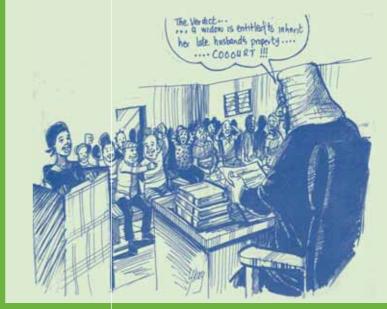
Passive victims or active agents?

Experiences of widow inheritance in Uganda

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In patriarchal cultures where women and girls are perceived as commodities belonging to the male family line, widow inheritance is widely practiced. Evidence shows that widow inheritance is common in several countries in Africa and Asia – including Ghana, Kenya, Nigeria, South Africa, Tanzania, Uganda, Zambia, Zimbabwe, India and China. Due to the diversity of cultures, there are several differences in the actual enactment of widow inheritance: the heir remarries the widow; an older brother to the deceased takes over the widow's sexual and reproductive rights; or the widow is handed over by the clan-elders to an unmarried member of the clan.

Widow inheritance is an ancient custom among the Baganda, who are the largest ethnic group in Uganda. In the absence of state provision of a welfare system of any sort, this cultural institution protected both the widowed and the orphaned. It facilitated a cultural system through which the male relatives of the deceased man took care of the grieving widow and supported orphans through payment of school-fees, medical bills, clothes, shelter, etc. Unlike other societies where widows were inherited because their deceased husband's lineage had contributed to the bride price, among the Baganda the practice was a ritual to appease the departed man and ensure that his descendants were assigned an overseer. Furthermore, strong patrilineal kin ties were realized through symbolic group ownership over the reproductive rights of the wife: her children belonged to the husband's clan.

In 2006/7, we conducted a study among 35 widows and nine widowers from the Baganda tribe living in the environs of Kampala. The study aimed at exploring local experiences of widowhood in the era of HIV and AIDS, with a focus on how different

widowed people negotiate their sexuality based on various social prescriptions. Data collection combined participant observation, in-depth interviews and focus group discussions.

A few elderly widows in our study vehemently supported the practice, as one of them relates: "I never suffered after my husband was killed in 1963. Two years after his burial, I was given to his younger brother. I accepted because I had no job, yet he is the one who had taken over the responsibility of our providence as we waited for the last funeral rites. I had three children with him and we were happy together." Generally, it is believed that traditional families mostly insist on maintaining their ownership over young widows who are still in the reproductive age. A woman who was affected in this manner narrated her experience: "My inlaws know that my husband's first wife died before him. They must have suspected that I also had HIV. But because I am fat, look good and have my business, they wanted me to stay married within their family. So Ibrahim, who is a paternal first-cousin to my husband, kept pestering me for sex.

'Our family still wants to get children from those eggs remaining in your body. We paid for you!', he said. He bothered me for a long time. It was only after I remarried that he left me in peace."

Problems associated with widow inheritance

Due to its association with increased HIV infection rates, widow inheritance has been criticized by public health specialists locally and internationally. In cases where either the widow or the inheritor is infected with HIV, widow inheritance involving unprotected sexual intercourse could expose the virus to the uninfected person. As the sexual rituals connected to the widow inheritance ceremonies are often forced upon widows, this use of force not only increases their risk of HIV infection but also violates their

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sexual and reproductive rights, including their rights to self-determination about their sexuality, whether to remarry or not, to resume sexual activity or remain chaste, to choose their own sexual partner, etc. For some widows, retention of their marital property is conditional upon accepting the required terms of widow inheritance: "I was

The Ugandan Succession Act does not ensure equal inheritance rights for women; a woman's access to land and property rights is dependent on her marital status

shocked when my brothers-in-law who previously visited my home, turned against me. They said that if I did not accept to be remarried to Eddie - the one chosen to be my levirate-husband, 3 they would not allow me to return to our home. I was to go back to my family. The only way I could keep the home was to comply."

While some narrated how they had turned to the law to contest such unfair loss of property, several others revealed their deep sense of powerlessness in the face of extreme patriarchy. "I was just a woman, what could I say or do?" was a common theme running through many narratives of widows who did succumb to the pressure for sexual relations with their in-laws after the death of their husbands. These widows came across as passive victims of a maledominated cultural system.

Many widows reported their ignorance of the sexual nature of the rituals: "I was born here. I grew up here. I have attended many burials and last funeral rites ceremonies. However, I had never heard about what actually happens to the widow concerning the deceased's brothers. When my husband died, many people were telling me to have sex with the levirate-husband." This particular woman could escape the sexual ritual that was part of her husband's last funeral rites because the levirate-husband proposed an alternative: "It was him who told me that it would be better for me to sit on the floor, stretch my legs and let him jump over me three times. That is a modern way of doing sex. It is because of the fear of AIDS."

Negotiating widow inheritance

As seen above, women inheritance rituals are not observed to the letter. There were many reports of both widows and leviratehusbands negotiating ways of compromising with some rites that posed the risk of HIV infection. The widows in our study resorted to a wide range of techniques to challenge or refuse the uninvited sexual advances from their inlaws. Some of these strategies included:

- Referring to taboos: "I told him I was in my menstrual period! There was no way he was going to have sex with me when he believed that blood was still coming. So he left me alone during the last funeral rites ceremony."
- Referring to religion: "Everybody in that clan knows that I am a Born-Again Christian. I have previously refused to ioin them in their cultural rituals because I tell them they are satanic and sinful. Even for the funeral rituals, I told them to exclude me from them. They did so out of respect for my faith."

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- Proposing alternatives: "... So when the clan elders asked me about the choice of a levirate-guardian, I proposed my sisterin-law instead of a man. They accepted. I never faced that problem of male in-laws demanding sex."
- Threatening to apply the law: "I told him that I would report him to the courts if he ever touched me again. I have a friend whose sister is a lawyer. I asked her to telephone and threaten him with imprisonment."
- Using fear: "It was too much for me. He was pestering me for sex, sex, sex. But I kept telling him that I have HIV."

As illustrated in the last quote, many widows used the metaphor of HIV to negotiate against the sexual advances of their in-laws. This was with the hope that the widespread fear of AIDS would

discourage interested individuals. For some participants this strategy worked. For others, their pursuers countered their argument either with the availability of protection in the form of condoms, or the increasingly accessible antiretroviral therapies.

Not all widows can negotiate their way out of sexual advances by those wishing to inherit them. This is particularly due to poverty, unemployment and other factors as the following woman reveals:

"I was widowed when I was only 18. My husband left me with a three-month-old son and two-year-old daughter. The house he was building was incomplete. And he left no will. So after the burial, his family and clan members had a meeting. They chose Kato as the Omukuza [inheritor]. He is very rich with much land, businesses and children. When I was told, I was happy because he had three wives and many children. He began well by visiting and giving me some money to look after the children and myself. Afterwards he started asking for sex. He would even touch me when the children were watching. I refused for a while. He then stopped his financial support. He started threatening me. He even mentioned throwing me out of the house my husband built. I needed money to take my son to hospital. I looked for ways of earning, but all failed. I tried to borrow money, but I failed. So when he came, I gave in to his demands for sex. My third child belongs to Kato. He helps us a lot because he has a child here. He bought me this sewing machine, which I use for business. He pays school-fees for all the children. He even completed the house for us."

Empowerment through association

All the groups of widows and widowers we met confirmed they were not aware of any projects, interventions or policies specifically targeting the widowed in Uganda. "The orphans have many people interested in them, but the widowed are largely neglected," they said. Therefore they warmly welcomed and enthusiastically appreciated our efforts to collect them into groups, as well as provide them with a

space where they ably discussed their issues at length. Although our discussions with them were solely for research purposes, each of the groups we interviewed decided to start an association. These associations created visibility for the widowed. They provide a platform through which widows can appeal for assistance, advice and interventions from interested parties; fight the stigma attached to widowhood particularly in association with HIV and AIDS; share experiences and encourage each other; seek and receive advice regarding specific personal challenges; and exchange relevant knowledge about the law, health, micro-credit schemes and projects targeting orphans. Since the formation of these associations, the widows can strategize and discuss potential solutions to their individual and group problems.

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- 1. M. Owen, A world of widows. Zed Books, 1996
- 2. B. Potash, *Widows in African societies*. Stanford Press. 1986
- A marriage between a widow and one of her deceased husband's brothers is called a levirate marriage.

Resources

on harmful traditional practices

No more excuses!

Ending all Harmful Traditional Practices against Girls and Young Women
L. Stormorken, K. Vincent, A.-K. Vervik & R. Santisteban, Plan Norway and Plan
Finland, 2007 (40 p.)

http://www.plan.fi/uploads/media/No more excuses.pdf



Questioning the role of culture and traditional practices in HIV transmission

B. Bruun, Aidsnet – The Danish NGO Network on AIDS and Development, 2006 (33 p.)

The present working paper was developed as a follow-up to a workshop in December 2004. The workshop was based on the experiences of ADRA Malawi, the Adventist Development and Relief Agency in Malawi. Following the meeting, Aidsnet's Working Group on Children and Young People decided to explore further how NGOs can work with practices that are considered to be important elements of local culture, but which are also likely to carry the risk of transmitting HIV.

http://www.comminit.com/en/node/222256/347

FGM. Reaching the tipping point against female genital mutilation

L. Shaaban & S. Harbison (Bureau for Global Health, USAID) The Lancet, 2005 (366): p. 347-349

This article in *The Lancet* identifies successful and unsuccessful approaches to address female genital mutilation. It concludes that the way to overcome female genital mutilation is through multiple strategic approaches with various different messages, which collectively tip the weight of public opinion.

http://www.popcouncil.org/pdfs/frontiers/journals/lancet_fgc2005.pdf

Abandoning Female Genital Mutilation/Cutting

An in-depth look at promising Practices

C. Feldman-Jacobs & S. Ryniak, Population Reference Bureau (PRB), 2006 (74 p.)

In this publication, the authors present an in-depth look at three promising interventions identified through collaboration by five organizations: the Population Reference Bureau, Family Health International, PATH, Population Council, and The

Manoff Group. The objective is to meet the primary information needs identified by hundreds of organizations and individuals working toward the abandonment of FGM: information on case studies that illustrate what is working and why.

https://www.popcouncil.org/pdfs/frontiers/reports/PRBFGMReport.pdf