RE/PRODUCING MOTHERS: STRUCTURE AND AGENCY IN GAMBIAN *KANYALENG* PERFORMANCES

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Kanyalengs **are women united by problems with fertility and/or child mortality. Their collective performances invert traditional female roles and are intended to ameliorate the hardships associated with the inability to meet expectations for a large family. Kanyaleng membership can be beneficial as it allows women to temporarily flout the conventions that give their lives structure and meaning while also confining and limiting them. However, kanyalengs' experiences also underscore the limits of Gambian women's ability to access social and economic power outside of motherhood. The use of food in kanyalengs' performances calls attention to women's roles as producers of food and reproducers of children. (Reproduction, childlessness, infertility, performance, Gambia)**

Within many societies and across ethnic groups in The Gambia, becoming a mother and bearing many children is a central aspect of the adult female role. Motherhood allows a woman to secure her welfare, demonstrate her commitment to her husband and family, and show respect to the family elders who gave her in marriage (Bledsoe 2002; Sundby 1997; Wittrup 1990). Becoming a mother is in many respects an initiation into adulthood, for through mothering Gambian women negotiate economic disparity, attain respect and political status in their communities, and shape culturally meaningful identities for themselves. If fertility or child mortality problems remain unresolved, her lack of children can be threatening to a woman's economic, social, and emotional well-being. She may be shunned by her husband, who can hasten a second (or third) marriage[1] that might deny her a share of household resources, or she may be divorced, and she will be unable to rely on support from grown children in old age.

Attempting to overcome the difficulties of childlessness, Gambian women, especially Mandinkas and Jolas,[2] may join a *kanyaleng kafoo* (organization, plural *kafoolu*). The activities of kanyalengs[3] invert traditional female roles in public settings and are intended to ameliorate the hardships that are associated with the inability to meet cultural expectations for a sufficiently large family. They consist of bold song and dance performances at events such as naming or marriage ceremonies, which enable kanyalengs to shame themselves before Allah in hopes that their outrageous behavior will convince divine will to take pity and make them fertile or allow their children to survive. This is referred to as "begging God" for children. The activities and behaviors that constitute God begging enable kanyalengs to break with conventional gender roles with the hope of having offspring that will live past childhood. Kanyalengs may dress in men's clothing, tease men about their sexual prowess, and beg and steal food. During their initiation, new members may also be chased and beaten by children who are given switches for this purpose, thereby inverting age hierarchies that would otherwise forbid this

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behavior. Becoming a kanyaleng is a public admission that one has problems bearing a child or has had children die. Though most community members are already aware of these situations before initiation, the rituals that call attention to reproductive problems are often embarrassing.

Despite these difficulties, being a kanyaleng can be beneficial, as it allows women to temporarily flout the conventions and roles that give their lives structure and meaning yet confine and limit them. However, kanyalengs' narratives of their productive and reproductive lives also underscore the limits of women's ability to access social power and economic security outside of motherhood. This case study, which examines the connections between fertility and food, highlights the ways that women may flout conventional expectations for their reproductive lives, as well as the limits of these opportunities where other productive avenues to well-being and security are inadequate.

FIELDWORK SETTING

The Gambia is a small (4,361 sq. mi.) West African nation surrounded by Senegal on all sides but the west, where Gambian beaches and fishing villages meet the Atlantic Ocean. Its borders roughly follow the contours of the River Gambia, which is the country's most prominent geographical feature. Its national boundaries do not reflect ethnic divisions or other elements of geography. Fieldwork in 2004 took place in the bustling peri-urban sprawl of Serekunda, the nation's most populated town. Banjul, Gambia's capital city, is positioned on St. Mary's Island at the mouth of the River Gambia and long ago reached its residential carrying capacity. Adjacent Serekunda has accommodated the overflow. Drought and subsequent agricultural failures of the 1970s and early 1980s caused a huge swell in peri-urban populations and a trend in rural-to-urban migration that continues today.

The bulk of the data derived from 62 life-history interviews conducted with kanyalengs by my research assistant, Naisatou Konteh, and me, which focused on marriages, reproductive careers, and initiation into and activity within their kanyaleng kafoos. The women interviewed lived in small towns, peri-urban, and rural areas across the country. Most of the kanyalengs interviewed were living in the Kombo region, which extends along the Atlantic coast, but we also spoke to women from the Foni, Badibu, Niumi, Jarra, Jokadu, and Fulladu regions, which range from western to central Gambia on both banks of the River Gambia.

Each kanyaleng chose the language for her interview, but the vast majority were in Mandinka. Some Jola women living in Serekunda opted for Wolof, which is the lingua franca of Gambia's urbanized coast. We attempted to construct a detailed timeline of marriage, pregnancy, birth, and "reproductive disruptions" (van Balen and Inhorn 2002:4) such as miscarriages or infant mortality with every interviewee. For some women, the order and timing of these life events were easily recalled. With others, it was a challenge. Many interviewees did not know their age and could only guess it. Most were nearing or at the end of their reproductive phase of life, by their reckoning.

Each woman interviewed had become a kanyaleng as a coping mechanism and an attempt to overcome infertility, subfertility, and/or child loss. While hard work and

a healthy kin network are important to attaining domestic security, women returned again and again to the importance of their own uterine family (see Wolf 1972) to achieve and maintain a stable position in the extended family compound and cementing a comfort-able position as an elderly woman. For some Gambian women, membership in a kanyaleng kafoo is a last hope for achieving these ends and attaining a higher status as women and mothers.

KANYALENG TRADITIONS IN SENEGAMBIA

Kanyaleng kafoos appear to be a relatively recent tradition that diffused across Senegal's Casamance border into adjacent Gambian Mandinka villages in the 1950s c. f. Weil 1976:184–85; see Fassin 1987, Fassin and Badji 1986, and Journet 1981 on Jola kanyalengs in Casamance). It is possible that these traditions are older and may have escaped anthropological notice until the mid-twentieth century. Though Gambian Mandinkas are said to have adopted the rituals aimed at improving fertility and preserving the lives of children from Jola kanyalengs in Casamance, Mandinkas in Casamance are also known to have similar organizations called *dembajasa* (from the Mandinka term for "mother"—*demba* or *dimbaa*) or "joking mother" fertility societies (Schaffer 2003:180). Kanyalengs are said not to be found in any other Mande group besides the Mandinka (Fassin 1987).

Organizations akin to kanyaleng kafoos exist in northern Senegal with ethnically diverse adherents. These are known as the *dimbaa* (mother's groups) and have their roots in the Senegambian kingdoms of the eleventh through fifteenth centuries (Niang 1994:39) and then spread across Guinea Bissau, Guinea, and Mali. Ethnomusicologist Charry (2000) briefly addressed the dembajasa song tradition among Senegambian Mandinkas in Guinea. This musical form of women's pleas to Allah has recently become popular recorded music. It "involves danging in public in tattered clothes, along with lyrics" (Charry 2000:282), which is identical to kanyalengs' behavior.

Rationales for Kanyaleng Initiation

Of the self-identified kanyalengs interviewed, 40 percent (n=25) reported that they were initiated due to child mortality, 26 percent (n=16) due to primary infertility, and 14.5 percent (n=9) due to secondary infertility.[4] Four women reported that they were initiated due to a combination of infertility and child mortality factors. Additionally, eight interviewees became kanyalengs for reasons other than a history of fertility problems or child deaths, though their explanations often linked back to the protection of fertility or the life of a child.[5] Significantly, among women initiated because of child mortality, the mean total number of living children over the age of five at the time of interview was 4.56, which approaches the current Gambian total fertility rate of approximately 5.0 (UNPD 2005). Many women were initiated relatively early in their reproductive careers and subsequently had several offspring who survived childhood.

Kanyalengs' reproductive narratives challenge static labels such as "barren" or "childless," which tend to flatten an understanding of the contexts in which women may

consider their fertility or family size to be at risk and then seek assistance or treatment. It might be thought that most kanyalengs would either have no children of their own due to infertility or would have only a few due to high child mortality rates or secondary infertility.[6] This is not the case. Though some women had difficulties ever having children or had few surviving children due to high rates of diseases that contribute to child mortality, others approached or exceeded average fertility rates, demonstrating that high parity does not render pregnancy loss or child mortality insignificant in the Gambian context.

Membership in a kanyaleng kafoo is life-long, regardless of whether or not the reason for initiation is realized, so the circumstances under which a woman becomes a kanyaleng may be brief within her reproductive history. Though her fertility or children's mortality are at risk at one point, this may not be a long-term reality. A woman's identification as kanyaleng is static while her ability to attain and maintain a large enough family is understood to be dynamic.

Fertility-Seeking Options

Gambian women and married couples confronting infertility may seek therapeutic procedures within different healing modalities in addition to or instead of kanyaleng kafoo membership. The range of choices available reflect ethnomedical and biomedical traditions, Islamic and animist religious practices, low-tech to increasingly high-tech approaches, and free to exorbitantly expensive options (Sundby 1997). The choice of a particular healer or treatment may be affected by many factors—the individual's or couple's infertility etiology, faith or mistrust in a particular modality, financial feasibility, duration of the period of infertility, and proximity to the site of treatment. The therapeutic quests undertaken by the interviewees began either of their own volition or through the guidance of friends or family members, and often involved multiple healing modalities. They were often begun before a woman became a kanyaleng and tended to continue after her initiation. Of the 27 women who sought physical or spiritual treatment, 55.5 percent (n=18) had gone to both biomedical practitioners and herbalist specialists in spiritual healing linked to Islam (*moros*, also known as *marabouts*). Eight had gone to moros or herbalists only, while only one had sought only biomedical treatments. Though infertility therapies were often undertaken with emotional and, at times, financial support from family and friends, these were primarily individual quests, as opposed to kanyalengs' collective rituals.

At the heart of kanyalengs' performances and rituals is the idea that women who have fertility problems or children who die must beg God, the source of fertility and infertility, to take pity and allow them to carry pregnancies to term and bear children who will survive their infancy. Rather than attempting to address a proximate, physiological cause, becoming a kanyaleng is an appeal to the highest power to heal and make miracles happen. However, if divine intervention into fertility or child mortality problems is not forthcoming, kanyaleng kafoo membership is a useful coping strategy. The solidarity of women of the same village or community who are unable to attain a

sufficient family size, and consequently unable to meet standards of womanhood as mothers, creates an effective support network.

Kanyalengs' strategies for meeting fertility expectations mirror Castle's (2001) observations of Fulani women in Mali who resist assigning a numerical value to their ideal family size. Rather than ascribing this reticence to a pre-demographic transition fatalism about reproduction (see Olaleye 1994; van de Walle and Ouaidou 1985), she situates it in the cultural beliefs that talking about the number of one's children is supernaturally risky. Bledsoe and her collaborators (1994, 1998) also demonstrate Gambian women's reproduction agendas to preserve and protect fertility. Similarly, participating in a kanyaleng kafoo is another tactic utilized by West African women to maximize their reproductive potential, even though they may initially be reluctant to engage in kanyaleng kafoo performances.

Becoming a Kanyaleng

Only eight of the interviewees said that they were active in planning their kanyaleng initiation. Most commonly, the local kanyaleng kafoo (n=17) was responsible for bringing new members into their group, but families (n=6), friends (n=6), and husbands (n=7) were also involved in determining whether a woman should become a kanyaleng. Female relatives, specifically mothers (n=5), mothers-in-law (n=2), and aunts (n=2) were active in some initiations. In certain villages, it is the *sunkutu kafoo*, the age-set group of girls and unmarried women, who make these decisions and organize initiations. This was the case with five informants.

Only a small number of kanyalengs interviewed sought initiation despite their reproductive difficulties. This is likely because of the behaviors associated with kanyalengs as part of their public personas. Husbands and mothers-in-law have a vested interest in perpetuating the patriline, which largely explains their involvement in initiations. Friends, mothers, and aunts who sympathize with the frustration and pain caused by infertility and child mortality were depicted as having sincere intentions when they took part in initiation preparations. The interviewees explained that despite their reticence and anxiety about initiation, they understood that these women were trying to help them have children, strengthen their marriage and kin ties, and improve their long-term social and economic status.

FERTILITY AND FOOD IN GAMBIA

The work of Gambian women is overwhelmingly concerned with the production, procurement, and processing of food for their families. Most interviewees had no formal education and many worked as horticulturalists, sold produce and other foodstuffs at market, or engaged in petty trade. Tending rice fields in the rainy season and vegetable crops during dry months, fetching water, gathering wood for cooking fires, and making meals for the family consume many hours of the day for Gambian women. The line between reproduction and production is slim for women in rural Africa, if it exists at all (Auslander 1993; Hansen 1992). The symbolic and nutritional qualities of food are

essential to biological reproduction and the social reproduction of the family around the cooking pot.

The main meal of the day is served mid-afternoon when compound residents take their places around a large communal bowl. Typically, a bed of rice or millet is topped with a sauce, vegetables, and if the family can afford it, a protein such as fish, goat, mutton, or chicken. Vegetables and protein are typically broken by hand and apportioned to those eating the meal by the senior woman at the food bowl or the woman who has done the cooking. It is this woman's role to ensure that the meal is distributed fairly among the family and guests.

Women engage in rainy season cultivation to help supply their households with rice (Carney and Watts 1991). What Linares (1992) says for the Jolas in Senegal applies to Gambian women as well: "Whereas the Koran says that men must feed the family, the reality is otherwise; women's rice is used solely for this purpose. Men can sell their millet and their maize; women cannot sell their rice" (Linares 1992:175). Though rice fields are found throughout Gambia, yields are not high enough to meet demands for this staple, and the majority of rice consumed by Gambians is imported from Asia.

Though some of the interviewees bemoaned the high costs of feeding a large family, the cost of foodstuffs was counterbalanced by the belief that offspring, especially when grown, contribute to household resources. When old women past their reproductive phase were asked how many children they would like to have had, they frequently said that they would like more than their present number, indicating that even among women with sizable families, more offspring are welcome. This is explained in part by Gambian women's understanding that children, as a gift from God, are not to be denied, but the desire for a large or larger family is also pragmatically rooted in the economic contours of marital and family life.

When a woman is in her reproductive prime, perhaps with several young children in tow, extra hands, even small ones, can assist with chores and errands. However, the labor and assistance of sons and daughters is most crucial when a woman is past her reproductive years and has earned respect and rest through years of reproductive and productive work. A kanyaleng, who had reached her post-reproductive phase of life with five living offspring, asserted that life might be easier had her first three children, who died young, survived and had helped their parents and younger siblings. "My husband is tired. I myself am tired. If my children were many, if the ones that died, if all of them did not die . . . our in-laws would help us and they would help my husband." She added that if the earlier children had lived, those that came after them could have gone to school. "They would learn until they finished, until they had knowledge. Then, they would be working. [They would help out.] I also would rest a little. . . . I would be sitting with my hands on top of each other."

Another way women discussed the importance of a large family was through a balancing of chance or luck. Some said that just as the fingers on a hand are not equal, neither are people. Therefore, bearing many children is a way to maximize the likelihood that some of your children will be intelligent, hard working, and able to support you in your old age. One kanyaleng who had no living children and believed she still had some reproductive years left, explained that women who used Western methods of birth

control may unwittingly prevent the births of the most blessed children in their reproductive allotment:

> There are some [children] who will benefit you. There are some that will be thieves, there are some that will be drinkers. You know, those will not benefit you. So . . . if you stopped your delivery early . . . if you spoiled your reproduction early, the one that would benefit you is on the way and you went and blocked your delivery. You know, if you block it, that is your difficulty.

Rejecting offspring, framed as refusing a gift from God, is also perceived as risky because it could jeopardize one's future status and security because in having many children, a woman has some assurance that she will be able to turn over her domestic responsibilities to daughters-in-law or other younger female relations and receive the support from her children and their affinal kin that will allow her to live in a manner befitting her elder status.

Many kanyalengs asserted that they would happily accept as many children as God would offer them, and some said that if they could continue to bear children without spacing them, they would. However, these statements in favor of a seemingly limitless reproductive capacity were expressed by women who had never had a live birth, who had fewer children than the average Gambian fertility rate of 4.7 live births per woman, or who had lost several children in their early years. These women also experienced or anticipated the social stigma of childlessness and the disadvantages of raising a small family.

FOOD AND KANYALENG PERFORMANCE

The most significant public role played by kanyalengs is in performance at "programs," the term for the celebrations of rituals such as baby namings (*kulliyos*), marriages, and departures for or returns from the pilgrimage to Mecca. Kanyalengs participate in these events as entertainers and also as God beggars, calling attention to themselves with outlandish behavior. Guests who attend the ceremonies at which kanyalengs perform bring small bills that are distributed during their songs and dances, then pooled and distributed within the group.

Kanyalengs play a role here as both marriages and kulliyos are rituals that celebrate fertility. Marriage marks the commencement of adult sexuality, at the heart of which is the establishment of the woman's uterine family and the continuation of the patriline, as the husband can legitimately access his wife's fertility (Boddy 1989:59). The kulliyo is held seven days after a birth to celebrate a successful pregnancy, delivery, and the first week of the child's life. This naming ritual establishes her/his identity as part of the father's family through naming, establishing the continuity and regeneration of the family. Kanyalengs as women, and often as mothers, have an ambiguous relationship to these celebrations due to their public pursuit of norms of motherhood.

In the Gambian context of increasing food costs and large families, kanyalengs' stories of their initiation rites and group appearances at public events often boast of their superhuman appetites. One woman proclaimed, "Even now, the [initiation] beads are there [worn around the neck]. When we have programs around our area, I wear

them . . . [and] I eat like there is a pipe in my throat [carrying the food away]. I can eat a full big bowl all alone." Eating copious amounts of rice porridge is believed to make the kanyalengs strong and gives them endurance to sing and dance all night.

Women report that the food they were made to eat at their initiation was given to them in an unsavory or humiliating way. One kanyaleng commented that they are made to eat like a dog and with a dog. "Your are eating, it is also eating. You will not use your hands. You will bend and eat with the dog. If you are eating, they will take sand and put it in there for you." Another woman described this conduct as an aspect of God begging, explaining that if a woman eats with a dog, whatever bad spirit is preventing her from having children will see that she is not normal and will leave her. Unorthodox ways of eating are framed as an appeal to Allah. If Allah sees women acting so abnormally, He will know that they are serious about having children that will survive. What else could make them behave so outrageously?

Kanyaleng initiation ritual is often a trial by ordeal that brings women into this realm of inversions. Despite their feelings of anxiety, embarrassment, and sadness, initiates are stripped of social conventions that had previously defined their actions, and are made into a tabula rasa onto which a new kanyaleng identity can be written (see Turner 1969:130). In addition to reversals of gender and age hierarchies, these rituals remove the initiates from familiar elements of their lives to forge new ways of being.

Kanyalengs' performances evoke and play on the gendered qualities of food in Gambia, from the growing of staple crops to the cooking and serving of meals by women. Kanyalengs' performances also call attention to the roles of women as producers of food and reproducers of children, and thereby expose, invert, and reinforce the ideals of women as mothers.

KANYALENGS' KULLIYO PERFORMANCES

In the summer of 2002, I attended a kulliyo in a village in southwestern Gambia. A relatively small affair, this was held near dusk in an open courtyard with guests seated in plastic chairs and additional spectators standing behind them. Under a four-poster canopy, the participants sat on large woven plastic mats. The father's sister held the baby and was accompanied by the baby's mother. The women sat adjacent to the imam who oversaw the ritual, and they were joined by a cohort of the village male elders. The local praise singers (*jalis*) greeted them and sung the history of the child's partriline and matriline. The requisite bowls of water, millet, and kola nuts, as well as the soap and razor blade used in the first cutting of the baby's hair were present. The hair, grown in utero and considered unclean, is removed so that new hair from the child's new life outside its mother may begin to grow. As the name is given, by whispering it into the baby's ear six times, an animal is slaughtered to cement the bond between the child and its father.

After the formal ceremonial elements were complete, most of the men dispersed and the women began the program with song and dance. A woman placed a large enamel bowl of rice porridge in the middle of the area where the women had begun dancing. The women, members of the local kanyaleng kafoo, began circling around the bowl and then

descended on its contents, grabbing handfuls of the porridge with both hands and filling their mouths until their cheeks bulged, stuffing the excess into their pockets or the folds of their clothes, and smearing their sticky hands on those dancing around them. This generated great laughter among the kanyalengs and the onlookers. Kanyalengs believe that the more porridge a woman can scoop up the more it will improve her fertility. A few women were singled out by the group for teasing and ridicule. They were chased by the older women who swatted at them when they were caught. One younger woman had her skirt lifted above her waist, despite her protests. The communal laughter indicated that a lighthearted response was appropriate. Those with no children received the most group attention.

The high stakes involved in a marriage and motherhood seem to necessitate the laughter generated by kanyaleng behavior as a foil for the public and the suffering of those without children or who want more. Unable to meet reproductive expectations, kanyalengs are seen as lazy and greedy, consuming food rather than producing it. Infertility and child mortality, as well as selfish consumption, are anathema for Gambian women and it is the social liminality of the kanyalengs that serves to diffuse the tension engendered by reproductive disruptions. As kanyalengs aspire to meet standards of reproduction and kinship, their inability to attain these goals through motherhood is somewhat transformed, made ambivalent, through comic mocking performances that play with gender norms through the medium of food. While their bold performances allow for temporary transgressions of norms for women, kanyalengs' rationale for these performances reiterates the centrality of reproduction to the identities of Gambian women and underscores their aspiration to create their ideal uterine family. Kanyalengs' mockery of themselves and others cannot be cathartic, and the resolution of the tensions that underscore their performances can only be accomplished through pregnancy and child survival.

Kanyalengs' performance space is contested. It does not shield them from criticism or insult, but it does allow them to criticize and level insult themselves. Many interviewees said they were reluctant to become a kanyaleng because of the shameless behaviors expected of kafoo members, but they came to embrace the temporary freedom from convention that kanyalengs' performances allow.

In addition to performing at kulliyos, kanyalengs create an alternative ritual space by celebrating naming ceremonies of their own (Skramstad 1997). These rites are performed for children born to kanyalengs or those thought to need special protection against illness and death. At a kanyaleng kulliyo, the ritual events are presided over and attended largely by women, whereas a conventional kulliyo is led by men, including family and community patriarchs, the newborn child's father, and an imam.

Rather than slaughtering a sacrificial ram or goat when the child's name is given, at a kanyaleng kulliyo, the women use a papaya, sometimes given stick legs to lend a touch of realism, and slit its "throat" with a knife. As the papaya ram is cut, the baby is given a kanyaleng name to protect it from bad spirits, or to break a cycle of child mortality by forbidding that baby's spirit to leave and return. Other traditional foodstuffs are also replaced with kanyaleng equivalents. Groundnut offerings are substituted for kola nuts,

and the remnants of the second pounding of millet, typically used to feed animals, is the "treat" offered to participants and guests.

Instead of working behind the scenes, kanyalengs take center stage at their own naming ceremonies, assuming roles that are typically occupied by religious leaders and powerful men of the community. These women may also mock imams and other Muslim religious figures, often affecting a high, nasal drone to imitate prayers and proclamations in Arabic. As with performances at more conventional naming ceremonies, their kulliyos allow kanyalengs to break the rules, but they do so in the spirit of God begging that embraces the value of motherhood rather than challenging the role of reproduction in women's lives.

KANYALENG MEMBERSHIP AS WORK

Some women say they are reluctant to become kanyalengs because of all the work it entails. Although kanyalengs are stereotyped as lazy and foolish, kafoo membership demands work that reinscribes the differences between kanyalengs and other women. A kanyaleng explained how, for a kulliyo, she would grind millet, cook, and scrub the cooking pots. Though the women of her kafoo are paid for their work, it is not clear whether the amount is fair compensation for the many hours it takes to prepare food for a naming ceremony. This work is usually done by female kin and friends who understand that their efforts will be reciprocated when they have a program and therefore are not compensated in other ways. However, kanyalengs are not recognized for the work they do for other women, but for their theatrically greedy and self-interested performances. Kanyalengs' deficient reproduction becomes a metonym for their work ethic. Reproduction failure is reiterated as productive failure. Kanyalengs acknowledge the perceptions of themselves as having bottomless stomachs and sticky fingers; they eat voraciously and steal food with impunity, but they are not credited with having prepared the food they eagerly consume.

In the Gambia, motherhood is unambiguously cast as women's most important role. Reproductive success in the form of a large family is the product of morally valuable labor that trumps other productive efforts. As Kopytoff (2004) explains, it is material affluence in North America and Europe that allows kinship relations to be largely social rather than economic: "all this is in stark contrast to peasant and 'primitive' societies that can ill afford a purely sentimental treatment of children and where basic material needs impose a different calculus on kinship relations" (Kopytoff 2004:273). Bearing children builds and maintains kinship ties, creates a new generation of workers for the field, garden, and compound, and ensures that the older generation will be taken care of as they age. Most kanyalengs cannot access this moral sphere to the same extent as women with many children.

REPRODUCTION AND PRODUCTION IN KANYALENG RITUALS

In kanyalengs' performances, productive life mimics reproductive life: women who are infertile, subfertile, or who have suffered child mortality outlandishly consume food

they would otherwise share with their offspring, while stashing or throwing away the excess. These aspects of kanyalengs' behavior underscore normative constructions of reproduction, motherhood, and gender relations by expressing the opposite of these standards. Kanyalengs' performance allows women to be critical social agents who simultaneously question gender and reproductive norms and work to achieve them.

These eating performances dramatically differ from how Gambian women are typically expected to regard food—as procurers and preparers. In their rice fields, vegetable gardens, and over their cooking fires, women generously allocate food to others before feeding themselves. This norm is inverted in kanyalengs' excessive consumption. Altering the gendered power dynamics of conventional kulliyos, kanyalengs assume male roles and serve their own versions of symbolically significant foods.

Infertility, childlessness, and experiences of child mortality are reproductive disruptions and a departure from an ideal. Kanyalengs' performances call these gendered norms into question but do not refute them. Kanyaleng kafoo membership does not reflect a rejection of reproductive expectations, but indicates a desire to join the ranks of women who have adequately large families. Regarding women's reactions to infertility in Tanzania, Kielmann (1998) has argued that for any action to be considered resistance, the actors must conceive of alternatives to extant frameworks of meaning and act upon them with conscious intention. Of course, kanyalengs remain enmeshed in the systems they criticize, as do all individuals and groups involved in forms of action that may be identified as resistance (Abu-Lughod 1990; Lock and Kaufert 1998). Their performances often contain rebukes of social hierarchies and the conventions of appropriate behavior for women, yet their private lives and their quests for large families reflect an acceptance of gendered standards.

The practical solutions offered by resistance and critique are limited by material realities of life in Gambia. Shifting opportunities and challenges to entrenched gender norms in indusrialized or developed nations have allowed women to postpone childbearing, opt for a limited family size, or have no children. For the vast majority of Gambian women, there is little to compare to the security of having a brood of children to look after you as an old woman.

Reproduction is of central importance to Gambian women, but their reproduction also is contingent upon dynamic life events and a host of interested parties—husbands marry second, third, or fourth wives with competing reproductive trajectories, in-laws expect numerous successors, development messages promote birth spacing and limitation, children die, and solutions to infertility may succeed or fail (Bledsoe 2002). To the benefit or detriment of each woman of reproductive age, there are individuals and organizations that are invested in her reproduction. The desire for a large family is rooted in idealized notions of women as mothers, but also in pragmatic concerns about marital stability and old-age security. It is for these reasons that kanyalengs publicly transgress standards of feminine modesty, doing so in the hope of attaining another feminine norm, motherhood. This transgression highlights rather than resolves the ambiguity of kanyalengs as women who are or have been unable to fulfill gender norms through motherhood. The rich symbolism of food in kanyalengs' performances elucidates the

complex relationship between motherhood and womanhood, and production and reproduction for Gambian women.

NOTES

1. The vast majority of Gambians and all of the women interviewed for this project are Muslim.
2. Because the vast majority of our interviews were conducted in Mandinka, local concepts are expressed in that language in this paper. Aside from Mandinkas and Jolas, a few informants self-identified as Serer or Serehule.
3. In Mandinka, the plural of kanyaleng is *kanyalengolu*. This essay uses English plural markers for all Mandinka terms.
4. Since interviewing was a team effort, I use plural pronouns when discussing this method of data collection.
5. Primary infertility describes a couple that has never been able to conceive or has had no live births. Secondary infertility describes couples who have previously been pregnant and had a live birth, but have not been able to achieve another pregnancy or live birth.
6. One woman was initiated during a particularly difficult pregnancy for fear that the child would not be born alive. Another joined after giving birth to twins for fear that, according to Jola beliefs, children of multiple births possess "means" or powers that they can use to harm their mother or a relative in their father's family. In a touching twist on kanyalengs' rituals, two women reported initiating not to preserve their own fertility, but that of a female friend or neighbor. Through *dimbaa yaa* ("doing motherhood"), these women became a part of the tradition of kanyaleng membership that seeks to help others through reproductive difficulties. Though dimbaa yaa refers to motherhood in a more conventional sense as well, it is also applied to situations in which mothering is undertaken for another woman's child or children (see Niang 1994).
7. The country-wide infant mortality rate is 80.5 per 1,000 live births (UNPD 2005) and the under-five mortality rate is 135 per 1,000 live births (UNFPA 2005). Acute respiratory infection is the major cause of death among infants under one year old. Among children aged one to four years, most deaths are attributed to malaria; acute gastroenteritis, sepsis, and malnutrition account for smaller percentages of child mortality (Jaffar et al. 1997).

BIBLIOGRAPHY

Abu-Lughod, L. 1990. The Romance of Resistance: Tracing Transformations of Power through Bedouin Women. American Ethnologist 17(1):41–55.

Auslander, M. 1993. "Open the Wombs!": The Symbolic Politics of Modern Ngoni Witchfinding. Modernity and Its Malcontents: Ritual and Power in Postcolonial Africa, eds. J. Comaroff and J. Comaroff, pp. 167–92. University of Chicago Press.

Bledsoe, C. H. 2002. Contingent Lives: Fertility, Time, and Aging in West Africa. University of Chicago Press.

Bledsoe, C., A. G. Hill, U. D'Alessandro, and P. Langerock. 1994. Constructing Natural Fertility: The Use of Western Contraceptive Technologies in Rural Gambia. Population and Development Review 20(1):81–113.

Bledsoe, C., A. G. Hill, and F. Banja. 1998. Reproductive Mishaps and Western Contraception: An African Challenge to Fertility Theory. Population and Development Review 24(1):15–57.

Boddy, J. 1989. Wombs and Alien Spirits: Women, Men, and the Zar Cult in Northern Sudan. University of Wisconsin Press.

Carney, J., and M. Watts. 1991. Disciplining Women? Rice, Mechanization, and the Evolution of Mandinka Gender Relations in Senegambia. Signs 16(4):650–81.

Castle, S. 2001. "The Tongue is Venomous": Perception, Verbalization, and Manipulation of Mortality and Fertility Regimes in Rural Mali. Social Science and Medicine 52(12):1827–41.

Charry, E. S. 2000. Mande Music: Traditional and Modern Music of the Maninka and Mandinka of Western Africa. University of Chicago Press.

Fassin, D. 1987. Rituels Villageois, Rituels Urbains: La Reproduction Sociale Chez les Femmes Joola du Sénégal. L'Homme 27(4):54–75.
Fassin, D., and I. Badji. 1986. Ritual Buffoonery: A Social Preventive Measure against Childhood Mortality in Senegal. Lancet 1(8473):142–43.
Hansen, K. T. (ed.). 1992. African Encounters with Domesticity. Rutgers University Press.
Jaffar, S., A. Leach, A. M. Greenwood, et al. 1997. Changes in the Pattern of Infant and Childhood Mortality in Upper River Division, The Gambia, from 1989 to 1993. Tropical Medicine and International Health 20(1):28–37.
Journet, O. 1981. La Quête de l'Enfant. Représentation de la Maternité et Rituals de Stérilité dans la société Diola de Basse-Casamance. Journal de la Société des Africanistes 5:97–115.
Kielmann, K. 1998. Barren Ground: Contesting Identities of Infertile Women in Pemba, Tanzania. Pragmatic Women and Body Politics, M. Lock and P. A. Kaufert, pp. 127–63. Cambridge University Press.
Kopytoff, I. 2004. Commoditizing Kinship in America. Consuming Motherhood, eds. J. S. Taylor, L. L. Layne, and D. F. Wozniak, pp. 271–78. Rutgers University Press.
Linares, O. 1992. Power, Prayer, and Production: The Jola of Casamance, Senegal. Cambridge University Press.
Lock, M., and P. A. Kaufert. 1998. Introduction. Pragmatic Women and Body Politics, eds. M. Lock and P. A. Kaufert, pp. 1–27. Cambridge University Press.
Niang, C. I. 1994. The Dimba of Senegal: A Support Group for Women. Reproductive Health Matters 4:39–45
Olaleye, O. D. 1994. Toward an Understanding of Numerical and Non-Numerical Fertility Desires of Women in Two Sub-Saharan African Countries. Ph.D. Dissertation, University of Michigan.
Schaffer, M. 2003. Djinns, Stars, and Warriors: Mandinka Legends from Pakao, Senegal. Brill.
Skramstad, H. 1997. Coping with Childlessness: The Kanyaleng Kafoos in Gambia. Paper presented at IUSSP Seminar: Cultural Perspectives on Reproductive Health, Rustenburg, South Africa.
Sundby, J. 1997. Infertility in The Gambia: Traditional and Modern Health Care. Patient Education and Counseling 31:29–37.
Turner, V. 1969. The Ritual Process: Structure and Anti-Structure. Aldine.
UNFPA. 2005. State of World Population 2005. United Nations Population Fund.
UNPD. 2005. World Population Prospects: The 2004 Revision. United Nations Population Division.
van Balen, F., and M. C. Inhorn. 2002. Introduction—Interpreting Infertility: A View from the Social Sciences. Infertility around the Globe: New Thinking on Childlessness, Gender, and Reproductive Technologies, eds. M. C. Inhorn and F. van Balen, pp. 3–32. University of California Press.
van de Walle, F., and N. Ouaidou. 1985. Status and Fertility among Urban Women in Burkina Faso. International Family Planning Perspectives 11(2):60–64.
Weil, P. 1976. The Staff of Life and Female Fertility in a West African Society. Africa 46:182–95.
Wittrup, I. 1990. Me and My Husband's Wife: An Analysis of Polygyny among Mandinka in The Gambia. Folk 32:117–42.
Wolf, M. 1972. Women and the Family in Rural Taiwan. Stanford University Press.