Cultural Resources and Maternal Health in Mali

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In a culture where pregnancy has traditionally been a taboo subject and was rarely discussed at the household level, the Africare’s Child Survival Project in the district of Dioro in the Segou Region of Southern Mali (1989-1998) successfully increased communication and health-seeking behavior during pregnancy. The overall goal of the project was to reduce morbidity and mortality rates among children and women of reproductive age. The project’s strategy, which used indigenous knowledge and cultural resources, is being widely used throughout the district of Dioro, has spread to other parts of the country, and has been recognized internationally. Of particular note was the innovation of the pendelu, a traditional undergarment for women in Mali which, when colored green, took on new symbolic meaning and was used to signal pregnancy. Specific interventions included: maternal health, nutrition and growth monitoring; diarrhea disease control, immunization services, family planning services, and education about AIDS and sexually transmitted diseases.

In 1992, Africare, a US-based Private Voluntary Organization working in community development, constructed a new maternity ward in the Dioro district in the sector of Koila, 17 kilometers from Dioro. The communities of Koila had expressed the need for the maternity ward and government health professionals saw it as a key service delivery point. Prior to its construction, only three health facilities served the entire district of Dioro, a population of nearly 90,000. Nevertheless, the maternity ward’s utilization rates were only 20-30 percent of what they should have been.

Let’s not discuss it

To improve their understanding of the reasons for the under-utilization of the maternity ward, the Dioro project staff designed an action-oriented qualitative research project to investigate knowledge, attitudes and practices regarding maternal health (Clemmons and Coulibaly, 1994). The research sought to illuminate the overall context of pregnancy and childbirth in the project area, and to identify both resources and obstacles related to improved maternal health and care seeking.

Focus group discussions and in-depth interviews revealed several key findings:

- Women and men were not only well aware of the risks and dangers associated with pregnancy and childbirth, they were also very worried about the outcome:
  - “As soon as a woman becomes pregnant, she worries about her health throughout the pregnancy and about the conditions in which she will give birth” [Female focus group participant].
  - “Every time my wife is pregnant, I’ve been afraid of what could happen during the delivery” [Male focus group participant].

- The local culture placed a strong value on husbands playing a supportive role during their wives’ pregnancy. Both women and men said that the husband of a pregnant woman should act as her principal advisor and protector.
  - Although men lacked basic informa-
tion about caring for pregnant women, they demonstrated a great deal of interest in the development of the pregnancy and said that they feel responsible for a safe outcome.

- One of the most important cultural obstacles to women’s maternal health care-seeking behaviors was the absence of discussion about pregnancy at the household level, particularly between husbands and wives. Both men and women participants cited shame and embarrassment as the primary reason for the lack of verbal communication on this topic:
  - In general, a woman is ashamed, from the very beginning, of people around her finding out that she is pregnant.
  - A woman is embarrassed to inform her husband that she is pregnant, particularly if it is her first pregnancy.
  - During the entire pregnancy, a woman will only discuss her pregnancy with her husband as a last resort: when she has a problem that she is unable to resolve herself, whether that be material, financial or health-related.
  - A man would rather discuss [pregnancy] and other problems related to sexual relations with a friend or someone other than his wife.

Husbands and wives were not only embarrassed to discuss pregnancy between themselves, but also women with other women, including their mothers-in-law, co-wives and friends. The lack of discussion at the household level about pregnancy can thus block information sharing between family members about high-risk pregnancies and warning signs. It can also inhibit the decision-making process necessary for the allocation of family resources and the adoption of behaviors beneficial to maternal health. Although women in the Koila sector desired maternal health services, one of the reasons they could not take advantage of them was that they could not initiate discussions and solicit the consent and financial support of their husbands, who are considered the heads of the household and the principal decision-makers about family matters in Malian culture. How then could a project hope to communicate with communities and promote the adoption of behaviors that are beneficial to maternal health if pregnancy itself was a topic that evoked feelings of silent shame and embarrassment among both women and men?

Let’s start discussing pregnancy: tapping into cultural resources

Health educators typically attempt to get people to change their behaviors by appealing to reason through arguments based on logic or practical issues. As evidenced by the low impact of many health IEC (Information, Education and Communication) strategies, however, this approach has not been effective. Traditional communication channels, including stories, songs, proverbs, praise-poetry and epics, provide an important alternative for health IEC strategies. These cultural resources offer the most direct path to sensitive topics and personal issues through people’s values, attitudes and motivations (Hale and Stoller, 1985; Mutasa, 1994) and can successfully promote behavior change, at both individual and social levels, by appealing to people’s emotions, by informing and educating them. For these reasons, and within the socio-cultural context described above, the project staff designed a maternal health campaign that utilized three traditional communication channels: (i) a traditional article of women’s clothing; (ii) a griot and (iii) a song.

The Green Pendelu

The little pagne (pendelu in Bambara) is a short cloth undergarment resembling a half-slip and worn underneath the clothing. According to social dictates, only married women can wear the pendelu, for in addition to serving as their intimate apparel, it is also used by a couple to wipe away body fluids following sexual intercourse. Although considered erotic clothing (much as a black negligee would be perceived in the United States), the pendelu, traditionally made of white cotton, has a far deeper cultural significance. It is both perceived as a symbol of marital roles, duties and privileges and interpreted as a non-verbal signal or cue for gender-specific attitudes and behaviors between husbands and wives. When a wife wraps the pendelu around her waist, the emotions associated with the act of wearing this traditional attire range from simply feeling womanly and attractive to feeling confident and in control of a situation that she is creating. A woman will wear the pendelu in front of her husband in the privacy of the bedroom, discreetly yet suggestively, because she
wears it to attract his attention, to arouse his desire, and to initiate an interaction that goes beyond the realm of sex. For when a husband notices his wife wearing a pendelu, he is reminded not only of his role as a sexual partner, but also as his wife’s advisor, protector, and provider. The sight of his wife wearing a pendelu makes a man feel virile, wise, strong, concerned and responsible. Women say that it is there, in the intimacy of the bedroom, with the pendelu wrapped provocatively around their waists or lying close at hand, that wives are most able to express their concerns and special requests, and husbands are most inclined to listen. The pendelu, a subtle yet powerful symbol, is consequently an effective traditional non-verbal communication channel used by married couples. It initiates both physical and emotional intimacy and signals in women and men culture-specific and gender-specific roles and responsibilities. Chiwome (1994), has demonstrated elsewhere that often, in Africa, the deliberate use of gestures and other non-verbal communication channels are an effective substitute for words, particularly in a setting where words would be inappropriate.

The project staff placed a special order with local tailors to produce three hundred pendelu to distribute during a pilot maternal health campaign. An important modification of the pendelu was to color-code this intimate apparel and dye the traditional white cotton fabric a brilliant green, to symbolize pregnancy and to signal the husband’s cultural role as protector, advisor and supporter. As Comaroff (1985) has noted, “blue and green, hues of rain, water, freshness and growth... are linked to activating power... (and) connote fecundity... Green specifically signifies origins or points of growth.”

The Griot

Griots are bards whose traditional role in Malian culture is a combination of oral historian, praise-singer and social mediator. Bakary Koita is a griot who has lived in Dioro-ville all of his life and is well known throughout the Dioro district. He is a member of one of the major griot families in Mali and learned his profession from his father. Accompanying himself on a traditional guitar, he is equally at ease with praise singing, storytelling, and singing new songs that he composes himself.

The decision to enlist Bakary Koita’s services for the maternal health campaign was arrived at through a good understanding of the griot’s role in Malian society. Griots have been recognized as social psychologists, mediators/conciliators, historians, artists, diplomats, possessors of supernatural, powerful forces, preservers of culture, and educators as well as entertainers. Throughout history, griots have consistently demonstrated their effectiveness as social catalysts, using the power of words to dramatically influence people’s behavior through their emotions (Conrad and Frank; Hale and Stoller; Finnegan; Johnson; Okpewho; Peek; Sienaert and Cowper-Lewis).

Knowing the names, family history, personalities and even the mundane affairs of nearly everyone in the community, griots enjoy the socially-sanctioned privilege of being able to say directly to anyone what no one else in the community would dare to say, regardless of an individual’s age, gender, ethnicity or social standing. Griots use personal charisma and the power of words to mediate social relations between members of the same family, between neighbors, and even between communities. In Mali, only a griot could effectively promote discussion of the sensitive topics of pregnancy and the pendelu in both the public and private spheres without being considered obscene or inappropriate by rural communities.

The song

Over a period of two weeks, Mr. Koita worked with the project staff to compose a song that educated people about maternal health care and also promoted the intended use of the green pendelu, following a technical outline developed by the project staff, which contained key maternal health care messages. The technical outline also called for the promotion of the green pendelu as a symbol of pregnancy and couple communication and identified husbands, wives and wives’ mothers-in-law as target audiences for the song. To counteract the shame, fear and helplessness described by both men and women in the focus group discussions, the project staff also requested Mr. Koita to associate the appearance of the green pendelu with feelings of happiness, pride, responsibility and confidence. The primary objectives of the song were to(i) inform married men, married women, and women’s mothers-in-law about high-risk pregnancies, warning signs during pregnancy, and risk-reduction behaviors; (ii) increase communication about pregnancy and maternal health care at the household level, particularly between husbands and wives; and (iii) increase pregnant women’s utilization of the maternal health care services and facilities offered by qualified providers.

The Maternal Health IEC Campaign

Africare conducted a pilot maternal health IEC campaign in seven villages in the Koila sector of the Dioro district to test the effectiveness of the traditional media. A total of 600 adults (three hundred men and three hundred women) participated in the campaign. The campaign format consisted of men’s and women’s assemblies during which maternal health information was communicated by staff, and facilitated by “modern” media, such as videos, flipcharts and badges, as well as by the three identified cultural resources. During the women’s assemblies, the project staff distributed a total of three hundred green pendelu to all married women of reproductive age in each of the seven villages.

Impact

The project staff conducted an evaluation three months after the campaign to measure the impact of the green pendelu and other communication channels used during the behavior change communication campaign, including the song written by the griot, the video, and a badge promoting the project
community-based activities. The project’s final evaluation Knowledge-Practice-Coverage Survey further measured the impact of the IEC campaign.

The impact evaluation consisted of a survey of 320 people, including 205 individuals who had participated directly in the various activities of the campaign and 115 who had not participated. The sample included 130 married women of reproductive age (referred to as wives), 127 married men (referred to as husbands) and 63 older women with married sons (referred to as mothers-in-law). The average age of respondents was 36.5 years.

According to the survey results, the campaign dramatically increased the level of communication between husbands and wives concerning maternal health; overall, 65.5 percent of all survey participants said they discussed pregnancy and maternal health issues after the campaign. Prior to the campaign, approximately 3 percent of the population had discussed maternal health with their spouses.

Among all of the means of communication used during the campaign, the green pendelu was the element that the participants found the most interesting (83.9 percent). A total of 94.4 percent of survey respondents had heard of it.

Remarkably, 85 percent of those interviewed who had not participated in the campaign had heard of the green pendelu, indicating a rapid and effective spread of this innovative concept. Indeed, the impact evaluation indicates that although only 600 people (10 percent of the population over the age of 15 years) had participated in the IEC campaign, nearly 5000 people (89 percent of the population) had seen or heard about the green pendelu three months later. Nearly all of those interviewed knew that the green pendelu represented pregnancy: 89.9 percent of husbands, 79 percent of wives and 76.9 percent of mothers-in-law.

The IEC campaign led to more positive attitudes and behaviors related to pregnancy at the household level, including husbands supporting their wives by reducing their workloads, improving their nutrition, and urging them to seek medical attention and maternal health services.

The evaluation survey results indicates that the innovative use of traditional communication channels was not only effective in promoting non-verbal and verbal communication between husbands, wives and mothers-in-law, but also facilitated social change. Pregnancy is no longer a taboo topic in the Koila sector, and indeed, discussion about pregnancy and maternal health care is now a common occurrence at both the household and community levels. In the year during and after the awareness-raising campaign, the project surpassed its objective of assuring that 60 percent of births were assisted by a trained birth attendant or health care professional, up from less than 20 percent at the beginning of the project. Approximately 77 percent of births were assisted and more than half of pregnant women sought prenatal consultations.

Conclusion

The green pendelu was an ideal innovation within an indigenous knowledge system because its cultural meaning and use were already well understood in the project area. All that was necessary to explain was the meaning of the color green (pregnancy) and to associate it with specific actions beneficial to maternal health. Although the meaning of the green pendelu was new, the setting (bedroom), circumstances (physical and emotional intimacy), users (wives) and intended audience (husbands) remained the same as those for the traditional pendelu. Accordingly, women in the Koila sector easily adapted to wearing the green pendelu during pregnancy because they used a familiar “body technique”.

In addition, the role of the griot was crucial: “...it is precisely because the bard... conveys a tradition which goes back many centuries that he may be able to contribute in a rather unique way to the kinds of social changes most needed for the survival of many African peoples today. (Hale and Stoller, 1985)

Of the various media and methods used to inform, educate and communicate about pregnancy and maternal health, the DCSP impact evaluation survey showed that the three traditional media were by far the most remembered by the communities. Nearly all respondents remembered the green pendelu, the griot, and the song. Hence, although pendelu, griots and songs are traditional channels of communication in Mali, their utilization can be effectively innovated to adapt them to modern needs. Mutasa (1994) draws similar conclusions in his discussion of the modern use of old proverbs in South Africa: Changing times and situations require solutions which the traditional forms can no longer supply. However, it is often sufficient to adapt an antiquated item to a modern context or constructions. This process of innovation becomes a living proof of continuity of the traditional forms.

Many development projects tend to ignore or undervalue cultural resources, turning instead to new technology and “modern” resources. Africare’s maternal health IEC campaign in Dioro, Mali, illustrates the potential that indigenous knowledge and other cultural resources have for contributing to the health and welfare of rural communities in Africa.

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