
Family and Kinship in a Multicultural Context

Infertility is defined as inability to conceive children or young according to the Oxford English dictionary. Infertility has over time become a discussion the world has embraced and the challenges around it are constantly being researched to find ways to resolve them. In the past, anywhere in the world, the discussion around the infertility was considered shameful and unattractive. Regardless of whether one was a male or a female, the inability to have children was shut behind closed doors and even considered a taboo in many Africa communities. One was termed cursed and not fit for any partner for courtship or marriage. But times have changed and changed immensely. In a recent interview by Doctor Oz a world known famous actor, Gabrielle Union opens up to the world after years of struggling with infertility she says “ When it doesn’t work it can be absolutely devastating. And as women we are so many of us, hiding in plain site, suffering in silence, nobody wants the world, which is what it feels like, to think that you are ‘defective’ or less than a perfect woman or less than capable. And there is so much shame and mystery and guilt that surrounds fertility issues.” The interviewer goes ahead to ask her as to why speak about it now, why not after ten years when this is all done and she says “Because there is no reason to feel alone, there is no reason to suffer in silence, there is no reason to feel like Seal Team Six getting to a doctors appointment because you are afraid of what someone is going to say about a medical issue. Which drives people away further and further into the shadows and you are literally suffering in silence. And I am saying no more, Enough!” An instance like this and others who have come forth speaking of what infertility caused them is what guides this paper. With developing countries within the Africa region, the effects of infertility are instability within a marriage which either leads to polygamy or divorce, economic hardship as many depend on children for economic survival and social rejection and stigmatization of the infertile individual and their family members.

World Health Organization defines infertility in three main categories: clinical, demographic and epidemiological, where each is defined as a disease of the reproductive system defined by the failure to achieve a clinical pregnancy after 12 months or more of regular unprotected sexual intercourse (WHO-ICMART glossary) , an inability of those of reproductive age (15-49 years) to become or remain pregnant within five years of exposure to pregnancy, and women of reproductive age (15-49 years) at risk of becoming pregnant (not pregnant, sexually active, not using contraception and not lactating) who report trying unsuccessfully for a pregnancy for two years or more respectively. A world report by WHO estimated about 34 million women, predominantly have infertility which resulted from maternal sepsis and unborn safe abortion especially from predominant developing countries. In Africa the highest prevalence the world highest rates of infertility is found in the non Western societies, especially those in the “infertility belt” of Central and Southern Africa. In countries with low to none resources, the problem is

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evaluated to affect up to 30% of couples, causing huge suffering. The key focus area of this paper would be on the known and broad understanding of infertility in two dimensions: primary infertility and secondary infertility. Women whose pregnancy spontaneously miscarries, or whose pregnancy results in a still born child, without ever having had a live birth would present is considered a primary fertility while a woman is classified to be having secondary infertility when she is unable to bear a child, either due to the inability to become pregnant or the inability to carry a pregnancy to a live birth following either a previous pregnancy or a previous ability to carry a pregnancy to live birth.

In the African context, infertility more often than not, presents itself in a marriage situation. In this case, child bearing is really valued; it is the essence of marriage within the African Community (Mburugu & Adams, 2004). Thus the inability to have children causes instability and trauma amongst couples. In most cases, if a woman is unable to conceive it is perceived that she would be the problem. Therefore a man is given the right to marry a second woman to give him children, a free ticket to practice polygamy. As bearing children is a desired and valued social role, the community allows him to sleep with another woman while the other woman is shamed and condemned. Such injustice to the woman is even condoned to levels of violence within the society and only the forward thinking people amongst her can save her from such cruelty.

In Kenya, a woman's hands were butchered by her husband due to her inability to have children, a case of primary infertility. While Ngila, the husband, allegedly attacked her because they weren't able to have children, a hospital in Nairobi said Mwende was fertile and it was her husband who had reproductive issues. In cases like this, society stepped in and she was granted grounds for divorce. Unfortunately in most societies, women suffer in silence and are abused by the husbands. This is not to mean that men don't endure abuse from women when infertility issues come from them. But studies from African countries like Kenya reveal that women bear more repercussions of childlessness than men. Among the Luhya people of Kenya, infertility was always considered to be the woman's fault. According to the Kamba community, the notion of "vinya" that is, "strength," is linked with reproduction or childbearing and marriage.

While observing structural functionalism theory which sees the family as a social institution that performs certain essential functions for the society and if this functions are not carried out the family is said to be dysfunctional. We can apply it to deal with injustices that arise from the instability caused by infertility. In the case of Mwende where crime was committed, the theory states that communities must work together to establish and execute the consequences thus creating a stronger bond of solidarity among the member of the society. In a report by CNN, 2016 the attack has been condemned by politicians, activists and citizens across Kenya and The Bangladeshi embassy in Kenya has promised to provide Mwende with medication for at

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least three months, while Lay says she and other activists have offered to provide her with prosthetic limbs, a \$250 allowance per month, transport to therapy and business skills to help prepare her for life after recovery. This clearly demonstrates a practice of structural functionalism theory.

Another effect of infertility is economic hardship. According to a 2011 report from WHO, a study in 2008 found a 2.7% percent primary infertility rate among women in an urban area of Tanzania. A nuclear family is generally viewed as a husband, wife and children. In most African communities bearing of children is a way to achieve economic stability within the family. It is believed that once the first born children have acquired basic skill or education they can then go ahead and secure basic jobs and educate their younger siblings and in the long run take care of their parents. When a couple faces infertility issues this economic foundation that is to be is disrupted. Another factor is the economic burden that comes with infertility treatment.

Modern treatments such as in vitro fertilisation, hormone injections and artificial insemination, are time consuming, expensive and not available in developing countries. In the third world how to manage this vast problem has not been well researched and the need to bring a treatment affordable to a common citizen is way overdue. Even if one was to explore traditional healers they are more expensive than faith based healers. In Nigerian women spend between 55% and 100% of their earnings on attempts to treat their infertility. In Nigeria and Rwanda, one of the greatest concerns to an infertile woman is the financial discrepancy between her and her extended family.

Therefore, for the interest of a nation growth and economic status a resolution to the economic hardships arise from infertility. To help analyze this, an application of system theory is key, whereby a social system is a process between actors. Talcott Parsons states that, "It is the structure of the relations between the actors involved in the interactive process which is essentially the structure of the social system. The system is the network of such relationships." Given that infertility has a ripple effect within the family and then the nation, systems theory how things do not have meaning in themselves. A mezzo and macro level approach to link the access to resources often facilitated by centralized figures and focusing between communities and formal community organisations can play a big role in changes the negative effects brought on by infertility to the economy within a home and a nation.

Stigmatization and social rejection is a major effect of infertility not only to the infertile individual but the involved parties as a whole. Women in particular, also commonly suffer from severe negative social consequences such as stigmatization, ostracism, abuse and economic deprivation. In Nigeria, a woman who has not borne children cannot be recognised as an elder because she has not been able to bear a son; therefore, she does not have a right to her husband's property, nor can she return to her parents' compound as she will be mistreated. An

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infertile woman is often left without a home and without any money.

Stigmatization may take effect in various forms. One may be ashamed to be associated with themselves or their partners. Families may be affected as one party may carry on the burden more than the other. In many developing countries, social stigmas are attached to infertility. For example, women cannot join communal social groups, since access to this privilege follows pregnancy. However, it is not only women who are affected by infecundity; infertile men are also plagued with negative consequences. Loss of social status, social isolation and marital instability for both men and women define the social outcomes. Psychologically, women lose their 'womanhood' and sense of gender identity when they cannot conceive; men are not considered to be a 'man' if they do not have a child. For example, men in Rwanda who do not have children stated that they are less motivated to work since they do not have any offspring to support.

Compared to western societies, infertile couples in Third World countries feel a deeper depth of guilt, shame, worthlessness and depression if they cannot conceive. This is in the long run affects their role within their family and within the society as they are considered a "defect". We use of the family systems theory to invent strategies on how to deal with this problem. Family systems theory is a theory introduced by Dr. Murray Bowen that suggests that individuals cannot be understood in isolation from one another, but rather as a part of their family, as the family is an emotional unit. Families are systems of interconnected and interdependent individuals, none of whom can be understood in isolation from the system. With understanding of the role each individual plays and how it affects the other, more so how one can react to it is an essential way to deal with social rejection and stigmatization. If the woman or man is infertile support from their partners is crucial through the process to help them feel loved and supported as they explore options to bear a child.

In conclusion the effects brought on by infertility are not insoluble and this can be achieved through critical theory. Critical theory is a social theory oriented toward critiquing and changing society as a whole. Critical theory aims to dig beneath the surface of social life and uncover the assumptions that keep us from a full and true understanding of how the world works. Despite the instability caused within a marriage which either leads to polygamy or divorce and economic hardship as many depends on children for economic survival and social rejection and stigmatization of the infertile individual and their family members, resolutions can be formed around this problems. A case given in how each individual and society can play a role clearly depicts how efforts can be made to incumb infertility. General openness to talk about it instead of suffering in silence is the first step, and finding ways to deal with it a couple is second. Consent to have a child or not is between two people, if both parties agree and are committed ways can be developed on how to make it possible. They can explore fertility clinics to make them aware of what can be done and attend counselling sessions to support them mentally and

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emotionally. Society should then act as a concrete support for the two individuals and support in ways necessary. The provision of the required resources for health and counselling that are affordable to the common citizen. Education on the subject is also key for all generations especially the upcoming to be aware of what is happening around them and know how to face such issues.

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