes, and pictures, are central to the ways in which people understand and handle the loss of a close family member (see Smørholm 2016a, Smørholm and Simonsen 2015 and Smørholm and Simonsen nd.).

Inspired by the theories of Freud (1917) and Lindemann (1979), there has been a strong emphasis on ‘grief work’ and the verbal disclosure of emotions as the foremost model for understanding bereavement as a psychological process (Stroebe 1993). The ideas of the “grief work” hypothesis is particularly pronounced in counselling and therapy

programmes for the bereaved, but they have also been influential in anthropological research that has focused on how rituals can have cathartic effects for the mourners (Scheff 1979, Kapferer 1979). According to the theory of “grief work”, the absence of verbal expressions or suppression of grief might lead to delayed, prolonged, or chronic grief. However, since the 1990s, alternative perspectives on the nature of grief and how to handle loss have emerged. For instance, psychologists now argue that coping and adapting to loss can be linked to our ability to flexibly enhance and submerge emotional experiences and expression (Barrett and Gross 2001, Bonanno et.al 2004, Stroebe 1993, Stroebe and Schut 1998). Anthropologists have also demonstrated how people of diverse cultures show very different ways of reacting to loss than those referred to in the “grief work” hypotheses. These researchers have pointed out that concepts of ‘normal’ or ‘healthy’ ways of coping with loss are cultural constructions. For instance, in her descriptions of bereavement amongst the Lihirans of Papua New Guinea, Hemer states that the Lihirans do not “place value on emotional disclosure or verbally ‘working through’ emotions of bereavement. Social support for the disclosure of emotional experience would not be appreciated and may even be seen as harmful...” (2010: 294). Here, bereavement is seen as a process that alternates between remembering the late person through storytelling, and of forgetting about her or him through acts such as giving away material objects, debt, and the name of the late person.

### **Anthropological studies on maternal loss and bereavement**

While there is a wealth of psychological literature on the complexities of experiences of loss and bereavement in the western world, few cross-cultural studies make significant room for exploring individual experience of loss and bereavement. This is also the case in African contexts where most of the literature focus on the complexity of religious, social, and economic arrangements during funerals (See Jindra and Noret 2011 for a comprehensive review). According to Kleinman “cross-cultural data on bereavement are so thin that it is really not known in a scholarly sense what the course of bereavement is, and how it may vary by age, gender, or culture” (1999: 394).

However, there are a few anthropological studies that brilliantly describe how people across cultures deal with the loss of a close family member. A few of these concern how



parents respond to the loss of a young child. These researchers show how the reactions of parents to the loss of a child depend on culturally constructed perceptions of what a baby is, notions of the baby's personhood, understandings of what bereavement means, and how to best react to loss. I have particularly been inspired by the work of Unni Wikan (1988, 1989), Jónína Einarsdóttir (2004) and Scheper-Hughes (1992) on how mothers in Bali, Egypt, Guinea-Bissau and Brazil deal with the loss of a child. According to Wikan, mothers in Egypt and Bali handle their loss in contrasting ways; while Egyptian mothers express their bereavement verbally, in cries and screams, mothers in Bali subdue their tears. Here, talk about the late child and their loss is not encouraged and people believe that difficult feelings *can* and *should* be managed to preserve the bereaved persons' health and life force. Bereaved mothers are therefore encouraged to manage their heart through techniques of "not caring" and "forgetting", and through bright and calm facial and bodily expressions. As a result, cheerfulness and laughter is predominant also amongst mothers who have lost a child. However, the cheerfulness that bereaved mothers express does not indicate lack of bereavement. Rather, it comes as a result of deliberate "emotion work", where feeling and thinking is seen to mutually affect one another.

Similarly, Scheper-Hughes describes how mothers in Brazil do not cry or express bereavement in words if their young baby passes away. These mothers emotionally distance themselves from their babies during their first year of life when their survival is most uncertain. This is done by "impersonalizing" their babies, who will remain unchristian and without a name until they start to walk or talk. Until then they are simply called *ne-ne* (baby). Alto mothers say they will only begin to love their babies when the babies start to "show us who they are and what kind of being we now have here" (1992: 438). Scheper-Hughes considers this is a form of coping mechanisms for desperately poor mothers who see their babies die time and again, enabling mothers not to be emotionally devastated if their babies pass away, but rather go on with their lives like nothing has happened. According to Scheper-Hughes, babies amongst the Alto often pass away as a direct consequence of neglect; of not being fed, held, or comforted. However, they do not blame themselves for their ill-health and death. Instead, they find reasons for their babies' illness and death in the baby itself; it lacked the will to fight for life. Mothers preferred active, quick, responsive, and playful infants over quiet, docile, inactive infants, infants

described as ‘dull,’ ‘listless,’ and ‘spiritless’ (1992:316). Such a child risks being classified as a “doomed” child, and as “good as dead,” or “better off dead” (364/365). The deaths of these children are “deaths without weeping” that the title of her book refers to. In contrast to Balinese mothers, their silence does not come as a result of a deliberate effort to control one’s emotions and does not hold mourning. Instead, mothers show signs of relief. In this community, babies are easily replicable with a new pregnancy and baby.

Scheper-Hughes’ controversial work has given rise to studies that focus on maternal attachment and care in poor communities with high infant mortality (Einarsdóttir 2020). In her research on mothers’ experiences with child death in Guinea-Bissau, Einarsdóttir (2004, 2005, 2006) argues that high mortality rates do not automatically produce similar coping mechanisms as those described by Scheper-Hughes. In contrast, she describes how Papel mothers desperately struggle to keep their babies alive. For them, it is self-evident that the parents, and particularly the mother, mourn the loss of a baby. They cry and mourn the loss because, as people explained, they had gone through the hardships of pregnancy and the dangers of giving birth, they had become accustomed to the child, they loved the child, and they wanted to see their child grow up and become an adult. Moreover, they might be worried about their ability to have more children, about losing other children, and about who will take care of them and help them as they grow old (2004: 33). To ease the pain, Papel mothers tried to “forget” about their loss and “calm down” as they, similarly to the Balinese mothers described by Wikan, believe that too much mourning can be devastating to their physical and mental health.

Scheper-Hughes, Einarsdóttir and Wikan’s work adds evidence to Lutz’s argument that the ways in which people talk about emotions and how they express them is “simultaneously a talk about society”. It is a cultural discourse on power, economics, and politics, as well as on morality, health, normality, and deviance (1988: 6). Moreover, these studies demonstrate how asking the question “what is at stake?” (Wikan 1992) opens new insights and understandings on human experiences that we consider as “natural” and “normal”, such as maternal attachment and grief. These are perspectives that I will continue exploring in the methodological chapter.

## Chapter 4

# Doing fieldwork in Ng'ombe

### Methodological reflections

In this chapter I will discuss issues related to ethnographic research with babies and their caretakers in the context of urban Zambia and describe some of the methodological choices that I made during fieldwork. I begin with a conversation that found place during one of the funerals that I participated in. It illustrates the main topic of this chapter; the challenges, and some resolutions that I found when doing research on sensitive topics such as death and bereavement. It also illustrates the tensions that I found in being, on the one hand, an insider and friend, and on the other hand, the notetaking outsider. The conversation found place in the house where mourners gather the day after we had buried a one-year-old girl whose mother I had known for several years. I was seated in the corner of the room, with legs stretched out on the floor as the other women did, while I was making a few notes. The funeral house was quiet; the mother of the late baby sat silently with downcast eyes. She looked tired. The visiting church choir had left, and most of the men outside had taken the bereaved father to a neighbouring bar. I described the quietness, wondering whether this was the time for silence to take over so the mother could start relaxing her heart. I had been in Ng'ombe long enough to recognize this silence and be part of it.

“So, what are you writing in those notes of yours?” The question came loud from one of the ladies who were sitting in the opposite side of the room. All the attention was suddenly on me; even the bereaved mother looked up. I felt puzzled. The timing felt wrong; like a sharp knife cutting through air filled with grief. I hesitated. “As you know, I am a student” I started. “I am interested in the lives of people in Ng'ombe, and particularly the lives of mothers and their babies”. “Yes, you already told us”, the lady confirmed. “But I asked; what are you *writing*?” I looked at my notes, saw words like “crying”, “whispering” and “singing”. “Well, as a student I wished that my memory was better” I started “but I have realized that I easily forget. So, I have to take notes. It helps me to remember. Even small details”. “So, you write down everything? Even how many beers I have been drinking?”

she continued. I felt immensely out of place; was this some sort of interrogation? Were the women not happy about my presence? Was it a bad time to make notes? Had I failed to explain what my research was about and how I conducted it? “No, there are many things that I do not include” I replied. We sat quiet for some time. The familiar silence that the mourners could sink into and relax their tired hearts suddenly felt disturbed, unsettled, and tense.

“Do any of you want to read my notes?” I asked. The cousin of the bereaved mother, who was good in English, volunteered. “Everyone is now quiet” she read “the church choir has left, no one cries, no one talks”. One of the younger ladies giggled. The cousin was skimming the notes and translated some parts. She found the names of the women in the room that I had written down and, coded by genealogical abbreviations of how they were related to the late baby. She asked me about the abbreviations, and I helped her to read them. “I am not related to the baby’s father by blood”, one of the ladies clarified “you see; I am a Namwanga and he is a Tumbuka<sup>8</sup>, so we call each other ‘cousins’”. This was followed up by a rather lively discussion on why a marriage between a Tumbuka and a Namwnaga tends to be successful. The cousin continued reading a few notes that I had made earlier that morning about how one of the mothers had been quietly playing with her one-year-old daughter in the funeral house. The mother remembered and said that she was trying to keep her daughter busy as she did not want her to disturb the bereaved. The ladies started discussing how difficult it could be these days to find a nursemaid to look after babies during the daytime. “You should add the things that we have just discussed” the cousin insisted and handed me the notebook. One of the senior women nodded her head and said, “By spending time with us you really get to see how we live and take care of our children, even how we sometimes must take them to the graveyard. I think that is the best way for you to learn”. She concluded with the advice; “You must work hard and focus on your studies”.

The elderly lady captured the very essence of ethnography; learning through participating in people’s everyday lives; listening to what they say, observing what they do, and writing it down. Her advice echoed the words of my lecturer, who started his course in

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<sup>8</sup> These are neighbouring groups who classify each other as “cousins”, and practise intermarriage.

ethnographic methods by saying “ethnography is not just about sitting under the shadow of a tree, observing and writing notes, it is about hard work”. It can, as it did for me, involve walking for hours under the blazing hot sun and dusty wind, a digestion system that objects to a new diet; all the planning, misunderstandings, making of appointments, making sure that you are in the right place at the right time; the constant fear of losing out and asking the wrong questions. Even though the lecture touched upon topics that were more substantial, there is also another to-the-point sentence that has remained stuck in my memory; “doing fieldwork is all about floating or sinking”. In my case, I came to alternate between the feeling of skilfully swimming and helplessly sinking. Between feeling like an alien and a friend, an insider and an outsider. I alternated between curious involvement and restless boredom. Between the feeling of making new discoveries and learning new things, and the frustrated feeling of going in circles; of doing the same thing, asking the same question and hearing the same answers, again and again. And I did not know that doing fieldwork would be so rewarding; that I would become so emotionally attached to people; the familiarity, and at the same time, the fascination that I found in their experiences and understandings. That I simultaneously could float and sink into their experiences and lives.

As described in the introduction, this PhD thesis is based on longitudinal fieldwork that started in 2004 with fieldwork for my Master’s degree. In his description of ethnographic fieldwork, Eriksen writes “anthropological research is a characteristically *time-intensive* enterprise” (2004: 49). It takes time to understand human behaviour and cultural worlds. Each time we return to the field we add layers to our understanding, build on our old networks, get to know new people, and gain new perspectives. Understanding the lives of babies, how they grow and become social beings, and how adults care for them and organize their lives requires an understanding of the human life course in its entirety. This also includes, amongst others, an understanding of subsistence and work cycles of the family and the community, the role of siblings and other family and community members, health treats, formal and informal health services, ritual activities, and religion. The insights that I gained about the lives of babies and their parents in Ng’ombe build on previous fieldworks for my Master’s degree that mainly concerned the lives of older children and their parents. My Master’s thesis focused on how children experience the

community and the social landscape in which they live and how children whose parent(s) had passed away negotiate their life situation. Particular attention was paid to how children express and cope with loss and bereavement. The main site for both fieldworks was Ng'ombe Township in Lusaka.

All the articles included in this thesis emphasize the importance of contextualization and holism in ethnographic research. The methodological book chapter included in the appendix "*children's drawings in ethnographic explorations: Analyses and interpretations*" discusses the challenges of doing research with children who have experienced loss and bereavement, and particularly focuses on the use of children's drawings in ethnographic research<sup>9</sup>. The article "*Suffering peacefully: Experiences of infancy death in contemporary Zambia*" also discusses some of the challenges of doing research on mother's experiences of infancy death. Both articles point out that one of the main ethical challenges that I faced during fieldwork was the risk that my inquiries would interfere with the bereaved person's efforts to let go of difficult memories and thus violate the cultural norm of silence (Smørholm 2016a). This chapter supplements these methodological discussions, and I will particularly elaborate on challenges of doing fieldwork with those who cannot, or should not, express themselves in words.

This chapter includes a brief discussion on some of the methodological challenges I faced during the beginning of my first fieldwork, before turning to a discussion on the methodological choices I made in my second fieldwork. Particularly attention will be given to how research with babies is different from research with older children and adults<sup>10</sup>. The chapter will end with reflections on doing research on sensitive and difficult topics such as those of death and bereavement. I will, however, begin with reflecting on the methodological and theoretical approaches that inspired me.

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<sup>9</sup> The use of drawings in research with children, and particularly on children's experiences of sociopolitical spaces, has also been discussed in Smørholm and Simonsen (in press).

<sup>10</sup> Due to the large volume of material that I gathered during my fieldworks, not all of my material is reflected in the articles represented in this dissertation.

## **Trying to catch Niagara Falls in a cup**

All articles that are included in this thesis include topics related to local knowledge and conceptualization of babies' development, growth, agency, and personhood. The focus is on how these local meanings and conceptualizations of babies are acted out in rituals and in caretaking practices, and how they become meaningful through multiple symbols and metaphors. My explorations of local concepts and meanings have been inspired by social constructionist theories that acknowledge that lived experience and cultural worlds are not a "reality" or a world "out there" that can be objectively studied and described. Knowledge is produced, reproduced, and contested by people who interact with each other in everyday life (see Berger and Luckmann 1991). As anthropologists, we do not merely describe the realities that we encounter; we are part of constructing them through our participation and writings. Just by being present, we influence and at times alter the everyday life that we try to describe and understand. Moreover, ethnographic representations will always be part the rhetoric construction of "truth"; we choose what to include and exclude; who to listen to and quote, and who to silence. Cultural worlds are just too complex and ambiguous to be grasped fully. Or as expressed by Nilsen; "Doing fieldwork is like trying to catch the Niagara Falls in a small cup. And in the process, you get fully soaked" (1996:118, my translation). Even though we try to capture and describe complexities, it is simply not possible for us to experience and describe the world in its entirety. There will always be tension between the unique and extremely rich reality we study, and the simplifying tools of observation and analyses that we use to make sense of this reality (Eriksen 2004: 58, Clifford 1986, Kapferer 2007a).

Ultimately, anthropological writing is about telling a story. Using narrative for what it is worth, creating a good story that the readers can relate to. "A light, breezy narrative style will bring an author fans; a plodding, grinding style will not" Besnier and Morales write (2018: 169). A "good story" is also about striking a balance between theory and ethnography, and preferably, it should be innovative, even a bit controversial (Besnier and Morales 2018). Generally, researchers hope that the stories we tell will be interesting, accessible, and intruding to the reader, that they will establish shared knowledge, and that they will foster new thinking. And most importantly, anthropologists hope our stories will

resonate with the experiences and understanding of those whose lives we try to describe (Maggio 2014, Wikan 2012).

The stories that anthropologists tell have the potential to reflect the complexities of human experiences. Compared to other sciences and journalism, ethnographic methods are time-intensive. We need time observe and to participate. And to listen; not only to what is made explicit in words, but in physical and facial expressions and silences. We need time to entangle ourselves in the worlds of others. And to see the larger picture and reflect upon the truthfulness of our stories. As many other anthropologists, I have found inspiration in Geertz's phenomenological approach to culture and in his theories of ethnography as an interpretive act of "thick description". Culture is, metaphorically, an assemblage of multiple texts which meanings must be interpreted in relation to each other (1973). I have aimed to achieve a thick description through detailed descriptions of the actions and choices of individuals in their everyday lives, as well as through placing these practices in time and space by seeing them in wider historical, political, economic, religious, and social contexts. However, the thickness of my descriptions is not evenly distributed. For instance, while I believe that I have managed to describe the complexity of a mother's experiences of being a parent, my descriptions of the father's experiences stand out as rather thin<sup>11</sup>. The reasons for this are many, some of them relating to my own interests, gender, and position in the community. The degree to which the researcher manages to partake in other people's experiences depends, in many ways, on the ways they resonate with her or his own experiences (Wikan 2012).

Anthropologists aim to gain insights in the lives and shared (and not so shared) meanings of others by participating in their everyday lives. I have followed Kleinman's definition of everyday experience as "the felt flow of interpersonal communication and

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<sup>11</sup> This thesis mainly refers to the knowledge of mothers, grandmothers, and female herbalists and birth attendants. These are, according to my experience, most involved in the provision of care for the youngest children on a day-to-day basis. Most fathers would not be present during daylight hours, but I made sure that I also had conversations with fathers and was present during the weekends when some fathers were present. One father who was looking after his one-year-old daughter while his wife was working was included in the sample. In addition, I strived to include other men who, often due their kinship relations, were central in the child's life. This being said, I acknowledge the limitations of a study that predominately focused on the knowledge and caretaking practices of women, and the need for including men who otherwise have been neglected in studies of children in African contexts (Nsamenang 2010).



engagements” (1999: 358). Everyday experiences and the meanings they hold are understood here as constantly created and recreated by people in relation with each other; they are, in Kleinman’s words “thoroughly intersubjective...a medium in which collective and subjective processes interfuse” (1999: 358/359). This does not mean that all cultural knowledge and experience is shared by all members of a community; it is just as much about what is not shared. But Kleinman points out that there will still be things that are significant for both the collective and the personal, things that matter for all, such as one’s being-in-the-world, one’s being-unto-death and transcendence in life (1999: 362). This can, for instance, be meanings related to birth, growth, death, understandings of what a human being is, as well as understandings of human pain and suffering. These are both part of our inner, subjective feelings, as well as the “intersubjective stream of cultural practices and social engagements” (1999: 378). I have also been inspired by phenomenologists who emphasize that even though the experiences of one individual are unique, experience can also be shared in intersubjective ways. For instance, Wikan (1992, 2012) and Jackson (1998) have argued that good ethnography is a practice of coexistence or intersubjectivity. Jackson explains that ethnographic participation inevitably means sharing sensory and bodily experience with others, or “life lived in common”. Rather than merely focusing on what is culturally strange, spectacular and different, one has to look for shared experiences, sameness, and resonance. To coexist means that one must become part of, and participate, in people’s everyday lives. So instead of striving for objective observation and relying merely on what people say they do, one should aim to take part in the lived and embodied experiences of people. For someone doing research with children, this may mean taking full part in the work, plays, and games of children, and noticing how these activities manifest physically and mentally.

Anthropologists generally argue that there are no proscribed and correct methodological rules or guidelines on how to do fieldwork. Instead, research is seen as a creative process in which the researcher must be reflective, sensitive, and open to experience (van Manen 1997). This allows the researcher to be rather eclectic when it comes to methodological choices. I have been inspired not only by research methods developed in anthropology, but also by participatory research methods developed in the multidisciplinary field of childhood studies. Researchers belonging to this field have developed a plethora of

methods that allows us to listen to the children's multiple voices, so that we might see the world from the children's point of view. During the first fieldwork, which focused on older children, I was inspired by the mosaic approach developed by Clark and Moss (2001) who advocate a wide range of methods such as drawings, role plays, model making, and photography. I particularly found the methods of making drawings, dramas, songs and poems, as well as child-lead tours to be helpful. These were activities that seemed familiar to the children, and both they and me seemed to enjoy (Smørholm 2006, Smørholm and Simonsen 2015, Smørholm and Simonsen in press). However, establishing a rapport with children and gaining insight into their lives and experiences is not about applying "child friendly" methods. It is about spending time with them and partaking in their everyday life activities, carrying water before daybreak, going to school, washing clothes and playing football in the afternoon, and dancing to the distant music of the *shabeens* (illicit bars) in the evenings.

### **Language, translation, and informed consent**

Even though Lusaka is a highly multi-ethnic town, most speak and understand Chinyanja, the lingua franca of Lusaka. This is particularly true in Ng'ombe, where most residents are from the eastern province and speak languages similar to Chinyanja. Even though I have tried to learn Chinyanja, and understand some, I have never managed to fully master the language. Many of the mothers and older children in Ng'ombe speak English, and our everyday conversations were in English. However, many felt that they could express themselves more easily in Chinyanja, particularly when it came to "complicated" topics. Young children, older people, and some of the mothers, did not speak English. Moreover, people tend to speak Chinyanja during social gatherings and when talking with their babies.

Language is of basic importance to the ways in which we act, understand, and categorize the world (Berger and Luckman 1991). For an anthropologist, not fully mastering the local language therefore poses serious challenges to our understandings. When in Ng'ombe, I was normally accompanied by a research assistant who, amongst others, helped me with translation. This was not translation in the direct sense, but included long discussions and questions arising from the translation. One of my research assistants was

a sociology student who assisted me when her schedule allowed (such as holidays and when she did not have lectures, assignments, and exams). A second research assistant was a resident in Ng'ombe, a mother of three and a teacher at one of the local community schools. I have been incredible lucky to do ethnography together with them. They easily became part of the community and families that we visited, and all contributed to the research in unique ways in terms of translating language and cultural meanings, making appointments, negotiating access, providing methodological suggestions, discussing observations and findings, and sharing cultural knowledge.

Before going to Ng'ombe, my research proposal was reviewed by Dr. Chileshe Mulenga at The Institute of Economic and Social Research (INESOR). Prof. Mapopa Mtonga, at the department Literature and Languages, and Dr. Mulenga have contributed to all stages of this research. The project was also reviewed and endorsed by the city government of Lusaka. In Ng'ombe, I contacted local authorities such as the police, school principals, and as well as the Roma ward chancellor to introduce myself and my research. These were generally positive to my research, and the ward chancellor kindly let me stay with her and her family, sharing a room with her daughter for three months.

In Ng'ombe, informed consent of all the research participants took a verbal form. As noticed by Kjörholt (2012), standardized guidelines can be useful as a basis for reflection but are not always appropriate in social research. This is partly because the ethical dilemmas that arise in social research are context specific. Ethical issues and informed consent should therefore be an integral part of all aspects of the research process, as well as the ongoing everyday interaction between the researcher and those she or he researches. In my case, there were many reasons why obtaining a written informed consent in the beginning of the research was challenging, and in some ways undesirable. The first reason is rather straightforward; many of my participants did not know how to read and write. This was particularly the case for children and older people, but also for some of the parents. Secondly, doing ethnographic fieldwork is about being open to new turns. Obtaining informed consent in the beginning of the research can be difficult as the researcher can never know exactly what the main focus will be. And third, ethnographers are rarely in a position to define their social identities. As many anthropologists have

described, we might (unwillingly) end up being a clown, a teacher, FBI agent, a social worker, or a volunteer (See for instance Thorne 1980, Wax 1977).

While some people in Ng'ombe suspected that I was a "Satanist", others hoped that I was a potential "saviour" or "sponsor". Reflecting on problems relating to informed consent, my research assistant commented "I guess nobody would sign the papers of a suspected Satanist". People in Ng'ombe are used to being on the unfavourable side of power relations, and not signing a document can be one of the few ways they can protect themselves from hidden agendas. People in Ng'ombe also have experience with the work of NGOs, and many hoped that I would be able to provide them with contacts or financial support in some way. Nyambedha (2008) who did research on the lives of orphans and widows in Kenya, describes how adults and children were afraid of losing out on financial benefits if they did not agree to participate. There are many reasons why people agree to participate in research; children might agree to participate because the adults tell them to, and adults might be motivated by a fear of "losing out" on benefits, and by a fear of negative consequences. However, most anthropologists hope that we can become (more or less) accepted as members of the community and that our identity as a researcher will become blurred over time. We hope that people will continue with their normal everyday activities. Anthropologists tend to agree that we learn most when we move from the status of an outsider to become more of an insider. However, this blurring of roles and relationships also carries ethical implications (Kjørholt 2012). I will return to these challenges in the remaining part of this chapter.

The names of children and adults in Ng'ombe have been changed to preserve their anonymity. Several senior women and traditional birth attendants who shared their knowledge on general topics (such as medication, ceremonies, pregnancy, birthing and childcare) preferred that I used their names, which I have done.

### **From outsider to insider**

Making people feel comfortable in our presence so that we can immerse ourselves in their lives is the basis of all ethnographic work. Before going to Ng'ombe for the first fieldwork, my aim was to interact with children in the least adult role (Mandell 1988).

This meant that I tried to integrate with the children, do whatever they were doing and interact with them in similar ways that a child would. I wanted to join and take part in their everyday activities as a peripheral participant so that I could observe and learn about the ways in which they interacted (Corsaro 1981). I aimed to let the children approach me and initiate interaction, to not interfere in their disputes, or actively intervene in their activities. However, as Fine (1987) points out, adults can never be fully accepted as “a child”; our bodies are just too big and our ways of thinking and acting tend to be different from children’s. Attempts to “become a child” and fully part of a community is for most of us impossible and we may rather end with comedy, a parody in the worst case. It might just look as foolish as the player in the Chewa *gule wamkulu* masquerade who, dressed in a coat, hat, and smoking pipe, makes fun of the white man (For a description of *gule wamkulu*, see Kerr 1995). But we might, as pointed out by Fine (1987), achieve the unauthoritative role of adult-as-friend. I was hoping that such approach would “even out” the relations of power between me and the children and give me insight in their everyday routines and rituals, and in their concerns, beliefs, and values.

The challenges of establishing a “least adult” position have, however, been described by several researchers. For instance, Mandell (1988) describes how, despite her attempts to “act like a child”, children would still treat her as an adult who instructs, disciplines, and cares (for similar accounts, see also Corsaro 1981, Epstein 2003 and Fine and Sandstrom 1988, Throne 1980). Similarly, my main challenge was related to the fact that adult-child relationships imply relationships of authority. Zambian societies strongly emphasize principles of seniority and respect for older adults. Adults are not expected to act or play like a child. In general, they should not interfere, take an interest in, or engage in children’s activities. Moreover, the colour of my skin and language barriers added to the challenge of getting to know the children, and of naturally blending into the community. During the first two months of fieldwork my presence as an adult often caused children to alter their activities. They would instead observe me or await some sort of instructions from me. Sometimes they became shy, at other times my behaviour became subject to amusement and funny comments. At times, the children decided to move to another place to escape my gaze. As pointed out by Epstein (2003), while the “least adult role” aims to even out relations of power, it might end up reproducing them as the researcher insists on

being treated like a child when the children rather prefer positioning the researcher in a more familiar adult position. Also, adults appeared to be sceptical, not trusting me with their children. Several times adults followed me to observe what I was doing. I heard rumours that I tried to be kind to the children in order to seduce them to become members of “the Satanic church”<sup>12</sup>.

For most anthropologists, our position in the field is not so much about what we want to be. It is about what the people that we spend time with allow us to be. It did not take me long to realize that being a peripheral participant in the children’s lives was impossible. A passive, gazing friend is not a very attractive friend, and it was not until I started throwing myself wholeheartedly into the children’s game activities that they started accepting and enjoying my presence. Gradually, after spending a couple of months in Ng’ombe, my position changed from being the “odd and curious stranger” to be perceived more and more by the children and the wider community as “a child”. My status as an outsider, not expected to fully comply to local norms, gave me more freedom of behaviour and enabled the community to accept my engagement with children. In addition, my position as a student and my ambivalent status as a young and childless woman, and therefore not yet a proper adult, also enabled people to see me in the socially recognized position of dependency vis-à-vis the people I knew.

Like a child, I was protected and helped, not obeyed or feared. In my effort to learn the language, I also resembled a child (for a comprehensive discussion on the process of being accepted as “a child”, see Smørholm 2007). Most of the time, people could observe me running around with children, sitting on the ground with children, and doing children’s work. Children would wait for me in the morning so that we could start knocking on the gates of the prosperous neighbourhood on the border of Ng’ombe, asking for “piece work” (such as washing laundry) or buckets of water to be carried home. When talking to me about the children of the community, most adults began referring to them as “your friends”. For other adults of the community, to have children categorized as friends would be both unthinkable and unacceptable. Most children would address me as *kaSesilie*. *Ka*

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<sup>12</sup> For a discussion on beliefs in satanism and the rise of occult economies in southern Africa, see Comaroff and Comaroff (1999).

is a diminutive prefix, referring to relative age, or a junior position, or simply an object that is smaller than its ordinary size. Adding the diminutive form to my name, defined, so to speak, my position in the community as betwixt and between positions; a person who looked like an adult but acted like a child. I was never addressed as “*baSesilie*” which is the respect form of addressing somebody. In general, adults expect to be addressed in the respect form. Using the diminutive *ka* would for adults be an offence.

During fieldwork I felt more and more like a child. My identity changed in diverse ways. In the beginning of the fieldwork, I would feel comfortable sitting in the house of my local supervisor, an incredible friendly professor at the now called Institute of Economic and Social Research, previously the famous Rhodes Livingstone Institute. We were discussing anthropological methods and my plans for the fieldwork, and he became my initial gate opener to Ng’ombe as he knew the councillor and directed me to her. After one year in Ng’ombe, I found myself sitting on the same sofa with the same friendly professor. But I felt out of place; coming straight from the dry and dusty wind in Ng’ombe the sofa seemed too clean for my *chitenge* (sarong), the cup I was drinking tea from seemed too fragile. After getting used to being treated like a child, the conversation seemed too advanced. I was happy to be back with my young friends and at my families’ house in Ng’ombe, drinking sweet *munkoyo* from a plastic cup.

Access and belonging are not gained during the first months of fieldwork. It is, as pointed out by Feldman et al. (2004), not a “door” that can be permanently opened by using the right key. It must constantly be acquired and developed throughout fieldwork. So even though the confusing and anxious period of finding my place in the community came to an end, as I found my footing and place in the community, I would occasionally move in and out of the status of being an outsider and insider. At times this felt uncomfortable, at times even frustrating. However, our strength as anthropologists lies in being in between and betwixt identities and “cultures”; of being both on the inside and the outside (Bateson 2000, Hammersley 1993, Hastrup 1995). According to Kapferer we should strive for an “...immersion in lived realities so that an inside-out as well as an outside-in positioning could be developed” (2007b: 189). This privileged position enables us to address and explore cultural phenomena in alternative ways to those who are full members of the

community. For me, the position of being both outsider and insider continued to open what would normally be closed. During my fieldwork I had the privilege of seeing several babies being born, I heard their first cries and I saw their first attempts to eat. I observed how senior women teach young parents on how to take care of the unborn and the newly born baby, and I followed them into the forest to bury the fallen umbilical cord. These are all private events and ceremonies in which women without children who are in their reproductive years are normally not allowed to participate in. A full member of the community? In many ways, luckily not.

### **Returning to Ng'ombe**

What motivated me to do fieldwork on the lives of babies was not that I, compared to older children, found babies to be particularly interesting or fascinating. In the first place, I was motivated by the fact that not many anthropologists have paid attention to the lives and experiences of babies, and they have become one of the most invisible human groups in anthropological research (Gottlieb 2004, 2012). I therefore wanted to contribute to filling this gap in our knowledge on early childhood. Secondly, since the time that I did my first fieldwork I have been curious to learn more about how people in Ng'ombe understand life and death to be part of the same cycle, as well as how the margins of life are a site for the unmaking and making of personhood and relationships. And last but not least I was motivated by the chance to return to my friends and “family” in Ng'ombe.

In the beginning of the fieldwork, I spent most of my time with four young mothers whom I knew from my first fieldwork. I had left Ng'ombe four years back, and I wanted to reconnect with them and get to know their babies. I spent my days washing clothes and baby nappies, preparing food, sharing meals, cleaning houses, holding and playing with babies, and going for visits. Many of the conversations I had with mothers revolved around their experiences of being a parent; the joys and concerns of parenthood, their experiences of pregnancy and delivery and how babies should best be cared for. As these mothers' everyday tasks and thoughts mainly revolved around the well-being of their baby, it seemed to be a “perfect match” that we shared the same interest. It was as if our life course had taken similar turns; “We used to run around and play” one of my friends once commented, “but now we have become responsible grown-ups”. I knew their extended families from before, and in a relatively short time, I also got to know their



husbands and in-laws. This enabled me to follow their baby around the whole day, also when they were together with members of the extended family. In the beginning of both fieldworks, I also did a household surveys to get an overview of the number of persons living in different households and the family-and kinship relationship between them, as well as their wider social networks. As I was walking from house to house, I got the opportunity to introduce myself to those who did not know me.

It was relatively easy to get to know other parents whom I did not share a history of friendship with. I got to know most of them through the “snowball effect” (Bernard 2013) in which a person who I already knew referred me to another person. This could be someone who was pregnant or who had a baby. After three months in Ng’ombe I had a network of 10 mothers and 11 babies who I visited on a day-to-day basis. During the months to come, I also came to know 18 babies and their mothers who I visited on a more sporadic basis. These mothers and their babies taught me most about motherhood and the lives and experiences of babies. I also came to know several nurses and volunteers at the local health clinic in Ng’ombe, particularly the maternity ward, as well as traditional birth attendants and herbalists (*ng’anga/azamba*). These have an extended knowledge on the challenges that mothers can face during pregnancy, during and after delivery, as well as the illnesses and physical challenges that babies might encounter.

In addition to taking part in babies’ and mothers’ everyday activities, I wanted to take part in the ritual practices that babies are part of. As noticed by van Gennepe (1960) and Dundes (2003), ritual performances are frequent at infancy and often aim to protect the infant and the mother from potential dangers, and they are part of gradually transforming the child into a social member of the community. I relied on the methods that have been developed by Victor Turner (1967) who did research with the Ndembu in the same region. He found that rituals tend to be organized in a cyclical fashion and rest on a set of symbols. These symbols have different layers of meaning that often depend on the social context they are part of, and the participants of the ritual will have different interpretation and access to these meanings. It is therefore important to explore the meaning of symbols and metaphors in diverse contexts and understand how different people interpret these. In

addition to discussing with the caretakers the ritual practices that babies are part of, I discussed them with ritual experts, traditional birth attendants, and herbalists.

### **The world seen from the babies' point of view**

While gaining access into the babies' everyday life and ritual activities was a relatively smooth process, gaining insight into their experiences and perceptions posed other methodological challenges than when studying older children. The methods chosen during the previous fieldwork were strongly influenced by theories within the interdisciplinary field of childhood studies that emphasize that children should be listened to, taken seriously and respected. However, the contemporary perspective on children's independency, agency, and self-representation is a perspective that babies in general do not seem to fit. As discussed in the introduction and in the theoretical chapter, their dependency makes them seem rather passive in the encounters with others, without any power to negotiate their own position in society and intentionally contribute to their own and others' welfare and quality of life. This initially makes babies less interesting for researchers who have an interest in studying the lives and experiences of children (Gottlieb 2004).

With the important exception of Alma Gottlieb (2004) there are few anthropologists and childhood researchers who have attempted to see the world from the babies' "point of view", and there are therefore few methodological guidelines on how to gain insight into their worlds and experiences. The limited number of anthropological writings about babies focus mainly on how *adults* conceptualize and understand babies; how they come into being and are recognized as persons and cultural variation in caretaking practices (See for instance Carsten 1995, Conklin and Morgan 1996, James 2000, Montgomery 2000). To understand the lives of babies we have to listen to what adults say about them and observe the ways in which they care for them. But there is a noticeable gap in our knowledge on how to understand babies' ways of expressing themselves; how to do participant observation with them and not only with the adults who care for them. Some social scientists have even questioned the usefulness of trying to participate in the lives of babies. For instance, in their influential book on ethnographic methods in research with children, Fine and Sandstrom write;

It hardly makes sense to think about participant observation with infants. One can observe and interact with them, but can one really “participate” in a meaningful group life? It is not until the child is ready to attend preschool (from age 3 to age 6) that participant observation becomes possible (1988:36).

Fine and Sandstrom seem to have a rather narrow definition of meaningful social participation. As several social scientists have noticed (Cf. Barthes 1972, Basso 1970, Gottlieb 2004, Holt 2017, Saville-Troike 2003), people do not just communicate and participate in social life through spoken words, but through silences and facial and bodily expressions. Developmental psychologists have long acknowledged that babies both experience the world, and partake and express themselves socially, through the body. Already in 1952 Piaget emphasized that it was through motor sensory activity that babies experience and learn about the world. Developmental psychologists have also shown how even newly born babies are capable of initiating and promoting mutual reciprocal relations with others through both vocal and bodily expressions (Fontaine 1984, Trevarthen 1974a,1974b, 1977, 2008, 2011, Stern 1971).

Ethnographic methods have several advantages when studying the lives of the youngest children who cannot express themselves in words as they allow us to pay attention to nonverbal expressions; to listen to the babies’ diverse sounds, observe and feel their bodily and facial expressions and movements, and listen to what adults say about them. Moreover, the longitudinal nature of ethnographic fieldwork allows the researcher to study children’s development over an extended time; how their bodies grow and how their abilities change with time. This includes important insights in how their development is shaped by the activities of everyday life, and how their caretakers make sense of their growth and changes (Corsaro 1996, Eder and Corsaro 1999, Weisner 2002). Studying bodily and sensory expressions and experiences is particularly relevant to the study of babies who are, what Gottlieb terms, “insistently somatic creatures” (2004:22). They experience the world not only by listening and seeing, but by moving, touching, tasting, and smelling. And they participate in social life through facial expression- smiles, frowns, grimaces, closed and open eyes, and through bodily expressions; waving arms, kicking legs, arched backs. It is therefore impossible to establish a meaningful relationship with babies without studying how they express and orient themselves and

experience the world through the body (Gottlieb 2004:22). Ethnographic methods involve, at least in part, living in and embodying other realities. We continuously try to “take in” the world with all our senses, not only by listening and intellectually understanding, but “feeling” and experiencing their world with and through our own bodies. By doing so, we hope to inscribe their realities upon our bodies. Ethnographic knowledge is thus lived and embodied, and our methods are particularly suitable for getting insight in bodily expressions and “unspoken words” (Desjarlais 1992, Jackson 1998, Gottlieb 2004). During fieldwork I would (often unconsciously) try to move and behave in similar ways that my friends in Ng’ombe did. Sit with stretched legs and folded hands, roll the *nsima* (stiff maiz porridge) repeatedly in my right hand, wash clothes by rubbing them against my wrist and try to wear my *chitenge* (sarong) like my friends did. My research assistant, who had observed my rather hurried and staccato style of walking in the beginning of the fieldwork, later commented humorously “you now walk like a Zambian; like a swaying straw”.

When studying older children, I took great pleasure in trying to forge my body in the image of my friends. Running, jumping, kneeling, carrying, stirring the *nsima* stick, sitting on the ground. But, naturally, I could not move and experience the world in similar ways as the babies I was studying. However, some of my main methods during fieldwork were to hold and carry babies, paying close attention to their ways of expressing themselves, playing with them, keeping track of their movements, and listening to how the caretakers and other community members comment on the babies’ bodily and sensory expressions, as well as observing the interactions between them and the baby. I particularly focused on the diverse ways in which babies communicate with those around them and on the ways in which the adults responded to their ways of communicating. The questions that I asked mainly came as a result of what I observed and participated in. This provided a more “natural” and “relaxed” setting for my questions and led me to ask questions that I otherwise could not have thought of. For instance, holding a baby who suddenly belched would open up discussions on the babies’ digestion system, observing a sleeping baby who, out of nowhere, smiled would open up discussions on the babies’ spirituality, and seeing a mother who, after giving the baby a bath, lightly massaged and

stretched the baby's joints, could open up discussions on how babies grow and become stronger.

During fieldwork I also took systematic notes of the physical development of the babies. This included when an infant could hold the head with no support, sit upright, crawl, and walk. As Gottlieb (2004) suggests, physical development may reveal culturally rich data, and can not only be seen as biological, but also culturally determined. Close attention was also paid to the baby's vocal expressions; their gurgles, chortles, clucks, cries, and screams. Gottlieb writes that these are "often dismissed as meaningless babble by Western observers" (2000:125) but may be seen as meaningful in other societies. The method of "participant observation" involves a broad spectrum of research tools. For instance, inspired by the seminal work by Hewlett (1993) on the close father-infant relationship amongst the Aka, as well as the work of psychologists who specialize in child development, I used time-allocation activities techniques. These mainly focused on the activities of the infant for two hours sessions at different hours of the day, while a few lasted more or less continuously or the whole day. Together with my research assistant, I coded the length and number of nursing bouts, the baby's proximity to others, the play activities they were involved in, and how long it took the caretaker to respond to the babies cries and how long it took for the baby to calm down. This technique provided me with a better overview of diverse play and care activities that babies were part of, as well as the babies social network and geographical spaces. It also provided a basis for further observations and conversations with people.

## The notetaking friend



*Figure 3. Observer being observed. Photo: Itai Mwila*

One of the main goals for ethnographers is to fade the invisible divide between the researcher and the researched by establishing mutual trust and fellowship. This may open many doors in the research process and enable the researcher to gain a deeper understanding of diverse cultural phenomena. The close relationship that we share with people also blurs the roles of being a researcher and a friend. This has also been pointed out by Throne (1980: 291) who writes that the many-standard relationships that the researcher establishes with people “make it easier for one's subjects to forget they are subjects, to think of the researcher only as a friend, movement member or co-worker”. According to him, this blurring of roles poses several challenges to the notion of informed consent. I would, throughout the research, continue to explain and discuss the project; what I was trying to understand, the changes in focus and the challenges I was facing. By discussing the progress of the research, I did not only obtain new perspectives, I also believe that this was an important reminder to my friends of my dual role as a researcher. Children and adults seemed to be generally enthusiastic about the interest that I took in their lives. But due to the friendship that we shared I knew that it would be unthinkable for most of them to tell me directly if they wanted to withdraw from my research. I would therefore pay close attention to people’s body language, their ways of welcoming me and answering my questions. At times I would “ease down” on my questions as I knew that

people get tired of explaining and answering. However, I never had the feeling that somebody wanted to withdraw from the research.

There were several things that made me into a rather unusual friend, such as my numerous questions and my everlasting writing of notes. Writing of fieldnotes represents for many anthropologists a number of ethical dilemmas and contradictions related to intellectual exploration and power imbalance. This has also been pointed out by Jane Jackson:

Having material in one's head is somehow less guilt-inducing than having it on paper. Some of this may be the two-hat problem: one is in some ways a friend of the natives, yet one is also a student of them, and one cannot bear both hats simultaneously. Writing fieldnotes can make repressing the contradictions in this balancing act more difficult. (1990:18)

When having a "private" conversation with a friend, it feels awkward to make notes. In the beginning of the fieldwork, I also feared that my writing of notes would prevent me from establishing a close and trusting relationship with people and create too much of a distance between me (the researcher) and them (the researched). However, making mental notes would not only challenge my memory, but it would also be ethically problematic. I believe that my continuous writing was an important reminder of my role as a researcher. Moreover, it did not take long before my pen and notebook became an accepted part of me and our interactions and conversations. In many ways writing fieldnotes made it easier to bear the hat of the researcher and the friend at the same time.

To make my notetaking less "mystical" and more transparent, and maybe less intimidating, I chose to make my field notes as accessible as possible to the adults and children that I spent time with. I would often read my notes out loud, ask them if they felt that I had described the situation in a good way. I would often leave my fieldnotes laying around in the open to invite people to read them, and children tended to use my field notes to practice reading English. In addition, the notes opened for new discussions and understandings. Due to this openness, I had the strict habit of keeping fieldnotes concerning situations and conversations in which they had not themselves participated in, separated. Sometimes people laughed at all the details I included in my notes, but I never

experienced any adults or children feeling intimidated or upset by the things I wrote about them.

Many anthropologists consider their fieldnotes to be too private and intimate, even embarrassing, to be shared (Atkinson 2014, Emerson et.al, 2000). Most of us have received little formal instruction on how to write notes before going into the field. Writing and processing fieldnotes can be a rather lonely and isolating process, and we might wonder if we are writing down the right stuff in the right way (Jackson 1990). I have found it to be rather liberating and instructive to be open about my fieldnotes, and during fieldwork I would regularly email my notes to my supervisors who kindly took their time to read and comment on them. This has been incredibly helpful as they added their thoughts and knowledge and helped me to think and understand in alternative ways. And maybe most importantly, their words of support and encouragement; “this is interesting”, “good observation”, gave me confidence and made the whole process of doing research less lonely.

### **The picture taking friend**

Even though the articles and book chapters referenced in this thesis do not contain many pictures, my empirical material contains a number of pictures and films from the everyday lives of babies<sup>13</sup>. Already in 1942, Bateson and Mead noticed that photography was particularly useful in documenting the bodily and facial expressions of babies and young children and the interaction between parents and children. With their studies of children in Bali, the history of visual representations in anthropology also marks the beginning of childhood studies in anthropology (Bateson and Mead 1942, 1951a, b, c, d, Mead 1975). In the last decades, a growing number of researchers have argued that visual media is a particularly useful when we try to describe nonverbal ways of communicating, and thus offer a new pathway into anthropological knowledge (Goodwin 1994, El Guindi 1998, Hockings 2009, Iversen and Simonsen 2010, MacDougall 1997, Pink 2011, 2021). A photo or a film might help us to capture “the moment”; to see and discover more, and

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<sup>13</sup> During the process of writing and analysing, these photos were only used as supplementary to the observations I have done and the conversations with the children and adults. I hope, however, to work on a more in-depth analyses of these photos in future writings.



remember better, than if we are just observing and partaking in the flow of everyday life. During fieldwork I took photos of play activities and of intimate moments of interaction between the baby and others, as well as of the diverse activities that babies are part of, such as being carried on the back, being bathed, learning how to sit or walk and, in rural sites, accompanying their families to the fields.

I also documented life cycle rituals both in film and by taking photos. I was often invited by families to rituals that babies are part of, including funerals, to document the event by filming and taking photos. The pictures and videos that I took would be shared and discussed with the caretakers, including the children who were part of the photo. The questions that I asked would be open and descriptive in nature; what are you doing in the picture? What is the purpose? How does this activity affect the baby? What did you say/sing? This opened for new topics and questions relating to the activities and lives of babies. I found that visual methods can be useful in documenting non-verbal communication, and later in the process of analysing my material, they have been an important supplement to my memory and the verbal descriptions of the lives of babies.



*Figure 4. Playful moments between a baby and her mother.*



*Figure 5. Brothers*



*Figure 6. Uncle (MB) chatting with his nephew.*



*Figure 7. Grandmother and grandchild.*



*Figure 8. Baby taking her first steps while her mother and neighbours encourage her by rhythmically singing and clapping their hands*



*Figure 9. Baby accompanying his mother to the field*

## **Knowing when to speak and when not to**

During the beginning of my second fieldwork, I went to visit a mother who I had already met a couple of times before. I was accompanied by one of her friends who told me that she had lost her baby two weeks ago. The baby was only one month old. Upon meeting her, I expressed my condolences; “I am so sorry for your loss”. Her friend quickly interrupted “you know Sesilie, these things just happen”, before she continued with sharing what was supposed to be a funny story about one of her neighbours. The mother who had lost her baby laughed. I felt invisible, out of place, alienated. For me this became the “momentary lapse” that opened doors into a “set of cultural categories” (Gell 1996:116) that guides the ways in which people in Ng’ombe handle and express emotions when a newly born baby has passed away.

The silence that sometimes surround death was, however, not entirely new to me. I had learned from previous fieldworks how orphaned children in Ng’ombe are not encouraged to speak about their loss or remember how things used to be before their parent(s) passed away. Most children are not allowed to participate in funerals and go to the burial site, they will be protected from talk about the loss and from other people’s bereavement, and some are not told about the death for a long time. I had experienced how silence can protect bereaved children from the harmful effects of loss, and initially help them to let go and focus on the present and future (Smørholm 2007). The bereaved mother’s silence reminded me of the ways in which I had seen bereaved children and their caretakers handle grief. Doing research on sensitive topics such as death and bereavement poses several methodological and ethical considerations. Some of these have already been discussed in Smørholm (2007), Smørholm (2016a), as well as Smørholm and Simonsen (2015) and Smørholm and Simonsen (in press). In the following I will add some supplementary reflections.

It has not been easy to capture the complexity of the ways in which people in Ng’ombe handle and express grief. Some would talk freely about their memories of the loved one and the time after their loss; how their family members, relatives, friends and neighbours had come for visits and taken them for walks to make them feel better, how their life had changed, and their thoughts about the future. They seemed grateful that there was

someone who listened and took interest in their experiences and thoughts. In these situations, I felt that I could offer a bit of support and comfort, just by listening, commenting, and asking a few questions. However, many would, through silence and bodily expressions, show resistance to talk. One of my main fears during both fieldworks was that I was poking in emotional wounds that were gradually healing by reminding them of difficult memories. I worried, because of my background from a culture where verbal expressions are considered to be therapeutic, that I might violate the cultural norm of silence. I therefore tried not to put any pressure on children and adults to tell me about issues that they found problematic to talk about, and I tried to be as sensitive as I could to their bodily expressions.

Much anthropological research relies on talking to people in informal or formal interviews. During fieldwork I conducted several interviews with parents and children, grandparents, teachers, nurses, and herbalists. Most of them were in the form of narrative and semi-structured interviews during which I introduced a few topics and focused on the stories that people told based on these. These stories led to a shared exploration of ideas, concepts, and events. As pointed out by Gudmundsdottir (1996), anthropologists now acknowledge that what we learn in interviews is not an objective truth, but rather a shared construction of a story to which both the interviewer and the interviewed contribute. Interviews helped me to make sense of people's everyday and ritual practices and experiences. Sometimes I even felt that I learned more from interviews as the knowledge that I obtained seemed to be more structured, concrete, and tangible than when I was participating in the flow of everyday life. And most seemed to enjoy being interviewed as it allowed them to retell important experiences and situations, reflect on them, and be in the role of an expert. At the same time, the interview is a form of communication that is "saturated" with power. This is particularly the case in research with children, as well as when doing research in an African context with a long history of colonization and economic exploration and dependency (Moore and Roberts 1990).

Structured or not, the interview will always be a frame of communication in which the researcher decides the topic and the questions to be asked. And, as Gudmundsdottir points out, as soon as a memory or a mental image is transformed into words, these words "tend

to crystalize the image, and then replace it” (1996: 298). The questions that we ask therefore direct which words and stories are listened to and told, and which memories and identities are created. The researcher must be reflexive about the questions that we choose to ask about people’s difficult memories and experiences; what motivates us to ask them and the way in which we ask them. And last, but not least, how we, as listeners, respond to their answers. If we probe for answers, we must be prepared to handle those answers in a way that does not inflict harm, leaving the subject even more vulnerable than she was before the interview. And we should, I believe, also acknowledge that we are not trained psychologists and therapists.

A couple of months into my first fieldwork with children who had lost their parents, I came to question how appropriate it was to interview people about sensitive themes. I felt more at ease with observing the children’s ways of expressing themselves in their everyday life context. An extensive part of my material therefore includes records of children’s expressive genres, such as dancing, storytelling, singing, making poems and drawings, and doing drama (See article 4, Smørholm and Simonsen in press, and Smørholm 2007).

I was also careful not to ask parents too many questions about their fears relating to the health of their babies or their experiences of losing one or several children. Mothers in Ng’ombe are painfully aware of how vulnerable and dependent their babies are, but very few took the initiative to verbalize their fears and experiences of loss. However, their worries are manifested and communicated in the ways that parents, siblings, and grandparents care for them; how they close the curtains and the door to protect newly born babies from the dusty wind, the gleaming sunlight, the odours from the pit latrine, and sudden noises. It was reflected in the ways that they keep them in the house until their spine and joints have hardened, the way they constantly hold and carry them, wrap them in thick blankets, how they quickly attend to their needs. It was reflected in the mother’s desperate search for medication and resources that would help them secure her children’s health and well-being. And their experiences and fears were manifested in the worried face of a mother whose baby was not playing and eating as an illness had taken away its energy and appetite. And in the relief of a mother whose baby was recovering.

According to Ricoeur (1977), the first criteria for significant data in psychoanalytic theories is that the experience must be expressed in words. However, some experiences and worries do not easily render into words, and some are better left unspoken. As Hannah Arendt observes, “pain is at the same time the most private and least communicable” of all experiences (1993: 50-51). If we mainly focus on the verbal expressions of those who we study we may easily overlook what is silent, unspeakable, and indescribable. And our representations: Who we represent and what we represent will end up being quite narrow. As Basso states “...an adequate ethnography of communication should not confine itself exclusively to the analysis of choice within verbal repertoires. It should also specify those conditions under which the members of the society regularly decide to refrain from verbal behavior” (1970: 215).

### **The anthropologist as a mother**

As pointed out by Gottlieb “who we are shapes the fieldworker we become” (2012:2). There is a growing number of anthropologists who explore how our personal or “private” lives shape and intersect with the choices we make and interests we have as scholars (see for instance Behar 1996, Rosaldo 2013). There are also studies, particularly in the field of childhood studies and feminist anthropology, that focus on how one’s status as a mother or not being a mother influenced the process of doing fieldwork (see for instance Gottlieb 1995a, Gottlieb and Graham 2012, Bell et al. 1993, Caplan 1992). These researchers have pointed out how shared experiences and shared interests can enrich our understanding of other people’s lives. My friends in Ng’ombe and I shared a common interest in the lives and health of their babies. What I did not share was their experience of being a mother. This changed in the years following the fieldwork; I am now a mother of two.

I believe that not being a mother during fieldwork was both an advantage and a disadvantage. Many women, and especially the older women, took it upon them to prepare me for motherhood; how to take care of a baby, what I could expect when being pregnant and what it was like to give birth. My naivety, curiosity, and inexperience might

have given me insights that I otherwise would not have accessed. On the other hand, being a mother would have provided me with different perspectives and insights. I would have asked other questions; questions that might have echoed my own experiences. I could also have shared the pleasures as well as some of the worries of the mothers on a different level. Caplan writes that during her first fieldwork in Tanzania she considered the local women to be very different from herself. As wives and mothers “they were...the antitheses of what I wanted to be: an autonomous professional (1993: 173)”. However, as she later became a mother of two, she admired how these mothers managed to combine childrearing and other forms of work. Similarly, Gottleb (2012a, b) describes how she used her experiences from the Beng in Cote d’Ivoire to comfort her own baby boy who cried a lot.

After becoming a mother, I have, similarly to Caplan, become increasingly fascinated by how mothers in Ng’ombe managed to keep their babies generally happy and content. For instance, I have spent several weeks sleeping in the same hut, most of the times also in the same bed, as one or several babies aged between three months and two years. It doesn’t take much to disturb my sleep, but I did not wake up *one single time* by baby cries. And I have never heard a mother complain about her baby depriving her of sleep. My first-born daughter was born prematurely, and she would cry for hours during the night. She was diagnosed with colic; an undefinable diagnosis that is reported frequently in western contexts and that is rarely found by ethnographers studying babies in other parts of the world (Peters 1994). The doctor and nurses that I turned to for help and advice had few recommendations on how to handle it. After a lot of nightly carrying, attempts to nurse, exposing her to the sound of a hairdryer or kitchen vent, singing, rocking, and massaging, we realized that she would only sleep on top of me or my husband, tightly secured with a shawl. In Zambia, as in most other parts of the world, babies are in constant physical contact with their mother or other caretakers.

For me, becoming a mother felt like an overwhelming responsibility and, as many of my Norwegian friends, I did not feel entirely confident in my new role. At times I also felt alone as most Norwegians, including my own family, believe that one should not interfere too much in the private life of newly fledged parents. I was often thinking about my



friends in Ng'ombe who seemed to be so relaxed and assertive in their role as mothers. Most of them had the experience of looking after younger siblings and been nursemaids for babies from a young age. Some had been classified as “mothers” for their sister’s children long before they themselves had given birth. And I remembered how newly fledged mothers in Ng'ombe had received close guidance from their agetates and older women. I have learned more from mothers in Zambia than I have learned from my local child health clinic; the importance of physical contact (day and night), and that feeding is not only about hunger, but also about care and comfort. Zambian women emphasize the importance of keeping the newly born baby in an environment that is as calm and tranquil as possible. As a grandmother in Ng'ombe stated “...the difference between the quiet and warm place that it came from and this windy and noisy environment that it has been born into is huge. So we try our best to make the baby feel like it is still living in the comfort of the womb” (Smørholm, nd: 10). I have asked myself whether participating in the diverse activities that are supposed to “promote healthy development” of babies, such as courses in baby swimming, baby singing, baby yoga and baby massage, is first and foremost about meeting a cultural ideal of being a “good mother”.

### **Ethnography that breaks your heart**

When the relationship between the researcher and the researched takes the form of subject-subject, and not the positivistic subject-object, research can be mutually enriching and enjoyable as it allows both to share and explore each other’s worlds and understandings. The friendship that I shared with adults and children in Ng'ombe enabled me to be part of in the ebb and flow of their everyday lives.

There were also situations when participant observation became more personally and emotionally demanding than I expected. Let me give an example; I became friends with Agnes during my first fieldwork through Peter and his baby sister Lucy. They had lost their mother, and their father had remarried Agnes who did not have any children. Agnes was such a warm and generous person, and I always admired her for the close and caring relationship she had with Peter and Lucy. When I returned to Ng'ombe four years later, Agnes and her husband had a baby girl called Mercy. Mercy was only 19 months old, and in the beginning of my fieldwork I found great pleasure in spending time with Agnes and

her children. However, a few months later, Mercy fell sick and gradually became weaker as she did not have the will or energy to eat. For more than a week I spent almost every day together with Agnes. Agnes tried to be strong, but once she teared up as she was holding Mercy on her lap, repeatedly stroking her thin hair and looking into her sunken eyes; “She doesn’t even manage to have eye contact with me, her own mother”. Mercy was severely dehydrated. When she cried, there would be no tears. Her dry eyes made her sometimes sleep with her eyes wide open. Is she breathing? I asked myself. Together with other relatives and neighbours, I tried to help out with small things; feeding her, holding and carrying her. I accompanied them twice to the hospital. Her sister would carry Mercy into the doctor’s examination room to support and protect the tired mother. She sat beside me in the waiting room, looking down. I could see her silent tears falling as we heard Mercy’s thin voice crying “mummy, mummy, mummy” from the other side of the door. I struggled to stay composed. I bought the medication; I saw Agnes forcing Mercy to swallow it. And in the end, I accompanied them to the graveyard. Five months later I took part in the burial of Agnes. And I visited her ill husband and their remaining children who I knew so well, Peter and Lucy. At that time they were only seven and 10 years old.

Death is part of the everyday life of people in Ng’ombe, and as an ethnographer, it also became part of mine. In her book entitled *The Vulnerable Observer: Anthropology That Breaks Your Heart*, Behar asks “...do you, the observer, stay behind the lens of the camera, switch on the tape recorder, keep the pen in hand?” (1996:1). I have been fascinated by how emotions, which we tend to think of as part of our “inner” life and biology, are culturally shaped. But it has been impossible to stand beside and distantly observe people suffering without being affected. These are experiences that are more emotionally demanding than what I have managed to express verbally in the methodological descriptions and analyses in any of the articles.

To be honest; am I not sure if I would have chosen to study and write about children’s and mother’s experiences of loss and bereavement if I myself had been a mother. I believe that the thin line that I somehow managed to keep between their experiences and mine would have become too fragile. That the fascination would have disappeared, that I would only have seen myself in their situation, leaving behind only shared pain. That I would

not, to return to my lecturer's metaphor, have managed to keep my "head above the water". Or perhaps the contrary might have happened: it might just be that having experienced being a mother would have made me into a better ethnographer. That I, similar to Rosado (1984, 2013), would only fully comprehend their experiences of loss and grief if my personal experiences stood closer to theirs. This, I guess, will remain an unanswered question.



# PART II

*When the baby can manage on her own  
Run around with the older kids  
Talk... ask...*

*Understand...*

*That is when she stops being a baby  
Now, the parents can have another baby  
If they wish so*

Amake Gift



## Chapter 5

### The everyday lives of babies and their caretakers

The main topics of this thesis are closely related to and embedded in everyday life. Since the format of articles leaves limited space for elaboration of social cultural contexts, I have chosen to add a supplementary chapter to present some key aspects of children's everyday lives that emerged from my fieldwork in Ng'ombe. This will enlighten the presentation of the main analytical points in my articles. As religious life and life cycle rituals are important and integral parts of people's everyday lives and lived experiences, I also include a description of religious life and the main life cycle rituals of people in Ng'ombe, as well as a note on witchcraft.

#### The everyday life of children in Ng'ombe

For most children in Ng'ombe, the day starts at sun rise. At the crack of dawn, children, and particularly girls, go to one of the communal water pipes for water. This is the busiest hour of the day at the tap, and they might have to queue up. Upon reaching home, some will have bread, rice, or porridge before leaving for school, while others will leave on an empty stomach.



Figure 10. Queue by one of the community taps. Photo: Brainford Nkamba

Most children in Ng'ombe go to local community schools and walk at most 20 minutes to reach school. Many pass through the bustling market where everything from food, second-hand clothes, spare car parts, kitchen utensils, and charcoal is sold. Some will choose a way around the market as they don't like how they tend to disappear in the crowd. Young children easily navigate their way along the maze of narrow paths in Ng'ombe; even knowing the shortcuts that only children can take, such as the front yard of people's houses.

After school, the children hurry home, most mothers want them to come straight home to help out with making lunch, wash clothes, or look after younger siblings. If their parents are not at home, they might find some rice or buns that has been left for them for lunch. In the afternoon, most children are free to meet their friends. Many gather with neighbouring friends to play; they play with marbles, diverse musical games, play-house, or just sit and chat. Boys will go to the open fields at the outskirts of Ng'ombe to play football or other ballgames. Others might venture into the wealthy areas that share borders with Ng'ombe to relax in the shade of trees, watching cars driving in and out of fenced houses, leaving them with a glimpse of the large houses and lush gardens on the inside. But most will stay close to their house in case they are needed to run errands or help at home. At this time of the day, the sound of playing children can be heard everywhere. Soon they will go home for dinner, and most children spend the evening with their families.

These were some of the everyday routines of children that I got to know during my first fieldwork. The routines of school children from the age of six to their teenage years are quite similar. Of course, a six-year-old will do other chores than a 14-year-old and the games they play are different. Still, for most children, the day is organized around school, home duties, and leisure time. The daily routines of babies vary more, depending on age and development. The youngest babies spend all their time in the house, being held by the mother, or at times the father, a grandparent, or an older sibling. Most of the time they will be sleeping, eating, and also communicating with those around them through their bodies, faces, and through sounds. People in Ng'ombe pay close attention to their ways of communicating; a smile that seems to come out of nowhere may be a sign that the baby



is communicating with God or other spiritual beings. Mothers are quick to notice that the baby starts responding to their tender voices and touches. “We are now getting to know each other”, a mother related.



*Figure 11. Left: Nora being held by her brother. Right: Emmanuel playing with his aunt*

When the baby is considered strong enough to be brought out of the house it will gradually spend more and more time outside and in the company of others. Most babies are now also strong enough to be carried on the back of the mother and they start exploring the surrounding neighbourhood as they are carried around. But mothers are careful not to move around too much; a young baby might catch a contagious disease, or they might be exposed to people with bad intentions or bad behaviour. The babies therefore spend most of the time with the mother inside the house or in the shade in the yard of the house. Here they take part in the family’s everyday routines, and meet visitors who, seemingly effortlessly, take part in caring for and playing with them.

Generally, babies who have been brought out of the house spend a considerable amount of time playing and “talking” with their parents, siblings, and other visitors. People emphasize that playing is important in many ways; it will, of course, make the baby happy. Several parents explained that a content and happy baby will eat more, be more social and physically active and will be more resistant to diverse illnesses than babies who are not played and talked with. Many also emphasized that playing with the baby is

important for making it physically and mentally stronger<sup>14</sup>. For instance, toss and tumble games are said to mentally “harden” the baby, so if it ever falls from something, such as a bed, it will be more mentally prepared than if it had never felt the sensation of falling (see Article 1 for a discussion on play during infancy).



*Figure 12. Sleeping in the shade of the house.*

As the baby starts sitting and crawling it will discover more of its surroundings. Even though mothers complain how dirty they tend to get, they let their babies crawl around and explore the surroundings of the house. Curiosity and being brave are considered signs of well-being and strength, and important for young children’s learning and development. Mothers will also bring them for longer walks. Comfortably seated on the mothers back, often in the shade of an umbrella, babies observe people and cars passing by, learn about the sounds, colours and smells of the market, and greet people along the way. Occasionally they will come along with the mother for visits.

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<sup>14</sup> Notice that the positive value that people in Ng’ombe hold to talking and playing with babies stands in contrast to LeVine and his colleagues’ (1994) observations amongst the Gusii of Kenya. Here, babies are rarely the centre of verbal or visual attention as mothers strive to avoid emotional arousals, but rather try to keep their babies emotionally calm and content (see also the discussion on LeVine’s work in the chapter on theory).

Most babies who have started sitting and crawling have many nursemaids to look after them; this can be an older sister, a relative, or a girl in the neighbourhood. Aged between eight and 13, these girls know a good deal about how to take care of a baby and will bring them around with their friends. From now on babies also start taking part in the games of older children. Mothers would often comment on the importance of letting them play with other children as this will put them in a cheerful mood and teach them how to socialize with others. They will also try to meet up with friends and relatives who have babies of the same age as them. “Even though they do not play together like older children, they still take great pleasure in each other’s company” a mother of five related.



*Figure 13. Baby exploring the lips and mouth of her older sister and experiencing how it tickles when her sister blows air in her neck.*



*Figure 14. Twin brothers being looked after by their older twin sisters*



*Figure 15. Cousins sharing a meal.*

When the baby starts walking, it will have more freedom to explore the surroundings of the house on their own. Most mothers point out that it is important to always pay close attention to the baby so that it does not go to dangerous places. But generally, young children who have started walking are left with great freedom to explore. These young children spend quite a lot of time roaming the neighbourhood with older children, and I was often impressed how they would take the lead in finding their way to relatives who stayed within walking distances. Mothers often encourage this freedom, and comment that babies whose mothers are too protective might become insecure and wimpy as they grow older.

Young children will gradually start spending more and more time with those who are the same age as them. Mothers pointed out that it is important for their social development as they learn how to treat others and stand up for themselves in conflicts. Young children who are able to walk will also be encouraged to take a greater part of the everyday chores of the house. Their participation often takes the form of observing, imitating, and co-participating, often with limited instruction by the parents or older siblings. According to many of the parents I spoke to in Ng'ombe, participation in work activities from an early age is not only important for the purposes of learning, but simply because young children take great pleasure in participating in the activities of their parents and older siblings.

When they are above the age of two, most children have been weaned, they are rarely carried on the mother's back and they move from the parents' bed to sleep with their older siblings. Most children start spending more time with their siblings who, again, take great responsibility for accompanying, caring and disciplining their younger sibling. If the parents are planning to have more children, then this is considered as a good time to have another baby. Having a sibling marks the end of infancy, and the child is now defined as a '*mwana wachikulire*' (a grown up child). People pointed out that the *mwana wa chikulire* is able to express him or herself in simple sentences, and she or he can identify a broad range of relatives and other people in the community. "A *mwana wa chikulire* will recognize that you have a different skin colour than the other people he knows and can even call you *muzungu* (white person)", a mother related. This is the stage when children begin asking such questions as why a familiar person is missing, or abstract questions like "where did I come from?" and "why does papa grow beard while mama doesn't?" During this stage, the child's knowledge about the world increases rapidly. At this stage, children also start learning the importance of *ulemu*; of being humble and generous, and listening to and respecting the seniors. A *mwana wa chikulire* will be asked to run small errands and share some of their food or sweets.



Figure 16. Left: Friends playing with cars made of boxes. Right: Washing clothes



Figure 17. Helping grandmother peeling maize of the cob.

## **Religious life and life cycle rituals in Ng'ombe**

One of the premises of this thesis is that infants hold a central place in the human life cycle. However, their place in this cycle cannot be fully understood without knowledge of other periods of life and the ceremonies that mark the transitions between them. These ceremonies reflect ideas of what it means to be a human, a child, an adolescent, and an adult (Roscoe 1995). As pointed out by Simonsen (2000) and Strathern (1996) ceremonies do not merely produce individual abilities. A person's identity and abilities are always defined in the relationships he or she shares with others. Rituals do not transform a person into a complete person and full member of the community; they reveal the social relations that the individual is about to enter (Simonsen 2000: 14).

In the following I will offer a brief description of the main rituals that find place in the life of children and adults in Ng'ombe. I acknowledge that the brief presentation does not do justice to the complexity of these rituals. Article 1 offers more detailed descriptions of the rituals that take place the beginning of life, and Article 2 includes descriptions of funerals for babies and the mother's experience and expression of grief. The complex female initiation rituals in Zambia have been described in the work of anthropologists such as Thera Rasing (2002) and Jan Ketil Simonsen (2000), as well as in the seminal work of Audrey Richards (1956) and Victor Turner (1974). In addition, researchers such as Austin Cheyeka and colleagues (2014), Elizabeth Colson (2006), Sjaak van der Geest (2011) and Birgit Myers (2004) offer insights into the relationship between Christianity and beliefs in ancestors and spirits.

According to Colson, the general idea among people in Zambia is that 'to be a Zambian means to be a Christian' (2006: 249). People in Ng'ombe generally see their social and moral identity as closely interconnected with their identity as Christians. The Catholic church is the largest single denomination in Zambia, but in recent years, Pentecostal and Apostolic churches have been growing in popularity (Kirch 2011). In Ng'ombe, there is a wealth of different churches and communities. Many of them are located within the township, but some, such as a large Catholic church and a Seventh-day Adventist church, are situated near the wealthier areas that border Ng'ombe. It is not unusual to convert to another denomination, and reasons for the conversion are often found in personal

relationships such as friendship ties, shift of residential location, marriage, or a personal connection with a pastor. Generally, people appreciate the fellowship and sense of belonging in the church congregation. For younger and older people, going to church is about socializing with old and new friends, neighbours, relatives, and family. It does not only provide an occasion for worship and reflection, but for dressing up, singing, and the occasional dancing. For some, going to church is a break from everyday life, and for those congregating in the wealthier areas, it might also be a welcoming change of environment. The church and its members offer important support in times of trouble as they visit the ill, offer consultation and advice in matters that concern marriage and family life, and raise funds for those in need. The church and the church choir also play a central role during life cycle rituals, such as the rituals that mark the baby becoming a member of the community, weddings, and funerals. Pentecostal-Charismatic churches disapprove of the more “traditional” aspects of these rituals, and some offer alternatives. However, similar to people in other parts of the world, people in Ng’ombe are quite eclectic when it comes to how they interpret and follow religious rules and regulations. Moreover, it is often impossible to categorize and separate “traditional” and “Christian” beliefs and practises as these are not necessarily in conflict with each other, but rather subject to ongoing exchange and adjustment. For many Zambians, being a Christian is therefore not necessarily considered as contradictory to performing more “traditional” rites (Rasing 2002: 201).

Similar to many other African Bantu-speaking groups, The Chewa and Tumbuka consider life to unfold in a cyclical manner in which the line between the living and the dead is not sharply drawn (Rasing 2002, Mbiti 1990, 2015). Human life moves in the rhythm of conception and birth, entry into the community of the living, puberty and initiation, marriage, procreation, old age, death, and entry into the community of the spirits (*mzimu*). The *mzimu ya mokolo*; the spirits of the ancestors, are guardians of the ancestral customs (*miyambo*) and are “considered to have a position of authority with regard to the family group” (van Breugel 2001:73). Sooner or later, the spirit of an ancestor will re-enter the world of the living as the guardian spirit of a newly born baby. In Ng’ombe, I was frequently invited to rituals that marked both the beginning and the end of life. During the week I often passed by several funeral houses and households welcoming a baby out



for the house for the first time. In the night, I often went to sleep to the sound of drums coming from the neighbourhood where female initiation rituals found place. Children who have learned to speak are normally not allowed to participate in funerals and female initiation rituals. However, they would often sit outside the houses where these ceremonies find place, listening and even dancing to the songs and rhythm of the drums. I often heard them sing funeral songs, and to the surprise and disbelief of adults, parts of the secret songs of initiation. I believe that the frequency of life cycle rituals and the sounding space that these have in the township indicate how important they are for both children and adult's everyday life experiences.

The rituals that take place at birth, menarche, and marriage are normally officiated by a senior female expert called *nacimbusa* in chiBemba and *anakungwi* or *alangizi* in chiChewa and chiNyanja. These are ritual experts and birth attendants who have knowledge of the spiritual world and are skilled in the use of herbal medication. In the beginning of life, a number of ritual activities take place. These are intended to safeguard the health of the mother and child and the baby as a biological and social being. The first ritual takes place when the pregnancy becomes visible. The *alangizi* says a few words of blessing and sprinkles herbal water on the pregnant belly. This is believed to “close the womb” and protect against miscarriages due to clandestine activities of others in the community who envy the pregnant woman. A special rite that marks the first pregnancy might also be held. This ritual, which is termed *chinamwali cha chisamba* (initiation for the first child), normally lasts one to three days. During these days the pregnant woman will be given lessons on the taboos related to pregnancy and how one should take care of a baby. However, most of the mothers I know said that they had simply learned about these from an older sister, aunt, or grandmother. Later in the pregnancy, the mother will drink medicated water to avoid complications during pregnancy or miscarriages due to the “mixing of bloods” caused by the parent's possible illicit relationships (see Article 2 and 4 for a discussion on how illicit relationships affects the health and well-being of the baby).

During the first months after being born, the mother and the baby will be secluded in the house of the maternal or paternal grandparents. As described in Article 1, a number of

minor rituals will take place, such as the burial or disposal of the umbilical cord, the shaving of the first hair, and the naming of the baby. When the baby is strong enough to (often rather shortly) sit without support, the parents will have a ritual intercourse and light a ceremonial fire in the house. The mother and the father will pass the baby to each other over the fire. The baby is now “warm” and “strong” enough to meet community members, and the parents can arrange for a ceremony, which people in Ng’ombe now commonly referred to by the English phrase “baby shower”.



*Figure 18. Baby receiving gifts before being brought out of the house, and then passed around for everyone to hold.*



*Figure 19. Baby being carried out by the alangizi, followed by the mother and her relatives, and the pastor’s wife at the very end.*

On the day of the baby shower, the *alangizi* and other senior members of the church and community will offer advice on how the parents should take care of the baby and also offer marital advice. This is followed up by prayers for the baby and the parents. As the baby is taken out of the house for the first time, members of the church, family, relatives, friends, and neighbours will wait for it on the outside. It will be welcomed with much ululation before it is passed around for everyone to hold. If the parents belong to a church congregation, the church choir will often take lead in singing, clapping, and dancing. Towards the end of the ceremony, the guests and the parents will share a meal. For parents in Ng'ombe, the coming out of the house ceremony is an expensive affair, and of this reason, many only have a small gathering with the closest friends and relatives, or only with members of the church. Most parents only arrange for a public baby shower for their first-born child (Articles 1, 2, and 3 offer more detailed descriptions of these rituals).

For the last decades, there has been a commercialisation of life cycle rituals in Zambia, and generally, these ceremonies have become flamboyant affairs, involving exchanges of gifts, expensive food and drinks, specialized and hired *alangizi's*, DJs, and ostentatious outfits (Lamba 2019, Tranberg Hansen 2000). Amongst Lusaka's high and middle class, the coming out of the house ceremony is also increasingly being replaced by large parties held at the babies' first birthday. Some babies in Ng'ombe are, however, still brought out of the house in other ways, often considered to be more "traditional". During my fieldwork, I participated in three such ceremonies, one in which the mother was Tonga and two in which the mothers were Nsenga. In the Tonga family, the baby was brought out of the house by her eight-year-old niece who carried her on the back. Outside the young girl symbolically dug a hole using a hoe, carried some firewood on her head, and used a pestle and mortar. Had the baby been a boy, the mother explained, a young boy would have brought him out of the house, and he would have used an axe to cut wood. Hoes and axes are basic agricultural tools used in swidden cultivation. They represent the division of labour between husband and wife and carry rich symbolic meanings. In the two other ceremonies that I participated in, the babies were brought out by the mother who, similarly to the Tonga girl, symbolically used a hoe to dig and a pestle to pound. In addition, drops of water were poured down the neck of the baby and allowed to trickle down the babies' spine, thus "watering" the "cold" and "dry" body of the baby (for a

comprehensive discussion of the hot/cold-complex, see for instance Kaspin 1996 and Rasing 2002, as well as Article 1 and 2). According to the *alangizi*, the symbolic work activities were done to introduce the baby to life outside the house, seated on the back of the working mother, and later, participating in these work activities themselves. As described in Article 1, the bringing out of the house ceremony is not only important for the status of the baby, but also for the parents, grandparents, as well as the older siblings.

When a girl has her first menstruation, a ritual termed *chinamwali* (chewa) or *chisungu* (bemba) will take place<sup>15</sup>. The length and complexity of the ritual varies, but according to most people that I spoke to in Ng'ombe, girls are secluded for approximately 2-7 days. Some families, and particularly the Chewa, also arrange for a group-based initiation where several girls are secluded and given lessons together. During seclusion, the girls receive lessons from the *alangizi*, as well as other older women in the form of songs, dance, and mimes. These lessons mainly concern topics related to adult and marital life and how to behave during menstruation. Girls are also given instructions on correct social behaviours and they are reminded of the importance of respecting their seniors, as well as other family- and community members. Lessons are also given on how to dress appropriately, and how girls need to make themselves presentable<sup>16</sup>. Girls who have undergone such rites are generally respected as they have acquired secret knowledge (*mwanmo*) and are therefore given a specific status. However, even though girls are told by the *alangizi* not to have sexual intercourse before marriage, many parents in Ng'ombe told me that they did not want their daughters to go through *chinamwali* as the “sex lessons” will make them “wanting to practise what they have learned”. Some of these girls therefore receive the secret knowledge related to married life during wedding (*ukwati*) ceremonies. Currently, so called “kitchen parties” are becoming increasingly popular, particularly amongst those belonging to the urban middle and higher classes. These are all-female parties where friends, family and relatives come together and help

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<sup>15</sup> Some of the girls and women in Ng'ombe that I know go through these rituals under the instruction of a ritual expert or an older family member. However, many do not go through them at all, or receive a very “simplified” version. In my experience, this is particularly the case for girls from families with few resources, or who do not have a network of family and relatives in Lusaka. During my stay in Ng'ombe I participated in three initiation rituals for girls, but I am unsure how widely these rites are practised in Ng'ombe.

the bride with utensils for her new home. During these ceremonies there are drums and dance, food, and drink. Lessons on married life will normally be held on the night before the kitchen party is held.

The human life cycle ends (or begins) with rituals for mourning, burial, and ritual cleansing. The death of a person is normally announced by a ceremonial fire, and for some, a particular beat of drums. As the news about the death spreads, family members and relatives who stay in other parts of Lusaka and Zambia are expected to start travelling for the funeral. Attending a funeral does not, however, require an invitation. As people arrive, they will briefly be told about the cause of death of the late person. Women will be seated inside the house and men on the outside. This house is locally known as the “funeral house”<sup>17</sup>. People mourn and cry together. The closest person(s) to the deceased will be supported and comforted by an older person, for instance, a neighbour or a church member who is not too close to the deceased to become upset. Songs of mourning will be sung, both stirring up emotions and comforting the bereaved.

Burials in Lusaka take place at Leopards Hills cemetery, and the group of mourners normally travels to the cemetery in an open truck. Songs of lament will be sung, letting everybody around know that another burial is about to take place. At the graveyard, there will be a body viewing before the body is taken to the gravesite. Here, a number of speeches will be held by representatives of the family, as well as from other communities that the deceased was a member of, such as the church and workplace. The closest family members will normally throw the first shovels of soil on the coffin, before other family members take over. After this, representatives of the family, friends and other communities will put flowers on the grave. Words of lament are uttered and songs are sung, creating a space for shared pain and mourning. Just consider the following song sung during the funeral of a one-year-old boy whose twin brother had passed away a few months before him.

So quiet, so quiet  
So quiet  
Can't talk

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<sup>17</sup> In Zambia, the dead person is not kept in the funeral house, but brought to the mortuary.

Father, my children  
They are so quiet  
Like they are sleeping

So quiet, so quiet  
So quiet  
Can't talk  
We used to be together  
Today I have remained alone

The funeral procession will then travel back to the funeral house. Before entering the house, mourners might ritually cleanse their hands in herbal water. A new fire will be made, and food will be prepared by an older woman for the chief mourner(s) to eat. A communal meal marks the end of the funeral, after which most return to their homes. After approximately three weeks of mourning, the widow or widower, and/or the parents of the late person should shave and bath in herbal water. Some will sprinkle herbal water in the house where the late person used to live, and all the belongings of the deceased are distributed to other people. In the days to come, meetings will be held concerning issues such as the inheritance of the late person's belonging, the caretaking of children, the support of the widow. Some will also find a child in the family who can inherit the name and spirit of the deceased. This marks an important transition in the lifecycle of both the living and the dead; the spirit of the dead now becomes a full member of the world of the dead, while the living is again incorporated in everyday life amongst the living (For a comprehensive discussion on death rituals in Zambia, see Jindra and Noret 2011 and Lamba 2019).

### **Babies and their vulnerability to witchcraft**

Lupton (1999) states that people's understandings of health risks and suffering are not only based on biology; they are also a cultural construct. In his studies of local conceptualizations of infants in Punjab in Pakistan, Qamar (2019) shows how unborn and new-born babies are particularly vulnerable to witchcraft and the evil eye, and childcare practises therefore include a wealth of protective and curative measures. From African contexts, researchers have described how states of social fragility tend to be expressed through idioms of witchcraft and spiritual vulnerability. Already in 1935, Richard

claimed that witchcraft and magic had “actually increased by contact with the white civilization, and the resultant economic and social changes in Northern Rhodesia” (1935: 460). And while the initiators of development projects in Africa assumed that economic growth and education would eliminate “superstitious” beliefs, anthropological research indicates the opposite. The penetration of western capitalism and neoliberalism, the growing gaps between the rich and the poor, and strained social relations have led to a proliferation of witchcraft-related rumours and accusations. This is particularly the case in urban townships where there has been an intensification of discourses connecting an occult dimension to the means of generating wealth (Comaroff and Comaroff 1999). “In the old days” a grandfather in Ng’ombe related “witches were few. And there was nothing like Satanism. It was the white people who introduced us to Satanism (...). These days people are poor and desperate. They want quick money and are easily recruited into the community of witches”.

In the urban areas of Zambia, networks of kinship are fractured, leading to new and increased states of poverty and vulnerability. Similar to the West African Beng described by Gottlieb (2004), mothers in Ng’ombe do not necessarily explain the illness and death of their babies in terms of social, political, and economic inequality, but attribute it to relational conflicts and the work of occult forces such as witches (*mfiti*) and Satanists. Witches are believed to be motivated by antisocial feelings, such as envy and hatred, and they are known for killing their neighbours, friends, and relatives without blinking an eye. I heard numerous stories in Ng’ombe of how they love feasting on humans and particularly babies, whose spiritual purity and vitality makes them both vulnerable and attractive. If the parents behave in immoral ways, or if there is disharmony in the family, the family’s and baby’s protective armour is believed to have weak spots where evil can enter. As a local *Ng’anga* explained; “Let’s say the father is drinking and chasing after women, or the mother is backbiting her in-laws, the door to their house will always be wide open, inviting the evil to enter”. Interpersonal conflicts and immorality manifest in the bodies of those involved, and parents are therefore encouraged to make the right moral choices and cultivate peaceful relationships both within the marriage and the family and with members of the rest of the community (for a comprehensive discussion on beliefs in

spiritual healing and witchcraft in the region, see Drews 1995, Mildnerová 2015 and Reynolds 1990).

Even if beliefs in witchcraft seem strange and exotic to an outsider, witchcraft is by no means extraordinary to people in Ng'ombe. It is part of their everyday life, providing plausible explanations to experiences of suffering. Similar to Azande of Sudan (Evans Prichard 1937), witchcraft can offer explanations to the classical question “why did this happened to this particular person at this particular time?” Even when the death of the baby is given a biomedical explanation, such as severe anaemia or pneumonia, witchcraft can provide people with answers to the question “why this particular illness?” and “why did death come so sudden?” When being acted upon by forces beyond control, witchdoctors can also offer answers, as well as ways to combat and retaliate.



## Chapter 6

# The culture of infancy in Zambia

### Concluding discussions

This thesis sheds light on how people in Ng'ombe think and give meaning to babies' bodies and sociality, and how these meanings are manifested in different ritual and caretaking practices. This is done through providing descriptions of everyday practices of childcare, which again are discussed in relation to wider cultural meanings of infancy and parenthood. An important aim has been to describe how meanings and practices of childcare are contested by individuals and groups, as well as in global discourses on childhoods. This thesis has therefore the potential to open for further thinking about universality and cultural diversity.

The aim of this chapter is to discuss some of the overarching themes, main points, and arguments of the articles presented in this thesis. In addition to elaborating on the thematical connection between the articles, I will discuss how this research contributes to new dimensions and perspectives on the lives and experiences of children and particularly the youngest ones. Some of the key concepts in my study are *growth, sociality, and personhood*. I begin by exploring the cultural meanings associated with these interconnected concepts.

### **Growth and sociality**

All the articles in this thesis explore how parents in Ng'ombe see their babies both as somatic and relational beings. Their small bodies develop, grow, and change rapidly. Similar to parents in other parts of the world, parents in Ng'ombe speak about the soft and flexible spine and neck of the baby, and their inability to intentionally move their arms and legs or focus their eyes. But as the days and weeks pass by, their spine will harden, their movements become more intentional, and they start focusing their eyes on their closest family members. Soon they will communicate through smiles and sounds, and they will be more awake and more attentive to people and the world they were born into. And similar to people all over the world, parents in Ng'ombe agree that for their

babies to grow well, they need care and protection from competent adults. As such, babies are not only born as embodied beings, but also as social beings. Before they are born, their bodies depend on and are interconnected with that of the mother. After it has been born, the boundaries between the baby and caretakers (and especially the mother) will continue to be blurred; through constant holding and breastfeeding shared space of interconnectedness are created (Schmied and Lupton 2001). It is in and through relationships that the baby shares with others that it comes into being and grows. There is therefore, as psychoanalyst Donald Winnicott famously said, “no such thing as a baby; there is a baby and someone”.

However, as anthropologists and cross-cultural psychologists who study childhood repeatedly claim, who that caretaker is and what it means to be a good caretaker, varies across cultures and populations. In his review of ethnographic studies on childhood, Robert LeVine writes,

The ethnography of childhood is based on the premise-constantly re-examined in empirical research- that the conditions and shape of childhood tend to vary in central tendency from one population to another, are sensitive to population-specific contexts, and are not comprehensible without detailed knowledge of the socially and culturally organized contexts that give them meaning (2007: 247).

By exploring how people in Ng’ombe think and give meanings to the bodies and sociality of babies, this thesis aims to substantiate cultural relativism of meanings associated with “good childhood” and “good parenthood”. Articles 1 and 2 provide in-depth explorations of how parents in Ng’ombe think about the growth and sociality of babies, including their needs and wishes. Both articles reflect what I repeatedly heard caretakers in Ng’ombe describe; how babies and young children constantly change and grow, and how they gradually achieve new motor skills and other abilities. Parents in Ng’ombe focus on the same developmental milestones as parents in many western contexts do; the ability to control and keep the head steady, the first smile, sitting, crawling, standing, walking, talking, and reasoning. And just like most European and Northern American parents, parents in Ng’ombe are anxious when their babies and young children do not develop in

the same phase as other children. They discuss and evaluate the borders of “normality”; what is healthy and unhealthy, on average and delayed, typical and atypical.

However, the reasons for highlining these milestones were sometimes dissimilar from the American and European contexts where most research on child development has been conducted. This supports Gottlieb’s claim that “what we take for granted as naturally grounded developmental milestone is significantly shaped by cultural emphasis” (2004: 220). Culture organizes the baby’s development and upbringing in unique ways, and significant developmental milestones must therefore be seen as both biological and cultural constructions (Lancy 1996).

The first and second article describe how babies are seen to be born with an ancestral guardian spirit, and until the umbilical cord stub falls off, babies belong more to the world of the dead than to the world of the living. The first weeks after being born, they will spend in seclusion with the mother. During these weeks, the falling of the umbilical cord is a significant milestone as this marks that the mother can start bringing her baby out of the house for short periods. From now on, the baby can gradually get used to the world outside. The falling of the umbilical cord is followed by minor rituals such as the shaving of the first hair and naming. From now on, particular attention is paid to prolonged eye contact, the first sociable smile, and then, finally, the ability to sit (even shortly) without support. As described in Articles 1, 2 and 3 sitting signifies that the baby is ready to become a member of the wider community, and, as such, a social person.

Studying everyday life and the practices of childcare, and the implicit, taken-for-granted meanings and knowledges they hold, reveals a great deal about what it means to be a child and a parent, and about what it means to be a human being in general. In addition to demonstrating that understandings and practices of child growth and care vary from culture to culture, this thesis also calls into question the universality of some of the main concepts developed in the multidisciplinary field of child research. In particular, the dualistic image of children as being *or* becoming, resilient *or* vulnerable is questioned. Article 2 and 4 describe how, as relational and spiritual beings, babies are seen to be directly affected by the parent’s immoral behaviours, and are considered to deliberately act upon these. As such, they fit perfectly into the analytical category of being “active

agents”. However, their agency does not merely reflect independency and resilience, but first and foremost includes states of dependency and vulnerability. In Ng’ombe, as in many other contexts, notions of human independency do not make much sense. Neither children nor adults can be studied “in their own right”. Article 4 also sheds light on aspects of children’s agencies, interdependency, and vulnerability. Amongst others, it demonstrates how the experiences, understandings, and expressions of children are embedded in the wider contexts of spatial and socioeconomical differences, ritual practices, and cultural norms. Moreover, it shows how decisions and acts made by older children that easily fall into the category of “agency”, such as the bereaved older sister who decided to quit school, first and foremost reflect states of vulnerability and dependency. To summarize, these articles bring attention to how local understandings of childhood are interlinked with cultural meanings attributed to growth and sociality.

### **Persons in the making**

In Ng’ombe, babies are, to use Turner’s (1967) classification, considered liminal beings, in between the world of the dead and the world of the living. Newly born babies are spiritual beings who gradually develop into social persons. At death, humans return to existence as spiritual beings. Mapopa Mtonga, who has written extensively on children’s games in Zambia, writes

Since the initial concept of childbirth is associated with re-incarnation, this presupposes that a child is more than just a biological creature. It is an embodiment of a spirit that once inhabited another living body and despite the smallness and fragile nature of its present body, the child is supposed to represent a being who is ‘pure’, ‘innocent’ and more advanced in spiritual wisdom than an adult person. (2012, 15)

Beliefs in reincarnation and the cyclical nature of life challenge European and North American understandings that life has a clear beginning and end, and that it moves in trajectory manner (Gupta 2002, Gottlieb 2004). Contrary to many people in Europe and America, people in Ng’ombe do not consider human existence to start in the dark and silent mother’s womb and end with death (Gottlieb 2004). Babies are not seen to be born as a “tabula rasa”; a blank tablet in which life experience and physical maturity drive and steer the child’s development forward and that this development has to be promoted in

particular ways. Rather the opposite, people generally believe that when a baby is born, he or she is born with the personality and knowledge of someone who once lived. On their arrival in this world, they are still in close rapport with the cold world of the spirits (for similar observation, see Gottlieb 2004 and Reynolds 1990).

Moreover, people in Ng'ombe do not see personhood as fixed and defined at birth; birth is just part of the process of becoming a social person. The baby "is" (a human), but at the same time it is in a state of "becoming", a continuous process that depends on the ritual and nurturing acts of others. Throughout life, people become part of new relations, achieve new roles and new statuses, and are given new rights and responsibilities towards others. Both children and adults experience the double movement of being and becoming. This suggests that understanding personhood in communities such as Ng'ombe requires a flexible approach that embraces aspects of completion and process; of being fully humans from birth, and at the same time being socially produced and processual.

These understandings of what it means to be a human being and a social person have overarching implications for how people in Ng'ombe understand babies' development and sociality, and how they see themselves as parents. Babies in Ng'ombe are not seen as biological bundles (Gottlieb 2000) whose development must be intentionally shaped. This contrasts with conventional thinking on child development in many western communities where parents take on, and are expected to take on, the main responsibility for children's intellectual development. As such, parenting becomes a demanding and risky enterprise where children's health, well-being, and development is the result of individual choices on the part of the parents, and particularly mothers (LeVine and LeVine 2016, Lupton 2011).

Parents in western countries are encouraged to stimulate their babies' development, and at the same time they are also warned about the dangers of "overstimulating" them (see for instance Acredolo and Goodwyn, 2011). Anthropologists such as Trevathan and McKenna (1994) offer an interesting approach to this problem, describing how American parents leave their babies to be stimulated by toys (such as baby gym), or in front of screens that show "educational" shows, such as the famous "baby Einstein" show. When playtime is over, the baby is put to sleep in a separate room. And most babies also spend

the entire night sleeping alone. These practices leave, Trevathan and McKenna warn, alarmingly little room for sensory contact, and even though babies remain overstimulated in the short run, they run the risk of being under-stimulated or even chronically neglected in the long run.

Trevathan and McKenna's description of American sleeping patterns stands in stark contrast to African contexts, where babies spend a lot of time sleeping on the backs of their mothers, sharing their movements, continuously listening to their heartbeat, breathing, and voices. In Ng'ombe, parents do not consider it to be their task to "stimulate" the baby's intellectual capabilities or to "educate" their baby. As described in Article 1, people in Ng'ombe think that the baby is born with all the capacities needed to grow and become a good member of the community. During the first weeks of the baby's life, these abilities are cultivated and made relevant through the relationships that the baby shares with the mother, and later also the father (this is most clearly demonstrated in the *kutenga mwana* ceremony). As the baby becomes a social person, her or his mental and physical skills will develop as she or he participates in a range of everyday life activities. From a young age, children are expected to participate and contribute to both work and play activities in the community and they will be praised for being willing and capable of taking on social responsibilities. Lazy or non-compliant children, however, can expect to be corrected not only by the parents, but by almost anyone in the community. According to this understanding, people in Ng'ombe perceive a child more as 'a person acting within a system of social relations', rather than as a target for direct stimulation and manipulation (Serpell 1996:133).

### **Fragile lives**

This thesis agrees with Mapopa Mtonga's observation that the Chewa and Tumbuka generally believe that "...newly born children return to where they came from sooner than they emerge into this world" (2012: 43). The caretakers' concern for the baby's growth, development and well-being is interlinked with the omnipresent fear that the baby might never become strong enough to fully enter the world of the living. In Ng'ombe, the fragility of life is manifested in the ways that people care for their babies, the ways they talk about them, and in rituals that mark the different phases of their development. It is

even manifested in the names that babies are given; Chifwenge (let it die), Lyaniso (eat again), Malalo (graveyard), Chakumanda (it belongs to the grave), Chakuwa (it is dead) Chiponde (funeral), Chayambaso (it has started again) and many more<sup>18</sup>. It is manifested in the numerous funerals that take place in the community, and in the ways in which people conceptualize and express their loss and bereavement. “The earth does not get fat”<sup>19</sup> a young father in Ng’ombe who had lost his wife and their only child related. He was quoting a popular Ngoni lament that continues “it keeps swallowing our men and women”. For most parents in Ng’ombe, their grief is not only about the baby who passed away. Their grief holds experiences of poverty, of being unable to provide their babies with sufficient food and necessary medication. Of not being able to care for their babies like parents in the wealthy areas of Lusaka do. As stated in Article 3, feelings of being inadequate, and of having failed as caretakers, can deepen the parents’ experiences of loss and grief.

During two years of fieldwork, I came to learn that the stoicism and silence that people handle difficult emotions with are complex and that they are part of a wider cultural trajectory that shows itself in a diversity of acts and discourses. Rather than providing a narrow focus on emotional experiences and expressions, I have aimed to approach the topic broadly and from diverse angles. This includes an exploration of how the silence of the bereaved reflects cultural understandings of what a person is, and of mental health and well-being, as well as concepts of human development and spirituality. While Article 3 mainly focuses on how maternal grief is interpreted and handled, Chapter 4 includes an exploration of children’s experiences and expressions of bereavement. Both articles explore how expressions of bereavement, such as verbal expressions, crying, and silence are guided by cultural norms and understandings of how loss should be handled in the best way. They describe how silence and acts of avoidance that at times surround death are seen as regulating the emotional states of both bereaved mothers and children,

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<sup>18</sup> These names often refer to the parent’s previous experiences with the deaths of their children. Some of them, such as Chakumanda and Cifwenge, mock and taunt death. This is also the case of names such as Lyaniso that refers to previous deaths suspected to be caused by witches (for a comprehensive discussion of Zambian names, see Chola et al. 2019 and Tembo 2006)

<sup>19</sup> The refrain, ‘the earth does not get fat’, is a reference to the way the earth is always receiving the dead, yet is never satisfied.

protecting their mental health and well-being, making it easier for them to focus on the here and now and to continue in life. In the case of mothers, it also relates to states of spiritual and social personhood, and how babies and their mothers can make their way back to the community they came from; into, or out of, life. In these contexts, silence is not a form of passive denial, but a deliberate way of protecting oneself and others from the potential devastating effects of grief. Moreover, Article 3 describes how silence is highly communicative, creating a space for shared meanings and shared experiences.

I will end this part with a reflection on the importance of understanding other people's experiences of loss and bereavement. How people in Ng'ombe experience and deal with infancy loss might seem irrelevant for someone living in Europe or America. But, if we see other people's experiences as irrelevant, could it also be that we miss out on learning something? I believe that insight in how mothers in places such as Ng'ombe, Guinea-Bissau (Einarsdóttir 2003), or Brazil (Scheper-Hughes 1993) struggle to keep their babies alive and how they mourn not only helps us understand others, but also ourselves. Of course, we can't expect our experiences and feelings to be exactly the same as their experiences and feelings. But we can expect that there are elements in their grief that can remind us of our grief. That their experiences, in some way or another, resonate with our experiences. Realizing that our lives resonate with the lives of "the other" who seems so distant and different from us has powerful implications (Wikan 1992, 2012). It might contribute to blurring the contrasts between "us" and "them", between the known and unknown. Evoking shared human existence stands out to be particularly important in an increasingly restless world where people grapple with the fear of immigration and terrorism. Moreover, studies of how other people deal with loss can help us realize that experiences of bereavement "cannot be generalized, neither across nor within communities" (Smørholm 2016a: 333). This calls attention to the dangers of universal and narrow definitions of people's emotional lives, where peoples' bereavement can be evaluated along lines of what is "healthy" and "normal" and "unhealthy" and "abnormal". This implies in my opinion that much can be gained from being respectful of and open to the experiences of "others". I fully agree with Paul Rosenblatt observation that "one needs to be humble about the validity and value of what one thinks one knows and to be open



to the realities, language, beliefs, knowledge, and experiences of a person one wants to help. To be an effective helper, one must be a learner” (2017: 620).

### **Challenging concepts of “normality”; concluding reflections**

One of the disciplinary strengths of anthropology is that it “encompasses the struggle for social justice and criticism of a status quo that favors some and marginalizes others” (Besnier and Morales 2018: 165). By participating in people’s lives for a longer period, trying to see the world from his or her point of view, we are deeply committed to putting understanding before judgement. My purpose in this thesis has never been to argue that some folk models are “better” or more efficient than others. My main aim has been to provide an example of cultural variation, and based on this, warn against the assumption that one model of development, or one model of “grief work”, has universal validity. As pointed out by Jackson (2004), instead of trying to impose *our* solutions on *their* problems, we should try to be more open to others and acknowledge that we also have something to learn.

In her thought-provoking investigation of cultural and psychological constructions on mothering, Nancy Scheper-Hughes writes “Ideally, anthropology should try to liberate truth from its Western cultural presuppositions” (1992: 24). If the intention is to improve the lives of children and adults, I strongly believe that we must reflect on the knowledge and assumptions that our understanding of children and parents is based on. As stated in the theoretical chapter, this thesis is inspired by Clifford Geertz’s (1975) argument that what seems to be “normal”, “natural”, “common sense” and “self-evident” for people in one culture might be far from “normal” and “self-evident” for people in other cultures. Geertz’s notion of “common-sense” echoes the phenomenological theories of Alfred Schutz (1962). According to him

The observational field of the social scientist- social reality- has a specific meaning and relevance structure for the human beings living, acting, and thinking within it. By a series of common-sense constructs, they have pre-selected and pre-interpreted this world which they experience as the reality of their daily life. (1962:59)

These constructs are often organized in dual distinctions produce and reproduce a world that seems coherent, common, or common-sense (Bourdieu 1989). Examples can be

children versus adults, femininity versus masculinity, them versus us, poor versus rich, body versus spirit, normal versus abnormal, resilient versus vulnerable, healthy versus unhealthy.

Bourdieu, Geertz, and Schutz have all described how our scientific knowledge must be seen as “construct of constructs” and should therefore be understood as part of a particular social reality. Moreover, they have argued that our construction of valuable knowledge cannot be separated from relations of power. Common sense often refers to conventional wisdom, clear thinking and rationality. Other ways of seeing things and structuring the world are easily evaluated as a deviation from the common sense and the legitimate ways of seeing the world. What is seen to be “normal” and how things “ought to be” therefore becomes normative for evaluating the behaviour and expressions of other people. There will, as Bourdieu (1989, 1995) argues, always be struggles related to power. However, the power to impose upon other minds a vision or idea’ depends on the social authority of the group, and groups that are not in power are rarely listened to if they do not share the same understanding and frame of reference as the group in power. Relations of power therefore tend to reproduce themselves even when being challenged. With this in mind, notions of “best practices” of childcare and development become highly problematic, and so do universal and timeless conclusions on human nature and “needs”. Such research inspires a diversity of policies and international programs that directly affect the lives and understandings of people who are not in possession of equal social authority.

To illustrate this, I would like to mention a relevant example. Focusing on child development, the World Health Organization (WHO) has launched a series in a prestigious medical journal entitled “Advancing Early Childhood Development: From Science to Scale”. The series states that 43 % of all children in middle- and lower-income countries risk not reaching their “full developmental potential”. One of the main reasons for this can be found in “the failure to apply emerging scientific knowledge on nurturing care to shape young children’s development” (Britto 2017:91). However, if programs based on scientific knowledge were to be successfully implemented, children’s health and well-being will be improved, and they will have an increased “ability to learn and earn” (p. 91). These ideas on child development are implemented in several NGOs in African

and Asian contexts and aim to provide children with, as the mantras goes, the “right to reach their full developmental potential” (See for instance UNICEF, early child development and WHO, child health). Many interventions aim to foster “positive parenting practices”, teaching caregivers about the “developmental importance of caregiver- child interactions, and coach caregivers to practice responsive stimulation with their young children” (Pitchik et al. 2020: 93).

The repeated message of many of these programs is that poor people in poor communities need help from the international community who will, through donor money and scientific knowledge, promote the development of children, and ultimately, of the country. As stated by Penn, these programs deliver rather “upbeat promises about what they can provide and what a difference their effort will make” (2019: 3, for further discussions, see Kjørholt and Penn 2019 and Morelli et al. 2018). There is a danger that the introduction of standards of parental care might be based on the assumption that caretaking practices of people in poorer countries with high infant mortality rates put babies at psychological or physical risk. Or even worse, that poor mothers do not fight for the lives of their endangered babies and thus (more or less intentionally) neglect their needs (LeVine & LeVine 2016: 47, Einarsdóttir 2004).

This thesis focused on how mothers in Ng’ombe fight for the life of their babies, and how they grieve the loss of their babies. Most research and NGOs assume that psychological standards for “healthy” and “unhealthy” grieving are universal (From Africa, see for instance Daniel 2005a, 2005b, Denis 2008, Fox 2001, Howard et al. 2006, Makame et al. 2002, Marcus 1999, Meyer et al. 2018, Sengendo and Nambi 1997, Sisay et al. 2014, Wood et al. 2006). Rosenblatt writes that this “generalizing approach to grief allows experts to make strong statements about what is healthy for grieving humans seemingly in any culture and any historical era” (2020: 37). In Ng’ombe, there has been a trickle-down effect of mainstream psychological concepts and perceptions of grief that focus on the importance of expressing bereavement through crying and talking about the dead. I often heard local counsellors trained by American and European based NGOs expressing embarrassment when asked about the more “traditional” ways of handling the bereavement of mothers and children. Several counsellors claimed that not being allowed

to talk about the deceased and not to cry can be harmful to the emotional health of the bereaved, and that they would encourage them to talk openly about their loss. One of the local counsellors stated that speaking and crying about a loss will allow the mourners to go through the “*normal* stages of bereavement”.

Different governmental- and non-governmental organizations now encourage that people change the ways in which they grieve. In the case of orphaned children, this is exemplified in projects like the “memory box” where the dying parent is encouraged to put material objects, pictures and written messages and stories in a box. The box will later be given to the children as a reminder of their late parent. The aim is that the box of memories will prevent the child from slipping into “the isolation” that silence is assumed to create, making children less afraid to talk to their caregivers about their loss and longings, and caregivers less hesitant to talk with children about their loss (Denis 2008:1). This is believed to enhance the resilience and agency of vulnerable children, allowing them to take control over their own history. The program may ultimately assist children to occupy a position of greater authority towards the adults in the community, and “resume personal growth” and again, “develop to their *full potential*” [emphasis added] (Denis 2008: 2/3, see also van der Heijden and Swartz’s (2010) critical discussion on the *Vhutshilo* program).

The structural violence imposed on the poor makes it almost impossible for them to control the frame of interpretation imposed on their actions by others (Wikan 1976, Farmer 2005). Arthur Kleinman, who is both a trained psychologist and an anthropologist, questions the rather narrow definition of “normality” of bereavement that most psychologists hold, which mainly focuses on “correct” forms of expression and how many months it has lasted. He asks; “how does this narrow definition of normality influence our subjective and interpersonal experience of grieving? What does it mean to the sufferers, to their family members, and to society to convert a moral problem (grief) into a medical one?” (1999: 394). I believe that the same question can be asked about narrow definitions of “normality” when it comes to child development and caretaking practices. How do these influence people’s understanding of their abilities to care for and secure the development and well-being of their babies and children? To answer these

complex questions, more cross-cultural research is needed on the ways in which people think about children and their development and the ways they think about child loss and bereavement. We should continue questioning some of the assumptions that we take for granted and expose how these might reproduce imbalances of power. And last, but not least, we should look critically at the political economy and interests that lie behind international policies, programs, and interventions. This includes donor money and institutional systems where human nature and emotions are defined as areas for “potential improvement”.



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# PART III

## **Presentation of the Articles**



Article 1

# Persons in the Making

## Perceptions of the Beginning of Life in a Zambian Community

A revised version of this article will be published in *Ethos, Journal of the Society for Psychological Anthropology*



Journal of the Society for Psychological Anthropology

**Regular Research Reports**

**When the Ghosts Live in the Nursery: Postpartum Depression and the Grandmother-Mother-Baby Triad in Luzhou, China** 149  
Katherine A. Mason

**Natq Arrives at the Clinic: How Druze Therapists Deal with the Cultural Phenomenon of Remembering and Talking about Previous Incarnation among the Druze in Israel** 171  
Malia Haseer and Aviva Shekano

**Envious Ethnography and the Ethnography of Envy in Anthropology's "Orient": Towards A Theory of Envy** 192  
Geoffrey Hughes

**Managing the risks of schooling, securing middle-class belonging: Russian, Palestinian and Jewish mothers in Israel** 212  
Deborah Golden, Lauren Erdreich, and Sveta Roberman

**The Other Within Oneself: Understanding Care for a Family Member with Early-Onset Dementia through the Lends of Dividuality** 231  
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**The Origins of Divergent and Oscillating Modes of Religiosity** 250  
Peter Mulholland and Carlos Salazar

This article is not included



Article 2

## **Pure as the angels, wise as the dead**

**Perceptions of infant's agency in a Zambian community.**

Published in a special issue of *Childhood, Beyond Pluralizing African Childhoods*.

Volume 23, Number 3, 2016







# Child hood

A journal  
of global  
child  
research

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Special issue: Beyond pluralizing African childhoods

Volume 23  
Number 3 August 2016  
ISSN 0907-5682







# Pure as the angels, wise as the dead: Perceptions of infants' agency in a Zambian community

Childhood  
2016, Vol. 23(3) 348–361  
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sagepub.co.uk/journalsPermissions.nav  
DOI: 10.1177/0907568216644032  
chd.sagepub.com  


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## Abstract

This article is focused on concepts of agency in relation to unborn and newly born babies in a Zambian community. Through an exploration of local perceptions of unborn and newly born babies' spirituality and personhood, as well as their developing bodies, I problematize dominating theoretical definitions of children's agency. The article calls for more relational assessments of children's agencies that not only focus on children as independent social actors in their own right but also integrate experiences of dependency and vulnerability.

## Keywords

Agency, infancy, personhood, spirituality, vulnerability, Zambia

Babies are gifts from God.  
They are pure as a white dove,  
Like a white lamb on the biblical herd marks.  
They are pure as the angels.  
Without sin, they know no evil  
They understand more than we can comprehend.  
They have the wisdom of the dead.

Mrs Mwembe (70 years, traditional birth attendant [*azamba*])

Mrs Mwembe is a well-reputed traditional birth attendant in Ng'ombe Township in Zambia. Her poetic statement describes babies as pure beings with insights and wisdom. I find her perceptions of babies to be representative of how people in Ng'ombe

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understand their nature. Even before they are born, babies are generally seen as spiritual and social beings, both products of and producing relations with others. According to local perceptions, they are competent agents who deliberately influence their own and other people's lives. However, as often argued (e.g. Bluebond-Langner and Korbin, 2007; Kjørholt, 2004; Lee, 1998; Prout and James, 1997), the nature of this agency is complex and does not necessarily manifest as acts of independency.

The recognition of children's agency and competence has been a cornerstone in the research paradigm of childhood studies. Originally a reaction to developmental theories that focused on children's vulnerability and dependency, notions of agency have been crucial to understanding how children contribute to their own welfare and that of others. However, the overwhelming focus on children's agency has recently been problematized by several researchers (e.g. Abebe and Kjørholt, 2009; Kjørholt, 2004, 2005; Lee, 1998). It is argued that the construction of children as competent agents is based on dichotomous either/or constructions: as beings *or* becomings, as competent *or* incompetent, as independent *or* dependent, as resilient *or* vulnerable. These either/or constructions have been developed in particular historical, economical and sociocultural contexts and represent oversimplified and essentialistic constructions of children.

In this article, I aim to contribute to this ongoing discussion within childhood studies that problematizes concepts of children's 'agency', 'independence' and 'competence' in cross-cultural contexts. It focuses, however, on a period of life that has not received much attention from researchers – the very beginning of life. Babies' right to be studied by social scientists is now being claimed in relation to their capacity of agency – how they actively and deliberately influence the lifeworld of others (Gottlieb, 2004; Wayland, 2004). Through a description of how people in Ng'ombe understand and interpret unborn and newly born babies' emerging and developing bodies, personhood and agencies, I aim to reflect on the challenges of defining children's agency as 'the capacity of *individuals* to act *independently*' (James and James, 2012: 3; emphasis added). I join several other researchers within the field of childhood studies who emphasize that instead of stressing children's autonomy and independence, we have to see how they, as all other human beings, are part of communities and nets of relations with others. Researchers have brought attention to how the focus on children's agency within the field of childhood studies reflects particular perceptions of personhood that tend to favour 'mature', 'finished', 'completed', 'self-governed' and 'independent' notions of the person (Kjørholt, 2004; Lee, 1998). These notions stand in stark contrast to the ways in which people in Ng'ombe understand the personhood of babies. Here, personhood is not seen as an autonomous capacity given at birth, but as existing in relations and interactions with others, as fluent and processual rather than finished and completed.

The notions of agency and personhood of babies are highly ambiguous. They are vulnerable beings, totally dependent on adults for their survival. Moreover, they are, to use Turner's (1987) classification, in states of being 'in between and betwixt' – not yet full members of the living community, but on their way to become social persons. States of ambiguity tend to stimulate processes of meaning-making, and in Levi-Strauss' (1966) words, babies are 'good to think with' both for those we study and for the researcher. The

study of infants may therefore, as Gottlieb (2000) suggests, help us to achieve a more balanced assessment of structure and agency in childhood studies.

In the following, I will elaborate on Mrs Mwembe's perceptions of babies as pure and wise by presenting two cases of complicated deliveries and one case where a newborn baby became sick. According to my experience, these cases are not unique, but represent the knowledge and experiences of many in Ng'ombe. It shows how relative states of agency and vulnerability are manifested and expressed in the social relations of which they are part. These cases will illuminate how interpretations of the babies' wishes and actions as evidencing their agency as individual and independent human beings are highly problematic. I will turn to this discussion after a presentation of the theoretical and methodological framework.

### **Theoretical framework**

By documenting the various contexts in which children live, anthropologists tend to resist fixed and universal definitions of children and childhoods. It has been the hallmark of anthropological work to contextualize perceptions of children's development as well as describing how relative states of agency and vulnerability manifest in time and place (Bluebond-Langner and Korbin, 2007; LeVine, 2007).<sup>1</sup> A number of studies, particularly in psychology and psychological anthropology, show how parents' perceptions about their babies express, produce and reproduce culture and influence the babies' physical, emotional and cognitive development. LeVine et al. (1994) have shown how cultural values and ideal prototypes of personal success guide how parents treat their children. In their study of babies in Uganda, Kilbride and Kilbride (1975) show how the ability to be socially involved is highly valued among the Baganda. As sitting allows the baby to take a greater part in social life, parents start encouraging their babies starting as early as 1–3 months. The work of LeVine and Kilbride are excellent examples of how local perceptions of the nature of babies inform the ways in which parents care for them. There has also been a growing interest on how structures of poverty and violence influence the choices parents make in relation to infants' health and well-being and how these choices impact infant survival. In her controversial work on infant mortality, Scheper-Hughes (1992) describes how mothers in a poor township in Brazil disfavour weak and sick babies, neglecting their needs for food and care. Her work shows how poverty impacts mothers' perceptions of their babies and themselves as mothers.

Most of these works focus on how mothers and other caretakers influence the lives of babies, yet very few studies explore how unborn and newly born babies influence the lives of adults. However, a few recent anthropological works have paid attention to babies' agency. In her study of babies in Brazil, Wayland (2004) shows how even newly born babies in Brazil are considered to take an active part in the decision-making process of breast-feeding where both mothers and babies decide whether or not to continue feeding. In her rich and nuanced description of the lives of babies among the Beng of West Africa, Gottlieb (2004) describes how babies are seen as reincarnated ancestors and therefore viewed as 'wistful' beings who may decide to return to the world they come from even before they were born. If a woman experiences difficulties in delivery, she has to seek help from diviners who are able to communicate with spirits. The same

diviner may also communicate with the spirit of a newborn baby who seems unhappy. This leads Gottlieb to conclude that babies are ‘accorded a high level of agency in this indigenous model. Their agency is seen not only as biological but also as intellectual’ (Gottlieb, 1998: 131). The West-African Papel also believe that babies are born with the soul of an ancestor (Einarsdottir, 2004). They are considered human from the moment they are born, with a particular personhood that has been inherited. Illnesses and deaths of babies are often assumed to be the ancestor’s punishment for the wrongdoings of the parents or other community members. Indeed, ‘beliefs in reincarnation clearly mark conceptualizations about children and their humanness, personality and agency’ (Einarsdottir, 2004: 103).

While babies have just recently been conceptualized as agents, older children’s agency has been comprehensibly described in various cultural contexts and situations. What is less described, however, is the nature of this agency: how it is defined and given meaning and how it relates to other peoples’ actions and agencies. Several researchers have, therefore, called for more contextualized descriptions of children’s lives and agencies (Kjørholt, 2004, 2005; Prout, 2011; Tisdall and Punch, 2012). Few have discussed the challenges related to the use of concepts of agency in studies of babies as it is just emerging in the field. There are, however, some studies – particularly from feminist and medical anthropology – that show how the concepts and meanings that we tend to take for granted are subject to cultural variation. These studies revealed how technical and medical devices, such as ultrasound scans, have been important in defining the unborn baby as an independent actor (Casper, 1994; Williams, 2005). There are also some relevant anthropological works on how practices and meanings of childbirth vary cross-culturally (Davis-Floyd and Sargent, 1997; Jordan, 1993) and how unborn and newly born babies in diverse cultures are gradually brought into existence and significance through diverse ritual and social acts such as baptism, naming and exchanges of body fluids and food between the baby and other community members (Carsten, 1995; Conklin and Morgan, 1996; Howell, 2015; James, 2000; Morgan, 1998, 1989). These studies explore concepts of unborn and newly born babies’ personhood, which I find useful in relation to concepts of agency. In the anthropological literature, personhood is often described as ‘partial’, in constant states of becoming, and not autonomous or self-contained (Strathern, 1988). These conceptualizations of babies allow us to see how becoming a child happens in relation to others, gradually unfolding and constantly produced and reproduced in social relations (Carsten, 1995; Conklin and Morgan, 1996; Lambek and Strathern, 1998; Montgomery, 2009).

## Methods and setting

This article is based on 2 years of ethnographic work that was carried out in 2004/2005 and 2009/2010<sup>2</sup>. It was conducted in the oldest part of Ng’ombe Township, where the majority of the population belongs to ethno-linguistic groups from Zambia’s Eastern Province, in particular, Chewa and Tumbuka. Old Ng’ombe is a high-density squatter settlement. Most of the houses are relatively small (5–20 m<sup>2</sup>) with two rooms, with no electricity or running water, and often built with cement, bricks and a metal roof sheet. The majority of these houses accommodate small nuclear families, with some

accommodating extended families. A newly born baby spends most of its time in close physical contact with the mother, lying on the mother's lap or sleeping next to her. Mothers take great care to keep their babies fed, clean and groomed; feeding is on demand, and during the hot season, the baby gets a bath twice a day. A baby will not be left to cry on its own. Most mothers know how vulnerable their newborn baby is and do everything in their power to secure its health and well-being.

In total, 29 babies were included in my fieldwork. Among these, 11 were followed up on a day-to-day basis. I also spent several days at the clinic, both accompanying mothers and their babies, as well as participating in activities arranged by the clinic such as the child's health week and prenatal care meetings. I came to know a number of traditional birth attendants, herbalists and spiritualists who also shared their extensive knowledge of unborn and newly born babies. Throughout fieldwork, I would repeatedly share and discuss the purpose of my research, what I learned and the methods I used.<sup>3</sup> Although I assured those who participated in the research that their anonymity and confidentiality would be kept, many insisted that I use their full name. Particularly, birth attendants, spiritualists and herbalists were proud of their in-depth knowledge of babies. In this article, the names of the mothers are pseudonyms.

### **The baby who moved upwards**

Misozi, a mother of four, recognized the signs of the onset of labour from previous deliveries and asked me to accompany her to the clinic. The whole night she felt the pain of contractions, but in the early morning she had not given birth. The pain was gone, and she decided to go home. Almost 2 weeks later, she had still not given birth. When I asked her what she thought might have caused the complications, she explained that she suspected her husband to have been unfaithful as she had heard rumours about him having had a mistress during her pregnancy. In addition, she and her husband had been struggling with marital problems, and she was concerned that her delayed delivery was related to their arguments. 'Maybe we are the ones who have made the baby upset', she said quietly. A few days later Misozi went to a well-known spiritualist in the neighbourhood who could communicate with the unborn baby. With one hand on her pregnant belly and the other hand holding a Christian cross, the spiritualist spoke with the baby through 'the language of the spirits', which Misozi and I could not understand. After completing the session, he explained that the baby seemed to be moving upwards, although it was time for it to move downwards. He advised Misozi to make peace with her husband so that the baby could feel welcome in their family. If the problems persisted, he advised Misozi to bring her husband along at the next visit. He then prayed intensively, asking for protection. Misozi gave birth to a healthy baby girl the night after visiting the herbalist.

### **The baby who needed an apology**

Mrs Banda, who is senior birth attendant, told me that a few days ago, she was woken up in the middle of the night by one of her neighbours who asked her to assist her daughter who was in labour. She found the delivering mother in severe pain, but despite the intensity and frequency of the contractions, the baby did not seem to move down the birth



channel. At daybreak, there was no progress, and they were both tired. At this point, the mother turned to her and said, ‘*mbuya* (grandmother, respect form) with this pregnancy, I have been with another man’. ‘I was angry with her for not telling me this earlier on’, Mrs Banda remembered, ‘but what could I do? I had to help her’. According to her, she had asked the mother to apologize to the baby and reveal the name of the man she had been with; ‘a baby cannot accept such behaviour. If she had not apologized, both she and the baby might have died in labour’. Four hours after apologizing and drinking Mrs Banda’s herbal water to speed the delivery, the mother gave birth to a small and weak baby girl.

### **The baby who received a bad visitor**

Mwapen (2 months old) had been coughing for several weeks, and he seemed to have problems breathing. His mother, Given, had taken him to the clinic where she was told it was a respiratory infection. The medication seemed to work. However, Given’s grandmother advised her to protect the baby from future infections by making small incisions on his chest and ribs and applying some herbal ashes in the wounds. This was supposed to make Mwapen’s chest strong. Given explained that there could have been many reasons for Mwapen to get sick; it could, for instance, have been the dusty, warm wind in Ng’ombe. But she also reasoned that there could be other causes. About the time Mwapen fell sick, she had a visit from a cousin who had a bad reputation for heavy drinking, fighting with the neighbours and cheating on her husband. She remembered how Mwapen cried when she was holding him, even continuing crying after she had left. ‘Babies like Mwapen have a strong spirit’, she concluded. ‘If a bad person like that is holding them, they will see all the bad doings of that person. They will feel upset and sad, and eventually fall sick’. According to her, if a baby is repeatedly exposed to the bad deeds of others, it may initially choose to go back to where it came from: ‘it will think “no this world is not a good place, let me rather go back”’.

### **Pure as the angels, with the wisdom of the dead**

Misozi and Mrs Banda seem to attribute the unborn babies with a great deal of agency in their will to be born or remain in the womb. Similarly, Given attributed her newly born son with the capacity to communicate his disapproval for certain misbehaviour and to leave this world if he did not find it hospitable. However, the unborn baby’s capacity to make existential choices and reprimand the infidelity and fighting of others is not considered a capacity of the autonomous baby. In Ng’ombe, agency is a capacity that the baby has *by virtue* of being a spiritual being that is close to, and part of, the world of God and the ancestors. A mother in Ng’ombe knows that the baby has become a spiritual being when she can feel its first kicks. It will then move from being a clot of blood termed *ima* (litt. ‘waiting’) to becoming a separate spiritual being, a *mwana* (baby). Before entering the human body of the unborn baby, the spirit used to reside in the pure world of the afterlife. This afterlife (or beforelife) is associated with both the biblical paradise and the world of the ancestors. Similar to what has been described from several other African communities (cf. Mbiti, 1980; Meyer, 2004; Van Breugel, 2001),

Christianity and indigenous believe systems – such as ancestral beliefs and practices – tend to coexist. When I asked parents and spiritualists to clarify what spirits (*mzimu*) they were talking about – Christian or ancestral spirits – some argued that these could not be separated. This was explained by a young father: ‘When a person dies, he will go to heaven. There he will be a spiritual being who watches over us. In English, you might call him an angel, but for us, these are our ancestors’. Others, on the other hand, would explain that babies have two kinds of spirits: both an ancestral spirit that follows the lineage and the holy spirit of God. In most cases, these coexist harmoniously.

Mrs Mwembe’s perception of the unborn and newborn baby as ‘pure as the angels with the wisdom of the dead’ and Given’s statement that ‘babies have a strong spirit’ reflect perceptions of babies as essentially spiritual beings, close to the spiritual world where they came from. This enables them to communicate directly with those who inhabit this world, such as fellow ancestors, God and the angels. As the ancestral spirits are watchers of good morale and customs (*miyambo*), they will reward good behaviour. Bad behaviour, on the other hand, will often be penalized. When asked what typically upsets the unborn and newly born baby, parents and ritual/medical experts emphasized behaviour that breaches social relations between people, such as adultery and marital fighting. Some emphasized that it is the very *idea* of immoral acts that upsets the baby; ‘the baby just wants the parents to behave well and live in harmony’, one spiritualist explained.

Others would focus more on the problem of ‘mixed/confused blood’ (*mwazi wasaganiza*). In Ng’ombe, the creation and development of the foetus are not considered the result of one’s sexual encounter; it is an ongoing process and depends on the continuous merging of the mother’s and the father’s blood through coitus. A father who, for different reasons, fails to ‘share his blood’ through recurrent coitus is assumed to leave few traces of himself in the baby’s character. The creation of a baby should be a result of the sharing of substances from its legitimate parents, and in cases where a third blood is brought into the relationship through adultery, normal development and delivery of the baby will be disturbed. As seen in the case described by Mrs Banda, the baby might be born weak and sick, or the mother and baby may die during labour as the baby will refuse to move downwards. These deaths are generally categorized as *ukufwa* (death caused by) *ncila/ncentu*. In cases where the mother or the father is suspected for adultery, she or he might be asked to apologize to the baby. This will calm the spirit of the baby, and labour can proceed as normal.<sup>4</sup>

Behaviour that breaches social relations is also considered to affect the newly born baby’s well-being, making it feel miserable. It will lose appetite and get sick. In the worst case, such babies might choose to go back to the world of the ancestral spirits where it will be waiting for parents who are better able to care for a baby. As seen in the case of Given, the newly born baby will try to communicate its disapproval of such behaviour. But since it can’t express itself in words, it has to use other means of communication, such as crying. Babies’ attempts to communicate disapprovals are a frequent topic for conversations. For instance, during a social gathering at a friend’s place, one of the visitors noticed the sound of a crying baby coming from the neighbouring house and asked, ‘why does this baby cry like that, is the mother not at home?’ Our friend’s mother quickly replied,

That baby, it can cry; it cries, too much. Even during the night it cries. The mother is worried because the father of the baby likes going to *shebeens* (illicit bars and clubs). The baby looks unhappy, thin like that. And the mother also looks miserable; thinking too much, worrying too much. So of course, the baby will continue crying.

This understanding of the infant's ability to understand and communicate rather complex relations finds support in research done by a number of psychologists. Using the term 'intersubjectivity', Trevarthen (1979, 1993) describes how even newly born infants relate to others, intentionally communicating with others through bodily and facial expressions. According to him, 'infants communicate and think emotionally' (Trevarthen, 1993: 122). The infant and caretakers share emotional states that often find expression in 'body matching equivalents' of face, voice and hands. If the flow of interest and pleasure between the caretaker and baby breaks down, the baby will show signs of confusion, withdrawal, anger and distress (Trevarthen, 1993: 147). This understanding of the baby's relational competence and agency resonates in many ways with the Zambian perception of how the baby and parents share and move each other's emotional states.

### **In states of being and becoming**

Gottlieb (2000) links the lack of anthropological studies of babies' experiences and expressions to the assumption that babies do not have the capacity of agency. Without the ability to influence the behaviour of others and communicate with the anthropologist, they may look uninteresting to researchers. This perception is informed by a conceptualization of babies as 'biological-bundles' who spend much time engaging in eating, digesting, pooping, leaking, sleeping and crying. Babies 'seem so much at the mercy of others that there does not appear to be any of that push-and-pull between two individuals, or between individual and society at large, that makes for such interesting scholarly consideration' (Gottlieb, 2000: 124). While anthropologist should start taking the lives of babies seriously, we may ask whether we have to define them as complete, competent agents for them to be interesting to us. Could it be, as suggested by Lee (1998), that the process of redefining children as agents is more about 'making children fit for sociological theory, rather than making sociological theories fit for children'? (p. 263).

The Ng'ombe babies' refusals to be born, deliberate attempts to communicate their needs and ideas and even deciding to go back to the world of the ancestral spirits can easily be categorized as acts of agency. But, as their actions and bodies are profoundly relational, defining their agency as a capacity to 'act independently' (James and James, 2012: 3) becomes meaningless. The conceptualization of agency as a capacity of the autonomous, independent individual is informed by particular ways of understanding bodies and selves (Asad, 2000; Lee, 1998). Conklin and Morgan (1996) show how North Americans tend to see the body as 'asocial' – as a biological given raw material in which culture operates (for instance, through ways of dressing and body piercings). Bodies are considered here as separate, autonomous entities that are not 'constituted in relation to other bodies' (Turner quoted in Conklin and Morgan, 1996: 659). According to this perspective, the foetus emerges as a result of one encounter, and its development in the womb is more or less determined by biological processes. Moreover, North Americans

also tend to look for concrete bodily markers (such as the development of particular body parts or delivery) when they define the personhood of babies. When the unborn or newly born baby is defined as a person, it will also be deemed to have individual rights. These rights are, as in the abortion debate, often seen as opposed to those of mothers (Morgan, 1998).

The conceptualization of agency linked to the autonomous, self-contained person as universal and cross-culturally valid, is problematic since it does not necessarily reflect local conceptions of children and childhood in different contexts. In Ng'ombe, the production and development of the unborn and newly born baby are processual and profoundly spiritual and social. Its personhood is 'non-individualistic' in that it 'exceeds beyond the skin' (Wertsch et al., 1993: 352), emerging as a result of the continuous interactions between 'multiple others' (Strathern, 1988: 316). These 'multiple others' include spiritual beings, and the babies' lives and existence therefore 'needs to be conceptualized as part of wider cosmologies which look and how and why ancestors return to earth' (Montgomery, 2008: 97). This perception of babies is not unique in an African context. For instance, from Nigeria, Stevenson (1985) describes how some babies are believed to make unreasonable demands on their parents, with the hint that they are going to leave them if they do not fulfil these demands. Montgomery (2008) describes how there is a particular category of spirit babies who are believed to be repeatedly born into the same families, just with the intention to return to the place they came from so that they can bring some of the wealth of living with them.

In Ng'ombe, the 'multiple others' that define the baby's personhood also include the mother and the father as well as other community members. It is through the parents' bloods that it emerged, and it is through the continuous sharing of their blood that it is developing. It is also the exchanges of these substances that define its social and spiritual belonging, and the rightful sharing of blood is therefore considered crucial to the baby's existence. This sharing of substances is also considered to be essential after the baby is born; the first weeks after being born, the baby and the mother will be secluded in a house and the only exchange of food and fluids will be between the mother and the baby. During this time the mother's devotion and milk will strengthen the baby's body and establish bonds between the baby and mother. The baby will gradually begin to move from being a spiritual being to a social person who is part of a net of relations of care and nurture. According to this perception, 'being' is also a state of constant 'becoming' or 'in the making', where the self gradually 'gain[s] significance from and through their significance with others' (Ellis, 1978: 6).

This perception of humans as constant becomings is not something particular for unborn or newly born babies; personhood for older children and adults is also considered as highly relational. For instance, in her writings on the Luvale in Zambia, Silva (2009) shows how personhood is considered to gradually unfold during the life course, at times increasingly fulfilling, at other times diminishing. There are a few exemplary works from other African communities that show how children's competences are not considered individual capacities, but seen as relational and social, demarked by the ways in which children participate in communal life (LeVine and New, 2008). Of particular relevance are Nsamenang's (1992, 2006) descriptions of how human existence in African contexts is perceived as cyclical. It begins with spiritual selfhood, which emerges at the

time when the mother becomes pregnant. Through ritual acts, it moves to a social selfhood and ends with biological death, which again is the beginning of ancestral selfhood. Each stage is characterized by both physical and social developmental agendas, and socialization focuses more on ‘social competence and shared responsibility’ than individual agencies, competencies and achievements (Nsamenang, 2006: 296).

### **The wisdom of the dependent and vulnerable**

In the very margin of life, childbirth and infancy tend to stimulate processes of meaning-making that relate to cultural notions of morality, social order and disorder. It also opens up spaces where moral wisdom and behaviour are produced, but also socially contested and negotiated. The wisdom (*nzeru*) that Mrs Mwembe speaks of, ‘the wisdom of the dead’, is embedded in relations that include both the living and the dead. It is not a capacity of the individual baby, but a relational, spiritual and social capacity. This has also been pointed out by Serpell (1992), who described how children’s development and learning among the Chewa are anchored in changing forms of social interaction with others.

Babies’ states of ‘agency’ are not only passively produced and determined by their relations with the living and the dead; their acts of agency also build and rebuild these relationships. Babies act when the parents or other community members behave in ways that breach social relations between them, and they aim to restore these relationships. When people in Ng’ombe narrate how a baby refuses to be born, or how it left the world of the living as it was not hospitable to them, they also comment on how people are supposed to behave and treat each other. The baby’s agency is thus instrumental to the construction and reconstruction of values and goals that regulate social relations. Moreover, by interpreting the baby’s agency and sharing stories about their acts of agency, such as their refusal to be born or choice to leave this world, people also becomes meaning producing agents. In Strathern’s (1988) words (p. 296), ‘by directing another’s agency, so to speak, one becomes an agent oneself’. The baby’s agency can, for instance, be used by other people to negotiate power relations between them. Mothers like Misozi may use the baby’s agency to confront their husbands with suspicions of adultery, and spiritualists and traditional birth attendants may use the baby’s agency to acquire valuable information, to make knowledge claims, to strengthen their position in the community and also to gain economically.

The babies’ ‘wisdom’ and agencies can only be understood as interlinked with states of interdependency and social vulnerability. This is manifested in real-life experiences: its health and well-being totally depend on the parents’ and other community member’s behaviour and the cooperation between the mother and the father. In a situation with scarce resources, the mother and the baby will suffer from the father’s investment of time and money in extramarital relationships. A couple that tends to argue may not provide the best setting for the baby to live, grow and develop. And a mother who tends to fight with her family and other community members may not manage to allocate resources through her network in times of need. Mothers in Ng’ombe who had experienced losing a baby often talked about *choices* – the babies’ choice to stay or to leave. Sara, a young mother who had recently lost both her twin sons, narrated,

these babies they did not want to stay with us. You see; they came at the wrong time. We had so many problems; no money, no food. And my husband could not get along with my family. So they left, right. They left, just like that. Leaving me alone.

Scheper-Hughes (1992) describes how some babies in a poor township in Brazil are believed not to have the 'will force' to live – not the 'crack' of 'taste' of life. Their death is, therefore, accepted as the child's wish, and, rather than mourn, the mothers express relief when these babies died. Scheper-Hughes does not, however, use the term 'agency' to explain why these babies pass away and why their mothers do not cry. She rather relates this to the wider context of structural constraints, to the mothers' limited access to employment and lack of safe drinking water and food. When seen in relation to experiences of poverty, or as Sara narrated, having 'no money, no food', and of social rupture and marginality, notions of the babies' 'free choice' become more complex than what more narrow definitions of agency refer to.

In addition to relating babies' death to diverse interpersonal conflicts, such as marital problems, people also acknowledged biomedical explanations – such as malaria and diarrhoea – as reasons for the babies' death. Although infectious diseases occasionally were the sole reason that was given to explain the illnesses and death of a baby, these explanations are not necessarily considered mutually exclusive. 'A baby who is not happy with the behaviour of adults will easily fall sick with illnesses such as malaria and coughing', a mother of three related. Similar to what Einarsdottir (2004) describes among the Papel, the medication provided at the clinic and herbal medications are often used simultaneously or one following the other. In cases where these do not work, parents will search for more underlying explanations for the illness. According to Einarsdottir, the Papel relate the death of a baby to the shortcomings of adults, and they do mourn. Similarly, mothers in Ng'ombe do not easily give up on their weak babies, and, in contrast to how Scheper-Hughes (1992) describes the contexts of the mothers in Brazil, they do not accept their deaths as 'less as a tragedy than as a predictable and relatively minor misfortune' (p. 275).<sup>5</sup> Most would do everything in their power to convince the sickening or weak babies to stay among the living – taking them to the clinic and to spiritualists, spending the little money they have on medication or changing their behaviour to make the baby happy. In this way, the babies' spirituality and agency intersect with notions of poverty and vulnerability and provide explanations for babies' illnesses and death.

## Conclusion

Children, like adults, do not escape the structural constraints of poverty, and they depend on the actions and choices made by others. At the same time, a focus on structures does not necessarily exclude notions of agency – it all depends on how we define agency. By looking at local perceptions of the unborn and newly born babies in Ng'ombe, I have illustrated that notions of children's agency and competence do not have to stand in opposition to notions of children's vulnerability and interdependency. It may seem like a paradox that adults in Ng'ombe view their babies as opinionated and strong and extremely vulnerable and dependent at the same time. But, similar to many other African communities (Einarsdottir, 2004; Gottlieb, 2004), people in Ng'ombe do not see these aspects of

the baby's lives as contradictions. They rather acknowledge them as more interrelated and fluid, linked together in casual ways. As their emerging bodies, spirituality and personhood are socially and relationally constituted, their agency must be acknowledged as highly relational and interdependent. Moreover, local perceptions of babies' agencies and competence do not relieve adult from responsibilities to care and protect. Rather the opposite; by emphasizing the baby's wisdom and capacity of choice, adults comment on parents' and other community members' responsibilities to care for and respect their babies and facilitate their needs and wishes. This also indicates that studies of babies' agencies should not only concern how babies' agency reflects society and culture but also how their agency is part of reorganizing and reconceptualizing cultural norms and values and power relations between people.

### Acknowledgements

I would like to thank my supervisors Anne Trine Kjørholt and Jan Ketil Simonsen for their thoughtful comments. I would also like to express my deep appreciation to my caring friend and 'mother', knowledgeable researcher and informant Ester Mkadawere. Finally, the editors and anonymous reviewers offered helpful and constructive comments, which improved and guided the final version.

### Funding

The author(s) disclosed receipt of the following financial support for the research, authorship, and/or publication of this article: Research for this study has been funded by the Norwegian University of Science and Technology.

### Notes

1. For a comprehensive overview of cross-cultural studies of infants, please see Montgomery (2008).
2. The overall research project concerns the social and cultural lives of babies in Ng'ombe, and particularly focuses on how local categories, notions and values play in parents' and community members' perceptions and choices with respect to the well-being of infants.
3. During fieldwork, I reminded people of their right to abstain from participating in the research. However, I believe that notions of 'informed consent' are highly problematic in anthropological research as the relationship between the so-called 'informant' and researcher is complex. I, therefore, aimed to pay close attention to how people responded to my questions and presence and tried, to the best of my ability, to alter or change my questions or participation if people seemed reserved or uncomfortable. During fieldwork, I was affiliated to the University of Zambia. A research permit, which reflects Zambia's national research policy, was obtained.
4. As the absolute majority of mothers in Ng'ombe give birth in hospitals and clinics, senior women emphasized that this practice is more widespread in rural areas where, due to lack of health facilities and transportation, more mothers give birth at home.
5. For a comprehensive discussion on the universality of the Scheper-Hughes hypothesis that mothers in poor communities with high infant mortality and fertility do not mourn the loss of their babies, see Einarsdottir (2004) and Smørholm (in press).

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Article 3

## **Suffering peacefully:**

**Experiences of infancy death in contemporary Zambia.**

Published in *Ethos, Journal of the Society for Psychological Anthropology*.

Volume 44, number 3

Also published in

*Déjà Lu*

Issue 6, 2018



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Volume 44 | Number 3 | September 2016

American Anthropological Association



## Suffering Peacefully: Experiences of Infancy Death in Contemporary Zambia

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**Abstract** In Ng'ombe Township in Lusaka, the death of a baby is often met with silence. Based on long-term ethnographic fieldwork, this article explores how the bereaved mother's silence is guided by wider cultural norms and values associated with death, by complex notions of what it means to be a person, and by local perceptions of mental health and well-being. To enhance the complexity of the mother's silences, it also explores how structures of poverty manifest in mothers' experiences of loss and how silence may hold feelings of inadequacy but also of care and compassion. Finally, the article aims to provide a counterweight to the predominant assumption that mothers in poor communities, who experience high levels of infant mortality, fail to mourn the death of their babies, as well as to psychological theories that assumes verbal expressions as vital for the mourner's mental recovery after loss. [maternal bereavement, silence, infants, personhood, health, Zambia]

When he died,  
I didn't want to cry  
He was buried in the night  
by the old ladies

Crying?  
I did not get to know him  
He was still cold  
He never smiled at me  
You see?  
He never laughed

He left us so quickly  
God took him, yes  
before he became ours

Brenda

He was my baby  
my baby

I asked myself  
How can I go on?

Who will I cook for?  
Who will my children play with?

Mama!  
*My chitenge*<sup>1</sup>!  
*My chitenge!*

It is empty!

My heart is paining  
He was my baby

Kristin

Experiences of bereavement cannot be generalized, neither across nor within societies. Bereavement is subjective, complex, and diverse. At the same time, emotions are an “aspect of cultural meaning” constructed and shared by people “in relationship with each other” (Lutz and White 1986:407/408). In this article, I explore how mothers in a poor township in the capital of Zambia interpret, express, and manage their emotions when a baby passes away. Brenda and Kristin, quoted above, lost their babies before they turned a year old. Their cases provide insight in how mothers express bereavement and how the community

supports bereavement. The cases, as well as Lucy's, to be introduced later, serve as an entry to a discussion on how the mother's mourning is guided by meaningful cultural notions of health and well-being and also on the spirituality of babies and their liminal status. I focus particularly on how mothers who lose their babies are, at certain times and in certain contexts, encouraged to deal with their loss in silence—not to talk about their late baby, not to cry, and not to linger on the memories. I heard how these norms and values related to silence were articulated and reiterated by the bereaved mothers themselves: "I should not think about the baby"; "I should not cry." This would, according to the mothers, help them accept and endure the pain of loss and bereavement so they could "let go" and "suffer peacefully." I will discuss how the mother's silence is socially and culturally meaningful and salutogenic, assisting both the late baby and the mother to complete different spiritual and emotional transitions.

The article is a response to Wikan's plea for "indepth studies that focus more on emotional experience in loss than on ritualized mourning" (1988:451) and has been inspired by her descriptions of how silence may be part of a deliberate control of outward emotional expressions of grief and despair (1988, 1989, 1990, 1992). My interpretations of silence has also been influenced by Jackson's theories (1983, 2004) on how silence is communicative and also how some experiences and emotions may surpass and confound language, making it redundant. In many ways I follow up Jackson's encouragement for researchers to value such silence, seeing "not as a sign of indifference or resignation, but of respect" and as "a way of healing and reconciliation" (2004:56). As an extension of this, I question the universality of theories that have been dominant in psychological research on mothers' bereavement, such as the assumption that verbalization and memorization is of crucial importance for the bereaved mother's emotional health and well-being. I also critically discuss the universality of theories—mainly developed within anthropology—on how poverty determines experiences and expressions of loss and bereavement. These theories are anchored in discussions of how dominant social, economic, and political structures manifest in people's experiences of suffering. Of particular relevance is Scheper-Hughes' (1984, 1992) extensive work on infancy death in a poor community in Brazil. According to her, in contexts of extreme poverty and high infant mortality, the mother's emotional attachment to the baby may be delayed, and she may therefore not mourn the loss of a baby. Instead, the death of a baby is interpreted as "less as a tragedy than as a misfortune, one to be accepted with equanimity and resignation as an unalterable fact of human existence" (1987:2). By exploring the mother's silences in Ng'ombe, I aim to provide a counterweight to these predominant ideas on mother's experiences and expressions of loss.

### **Theoretical framework**

Hertz (1960 [1907]) and van Gennep (1960[1909]) viewed mourning rituals as a process of separation, transition, and incorporation for the deceased and for her or his survivors. During the transitional, or liminal, phase, mourners and deceased "constitute a special group, situated between the world of the living and the world of the dead, and how soon living individuals leave that group depends on the closeness of their relationship with the dead person" (van Gennep 1960[1909]:147). The social status of the deceased also impacts the

ways that emotions are experienced and expressed. While a chief is mourned intensively, the death of infants may pass almost unnoticed (Hertz 1960[1907]:76). Hertz explains “since society has not yet given anything of itself to the (new-born) child, it is not affected by its disappearance and remains indifferent” (1960[1907]:84). In recent years, Hertz and van Gennep’s theories have been contested and given depth by a growing number of studies on how the beginning of life is asserted and negotiated (Kaufman and Morgan 2005). Of particular relevance are studies on how the unborn and newly born are gradually brought into existence through diverse social acts such as exchanges of body fluids and food between the baby and other community members (Carsten 1995; Conklin and Morgan 1996) and also through ultrasound scans (Williams 2005). When death comes before the baby has become socially significant, researchers have shown how rituals are short or almost absent.

Scheper-Hughes (1984, 1992) describes how desperately poor mothers in Brazil hasten the death of their babies by neglecting their need for food and care. According to her, these mothers do not experience or express mourning when their baby passes away; instead they accept death as the child’s wish. Scheper-Hughes relates this to the wider context of structural constraints; the townships’ historical background of colonial greed and exploitation, the mothers’ limited access to employment, and lack of safe drinking water and food. The anthropology of structural violence is a field of research that focuses on how people deal with the consequences of severe poverty, marginalization, and violence. Of central importance are concepts of social and structural suffering, analyzing how political, economic, and social structures manifest in the ways in which people experience and express the hardships of everyday life. Farmer (2005) argues that many anthropologists focus too much on cultural differences, confusing it with the consequences of structural violence. According to him, “Culture’ does not explain suffering” (2005:48). This is a serious warning against labeling effects of poverty and oppression as “otherness,” leading to essentializing culture, enforcing the boundaries between “us” and “them,” the west and the nonwest, those in power and those who are not. In the worst case, this may lead to a denial of a shared humanity (Abu-Lughod 1991; Farmer 2004; Said 1978). The focus on structural violence has contributed to our understandings of the increasing political and economic inequalities in the world. However, it has been argued that the field runs the risk of not taking peoples’ own interpretations of their own suffering seriously, not acknowledging cultural diversity, and that there are other “ways of thinking” (Davis 2012:505). In relation to perceptions of death and mourning, the focus on the dystopic may overshadow the fact that there are other ways of expressing grief and other ways of memorizing; that there are other ways of defining personhood, loss, and the beginning and end of life. If we let our own moral visions and ideas guide our ethnographic work, we may fail to engage with people “on their own terms,” and we may fail to understand their points of view of what is really at stake (Jackson 2004:54).

Anthropology has also been criticized for ignoring individual experiences and emotions (Kleinman 1980; Scheper-Hughes and Lock 1987; Wikan 1990). There is, however, a wealth of psychological literature on how mourning is best handled, and much has been inspired by Freud’s theories on how expressing bereavement through talking and crying can aid the processes of emotional healing and detachment (Bowlby 1980; Worden 1991). Such



epistemologies often acknowledge that there are experiences and memories that are so painful that they are “unspeakable,” but this is often paired with a longing and struggle to speak (Kidron 2009; Motsemme 2004). Recently, researches from both within and outside psychology have challenged the universality of Euro-western theories on trauma and suffering where avoidance or repression of difficult feelings are assumed to have harmful implications, leading to unresolved grief and neurotic illnesses. For instance, in their study of widows, Parkes and Prigerson (2013) conclude that avoiding emotional stimuli that remind the bereaved about their loss can be an important part of the process of coming to terms with and coping with loss. Drawing on the work of researchers such as Halbwachs (1992[1925]) and Connerton (1989) on the dynamic nature of memory, anthropologists have demonstrated how acts of avoidance and forgetting/letting go of memories can be part of creating new identities, memories, and experiences. Forgetting is here considered as “willed transformation of memory” (Battaglia 1992:14) which “occurs through acts of communication” (Carsten 1995:330). Ethnographic inquiries from various cultures show that in many societies these “acts of communication” can take the form of silence. In her study of Israeli Holocaust descendants and Canadian Cambodian descendants of genocide survivors, Kidron (2009) describes how both groups interpreted silence as constructive and highly communicative, facilitating memorization and sharing of embodied knowledge and emotions. Several anthropologists (e.g., Delaplace 2009; Metcalf and Huntington 1991; Williams 2003) have also demonstrated how troubling emotional experiences are regarded as being better controlled if silenced. In Tahiti, negative emotions such as grief are expected to be controlled, and inappropriate emotional displays are met with shame and embarrassment (Levy 1973). The Toraja of Indonesia downplays distressing aspects of events and situations “to avoid both the inner experience and outward expression of intense emotion” (Wellenkamp 1988:491). In her inspiring work on silence in Bali, Wikan has shown how feelings in Bali are considered as something that “can and should be chosen” (1989:303). Since emotional expressions shape inner feelings, keeping a cheerful and happy mood will protect the bereaved heart and health. These case studies demonstrate that silence does not necessarily signify failure of words, absence of communication, or repressed traumatic memory. Instead, silence is considered to be purposeful when dealing with painful events and experiences, creating “new” meanings and constructing new lives and futures.

## **Methods and Research Setting**

This article is based on two years of anthropological fieldwork in Ng’ombe Township, in the capital Lusaka. The majority of the population belongs to ethno-linguistic groups from Eastern Province, in particular Chewa and Tumbuka. The research was conducted in the oldest part of Ng’ombe, which is a high density, unplanned squatter settlement. Houses are generally between five and 20 square meters and are built with mud or cement bricks and roofed with corrugated iron, but they are often without glass windows. Most of the houses do not have electricity, and food is prepared on braziers outside the house. People use pit latrines located close to the houses, and water is drawn from wells. Some of the wells are shallow, and during the hot season there is a danger of contamination, resulting in dysentery.

Babies in Ng'ombe are born into families who are struggling to pay for the basics such as food, housing, and clothes. Yet most babies' needs are met in many ways. During the first weeks of its life, the mother will be relieved from her daily chores so she can devote her time to the newborn baby. Most of the time, the baby will have physical contact with the mother—being held in her arms, tied to her back, and sleeping next to her. Feeding is on demand, and mothers take great care to keep the baby clean and groomed; giving baths twice a day, applying baby talcum and moisturizers, and clean clothes. A crying baby will be attended to immediately. Most mothers know how vulnerable their newborn baby is, and they do everything in their power to promote their health and well-being. In Zambia, 5.60% of infants die before they reach one year (UNICEF 2014), a rate that is expected to be higher in poor townships such as Ng'ombe (Madise et al. 2003; Mapoma 2009). Even though the biomedical explanation of most of the babies' death can be found in malaria, respiratory infections, diarrhea, malnutrition, and anemia, the popular slogan “poverty is the main killer” reflects the harsh reality of people living in Ng'ombe.

During fieldwork, I followed up on 11 infants and their parents and four pregnant women on a day-to-day basis. In addition, I visited 18 infants and their caretakers on a more sporadic basis. I already knew most of the mothers who took part in the research from previous fieldworks in Ng'ombe. I found this to be of great advantage considering the sensitive subject of the study. Spending time with the mothers and their families, taking part in their everyday lives, sharing their work, their food, their joys, and their sorrows gave me insight into their silences. The main ethical challenge I faced during fieldwork was the risk that my inquiries would interfere with the mothers' efforts to let go of the memories of the late baby and thus violate the cultural norm of silence. In conversations and interviews, such challenges were partly overcome by focusing on expressions of bereavement in a general manner rather than focusing on personal experiences. Even though it was generally problematic to have conversations with mothers, some also wanted to talk about their loss, and many mentioned their loss and related experiences, if only in a brief comment. I conducted a number of structured and semistructured interviews with older women about cultural norms and values related to the death of babies, and I had longer conversations with mothers who had past experiences of losing babies and whose “heart had stopped paining.”

### **Brenda's Newborn Baby**

Entering the house from the bright outside, it took some time before I got accustomed to the dark living room, and I could barely see Brenda sitting on the sofa with her son on her lap. He was wrapped in a blanket embroidered with the words “Mummy's little angel.” Brenda smiled and said that it was a present from the baby's father. She removed the blanket to show that he was nicely dressed in a new, yellow romper, a white hat, and matching socks that his grandmother had knitted. I knew Brenda as an energetic girl, always in a cheerful mood, joking and laughing with her friends. Now she was calm and talked in a low voice. Whenever her son made a sound, she attentively chanted “hush, hush,” while carefully rocking him back and forth. As it was her first-born child she was staying, as is customary, at her mother's house. The quiet of the house stood in stark contrast to the noisy outside with the sounds

of people bustling about, children playing, and the omnipresent music from the township's many bars and taverns. Brenda's mother had covered the only window in the living room with a thick piece of cloth to protect the baby from the glaring sunlight. The door, which I normally found wide open to let the air in and welcome guests, was now shut to leave the light, wind, dust, noise, and "bad air from people" out. I asked Brenda how it felt to be a mother, and Brenda smiled and said that she felt good; "I now have a companion for life."

A couple of weeks later, the baby had problems breathing, and Brenda's mother observed that its fontanel was beating faster than normal. Brenda and her mother decided to go to the clinic the following morning and asked me to accompany them. When I arrived at their house at daybreak, I found the house quiet. Before I got a chance to knock on the door, the neighbor told me that the baby's condition had worsened during the night, and he had died in the arms of his grandmother. Unlike a common funeral, there were no visitors or mourners at the house. Brenda's grandmother came out to greet me. "He died so quickly" she said and shook her head; "you know these babies: They come to us in the night, and they may go back to where they came from in the night." I asked where Brenda was, and she responded that she was inside the house with the baby; they were now waiting for a group of elderly women who would bury the baby in the forest next to the graveyard.

Following the death of her baby, Brenda continued staying with her mother for three weeks. After one week, I went back to visit her together with Anna, a mutual friend. The house was quiet and dark; the windows were covered and the door was closed. Brenda met us with a faint smile; she looked tired but said "I am feeling fine now; soon I will start working again." For some long minutes we sat silent; Anna was looking down, seemingly busy peeling flakes of polish off her nails. Finally she straightened her back and said, "These babies, they come and they leave just like that. . . Well, you are still young; soon you will have another baby. Don't worry." She then raised and said that it was time for us to leave. Two weeks later, I met Brenda seated outside her house, selling her mother's home baked fritters to people passing by.

### **Kristin's baby**

Eight-month-old Matthew had been sick for several months before he died. One day when I visited his mother Kristin, I found him seriously ill. He was lying apathetic on his mother's lap, and his body was extremely thin. He had no energy to even lift his head, and when looking into his sunken staring eyes, it seemed like he had already left the world of the living. We decided to take him to the clinic in the afternoon. It turned out that Matthew was suffering from severe anemia, and Kristin was advised to take him to the hospital for treatment.

Two days later, I received the sad message that he had died during the night. When I entered the funeral home, Kristin sat with other women relatives and friends, resting her head on the shoulder of her sister-in-law. As I squatted down next to her, she raised her head and narrated what had happened in the two days since I last saw her—how she and her husband had brought Matthew to the hospital where they had tried to give him blood transfusion.

When she told about the last minutes of his life, her eyes, which were red and swollen, filled with tears. “I feel so tired, so tired” she whispered. “Yes, try to rest a bit,” her sister-in law replied. Kristin put her head on her lap and closed her eyes. But as the church choir began singing the following song of lament, expressing a mother’s bereavement, her body trembled in silent weeping.

My legs are weak  
 Can’t walk!  
 Take me to the graveyard  
 Escort me my friends  
 Why are you afraid of me?  
 Can’t walk!  
 Take me to the graveyard

The following day, Kristin and the other mourners went to the graveyard. Overwhelmed with grief, Kristin had to be supported to the gravesite. Sitting by the coffin, she cried: “My baby, why did you run away?” “You have left me suffering!” “Where can I find you?” “Come back to me!” “Let me follow!” The mother’s laments combined with the solemn song pulled the mourners into her bereavement, even moving those who did not know Matthew well.

Three days after Matthew’s burial, his parents were shaved, bathed in water containing remedies against the pollution of death, and given new clothes to wear. A pot of herbal water was left outside the house for older siblings and visitors to clean their hands, and extracts of herbs were sprinkled on the walls, “preventing the spirit of the baby from returning to the house.” Neighboring women prepared a meal for the mourners. This marked the end of the funeral ceremonies, and most of the mourners returned to their homes. Kristin was sharing this last meal with her cousin Florence and her sister-in-law. Kristin, who hadn’t been eating much for the past few days, ate with great appetite before she complained about a stomach-ache. The other women laughed; the atmosphere in the house was relaxed and lighthearted. Kristin looked tired but relieved; she was smiling and listening to her sister-in-law joking about some of the funeral participants “who just came for the food.” Florence narrated how her daughter, Beauty, who was the same age as Matthew, had developed a sweet tooth: “Now she says ‘sweets, sweets!’” she joked. The other women laughed, but Kristin looked down and said with a faint voice “whenever I see Beauty I will feel sad because she reminds me about my Matthew.” They sat silent for a few seconds before her cousin said that the neighbors should have made porridge, as this would have been gentler on her empty stomach. The conversation then turned to the quality and price of the meat they sell at the market.

### **The Pain of Silently Letting Go**

Both Brenda and Kristin were, at a specific time, encouraged not to cry and not to let their memories linger on the dead verbally. However, their silences do not indicate that the death was considered to be “less as a tragedy than as a predictable and relatively minor misfortune” (Scheper-Hughes 1992:275), something that passes “unnoticed” and “arise no emotion” (Hertz 1960[1907]:76). On the contrary, people in Ng’ombe are painfully aware

that mothers who lose their babies experience bereavement and that it is not easy for them to let go. They know that the mother and the baby had learned to know each other and that bonds had developed. And they know that most mothers do cry, even though people tell them not to. Wikan poetically states that “life overflows, messes up things, and strains a person’s comprehension and powers of endurance” (1990:27). Lucy, a mother who lost her one-week-old daughter, expressed the difficulties she faced following the norms of silence and of “letting go.” While looking at a photo of her daughter laying on the sofa in a white bouffant dress, she commented:

This was taken just a few days before she passed away. I still keep that dress; it was even too big for her, thought she would grow. You know; then it would fit her. She looked so healthy, don’t you think? Thinking about her still makes me cry. People tell me that I should throw away these things so I can let go; she died when she was just small. She was still in the house with me. But still, I can’t stop thinking and talking about her. My heart is still paining.

In contexts in which dealing with grief through silence is encouraged, the bereaved might find it difficult to follow these norms. This is also true in contexts in which verbal articulation and crying is encouraged. Einarsdóttir has shown that even though mothers amongst the Papel of Guinea-Bissau are instructed not to cry over the death of a child who never became a community member, bereaved mothers expressed that “it was impossible to face death without weeping, despite belief in an attractive afterlife for children and the will of Allah” (2004:136). Her descriptions remind us that individual experiences and expressions cannot be reduced to dominant cultural norms and ideology and can therefore not be seen as determinant of individual experiences and expressions.

Einarsdóttir’s findings also contest the assumption that in communities with extreme poverty and high infant mortality and fertility, mothers may become indifferent to the illness and death of their children. Scheper-Hughes (1992), a main representative of such assumptions, does not claim that her observations from Brazil can be made universal. However, aspects of her findings of how desperately poor mothers perceive babies as nonhumans and how this leads to delayed attachment and lack of mourning may resemble findings from studies in other poor communities such as the Papel and Ng’ombe. Einarsdóttir (2004) thus reminds us that we cannot assume that mothers in similar conditions of poverty find it easy to let go of their late babies or that they do not mourn.

Mothers in Ng’ombe do mourn the loss of their baby. And rather than making them emotionally detached, experiences of poverty and inequality may complicate their experiences of loss and bereavement. Talking about the death of her two babies, a mother said “I gave everything I had to those children. I tried; I tried all I could to keep them well. But it was good for nothing.” Parents are expected to be able to provide their babies with food and safety, and the community is expected to assist the mothers in doing this. When “giving all I had” and “trying all I could” is not enough, feelings of being insufficient, of having failed, can be a painful part of the mother’s bereavement. Their silence may hold feelings of hopelessness and despair, of emotional numbness, a sense of inferiority, and self-blame.

Their silence may reflect attempts to cover up or deny experiences that are too humiliating to be spoken of and thereby normalize the situation. Silence and efforts to “let go” can in these situations be part of attempts to forget, so it becomes beyond the reach of memory and expression (Connerton 2008:6).

But there is more to the picture than poverty and deprivation, and mothers’ silences cannot merely be seen as an internalization of these. Mothers in wealthier areas of Lusaka also respond to the death of their newborn baby with a silence comparable to that of mothers in Ng’ombe. Moreover, elderly women would emphasize that the practice of silence is not a “modern” phenomenon; it has been there for generations. During a group discussion with three elderly traditional birth assistants, one of them said;

In the old days people respected death. That time life was good, food was plenty and our ancestors were close to us. That time, death was not part of our everyday life. . . . If a baby passed away, it was something rare. The [bereaved] mother would listen to the elders; she would stay in the house as long as death was with her. And you would never find a mother cry. That is what my grandmother told me, and that is what I remember from my younger days. Now, some mothers are selfish; they will just cry like that.

The above quote bears witness of a time when life was perceived to have been better and indicates that the practice of handling death with silence cannot be seen as a response to postcolonial poverty and high infant mortality. Rather the opposite; the older ladies were worried that negative economic changes and social rupture would weaken their own position to guide the mothers’ bereavement. This again, they feared, would lead to ways of responding to death that are not in line with the ancestors’ ways, such as the failure of silence. The ways in which death is interpreted and mourning is handled and expressed is not stable, but rather subject to negotiation and change.<sup>2</sup> Yet, according to my observations, responding to the death of a baby with silence is still widely practiced and highly valued. For most people it is not an option to “just to cry like that” as too much is at stake both for the late baby and the bereaved mother. In the following, I will discuss how the mother’s silence aids two different transitions: for the baby’s return to the world of the dead and for the mother’s return to the world of living.

### **Silence and the Babies Return to the Dead**

When asked why the funeral of Brenda’s baby was so short and quiet, Brenda’s grandmother replied; “he was still in the house . . . not yet ours.” In a similar vein, Brenda explained that she did not feel like crying as she “did not get to know him”; “God took him before he became ours.” Brenda and her grandmother indicated that the baby was not classified as a full member of the living community; he was, to use Turner’s (1987) classification, still in a state of being “in between and betwixt.” Similar to many other African communities, people in Ng’ombe are of the opinion that every person has both a spirit and corporal body (Gottlieb 2004; Mtonga 2012; Sangree 1974). When a person dies, the spirit is believed to leave the body and join the spirit world of the ancestors. This ancestral spirit may later rejoin the living by entering the body of an unborn baby. The child is strongly identified with this

spirit and takes on particular traits of the ancestor, such as physical appearances, flaws, and temperaments. The newborn baby is particularly close to the spirit world of the ancestors, constantly communicating with them, and also longing for the very afterworld it came from. It is therefore also vulnerable and may make an easy return to where it came from (Mtonga 2012). This perception is reflected in Brenda's grandmother and Ana's comments on how these babies "come and leave" . . . "just like that."

To protect the baby's health and well-being, the baby and the mother will be, as in Brenda's case, secluded in a house, and they will have restricted contact with the rest of the community. The only exchange of food and fluids will be between the mother and the baby; the mother does not share food with others, and she is expected to make her own fire and cook her own food. The baby is still considered "part of the mother"—not yet a member of the wider family and community. Life and death are seen as two different stages of a continuous cyclic process, and the transition between them is gradual. While being secluded in the house, the baby will begin to gradually move from a state of spiritual existence to become a social person who is part of a network of relations of care and nurture (Nsameng 1992). The babies coming into being can thus be seen as a process of becoming a social person where personhood is not a state of being, but a state of becoming (Comaroff and Comaroff 2004). Similar observations have been made in the region; Silva (2009) has shown that amongst the Luvale of northwestern Zambia, personhood is a sociocultural process, gradually unfolding during the life course, constantly produced and reproduced in social relations. For babies in Ng'ombe, the sharing of food and substances with the mother, and later also the rest of the family and the community, is a vital component in this process of becoming a social person. As the baby becomes physically stronger, it starts communicating with others: making eye contact, smiling, laughing, and crying. This is interpreted as a sign that it has begun appreciating life and that it recognizes and accepts its kinship with the living. It is now ready to be ritually marked as a community member through a rite of passage that symbolizes the baby being born out of seclusion, entering the community of the living. The first time the baby is brought out of the house, family, friends, and fellow church members assemble outside of the house to welcome the baby into the community. They will ululate, dance, and sing songs of joy when the baby is brought out of the house, and they pass the baby around for everybody to hold. During the ceremony, people often comment that the baby has become *wakula* (strong/firm/grown); "he is now part of us" some would add.

Scheper-Hughes describes how mothers in the Brazilian township see their young babies as "less human" than older children and adults, something that enables mothers to see their babies as strangers, preventing them from getting emotionally attached to them. A baby in Ng'ombe who is secluded with the mother is considered to be more of a spiritual being than a communal member. At the same time, the baby is also considered to be more a part of the mother than a stranger. A senior woman related that "The baby and the mother will be sharing flesh and blood before the baby is born, so they will know each other even before they get to meet face to face." I often heard mothers affectionately calling their newly born baby "*mwana wanga*" (my baby); occasionally they would also call them *mbuya*;

grandmother/grandfather, expressing familiarity and respect. Most mothers expect their baby to become, as expressed by Brenda, “a companion for life,” and their mother’s love is not replaced by feelings of the “watchful waiting” for their death as described by Scheper-Hughes (1985:312). Scheper-Hughes (1985) argues that the mother’s lack of attachment is evidenced by the hastened funerals, the mother’s absence at the burial site, as well as the cheap cardboard coffins in which they are buried. But as stated by Rosaldo (1989:2), rituals do not necessarily reflect the complexity and “force” of emotions experienced by the bereaved. Strong emotions might be present without dense symbolic and cultural expressions. In their evaluation of Scheper-Hughes theories on mother’s emotional detachment, Nations and Rebhun (1988) argues that the Brazilian mothers’ apparently stoic reaction to the death of the baby is part of a conscious effort; it is believed that if a mother cries, her tears will wet its small angel wings and prevent it from reaching heaven where it will live happily and later be reunited with the mother. It is therefore necessary for the mother to “break temporary the emotional tie that binds them to their dead, to let the dead continue to their place” (1988:163).

Nations and Rebhun’s (1988) descriptions of how controlling emotional expressions are considered to aid the mother and the baby to go their separate ways resemble my findings from Ng’ombe. If a baby in Ng’ombe passes away during the time of seclusion, it is the responsibility of the community to ensure that the process of making the baby into a social person by incorporating it into the community is quickly terminated. Intense and prolonged bereavement can be harmful as it draws the spirit of the late baby closer to the mother, preventing it from returning to the world of the dead to linger between the community of the living and dead. Being an outsider of both communities, the spirit will be miserable and might become a *ciwanda* (malignant spirit) who brings misfortune to the living. This includes making the mother barren and causing the death of siblings. Of central importance is therefore the mother’s withdrawal or detachment from the emotional bonds she had established with the baby. To achieve this, the mother should not let the memories of her late baby occupy her mind, and she should not linger on the memories verbally. For the baby, the mother’s silence will aid its spiritual transition across domains of the living and the dead, securing a smooth transition to where it came from.

Babies like Matthew who have been taken out of the house, and by this, become community members, are buried and mourned in a very different manner. A fire is made to announce their death, relatives will come from afar to participate in the funeral, and he was buried at the common graveyard. The mother’s crying and verbal expression is considered necessary as the spirit of the deceased baby feels unappreciated and becomes upset if there is no crying. The baby’s spirit will linger amongst the living while the mother’s “heart is still paining,” and it will then gradually go back to where it came from as the mother’s bereavement becomes less intensive. It is therefore important that the mother quickly recovers from the loss after the funeral. Similar to the case of a baby who has not been taken out of the house, the mother is encouraged not to think about the dead but rather to focus on the living. This will help her to become emotionally calm.



## Silence and the Mother's Return to the Living

Lucy's narration of how family and community members advised her to throw away tangible objects such as photos and clothes stands out as an example of how the cultural norm of silence guides the bereaved and is central in the creation of meaning for all individuals involved. Following many scholarly epistemologies that originated in other cultural contexts, such as the European or North American, Lucy's family and community members' encouragements of silence may be seen as an impediment to her healing and rather prescribe memorization and public verbal expression as keys to Lucy's emotional healing. But in Ng'ombe, silence and speech do not seem to be ordered in an oppositional hieratical manner where verbal expressions and crying is valued at the expense of silence. Family and community members were worried about Lucy: "how can her heart relax when she keeps on looking at the baby's pictures and clothes?" a neighbor asked. For them, Lucy's struggle to detach herself from the memories of her daughter did not relate to a lack of opportunities to express bereavement but rather to her unwillingness to let go of memories and tangible objects such as the dress and pictures of her late daughter.

According to Scheper-Hughes (1985:312), since Brazilian mothers are not expected to be emotionally attached to their babies, neighbors and relatives consider the mother's crying as a sign of insanity rather than mother love and attachment. People in Ng'ombe, on the contrary, emphasized how painful it is for a mother to lose her baby, and for them, the bereaved mother's silence is indicative of the loving bond they used to share. If they had not established any attachment, there would be no need for the mother to control her bereavement and to dry her tears, and there would be no need for others to guide her expressions of bereavement. The memorization and verbal dwelling on suffering is regarded as unhealthy as it not only jeopardizes the baby's smooth transition to the afterlife, but also the mother's ability to heal. As the mother returns to the community after birth, seclusion, and loss, her mind is expected to be with the living: "her thoughts should now be with us, not stay with her baby" people would explain. The mother's silence therefore aids transitions not only in the ritual and liminal sense, but also in the psychosocial sense in that it releases the mother and the baby from the close loving attachment bond they used to share, helping her to focus on the here and now. Moreover, a mother who does not linger on the death verbally but resumes her everyday tasks of caring and providing may create a sense of continuity and normality for her children and the rest of the family. These findings seem to support Jackson's argument that expressions of bereavement are managed, controlled, and interpreted "for the purposes of resolving problems and effecting transformations" (1977:295).

According to elderly women in Ng'ombe, the practice of silence has long been recognized as an important part of healing after loss so that pain can subside and the "heart to heal and become strong." In Chichewa, "mourning" is often referred to as *kuwawa wa mtima* (pain of the heart). Intelligence and thoughts (*nzeru*) are associated with the upper part of the body, particularly the head. Even though intelligence and emotions seem to be separate categories, they are closely interconnected; a person's thoughts are believed to influence and manage the "things of the heart"; "Messages received from the head or 'inner mind'

stimulate the heart to display the desired temperament” (Mtonga 2012:22). The gesture of crying and verbally expressing pain is called *kukunga maliro* (to make fire/to boil during the funeral). For the Luvale in northwest Zambia, this expression is known as *kulishona* (to bring one’s self into mourning) (Silva 2009). All these terms reflect how the mothers’ thoughts and verbal expressions influence her emotions by producing and reinforcing painful experiences of grief and loss. According to this understanding, emotions such as bereavement can be shaped and managed by a person’s thinking, and silencing emotions demands the same emotional control as expressing them in laments. Similar to what Wikan (1990) describes in Bali, the act of managing emotions is mainly considered to be the responsibility of the individual. This pertains not only to how emotions are expressed in public, but also the inner experiences. To avoid the potential devastating effects of bereavement, the mother should strive to manage her memories, avoiding objects and situations that remind her of the late baby and disallowing memories of the baby to occupy her mind. These efforts are termed “*iwala*,” a term that in this context best translated as “letting go.” *Iwala* can also be translated “to forget,” but the term is problematic as it is often associated with a loss of something that cannot be recalled (Connerton 2008). People in Ng’ombe referred to *iwala* in positive ways, explaining that this would help the bereaved mother to “relax her heart,” help her accept and endure grief, and focus on the here and now. *Iwala* may therefore be categorized as the type of forgetting that Connerton describes as more of a gain than a loss, enabling mothers to manage things of “negative significance” so that other images “can come to the fore” (2008:63). Silence is here subject to control, just as expressions are. Brenda and Lucy were encouraged not to express their loss verbally and in cries. For them, silence was considered as crucial for their ability to endure and let go of their loss. In the case of Kristin, however, the intense yet brief expression of loss during Matthew’s funeral enabled her to “let go,” paving the way for salutogenic silence. This suggests that silence and verbal expressions are not necessarily considered contradictory ways of dealing with loss. They are rather acknowledged as two different, but equally important, strategies to loosen the emotional ties between the mother and the late baby and for the mother to cope with the loss.

The cases of Brenda and Lucy shows that it is not assumed that one expression depends on the other and that silence only comes after the “liberating” work of expression. These cases thus support the anthropological claim that we must see both silence and talk as socially imposed and that handling difficult emotions with silence is just as “natural” and “healthy” as coping with them through speech (Walter 1999). Such notions have also been expressed by Schepher-Hughes who writes “. . . just as there is no immediate display of grief or mourning amongst many Alto mothers, I have not found any evidence of “delayed” or “displaced” grief in the days, weeks and months to following the death of an infant . . .” (1992:425).

### **Silent Grief, Silent Compassion**

In contrast to Lucy, Brenda didn’t seem to find it too difficult not to cry and to follow the norms of silence. During the first month after the death of her daughter, Brenda spent most of her time at home, but she made visitors feel welcome and would sit and chat for hours. They talked about everything except the death of her baby. But after leaving her

house, visitors would often comment on how hard it had been for her to lose her baby and how she was still missing him. “Did you see her eyes?” A common friend once told me “she still look so sad, so tired.” Grief can be expressed in many ways such as through the “voices of silence” described by Merleau-Ponty where the “indirect language” of what remains unsaid becomes meaningful through shared experiences and meanings (1964:39–84). Motsemme (2004) uses the term “the languages of silence” (2004:910) in reference to South African women’s expressions of grief and struggle under the apartheid system and acknowledges silence as a meaningful way of dealing with difficult experiences and emotions. Brenda’s visitors saw her bereavement in her face, in her movements, and in her silence. She was not seen as emotionally fractured, and she was not seen as detached from her loss or indifferent. On the contrary, her silence expressed to them her suffering as well as her strength and perseverance. Mothers’ silence can therefore not merely be seen as a sign of a lack of expression described by Scheper-Hughes (1992) or of emotional “blankness” or “indifference,” and it is not a matter of suppressing, denying, or ignoring difficult emotions. Just like verbal expression, silence can be a matter of coming to terms with loss. Moreover, a mother who bears her loss and bereavement with composed silence is not acknowledged as a victim but as “strong at heart.” Despite the hardships she is facing, she is resourceful.

The cases of Lucy, Brenda, and Kristin also illustrate how the mother’s grief is not only managed by the mother herself—it is a communal responsibility to make sure that the mother is “mourning nicely.” This has also been noticed by Scheper-Hughes who writes that “the local culture is organized to defend women against the psychological ravagings of grief” (1992:430). In Brenda’s case, her friends would come for frequent visits, and after a couple of weeks, they would ask her to join them on walks around the townships and to the market. “We have to make her feel nice” they explained, and their slow strolls were accompanied by entertaining and light-hearted conversations. In the case of a baby like Matthew, who has become a community member, family and community members will assist the mother in moving in and out of painful emotions—“stirring up” and “relaxing” her heart. If the mother becomes withdrawn and apathetic during the funeral, they may try to encourage her to express her bereavement by crying together with her and uttering words that move her to tears. In the funeral of Matthew, visitors would encourage his mother to talk about his illness and death and to remember him. “He was such a nice boy,” they would say, and they would tell her “he really loved his mother and sisters.” The moving lyrics and melody of songs sung at the funeral also supported the mother in her bereavement. The lyrics of these songs often reflect concrete, everyday acts and experiences that demark the baby as a member of the living community: “The plate is full, but who will I feed?” was sung during Matthew’s funeral. Kristin also drew the other mourners into her bereavement, uttering “My *chitenge* is empty!” “Who will I cook for?” “Who will my children play with?”

If the mother’s bereavement is considered too intense, her crying too exaggerated and her body movements uncontrollable, family and community members will try to calm her down. This is often done by stopping her from attending body viewing, bringing her out of places where others express their bereavement such as the funeral house or the church, or they might try to calm her down by the gravesite. For this reason, the person who has

the main responsibility for supporting the mother during the funeral should not be a close family member as she might not manage to keep her own emotions under control. Kristin's case also illustrates how visitors at the end of the funeral helped her to "change focus" by narrating humorous stories from everyday life and encouraging her not to dwell on difficult memories. For instance, Kristin's remark on how she would find it difficult to put the memory of Matthew behind her was met with silence—not because it was ignored but because it was, as people in Ng'ombe say, time for Kristin to "relax her heart." From now on, she was expected to control her emotions—not cry or talk about Matthew too much, but "let go" of her loss by focusing on her living children and the future.

The practice of protecting the bereaved from the harmful effects of exaggerated and prolonged bereavement is referred to as *usa*. This word translates "to shelter" and connotes care and nourishment. This is mainly done by avoiding topics, words, images, or material objects that remind her about the baby. In addition, as emotions are considered to be highly contagious, people also try to "relax and relieve the mother's heart" by keeping a cheerful social ambience. This involves introducing conversational topics that distract the mother from her loss and relieving her from heavy household chores and preparing food for her so that she is free to do activities she enjoys. Care and empathy is not expressed verbally, but in silence and in the acts of everyday life. Many bereaved mothers told me that they appreciated the visitors' efforts to distract them from their loss. Brenda, for example, explained that it helped her to "make the pain in my heart go away." She also felt that her grandmother had been of great support, cooking for her and making sure she had everything she needed. Similar to her friends, Brenda's grandmother did not talk about the loss that Brenda had gone through. But there are multiple ways of expressing care and empathy, and the grandmother's help in everyday life and their shared silence indicates intersubjective connection and understanding. Silence here seems to create a sense of connectedness between those who share similar experiences of loss and suffering, forming "invisible links" (Motsemme 2004:922) or an "intersubjective bond" (Silva 2009:194). It is a silence that opens up a space where meanings can be made and common understanding and empathy can be expressed, without the actual sharing of verbal, subjective details. According to Pagis, this type of silence therefore allows for a more "general and inclusive form of intersubjectivity, a form that is not obsessed with content, with exact comparison of one mind to another" (2010:324).

## Conclusion

The main focus of this article has been how mothers' bereavement in Ng'ombe is guided by norms of silence and how this silence is experienced and interpreted by the mothers themselves and those who care for them. Understanding the mother's silence must, I suggest, be grounded in comprehensive insights in local perceptions of health and well-being and also of life and death, spirituality and personhood. This study's findings thus support statements made by researchers such as Lutz and White (1986) and Wikan (1989) that understandings people's emotional experiences and expressions must be based in a "fuller view of what is at stake for people in everyday life" (Lutz and White 1986:431) and in "how the person is conceived as in large" (Wikan 1989:299). What is at stake when babies pass away for people

in Ng'ombe relates to transitions both in an existential sense in that it supports the late babies' return to the afterlife and the mother's return to the living and in an emotional sense as it supports the mothers' emotional health and well-being.

At the same time, we must be aware that anthropological representations will always be partial, and an ethnography of silence can never grasp the full complexity of individual experiences and expressions. We may assume that experiences of poverty, and feelings of being inadequate, are a painful part of the mother's experiences of loss and grief. Their silence may even reflect emotional numbness and states of denial and confusion. However, even though the infant mortality rate is high, and many parents do not expect to see all their children grow up, life is not considered to be cheap. The mother's silence does not indicate that they never became emotionally attached to their babies and that the death was less of a psychological shock than it would be for mother's in wealthier communities. Such assumptions would be a great distortion of a complex human reality. In Ng'ombe, the death of a baby is always considered as a tragedy, and rather than indicating indifference, a mother's silence indicates to community members care and compassion for the late baby. In her silence they also see the pain of losing and of letting go, as well as emotional strength and her ability to endure.

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## Notes

**Acknowledgements.** Research for this study has been funded by the Norwegian University of Science and Technology. I am particular grateful for the all the support and thoughtful comments from my supervisors Anne Trine Kjørholt and Jan Ketil Simonsen and my colleges at Norwegian Center for child Research (NOSEB). I would particularly like to thank Marit Ursin for her clarifying comments and suggestions on earlier drafts of this article. I would also like to express my deep appreciation to Ester Mkadawere, who, in addition to being a dear friend, has been an invaluable research assistant, door opener, and informant. The ideas and insights that Mapopa Mtonga shared in conversations also found their way into the analysis. Finally, Ted Lowe and anonymous reviewers for *Ethos* offered helpful and constructive comments that considerably improved and guided the final version.

1. Fabric similar to sarong, worn by women wrapped around the waist or chest, or as Kristin refers to it as a baby sling and blanket.

2. In the classical works of Durkheim (2001[1915]) and Turner (1987[1964]), rituals and expressions of mourning were seen to potentially enhance solidarity and strengthen the social ties within groups. Several anthropologists have, however, questioned the assumption that rituals reinforce social harmony and equilibrium, describing how rituals might be dominated by ambiguity, and thus sites for generational, political, and religious conflict (Geertz 1957; Rosaldo 1989). It should be noticed that a few, particularly younger, community members in Ng'ombe, as well as some nurses and doctors at the hospital, would object to the "old ways" of not allowing the mother to participate in the funeral and silence bereavement. These community members and hospital staff were often inspired by psychological theories that emphasize the importance of expressing bereavement. As suggested by Rosaldo (1989) and Geertz (1957), such differences might ultimately lead to conflicts as well as change.

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# Appendix

Article 4

## **Children's Drawings in Ethnographic Explorations**

**Analyses and Interpretations**

Sesilie Smørholm and Jan Ketil Simonsen

Published in

*Geographies of Children and Young People, vol 2.*

*Methodological Approaches.*

Edited by Skelton, T., Evans, R., and Holt, L.

Singapore: Springer



Geographies of Children and  
Young People 2

SPRINGER  
REFERENCE

Ruth Evans  
Louise Holt *Editors*

Tracey Skelton *Editor-in-Chief*

# Methodological Approaches

 Springer

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[https://doi.org/10.1007/978-981-4585-89-7\\_23-1](https://doi.org/10.1007/978-981-4585-89-7_23-1)

ISBN 978-82-326-5769-8 (printed ver.)  
ISBN 978-82-326-5826-8 (electronic ver.)  
ISSN 1503-8181 (printed ver.)  
ISSN 2703-8084 (online ver.)

