


'Disabled motherhood in an African community': Towards an African women theology of disability



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The politics of culture, motherhood and mothering in some African communities highlight the tensions that exist in the broader feminist theology agenda. There are emerging politics between the able and disabled feminist theologians where the binary of ability or disability is ambiguously theologised. Written from a feminist theology of disability, this qualitative study sought to understand and describe the struggles women with visual impairment face to be accepted as being fit for motherhood. Emerging qualitative themes are used to develop towards an African women theology of disability that responds to the plight of women with disabilities. The findings indicate that women with disabilities are constantly challenging and protesting ableism perceptions of motherhood by falling pregnant, giving birth and nurturing their children. They argue that the binary perceptions of ability and disability are informed by patriarchal ideologies and able-bodied women's fears of being associated with the vulnerability of disability.

Introduction and background

Among the Ndebele of Matetsi, Mberengwa in Zimbabwe, motherhood is a feminine instinctive and it is an obligation for women to have biological children to love, cuddle, embrace and nurture. Akujobi (2011) asserts that different African societies wrap motherhood in different cultural and religious meanings. Motherhood is culturally and religiously constructed by society that defines the 'who', 'what' and 'how' of motherhood, perceiving it as sacred and a religious duty (Oduyoye 1999). Some faith communities believe that God commanded Adam and Eve to multiply on earth. As a result, those who cannot conceive are forced to go through medical, religious and cultural interventions to try and conceive a child to fulfil their motherhood role (Oduyoye 1999). Women who cannot conceive their own children, particularly in Western contexts, are encouraged to adopt children to experience motherhood. Among the traditional Ndebele marriages of Zimbabwe, a husband's brother is ordered to help his brother conceive by having consensual sex with his sister-in-law until conception takes place if it is believed that the husband is the one who is infertile. In contexts where it is assumed that the wife is infertile, polygamy is suggested, or a young sister or niece is instructed to come and help her aunt bear children for the husband. This is to enable the infertile woman to experience motherhood. This is no longer common in some African communities, but traditional families among both the Ndebele and Shona of Zimbabwe still practice it. However, women with disabilities (WwDs)¹ are not included in this practice. They are not even allowed to be mothers or wives. The fertility of WwDs is questioned, contested and damned, because an ideal mother is expected to conform to norms of femininity where she is ever physically active in the nurturing of her children. WwDs among the Ndebele of Matetsi are treated like the 'no bodies' of the family. It is believed that ancestors cursed the family by disabling the child. As a result, that child is always confined within closed doors and when matured to manhood or womanhood, they are not allowed to engage in sex or fall pregnant, because they are considered as 'ancestors' project'. It is ancestors who know the future of a family member living with a disability. As an 'ancestor's project', people with disabilities among the Ndebele of Matetsi are prohibited from living a normal life. A woman with a disability cannot have her own biological children, let alone get married. Disability scholars such as Asch and Fine (1988:3) argue that 'having a disability [is] seen as synonymous with being dependent, childlike and helpless' which contradicts the societal view of the motherhood role. Women are constructed as 'able' or 'disabled' to be mothers.

It is important to note that there is limited research about motherhood and WwDs within an African context from a theology perspective, particularly from the practical theology discipline. African women theologians, particularly the Circle of Concerned African Women

1.The abbreviation WwDs is used to refer to women with disabilities throughout the article.

Theologians (hereafter Circle), did not do much research on WwDs and motherhood. As a result, some of the literature in this article from African women theologians and African feminists on WwDs may appear outdated. In my opinion, this only highlights the need for an up-to-date research about motherhood and sexuality politics among WwDs in the African women practical theology's agenda. Lack of literature from African feminists and women theologians on WwDs force this article to depend mainly on Western literature.

Women with disabilities and the African women theology's agenda

Generally, African women theologians, particularly the Circle, are guilty of silencing the plights of WwDs. I do not know the reasons for this silencing, and an empirical study should be conducted to find out. However, I can generalise and say that maybe it is because the majority of the members of the Circle are not affected by disability. I say this because when I presented this paper in a practical theology conference in South Africa, one of the women listening to my presentation requested to see me after the session. Her concern was my interest on disability when I have no physical disability. She suggested that I should let the disabled speak for themselves when she said:

you are now like western and white women who want to speak for African black women by hiding behind sisterhood, when they do not have any experience of what it means to be an African black woman. (anonymous female delegate 18 January 2018)

I was rather offended and hurt by my sister's ignorance on the intersections of women's oppressions to disability. In explaining my interest on disability, I reminded her that the pain of one woman is the pain of all. I may not look physically as a person living with a disability, but I am in many ways. I have experienced disability as a woman in a heteropatriarchal, racially violent society as well as a black migrant woman. In this explanation, I was trying to convince my sister that disability is a social construction as much as all women oppressions are. Thus, this article's focus is on disability as a social construction where I argue that it is high time we live in a Circle and hold hands in the fight against social constructions that oppress women both in theory and practice. We do not need to discriminate against each other, because that delays our assignment in the fight against patriarchy. Ayanga (2016:n.p.) rightly puts it as she argues that 'the Circle has been and continues to be the voice for and on behalf of the African women in religion, culture and theology, especially at the grassroot level'. Although this is one of the key objectives of the Circle, silences on WwDs' oppressions is deafening. One may argue that the Circle includes WwDs in their writings, because their writings reflect the pains of any oppressed person who is a victim of discrimination.

The Circle has in the past years significantly identified HIV and AIDS, women and culture, women and the Bible among

other social issues as matters of urgent concern.² Although massive research is done on the above themes, African WwDs' experiences of culture, HIV and AIDS, and religion are lacking. This is visible across all theology disciplines including practical theology. Feminist theologians with disabilities such as Wilhelm (1994), Eiesland (1994) and Elshout (1994) condemn able-bodied feminist theologians for carelessly articulating their strengths or identities in terms that belittle groups who bear undesirable traits. Gill (2002) argues that debates about the body are largely on its physical nature such as how it is formed by culture and history rather than how being in actual bodies, forms culture and history. The Circle, particularly the work of a feminist practical theologian, Denise Ackermann (2008), discusses the intersection of stigma and the body to HIV and AIDS. Ackermann (2008) argues that the female body is:

not only diseased but it also becomes the focus of stigmas ... Ignorance, prejudice, stereotypes, issues of power and dominance all conspire to stigmatise sufferers and in so doing to label them and to distort their true identities. (p. 117)

Ackermann's feminist theology of praxis (2005) is critical in this article, because it highlights:

challenges faced by women and all marginalised people in their traditions and religious institutions ... [And] is concerned with the tension between theory and praxis, between what we believe and what we do about what we believe. (p. 386)

Ackermann's argument summarises my interest in the disability of women in African spaces.

Conceptions of motherhood

Motherhood is criticised by some scholars for serving the traditional ideology and conceptions that oppress women (Grenholm 2005). Rothman (1994:140) argues that 'motherhood in a patriarchal society is what mothers and babies signify to men'. Some feminists perceive motherhood as oppressive to women, because it enforces women's productive and reproductive roles as governed by men. Simone de Beauvoir, in her book *The Second Sex* (1949 [1997]), was among the first feminist writers to discuss motherhood and the prevailing views of motherhood. She rejects the idea that women have an instinctive urge to be mothers or an innate maternal instinct. According to her, the feelings of a mother towards a child depend entirely on the circumstances under which she finds herself pregnant. She argues that the idea that all women want to be mothers or that they are naturally good at motherhood is an ancient patriarchal restriction. De Beauvoir recognises the value of motherhood only if it is undertaken through genuine choice. As a result, De Beauvoir claims that motherhood is not about the politics of the body, but an issue of choice. Adrienne Rich (1976) built on De Beauvoir's discussion of motherhood to critically discuss motherhood as an experience and institution of women. Motherhood as an

²The Circle published a series of publications on African women and HIV/AIDS. Culture, religion and other social, political and economic issues were identified as the factors that increase women's vulnerability to HIV infection.

experience is, in Rich's view, 'mothering' which is the relationship to and power that every woman has over her reproduction and children; thus, motherhood, as an institution, is shaped by patriarchal conceptions of women. Rich argues that women's bodies are silenced and are at odds with the patriarchal expressions and misrepresentations. Sara Ruddick (1989) developed Rich's philosophy on motherhood further by discussing motherhood from the viewpoint of maternal thinking. According to Ruddick, mothering is a type of caretaking activity and a mother is a primary caretaker of her children. For her, women's participation in mothering constructs facets of identity that would not be constructed without participation in the activity. Maternal, for Ruddick (1989:17), involves three activities, namely preserving the life of the child, promoting the growth of the child and training the child towards the goal of social acceptability. These activities require physical, psychological and emotional strength and are significant in African contexts. Ruddick's thinking is critical, because, for her, maternal thinking is not gendered; anyone, including men, can contribute. As a result, she advocates for the thinking of men as mothers. Motherhood, mothering or to mother a child encompasses engaging in an intellectual endeavour: 'the work of mothering demands that mothers think; out of this need for thoughtfulness, a distinctive discipline emerges' (Ruddick 1989:24). Mothering, for Ruddick, explicitly refers to the 'thinking work carried out by mothers' due to the demands of preservation, growth and training the child. Thinking does not necessarily require physical strength and therefore WwDs can easily perform this role. On the other hand, in some African contexts, motherhood and mothering encompasses the physical strength more than emotional strength where pregnancy, preserving the life, promoting growth and training the child for social acceptability is both emotionally and physically demanding.

In African contexts, motherhood is celebrated through the fertility of men and women. Thus, motherhood is valued by every community, particularly women in that it enables them to gain some social respectability (Dube 2007; cf. Kolawole 1997). African women do everything they could to protect their motherhood (Dube 2007). According to Oduyoye (1992), for the Akan people, child birth is celebrated, because it confirms the return of ancestors and this increases the value of a woman who has given birth by the community. Motherhood for African women is a God-given role and therefore it is sacred (Akujobi 2011:3). According to Kasomo (2010:129), 'motherhood is a "traditional" way of defining the woman status since a woman is woman only if she is mother'. A childless woman in African contexts is deprived and destitute. John Mbiti (1970:144) asserts that a barren woman is seen as the 'dead end of human life, not only for genealogical level but also for herself'. As a result, barren women are stigmatised and dehumanised, while those who give birth, particularly to many mainly male, children are highly regarded. Oduyoye (1999), writing from her experience of being childless, confirms that motherhood is an important aspect of an

African woman's life. She narrates that, as any African childless woman, she felt spiritually and emotionally disconnected from the community, but she lived in between hope to have her own biological child and despair due to shame associated with childlessness among African women. According to Oduyoye, this should not be an approach to be used for being childless despite the value of motherhood within African communities. In the Matetsi community, motherhood and mothering is linked to age: all women who are in the age of motherhood are referred to as *omama* (mothers). This makes motherhood both a social and natural construction. Women who reach the age of motherhood, particularly 23 years and above, are mothers. However, those who do not have biological children are often encouraged to follow traditional means of conception such as asking young sisters or nieces to conceive on their behalf by having intercourse with their husbands. If the family suspects that the husband has a weak seed or sperm, his younger or older brother is instructed to help him conceive by sleeping with his wife. The primary idea in all this is to give a woman an opportunity to mother her own biological children and to protect the family lineage by discouraging the woman from bringing in children who do not have ancestral blood in quest for motherhood and securing her marriage.

For African communities, the conception and time a woman spends carrying a baby in her womb, sharing food, joys, sorrows, blood and heartbeat is special and symbolic. Among the Ndebele, when a woman gives birth she says, *sengizizalele umngane wami weqiniso* [I have given birth to an honest friend of mine], because the belief is that a child never abandons his or her mother no matter what. Those who abandon their mothers are said to be bewitched and under a spell. According to Makinde (2004:166), motherhood is a source of women empowerment in the Yoruba culture of Nigeria. Among the Ndebele of Matetsi, motherhood is an achievement and source of liberation, because the one who has given birth is believed to be rich socially and economically. The belief is that a mother's children will look after her when she is aged. Thus, children are precious, because it is also believed that they connect the woman with the ancestors of the matrimonial family. A child is believed to be a gift from the ancestors. Motherhood gives women power over her offspring and the whole lineage, because she has given the lineage permanency. Written from a feminist theology of disability, this article seeks to describe the struggles women with visual impairments face in some African communities to be accepted as fit for biological motherhood. The article uses these women's struggles to develop towards an African women theology of disability. Firstly, I start by discussing the theoretical framework underlying the article. Secondly, I discuss the methodology used in the article. Thirdly, I tease out the emerging themes from participants who describe their experiences where society deems them unfit to be biological mothers. Fourthly, I develop towards an African women's theology of disability from the experiences of participants. Lastly, I present concluding remarks.

A feminist theology of disability and methodological considerations

A feminist theology of disability was conceived by women theologians with disabilities who felt discriminated against within the broader feminist theology movement. Elshout (1994:99) says she called for a roundtable discussion 'in order to define the experiences of WwDs as an important *locus theologicus* within feminist theology and the *ekklesia gynaiikon*'. She argues that there is a power struggle between able-bodied women and WwDs. According to her (Elshout 1994:99), 'the differences of power between women and the fact that the experiences of WwDs go unnoticed due to "blind spots" of both the feminist movement and feminist theology' call for critical reflection. The broader movement of feminist theology overlooks the challenges faced by WwDs in their patriarchal assignments by silencing the voices of WwDs. Wilhelm (1994:106) argues, in relation to referring to women with bodily impairments as women living with disabilities, that she rather perceives herself a 'differently abled woman', because, referring to bodily impairment as disabled, complicates the patriarchal assignment by casting bodily impairment as the embodiment of sadness and suffering. Miller-McLemore (2013:744) criticises theologians for talking about embodied theology and embodied knowing, and ignoring the body itself or what it means to know in and through maternal bodies. Embodiment is discussed in terms of dualism between the body and soul, flesh and spirit, body and culture (Miller-McLemore 2013). In a context of disability, the body is understood from a physical being of ability – disability dichotomy, leading to generalisations about bodies with disabilities in connection with sex, motherhood and mothering.

The broader feminist movement is complicit in the persecution of WwDs' sexuality, motherhood and mothering capabilities. Elshout (1994) argues that:

feminists who criticise the traditional sex roles of wife and mother are not sensitive to the fact that WwDs are taught from a very early age that they are not fit to be a lover or wife, let alone mother. (p. 100)

Thus, a feminist theology of disability seeks to campaign for and highlight the struggles of WwDs that are perpetuated by able-bodied women in partnership with patriarchy. In addition, this approach highlights that WwDs are affected by gender injustice more than able-bodied women. This theological framework is relevant in this article because of its focus on activism and reflections on a wide range of material practices involving the body and its materiality, politics, lived experience and relationship to subjectivity and identity (Garland-Thomson 2011). A feminist theology of disability exposes the biases and understandings of women's positions as women in a male-dominated society and as women living with disabilities in a society dominated by able bodies (Creamer 2010; Eiesland 1994). Significantly feminist theology of disability intersects with feminist theology of praxis where

analysis of disability through theory and practice is through the lens of feminist theology.

The aim of this article is to describe the struggles African women with visual impairments face in communities to be accepted as mothers and to use these women's struggles to develop towards an African women theology of disability. It draws from qualitative data derived from life history narratives conducted in Johannesburg with three refugee women with visual impairments under a research project titled: 'Gender-Based Violence among Women and Girls with Disabilities in Relation to Sustainable Development Goals in South Africa'. That project recruited 12 women and 44 girls with disabilities from Johannesburg and Kwa-Zulu Natal through purposive sampling. Ethical clearance for the project was granted by the Department of Health Studies in 2016. Participants were briefed on the significance of ethical considerations of research such as true informed consent, identity protection and confidentiality before the commencement of data collection. This article reports on the experiences of three refugee WwDs residing in Johannesburg from a Ndebele community in Zimbabwe who participated in the broader project. This article does not report on the migration experiences of these women, but the experiences of disabled motherhood. Data was collected through life history narratives where participants narrated their experiences of living with a disability in their Zimbabwean communities. This approach of data collection is a form of in-depth interviews that allows participants to narrate and symbolise their lived experiences through storytelling. Participants were interviewed individually. While conducting interviews, I requested to observe participants' day to day living conditions and their daily routine, and I was granted permission by all participants. I therefore kept a diary throughout the research process to record new observations. In the diary, I recorded particularly the living conditions of participants, their interactions with the significant other such as their children and partners as well as with the public. The narratives were audio-recorded and each interview lasted 45 minutes per session. I conducted four sessions per participant. The process of data collection lasted for 6 months to enable me to gain deeper insights of each participant. For this article, I use data where participants narrated their stories on how their families contested their ability to be mothers due to their disability. Data was analysed by using thematic analysis.

Findings

Written from a feminist theology of disability, this article reveals that WwDs' motherhood and mothering capabilities are often challenged by institutions, the community and society. The challenges emerge from the politics of ability and disability where the body with a disability is acquainted with pain, vulnerability and disappointment (Elshout 1994:104). As a result, the following excerpts highlight WwDs' struggles to be accepted as fit for motherhood in their families and communities. Findings indicate that WwDs are often disabled by those who question their ability to fall in love, engage in

sex, get pregnant, give birth and nurture children. Most of the following data emerges from follow-up life history narratives with the three participants. Findings of this article cannot be generalised to the whole disability community, because I only use a few snapshots from the data to discuss how motherhood and mothering capabilities are often challenged by different groups in society. Zoey said:

I was born in Filabusi, Zimbabwe ... So when I fell pregnant at 24 years of age, I was reminded by my mother and aunts that I am a burden and now I want to add another burden; they ordered me to abort, but I wanted my child, so I decided to keep my burden, however, I did not enjoy any of my pregnancies or the birth of my children like other women. I was even afraid to cuddle my baby in front of the family, because to them as a burden, I was cuddling another burden. (In-depth interview 12 February 2017)

Tammy said:

I am from Matetsi, Zimbabwe ... When I fell pregnant at 20 years of age, my family called a traditional healer to come and appease my ancestors and after that abort the pregnancy. When I asked them why? They said I am bringing a curse to a family by being pregnant. I was told that our tradition does not allow a disabled woman to fall pregnant and give birth, otherwise the whole family, including the extended family, will be cursed by giving birth to disabled children. They also raised issues of who will take care of my child since I am disabled ... They also said since I have a disability, I may give birth to a disabled child adding a burden to the family. My partner persuaded me to run away and we came to South Africa and gave birth to our son. It was also not easy in South Africa, nurses constantly wanted to abort my baby and spoke about sterilisation when I went for antenatal classes. (In-depth interview 19 February 2017)

Lily said:

I am from Matetsi, Zimbabwe ... I was forced to abort my first pregnancy, I was 19 years of age and did not know that the concoction that my mother and aunt gave me was meant to abort my pregnancy. When I fell sick, my mother and aunt suspected that I was pregnant. They were very angry; my mother said: 'This kid wants to bring another curse in the family; how can she become pregnant when she knows that she is disabled; who is going to take care of her baby, she won't be able to mother a child'. In response my aunt said: '... if we allow her to keep this pregnancy, the ancestors will be angry and punish us by giving us more disabled children'. I stayed a week trying to understand that conversation. When my sickness continued, my aunt and mother saw it as the best opportunity to give me a concoction to abort my pregnancy. I did not know that it was dangerous for pregnancy, so after drinking I lost the pregnancy. When I fell pregnant the second time, I was 22 years of age; so I ran away and went to the city. I made friends and we decided to come to South Africa. In South Africa I suffered, trying to fit in a foreign country with my pregnancy, and without my mother I was called all derogatory names because of my pregnancy and blindness. People at taxi ranks, clinics and all public places that I went to, asked me silly questions such as: how did you become pregnant since you are blind; who will take care of you and the baby. Women were very mean and they will say: 'these disabled women love sex like animals thus why they fall pregnant'. Nurses also shouted at me for being pregnant and encouraged me to give up the baby for adoption and do sterilisation ... It's not easy to be blind when everyone judges you. (In-depth interview 26 February 2017)

Discussion: 'Disabled motherhood'

According to above excerpts, motherhood for WwDs is disabled by a variety of factors that include fear of ancestors, and disability phobia (politics of the body).

Fear of ancestors

It seems that motherhood is linked to ancestors who decide who can be a mother and who cannot be. Ancestors also influence the ability and disability of the body. As Davidson and Stache (2016:n.p.) aptly argue:

discourse about the body is persuasive in that rhetorical constructions help a public make sense of bodies based on ability, or lack thereof. Public discourse continuously shapes and re-shapes body rhetoric by invoking arguments about the body.

The two participants, Tammy and Lily, were discouraged from being mothers, because families feared the wrath of ancestors. In African communities the living and the dead are connected. As a result, the dead (ancestors) use supernatural powers over the world of the living either to bless them or curse them (Ekore & Lanre-Abass 2016:370). It emerges from participants that families believed that disability is a curse by ancestors; thus, so by allowing a person living with disabilities to give birth, the curse was going to multiply. In a context of disability, families continue to check for answers from the ancestors on what caused the disability; thus anything happening to a person with a disability is scrutinised by the family. Women among the Ndebele believe that it is their responsibility to keep ancestors happy. They do everything in their power to protect the family or community from the wrath of ancestors. They do this by respecting the rules of ancestors. In Africa, ancestors are respected, honoured and, at times, feared and rejected. When families, particularly women, discourage WwDs from mothering children, they are influenced by their fear or respect for the ancestors. In other words, the challenge is not the ability of the body to perform motherhood duties, but it is the fear of the supernatural powers that are believed to have caused the disability. Among the Ndebele of Matetsi, a person living with disabilities is an ancestral project. It is presumed that a person living with a disability is used by ancestors to convey a message of hence. Hence, pregnancy and giving birth to a child by a woman living with disabilities is believed to be a curse and disrespect of the ancestors who may respond by punishing the whole family. It is women who protect this tradition by forcing a woman, living with disabilities, to abort.

Disability phobia: Politics of the body

Underlying the narratives of the participants, it emerges that able-bodied women seem afraid of a body that is different from theirs. Their phobia of disability is that a body with a disability may struggle to perform certain functions of motherhood. This emerges from all participants. The disability, which often is seen as a limitation to certain capabilities, is critiqued by feminist scholars of disability such as Elshout (1994:101) as an obsession with purity where, in this obsession, women are declared unfit to participate in a

male society. As a result, all efforts are made to make them invisible and incapable of participating. This obsession becomes worse if a woman has a disability where both men and able-bodied women team up in making WwDs unfit to participate in an able-bodied society. Wilhelm (1994) rightly argues that able-bodied:

feminists want to be fit, whole, independent, and in control of their bodies. These are aspects that are largely denied to differently abled women. Feminists wish to be what differently abled women are not. Thus, we [as WwDs] not only bear the weight of their fears, but we also cannot be feminists given their definition. (p. 106)

All participants were discouraged from being mothers by able-bodied women in their families and able-bodied women who interacted with them daily. What these women have in common, is their ability to be mothers, and to undertake motherhood and mothering, while society forcefully deems them unfit. Their narratives highlight the fact that WwDs' struggles with motherhood, and are linked to the politics of domination and power where humanity is defined as 'us and them or different from us'; where 'otherness means less than or worth less than' us (Clapton 1997:424). Kent (2002) highlights this in narrating her experiences in the hands of health professionals who questioned and challenged the competence of a blind woman to mother, nurture and care for her baby.

The comparison of WwDs' motherhood and mothering capabilities with able-bodied women is, I believe, enforced by 'embodied peculiarities'. It is an uncontested truth that women without physical disabilities can also struggle to perform their physical motherhood roles and capabilities. As a result, one cannot use physical limitations as unique to human experiences of motherhood and mothering. Participants in the study highlight that motherhood and mothering are challenged and questioned, owing not only to the physical limitation that is caused by the physical disability of visual impairment, but it is a matter of control and power. Able-bodied women want to control their body and those with a different body by dictating how such bodies should function in society. Wilhelm (1994) observes from an insider-outsider perspective that challenging one's 'ableness' by drawing from physical limitation, is a form of colonisation where power is used against those who are deemed different. She argues that society, particularly able-bodied feminists and women, create some form of undesirable image of disability, because they believe they know what disability is and means. She (Wilhelm 1994) says:

Don't believe you know anything about me. I own all information about me, and no one is allowed to take definition-power over my life or appropriate me, or make me a thing. Without a reciprocal, respectful coming together, we will remain invisible to each other. Your images of normalcy or of my suffering actually cloud your vision. What you see when you meet me are your fears, your hurts ... My soul has been colonized by images that promise happiness, love and the possibilities of forming the world – if one is young, beautiful, not differently abled, white, rich, that is, just 'normal'. Let's not colonize each other. Let's try to make no more images in respect of creation. (p. 108)

One can argue that Wilhelm's argument 'from an insider perspective' is potent and justified by the feminist dictum: *the personal is political*. Wilhelm's argument helps those without physical disabilities to start reflecting from the politics of those with disabilities. This helps us as women referred to as *abled* to accept the embodiment truth of motherhood and embrace our own embodiment ambiguity and invisible disabilities. As a result, feminist theology should be inclusive enough to address the needs of those who are not able-bodied.

'Disabled motherhood': Towards African women theology of disability

Although there are contestations about the feminine intuitive of motherhood, the participants in this study highlight that it is a complicated, political issue. It is significant to note that the insider-outsider politics makes it difficult to reflect critically and openly on issues that do not explicitly affect the author. Although that may be the issue, feminist theologians of disability such as Eiesland (1994) who perceive disability and ability as only temporary, challenge all people regardless of ability or disability to reflect on issues of disability. According to Eiesland (1994:116), holding our temporarily bodies with and without disabilities together, reveals that we are collectively 'a body in trouble'.

The experiences of the participants highlight that cultural and religious constructions are often used to disable their motherhood. The discrimination against women's bodies challenges us to politicise the disability of the body in the context of motherhood. This can be done by reflecting on stories of women who have experienced discrimination in motherhood due to their disability. Kent's (2002:83) reflections on her experiences of discrimination from adolescence to adulthood, highlight that pregnancy enhanced her inclusiveness in the motherhood role as she argues that her 'pregnancy proved to be a common bond with women of all ages'. Oduyoye (1999) writes from an African woman theologian's perspective as she unveils her struggles for biological motherhood in her article titled, 'A coming home to myself: The childless woman in the West African space', by using her lived experience of infertility in an African context. Her struggle reveals that motherhood is disabled by many factors that include infertility or total hysterectomy. For WwDs who are not able to conceive naturally or forcibly, experience double disability, namely that of infertility and their body impairment constructed by society as incapable for motherhood and mothering roles. This challenge 'able-bodied' women to take issues of disability in their theological reflections seriously. The dominant ableism politics of motherhood is ambiguous regarding the female body, because it ignores the biological factors that may disable motherhood. In different Southern African contexts, women are important community members because of their biological ability to give birth to children and nurture them. Thus, as it emerges from data, an African women theology of disability should address the misconceptions of motherhood

by conceptualising motherhood from significant African principles such as *community, valuing of every woman's fruitfulness and solidarity*.

Motherhood and community

The role played by women in nurturing their children is important. African communities are guided by the communal principle in their day to day community functioning. Sayings such as 'it takes a village to raise a child', are strongly implemented in mothering. A mother is any woman in a community and as a result, pregnancy, child birth and nurturing are a communal responsibility. Thus, a pregnant woman is cared for by all community members. When a pregnant woman is craving certain foods, women in the community are expected to provide for those cravings. Among the Ndebele of Matetsi, if a woman craves amasi [sour milk], those those with cows are obliged to provide milk. If the craving was for vegetables, those with gardens are obliged to provide vegetables. Every person participates directly or indirectly in the pregnancy journey. The same process happens when a child is born, and all the community members contribute and participate in caring for the newly born baby and nurture him or her until he or she reaches adulthood. Thus, any adult in a community may discipline or correct the child (Amos 2013). As a result, the disabled motherhood of WwDs is not justifiable from an African context. An African women theology of disability campaigns for a community-oriented motherhood where motherhood is not about performance, but a sense of responsibility by the community.

Clearly the disabling of WwDs is a matter of what Judith Butler (1990) calls 'performative accomplishment' which is linked to maternal care. According to Butler (1990), gender constructions, including motherhood, are linked to the extent of performance. Thus, the barrier to motherhood is not the disability of a woman, but what society perceives of her in performing her tasks. This also emerges from Kent (2002:85) who argues that, as a new mother with visual impairment, she experienced pressure to perform motherhood functions.

The politics of motherhood that emerges from the participants' responses to those who disable their motherhood, indicate that motherhood is neither about performance nor is it biological politics; rather it is ontological. This deconstructs the cultural and religious constructions that, having a child when you are living with a disability, invites the wrath of ancestors. Ontological motherhood in African contexts is supported by the existence of community where motherhood and mothering are made possible by the support a mother receives from a community. Community is a central concern for African women theologians (Kasomo & Maseno 2011; Siwila 2015), particularly feminist theology of praxis as conceptualised by a practical theologian, Denise Ackermann. Community questions the power relations in personal and institutional arrangements. The communal concept emphasises what Miller-McLemore (1996) refers by writing from the context of pastoral practice as a 'living human web', arguing that life is interconnected. Miller-McLemore's thinking challenges the

community to engage in a dialogue and to question oppressive ideologies that affect the marginalised in communities. Her idea of the 'living human web' is critical in conceptualising an African women theology of disability, because it embodies equity and egalitarianism in communities. In African women theology of disability, there is no 'them and us'; there is no fertile and infertile; and there is no women and men – all are interconnected. Siwila (2015:70) argues that Mercy Oduyoye, despite not having biological children, realised her motherhood through the community that surrounded her and referred to her as 'mama Mercy'. Oduyoye (1999:119), herself remarks that 'I have no biological children ... but I have children'. Africans emphasise the community as a key to life and the existence of humanity (Msomi 2008). According to Navone (1989:24), human beings are communitarian by nature, and are conceived and born in and through human community where life is interdependent. Black's work on the 'Inclusive God' (1996:34) is helpful in developing an African women theology of disability as she says: 'we are all interconnected and interdependent upon one another so that we do affect the lives of others and the earth itself'. African women theology of disability strives to grant all women with or without disabilities a space to devise solutions towards social transformation, responsibility and solidarity where all are equal. Ackermann (1992:22) refers to this as the 'praxis of right relationships'. A liberated and empowered community can work in relationships and share responsibilities of pregnancy, birth, child caring and nurturing. This allows women with visual impairment to enjoy their motherhood roles in participation with the community.

Motherhood and the valuing of every woman's fruitfulness

An African women's theology of disability embraces and respect the fact that African women value their fruitfulness. Participants' narratives highlight that the disabling of WwDs' motherhood undermines the fruitfulness of people with disabilities. In African communities, childlessness is perceived as a curse and childless women are given derogatory and dehumanising names. According to Mbiti (1970:144), a childless woman is not considered a complete woman and she is seen as 'a dead end to human life' - meaning the disabling of WwDs' motherhood is dehumanisation. Although not addressing motherhood and disability, Oduyoye acknowledges that the perceptions of childlessness in some African communities dehumanise and affect the faith of women who are childless. She, however, establishes that motherhood should be celebrated and embraced irrespective of one's condition. According to Oduyoye (1999):

For me childlessness in the West African space has been a challenge – to my womanhood, my humanity, and my faith ... [i]t is for the church to acknowledge and raise up the diversity of God's gifts and to celebrate all the ways of bringing forth life. My concern is for a theology of procreation that responds to this challenge, a theology and eschatology that will speak to both those who reproduce themselves biologically and those who do not, a theology that embraces forms of fruitfulness, biological and beyond. (p. 119)

Oduyoye's argument is significant to the ability–disability dichotomy of motherhood. This also shows that there is no justification for refusing to allow a person to be a mother or to mother children, because, in Africa, womanhood and all forms of fruitfulness are celebrated and embraced. Thus, all African women are naturally mothers even without giving birth to their biological children. From an African women theology of disability perspective, motherhood is natural and inherent for all women as co-creators with God. Ackermann (2007:19) rightly argues that praxis should be informed by the feminist hermeneutics in such a way that justice is done to oppressed women. For African women, motherhood is not merely carrying a child in the womb and physically nurturing her or him; it is the emotional, spiritual and physical attachment that builds up through nurturing the child and creating a lifelong bond that cannot be broken, even by separation or death. Participants in this study highlighted it that, although their motherhood capabilities are contested, they continue to define, redefine, develop and shape the meaning and knowledge of motherhood in their societies and communities by falling pregnant, giving birth, caring for and nurturing their biological children.

Motherhood and solidarity

African women theologians' strength in the fight against patriarchy and any form of injustice is built on solidarity. Any form of oppression against the marginalised 'calls for solidarity and resistance' (Ackermann 2008:272). In African contexts communities are built on mutuality and solidarity; thus, African women theologians welcome men who are in solidarity with African women as 'friends of the circle' (Ackermann 2008:272). In African communities, differences are therefore not in opposing ends, but they share experiences of oppression in order to challenge any violations of human dignity. Solidarity demands that all African women and men seek partnership with WwDs so that liberation for all will prevail. Cultural and religious perceptions, which dehumanise WwDs, can only be deconstructed through solidarity. Solidarity promotes human dignity. Mercer (2014) rightly argues that:

feminist practical theology attends to the ways power relations are inscribed in bodily practices, language and cultural symbols ... [and] is committed to solidarity with those who are vulnerable and marginalised within church, society and the world. (pp. 106–107)

This then protests the exclusion of WwDs from the whole feminist theology agenda. The distinctive African women theology of disability is in solidarity with the vulnerable and marginalised, and seeks to liberate and empower them from oppressive cultural beliefs and patriarchy. According to feminist praxis, the integrative process where there is a definite agreement between action and theory, intrinsically shapes our responses to the politics of the marginalised. Theology is done as an ongoing activity that deconstructs and reconstructs cultural and religious praxis of motherhood.

The constructions of motherhood and mothering through performance 'reiterates the ableism and the preferred performance of emphasised femininity that is deemed nonthreatening to masculinity and ableism' (Scott 2015:246, [author's emphasis]). An African women's theology of disability questions the physical performativity function or performative accomplishment that is defined primarily by patriarchy and ableism mastery of the depiction of selective ability or disability identities. This theology focuses on the physical performance rather than the social and emotional performance. Participants of this study draw our attention to the intersectionality of their physical bodies and their natural capabilities to have their own biological children. By this, they reinterpret their performances of motherhood.

Conclusion

The aim of this article was to describe the struggles women with visual impairments face in African society to be accepted as mothers and to use their struggles to develop towards an African women theology of disability. The findings of this article indicate that the politics of motherhood, as demonstrated by visually impaired WwDs, draws our attention to the ambivalence of feminist theology in the inclusion of WwDs. Women with visually impairment are discouraged by able-bodied women in their families who do so because of fear for the ancestors and disability phobia (politics of the body). Their experiences of rejection and condemnation in a community of motherhood informs an African women theology of disability that protests and challenges the trend of viewing persons as independent and separated from community. Three themes such as community, valuing of every woman's fruitfulness and solidarity, which are critical in feminist praxis, emerged as a basis of an African women theology of disability that can be used to protect WwDs' dignity and motherhood abilities.

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