



Classic Article

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Why Go?

Imagine as a Kenyan girl... you were circumcised at the age of 12 and still experience vivid flashbacks of this event. You were laid out on the floor of your home following a talk about the way you as a woman should behave and what you should look for in a husband. At the time this made you feel so grown up and you would now pass into woman hood, you would have an identity within the family and society, a function and a purpose in life. Your positive thoughts were soon destroyed as the old lady from the village came to circumcise you carrying an old tin can in her hand. Inside was a rusty razor blade. Mother got hold of you and pinned you down to the floor so that you could not struggle; it didn't make sense what were they going to do, were they going to hurt you? A bowl of water was brought and some rags. The old lady then started cutting you down below, all you remember is the searing pain, you scream but your cries are unheeded, you are told be quiet, you are a woman now, you should be able to bear your pain in silence. You lie whimpering, desperately trying to be a "good woman" but the pain takes over. You cannot cope and pass into oblivion, a welcome, momentary relief.

A few minutes later you come round, the pain still excruciating. The old lady has gone and you are left in the room on your own. You are bleeding profusely and scared, there is so much blood and the pain so great. The pain has made you physically sick and you wonder how on earth you are going to survive, you want to sleep to escape the pain but are unable to. When you finally drift off into a troubled sleep your thoughts and dreams are haunted by the experience that you have just been through, the woman, the pain, the blood and the feelings of failure, unable to cope like a woman. You awake in a hot sweat which saves you from the clutches of the old woman, and need to

pass urine. Your legs have been held down, yet you are so desperate for the toilet. You wet the bed and the tears well up in your eyes and trickle down your face in response to the humiliation and the stinging pain that you feel, an ever-present reminder of what has happened to you in the last few hours.

We leave the tale of this 12-year-old girl here for the time being but do not underestimate the pain and fear of the next couple of years. She experiences infection from the circumcision and as the scar forms closing itself over the urethra, the vagina is scarred making urination a prolonged and difficult procedure with recurrent urinary tract infections and the additional pain of menstruation each month due to a small and tight vaginal opening. We pick up the story of this young girl two years later, now married. She comes to the hospital in labor with her first child.

The last two years have not been easy and you have been the third wife of your husband. You all live together in the shamba and life is routine with the daily collection of water and farming the land. The husband chews the local drug mirrah and is often drunk leaving all the work to the wives. The other two wives are older now and your husband has already fathered 16 children. You are his new toy and when he is home he takes full advantage of you. Each night you go through the same terrifying ritual of having sex with this man, who you do not love but married due to your father arranging the marriage for financial gain. Sex for you is painful due to the circumcision you experienced two years previously. You cannot escape or refuse, as you know that you will be beaten, your entire focus has to be on keeping this man happy. Nine months into the marriage and you are ready to give birth for the first time.

I, as the student midwife that cared for this girl will now take up the story. I admitted her to the labor ward where I learnt some of the previous history. She had to undress and put on a hospital gown, which she refused to do with anyone watching. This set me on my guard and I wondered what her story was and how she was treated at home. Next I moved on to assess her progress in labor and needed to do a vaginal examination. I explained the procedure through an interpreter and obviously began. She shrank away from me and I will never forget the haunted expression in her eyes as she pushed me away, and buried her head in the pillow. I vainly tried to reassure her and decided I could not do the vaginal examination. The scar tissue was so prevalent around the vagina and I dreaded the birth knowing that I would have to perform an episiotomy. It dawned on me that for her this would be yet another reminder of the brutality of the circumcision and the abuse of her husband. How could I reach out to this woman? I needed her trust and somehow would have to convey that I was not there to harm her, a hard concept when everyone else in her sad past had caused her harm and betrayed her trust. Gradually over the next few hours I was able to build up a relationship with this woman and a silent bond. I massaged her back and helped her with her breathing. She began to scare me as she could not deal with the pain and was panicking. I knew that if she panicked we would have

problems, as there is no pain relief available. She progressed and the baby was doing well, though I was concerned that it was small.

Second stage was entered, which I only knew through her desire to push. The baby was low, but the vaginal orifice was no larger than a pencil width. There was no way the baby could be delivered without a radical episiotomy. I had no choice and made the incision. A little boy was delivered weighing only 1.1kg. He was so scrawny. I wrapped him and gave him to her. Where was the joy on her face? She was so weary and exhausted and no doubt this child would now be a reminder to her of the many terror-stricken nights spent with her husband, with no recollection of a child born out of love.

I was ready to receive the placenta, which did not seem to be coming. Whilst she was occupied with the baby I inserted a finger into the vagina and to my consternation found two little feet! This baby had been lying behind the other twin and nobody had found it. The second twin was delivered a few minutes later, a footling breech and so tiny, weighing a mere 0.9kg. The baby cried at birth but both had to be whisked off to nursery. I looked at the bewildered mother and felt so desperately sorry for her. There was no way those babies would survive; it would only be a matter of time before she would be informed that both had died. The episiotomy was repaired and she was transferred to the ward.

You visit the nursery every three hours to feed the twins. They are so tiny and fragile and something in you wants to protect and love them. They are too small to breastfeed and you have to express the milk. This continues for a couple of days but due to the lack of stimulation your breast milk has dried up. You feel that you have failed them but the midwives assure you that they will be able to provide the twins with supplement milk from a cow. You spend much time with the twins marveling at them and grow to love these babies. It is special time and you cherish those days spent in nursery. The babies need and rely on you, it makes you feel valued and finally you have a purpose in life.

Much to your dismay the next day you visit nursery and discover that the smallest baby has developed diarrhea and is sick. He loses weight rapidly over the next few days and is reduced to skin and bone. One morning you visit the nursery to find his cot empty, he has died. Oh, the pain and grief you feel and you run from the nursery to be by yourself, one of your precious babies has died. There is no-one to offer comfort and your only comfort is found in the fact that you have the one remaining baby. In your head the words "You are a woman bear your pain" resound, but you can't. You have failed once again and have not been emotionally strong as your culture demands.

You go back to the nursery with a strong determination that the remaining baby must survive. All continues well as far as you are concerned. The baby however has developed intolerance to cow's milk and is hypothermic. It also dies, your pain has increased now and you do not know how to cope. You are discharged to go home where your husband is waiting for you. You have failed and have gone home without a baby, a shame almost too great to bear. You ask

"Why me?" there is no-one with an answer. You make the resolve not to love again as it hurts so much. Your emotional pain is suppressed and by hardening yourself you can blot out those two little babies that brought a few days of happiness to your life. They however, like the old woman and your husband, join in your nightmares, torturing your imagination and emotions. Your husband however is still a fearful reality yet in your own way you tenderly keep your babies alive within your heart, nobody can snatch those pleasant and precious memories from you; it is all you have left.

Can you imagine this?

Sadly, this is not one isolated case but the fearful reality for many young girls in Kenya. I worked alongside many women and girls who had stories such as these to tell. There were many wonderful success stories but the plight of these young girls stays with me. Working with them was what made my experience in Kenya so worthwhile.

Along with the physical needs there was the deepest need for meaning in life. It is my long-term goal to return and share something of my Savior with these women, making a difference to each individual woman is what counts. I learnt of the importance to show that you have Christ's attitude towards the people that you work with, having compassion on those around you. The Gospel is the only hope these people have to shed a ray of light offering an explanation for life. We can make a difference. The challenge to me over the summer was "*Am I prepared to?*" I had to answer this question as **Isaiah** did in **Chapter 6:6** - *Who will go for us?* And my reply had to be "*I will go!*" Here am I, send me.



Elizabeth (back left) pictured with her husband, David, and her two children