

Wright State University

CORE Scholar

College of Education and Human Services
Student Publications

College of Education and Human Services

2013

Integrating Indigenous Knowledge in Education and Healthcare in Northern Malawi: Pregnancy through Toddlerhood

Elisabeth Hangartner-Everts

Wright State University - Main Campus, ehangart@gmail.com

Follow this and additional works at: https://corescholar.libraries.wright.edu/cehs_student



Part of the [Education Commons](#), and the [Family, Life Course, and Society Commons](#)

Repository Citation

Hangartner-Everts, E. (2013). Integrating Indigenous Knowledge in Education and Healthcare in Northern Malawi: Pregnancy through Toddlerhood. .

https://corescholar.libraries.wright.edu/cehs_student/1

This Article is brought to you for free and open access by the College of Education and Human Services at CORE Scholar. It has been accepted for inclusion in College of Education and Human Services Student Publications by an authorized administrator of CORE Scholar. For more information, please contact library-corescholar@wright.edu.

**Integrating Indigenous Knowledge in
Education and Healthcare in Northern Malawi:
Pregnancy through Toddlerhood**

Elisabeth Hangartner-Everts
under the supervision
of
Prof. Dr. William Mosier
Department of Teacher Education
Wright State University, Dayton OH

Table of Contents

1. Introduction	3
2. Possibilities and Limitations of Comparison of Different African Cultures	3
3. Indigenous Knowledge	4
4. Indigenous Knowledge and Early Childrearing	6
5. Socialization and Enculturation	7
5.1. The Family	8
5.2. Healthcare: Pregnancy and Infancy	10
5.2.1. Pregnancy	10
5.2.2. Nutrition and Nutritional Taboos	12
5.2.3. Witchcraft Associated with Pregnancy and Birth.....	13
5.2.4. Abnormal Births.....	13
5.2.5. Infancy and Early Childhood Education.....	15
5.2.5.1. Informal Setting	15
5.2.5.2. Formal Setting.....	16
5.2.6. Making the Case for Integrating Indigenous Knowledge into Early Childhood Education	17
5.2.7. Gathering of Information of Indigenous Practices, Evaluating the Need for Modifications and Using Guiding Principles for Achieving Goals.....	19
5.2.8. The Transfer of Indigenous Knowledge into Early Childhood Education in the Form of Stories, Riddles and Songs.....	22
6. Conclusion	26
About the Author	27
References	28

1. Introduction

Africa encompasses a vast geographical area with considerable variation in climate and vegetation. The resulting differences in ways of living bring about variations in social structure and culture. In this immense area a myriad of languages are spoken and a wealth of customs flourish.

The reviewed literature corroborates that child-rearing and child care practices in continental Africa have been assiduously researched in the context of biological, historical, cultural and social evolution. The latter results from the interaction of the individual and social needs and demands (*Burgess, 1916*). In this evolutionary, interactive process the child receives his/her socialization.

Since continental Africa is composed of a multitude of ethnic groups, which are culturally very diverse, early socialization of children varies in techniques, goals and expectations. Although most Africans lead a rural life, urbanization is growing at fast pace and adjustment to Western lifestyle in urban areas is increasingly noticeable. Development in the large “colonized” metropolitan areas – in East Africa by Portugal, Germany, the Netherlands, Italy and Arab countries and in West Africa by Great Britain and France – occurs rapidly as a result of the influx of modern technology and the influence of biomedical knowledge and practices. In the smaller towns development lags behind. In the vast rural areas it is still in its infancy.

The rural areas form small-scale societies ranging from a few dozen to several hundred people organized in bands or villages. They engage in subsistence farming, herding of domesticated animals and foraging for wild foods and other provisions as well as in local trade of handmade goods. Their lifestyle has remained virtually unchanged for centuries. It is among these groups that a rich cultural heritage has been passed down from generation to generation with little influence from the outside world (*The Living Africa: the people – ethnic groups, 1998*). As indicated in the title of this paper, Malawi, a small agrarian country in south-eastern Africa (cf. map, p27) will be the focal point of this study. Though just a small speck on the African map, Malawi comprises many ethnic groups, most of which (85%) call rural Malawi their home. These areas are steeped in centuries of indigenous tradition and knowledge.

2. Possibilities and Limitations of Comparison of Different African Cultures

In every society childrearing practices and beliefs present themselves in accordance with the cultural norms of society. Culture is produced through interaction with constantly changing economic, social and political stimuli; it is not static and stationary, but dynamic. Differences in the value systems of diverse societies impact the children’s socialization by parents and

caregivers, the latter being mostly relatives acting in lieu of the parents. The way parents and caregivers care for their infants and children “is invested with moral value and cultural and personal meaning” (Abel, Julie, Tippene, Leach, Finau & Lennan, 2001, p. 1135). However, some commonalities affecting the care and rearing of children can be observed in most societies.

Regardless of cultural context and value system, the *beginning of parenthood* marks a momentous *life change*. Also, most *basic needs* of young children are defined in a fairly similar way across the cultures in spite of the considerable differences in childrearing practices, patterns and beliefs that are interconnected with the developmental stage, the physical and emotional care, and the health and nutrition of the child. In any given society the *lack of adequate physical care, nurture, health care and nutrition* has consequences for the child’s overall well-being. Hence, the preservation of life and maintenance of health and well-being of infants are distinctive features in most cultures. The *economic and political context* within which a child grows up greatly influences his/her physical, social and cognitive development. A. M. Tietjen succinctly states: “Parents in all societies raise their children in a manner that is generally congruent with the demands of their physical environment and their economic system, and with the system of their beliefs that has developed.” (Tietjen, A.M., 1985, p. 121). In other words, the commonality in the care and rearing of children lies in its diversity! When it comes to passing judgment over how parents, no matter what society they are part of, socialize their children and how they take care of them, it must be emphasized that no one value has superiority over another; it is only different.

3. Indigenous Knowledge

Unfortunately, in Western culture there is a tendency to focus on the deficits and barriers within the rural communities that hinder development, including early childhood development, rather than emphasizing the rich cultural assets that rural communities possess. “A community can either be viewed as presenting with major deficits in terms of Western knowledge systems (a needs-based perspective) or with tremendous assets, especially considering their indigenous knowledge (an asset-based perspective)” (Diale B., Fritz E., 2007, p. 310). Indigenous knowledge is defined as “the local knowledge that is unique to a given culture or society. It contrasts with the international knowledge system generated by universities, research institutions and private firms” (Flavier J.M. et al., 1995, p. 479). Louise Grenier (1998) emphasizes its existence within and development around the specific conditions of women and men native to a geographic area.

With the exception of the medicinal use of plants infused into early Western scholarship through indigenous knowledge long ago, indigenous knowledge has been shunned by research and practice in the industrialized parts of the world. Until the 1950s the western scientific

paradigm had developed a dominant, exclusionary approach. Since Africa was not responding to the Western scientific model, the scholarly articles on Africa finally delved into the exploration of indigenous knowledge in the last two decades of the 20th century (Schafer J. et al., 2004). Accordingly, in spite of the existence of a great wealth of knowledge about local cultural practices in the field of child rearing, education and socialization, indigenous knowledge has only relatively recently been substantially and systematically integrated into early childhood research and practice, in particular in programming and interventions on the community level (J.L. Evans & Myers R.G., 1994).

Indigenous knowledge aims to promote “values of personal, relational, and collective well-being...” as it “identifies assets, especially in terms of the knowledge that the community possesses” (Diale B., Fritz E.). Empowerment of a community depends much on how these assets are being utilized. It is no secret that secular and religious development workers in Northern Malawi’s rural communities have often been, and are at times to this day, overlooking the fact that pre-packaged needs-based aid programs, more often than not, constitute barriers to facilitating traditional asset-based learning development. “Entering a community with an asset-based approach is like putting on spectacles that allow one to see what strengths a community has, rather than being blinded by what it lacks” (Diale B., Fritz E.).

Indigenous knowledge is often perceived as an alternative to the overpowering, ubiquitous economic and moral system of the West which is blamed for damaging our planet and undermining not only the quality of life of future generations but even their survival. Agrawal (1995) cautions against such dichotomy between indigenous and western thinking. “It is only when we move away from the sterile dichotomy between indigenous and western, when we begin to recognize intra-group differentiation; and when we seek out bridges across the constructed chasm between the traditional and the scientific, that we will initiate a productive dialogue to safeguard the interest of those who are disadvantaged” (p. 433). Given the dangers that lie in maintaining the dichotomy between western scientific and indigenous knowledge, two examples of childrearing practices still adhered to in Northern Malawi need to be re-evaluated in the light of indigenous knowledge and western science. Finally scientific knowledge is catching up with the indigenous practice of breastfeeding instead of the widely practiced bottle feeding of babies in the industrialized world. In contrast, a good example where scientific knowledge and practice needs to supplement indigenous practice are certain African food taboos based on cultural and religious beliefs that restrict the consumption of important nutrients on the household level and thus affect pregnant women and their unborn children (Kainja, J., 2010; Munthali A., 2007). Another example of indigenous practice from Northern Malawi open to scientific debate is the nearly exclusive assignment of agricultural work to the woman and, to a lesser degree, her older children. Suggestively, the woman’s traditional wedding gift from her spouse is a hoe (Hangartner E. & Blanken T., 2009).

Sustenance farming, which is putting the food on the tables of Malawian families, is the inexhaustible source of hard work throughout a woman's life. Even when pregnant, she works the "garden plot," which usually is quite a distance from the family's hut. She ploughs, hoes, rakes, plants, weeds and harvests all by herself, while exposed to the brutal heat of the sun burning down on her. Consequently, much of a pregnant woman's energy and resources go into her daily fieldwork—at the cost of her unborn child as well as her own health.

Indigenous knowledge can be justified for philosophical/ethical, utilitarian and pragmatic reasons. Philosophical and ethical arguments lay emphasis on cultural diversity and celebration of different world views as well as reciprocity and redistribution in the exchange of goods. Utilitarian theory values indigenous knowledge because it has helped people survive and evolve in their specific context by maximizing happiness and reducing suffering. Pragmatists base their assumption on the strong connections between humans and the natural world—connections that are comparable to those established by the theories of relativity and ecological interconnectedness in Western scientific theories (Pence A. & Schaefer J., 2006). With regard to early childhood development and childrearing practices, it is believed that "indigenous childrearing practices and beliefs are important for early childhood care and development (ECCD) because they are both pragmatically sound and intrinsically valuable. Indigenous knowledge is important ... to understand, support, and improve childrearing" (Evans and Myers, 1994, pp. 2-3). Similarly Hyde and Kabiru (2003) contend that early childhood development (ECD) interventions in Africa built on local knowledge prove to be more successful (p. 32). It comes as no surprise that many development agencies are thus trying to design culturally appropriate interventions using indigenous knowledge. Pence & Schafer cite as examples UNICEF's recent "Knowledge, Attitudes and Practices" studies and the Bernard van Leer Foundation's "Growing up in Indigenous Societies" initiative as well as the World Bank's "Indigenous Knowledge Program", which includes components related to early childhood development.

4. Indigenous Knowledge and Early Childrearing

Childrearing practices are rooted in the culture of any given society. In African cultures, in particular, they are fed from the well of indigenous knowledge that runs deep through the continent's immense rural landscapes. Childrearing practices are important determinants regarding the behaviors and expectations surrounding a child's birth and early years. Furthermore, they influence childhood and adolescence. Their impact on parenting is undeniable.

In general terms childrearing practices are activities that provide shelter, food and clothing, take care of illness and promote physical and mental development as well as psycho-social well-

being. What is done varies from place to place and is closely linked with the beliefs and values in a given cultural setting, i.e., with the question of what should be done. For instance, in Northern Malawi there are expectations of how to deal with a child's death; there are norms related to the naming of a child; there are parental and communal expectations during pregnancy and at the time of birth, etc. The purpose (the why) of the numerous "shoulds" in Malawian childrearing practices lies in the traditions, religious beliefs, myths and superstitions inherent in the culture. The family and the community want their childrearing practices to optimize the survival and health of the child in order to continue the lineage, ensure the survival of the social group and secure the children's support in old age.

Across cultures most *basic needs* of young children are fairly similar despite considerable differences in childrearing practices, patterns and beliefs, which are interconnected with the developmental stage, the physical and emotional care and the health and nutrition of the child. In any given society the lack of adequate physical care, nurture, health care and nutrition has consequences for the child's overall well-being. The economic and political context within which a child grows up greatly influences his/her physical, social and cognitive development.

As mentioned earlier, most practices, patterns and beliefs related to the upbringing of young children are simply different; although they stand in contrast, they are appropriate in their specific cultural setting, e.g., the practices of teaching a young child good behavior by talking to him/her versus communicating such behavior nonverbally; feeding a baby on demand versus feeding him/her at scheduled times; and allowing a young child to explore his/her surroundings on his/her own instead of providing supervised outings.

5. Socialization and Enculturation

Human beings are born without any culture. The general process of acquiring culture is known as socialization. In this process children learn the language of their culture, the nonverbal expressions, the roles they are to play in life as girls, boys, daughters, sons, brothers, sisters, wives, husbands and friends, their occupational roles and the moral/ethical/religious norms of their society. The process of socialization that occurs in a very specific culture is referred to as enculturation and is passed on to a child by his/her parents, the extended family and the community. Successful enculturation draws abundantly from indigenous knowledge, which is embedded in social institutions. The following social institutions directly impact the upbringing of young children: family, health care and nutritional practices, political bodies, like village councils and orphan committees, religion, education (pre-school) and, within formal and informal early childrearing, story-telling, songs, games, riddles and toys (Pence and Schafer, 2006). This paper focuses on family; pregnancy and infancy, including witchcraft associated with pregnancy and birth; nutrition and health care; early informal child rearing; formal pre-

school education; and stories, songs and riddles, all of which plumb the depth of indigenous knowledge embedded in the culture of Northern Malawi.

5.1. The Family

The traditional African family is such a broad topic that it can only be the subject of an overview. The cultural and physical diversity and the dramatic social changes in the second half of the 20th century defy broad generalizations. In spite of diversification and changes, the family retains a particular centrality due to the weakness of other institutions. G. Therborn points out, “The most striking characteristics of African family are likely the formation of marital alliances and of property inheritance” (Therborn, G., 2004, p. 18). Property inheritance has far-reaching consequences for African children insofar as it often dictates whether a child has at least one nutritious meal a day, can go to school and get basic health care. Malawi has two customary systems of inheritance, the patrilineal and the matrilineal. In the former system, the woman does not own property in her own right. If widowed, she inherits stewardship of the marital property through association with her children and is inheritable by one of the brothers of her deceased husband based on the promises given when *lobola* (the bride price) was negotiated with the husband’s family at the time of marriage. The matrilineal system does not involve *lobola*; the husband moves in with his wife, and the inheritance follows the female line: the children of the sister of the deceased are the rightful heirs. In the case of a leasehold estate without a will, the matrilineal system is problematic. After the death of the leaseholder (lessee), the sister’s children claim the farm and the income it provides as their property at the expense of the children of the deceased. Of course, this causes major friction between the deceased’s children and their cousins. If the deceased happened to be the lessor of the property, his nieces and nephews, instead of his children, enjoy the lease income from the property. In either case, the children of the deceased face the reality of having no income from working or leasing the farm, a very bitter reality when HIV/AIDS or a common tropical disease of the father has totally depleted the family’s resources (HIV/AIDS and Its Impact on Land Issues in Malawi, 2:3 ff.); To Have and to Hold – Women’s Property and Inheritance Rights in the Context of HIV/AIDS in Sub-Saharan Africa, 2004 pp. 21-22).

Another typical feature, though by no means uniformly the same all over Africa, is the system of kinship, which provides for a child in Northern Malawi support, nurture and wisdom far beyond the circle of his/her immediate family. From a very personal perspective, D. Bourdagné (2010) describes his family in particular and the African family in general as “much larger than an individual [family] ... By birth, the African becomes a member of a wider community that non-Africans designate as the extended family.” In Bourdagné’s homeland, Chad, as well as in Malawi, the people introduce a friend or closer acquaintance as “brother” or “sister,” and call the elderly respectfully “mama” and “dada” respectively. “Thus,” Bourdagné (2010) recounts, “I

have many young people of my broader family who call me dad and who call my wife mum. We have four children but we are parents to more than ten children, including our younger brothers and sisters of whom we take care. The more the family is extended, the more it gets a feeling of pride, solidarity and security. This feeling of pride, solidarity and security is part and parcel of African childrearing where, unlike in North America, individuality has little value because the individual is defined by his/her family. Consequently, decisions are never made individually, and sharing with other members of the extended family comes naturally." In Northern Malawi, for instance, whole villages rally together to provide orphans and other children at risk with physical and emotional care. In the numerous childcare centers that have sprung up in the past 20 years, village women, all volunteers, take care of large groups of forty to eighty children at risk. Buildings, furniture, educational materials, food, cooking utensils, etc., are freely shared, no matter how sparse the resources. Communal caring for each other is the source of relief and gratitude as well as joy and happiness. "One is always surrounded in period[s] of difficulty" (Bourdanné). Even death does not break family life because it includes the ancestors, who maintain a close relationship with the extended family. The living refer to them when they relate to their traditions, moral values and culture. Unfortunately, modern life in the large cities erodes communal life in Africa; people become more individualistic and ego-centric. Especially in the cities, "the pressure to possess, the wild materialism, the illusion of material happiness in the accumulation of wealth negatively affect the community dynamics in the African family" (Bourdanné).

Like families anywhere in the world, African families are facing major challenges. Globalization is quickly spreading and thus structural adjustments are affecting demographic, behavior and family patterns. Unemployment/underemployment causes rural and urban poverty (J.L. Evans, Ch. E. Matola, J. P.T. Nyeko, 2008). Migration from rural to urban areas is on the increase due to shrinking agricultural productivity, sparse rural employment opportunities and rural social and physical infrastructures that are in their infancy. Migration from poor rural areas to larger cities is a temptation for poor, isolated village dwellers, especially young males in search of jobs that can sustain their families. In Malawi the trend of employment-related migration goes as far back as colonial rule when Malawian men were hired as laborers in Zambia, Zimbabwe and even as far away as South Africa. Malawians in the Diaspora primarily contributed, and are still doing so, to the development of Malawi through remittances. Remittances are money that is sent back to Malawi to ensure household security and poverty alleviation. Between 2006 and 2009 quite a few older villagers, in particular political dignitaries connected with the upcoming community-based childcare centers, would tell about their hard work as migrant laborers in Northern Rhodesia and point out that they still receive a pension large enough to support their extended families. Migration is also responsible for the shift in roles in Malawian families, which forces the women to step into their absent husband's roles. In 2000 28.5% of Malawian fathers

did not live in their familiar surroundings in Malawi but “in compounds, shacks, and with other families in the towns and cities to which they [had] migrated to look for work.” 8.3% of fathers had succumbed to common tropical diseases (Richter, L.M. & Morrell, R., 2008). Further challenges to the family include fewer children as a consequence of less space, poor housing in urban areas and the virtual standstill of the in-kind trade which is still widely practiced in the rural areas of Northern Malawi. More and more, children tend to be perceived as a drain on limited resources rather than as active contributors to the smallholding farm. The HIV/AIDS crisis in Malawi has reached a monumental scale: between 1990 and 2003 the number of orphans and half orphans grew from 800,000 to 1.2 million (Malawi Demographic and Health Survey, 2004).

5.2. Healthcare: Pregnancy and Infancy

5.2.1. Pregnancy

Indigenous knowledge about pregnancy, birth and infant/toddler care, often in the form of superstition and taboo (cf. below, p. 11), has very deep roots. In many African societies there is little understanding of the biological process of conceiving and carrying a child to term. In Northern Malawi most people, including fathers and mothers-to-be, have but a vague sense as to when their child was conceived, let alone when it will be, or was, born. Evidence suggests that conception, pregnancy and birth of a child are subject to more beliefs and superstitions than any other period of life. “In general, it can be stated that the younger the child the more information there is about the childrearing practices and beliefs associated with that age ... This may be due to the fact this is a critical time in terms of a child’s survival” (Evans, J. L., 1994, p. 11).

In Malawi there is the belief is that mothers who are breast feeding should not get pregnant. Until recently, the practice was for the couple to abstain from sex from the seventh month of pregnancy until the child was two, roughly a two-year period of abstinence. From the time of conception until approximately the seventh month, sexual intercourse was deemed necessary because, according to popular belief, the father feeds the fetus during pregnancy (Munthali, A., 2007, p. 142). After seven months, the woman would focus her attention on the changes in her body, and the man, especially in polygamous cultures, could easily be sexually active with one of his other wives. It is assumed that the above period of abstinence is still observed here and there in rural Northern Malawi. Though unintended, the two-year abstinence results in effective birth control if consistently practiced, supplementing the officially promoted practice of child-spacing, which is frequently the topic of health education in the community-based childcare centers. The community nurse explains the practice to the women involved with early

childhood education, the men being conspicuously absent or, when present, often giggling and joking around.

Munthali gives a number of reasons for the abstinence: “The Tumbuka [people of Bantu ethnicity found in Northern Malawi] have the view that after the seventh month of pregnancy, the child in the womb turns around and the head faces the delivery canal (preparing for delivery). Having sexual intercourse at this stage is considered dangerous because the man’s penis can pierce the child’s fontanel resulting in the death of the child [stillbirth] ... At this stage of pregnancy, it is also perceived that when a man ejaculates, the sperm land on the body of the foetus, and hence the baby may be born with sperm covering his or her body. This is generally perceived to be shameful ... and the mother is laughed at by the women attending to her during delivery, mocking her that she indulged herself in sexual intercourse. A baby born with sperm covering his or her body is said to be very weak and might even die soon after birth” (Munthali).

In addition to abstinence from marital sex, Munthali also reports restrictions on extra-marital sex during pregnancy (143). When either the husband or the wife has extra-marital sex during pregnancy, the Tumbuka believe that the “blood” (sexual fluids) of the extra-marital partner mixes with the “blood” of the pregnant woman. This can lead to difficult labor or even result in the death of the child. If, in the case of extra-marital intercourse of the pregnant woman, the woman confesses all her affairs, she will be “cured” from difficult labor or death of the child. Of course, such a confession is highly embarrassing for the woman. The Tumbuka as well as the Chewa of central Malawi believe in the “healing” effect of confession. The Ngoni in the district of Mzimba [a district in the Northern Region of Malawi], though, do not share this belief. Following extra-marital intercourse, in 2002 a convulsing pregnant woman was immersed in a fast flowing river, but later taken away from the site by local health workers. It was believed that this ritual would wash away the bodily fluids of the man she had intercourse with, while, in fact, the woman was suffering from pre-eclampsia, a very dangerous prenatal condition affecting mother and child. From a Western perspective, the above beliefs can be rationally justified as prevention of sexually transmitted diseases during pregnancy, which is highly desirable due to the dangers of such diseases for mother-to-be and child.

The beliefs about marital abstinence from sex and extra-marital intercourse during pregnancy, as mentioned above, call for a brief discourse into superstition and taboo. The two-year abstinence from the seventh month of pregnancy until the young child reaches age two can be attributed to taboo, which is defined as “a custom ... forbidding association with a particular person ...” (Merriam-Webster Dictionary, 11th edition). With regard to the reasons for the abstinence, the beliefs surrounding the sperms on the baby can be subsumed under superstition – according to definition “a belief or practice resulting from ignorance, fear of the

unknown ... or false conception of causation" (Merriam-Webster, 11th edition). As a matter of fact, the substance covering the newborn's body is not sperm but vernix, the cheese-like substance that protects the skin of the newborn from amniotic fluid and friction against itself.

5.2.2. Nutrition and Nutritional Taboos

Remarkable are the nutritional taboos during pregnancy. Bwankha (muddy/slippery substances, like mud fish) and delele (okra) are not allowed when a woman tries to get pregnant. In order to improve her chances to conceive, she may take chimika medicines. These medicines stop her menstrual flow. It is believed that, when a woman takes these medicines while at the same time eating mud fish or okra, the man's sperm will slip away from the vagina, due to the consumption of the slippery/slimy okra and mud fish, which would prevent nidation of the egg. In addition, mud fish and okra are not to be eaten because soda is added when they are cooked. Soda and pepper or anything bitter, for that matter, are believed to spoil the eyes of the child. Munthali points out that a woman should also not eat fresh "bloody" meat because, according to popular belief, in doing so, the menstruation is likely to continue and, in the worst-case scenario, the woman might even miscarry (Munthali, p. 144). Furthermore, pregnant women should not consume anything hot. Between 2006 and 2009, this practice was observed several times in Northern Malawi where the sima, a Malawian staple made from corn, and the tea were cooled for pregnant women volunteering in community-based childcare centers. The belief is that hot sima and tea will burn the unborn child and result in permanent scarring. Yet another popular belief is that a pregnant woman should not eat eggs because eggs cause the baby to suffer from convulsions at birth. In view of the fact that there are so many food taboos for mothers-to-be still alive among the Tumbuka people, the question arises as to why this is so. Munthali answers as follows: "What the Tumbuka believe is that whatever the woman does during the period she is pregnant - pala anachikozgo chiheni (when she has a 'bad resemblance') - the child will follow the same things; hence she needs to stick to the restrictions ..." (Munthali). Sticking to the restrictions is all the more important because "by African definition, personhood is something an individual could fail to become, could be incompetent at. Personhood must be attained through the learning of social rules. Hence the African emphasizes ... the overarching necessity of learning the social rules by which the community lives ... so that what was initially biologically given can come to attain social selfhood, i.e., become a person with all the inbuilt excellencies implied by the term" (Menkiti, I.A., 1984, p. 173). In Tumbuka society, the conclusion from Menkiti's traditional African train of thought suggests that infringement of dietary rules by the mother-to-be could affect the child negatively; he or she could fail to grow into full personhood because "the child will follow the same things" (Munthali, *ibid.*). The consequences of "like mother like child" are far reaching for early childrearing practices: the parents and community would have to deal with a behaviorally, perhaps even physically, challenged child!

5.2.3. Witchcraft Associated with Pregnancy and Birth

The power of witchcraft over pregnancy and birth is still ubiquitous among the Tumbuka people. The low birth rate in Malawi, including Northern Malawi, though improving in the recent past, has to be seen, among other things, in connection with witchcraft, which prevents women from seeking modern medical assistance in the clinics and hospitals run by the government and religious institutions. It is believed that delivery in a hospital will cause the death of the child or the mother in the process of birth in cases where the witch, out of jealousy, has tied up the child in the womb. The traditional birth attendants (TBAs) play an important role in counteracting the powers of witchcraft; however, their success is questionable (cf. below). Women who do not deliver after nine months of pregnancy fear that they have been bewitched. They are likely to discontinue prenatal hospital care, which becomes more and more prevalent even in rural Northern Malawi, and seek help from a TBA. Not surprisingly, the infant mortality rate is relatively high for women under the care of TBAs because they often end up with the difficult cases where witchcraft is believed to be involved. Very telling examples, without involvement of witchcraft, though, are the often difficult cases where a cesarean is indicated. The pregnant women informed about their impending cesarean operation in the course of their prenatal care in a local clinic turn to a local TBA out of fear of the planned referral to one of the government-run district hospitals staffed by trained doctors/health officers. Consequently, TBAs end up with cases far beyond their expertise. Thus, TBAs' relatively high death rates, maternal as well as infant, can be easily elucidated.

5.2.4. Abnormal Births

In Tumbuka society, indigenous beliefs surrounding abnormal birth (*makhumbi*, a term also used for violation and sanctions of postpartum taboos) that carry heavy sanctions abound. The TBAs play a crucial role in establishing if a birth is normal or abnormal. From the perspective of modern, western childrearing, the sanctions are unfortunate because they mark the child for a lifetime. In addition, an abnormal birth has grave consequences for the parents. The birth of twins is considered abnormal by the Tumbuka and the Nyakyusa of southern Tanzania. The twins are given special names, Muleza and Nyama, the former meaning "twin" the latter "later." Unexpressed reservation toward twin births could be observed in the community-based childcare centers where every once in a while a mother with young twins would show up, one twin bundled on her back, the other on her chest, usually a toddler by her side and a bucket of water on her head. Just the logistics of having twins are mind boggling, let alone the additional resources needed, like food, water, time, etc. Twins are considered dangerous to people and domesticated animals and must therefore be separated from the community. Breech birth is another misfortune happening to a Tumbuka and, equally, a Nyakyusa woman. Her child is given the name Mavunika and thus branded for a lifetime. On the contrary, among the Ngoni in the

Mzimba and Karonga districts in Northern Malawi and the Nyole of eastern Uganda, twins are a cause for joy. The mother is given fresh beef meat and milk to enhance breastfeeding. A child conceived before the mother resumes her regular cycle shares the same fate as twins. This “abnormal birth” constitutes a violation of postpartum taboos. The mother is deemed unclean, and separation of parents and child from the community is necessary. Humble, existing abodes and kitchens, usually located some distance from the family dwelling, serve as holding places for the outcasts. The smoke from such places has to be directed away from the village because it pollutes the villagers, especially children, and their animals and hence might kill them. Any contact with the couple and child could cause *kutupa* (swelling), believed to somehow magically transfer from the pregnant woman to all the people she has contact with. The swelling can even be transferred by food prepared by a “contagious” woman. Dishware cannot be exchanged between the outcasts and any member of the community. If a separated couple receives food from the outside, it is served on banana leaves. All clothes of a couple have to be destroyed prior to their rejoining the village, which can be anywhere between one month to over two years after the start of separation. There is the widespread belief among the Tumbuka that those involved in postpartum sexual intercourse (roughly within six weeks after birth) or sex while the child is still small can cause *chikhoso chamoto* (literally cough of fire) in children, which can render them gravely ill (loss of weight, fever, diarrhea, swelling of hands and feet, coughing, etc.). At the core of the beliefs about *chikhoso chamoto* is the protection of the newborn baby. To ward off evil, a large number of rituals grounded in religion and spiritualism are performed; they are too numerous to be reported in detail. One, though, observed in a home outside of Karonga in 2007 shall serve as an example. It presented itself as follows: Herbs were mixed with other ingredients and wrapped in a dark cloth. The cloth was sewn shut, and the small pendent was strung on a thin cord. The newborn child was then fitted with the amulet. Munthali explains that *chikhoso chamoto* is caused by “hotness” due to sexual intercourse, which is synonymous with fire (cf. above). The ashes of the fire on which the child’s food is prepared are used in the ritual as a cooling agent for those who are sexually “hot.” By using the ashes the perceived risk of “infection” of the newborn is banned. From a source unrelated to the family, it was moreover ascertained that the fear of the child’s falling ill after extra-marital sex of the father is also a reason, of more recent origin though, given for the use of the amulet, a reason not to be taken lightly in the context of the specific circumstances of the family (Munthali, 2007).

One might wonder to what extent the above superstitious practices in connection with makhumbi are still adhered to. Munthali reports that, for instance, child swelling is more and more being attributed to malnutrition, marasmus or kwashiorkor. For centuries makhumbi has been a convenient method of child spacing. Nowadays the use of condoms is on the rise, possibly resulting in the decrease of makhumbi. Furthermore, newly gained psychological

insights about the debilitating consequences of long periods of separation and the enforced self-reliance of the mother might have a mitigating effect on the beliefs surrounding makhumbi. Chikhoso chamoto, historically only treatable with traditional medicine, is nowadays considered to be potentially treatable with modern medicine, but only if all else has failed, i.e., if the traditional medicine is not compatible with the child (Munthali, pp. 151-152).

5.2.5. Infancy and Early Childhood Education

5.2.5.1. Informal Setting

In Malawi, as in much of Sub-Saharan Africa, a human being is a creature in process. The process is at the center of early childhood education, which provides the young child with skills, values and ideals for adult life. During infancy it is the mother who cares for the infant at any time, day and night. The child is physically attached to her back and her breast. The infant is “singing,” “dancing,” “cooking,” etc., with his/her mother who can be observed teaching the toddlers in the community-based childcare center. While formal pre-school education for toddlers (12 or 18 months to 3 years) has been gaining popularity in Malawi since the 1990s, this does not mean that the toddler is not introduced to informal education prior to and during attendance of pre-school, like how to act in different settings, how to behave properly and, most importantly, how to play with other children. Although the toddler does very rarely leave his/her home and yard, the child is “constantly surrounded by many people of all ages” (The East African Women’s Center, Minnesota Department of Health, July 2010, p.3). The report continues: “The East African mothers do not pack up and take their children everywhere, as many American mothers do. The children may never encounter an unfamiliar face – especially not a white face, or people using a different language, or wearing unfamiliar clothing ... “(The East African Women’s Center, p. 4). A workshop in a very remote hamlet in northern Malawi, only accessible on foot, illustrates this statement: upon the facilitators’ arrival in the hamlet, the children waiting to participate in the workshop either ran away or were tied to their mothers’ apron strings or touched the white visitors’ skin and hair in awe and wonderment. They had never left their immediate surroundings and had therefore no clue about the world beyond their hamlet. However, it became quite clear that the children were, relative to their age, socially well adjusted and knew quite a few early childhood songs and rhymes in their native Ngonde, in addition to being able to perform some easy dance movements - all activities they had learned from their caregivers and older siblings, the latter often taking on childcare responsibilities for their sick or deceased parents. In the course of the visit it was also observed that the older toddlers assisted their parents by doing errands for them; they helped with simple household chores and were playing with very basic toys from items found in their surroundings, like grass, rocks, sticks, etc. (similarly Ezeh, P.-J., 2007).

5.2.5.2. Formal Setting

Basic informal education seems to come quite naturally to Malawian mothers and female members of the extended family. It is reported, though, that overall there is a lack of understanding and knowledge about food and food preparation/preservation; learning and stimulation opportunities; health care, etc., among parents in general and mothers in particular (Evans, L. E., Matola, Ch. E. & Nyeko, J. P. T., 2008). As to food preservation and conservation promoted between 2006 and 2009, several campaigns were launched to enrich the daily meals of the young children attending community-based childcare centers in Karonga and the surrounding rural areas. Unfortunately, attempts to dry mangoes, of which there are seasonally plenty all over Northern Malawi, did not catch on; not even supplementation of fresh mangoes to the daily *likuni phala* (enriched porridge) was seriously considered. Unarguably, more needs to be done, especially in the promising application of food dehydration, to further improve food security in the area. Learning and stimulation were, in part, dependent on nonrenewable UNICEF materials, like crayons, paper, scissors, paint and paint brushes, etc., none of which were readily available on the local market. Much effort went into workshops presented by Lusubilo staff and volunteers, who taught the child caregivers, among other things, how to build on existing knowledge and practice in crafting toys manually. Lusubilo Community-Based Orphan Care Programme (a program based in Karonga, Northern Malawi, for young children orphaned by their parents' deaths) made outstanding contributions spearheaded by a staff nurse, staff nutritionists and local healthcare workers (HCWs) in the area of basic health care for the young attendees of its sixty+ daycare centers, whose newly acquired practices eventually spread to large segments of the community. Workshops or spontaneous demonstrations of water purification, hand-washing and toilet hygiene and protection from mosquitoes for the prevention of malaria occurred on a regular basis. Within three years, malnutrition among the attending children was basically eliminated, and diarrhea due to unclean water and/or worms, anemia and rashes of all sorts were under control (similarly Fajardo, 2013; DeVoe, D. 2013; Bloemen, 2010). There is unanimity among local and foreign development experts that Malawi has made strides in the development of early childcare centers that provide comprehensive, inclusive care for young children (Engle et al., 2008). A key feature of ECD implementation in Malawi is the community-based childcare center (CBCC). Over sixty of the roughly nine thousand centers existing in 2009 (Chalamanda et al., 2009) were established between 2006 and 2009 in and around Karonga under the guidance and supervision of Lusubilo Community-Based Orphan Care Programme, which was funded by numerous sponsors. Based on a government-commissioned rural child assessment conducted in 1988, over one million children under five (out of 1.4 million) lived in rural Malawi without any pre-schools available at the time (Engle et al., 2008). "While the CBCCs did not receive much community support in their early days, they saw a revival in the 1990s because of the growing

numbers of orphaned children affected by HIV/AIDS. Today CBCCs are viewed as a fundamental vehicle for providing social and emotional support to children affected by HIV/AIDS” (p. 293). In the sixty some childcare centers established between 2006 and 2009 by Lusubilo, the majority of the children were orphaned or semi-orphaned by AIDS or malaria or were otherwise vulnerable children. In spite of the fact that the centers were open to every child in the community and were selflessly and generously run by community volunteers from all walks of life, there was a growing sense that parents/caregivers, who could afford tuition, should pay according to their income so that the volunteer teachers could be modestly remunerated. From the perspective of those volunteers who lived in poverty and did need some kind of income during the hours they dedicated to communal childcare instead of their subsistence farm, remuneration made much sense. A major problem with remuneration of volunteer child caregivers was, and still is, the lack of training, in particular training that is well integrated in the cultural, social, economic and political context of the area where the care is provided. Other caregiver-related challenges in Lusubilo’s centers were: low literacy level and hence insufficient schooling of caregivers; high turnover rate of volunteer service providers due to poverty; family commitments, like care of own young children and sick or old family members; huge classes of sixty to one hundred children; lack of educational resources etc. Challenges unrelated to direct childcare services were: low capacity of the rural communities around Karonga to provide integrated services; communal commitment not backed up by adequate resources; insufficient advocacy to link knowledge/skills/practice; poor communication strategies at communal level, e.g., to increase child participation; deficient coordination of services, etc. (similarly Chalamanda et al., 20).

5.2.6. Making the Case for Integrating Indigenous Knowledge into Early Childhood Education

Since the inception of early childhood programs in Malawi, most programs have been primarily focused on the scientific approach. This created/creates a gap between what program providers, like Lusubilo Community-Based Orphan Care Programme, wanted to happen for the young pre-schoolers and what children were experiencing in their families and communities. The scientific approach aims, to a large extent, at integration of the social services offered by the modern state to the detriment of integration of traditional values, beliefs and practices associated with formal early childhood development (Gwengwe, 2013). Gwengwe continues by pointing out that the scientific model “remains a cause of alienation at this primary and fundamental level of development of the individual” (2.1.4). Experience at Lusubilo confirms that this model is only marginally relevant and barely sustainable. Gwengwe suggests vertical integration of tradition, i.e., enculturation with the traditional systems. He stresses that “the critical challenge is to design and develop models of CBCC that are relevant to the context, functional, effective and sustainable in the long run. Among other things, this calls for creative thinking on how to identify ‘Best Practices’ from traditional and modern systems in relation to

early childhood development (Gwengwe). Given the numerous challenges listed above, the *legal* framework for the protection of children; the *policy* framework; and the *institutional* framework need to be taken into consideration. Regarding the *legal* framework, it can be said that it is relatively strong because recently Malawi has undertaken a law reform that reviewed and consolidated most of the key legislation dealing with children. This process led to the enactment of the Child Care, Protection and Justice Act in 2009. The *policy* framework has been updated by various national policies adopted by the Malawi government, such as the Malawi Growth and Development Strategy, the National Plan for Action for the Promotion and Protection of Children's Rights as well as the Orphan and Vulnerable Children's Policy. In the international arena, Malawi has joined the Millennium Development Declaration adopted by the UN General Assembly in September 2000. Most of the policy documents and programs pertaining to children and youth, notably the above-mentioned Malawi Growth and Development Strategy, are streamlined toward the attainment of the Millennium Development Goals. Moreover, Malawi has ratified all the important international human rights instruments aimed at children's concerns: the UN Convention on the Rights of Children; the African Charter on the Rights and Welfare of Children; the UN International Covenant on Economic, Social and Cultural Rights, etc. Last but not least, the *institutional* framework is being provided by the Malawi Ministry of Gender, Children and Community Development and its twenty-eight district offices. The Ministry of Gender, Children and Community Development is being assisted in matters where specific professional expertise is required by the Ministry of Labour and Vocational Training; the Ministry of Education, Science and Technology; the Ministry of Local Government and other entities that can ensure expert collaboration in matters of indigenous childrearing practices, patterns and beliefs (Gwengwe). The latter are crucial for the following reasons:

- To honor cultural values
- To provide continuity in a time of rapid change
- To appreciate diversity
- To enhance the childrearing practices

Put in the simplest terms indigenous childrearing practices are the activities available to parents/caregiver that have evolved from cultural patterns, in particular the ideas of what constitutes the accepted, i.e., preferable practices or norms. In their book titled *Childrearing Practices: Creating Programs Where Tradition and Modern Practices Meet*, Evans and Myers (1994) give us two pertinent examples of practices and beliefs that affect the style and quality of caregiving: "... the practice of carrying a child [as observed in Malawi without exception] has a different effect on the development of that child than the practice of placing the child in a cradle or playpen. Furthermore, the social and parental belief that children are given by God, and therefore should be treated in a particular way, has effects that are different from the

belief that children are human creations” (p. 4). The authors point out that the large variety of indigenous childrearing practices assures the survival, the maintenance, the sustainability and the development and growth of a specific group or culture including its offspring (p. 5). The explanations as to why particular indigenous childrearing practices are used or why a certain practice is preferred over another derives from myths, traditional dances, initiation ceremonies, storytelling, folklore, sayings, proverbs, games, songs and riddles, mostly recreated in visual and oral form – a rich collection of traditional tools for early child learning and development both in technical and moral dimension.

5.2.7. Gathering of Information of Indigenous Practices, Evaluating the Need for Modifications and Using Guiding Principles for Achieving Goals

Gaining meaningful information about the implementation of indigenous knowledge in early childhood education requires consulting a range of sources. Regrettably, the literature about traditional childrearing practices and patterns has quite a few limitations. First, the number of relevant works is small and usually multi-disciplinary. The data must therefore be collected from a variety of sources – to a large extent sources sponsored by the government or international organizations. Second, the gap between academia and the field of application is considerable in Africa. Academic input can only become useful to the practitioners when it is “translated” into a form that is understood in the field. Third, for the most part the literature is derived from a Western viewpoint that can distort some of the conclusions drawn. Lastly, some of the literature is outdated. Nevertheless, the literature, including nontraditional sources such as stories, myths, songs, etc., has proven very helpful for researching this paper.

Lusubilo engaged in extensive outreach to the local communities in order to gain an overall impression of the practices and beliefs within their specific cultural context. It was found that indigenous practices, mainly conveyed through stories, songs, games, riddles and sayings handed down from generation to generation, were in daily use and that the people engaged in the upbringing of young children under five were willing to contribute their knowledge to the soon-to-be developed curriculum. There was a considerable stock of indigenous practices available in the moral/ethical arena, which was surprising to nonlocal (white) staff of Lusubilo. A flexible methodology to gain the sought-after local input was developed. Structured questionnaires and interviews were used very sparingly in order to encourage spontaneous conversation and responses. Diverging from structure, adults were asked about their own childhood and related practices and beliefs. Older and younger parents were brought together for comparison of practices and beliefs. Group dynamic exercises and a “day in the life of a young child” were initiated. All of the above yielded fruitful information. The people gathering the data were Lusubilo employees, mostly field officers, counselors and educators born and raised in the area. The gathered information was carefully checked against personal

impressions and observation of those who collected the data as well as some knowledgeable “outsiders.” In addition, indigenous knowledge was unearthed from other EDC practices and activities in many of Lusubilo’s 60+ community-based centers. For instance, early on in the building phase of the centers, it became obvious that the teacher(s) needed to enter the building, no matter how basic or elaborate its design, facing the children. Entering from the back was considered to be a grave violation of respect for the elders, which is deeply rooted in African culture and, while no longer strictly enforced in urban areas, is still an unbroken practice in rural Malawi. After the introduction of latrines in more recent times, indigenous practice can still be observed when children are allowed to train (“ease”) themselves into routine use of a designated latrine over an extended period of time without any adult assistance or supervision, let alone pressure. Regulating the discharge of bodily waste is considered a harmful interference with nature. The health hazards associated with the spreading of bodily waste by fifty to one hundred children in attendance on any given school day is a vague notion at best in rural Northern Malawi. Another indigenous practice in the area of hygiene/nutrition consists in handing out leaves from surrounding trees and bushes to spoon up the hot porridge served to the children as part of the preschool program. Despite constant diarrheas and other intestinal ailments, for the local people there seems to be absolutely no possible connection between the bug-infested leaves, inadequate hand washing and their struggle with ever reoccurring diarrheas. The development of interventions to address harmful indigenous practices necessitated the consideration of several guiding principles: 1. There are no remedial formulas. No one model satisfies all childcare settings. Other similar settings, though, can serve as models to be adapted to the local circumstances. 2. Suggestions and presentations based on scientific models ought to be understood as starting points for discussion rather than messages to be put across at any price. Evans and Myers (1994) submit that such messages “do not allow for the identification, valuing and appropriation of current practices to meet the same goals” (p. 21). 3. Short and long-term goals must focus on areas of priority. 4. A creative, imaginative and constructive vision rather than a punishing attitude must be the foundation of the successful integration of good indigenous practices, behavior, beliefs and patterns. 5. Broad access to childcare programs with a strong indigenous component makes for strong community-based institutions for young children. “Many of the tasks that lead to a better quality of life can be simplified and made accessible to people with little formal education. The example comes from Malawi where ... people [from all walks of life] ... have [among other things] created pre-school centers ... “(p. 22).

The distinction between healthful and harmful indigenous beliefs, practices and behaviors poses a particular challenge. The above-mentioned open-air elimination and the use of leaf spoons are out of place in a safe childcare setting, while front access to the classroom is an appropriate, justifiable traditional practice. When tradition clashes with modern practices undergirded by solid research, the following identifying approach as used by Evans and Myers

(p. 20) is useful for assessing agreement or divergence between the traditional and the more modern:

- a. Identify the function of the practice, belief or behavior in its societal context
- b. Identify the fragility and amenability of the practice to be changed
- c. Identify motivation of supporters of traditional practice/belief to change existing practice

a. The function of a belief in society is tied both to peoples' needs and traditions within their environment and culture. One of the remarkably "progressive" indigenous practices is the drying of all kitchen utensils on primitive drying racks in full sun. This reduces the spread of germs drastically. Our practice of using towels seems totally outdated from the perspective of 21st century hygiene but explicable in its cultural context: for generations every young girl used to receive a hope chest from her mother as a wedding gift. This chest was filled with household linens: sheets, pillow cases, protective covers for mattresses, tablecloths, napkins, and, of course, kitchen towels, every item personalized with the bride's initials. Over time, kitchen towels became a *pièce de resistance* in every household regardless of the hygienic drawbacks.

b. Amenability of a traditional practice to change was observed during workshops organized by Lusubilo for volunteer child caregivers, male and female. It is customary that workshop participants receive a full meal for the entire duration of the workshop. The meal had to include meat. Soon it became evident that pork meat was not acceptable although hogs are an integral part of smallholdings in Northern Malawi. Initially the male participants insisted that pork meat could only be consumed when grilled on the open fire and consumed together with beer. The female participants, on the contrary, did not see anything wrong with having stewed pork meat for lunch. Heated discussions ensued. On the occasion of the third caregiver workshop, pork meat was, slowly but surely, making its way into the menu; the traditional practice was questioned and proved open to gradual change.

c. As to the motivator for change, a telling example again comes from Northern Malawi where some of the children came in raggedy clothes to nursery school. No words could make clear to their desperately poor parents/caregivers the importance of appropriate clothing, in particular in those centers that were in elevated, hence cold, areas. Only donations of second-hand clothing to every center to be handed out to the children when necessary, combined with the threat of exclusion from daycare, were bearing fruit. Childcare was something the mothers/caregivers highly valued. Appropriate clothing for the needy child/children and the mothers'/caregivers' desire to have the child/children enrolled was stronger than any lecture about cleanliness and hygiene.

The data generated were carefully evaluated and then used as the basis for the development of Lusubilo's ECD curriculum, which was presented to the volunteer teachers in thirty some

centers in three consecutive workshops (November/December 2006, June 2007, October 2007). The curriculum was designed to provide the volunteer caregivers, i.e., village women with a variety of educational backgrounds – ranging from 4th grade to college education – with the confidence to approach the children with constructive, positive practices based on traditional values and modern research and the know-how to correct practices detrimental to the physical, intellectual and emotional growth of the children. Eventually, when the government got involved in curriculum development for the CBCCs, most songs, stories, rhymes, etc., in English were integrated in the official government version, and Lusubilo’s sensitive approach to indigenous knowledge in the form of beliefs, practices and behaviors proved to be not only adequate but also valued.

5.2.8. The Transfer of Indigenous Knowledge into Early Childhood Education in the Form of Stories, Riddles and Songs

Africa in general and Malawi in particular is a hot bed of oral literature of all sorts. Although there is a general reluctance to share oral tradition with strangers, even as a tourist, of whom there are only few in Northern Malawi, one encounters the occasional story told in the evening in front of an open fire, in a summer hut, in a private home and, certainly, visiting a childcare center. The oral literary tradition is the custodian of community values; in particular, it forms the foundation of the moral education of young people by shaping their attitudes and beliefs. Proverbs, for instance, are the carriers of wisdom over generations, and without the knowledge of proverbs an African child is missing out on crucial input that assists him/her to properly function in society.

Every story in Northern Malawi has a moral conclusion, a lesson to be taken to heart. Samples of such lessons are: Be honest and kind; Don’t hurt your friends; Be careful what you wish for – you may get more than you asked for; Be faithful in your marriage; Even our real friends sometimes betray us; Children should be careful when staying away from home; Be grateful for a favor done to you by a friend; Carefully choose your spouse; For the sake of the entire family, women should be faithful to their husbands; Wherever we are, we should show good character; The first message is always the important one; Do not be gullible, otherwise bad things may happen to you; If you do not look carefully for a wife, you may end up marrying a goat or even worse; Beware of doctors!; When all are clever, there are no losers; Parents are responsible for their children’s well-being; Act honestly at home and in the community; Do not keep everything for yourself – leave something for others; Do not underestimate the weak and the small; Poverty often causes problems; Do right, wherever you may be; Treat all the children as you would treat your own; Do not make fun of disabled people; We must take care of other people’s children as we do of our own; Do not give up, God will reward you in time; if you create problems, people will not shy away from hurting you.

The above moral conclusions belong to specific oral stories; they are usually presented by the storyteller, often asking the audience for input. Needless to say, the audience often creates altered or new versions of the original lesson, thus enriching any given lesson. Furthermore in order to comprehend the true message of a story, the audience is often challenged to unearth the implicit moral, which goes far beyond the explicit (Tro Deho, R., 2006).

In the following, a couple of the above lessons shall be looked at more closely, especially those that strike the reader as unusual, trivial, weird or banal, and thus likely to reflect specific traditional cultural aspects of Northern Malawi. The above moral "*The first story is always the important one*" belongs to the following story on creation, life, and death:

Chameleon was told to go to the people to tell them that when a person dies, he dies for good. Lizard, on the other hand, was told to tell the people that a dead person is not dead for ever. Lizard was very fast and delivered his message, but slow Chameleon was late. When Chameleon tried to deliver his message, the people said, "We have already heard the message from Blue Lizard, and we do not believe you.

In a setting like rural Northern Malawi, where people still depend on the oral transmission of important messages to the larger community by slow-moving vehicles equipped with a person calling out a message through a megaphone, necessarily the first message must be the important and correct one. Considering the use of social networks, like Twitter in the western hemisphere, the first message may originate from a chaotic situation and thus not be the important one. In this culture the saying "*First impressions are important*" bears far deeper meaning. The moral of the Chameleon/Lizard story is meaningful in its cultural context but may sound somewhat unusual in our Western culture. It must be remembered that an African moral is deeply rooted in every-day experience, and the experience of moving news callers is common in Northern Malawi.

Another interesting sample of the above collection of lessons is the following: "*For the sake of the entire family, women should be faithful to their husbands.*" The story illustrating this lesson is:

There was a man who married a woman. They had one child. When the husband was not at home, another man came and convinced the woman to follow him. As they were leaving, her only child was singing: "The pot is broken. I want to nurse from you. Mother can you wait for me? The pot is broken. I want to nurse from you." After singing this song, the very young child died.

The cry of the child - for western standards puzzling and enigmatic - could underline that the relational ties in the family are broken and the child is deeply concerned about his survival, maybe even intuitively anticipating the end thereof. There is no doubt that the mother has the

closest attachment to the young Malawian child (cf. p. 15). Her disappearance is devastating; however, there might be a deeper cultural meaning behind it. It was pointed out in the unpublished paper *Tradition of African Story Telling* (Hangartner-Everts, 2008) that “most families in the greater Karonga area adhere to the patrilineal kinship system. That is, children trace their descent through the father. They are part and parcel of the father’s kinship group. A close intimate relationship between mother and child could be interpreted by the father’s family as a threat to the patrilineal kinship system, blurring the lines between patrilineal and matrilineal lineage for the children and thus to be avoided” (p. 27).

The following story is a telling example of an implicit lesson that goes far beyond the explicit and therefore needs digging deeper into the cultural context. The moral of the story is: “*Children should be careful when staying away from home.*” The unassuming young child interprets this lesson as a command to be careful once out of mother’s sight and the familiar surroundings. The story goes as follows:

There was a clay child by the name of Maganyeza. Maganyeza was told to come home when rain clouds formed in the sky. Mother said, “Do not let the rain fall on your body because it will melt.” One day the clay child went very far away from home to play. The rain clouds came. The child noticed them too late. The rain washed over the child’s body before it reached home, and the child died. The mother can still be heard singing: “The rain is coming. The rain is coming. I am your mother calling. I am your mother calling.”

This story echoes mythic times when humankind was fashioned out of clay according to the oral narratives of some tribes. Crystal (2008) states that “in each region of the world in which the creator traveled, he created humans from the materials available [among others clay which is abundantly available in Northern Malawi], making some white, other red or brown, and the Shilluk black”. These types of myths have a dual purpose: “They give but one of numerous accounts of how human beings were created and illustrate an open-minded, unbiased approach to the phenomenon of racial differences. The end of the story reminds of the fragility and ultimately the demise of human beings when exposed to natural forces, like rain, drought, earthquakes, etc. Unfortunately, the warning signals of Mother (Nature) often go unheeded” (Hangartner-Everts, p. 27). This story is a wonderful example of the hidden (implicit) wealth found in indigenous African stories, including those being told and retold over generations in Northern Malawi.

In addition to the rich source of indigenous knowledge embedded in the stories of Northern Malawi, the area is blessed with songs, riddles, proverbs, myths, tales, etc. *Kalulu Pamchenga* is the favorite song of the young students at Lusubilo Community-Based Childcare Centers as well as of the many children attending other centers in Karonga and surrounding areas. The song has an easy melody and a distinct, lively rhythm that invites dancing, which is, like singing, a

passion of the people in the entire country of Malawi. The song is about Kalulu, the wild rabbit that is now nearly extinct due to overhunting by hungry Malawians. Kalulu is the trickster according to folklore; he is by far the champion of the animals parading through Malawi's oral literature. Kalulu is usually depicted as the winner, even the hero. The Kalulu song resounding from all the community-based childcare and feeding centers goes as follows:

Kalulu, vina, a - e, Kalulu, vina, vina, vina pamchenga.

(Kalulu dance, a - e, Kalulu, dance, dance, dance in the sand.)

Kalulu, nyada, a - e, Kalulu, nyada, nyada, nyada pamchenga

(Kalulu, boast, a - e, Kalulu, boast, boast, boast in the sand.)

Kalulu, duka, a - e, Kalulu, duaka, duka, duka pmchenga.

(Kalulu, jump, a - e, Kalulu, jump, jump, jump in the sand.)

Kalulu, yenda, a - e, Kalulu, yenda, yenda, yenda pamchenga.

(Kalulu walk, a - e, Kalulu, walk, walk, walk in the sand.)

Surprising is the second verse, in which Kalulu is asked to boast. Why would a rabbit want to boast? Knowing Kalulu's physical features and his character - the rabbit is a small, rather inconspicuous, shy but fast animal - it is important that he can somehow make up for what he lacks in terms of physical stature and appearance, and he can do that by boasting about his successful ventures and undertakings! The young students are taught that mere boasting about one's qualities is, more often than not, exposed and hence not effective in difficult situations; however, presenting oneself in the best light possible is desirable. There is a fine line between boasting and talking with pride and self-satisfaction about one's achievements.

A riddle shall be given the honor of concluding this brief introduction of the most popular source of indigenous knowledge bubbling to the surface in every childcare center to the delight of the young learners. The riddle falls into the category of logic games, many of which are far too sophisticated for pre-schoolers, even the 5-year-old students. More often than not, the teacher has to take the students several times through the riddle, explaining every logic deduction several times. The riddle reads as follows:

How can you cross the river with millet, Goat and Hyena in only two trips? Be careful whom you take because Goat eats the millet and Hyena eats Goat.

Solution: First take Goat and cross the river. (Once Goat has made it safely to the other side of the river, it can no longer be eaten by Hyena; passing the river by herself, Goat cannot eat the millet). Then take Hyena and millet. (They leave each other alone since Hyena, unlike Goat, does not eat millet.)

Ingenuity, wit, alertness, intelligence and other qualities of the mind and heart are required from the players. Among adults, the "riddlers" take turns asking riddles; the player who cannot

answer loses. Even to an outsider graciously invited to a local riddle round, the laughter accompanying the game is infectious. The well of riddles seems to never run dry. It is fed by the wider literary tradition of oral story telling which makes Africa so special for those who love the word in all its appearances.

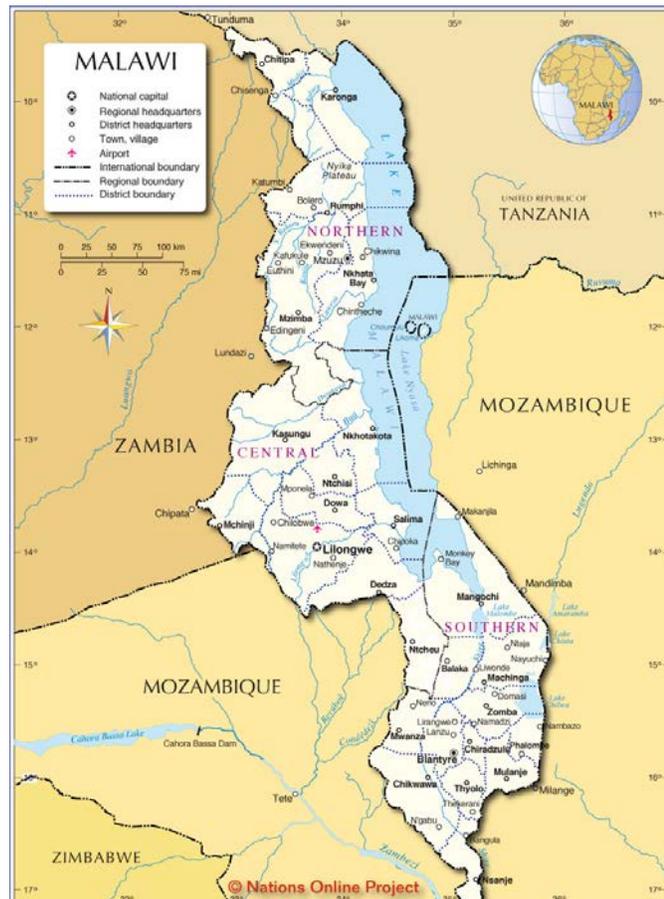
6. Conclusion

Indigenous knowledge as well as traditional practices, patterns and beliefs are tremendous assets to Northern Malawi. Unique to the African culture and the culture of the Northerners in particular, it stands in stark contrast to the Greco-Roman knowledge system generated by scholarly research. Until the 1950s, the Western paradigm was propagated throughout the African continent, but Africa did not, or only poorly, respond. Gradually, albeit reluctantly, indigenous knowledge is being recognized by Western Societies as holding great potential for the empowerment of poor, rural communities. In the context of early childhood education, it is being valued in research and practice.

Featuring some of the traditional practices, patterns and beliefs in the care and upbringing of a specific group of young children in Northern Malawi, namely the young children attending the community-based childcare centers sponsored by Lusubilo, is an endeavor well worth the effort. Indigenous knowledge pops up in numerous, diverse and unexpected nooks and crannies of Northern Malawian families; they are fundamentally different from Western families in that they are anchored in strong marital alliances as well as the traditional kinship system. Indigenous traditions and beliefs surround mother and child as early as at the moment of conception and sojourns with her and the fetus during the pregnancy, for example in the form of witchcraft and nutritional taboos. Traditional beliefs wield influence shortly after the child is born – especially after an abnormal birth. In the early days of a child's upbringing, traditional beliefs and practices come into play in the close relationship between mother and child and in the yard and village where the child grows up protected by his/her family and the larger community. In formal education, serious efforts are being made to give indigenous knowledge and traditional practices and beliefs due respect. Thoughtful enculturation of modern scientific approaches into the traditional system demands that design and development of models of early childhood education, in particular the widespread community-based education be relevant, functional, effective and sustainable. It is to be hoped that one day in the not-so-distant future traditional practices, patterns and beliefs will fully permeate early childhood education not only in Lusubilo's CBCCs but in all early childhood education centers throughout Malawi. Only then will the cultural values of the people of Malawi be honored, continuity be provided in time of rapid change, diversity be appreciated and cherished and childrearing practices throughout the country be enhanced.

About the Author

From 2006 to 2009, Elisabeth joined the Lusubilo team (Lusubilo Community-Based Orphan Care Programme) as a volunteer. At the time, Lusubilo was about to open 60+ Community-Based Childcare Centers (CBCC) in and around Karonga. Elisabeth was asked to coordinate and administrate the educational activities for the 2- to 5-year-old students, to instruct and supervise the caregivers on site and to provide training workshops in the villages. Following the workshops, Elisabeth compiled the statistical data for the reports to the donors. She also introduced enrichment classes in home economics and agriculture for the caregivers and cooks. These classes were taught by specialists and covered the following subject areas: food diversification, sewing, HIV/AIDS prevention, family planning, infectious diseases, drip irrigation, vegetable gardening, and hygiene. One of Elisabeth's foremost goals was sustainability and self-sufficiency of the CBCCs. To this end, she raised funds for farm inputs (small livestock, seeds and fertilizer) in order to generate regular income for the CBCCs. She also worked closely with the local representatives of the Ministry for Women and Child Development, who steadily increased their involvement in Lusubilo's CBCCs. Based on government guidelines, they introduced their own training for orphan caregivers and organized continuing education workshops after the initial training. Upon completion of Elisabeth's work at Lusubilo, a local employee, trained to act as a workshop facilitator for both basic workshops and continuing education for the caregivers in Lusubilo's four catchment areas, was ready to take over Elisabeth's position in addition to his previous assignment of implementing the Brighter Futures Project (sponsored by Catholic Relief Services, Malawi, and UNICEF). This project solidified and expanded the ECD work, which Elisabeth helped to get off the ground. In the summer of 2013 Elisabeth accompanied her husband, Thomas, chairman of the Department of Biomedical, Industrial and Human Factors Engineering at Wright State University (WSU), Dayton, Ohio, a WSU faculty member and a group of engineering students to Kaseye Community Hospital. There she helped initiate and facilitate contacts with local people involved in the implementation of an x-ray room, which was completed in June of 2013.



Map of Malawi. Retrieved August 30, 2013 from <http://www.nationsonline.org/oneWorld/map/malawi-administrative-map.htm>

References

- Agrawal, A. (1995). Dismantling the Divide between Indigenous and Scientific Knowledge. *Development and Change*, 26, 431-433
- Abel, S., Julie P., Tippene D., Finau D., & Lennan M. (2001). Infant Care Practices in New Zealand: A Cross-Cultural Study. *Social Science and Medicine*, 53, 1135-1148
- Bernard van Leer Foundation. Annual Report 2002. *Growing up in Indigenous Societies*. Retrieved March 26, 2013 from http://www.bernardvanleerfoundation/docs/annual_report_2002
- Bloemen, S. (2010). *Early Childhood Education Centers Make Strides in Malawi*. UNICEF Publication. Retrieved April 4, 2013 from <http://www.unicef.org/infobycountry/malawi56300.html>
- Bourdanné, D. (2010, May 25). Family Life in Africa. *The Mission Catalyst*. Retrieved March 28, 2013 from <http://www.bmsworldmission.org/africanfamily>
- Burgess, E.W. (1916). *The Function of Socialization in Social Evolution*. The University of Chicago. Chicago IL.
- Chalamanda F.R.W., Jeke, C.G. & Kholowa, F. (2009) *The Current State and Future of ECCD Inprogramme in Malawi*. Ministry of Gender, Children and Community Development, Ministry of Education and Chancellor College. Retrieved April 4, 2013 from siteresources.worldbank.org/.../4JekeMalawiexpansionofCBCCs.pptx
- Crystal, E. (2008). *African creational myths*. Retrieved April 21, 2008, from <http://www.crystalinks.com/africacreation.html>
- DeVoe, D. (2013). *Catholics Help Nourish Malawian Children*. CRS Publication. Retrieved April 4, 2013 from <http://www.crs.org/malawi/orphan-care-project>
- Diale, B., Fritz, E. (2007). Community Psychology. In N. Duncan., A. Iaidoo., J. Pillary., B. Bowman (Eds.), *Indigenous Knowledge and Learning Development* (p. 310). Cape Town, South Africa.
- The East African Women's Center. (2010). Minnesota Department of Health, July 2010. *Profile of Social Connectedness*. (p.3). Retrieved April 4, 2013 from http://www.health.state.mn.us/divs/opi/resources/db/docs/1007socialconnectedness_women_scenter.pdf
- Engle, P., Dunkelberg E. & Issa S. (2008). Africa's Future, Africa's Challenge – Early Childhood Care and Development in Sub-Saharan Africa. M. Garcia, A. Pence, & J.L. Evans (Eds.). *ECD and*

HIV/AIDS: The Newest Programming and Policy Challenge (p. 293). Herndon, VA: World Bank Publisher

Evans, J.L. (1994). Childrearing Practices in Sub-Saharan Africa: An Introduction to the Studies, *Coordinators' Handbook No. 15, 1994* (p. 11). Washington DC: The Consultative Group on ECCD.

Evans, L. E., Matola, Ch. E. & Nyeko, J. P. T. (2008). Africa's Future, Africa's Challenge: Early Childhood Care and Development in Sub-Saharan Africa. M. Garcia, A. Pence & J.L. Evans (Eds.) *Parenting Challenges for the Changing African Family* (p.275). Herndon, VA: World Bank Publisher

Evans, J.L., Myers, R.G. (1994). Childrearing Practices: Creating Programs Where Traditions and Modern Practices Meet. *Coordinators' Notebook No. 15, 1994* (p. 2-4). Washington DC: The Consultative Group on ECCD.

Ezeh, P.-J. (2007). Childrearing and Infant Care Issues: A Cross-cultural Perspective. In P. Liamputtong (Ed.), *Introduction: The Orring, The Igbo in Ethnographic Literature* (p. 37-39). New York NY: Nova Science Publishers, Inc.

Fajardo, S. (2013). *Malawi Village is Orphan's Family*. CRS Publication. Retrieved April 4, 2013 from <http://crs.org/malawi/malawi-village-is-orphans-family>

Flavier, J.M. et al. (1995). The cultural dimension of development: Indigenous knowledge systems. In Warren, D.M., L.J. Slikkerveer and D. Brokensha (Eds.), *The regional program for the promotion of indigenous knowledge in Asia* (p. 479). London: Intermediate Technology Publications.

Gwengwe, Ch. (2013). Association of Early Childhood Development in Malawi. *Proposal to Conduct Baseline Survey/Assessment of Community-Based Childcare Centres (CBCC) Model in the Implementation of Early Childhood Development (ECD) in Malawi* (2.1.4). Limbe, Blantyre, Malawi.

Hangartner-Everts, E. (2008). *Tradition of African Story Telling – Oral Literature in the Homes and Schools (Pre-Schools/Kindergarten) of Northern Malawi*. Unpublished manuscript available from the author at ehangart@gmail.com

Hangartner-Everts, E. & Blanken T. (2008). *Kalulu and Other African Stories from Northern Malawi*. Unpublished story collection available from the author at ehangart@gmail.com

Hyde, K.A.L., & Kabiru, M.N. (2003). *Early Childhood Development as an Important Strategy to Improve Learning Outcomes*. Association for the Development of Education in Africa, Biennial Meeting December 3-6, 2003. Grand Baie, Mauritius.

To Have and to Hold, 2004.— Women's Property and Inheritance Rights in the Context of HIV/AIDS in Sub-Saharan Africa. International Center for Research of Women -ICRW- Working Paper (p. 21-22).

What is Indigenous Knowledge? (1997). Retrieved March 25, 2013 from <http://www.worldbank.org/afr/ik/basic.htm>

Kainja. (2010). *Malawi Food Security, Spirit of uMunthu*. Retrieved March 25, 2013 from <http://www.Jimmykainja.co.uk/Malawi-food-security>

The Living Africa: the people – ethnic groups. (1998). Retrieved February 6, 2013 from http://www.librarythinkquest.org/16645/the_people/ethnicgroups.shtml

Lusubilo ECD Workshops 2006-2007. Unpublished references available from the author at ehangart@gmail.com

Malawi Country Team, Dar-es-Salaam, Tanzania, 2004. Early Childhood Development – HIV/AIDS in Malawi. Retrieved April 4, 2013 from siteresources.worldbank.org/INTECD/.../MALAWI_presentation.ppt

Malawi Demographic and Health Survey. (2004). National Statistical Office –NSO- (Malawi) and ORC Macro. 2005 (p. 185). Calverton MD.

Mbaya, S. (2002). *HIV/AIDS and Its Impact on Land Issues in Malawi*. Southern African Regional Poverty Network –SPARN-, 2.3 ff. Retrieved March 27, 2013 from <http://www.sarpn.org/documents/e0000022/papers/mbaya/page2.php>

Menkiti, I.A. (1984). *Person and Community in African Traditional Thought*. Retrieved March 29, 2013 from <http://www.courseweb.stthomas.edu/sjlaumakis/Reading%203-AFRICAN%20VIEW.pdf>

Munthali, A. (2007). Childrearing and Infant Care Issues: A Cross-cultural Perspective. In P. Liamputtong (Ed.), *Beliefs about Pregnancy, Childbearing and Newborn in a Rural District in Northern Malawi* (pp. 142-153). New York NY: Nova Science Publishers, Inc.

Pence, A. & Schaefer J. (2006). Indigenous Knowledge and Early Childhood Development *International Development* 2(3), 1-3.

Pence, A. & Schaefer J. *What is Indigenous Knowledge?, 2006*. Retrieved April 5, 2013 from www.Worldbank.org/afr/ik/basic.html

Richter, L.M. & Morrell, R. (2008). Africa's Future, Africa's Challenge – Early Childhood Care and Development in Sub-Saharan Africa. M. Garcia, A. Pence, & J.L. Evans (Eds.). *Raising Children in Africa – Holding Up the Other Half of the Sky*. (pp. 152-154). Herndon, VA: World Bank Publisher

Rosenthal, M. & Roer-Strier, D. (2001). Cultural differences in mothers' developmental goals and ethnotheories. *International Journal of Psychology*, 36(1), 20- 31.

Schaefer, J. et al. (2004). Exploring and promoting the value of indigenous knowledge in early childhood development in Africa. 'The Paradigm Shift'. The Free Library. (September 22, 2004). Retrieved March 25, 2013 from

<http://www.thefreelibrary.com/Exploring+and+promoting+the+value+of+indigenous+knowledge+in+early...-a0137430931>

Southern African Regional Poverty Network –SPARN. HIV/AIDS and Its Impact on Land Issues in Malawi, (2.3 ff). Retrieved from

<http://www.sarpn.org/documents/e0000022/papers/mbaya/page2.php>, accessed 3/27/2013

Strickland, R. (2004). *To Have and To Hold: Women's Property and Inheritance in the Context of HIV/AIDS in Sub-Saharan Africa*. International Center for Research on Women –ICRW-, Working Paper, June 2004, Washington DC: ICRW Publications.

Superstition, noun, (1989) In Oxford English Dictionary (2nd). Retrieved March 29, 2013 from: http://www.oxforddictionaries.com/us/definition/american_english/

Taboo, noun, (1989). In Oxford English Dictionary (2nd ed.). Retrieved March 29, 2013 from http://www.oxforddictionaries.com/us/definition/american_english/taboo

Therborn, G.(2004). African Families in a Global Context. G. Therborn (Ed.), *Introduction: 2004.*, Goteborg, Sweden: Elanders Infologistics.

Tietjen, A.M., (1985). Infant Care and Feeding Practices and the Beginnings of Socialization among the Maisin of Papua New Guinea. In L.B. Marshall (ed.), *Infant Care and Feeding in the South Pacific* (pp. 121-136). New York, NY: Gordon and Breach Science Publishers.

Tro Deho, R. (2006). *Création Romanesque négro-africaine et ressources de la littérature orale* (p. 26). Paris, France: Hartmattan.