

# ROLE OF LANGUAGE IN REDEFINING THE INVOLUNTARY CHILDLESS WOMEN AFTER STIGMA IN THE GĬKÚYÚ COMMUNITY, KENYA

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Abstact: In the Gikùyù culture, childless women have long been stigmatised because of their infertility. This is due to the perception that parenting and women are equivalent. They finally reach the resistance stage, which is the last step of childlessness, after going through all the stages of denial. Here, they acknowledge their position and express the resistance through language. The agency of discursive reconstruction was the subject of the paper. The study was informed by Fairclough and Van Dijk's Critical Discourse Analysis (CDA). According to critical discourse analysis, the form and intent of a text must be investigated in order for the reader to fully understand what it is saying. It also demonstrates the creation, consumption, and connections of writing to the rest of society. The study used a stratified and purposeful random selection approach to choose villages in the Othaya sub-county of Nyeri County. Karìma, Mahiga, Chinga, and Kairŏthi were the names of the villages. Focus group discussions (FGDs) and an audio recorder were used in the study to collect data. For the FGD, twenty involuntarily childless women participated as respondents. The study's conclusions may help dispel stigmatising beliefs about childless women in the Gikùyù community. The study will be important in shedding light on important facts about the discourses used to spread linguistic stigma and how it is done. The study revealed that language stigmatises involuntary childless women in significant ways, and it came to the conclusion that these women ought to reclaim themselves by coming to terms with their circumstance and restore their identity.

Index Terms: stigma, involuntary childlessness, Gikùyù culture

## 1.1.INTRODUCTION

Every day reminders of how societal expectations vary for women without children exist in a culture where mothers and children predominate. Social discourses serve as a constant reminder of how all women are portrayed as being biologically predisposed to becoming mothers (Riessman, 2000). A study by Okonofua (2021) found that childless women complain about being bothered by intrusive questions from strangers and friends everywhere they go, such as "How many children have you sired?" and "When are we expecting children from you?" (p. 118). The findings claim practises including menstruation, Mother's Day, Thanksgiving, Christmas, and funeral rites act as symbols of women's lack of children, further distancing them from their peers and encouraging a sense of deviance (Eckert & Mc Connell-Ginet 2021). Ideology and discourse are intertwined because our everyday language shapes or supports them. As a result, people's language reflects their views (Fairclough, 2001). As a result, in a culture, language is a tool for establishing and asserting power.

## 1.2.Research Questions

The study sought to answer the following research question:

How do involuntary childless women redefine womanhood after the linguistic stigma in the Gìkùyù community?

#### 2.1. Previous research in the field

# 2.1.1. Discourses Rejecting the Motherhood Mandate

It has far-reaching detrimental effects that certain women who are deemed "deviants" who are childless are subjected to various forms of abuse. The dominant groups mistreat those they rule over and utilise their languages to commit acts of violence or discrimination against them (Goke-Pariola, 2022). Because it is thought that the women have refused to get pregnant, they are stigmatised (Riessman, 2000). According to the views of one involuntary childless woman, she says, "I felt a lot of embarrassment and was uncertain how to reply" (Eckert & Mc Connell-Ginet 2021, p.276). Language and culture consequently serve as mirrors of human thought, which in turn reflects how individuals perceive and understand the "actual world. 'Stereotyping facilitates the symbolic exclusion of all "Them" while bringing together all of "Us" who are "normal" in one made-up society.' (Hall 2021:258). Stereotyping minimises, essentializes, normalises, and resolves differences. They emphasise "otherness" in order to boost their reputation at the expense of others. This presumption, which is frequently used to describe individuals who stray from social standards, is founded on this principle.

#### 2.1.2. Theoretical Framework

The concepts of Fairclough (2001) and Van Dijk (2006)'s Critical Discourse Analysis (CDA) served as the basis for this study. The CDA theory was crucial to the study because it clarified how power structures are established and maintained in Gikùyù society.

According to critical discourse analysis, the form and intent of a text must be investigated in order for the reader to fully understand what it is saying. It also demonstrates the creation, consumption, and connections of writing to the rest of society. Therefore, CDA sees text as a comprehensive process in which social norms are intertwined with it and create a mutually beneficial partnership in which they are dependent on one another (Richardson, 2022). Fairclough (2001) contends that analysis should always begin with the text before gradually incorporating further, more complex discursive behaviours that are widely accepted in society.

According to Fairclough (2001), it is crucial to take into account speech's process and social context when analysing it. He counsels the researcher to continually take into account the sociological and institutional aspects of the issue in addition to the current circumstances. Grammar, lexicons, and semantics by themselves should not be all that important, according to CDA. This is due to the fact that in every research, their functionalities continually stand out. Since it was examined in the context of phrase usage in the stigma against involuntarily childless women, this idea was significant to this study. According to Richardson (2022), it is crucial to focus on traditional methods of linguistic analysis and to evaluate how they either support or challenge social norms and power systems. He goes on to say that one should take additional options that society as a whole had in mind before analysing the traits that the text utilised. In order to evaluate how the involuntrary childless women redefine themselves after having faced a lot of linguistic stigma, the grammatical choices and lexicons were investigated. The paper's major objective was to identify the tactics used by the childless women to face the stereotypes and lead a normal life.

Additionally, the study found that Van Dijk's (2006) sociocognitive approach to CDA was very applicable. Like people within organisations, communities, or races, language users adopt social views that have already been ingrained in them. It is common to refer to this ideological cognitive component as "the collective subconscious representation of language." Social cognitions are categorised into three main groups (Van Dijk, 2006). The first step is understanding from a cultural perspective. These details are frequently passed between members of the impacted community. Knowledge that is conveyed in this way is often considered to be a part of public discourse since it is disseminated equally across cultures. And finally, attitudes. They can be seen as cultural and social realities that shape dialogues as well as how individuals perceive one another. The final and most essential aspect is ideology. Van Dijk (2006) asserts that ideologies are fundamental tenets that

mould the ideas of the general public. In order to rule over others, the dominant group employs these concepts to justify and perpetuate the stigma. The theory states that social beliefs were made apparent that backed up by the society hence strongly forming a bond that was employed to stigmatise the involuntary childless women. This ideological notion was covered in Fairclough's (2001) analysis, which served as the study's theory. All expressives in this work were treated as ideologies in order to ensure that the language stigma was adequately communicated.

# 3.1.Data Analysis

To evaluate the role played by language in redefining the involuntary childless woman after stigma, the research employed a qualitative research methodology (Labov, 2020). Twenty women between the ages of 45 and 65 who had experienced or were experiencing involuntary childlessness made up the target demographic. The paper's respondents were chosen by purposeful sampling. The sole region included in the study was Othaya Sub-County in Nyeri County. Nyeri is thought to have Kenya's highest infertility rate when compared to other counties. (KDHS, 2022) reports that between the years of 2012 and 2019, 866 cases of infertility, involving both men and women, were recorded in the county. Othaya sub-county had the highest number of cases, accounting for 328 people or 38% of the county's infertility rate. There were 260 women and 68 males in this group. Because the researcher had observed that infertility was prevalent there, the four Othaya sub-county villages of Karìma, Mahiga, Chinga, and Kairŏ-thì were specifically sampled. The seven FGD questions that were used in the study served as its guiding principles, and the researcher chose distinct examples that were instructive. The women who were childless established Focus Group Discussions (FGDs). To ensure that no information was lost, the data was then tape recorded. The information was translated following transcription.

#### 4. Results

## 4.1. The Reconstruction of Agency by Involuntary Childless Women

The final phase of a person's journey through childlessness is the resistance stage, which is examined in this subsection. Resistance takes place in specific periods, places, and relationships, interacts with a variety of actors, tactics, and discourses, and is like all acts (Riessman, 2000). Because of this, the resistance of the involuntarily childless women focuses on how they behave in regular circumstances in a way that can challenge authority.

# 4.2. Acceptance and Choice

The Gikùyù people have a social power that emphasises the link between motherhood and womanhood. This is transmitted through language, just as thoughts are, according to Fairclough (2001). Some childless women rebel against social norms in an effort to survive once they realise they cannot live up to them. According to (Riessman, 2000), power exists when there is resistance. Resistance is beneficial because it clarifies the nature of power. This cycle of discriminatory power relations is repeated because it is embodied in language and ingrained in society (Van Dijk, 2006). The women's severe and extended anguish gradually lessened as they started to rebel against cultural expectations, which eventually gave way to acceptance. This type of resistance is generally concealed and masked, making it harder to identify than public and collective resistance (Riessman, 2000). After going through the grieving process, the majority of respondents had already accepted the reality that they would never be capable of having children. Resisting behaviours may be used to describe a person. One of the respondents claims that:

Ndatigire ihoru na kŏrìra rìrìa ngai anyumìrìire kìroto-inì na kŏnjìra atì anyŏmbire gŏtuga andŏ ake. Until God revealed to me in a vision that I was supposed to care for others, I wept and cried to him constantly for a child. (Respondent 19: 50 years)

Due to the criticism and stigmatisation she endured in society, the respondent from above had for a considerable amount of time slipped into depression. She and the other FGD participants believed that making the choice to live without children was essential in order to look ahead and envision themselves appreciating life once more after directing their energies and focus towards something positive. The respondents' existence was characterised by their opposition to the "motherhood mandate." Additionally, their decision to be content and tolerant of their circumstances shows that they have a grasp of their surroundings, the "now," and the future.

In conclusion, discourse, a social activity that encompasses the full social interaction process, is what resistance is all about (Fairclough, 2001). When only some intentions are deemed to be sincere, resistance may stigmatise, disregard, and silence other forms of resistance.

## 4.3. Reclaiming Identity

All of the FGD respondents who participated believed that their experience of being childless had changed them. None of them could have foreseen how they would live their lives without having children. The time spent preparing for motherhood and the emotionally charged space that was made for the child left many respondents with the impression that they had skipped a stage or a chapter of their lives, and this hollowness questioned their sense of self. Childless women eventually developed a sort of resistance that was hidden in the expressions of resistance (Scott, 1990). Childlessness was considered to be taboo, and statements that were ideologically loaded and derogatory served as constant reminders in the pronatalist society that womanhood was defined by motherhood. The resistance assisted the involuntarily childless women in reimagining, rebuilding, and reestablishing sense of self, which was necessary because childlessness was regarded as a taboo. One respondent implied:

Gŏtirì mŏndŏ wì Maisha merì, rìrìa ndamenyire ŏguo rì, nìndatuire itua rìa kŏienda na kŏìmenyerera.

We only get one chance to live, therefore I made the decision to love and take care of myself. (Respondent 18, 62 years)

The stigma persisted because society assumed that the childless woman would succumb to social pressure. The respondent, however, was able to change without being noticed since resistance can be used at any time to reject systems that have been imposed on the group (Stryker, 2021). The respondent acknowledges that it did not have the same effect on her as it did in the past.

# 4.4. Finding Purpose

Not just the absence of noise, silence also serves as a powerful rhetorical tool. The located and visible practise of silence produces and transmits power (Dyer, 2017). In the study, the involuntarily childless women made a conscious decision to accept the fact that they would never be able to have children. Therefore, they decided to help others in order to find a new purpose. After internalisation, they claim, they understood that motherhood would be felt in ways other than giving birth. They would not allow their lives to be judged solely on the basis of their fertility. One person said:

Ndììtaga nyina wa ciana ikŏmi na igìrì tondŏ nìndì mŏcìì wa gŏcimenyerera. Úhoti wakwa wa kŏgìa kana kwaga ciana ndŏagìrìire nì gŏtua ndì mŏndŏ mŏthemba ŏ kana mìtugo yakwa.

I am a mother of twelve because I manage a children's home. I don't want my inability to have children to define who I am or what I do. (Respondent 14: 51 years)

Power and resistance interactions have been pierced by silence throughout history (Dyer, 2017). Resistance uses silence as a strategy to regain narrative control and exercise power. The reply from above decided to help others despite the reluctance to silence, and was surprised by how rewarding it was.

## 4.5. Redefining Womanhood

Some women's reproductive decisions are influenced by the "motherhood mandate," which refers to social expectations on women to have and raise children (Dyer, 2017). When parenting is associated with a woman's physical attributes and reproductive capacity, she experiences social stigma and moral discrimination. Because of this, some women have attempted to redefine womanhood over time. This is made feasible by resistance from regular life. Everyday resistance, according to Scott (1990), works to exist inside a system or dominance rather than overthrowing or directly reforming it today, this week, or this season (1985:301). Resistance is defined as aggressively challenging the group's enforced systems wherever possible in daily life. Among the responses was this:

Nindarerire kairetu ndatuire gakwa. Andŏ rìu nìmamenyerire.

I had to take in a lovely girl. They eventually adapted to it. (Respondent 19: 50 years)

Some women have fought against objectification, which diminishes their womanhood, through everyday resistance. The aforementioned reply asserts that she is a mother and that her daughter is succeeding academically. In an effort to redefine herself, she expects to be treated for who she is and not for what she lacks. In doing so, the involuntary childless women become aware actors who challenge the dominant culture.

The involuntarily childless women reinvent themselves through daily resistance that extends through language, constructions, and ideologies in order to create and legitimise dominances. By remaking herself, the childless woman thereby deconstructs those ideologies.

## 4.6. Giving Voice to Loss

Putting stigma into words challenges accepted behaviours and works directly against stigma. According to (Riessman, 2000), outspoken opposition came to an end before mass action (a social movement). Involuntary childless women who spoke out against the stigma through everyday resistance confronted hostile circumstances and pronatalist attitudes head-on. One participant said:

Gutirì mŏndu iteraga atì ndigìaga ciana.

I made my infertility known to everyone who would listen. (Respondent 23: 65 years)

A prior study (Riessman, 2000) found that it is essential to incorporate a loss in one's life story as soon as they can articulately describe it, as the respondent was able to do. Women who have faced stigma at some point in their life may be able to change their circumstances if they later adopt new values and beliefs that define their present selves and lives as equal to or more valuable than their past ones (Riessman, 2000:146). By addressing stigma and reassigning blame, it becomes clear that the accuser's beliefs—implicitly, Gikùyù pronatalism and gender ideology—are the issue, not the childless woman.

The childless women acknowledged that they were aware of the strong societal views that drove them to accept the dominant and readily available discourses. Sometimes the discourses were delivered with caution and protection; other times, those who revealed them were more adamant in their resistance and, as a result, well-rewarded in their efforts to challenge ideologies and power. Where there is opposition, there is power, according to (Eckert & Mc Connell-Ginet, 2021) which provides evidence in favour of this claim. Therefore, resistance is helpful in understanding power. Respondent 4 (age 45) stated the following:

Tiga kwaga kŏgìa ciana rìì, ngorarŏo ndì thata.

Not only am I infertile but also very barren. (Respondent 5: 62 years)

Instead of a clear message being delivered by a disguised messenger, an ambiguous message is conveyed by easily recognisable messengers to generate ordinary resistance (Scott, 1990, 54:55). In a public setting, the respondent found a safe space to discuss her lack of children. As people become more conscious of and incorporate the multiple losses into their stories, the respondent claims that everyday resistance becomes a part of their story.

#### 4.7. Disclosure

Nearly two-thirds of the respondents acknowledged concealing their infertility in some way to avoid shame. In order to discover patterns of behaviour surrounding involuntary childlessness, the respondents were asked about their patterns of disclosure and the methods they used to deal with persons and circumstances that made them feel uneasy. The study looked at the techniques used by involuntary childless women to hide their infertility in particular situations.

## 4.7.1. Childlessness and Selective Concealment

Respondents to this study displayed patterns of selective concealment even when remaining quiet was the main strategy for handling the relationship's lack of children after it was found (Dyer, 2017).

Respondents to this survey displayed patterns of selective concealment (Dyer, 2017) at some point in life. They remained silent using silence as a strategy to cover up their childlessness. For instance, respondents voiced anxiety to medical experts and adoption workers although they concealed their anxiety to others. Aside from these disclosures to professionals, the majority of respondents made their choice regarding

whether to conceal or reveal their infertility based on their opinion of other people's sincerity or reliability. They gained the capacity to recognise and avoid those who would stigmatise them. One respondent claimed:

Nînjỹì andỹ arìa batiì kỹeherera. Ndìmoì mỹno...Ngoragyo ndììtìkìtie mỹno na hakiri ingìnjìra ndige ỹndỹ ndigaga ihenya.

I am aware of those people I should stay away from. You discover more about those individuals... Although I've learned to tune it, I've always believed in having a sixth sense. (Respondent 23: 65years)

Respondents adopted the covert communication strategy by steering clear of or shifting the topic of sensitive conversations when it was difficult to avoid coming into contact with these people.

## 4.7.2. Therapeutic Disclosure

Therapeutic disclosure is the selective sharing of the stigmatising characteristic with others in an effort to improve self-esteem or to renegotiate stigmatising personal judgements. Therapeutic disclosure was used by more childless respondents than courtesy stigma respondents (Schneider & Conrad 1980). Usually, these disclosures were shared with family, close friends, or other childless people. One respondent claimed that it was cathartic to express her feelings to her family:

Nîndaiguaga itaiganìire nginya rìrìa ndaikarire thìì na mŏthuri na andŏ aitŏ ngìmera kìrìa kìrarìa kìrìa kìngì. Ndamera nìndacokire ngìigua ndahŏthìrŏo ngoro.

I was first uneasy until I sat down and discussed how I felt I was failing with my spouse and family. I finished the discussion and felt much better when I was done. (Respondent 1:52 years).

In conclusion, therapeutic disclosure was a tactic used by involuntary childless women to reduce stress, regain self-esteem, and change their perception of infertility as a legitimate condition. Many responders pointed out that being able to acknowledge to infertility was a sign that one was beginning to get used to having a stigmatising trait.

#### 4.7.3. Preventive Disclosure

In order to reduce the likelihood that persons with less moral sophistication may employ more morally problematic interpretations, it is crucial to employ medical disclaimers and to express a blameless, beyond-my-control medical interpretation (Schneider & Conrad, 1980:41). Many childless women confessed their infertility using the medical evaluation of their sickness in order to avoid higher perceived negative impacts. One respondent said the following:

Ngìra yakwa ya ŏciari ndagitarì makiuga rì, yarì hingìkanu na gŏtirì ŏndŏ ŏngiathire ngìe ciana tondŏ nìndì mŏrimŏ wa cukari. Gìkuŏ gia tene nokìo ingiagìire ingìagiginyanire.

My fallopian tubes were clogged, according to the physicians, but nothing could be done about it because I have diabetes. My perseverance would only result in a premature death. (Respondent 10: 47 years)

According to the response, she would pass away if she continued to try to get pregnant because her infertility was an unavoidable side effect of another medical ailment, diabetes. Consequently, the condition affecting reproduction was not the fundamental problem in this instance. As evidenced by medical disclaimers, people often accept medical justifications for potentially stigmatising conditions. Many involuntary childless women choose the preventative disclosure strategy to actively disclose their childlessness in order to avert potential stigmatisation processes. This technique aims to influence how their environment creates societal judgements.

## 4.7.4. Practiced Deception

Respondents who falsely assert that they are infertile do so without coherence (Schneider & Conrad, 1980). However, they exaggerate or alter the causes of their infertility. The majority of respondents who employed this strategy had already practised what they would say to onlookers. No other parties appear to have been engaged in the decision to reveal or keep the feature secret; it is completely produced by the interaction of the infertile dyad. One responder claimed that she and her partner had made a joint decision to bear the burden of infertility. She revealed that:

Twarìkanìire na mŏthuri wakwa atì tŏtingierire andŏ nŏ wina thìna wa kŏgìa ciana na andŏ makìiganìra.

My partner and I made the agreement that we wouldn't reveal which of the two of us had the issue, and it really worked out nicely. (Respondent 26: 53 years)

Most respondents who provided false information said that they were having a shared problem with infertility. Because they were attempting to avoid answering questions, the respondent and her spouse never gave a thoughtful reply.

# 5.0. Discussion of key Findings

After considering the purpose, data analysis, and subsequent findings, the paper's main conclusions were established. The following question served as the foundation for the study:

1. How do involuntary childless women redefine womanhood after the linguistic stigma in the Gìkùyù community?

The study showed that stereotypes existed in the discursive concepts of childlessness, particularly for women. After experiencing stigma, the involuntary childless women rebuilt their identities. The study discovered that, in addition to the harmful impacts of the stigma, there were some beneficial advantages as well. The study showed that stereotypes existed in the discursive concepts of childlessness, particularly for women. The main goal of the strategy was to get the listener to recognise and discard these dominant discourses. With harmful discursive ideologies, these women challenged and rejected the social discourses that were prevailing.

## 5.1. Conclusion

The main goal of the paper was to determine how linguistic stigmatisation in Gikùyù community affects how involuntarily childless women redefine womanhood. The study found that language is crucial to the process of reframing. This function is demonstrated by the manner that childless women are finally given a voice, whether by overt resistance or by remaining silent. The study concluded that language greatly stigmatises involuntary childless women and that these women ought to redefine themselves by coming to terms with their circumstance and restoring their identity.

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## Appendix 1- Focus Group Discussion Guide Questions - Involuntary Childless Women

A researcher from Laikipia University would like to determine the role played by language in redefining the involuntary childless women after they have faced stigma. Be guaranteed that:

- 1. Your name and identify will not appear anywhere in the completed research.
- 2. Your voluntarily provided information will only be employed for scholarly reasons.

Please answer these questions.

#### **Bio Data**

- A. Which of these age groupings do you belong to?
  - i. 44-49
  - ii. 49-54
  - iii. 54-59
  - iv. 59 -65
- B. Mention your marital status.

How many marriages have you had?

# Section A – Childlessness Versus Stigma

- i. Why do you think you can't have children? How did you come to that conclusion? Have you ever taken a test for infertility?
  - If the answer is no, why do you believe you—rather than your partner—are infertile?
  - If yes, has your marriage suffered as a result of the lack of a child?
- ii. How long did you try to conceive unsuccessfully?

## Section B – Social Support vs. Stigma

- i. Does your infertility cause you any shame?
- ii. What words did your partner, coworkers, in-laws, neighbours, and/or relatives use to indicate how disappointed they were that you could not have children?
- iii. Which phrases, statements, or expressions were used the most to allude to you or your condition?
- iv. When others learn you are infertile, what questions do they typically ask you?
- v. How did you envision your family when you were younger?
- vi. How has that dream been affected by the lack of children?