

# ICWA LETTERS

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## RM-9 SUBSAHARAN AFRICA

*Randi Movich was a John Miller Musser Fellow of the Institute based in Guinea, West Africa. She studied the ways in which indigenous women use forest resources for reproductive health.*

## In the Belly of the Moon

By Randi Movich

August 2000

Hot, sticky, green, fragrant fertility surrounds me, filling my belly, literally. As the moon gradually appears in the midnight sky, the buzzing insects apparently take no notice. I on the other hand am acutely aware of the plumpness and full light growing more mesmerizing, night by night. As the moon wanes, leaving behind starlit darkness, my moon time passes. I now know what I already knew. A new life is growing inside me.

I could have predicted it. I picked fertility plants in the bush, their milky juices oozing onto my fingertips; smells swimming into my nose and blurring my vision. I helped prepare remedies to prevent miscarriage, kneading the termite mound-leaf mixture as medicine seeped into my pores. Obviously, I was dealing with a force far greater than myself.



*Randi Movich*

The newfound knowledge of my pregnancy left me with a sweet, sickly feeling. I remember being asked during my initial interviews with ICWA if I intended to have children. I answered yes, but emphatically added that I would be waiting until the two years of my fellowship had ended. I was thrilled to be pregnant but felt I had broken ICWA's trust.

What would this mean for my life and more immediately what would this mean for my fellowship? I found my answer quickly. I would simply compress all activities I had intended for the next year into six months. After all, I was surrounded by inspirational women in the "family way." My good friend Seba-Koli, who's village I had lived in ten years before, was pregnant with her third child. She farmed full-time and took care of her two girls and an ailing father. On a weekly basis she walked seven kilometers from Lopko to the market in Macenta to sell her produce. Occasionally, she walked the additional two kilometers to my house for a visit. Most pregnant women I met continued with their work through the seventh or eighth month.<sup>1</sup>

Given my relatively wealthy status in Guinea, I could afford things like taxi rides and to pay to have my food grown for me. Certainly these luxuries would help me continue with my explorations well into my sixth month. My husband Jeff and I decided to return home for the birth, knowing that a pre-term baby

<sup>1</sup> Contrary to the mythical musings of some in the west, Guinean women do not have their babies in the bush and then continue working as if a minor event has just taken place. Rural women farmers, typically, stay close to the village in their final month of pregnancy and then stay close to home for many months following the birth. I think it's interesting how women in the US are sometimes forced back to work (if they want to keep their job) in as little as six weeks after the birth of a child. Many cultures of the world would probably consider this an inhumanely short time period for recuperation and adequate care of a newborn.

would not survive in Guinea. I'd seen enough births and hospital conditions in Guinea to know that given a choice, a birth in the US would be a privilege that I wanted to take full advantage of.

We started to make travel plans. Our destinations: the Central African Republic and Cameroon. I had recently attended a conference on Pan-African traditional medicine, where I met a fascinating group of traditional healers. I planned to visit a woman-run clinic researching local plant species known for their contraceptive properties. Also, I intended to visit a traditional herbalist, trained in western medicine. His bush clinic treated Pygmies using modern western techniques for diagnosis and local plant medicines for treatment. We would then move on to Korup National Park, where planning officials consulted with traditional healers to understand the impacts of park planning on medicinal plants. I also intended to explore a native central-African species used extensively as a traditional remedy by local people. Recently it had been discovered by the West as a treatment for a common prostate malady, and was now being commercially harvested to near-extinction.

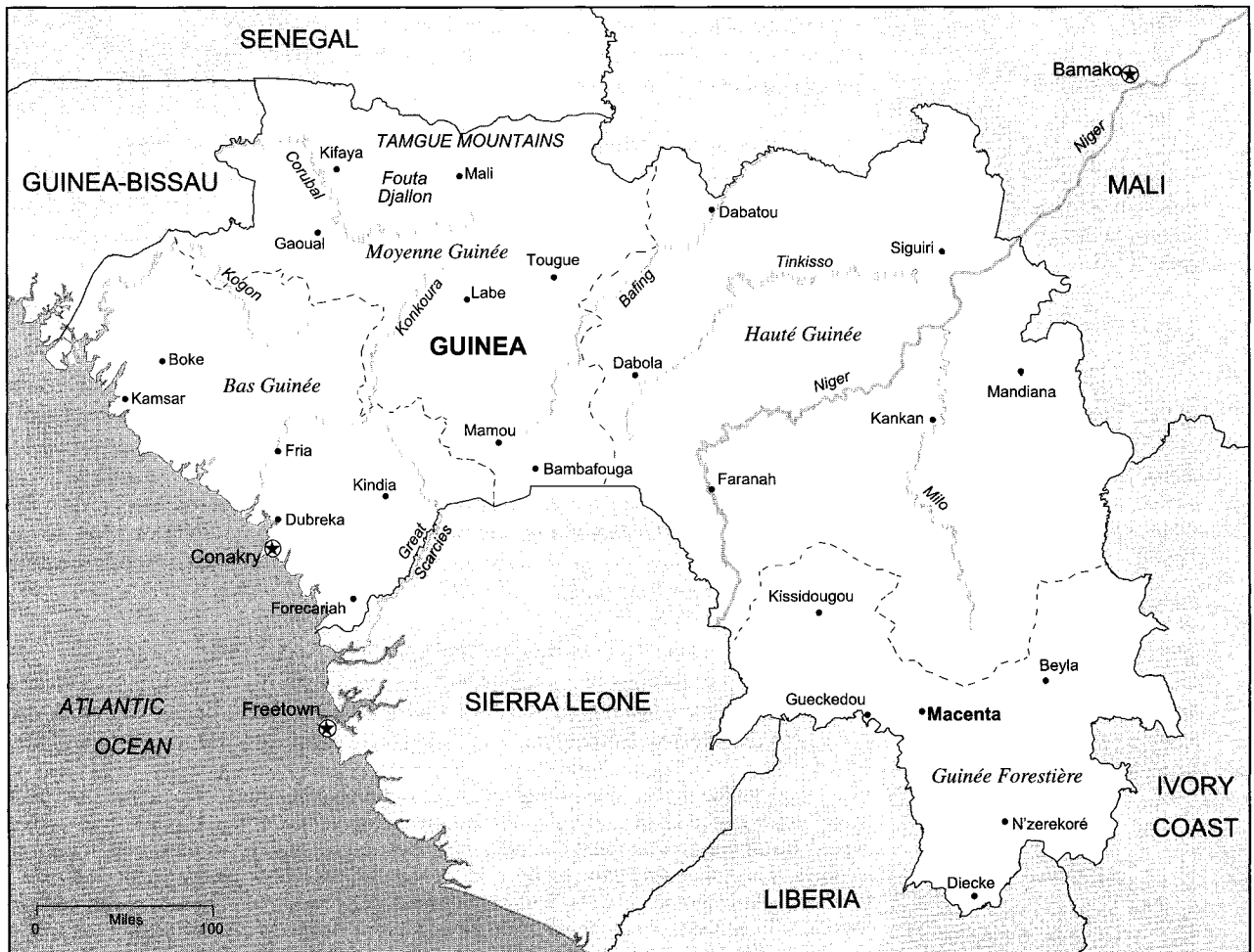
I would cover women's control of their own fertility using local plants, merging Western and traditional medicine, natural-resource planning at the government

and international levels, and finally the results of western drug discovery in Africa. This was to be a very full six months indeed!

Heading back from the capital city of Conakry to Macenta, I had my first inkling that traveling thousands of miles through Africa while pregnant might not be as I imagined. After the driver of our sardine-can taxi had to stop for the fifth time so that I could throw up, I was already reconsidering our international travel plans.

I was sure the term "morning sickness" was a sick myth, conjured up by those somehow fearful that women would eternally avoid pregnancy if they knew the truth. My truth was that I could most predictably be found hovering over the toilet bowl at *all* hours of the day and night. Nothing would stay down. The thought of red palm oil disgusted me. I wondered how I would survive in a country where palm oil is used in 99 percent of all dishes.

Thinking the "morning sickness" would subside by the time I entered my fourth month of pregnancy (myth again), we decided to postpone our travel for a month. During this time I continued my visits with local herbalists. Ironically, much of my focus was learning about traditional forms of birth control. Even though my fascination continued with women's use of herbs and for-



est-management practices, my energy level plummeted and enthusiasm was difficult to cultivate. I was apprehensive about leaving my white-porcelain flush toilet, fearful of having my face too close to the fly-infested hole of a rural latrine by some roadside. Also, I didn't want to explain why a prized palm-oil dish specially prepared for me went uneaten. I no longer found pot-holed, muddy, winding roads on the motorcycle exciting. Village life became less charming as I waited hours for the person I was supposed to meet. I was endlessly hungry, never able to satisfy my cravings. I became obsessed with the idea of an ice-cold yogurt smoothie — an unattainable mirage in a place with no electricity, or yogurt.

One day after a long walk with an herbalist under an especially scorching sun, I became shaky and chilled. I prayed that the obvious signs of malaria were just part of the untold morning-sickness myth. My fever rose. I became delirious. My body ached. I vomited more and more. I was frightened for my unborn baby, convinced that this malarial bout would cause permanent damage to the fetus in this crucial time of development. Jeff persuaded me to muster up enough energy to go take a malaria test at the Protestant Mission clinic. When I went to stake my place in line, hundreds of eyes turned toward me. I peered back into faces of desperation: People missing limbs that had been dissolved away by untreated leprosy; people with bones showing through parchment skin as the final stages of tuberculosis wracked their final breath. Interspersed among the suffering were family members dressed in vibrant colors, giving hope to the hopeless. Even though I recognized that most of the people waiting with me were far worse off than I was, my head ached and I wanted so much to receive the special attention I had become accustomed to as a foreigner. Now I was one of the masses, sick and waiting in line. Could I ever get used to this? A silly question: if I were Guinean; I would have no other choice.

The blood test showed no malaria parasites. What could it be? I was instructed to come back again at the height of the fever. I would have to endure another wait, more staring, and inquisitive looks wondering why my white skin didn't buy me the means or intelligence to seek other health-care options. Another opportunity to have a speck of insight into what Guineans experience when trying to seek western-style health care.

The second test showed parasites swimming in my veins. I pictured them lurking in my placenta, a perfect blood-rich breeding ground for these mini-devils. More waiting in the prescription line. Leaving the clinic, I clutched a small plastic bag of quinine pills, for which I had paid the equivalent of a dollar. Quinine has its origin

as a traditional medicine of the Peruvian rainforest. It was "discovered" by missionaries hundreds of years ago for the bitter malaria fighting compound in the bark. The U.S. military conducted intensive research on the Cinchona species in the mid 1900's in order to relieve its troops' malarial sufferings. Today it is used extensively for the treatment of malaria, and remains one of the few drugs that certain African strains have not become resistant to.

I gagged on the first pill, but somehow managed to coax it down. This was short-lived, I threw up all the other pills I ingested. The malaria continued to rage. I could barely get out of bed. Jeff called on the Protestant medical missionaries who had become our friends over the previous year. Like angels, they came to our house with I.V. bottles and ampoules of liquid quinine. They came in the morning, during the day and at night for a week. They showed Jeff how to work the I.V. system. Bless their kindness. I started to feel guilty about comments I had made regarding missionary work in Africa. Generally, these tended to focus on the immorality of teaching Guineans that their indigenous religious beliefs were inferior. Evangelism and conversion efforts angered me as being devoid of basic respect for the richness of cultural diversity. There is no question that I liked the good they were doing from a medical perspective, making treatment available for tuberculosis, leprosy and river blindness. (Work that the Guinean government should have been doing with World Bank, USAID, and World Health Organization aid.) I just did not want to see the Guineans receiving treatment being brought to the church by the truckload every Sunday morning. Yet I was receiving the benefits of their mission, thankful for their presence. Jeff would say the world is full of shades of gray. I lean toward the camp that finds best intentions paving the road to hell.

I recovered slowly, bedridden for nearly a month. Jeff was my 24-hour-a-day nurse making sure I had a supply of empty bowls, wet cloths, crackers and cold Cokes. Friends came and went with kind words and interesting food combinations. I still hadn't told people I was pregnant as I headed into my fourth month. In the area where I lived in Guinea, women don't talk about their pregnancy in the early stages. No grand announcements are made after a woman moves through her third month, the fear of miscarriage greatly reduced. Perhaps it has something to do with how the pregnancy will actually end. Will the baby be alive? Will the mother survive the birth only to die a few weeks later from infection?<sup>2</sup>

So, in the Guinean tradition I waited to share my news.<sup>3</sup> This was relatively short-lived, though, because I

<sup>2</sup> One in seven Guinean women will die in childbirth or from related complications. Guinea shares the highest maternal mortality rates in the world along with Afghanistan, Somalia and Sierra Leone. Comparative figures in the US are one in 3,500. Hong Kong and Spain are the "safest" places in the world to give birth. There, one in 9,200 women die from childbirth related complications. (Calculations based on maternal-mortality and fertility rates.) *The Safe Motherhood Initiative: [www.safemotherhood.org](http://www.safemotherhood.org)*

<sup>3</sup> As it turned out, when I did finally tell people, they gave me a mischievous smile as if to say, "we knew all along just by looking at you."

was eager to find out about remedies to help with what I had renamed "all-day sickness." I consulted with Marie, the herbalist and midwife with whom I had spent so many days. She of course was thrilled with my news — and I wonder if she thought she might have played a role in my enhanced fertility. (I was convinced she had.) She gave me a small, hard, gray ball of special clay and leaves. I asked her over and over again about its safety in pregnancy. She assured me that hundreds of women under her care had taken the remedy. Yet, even though I was convinced of the efficacy of traditional treatment for Guineans, I wasn't convinced that they would work for me. I was desperate to relieve my constant nausea. (I would later learn that my nausea and general stomach upset were partly attributed to parasites, the details of which I will not bore you with.) I mixed the clay and leaves in with water. It was mild tasting and didn't immediately help the nausea, so I quickly lost faith. Another remedy from another healer was offered, this time fresh leaves of a plant abundant in the area. It worked. I sipped small amounts throughout the day. A believer was born.

After my bout with malaria, it became important to leave Guinea as soon as possible. I felt I would not be able to recover from another episode. I also learned that pregnant women are much more susceptible to the disease. Needless to say, we would leave Guinea and not venture to Central Africa where I could potentially run into new strains of the parasite.

I had always imagined pregnancy to be a time of joyful transformation, where all that is powerfully feminine is experienced. I felt none of this. I had read that this quintessential experience bound all women of the world. Great, I think to myself, nausea, puking and general malaise is the strongest bond I will share with my earthly sisters. I was envious of the Guinean pregnant women surrounding me. Their mothers, sisters, cousins and friends were there to support them, sharing stories and tales about new motherhood. I longed for my own cocoon of women, a role Jeff tried hard to fulfill, but an impossible expectation for one person. My longing for the familiar and female was not to be met as we quickly moved into the packing, saying goodbye and leaving mode.

I had always been the buyer in Guinea. Somehow I thought this put me at a distinct disadvantage, because I never really knew if and how much I was being ripped off. You see, even though I had much greater resources than the average Guinean, it became a question of pride and prowess to see just how close to the "real" price I could bargain the vendor down to. Now the tables were turned. As the seller of goods, I intended to repay my frustration for all the times I thought I had been ripped off. The people who suddenly came into our lives when word was out that we had household goods to sell might not get such great bargains after all. Even though I had always wanted to be treated as economically equal to other Guineans buyers, I suddenly found myself driving

the hardest bargains with those who I knew to be better off. I barely budged on prices for doctors and businessmen, I gave government workers a little break, and friends and neighbor-women easily bargained me down to token prices. Incredibly, our motorcycle was sold to a man who had a little table selling candy, cigarettes and sardines in the market place. Where did he get a thousand dollars? In the end, I'm not sure whether I preferred to be on the buying or selling side. I simply enjoyed the art of the deal.

The only time I "lost it" in the selling process was when two young photographers came to buy Jeff's camera. They decided to look inside, apparently unaware that my last precious roll of film was there. After my tirade, I suspect they will hesitate to open up any camera again. After several days of bargaining our house was empty, and with a big wad of cash in hand, we began the bittersweet task of saying goodbye.

I went to Lopko, the village, I had lived in ten years before as a Peace Corps volunteer. I said goodbye to the family who had adopted me so long ago. When I returned to the States then, I dreamt about them, always wondering what had happened to their lives. Now, I walked down to the field where Yassa, the matriarch of the family, was weeding her gumbo crop. How many times had I walked down this path? Was I wiser? Did I walk differently now, than I had ten years earlier? As I did ten years before, I hugged Yassa, tears streaming down my face, thinking of the kindness she had shown wondering if and when I would see her again. The circle never ends. Tears will always fall for thanks and wondering. I said goodbye to Seba Koli, Yassa's daughter, pregnant like me. She with her third, me with my first.

Back in town, we said our good-byes to Mila, Jeff's palm-wine connection and my friend from the Peace-Corps days. We gave him our dog, Scooter. Almost a year before Mila had given him to us as a puppy. We thought he would have a better life staying in Guinea, spending his days in the bush rather than being cooped up in a tiny fenced yard. More tears.

We said goodbye to David, Jackson, Agnes and their families — refugees from Liberia with whom we'd shared meals and laughter at their roadside tea shop. Jeff worked with them to adapt the design of an energy-efficient wood stove in order to use locally available materials. We say goodbye to Lansana and Mamady, our faithful night watchmen, often awakened from deep slumber by Jeff's surprise security checks in the middle of the night. I say goodbye to Matené, our former neighbor and Lansana's wife. I would miss her visits and listening to local music as she tried to explain the meaning of songs. We say goodbye to Maurice, my faithful interpreter, who I never appreciated in the way I should have. Then there is Madame Marguarite, the president of the women's organization in Macenta. She thanked me once again for my loan of 100 dollars. She used this to entice

school officials to ensure her daughter's place in medical school even though she had fairly passed the qualifying exams. We say goodbyes to our favorite fruit and vegetable sellers, the women we buy kerosene from, the man we buy bread and eggs from. The boy who always gives me an extra sweet-peanut treat. The people at the rice bar, where we ate many meals doused with the best peanut sauce in town.

We say goodbye to Rachel, Stefan, Jeff, Laura, Mark, Andrea, Esther and Marta, the Protestant medical missionaries who have been so helpful to us with my malaria. We say goodbye to our friends at the American Refugee Committee and the International Rescue Committee, thankful that they included us in all of their festivities even when we could not return all the great food and beer their NGO status afforded them.

I say goodbye to Dr. Michel and the group of traditional healers who submitted and won a grant from the US embassy to build a traditional medicine center in Macenta. I say goodbye to the healers in town who have shared so much with me. To the others who live far away, I say goodbye and send this to them on the wind.

Then, I say goodbye to Marie, the herbalist and midwife who has given so much to me —the chance to witness the miracle of first breath outside the womb, the hardships and joys Guinean women face in fertility and birth, the healing power of plants through prayer and respect, picking forest medicines so that they will be available for years to come, drying them in the sun and then making remedies...

Now the trick was get to Conakry to get our plane tickets and wrap up other business before leaving. The thought of getting in a bush taxi for 24 hours seemed unbearable. As an alternative, we could take a plane from N'Zerekore (the regional capital); this meant a four-hour taxi ride to N'Zerekore, then a two-hour plane ride to Conakry. The numbers four plus two pointed favorably toward the plane. I would now put my hands in the fate of Soviet engineers and the gods.

As we boarded the plane, I knew once again that I had made a travel error. My stomach began to turn immediately. I broke out in a cold sweat. Jeff looked on helplessly. As soon as I was in my seat, my hands frantically searched the compartment in front of me for the familiar comfort of a lined, white paper sack. I panicked when my hands felt nothing but worn fabric. Suddenly, I remembered the plastic bags in my backpack. As the plane moved down the dirt runway, my fear of throwing up all over the plane was replaced by my fear of death. We simply kept moving toward the wall of trees in front of us, picking up little speed. Just when I thought my life would become a blurb in an ICWA state-of-the-Institute address, the plane rose over a green sea of trees.

The trip to Conakry, albeit the shortest I had ever

taken, exhausted me. I began to have more malaria symptoms. Once again we were forced to change our travel plans, spending more time in the capital than anticipated. It seemed as if the harder we tried to leave Guinea, the more emphatically we were forced by my health to stay. Where I had once focused on the capital's laughter, vivaciousness, community and lushness I now saw only open sewers, illness and greed. At every corner lurked a smell or sight to turn my stomach. It was as if I had failed to truly understand Guinean culture and therefore was more easily able to criticize, to draw quick conclusions. I realized I would never understand fully. Because I was not of this place, the richness of my experience would always be clouded by my surface view of events. My own musings attached so strongly to my western morality, ethics and lifestyle. How could I have thought for a moment that a total of three years (two as a Peace Corps volunteer) would somehow leave me with insight and true understanding? How could I even pretend to grasp the finer intricacies of the healing forest when I had yet to explore the spirits who inhabited those places, and the prayers said to help the plants heal? These large, looming questions piled up in my heart, weighing me down to the point of despair. I decided to leave them be, for a time when I was physically and emotionally stronger.

## EPILOGUE

Two years have past since I said my goodbyes. Our daughter Dawn Mist was born on August 14, 1998 in Moscow, Idaho, and shortly after her birth pronounced "bright as a new dime" by the infectious-disease specialist who found no malaria in her system. Her smile today reminds me of Guinea. She has transformed me. I think I am beginning to understand the true bond mothers around the world share.

News has come from Guinea. Seba Koli has named her daughter after me. This is a great honor and one I hope I can deserve. Our daughters are only four months apart. In my fantasies, our children know each other and share their lives. My daughter lives in Guinea for a while and her daughter lives with us in the States. In this fantasy, these beautiful young women get to experience the best of both worlds. Fantasies do not deal with the consequence of knowing and seeing what you may never have. My dreams endure.

The dreams of two Guinean stowaways have not lived on. In Brussels, last August, Yaguine Koita and Fode Tounkara were found dead in the wheel well of a Sabena Airbus. The story of these two boys may have gone unnoticed by the international media if it hadn't been for a letter that was found in one of their pockets. On the envelope was written: "In case we die, deliver to Messrs. the members and officials of Europe" The letter is a plea for help to alleviate dire conditions the boys found themselves living in. They write of war, disease, poverty, malnutrition, and a lack of decent education. "That is why we, African children and youth, ask you to create a great

efficient organization for Africa to allow us to progress. And if you see that we have sacrificed and risked our lives, it is because there is too much suffering in Africa and we need you to struggle against poverty and put an end to war in Africa. Nevertheless, we want to study and we ask you to help us in Africa to study and be like you.”

I am saddened not only by the boys’ deaths, but by the suggestion that Guinea’s redemption will come from the outside world. Yet it is this outside world that has largely contributed to the current state of Guinea’s affairs.

Recounting the tragedy in a newspaper article, a journalist describes Guinea’s capital as, “Chokingly hot and humid, Conakry is a city of colonial-era buildings, shutters rotting off their hinges, and winding roads jammed with fume-spewing mini-bus taxis... The jagged ocean front is the toilet to the city’s poorest people... Except for some top government officials and a tiny clique of businessmen....few Guineans live well. My first thought; What an accurate description . Then I start to think about the Guinea I know. The reporter has failed to see the life force that lives within in Guineans even though there exterior world is dismal. He does not talk about dancing, music, palm wine, stories, market day and family ties. He has also failed to recognize that capital cities are not accurate reflections of whole countries. Unfortunately for this journalist, he has not met the Guineans I know.

Marie’s picture hangs on my wall, she is a constant inspiration. She has suffered immense tragedies since I left Guinea. Her son has died from AIDS. His painting of a typical Macenta scene with rice fields, oil palms, thatched round huts and women fishing reminds me that tranquility can be shattered in a single instant. Less than 24 hours after her son’s death, her daughter died from a brain disease. A month later her grandson was dead. Fair-

ness is not the question. Rationality, not the answer.

The traditional-medicine center has been built, with leftover money actually returned to the embassy. There was a big celebration with the Ambassador, and I was sent the pictures to prove it. The coalition of healers are not getting along; some don’t like the location of the center or the organizational structure. There is now some question as to the ownership of the land, even though documents showing ownership were presented with the grant proposal. Perhaps the road to heaven should remain unpaved?

For most of last year I worked with a forest-certification program, evaluating forest-management operations to see whether they met the ecological, economic and social criteria of the Forest Stewardship Council (FSC). The goal of this organization is to improve forest management practices through economic incentives. With the FSC stamp of approval, consumers are assured they are purchasing wood products that have been produced under stringent environmental and social standards. It’s an imperfect process in an imperfect world, and I still question whether the very same economic system that has destroyed much of the world’s forests can in fact end up saving it.

Now I am learning about midwifery and homebirth. I am learning about our local forest plants and their medicinal properties here in southwestern Oregon. I am learning to look at small things in the forest. I am trying to collect things in a way that will be sustainable for the future. The other day, when I was out collecting roots of a local plant to treat Jeff’s sore throat, I had to sit down for moment as the wind blew through the trees. I was off-balance; something was missing. A voice singing on the wind reminded me: I hadn’t said a prayer of thank you to the plant I hoped would offer healing, as I learned in Guinea. I will never make that mistake again. □