

Widowhood in the era of HIV/AIDS: A case study of Siaya District, Kenya



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ABSTRACT

Luo women are believed to acquire contagious cultural impurity after the death of their husbands that is perceived as dangerous to other people. To neutralise this impure state, a sexual cleansing rite is observed. In the indigenous setting, the ritual was observed by a brother-in-law or cousin of the deceased husband through a guardianship institution. However, with the emergence of HIV/AIDS, many educated brothers-in-law refrain from the practice and instead hire professional cleansers as substitutes. If the deceased spouses were HIV positive, the ritual places professional cleansers at risk of infection. Thereafter, they could act as a bridge for HIV/AIDS transmission to other widows and to the general population. This paper provides insights into reasons for continuity of widowhood rites in Siaya District. Twelve focus group discussions and 20 in-depth interviews were conducted. The cultural violence against Luo widows could spread HIV/AIDS, but Christianity and condoms act as coping mechanisms.

Key words: Coping mechanisms, cultural violence against widows, guardianship institution, HIV/AIDS, professional cleansers, sexual cleansing rite.

RÉSUMÉ

On croit que les femmes Luo acquièrent une impureté culturelle contagieuse après la mort de leurs époux. Cette impureté est perçue comme étant dangereuse pour autrui. Afin de neutraliser cet état d'impureté, le rite de purification sexuelle est observé. Dans des cadres indigènes, le rituel était observé par le beau-frère ou le cousin de l'époux décédé sous tutelle. Cependant, avec l'émergence du VIH/SIDA, beaucoup de beaux-frères bien instruits s'abstiennent de cette coutume et à leur place, ils paient les services des professionnels qui feront la purification comme substituts. Dans le cas où l'époux décédé était séropositif, le rite met le professionnel qui fera la purification à risque d'infection. Par conséquent, ces professionnels pourraient servir comme le pont d'infection au VIH/SIDA à d'autres veuves et à la population générale. Cette communication met à disposition un aperçu vis-à-vis des raisons de continuité de rites du veuvage dans la région de Siaya. Douze discussions de groupe de foyer et vingt entretiens approfondis ont été faits. La violence culturelle contre les veuves Luo peut propager le VIH/SIDA mais la Chrétienté et les préservatifs servent comme des mécanismes à faire face à cette situation.

Mots clés: Mécanismes à faire face, violence culturelle contre les veuves, tutelle, VIH/SIDA, purificateurs professionnels, rite de purification.

INTRODUCTION

HIV infection and AIDS have grown exponentially since 1984 when the first case was diagnosed in Kenya (Forsythe & Rau, 1996). Data from the 2003 Health and Demographic Survey show that 6.7% of the Kenya population was found to be HIV positive (Republic of Kenya, 2004). Women were more likely to be HIV positive than men: HIV prevalence in women aged 15-49 was 8.7%, and in men was 4.6% (NASCOP, 2005).

Data show disproportionate HIV/AIDS infection based on geographical areas, with urban areas being more affected than rural areas (NASCOP, 2001; Republic of Kenya, 2004). The highest prevalence was found in Nyanza Province (15% in adults); with Siaya district leading at 32% (NASCOP, 2005). Despite recent data that show a dramatic drop in national prevalence among pregnant women in urban Kenya, the scenario in Siaya district is worrisome

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(UNAIDS/WHO, 2005). What factors then, could be responsible for the high HIV prevalence in Siaya district?

Among the Luo of Siaya district, women are expected to observe a cleansing ritual, which has a sexual component, before being re-incorporated into society following the death of their husbands (Luginaah, Elkins, Maticka-Tyndale, Landry & Mathui, 2005). This ritual endangers widows' lives through possible infection with HIV/AIDS. Indeed, the Government of Kenya (GoK) has failed in its appeals to the Luo to abandon the life-threatening widowhood rituals (Republic of Kenya, 2001). While research has quantified the high prevalence of HIV/AIDS in Siaya district (NASCOP, 2005; Republic of Kenya, 2004), the underlying reason for the continuity of widowhood rites among the Luo has apparently not been addressed by researchers. The central problem of this study, therefore, revolves around the question, "Are Luo widows 'compelled' by male decision-makers to observe the cleansing widowhood rituals that endanger their lives or do they do so out of their own free will?" It is only after generating a database on patterns and reasons for sexual behaviour among the Luo that relevant mitigation interventions could be initiated to change their sexual behaviour and make it less risky for HIV/AIDS transmission.

This paper starts by presenting the research methods that were utilised in the study. This is followed by a brief overview of the study area and implications for HIV/AIDS transmission. Widowhood in the indigenous and contemporary Luo communities is discussed, and then the reasons for and against widowhood practices are explored. This is followed by the coping mechanisms that are employed by widows. The paper ends with a discussion and recommendations for the way forward to minimise the apparent risk for HIV transmission that is inherent in Luo widowhood rites.

RESEARCH METHODS

Research design and description of discussants

A qualitative study design using focus group discussions (FGDs) and in-depth interviews (IDIs) was used to generate data. The study generated responses on why the Luo observe widowhood practices despite the apparent health risks involved. The researcher probed participants' responses for clarification and detailed

information on the Luo widowhood rites. Some discussants became so emotionally involved that they narrated their experiences of widowhood. Such discussants went beyond mere superficial responses by focusing on their experiences, feelings and firmly held beliefs. The use of qualitative methods was appropriate for this type of study because it facilitated the gathering of narratives and experiences related to widowhood among the Luo.

In each visited division, four FGD sessions were held with the following groups: male married adults, female married adults, widows, and elderly widows or widowers. Although the researcher had intended to interview six categories of respondents, including widowers and youth, saturation was reached after interviewing four groups during the pilot study. Consequently, twelve FGDs were held in total. This paper focuses on results of the FGD theme that examined the implication of cleansing and widow guardianship rituals among the Luo on the lives of widows in Siaya district.¹

Description of the research site

Siaya District is one of the 12 districts that comprise Nyanza Province. It is divided into seven administrative divisions, namely Yala, Wagai, Karemo, Ujunja, Boro, Uranga and Ukwala. These divisions are further divided into 30 locations and 128 sub-locations (Republic of Kenya, 2002).

Sampling procedures

Purposive sampling was used to select three out of the seven divisions of Siaya District. Yala division was selected because it is along the Busia-Uganda main road that has been greatly affected by HIV/AIDS. Boro division is near Uganda and is the administrative centre of the district, while Ukwala division is in the interior and close to Lake Victoria. Our purpose was to examine whether or not widowhood rites were observed in the different divisions. The selection of sub-locations was by random sampling.

Recruitment and description of FGD procedures

The recruitment of respondents was done with the help of community leaders: church ministers and administrators of women groups. Ten discussants, who were expected to be as homogenous as possible in terms of sex, age and marital status, were recruited for

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each FGD. A moderator led the discussions with the help of two note takers. The 12 FGDs were conducted in Dholuo language and were audiotaped. The FGDs comprised 10 discussants giving a total of 120. All sessions were conducted in classrooms of public schools and lasted for two hours. None of the participants dropped out from the study. The FGDs focused on widowhood rites, their purpose and consequences, and attitudes towards them.

Description of IDI procedures

IDIs were conducted with selected interviewees who had not participated in FGDs. IDIs were used to countercheck the information derived from the various FGDs in order to validate the data with personal experiences. This step was crucial because FGDs provide group reflections that may not tally with actual practices. In each division, four widows were randomly selected, totalling 12. In order to minimise bias in the recruitment of respondents, the researcher randomly selected four respondents from a list of widows who had not participated in FGDs. When visiting one of the widows, the research team met a professional cleanser whom the researcher also then interviewed. Other interviewees included: a long-serving Catholic priest, a reverend of the Anglican Church of Kenya (ACK), a priest in the *Legio Maria* Church, two officials from a women's organisation called *Maendeleo ya Wanawake* (MYW)², and two project managers of the Double Joy Children's Farm, a centre that caters for orphans in Siaya district. In total, 20 people were interviewed in IDIs, which were conducted in the houses of respondents and lasted about two hours each.

Research assistants

The study employed the services of six research assistants (RAs) of both sexes. RAs interviewed discussants of the same gender to minimise embarrassment that sometimes occurs when discussants are interviewed by the opposite sex. RAs were mature in age to enable discussants to interact with them freely. RAs were selected from graduate students at Kenyatta University, based on gender and ability to communicate fluently in both English and Dholuo language. Recruitment of RAs was based on scores obtained after administration of a test to check students' fluency in the two languages. The RAs performed different roles: leading the discussions (moderators), taking notes (note-takers) and audiotaping the sessions.

RAs were trained in ethical issues concerning involvement of human subjects in research. Again, a review of the entire proposal was made to clarify issues to be investigated. Finally, RAs were trained on how to conduct FGDs and IDIs as a way of collecting qualitative data (Ulin, Robinson & Tolley 2005). The training also covered the use of recording instruments and note taking. Data from recorded interviews was transcribed and translated as soon as the FGDs and IDIs for any one particular day were complete, to facilitate recall of information.

Ethical issues

Our research protocol was submitted to the Office of the President for ethical approval before the study started. Thereafter, we approached the administrative and local leaders in Siaya district to seek their consent, show them the ethical approval certificate from the government, and request for support and security.

Additionally, informed consent of respondents was sought before their participation in the study. Respondents were assured of confidentiality and were asked not to share the information outside the group. The researcher also informed the participants that they were free to decline to participate, not to respond to a particular question or to quit if they so wished. Again, they were informed about the reimbursement of US\$ 3 at the end of the session for travel and appreciation of their valuable time. Their willingness to be audiotaped was also sought.

Pilot study

A pilot study was conducted to test the research instruments in Boro Division. The pilot study enabled the researcher to revise the instruments by using terms that resonated with the language used in the study area. The research team learnt that the local Luo name for HIV/AIDS is *ayaki*, meaning extreme thinning followed by death. We also learnt that the physical symptoms of cultural impurity, '*chira*' are almost similar to HIV/AIDS symptoms. The only difference being that cultural impurity can be treated using herbs, but HIV/AIDS has no cure. This knowledge enabled us to add some questions to our research tool to find out whether or not the Luo distinguish between the two health conditions and the implications of their interpretation. Results of this objective are outside the scope of the current paper.

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Data collection

Data were collected from February to June 2004. Data were recorded using codes rather than names of respondents, to ensure confidentiality of personal details that emerged during the discussions. The interviews were conducted in *Dholuo* for better expression. At the end of the sessions, moderators and note-takers listened to the tapes, transcribed the data and also edited them to come up with a clean report for each FGD. This was followed by translation of the reports from *Dholuo* into English.

Data analysis

Qualitative information obtained through FGDs and IDIs were analysed manually. The analysis of the data took the following steps. The transcribed scripts were read to explore emerging themes. Coding was done according to themes. Further coding was done based on sub-themes. Thereafter, information related to each code was displayed in detail. The data were then reduced, as the research team explored similarities and differences in responses based on gender, age and geographic location. The meanings and behaviour of respondents were examined including unique cases that were reported. Finally, the data were examined to get patterns of widowhood behaviour, its causes and effects on Luo widows in Siaya district.

RESULTS

Study area and implications for HIV/AIDS transmission

Siaya district is one of the nine districts of Nyanza Province. This study was conducted in three of the district's six divisions: Boro, Ukwala and Yala. The total area of the district is 3,523 km², of which about 1,005² km is lake water (Republic of Kenya, 2001). The population is largely rural and youthful, with at least 58% being between the ages 0-19. The district has more females than males since men migrate to urban areas for employment. Fish trade is the main economic activity. Siaya district is one of the least economically developed regions of the country, recording among the highest levels of women's illiteracy (Republic of Kenya, 2004). Consequently, most girls do not qualify for highly paying jobs and this translates into low economic status for women, particularly widows who cater for their households alone.

Low literacy also affects the nutritional status of children and mortality rates. The majority of

underweight children are under 12 months old. The main causes of malnutrition in the district include: low calorie intake due to bad eating habits, lack of food, low agricultural production, low incomes, low literacy rates among women, lack of clean safe water, and poor sanitary standards (Republic of Kenya, 2004). The infant mortality rate (IMR) at 211 deaths (children under 5 years) per 1 000 births was ranked as the third highest in Kenya in 1989. This figure declined to 130 deaths per 1 000 births in 1992 and to 102 in 1995, compared to the national average of 60 deaths to 1 000 births (Republic of Kenya 2001). Mortality is currently on the increase because of the high incidence of HIV/AIDS in the district, thereby reducing the gains made in the IMR reduction. The poor nutrition status, high infant mortality rate and HIV/AIDS in Siaya district seem to be intertwined. This is because lack of food is a risk factor for HIV infection and also hinders effective management of the epidemic (NASCO, 2005). Could widows in Siaya district equally be lacking food? If so, what implications does this have for their susceptibility to HIV/AIDS transmission? The next section examines the intervention that was employed in the indigenous Luo setting to cater for the basic needs of widows.³

Guardianship and cleansing of widows in the indigenous Luo community

According to participants, a widow was confined to her homestead for a whole year, since she was considered as culturally impure and dangerous to the community. During this time, a widow had a dream where she engaged in sex with the deceased. The sex dream was an indicator that the widow was free to be cleansed. Indeed, widowhood taboos were lifted after the final post-burial ritual where the life of the deceased was celebrated. Thereafter, widows were given to men in the community to guard over them, with a view to providing basic and emotional needs.⁴ Widows chose their successors but made their decision public before a group of elders. The senior widow (first wife in a polygamous marriage) announced the choices that junior widows had made. Screening of the chosen names was done to ensure that no taboos were broken. For instance, discussants observed that a man could not guard a widow if his wife was nursing twins. Again, the ritual was so complicated that only men with established families were free to guard widows. Sometimes, men declined the requests of widows if they felt unfit to perform the role.

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A guardian was supposed to engage in sex with a widow to free her from taboos and also from the spirit of her dead husband. Sometimes, a guardian would be too nervous to have a successful sexual union with a widow. Consequently, a widow informed the community if the ritual had been successful. Each guardian went to the homestead at his own time, starting with the senior widow. The ceremony did not necessarily take place on the same night for all widows, since junior widows could only be visited by their chosen guardians after the cleansing of the senior widow. The venue for the ritual was the deceased's house where the widow had continued living. Discussants observed that ritual sexual intercourse began after supper and was done in three phases: a few metres from the house, then between the doorposts of the house, and finally at the sleeping place. If the sexual union was successful, the guardian cut the banana fibre string that had remained around the widow's neck, to symbolise that she was now ritually separated from the deceased's spirit. This ritual was referred to as cutting the symbolic string of the mourning period '*okola*', since it was the first time a widow had sexual union with another man.

Later on, the guardian took the widow to his home for reconciliatory ceremonies. While there, medicinal herbs were drunk by the widow, guardian, his wife and children to protect them from any bad omen due to their close contact with the widow. Thereafter, the guardian took over the responsibility of catering for the needs of the widow and her offspring. The first task was to construct a new hut for the widow. A guardian also led the new family in observing religious functions and took care of dowry negotiations when the deceased's children wanted to marry. However, guardians could not misuse the property of the deceased, since elders vetted their actions. Guardians who failed to perform their roles were divorced and new ones chosen with the help of elders.

Apart from the above-mentioned conventional method of separating a widow from the deceased's spirit, results of FGDs indicate that sex was not mandatory in all cases of guardianship. The following alternatives were mentioned by discussants:

A brother-in-law gave an elderly widow tobacco to smoke. This was passed through the space between the wall and the roof. Thereafter, the two sniffed the tobacco '*ndawa*' together (FGD with female elders, Ukwala division).

If a widow died before observance of the cleansing ritual, a person was hired either to lie on top of her without performing any sexual act or alternatively, the person lifted his leg to point a penis at the vagina of the corpse without penetrative sex (FGD with male elders, Yala division).

Symbolism in the above-mentioned practices indicates an intention to make love. Widows in the indigenous Luo community had some authority over their own lives, since they were involved in choosing their guardians. Additionally, post-menopausal widows were not forced to make love. Does the same situation hold today?

Cleansing of widows in the contemporary setting

Due to the fear of contracting HIV/AIDS, some relatives of the deceased hire professional cleansers to engage in sex with widows. Commenting on this new phenomenon among the Luo of Siaya district, Ocholla-Ayayo (1996, p.4) observes that:

A '*jakowiny*', a sexual perverse, or psychopath capable of doing what normal human beings cannot do, is persuaded to perform cord cutting sex between a widow and the deceased husband so that the widow may be free to re-marry or to be inherited. Because of payment of a cow, goat or money to date, there are many '*jakowiny*' cleansers who move from one village to another where a man has died.

A respondent in our study noted the following:

Many educated men are afraid to have sexual contact with widows. Consequently, professional cleansers have sprung up to free widows from '*okola*' bondage (Field supervisor of the Double Joy Children's Home, IDI Boro division).

Professional cleansers emerged in the 1990s when deaths from HIV/AIDS in Siaya district were at a peak. Referring to what happens in his village, a respondent noted that:

If the family suspects that the death was related to HIV/AIDS, a professional cleanser is hired and given alcohol. Thereafter, he is taken to a widow's house to perform a sex ritual on her. Family members sometimes supervise the ritual to ensure that the penis penetrates the widow's vagina to effect the cultural cleansing (FGD with married men, Ukwala division).

Data indicates an emphasis on sex in cleansing of widows in recent times. Field data revealed an isolated recent case in which a drunken professional cleanser raped an elderly widow. In the respondent's words:

A 70-year-old woman lost her husband in 2003. Although she did not want to observe widowhood rites, her sons and brothers-in-law insisted that they were important to enable the deceased to rest in peace. One evening, her two brothers-in-law visited with a stranger and convinced the widow about the necessity to observe the cultural rite. The elderly woman assumed that the stranger was going to give her tobacco so that

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they could sniff it together to symbolise a sexual union. To her surprise, the stranger raped her. Despite her wailing, no one went to her rescue (FGD with widows, Boro division).

Discussants observed that such rape of an elderly widow inflicted physical and psychological violence against her and was contrary to cultural expectations.

When asked whether or not sex should be involved in the cleansing of widows today, respondents stated as follows:

Sex is a must. This is because the prime function of cleansing is both to free the widow from *okola*, bondage as well as enabling her to get children so as to perpetuate the deceased's lineage (FGD with married men, Ukwala division).

A professional cleanser, *jakowiny* clears all obstacles that could have been on the way in readiness for the guardian to take over the widow (FGD with married men, Yala division).

From the above responses, sex seemed to be central in the cleansing ritual, irrespective of the physical qualities of the male cleanser. The cleansing performed by a professional cleanser was perceived as a prelude to placing a widow under a guardianship institution, by a brother-in-law, if she remained healthy. However, if her spouse was HIV positive, the widow was also likely to be positive, and could transmit the virus to the guardian together with his wife or wives.

Reasons for observing widowhood rites

Data revealed that many widows were forced by circumstances beyond their control to participate in widowhood rites. Relatives of the deceased might force a widow to observe the ritual so as to set her offspring culturally free to construct houses, marry, plant and weed their farms. For example, farms among the Luo were planted in the order of seniority. A mother must plant before her sons. Yet a sex ritual to symbolise fertility must precede the planting process. Some widows who had been 'forced' by culture to observe widowhood rites maintained that:

My in-laws brought a filthy-looking stranger to cleanse me. I did not like the idea but had no option since I was protecting my children against *chira*, impurity. Besides, clan members insisted that I underwent all the rituals to enable my sons to marry and construct houses of their own. There was too much pressure exerted upon me that I decided to solve the immediate problem rather than fear HIV/AIDS transmission that was a future possibility (FGD with widows, Boro division).

Even with my advanced age, my sons subjected me to great suffering. They hired a mentally impaired man to cleanse me so that they could be free to re-marry in case their spouses died (FGD with the elderly, Yala division).

My brother was involved in a road accident three months after the burial of my husband. It was a very difficult situation because my brothers-in-laws wanted to attend the funeral with me. Yet I could not leave the

deceased's homestead before being cleansed. I had to send someone to Ng'iya Market to hire any available professional cleanser to perform the ritual (FGD with widows, Boro division).

Many widows reiterated that they observed the cultural widowhood rites as a survival strategy to protect their property. Commenting on their dilemma, some widows observed that:

I had no choice since it was the only way I could continue staying on the land of my deceased spouse. I had nowhere else to go. My parents were dead. Yet my brothers would not have me go back home (FGD with widows, Ukwala division).

My brothers-in-laws gave me two choices: either to be cleansed and later on be placed under a guardianship institution, or to go away and lose all the property. I obliged (Widow, IDI Yala division).

If I had any other way, I would have avoided the ritual. But I lacked money and land to keep me going. I had to do what my in-laws wanted so that I could continue living in their home (FGD with widows, Boro division).

Some respondents seemed to have internalised the cultural expectation and saw it as their only option, as indicated in the following responses:

I observed the cleansing ritual because Luo widows are supposed to do so. I paid a goat to a professional cleanser for his services (FGD with widows, Boro division).

A mother's action determines how her children will live in future. I had to observe the rites so that my children could re-marry if their spouses died and construct houses when the right time comes (FGD with widows, Yala division).

The family of my husband brought a cleanser for me. Thereafter, one of my brothers-in-law guarded over me for a while. Right now, a cousin of my late husband fulfils my sexual needs before visiting his two wives (Widow, IDI, Yala division).

Opposition to widowhood rites

However, a few respondents showed outright rejection of the two widowhood rituals with, a view to avoiding HIV/AIDS infection as well as avoiding exploitation by guardians. They stated that:

Unlike in the old days, life with a guardian today is full of tension. His wives are usually resentful of the relationship. Besides, it is better to avoid sharing men to avoid HIV (FGD with married women, Boro division).

Brothers-in-law sometimes compel the widow to be inherited so that they can get access to the property of the deceased. Guardians are parasites who mind about their welfare but not that of the widow and her offspring (FGD with elderly respondents, Ukwala Division).

Many widows noted that they had refrained from the guardianship institution. Female respondents pointed out that guardians no longer provided basic needs as was the case in the past. The institution created social tension among women, created an economic burden on widows, and sometimes led to physical violence against them. Christian widows who refused guardianship requested their church ministers to

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preside over socio-cultural activities, such as thatching of houses, which was supposed to be led by a male ritual leader. Commenting on reasons for the dislike of guardianship, respondents observed that:

Life with a guardian is full of tension. The guardian expects to eat good meals. The guardian sometimes punishes a widow by battering her or refusing to go to her house if she fails to provide the expected good food. Again, his wives are usually resentful of the relationship. There have been cases in the past whereby guardians' wives have burnt houses their husbands have constructed for widows (FGD with widows, Boro division).

Brothers-in-law sometimes compel the widow to be inherited so that they can get access to the property of the deceased. They are parasites, and no longer take care of the widow's children (FGD with elderly females, Ukwala division).

Coping mechanisms

First, some widows with HIV attempted to avoid widowhood rites and cautioned their relatives and sexual partners to avoid them with a view to preventing HIV/AIDS transmission. However, respondents noted that most men, especially those with a lower educational status, insisted on having sexual relationship with widows even after being warned about the HIV status. Risk factors for such behaviour were identified as the apparent good physical health that most widows exhibited for about three to four years after the internment of husbands, alcohol and drug abuse, poverty, belief in witchcraft and lack of disclosure of the cause of death. When asked why people risked their lives through widowhood rites, respondents observed that:

Most people have sex with widows/widowers under the influence of alcohol. Again, poverty has forced many men to operate as professional cleansers. Such people will continue to cleanse widows so long as the bereaved families can pay them (Priest of Roman Catholic Church, IDI, Yala division).

It is not easy to know with certainty whether a person died of AIDS or not since all diseases make people thin, even *chira* cultural impurity. People cannot refuse to make love to widows just because of rumours (FGD with married men, Boro division).

Some people die of AIDS-related complications before the symptoms are seen. Such people leave their wives as carriers but healthy. When a man cleanses or guards over such a widow, he contracts HIV and takes it to his wife/wives (An administrator of MYW, IDI, Boro division).

Second, some Luo widows with HIV proposed the use of condoms to protect themselves as well as their sexual partners from re-infection. Data revealed that condoms were unpopular for varied reasons. They spread the epidemic⁵, rendered the cleansing ritual unsuccessful, reduced sexual pleasure and were for prostitutes. In respondents' own words:

Condoms are laced with ayaki (HIV/AIDS). We do not want to get killed by the foreign disease (FGD with widowers, Boro division).

The cleansing ritual cannot be successful if a barrier is placed between the ritual performers. We must respect the dignity of the ritual of separating the ghost of the deceased from a Luo widow (FGD with married men, Yala division).

Why on earth should I use a condom? Sex is enjoyable when it is skin to skin. I am a true Luo man who, like a cow, should die when chewing its cud (Professional cleanser, IDI, Boro division).

Condoms are for prostitutes. A cleansing ritual is a decent cultural obligation. Besides, our church does not allow condom use (Pastor of *Legio Maria* Church, IDI, Boro division).

Third, Christianity was also used as a coping strategy by widows, especially the elderly. This was revealed in the following responses:

Why observe such a sinful practice? Jesus Christ is the overall protector of all people. Widows should not be afraid of death because everyone will die (FGD with widows, Ukwala division).

Prayer encourages me to keep up with life despite the odds against me. I am HIV positive and my family has rejected me because I refused to be cleansed. I rely on the Lord our saviour through prayer as my only friend. This is because God knew what could befall me before I was born (Widow, IDI Boro division).

It emerged from the findings that widows from mainstream churches were more likely to refrain from observing funeral rites than those from African instituted churches. These divergent positions were clear from the following observations:

As a member of St. Monica Women Group in the Roman Catholic Church, the Christian community has given me a lot of support despite hostility from my in-laws. Members of my group visited me when no one else could visit me for fear of contracting cultural impurity, *chira*. The priest prayed for my new house, witnessed its construction and provided the iron sheets for thatching instead of a guardian. So far, nothing has happened to me and my children. We trust in Jesus Christ for eternal protection (FGD with elderly females, Yala division).

Cleansing rituals existed in the Old Testament. Again, widow 'inheritance' was allowed. Our Luo culture is indeed very similar to the Biblical practice and such care of widows should be encouraged in the current difficult economic environment. Otherwise, it can be so unfortunate for Luo men to leave widows without caring for their needs as demanded by both the Bible and culture (Pastor of *Legio Maria* Church, IDI, Boro division).

Fourth, higher education and economic empowerment provided safety nets to avoid the rituals. This revelation was clear from FGDs and IDIs data whereby most widows with secondary school education and economic stability ignored the cultural requirement of guardianship. An educated widow noted that:

I cannot observe such a rite unless I want to die and leave my children as orphans. I have a job and I am ready to work so hard to provide whatever my children require (Widow, IDI, Boro division).

On the other hand, widows with primary school education and no economic empowerment accepted the cultural demands. According to a respondent:

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If I had any other way, I would have avoided the ritual. But I lack money and land to keep me going. I had to do what my in-laws wanted so that I could continue to live in their home (FGD of widows, Yala Division).

Fifth, many young widows who refrained from observing widowhood rites migrated to towns and beaches to engage in petty trade. Sometimes, these young widows made secret sexual liaisons. According to a widow:

When my husband died, I refused to be cleansed by a professional cleanser as demanded by my brothers-in-law. I was sent away with my three children and lost the shop that my husband and I were operating. In the absence of any means of survival, I went to the beach to trade in fish. In the process, I met a fisherman and we became lovers (Widow, IDI, Ukwala division).

Data showed that some widows approached unsuspecting men to cleanse them, either to psychologically free themselves from the assumed fear of supernatural punishment as a consequence of not observing widowhood rites, or as a survival strategy. To this end, whereas the guardianship institution was declining, we cannot state with certainty that widows refrained from having sexual liaisons, hence possibly transmitting HIV/AIDS if infected.

DISCUSSION

Professional cleansers, who could act as a bridge for HIV transmission, have emerged in Siaya district because most educated Luo men reduce their risk for infection by declining to guard widows. Although such men protect themselves, they endanger widows' lives, thereby demonstrating gender polarisation. Patriarchy that places a lower premium on the lives of women compared to that of men needs to be critiqued (Oduyoye, 1995). Although Luo widowers also observe a sex ritual for cleansing purposes, they chose their sexual partners and are more likely to engage in safer sex compared to widows who are at the mercy of professional cleansers. From an etic viewpoint, it could have been better for the Luo to drop the aspect of ritual uncleanness of chief mourners altogether. However, from an emic perspective, the psychological fear of inflicting children with cultural impurity, *chira*, and the subsequent desire to neutralise it, are the driving forces for cleansing rites. This belief is deep-seated among the Luo such that it cannot easily be challenged and discontinued.

The Luo male decision makers are responsible for establishing all norms. The fact that widows require

cleansing as a pre-requisite for incorporation into their society and as a means of neutralising the assumed cultural impurity means that their decision is culturally compelled rather than self-willed. Indeed, the use of drunken strangers as sexual partners seems to violate the widows' rights of association and safety. Thus, the act constitutes cultural violence against Luo widows. This finding corroborates other studies which state that widowhood rites are mandatory from a cultural perspective (Ambasa-Shisanya, 2004; Gennep, 1960; Owen, 1996). Yet these rites could endanger lives of ritual participants through infection with HIV (Ilinigumugabo, 1995; Oduyoye, 1995; Owen, 1996). Muvadi (1995), for example, observed that the majority (73%) of his sample disliked widowhood rites because they could act as avenues for the spread of HIV/AIDS in Kenya.

In practice, however, widowhood rites continue unabated in some communities in Kenya, such as the Teso, Mijikenda, Pokot and Abaluhya (Ambasa-Shisanya, 2004). Njau and Njeru (1997) established that 84% of their sample in Nairobi and Kajiado districts reported having known specific cases of wife inheritance. Ndolo (1995) found that 53% of her sample from the Luo community was in support of widow guardianship, as opposed to 48% that disapproved of the practice. Kawango (1998) observed that 71% of her respondents from the Luo community would like their children to participate in the widow guardianship institution. It is not clear why some communities in Kenya seem to have discontinued widowhood practices while others have retained them. The Luo, as indicated in the above recent studies, still prefer to practise widowhood rites, despite their awareness that the rites could transmit HIV. This finding corroborates those of other studies that knowledge about HIV does not always translate into behaviour change (NASCO, 2005; Ocholla-Ayayo, 1996).

Widowhood rites enhance HIV transmission, especially when the ritual performers, as in the case of the Luo, are uncircumcised. Uncircumcised males suffer bruises during intercourse that expose their partners to infection more readily than circumcised males (Scott, Weiss & Viljoen, 2005). When a professional cleanser is infected, he could transmit HIV to many widows. Alternatively, widows whose husbands were HIV

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positive could easily transmit the virus to their ritual performers and other social partners, "if the couple was not discordant". Our study established that the sexually active widows who move to beaches and urban areas to engage in petty trade easily formed sexual liaisons with fishermen. If safe sex is not practised, HIV positive widows could infect their sexual partners, who also infect their wives. In order to prevent such a vicious cycle of HIV infection among the Luo, Ocholla-Ayayo (1996) advocates for continuity of guardianship institutions.

The researcher recognises the support that was accorded to widows in the indigenous Luo community through the guardianship institution. Despite infringing on the human rights of widows to free association, the intervention was the best option in a situation where women lacked education and economic empowerment. However, field data revealed that the institution no longer serves the role for which it was intended. Instead, it exposes widows to abuse and economic impoverishment. The situation is worse if widows are HIV positive, because they could be thrown out of the homestead altogether. Poindexter (2005) and Owen (1996) concur that widows are subjected to a lot of suffering, especially if they are HIV positive. The present study established that the suffering of Luo widows takes many forms, such as being forced to relocate to urban areas and beaches. In order to curb such suffering, this paper advocates for an alternative guardianship institution through exclusive use of symbolism for cleansing purposes. In other words, the need arises to re-introduce cleansing through symbolism, as was the case for elderly post-menopausal widows. The Luo Council of Elders should play its appropriate indigenous role by ensuring that widows access the property of the deceased and live in the community without any abuse of their sexual and other rights by brothers-in-law.⁶ Nevertheless, the sexually active widows should be free to engage in consensual sexual relationships, as long as they engage in safe sex using condoms to prevent HIV transmission.

Data reveal that most respondents did not use condoms in sexual encounters. In many cases, alcohol use and misconceptions about condoms hindered some Luo men from using condoms. The low usage of condoms is supported by research findings that men in Kenya engage in extra-marital affairs, yet they do not protect

their wives from HIV/AIDS, since 48% of such men never use condoms with their wives (Muvadi, 1995). Even if Luo widows want to use condoms, the majority cannot afford female condoms. Besides, they are unavailable in most chemists and not dispensed freely in public toilets and hospitals unlike male condoms. Therefore, the government should consider creating more awareness about female condoms and providing them free of charge, to empower women to have control over their sexuality and prevent HIV infections. Furthermore, there should be a change in attitude among men about condom use, if the devices are to play an effective role in preventing HIV/AIDS transmission in Siaya district.

The intervention of education has helped Luo educated men and widows to refrain from the life threatening widowhood rituals. Illiteracy could explain why some people fail to take cognisance of the widow period, thereby exposing themselves to HIV.⁷ Some less educated Luo people are more likely to observe widowhood rites during the widow period, unaware that they are exposing themselves to the epidemic. Such people associate the image of thin people with HIV/AIDS. Therefore, there is a need to change the initial information that was given to people about HIV/AIDS. Awareness campaigns need to continue so that the Luo can better understand facts about HIV/AIDS. Faith-based initiatives, for example, should target members of the African Instituted Churches who engage in practices such as unsafe sex and polygamy that predispose them to HIV infections.

This study established that gender discrepancies in access to education and subsequent lack of economic empowerment of women contributes to many Luo widows observing widowhood rites as a survival strategy, unlike the highly educated widows who adopt safer alternative coping mechanisms. The data corroborates findings from other studies that the inability of some widows to provide basic necessities to their children has led them to engage in risky activities such as prostitution, with a view to surviving now rather than leaving their children to die of hunger (Owen, 1996). Equally, the present study established that poverty drives some men to act as professional cleansers. Yet multiple sexual partners expose individuals to the possibility of HIV/AIDS and sexually transmitted infections (STIs) (Ray, 2004). Some Luo widows with STIs, for example, may lack

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money to pay for hospital treatment. Unfortunately, the presence of STIs that cause overt ulceration such as syphilis, chancroid, and trichomonas create a positive environment for infection with HIV/AIDS (Mayaud & Mabey, 2004). Thus there is a need to improve the socio-economic status of women and the overall poverty in Siaya district. This long term objective could be attained if girls are encouraged to go to school, and loans provided to both men and women by micro-financing institutions for starting up small-scale businesses.

Apart from education and economic empowerment, there is a need to improve legal structures so that widows can inherit the property of the deceased directly, instead of owning it through their sons, as is the case in Kenya today. This will prevent widows from risking their health for the sake of property. Again, the human rights of mentally impaired persons need to be respected so that they are not abused by relatives to act as professional cleansers for survival.

CONCLUSION

In conclusion, it is important to re-examine the values and norms in African cultures that ensured smooth running of families, such as the use of symbolism in cleansing widows. In conformity with the cultural practice, Luo elders should be meeting in all villages on a weekly basis to discuss how they could combat HIV and AIDS. These weekly meetings should be used to create more awareness about the window period, to change the association of HIV with thinness, to address alcohol and drug abuse, as well as the myths about condoms as risk factors for HIV transmission. Furthermore, awareness should be created about the need for economic empowerment of girls, women and professional cleansers to prevent their susceptibility to HIV transmission during widowhood and to also fight poverty. Emphasis should be placed on the need for equal access to opportunities like education, and resources like land along the gender divide.

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Footnotes

- ¹The term widow guardianship is used because a male relative takes over responsibility for the widow and her offspring. The person remains a protector and provider but not a husband since the widow remains the 'wife of the late so and so'. The children born out of the union belong to the deceased. Hence, the relationship does not qualify as marriage.
- ²MYW has the largest following in Kenya since it is partly sponsored by the GoK. MYW is concerned with improvement of the socio-economic status of women and children.
- ³Indigenous refers to the pre-Christian and pre-colonial practices in the Luo community.
- ⁴The term is used from the indigenous perspective. Otherwise, it is a derogatory term that implies that women, just like children are immature and require a man to look after them. Yet this is not the case these days, especially when women are empowered economically.
- ⁵Some respondents observed that condoms have a lubricant that has been laced with the HIV. For this reason, there was reluctance among some people to use condoms fearing exposure to the virus. Such a rumour could have emanated from a person living with HIV with the intention of exposing other people to the virus.
- ⁶The Luo Council of Elders comprises representatives from all Luo communities in Kenya. The board of managers convene meetings from time to time to deliberate upon issues of national concern such as HIV/AIDS.
- ⁷The window period refers to the time between infection with HIV/AIDS and development of antibodies to fight the new infection. It lasts from 3 to 6 months.