Making Mothers: Missionaries, Medical Officers and Women’s Work in Colonial Asante, 1924–1945

by Jean Allman

For four days in June, 1931, government, church and business representatives from eight European countries and from several colonial territories in Africa met in Geneva to discuss the welfare of African children. Summoned by the Save the Children International Union during the depths of the world-wide Depression, the participants discussed the application of the 1924 Declaration of Geneva and its provisions for the protection of children to the children of colonized Africa. Echoing much of the broader discourse surrounding maternal and infant welfare of the late 1920s and early 1930s, the conference participants blamed social diseases, poverty, ‘native midwives and their anti-hygienic practices’, mothers’ ‘carelessness’ and ‘irrational feeding’ of infants, superstition and, finally, ‘lack of sufficient medical aid’ for infant mortality rates which exceeded seventy percent in some areas. Although the conference repudiated the ‘tendency to blame the mother’, its published conclusions focussed almost exclusively on the education of mothers and children and avoided pronouncements on the effects of migrant and forced labour, cash-cropping or taxation. Indeed, as Evelyn Sharp, the conference’s chronicler, wrote, ‘the urgent need for education ... was brought persistently to the notice of the delegates, although the questions before them were nominally pathological and economic’. In short, ‘Making African History at Geneva’ (the title of Sharp’s first chapter) required, above all, the making of African mothers.
Students at the Mmofraturo School in 1932.
Methodist Missionary Society, Overseas Division.

Mary Anokye, 1992.
Author’s photograph.

Persis Beer, no date.
Mmofraturo School, Kumasi.
In seeking to address the welfare of African women and children almost exclusively through social and educative solutions aimed at women and children (particularly at their hygiene and nutrition), the conference avoided the obvious issues of economic exploitation and political expediency. In this sense, its proceedings both reflected and inspired an international discourse aimed at constructing proper, nurturing motherhood (according to European middle-class criteria) out of biological maternity, irrespective of economic, cultural or social context. Though in practice mediated in significant ways by race, class and place, it was a discourse that impacted upon women living in communities as far apart as the working-class districts of Liverpool and London and the farming villages of West Africa.

For example, those entrusted with making ‘proper’ mothers in Britain’s African territories – missionaries, nurses, teachers and women medical officers – carried with them the social baggage of Britain’s maternal and infant-welfare policies at home, particularly those initiated after the Anglo-Boer War. These policies were based on health officials’ perceptions of infant mortality as a direct result of the ‘failure of motherhood’. They stressed, above all else, hygiene and nutrition through education, or, in the ennobling terminology of the time, the essentials of ‘mothercraft’. They were policies Britain’s ‘maternal imperialists’, as Barbara Ramusack has termed them, could readily transport to the colonies. They did not require any critique of the economic or environmental effects of colonialism on maternal and infant welfare, but they could be marshalled against a host of social problems, from population decline and infant mortality, to sexually transmitted diseases, prostitution and adultery. The British imperialist enterprise in the twentieth century, in other words, was intimately bound up with making mothers – both at home and in the colonies.

This paper looks at one small chapter in the story of motherhood and colonialism. That it can be situated in the broader discourse of maternal and infant welfare is important for purposes of comparison and context, but the story that follows is far more circumscribed. It focusses on efforts to ‘make mothers’ in Asante – one small part of the British empire. This former West African kingdom, which was eventually incorporated into the Gold Coast (after independence, Ghana), did not come under British colonial rule until 1901 and initiatives directed at maternal and infant welfare did not get underway until well into the 1920s and ’30s. Thus, Asante women’s encounters with British attempts to colonize the maternal, as it were, survive today as lived experiences in the memories of many old women. At the same time, some of the women missionaries and teachers have left written records – personal correspondence, reports and articles – describing their experiences as ‘maternal imperialists’. What follows is an attempt to privilege these voices, to centre the encounter between ‘maternal imperialist’ and Asante woman. What was making mothers all about if you were doing the ‘making’ or if you were the mother being made? While delegates on a sunny
Geneva afternoon pondered the unreliable statistics on infant mortality and debated agendas for uplifting African women, twenty or thirty Asante women in the town of Tafo gathered in the shade of an odum tree. There, more out of curiosity than anything else, they watched a Methodist missionary, Sister Persis Beer, and several of her students demonstrate how properly to bathe a baby. The week before, the women had been entertained by a lengthy session on making pancakes. Far from Geneva’s Salle Centrale, far from the committee rooms of Britain’s Colonial Office, it was basins and bathpowder, pancakes and biscuits. Was this the ‘stuff’ of which mothers were to be made?12

Indirect Rule and Mothercraft: Colonizing the Maternal in Asante
Initially in Asante neither the colonial government, the missions nor Asante’s chiefs appeared very interested in women’s education or maternal and child welfare. After 1924, however, there was an explosion of interest in the welfare of women and children in Asante that can be explained only in part by factors and forces external to Asante itself, by events like the Geneva Conference. It is this paper’s contention that the education and welfare initiatives aimed at Asante women during the 1920s and 1930s have to be understood within the context of a broader crisis in gender relations that shook Asante during those very same decades. The gender chaos, as it were, that accompanied the spread of cocoa as a cash crop (particularly after 1920) and the expansion of the trade in foodstuffs (a trade women tended to control) had profound repercussions on relationships between Asante men and women. Marriage, divorce and maternal/paternal responsibilities toward children in this matrilineal society were contested, challenged and, at times, redefined as a result of sweeping economic changes rooted in the expansion of cocoa. Let us look briefly at some of those changes.

Few would dispute Gareth Austin’s recent contention that the labour necessary for the rapid spread of cocoa, which saw exports from the area rise from eight pounds to over 170,000 tons during the period 1890–1918, came ‘very largely from established, non-capitalist sources’.13 After the abolition of slavery and the prohibition of pawning* in Asante in 1908, wives became one of the main sources of that unpaid labour, particularly in the initial establishment of cocoa farms.14 In many ways, wives’ provision of labour flowed logically from pre-cocoa productive obligations between spouses. Wives commonly grew food crops on land cleared by their husbands – crops which both fed the family and provided a surplus which wives were entitled to sell. When cocoa farms were first established, the pattern differed little. In the first three to four years of their existence, the only returns from cocoa farms were the food crops – particularly crops like plantain or cocoyam which were planted to shade the young trees during their first years. After

* In Asante, the practice of human pawning entailed a debtor giving a person to a creditor as security on a debt. On repayment, the pawn was returned.
that point, however, food crops (that is, the wife’s only material and
guaranteed return on her labour investment in the farm) diminished. The
main product of the farm now became the cocoa beans which belonged, in
whole, to the husband. Any labour invested by a wife after a cocoa farm
became mature was directly compensated ‘only in the continued obligation
of her husband’, as Penelope Roberts writes, ‘to provide part of her
subsistence from his own earnings’.15

Obviously, for wives, the investment of labour in a husband’s cocoa
farm meant benefits in the short-term and liabilities in the long-run. It
certainly did not provide for future economic autonomy or security. It is
for this reason, as Christine Okali observed, that ‘wives working on new
and young farms were always aware that they were not working on joint
economic enterprises. They expected eventually to establish their own
separate economic concerns’.16 The evidence suggests that this is precisely
what many did after the initial establishment of cocoa in an area. As Austin
has suggested, women’s ownership of cocoa farms in Asante during the
first two decades of this century was exceedingly rare. After that point, it
became far more common and was directly correlated to the length of time
cocoa had been cultivated in a given area. By the third decade of this
century, in areas of Asante where cocoa was firmly entrenched, women
began to establish their own cocoa farms – an option providing far more
long-term economic security than labouring on a husband’s mature farm.
And the independent establishing of a cocoa farm was only one in a series
of options that opened to women in areas where the cocoa economy was
fully in place. ‘The growth of male cocoa income’, according to Austin’s
recent account, ‘created economic opportunities for women in local
markets, both as producers (for example, of food crops and cooked food)
and as traders’.17

It is, I would argue, in this confusing period of transition in the
development of Asante’s cocoa economy that we must locate the gender
chaos of the inter-war years and the accompanying explosion of interest in
the welfare of women and children. It was during the 1920s, with cocoa
well-established in many parts of Asante, that women’s role in the cocoa
economy was both changing and diversifying. Many wives were making the
move from being the most common form of exploitable labour during the
initial introduction of cocoa to exploiting, themselves, the new openings for
economic autonomy and security presented by the established, though still
expanding, cocoa economy. Their moves are evident not just in the statistics
documenting the increasing number of women cocoa-farm owners or in
descriptions of the growing market in foodstuffs, but in the crisis in marriage
so well-documented in customary court cases and in life histories.18 In this
transition period, some women were quite prepared to divorce a husband
who refused to set up a farm for his wife. Others turned to customary courts
to challenge matrilineal inheritance, demanding portions of a divorced or
deceased husband’s cocoa farm in recognition of labour invested. Still others
sought to avoid marriage altogether or, at the very least, to insist on its fluidity and the mutuality of conjugal obligations.\textsuperscript{19}

All of these bits and pieces evidenced a gender crisis in Asante, a contest over the meanings and makings of marriage and parenting. They were, more than anything, about the struggle for control over women’s productive and reproductive labour in Asante – control at the very moment women were beginning to negotiate their own spaces within the colonial economy. That this was a struggle articulated in a discourse of ‘bad girls’, of uncontrollability or of moral degeneration should come as no surprise. As Megan Vaughan has argued in a broader study of colonialism and African illness,

‘the problem of women’ was shorthand for a number of related problems including changes in property rights, in rights in labour and relations between generations. . . . The real issue, of course, was that with far-reaching changes taking place in economic relations, so enormous strains were placed on both gender and generational relations . . . these complex changes were described in terms of degeneration, of uncontrolled sexuality and of disease.\textsuperscript{20}

But if women’s economic alternatives were easily represented as ‘the removal of constraints upon their sexuality’, as Roberts has argued, then how could constraints be reasserted?\textsuperscript{21} How could a new moral order be constructed out of the crisis? Two developments in colonial policy, I would argue, were key to the ordering process – indirect rule and maternal and child-welfare initiatives. Indirect rule had very specific implications for mediating gender conflict, shaping gendered boundaries and reformulating gender subordination. While it served the obvious ends of providing administration on the cheap and legitimating the colonial enterprise, indirect rule also facilitated colonization of the domestic realm – the world of marriage, divorce, adultery, childbirth and death. Asante chiefs, as the arbiters of ‘customary law’, through executive order and through native tribunals, were empowered by indirect rule to manipulate meanings and redefine relationships. Indeed, one cannot help but be struck by the near obsession of Asante’s chiefs with women’s roles, with women’s sexuality and with women’s challenges to existing definitions of marriage and divorce, particularly after the formal commencement of indirect rule restored the Asante Confederacy Council in 1935.\textsuperscript{22} Even at the local level, apart from the centralized structures of indirect rule, efforts were made to control women’s sexuality in the face of this moral crisis. For example, throughout the late 1920s and early 1930s, a number of Asante chiefs in outlying towns and villages like Asokore, Effiduasi and Manso Nkwanta, ordered the arrest of all women who were over the age of fifteen and not married. A woman was detained until she spoke the name of a man whom she would agree to marry and the man in question paid a release fee and agreed to marry the woman.\textsuperscript{23} This rounding up of ‘spinsters’ was a short-lived, but nonetheless
significant episode in direct intervention in marriage – an institution, as Jane Parpart has argued, so important in ‘regulating sexuality, procreation, labour, and property rights’.24

If indirect rule provided the political framework in which Asante’s gender crisis would be addressed, then women’s education, mothercraft and maternal and child welfare efforts provided a social framework. And as Carol Summers reminds us, ‘social programs . . . were not mere side shows to the public politics and the economic maneuvering of imperialism. They were integral to the holding of power’.25 Missionaries were no less important than chiefs in attempts to control ‘uncontrollable’ women, in efforts to stabilize colonial rule. Moreover, at times the connections between the two – indirect rule chiefs and missionaries intent on making ‘proper’ mothers – were necessarily intimate. Tafohene Yaw Dabanka, collaborator chief par excellence, worked very closely with the British in efforts to implement indirect rule in the Kumasi Division of Asante.26 Although he did not convert to Christianity, Dabanka was responsible for granting the Wesleyan Missionary Society the large parcel of land upon which the very first girls’ boarding school was built in Kumasi. In recognition of his efforts, the mission permitted up to six of his children (who numbered about 105) to attend without paying fees. Two of his daughters were enrolled in the boarding school in the 1930s.27 At this girls’ school and at others, at child welfare centres and weighing clinics, Europeans considered themselves entitled, by their ‘expertise’ and in the name of their ‘civilizing mission’, to enter directly the private world of Asantes – the world where children were born, the sick were healed, meals were cooked, babies were bathed, marriages were negotiated and deaths were mourned. It is to this encounter that we now must turn.

**Baby Shows and Baby Scales: Negotiating Colonial Motherhood**

Like many of the earliest, broad-based efforts to make ‘proper’ mothers out of existing mothers in colonial Africa, those initiated in Kumasi were put forth in the name of public health, in this case by Kumasi’s Sanitation Office in 1925. It was in that year that the first Health Week was organized by Dr Selwyn-Clarke who was then the Senior Sanitary Officer in Kumasi. Activities included neighborhood clean-ups, the inspection of pupils’ personal hygiene, exhibits and an essay contest. But the biggest event, by far, was the Baby Show. Selwyn-Clarke had hoped that two hundred babies would be entered, but ‘as many as five hundred were brought to the Baby Show’. In the following year, Selwyn-Clarke decided to refuse admission to babies whose names had not been entered in the Register of Births. The result was a nearly threefold increase in the number of births registered between September and October, 1926.28 By 1929, the Baby Show had been transformed completely into a mechanism of social regulation, if not social control, as women were encouraged and then rewarded for entering the world of colonial motherhood. The Baby Show was open only to children
who had regularly attended the newly-opened Welfare Centre and whose births had been registered. In the judging of the baby contestants, extra points were given to children who had received vaccinations.

If these first biomedical and voluntary efforts to reconstruct motherhood in Asante fell under the general rubric of public health, subsequent efforts aimed at mothers in the late 1920s and early 1930s were increasingly social and challenged the boundary between private and public. Like the initiatives recommended by the 1931 Geneva Conference, they sought to address specific medical and environmental problems with a rather ambiguous, yet nonetheless invasive, discourse on mothercraft and hygiene. In other words, from efforts encouraging a mother, via a Baby Show, to have her child vaccinated came unannounced visits to women’s homes where recommendations concerning hygiene and infant feeding were administered to a captive audience.

The springboard for this effort was the Kumasi Child Welfare Centre, which began operations in its permanent quarters in September, 1928. In many ways the Centre’s opening marked the beginning of a formal maternal and infant welfare scheme in Asante. Though funded primarily by the government, the Centre relied heavily on supporting services from missions and voluntary organizations. Its presence meant that antenatal care could now be co-ordinated with postnatal care, weighing-in clinics, domiciliary visits, and instructional sessions in mothercraft. Government, mission and other voluntary efforts could be more closely integrated.

When the Centre opened its (temporary) doors in 1927, its primary objectives were to provide antenatal care to expectant mothers and to offer postnatal, well-baby care, to infants. Its main agenda, then, was preventive treatment, not care of the sick. In addition to its regular clinics, the Centre held weighing clinics to which mothers were supposed to bring their infants on a monthly basis in order to assess the child’s development. It also helped to co-ordinate the house-to-house visitations conducted by the Gold Coast Maternity and Child Welfare League after its founding in 1927. It was not equipped, however, to provide services to parturient mothers or those immediately postpartum. (The African Hospital in Kumasi was similarly ill-equipped, though it did handle emergency cases requiring surgery.) In its first full year of operation, according to the ‘Report on Ashanti’, attendance at the Centre was 24,019 and the success of its work was ‘due to the great confidence and trust which the Ashanti mother reposes in the Women Medical Officers’. In addition to running the Centre’s clinics, the medical officers also visited neighbouring villages, ‘inspected 617 children and gave simple advice to the mothers on hygiene’. By 1930–31, there were 30,897 visits by children to the clinic and 12,070 visits by expectant mothers. ‘At times’, wrote the Woman Medical Officer, ‘it has been difficult to cope with the number of women attending this clinic, but the charge of a small medicine fee has reduced the numbers.

But how do we make sense of those numbers? What do they tell us about
Making Mothers

the ways in which women, especially in Kumasi, negotiated the terrain of mother-making in the 1920s and 1930s, aimed as it was toward addressing not only a host of biomedical and environmental problems, but women’s ‘uncontrollability’? Though no archive of minutes and reports exists to provide a direct answer to this question, the oral reminiscences of Asante women, as well as the recorded concerns and frustrations of colonial officials regarding women’s reception of these schemes, have much to tell us about those numbers.33 They suggest that Asante mothers responded in a variety of ways. Some became enthusiastic participants in the schemes. They attended antenatal clinics at the Welfare Centre, had their babies delivered by one of the two registered midwives in Kumasi and brought their children to the weighing clinics on a regular basis. These women lived almost exclusively within Kumasi, Asante’s largest urban centre. They tended to be active in mission churches and were also more likely than women who did not frequent the Centre to have a husband who worked in an occupation closely linked to the requirements of the expanding colonial economy – as driver, typist, store clerk or mason. In a matrilineal society in which it was not uncommon to stay with your matrikin after marriage, they were more likely to share a residence with their husbands.34

At the other extreme were the women about whom we know very little – the ones who by choice or because of lack of funds for travel and medicine, avoided the Centre, the League, the missions and the Red Cross entirely. The government lamented on occasion, the ‘large numbers of women who continued to rely on the unqualified woman’ rather than the registered midwife.35 Indeed, that continued reliance might explain the rather insubstantial Midwives Ordinance of 1931. The ordinance did not restrict the practice of midwifery to ‘properly qualified’ midwives, as was the case in Uganda and other British colonies. Instead it provided for the enrollment of local midwives on a ‘List of Unqualified Midwives if they had been engaged in the practice of midwifery for a period of not less than two years . . . [and were] of good character’.36 The government justified the limited nature of the ordinance by claiming that ‘there is not as yet so great a confidence in scientific methods of obstetrics . . . and if there were such confidence there will not be for some time a sufficiently large number of properly trained midwives to meet the public demands’.37 One has to do very little reading between the lines to glean from this statement that the majority of women preferred being attended by local midwives. Thus, the colonial legislation signified the government’s inability to fully regulate, much less redefine, midwifery which remained, for the time being, in the hands of local practitioners.

But between these two extremes of women’s full participation or of complete avoidance, most women negotiated their way through maternal decisions and colonial encounters on a daily basis, participating at one moment and avoiding at another. As one Kumasi resident recently recalled of the births of her three children, ‘Sometimes I would take some herbs and sometimes I would go to the hospital’.38 And those who did participate in the
various infant and maternal welfare schemes did so on terms that were not simply dictated by the colonial agent. Many, by the way they chose to participate and by the way they structured the encounter, sought to transform the making of colonial motherhood into something else entirely.

The very statistics gathered by the Gold Coast government provide evidence of this process. Kumasi’s Child Welfare Centre was set up to provide antenatal care and well-child care, but in its first decade of operation the officers-in-charge found it virtually impossible to limit its function to welfare issues. With no hospital available to cope with high-risk deliveries, the Centre found itself delivering babies even though it had no facilities. In 1936, eighty-four women delivered their babies at the Centre; in 1937, 109 delivered there. Indeed, in the first full annual report on the Centre, the Medical Officer revealed that the facility was, in fact, focussing on curative, not preventive medicine, ‘As the Clinic becomes better known to the Ashantis the difficulty of confining the activities of the Centre to welfare work becomes greater’. Most telling, perhaps, were the Officer’s remarks concerning the activities of the child welfare clinic. ‘Nearly every child is suffering from some definite disease’, she reported, and of the more than 10,000 new children seen by the clinic, only nine percent came for well-child care, that is, ‘for inspection and advice’.39 If the Kumasi Child Welfare Centre was envisioned as the site for the making of colonial mothers, many of the Ashanti mothers who visited appeared to have a very different vision. In those early years, they succeeded in transforming the very locus of maternal and infant welfare schemes in Asante into what they did want – affordable, curative health care alternatives in a rapidly changing and often confusing colonial urban environment. And in their quest to transform colonial initiatives, Asante women did not always encounter opposition from those nurses, medical officers and volunteers who had been entrusted with the task of colonizing the maternal in Asante.

That the women medical officers had collaborated, wittingly or not, in the process of transformation was one of the charges made by the Director of Gold Coast Medical Services in a 1942 report. According to J.B. Kirk, ‘so-called welfare clinics have been allowed to degenerate into treatment clinics and educative and welfare work has been completely swamped by the huge wave of suffering childhood which has inundated them’. The Kumasi Centre, he wrote, ‘is being used as a combined maternity and sick children’s hospital’. He blamed this state of affairs largely on the medical officers, their failure to provide direction and their ‘desire to ensure the popularity of these clinics so far as it may be expressed in the number of attendances year by year’. While Kirk also blamed the ‘absence of adequate hospital accommodation’ and the ‘low standard of living of those who are most in need of instruction and guidance’, he believed that the centres, given proper management, could have fulfilled their original purpose. He used the weighing clinics as an example of how the teeth had been taken out of infant welfare measures:
In Europe the weighing centre is generally the place where demonstrations in the care and management of infants are conducted, cookery lessons given, dress-making classes organised and the general welfare of children impressed upon all who attend there for these purposes. Here the weighing centre appears to be merely a weighing centre and the mothers have to be continually pestered to bring their children there to be weighed.

But if the women who worked on a daily basis at the Kumasi Centre – the nurses, medical officers and volunteers – were willing to collaborate in transforming a maternal and infant welfare centre into a curative medical clinic by abandoning hygiene lectures and mothercraft talks for treatment of yaws or placenta previa, Kirk was not. ‘If the mothers will not bring the babies regularly to the weighing machine’, he wrote, ‘the weighing machine must be brought to the house’. Moreover, he continued, ‘while the visit is being made those features of the home life of the child which may militate against its welfare should be noted and the mother’s attention drawn to them’. But even Kirk, in some ways, appreciated the not-so-subtle contradictions in what he advocated, suggesting at one point that the ‘welfare of children should logically await the establishment of the general measures affecting the whole community’.

Kirk’s report is significant not only in that it points to the contradictions and bankruptcy of colonial social welfare schemes, but in the light it sheds on the encounter between Asante mother and maternal imperialist. It suggests that that encounter was shaped as much, if not more, by the actions of Asante women as by an international discourse on maternal and child welfare. Asante mothers, for the most part, exhibited profound disinterest in the mothercraft agenda with which the Kumasi Centre began operations. They were not ambivalent, however, concerning their access to medical care alternatives. Using the pressure of their numbers at the health care clinics and the absence of their numbers at weighing clinics and mothercraft lectures, they fundamentally transformed the agenda of the Centre and there is little evidence to suggest that those who staffed the Centres on a daily basis offered any effective opposition to the transformation. That the Director of Gold Coast Medical Services essentially called for the abandonment of social welfare initiatives by Welfare Centres evidenced the strength with which Asante mothers daily negotiated the terrain of colonial motherhood. Having observed this strength (though he preferred to cast it as a ‘wave of suffering childhood’), Kirk concluded in 1942 that the colonial government must change the field of battle, take the struggle for ‘motherhood’ right into Asante homes. Would colonization of the maternal fare any better there? To answer that question, let us turn to the Women’s Work section of the Methodist Mission which began active work in Asante in the late 1920s. Its programme focussed not just on remaking mothers through home visits, but on educating young girls in the science of mothercraft and then
sending those girls back into the villages. There they could instruct their own mothers in the finer points of motherhood.

**Pancakes and Wash Basins, Bibles and Needlepoint: Making Mothers Is Woman’s Work**

The introduction of Methodist women missionaries to Asante in the late 1920s was portrayed by the mission and by the colonial government as nothing less than a gender-specific response to the moral crisis born of colonial rule. As Reverend E.W. Thompson wrote in the *Woman’s Work* magazine of the mission:

> In former times, which, after all, is no farther off than yesterday, some sort of sexual morality was upheld and enforced by barbarous ord- eals. . . . But with the introduction of a humane and civilised code of laws, ancient sanctions and restraints have been removed without a higher sanction of equal potency taking their place. Young men and women formed irregular connections and thought little of sin because physical fear had been abolished.

Thompson believed that the only way to counter this moral crisis was for women missionaries to ‘introduce and make real the Christian ideal of marriage and the family’. Motherhood, of course, was central to that ideal and key to the civilizing mission. ‘Slowly – all too slowly’, F. Deaville Walker wrote,

> If African homes are to be truly Christian homes, if African women are to become truly Christian, they must have women missionaries who can be among them as women among women and teach them about the intimate things of a woman’s life in a way that no man can possibly do.40

In short, making colonial mothers was woman’s work.

While the government’s maternal and infant welfare efforts in Kumasi focussed mainly on reconstructing contemporary motherhood, the Methodist mission’s first goal in Kumasi and in Asante generally was to shape the mothers of tomorrow through educational initiatives. Early in 1927, the mission’s district chair, Harry Webster, wrote to Governor Guggisberg about the Methodist plans for a boarding school in Kumasi. ‘It is our intention’, he wrote, ‘to place the emphasis on domestic and home training subjects – native cooking, laundry work, needle work and gardening’. Whether because of the severity of the ‘moral crisis’ in Asante or because of Asante’s relatively recent experience with European missions, the Methodists viewed education for Asante women as requiring a different agenda than the one utilized in the mission’s coastal schools. ‘There is no thought of training the girls for English Examination’, wrote Webster, ‘such as is attempted at Accra and Cape Coast’.41
In 1928, for the first time in the history of the Methodist Mission in the Gold Coast, a meeting of women missionaries was held. It coincided with the beginnings of construction on the Kumasi school. Known as Mmofraturo (literally, the children’s garden), the school was modelled on an African village, though ‘not necessarily an African village as it is’, a 1928 report added, ‘but an African village as it might be under ideal conditions. Small houses are grouped around the Kindergarten block, which is approximately the size of a village school’. In 1930 Mmofraturo opened its doors, with Sister Persis Beer in charge. In the following year, a training college for women was added to Mmofraturo’s programme, with women taking some courses at neighbouring Wesley College. From its inception, the school sought to mould proper Christian women and mothers through daily routine. The original campus consisted of three small houses containing two bedrooms and a dining room. One bedroom was for the training college students and the other was for the children. They were to interact as a family, eating together and dividing specific chores, with the training students serving as ‘mothers’ to the pupils. While this type of ‘home life’ education, as Nancy Hunt has called it, was quite common throughout Africa, Mmofraturo seems to have put an unusual twist on the model.

From the very beginning, while stressing domesticity and Christian motherhood, it also emphasized self-activity and empowerment in ways that appear almost inimical to the broader domestic agenda. For example, in 1931, Persis Beer reported that every week students and staff ‘meet in a “Mother’s Council” to discuss matters affecting the training of the children and anything that concerns our common welfare’. By 1934 the Mother’s Council had simply become the ‘Mbofraturo Council’ and Beer was reporting that ‘the aims of self-government and the freedom which comes of service continue to be carried out in the children’s democratic assembly, the Mbofraturo Council, and in the whole life of the school’.

Mmofraturo’s rather unique combination of participatory democracy and domestic training was, in part, a reflection of Persis Beer’s missionary feminism, if we can call it that. Beer, during her nearly twenty years in the Gold Coast, spent a good deal of time negotiating her own autonomy within the Methodist Mission movement in the colony. While her philosophy of education and of women’s emancipation was not unproblematic, unburdened by racism nor free of the contradictions that riddled maternal imperialism, it did represent a fairly successful and long-term challenge to the prevailing missionary discourse on domesticity. In a 1933 article in Woman’s Work, Beer attacked the second-class status of women in the church, the ‘assumption of women’s inferiority [which] results in lack of opportunity for girls and women’ and the assumptions of male teachers concerning female students in the higher standards. ‘Nearly all the teachers are men’, she wrote, ‘and most of them assume that girls are intellectually inferior’.

Persis Beer’s personal approach to education goes some distance toward
explaining Mmofraturo’s particular brand of democratic/domestic education. It cannot, however, tell the whole story. Asantes were active participants in the making of their colonial world and Mmofraturo, democratic assembly and all, was as much a product of the daily realities of life in Asante as it was of the ambiguous missionary feminism of Persis Beer. Indeed, Beer’s ability to negotiate the missionary terrain of domestic education was largely a result of her belief that ‘in family matters, [Asante] women have power’. How to extend that customary influence into the church and into education was Beer’s starting point, and, in large part, the Mmofraturo Council and the school’s combined agenda of participatory democracy and domestic training can be seen as her efforts to reproduce the domestic power of Asante women in the mission school context. It is in this rather complex way that domesticity and Asante women’s power mingled in seeming harmony at Mmofraturo. It was in this way that the children’s garden became a negotiated settlement, not just between Sister Persis and her mission’s leaders, but among her students and pupils, their mothers and their fathers and Asante’s chiefs. Granted, most Asante girls did not attend schools during this period. Nonetheless, places like Mmofraturo are important as microcosms of the colonial encounter; they did not simply drop from the sky, prefabricated colonial institutions. They embodied, in many ways, the very struggle over how Asante’s colonial mothers were to be made – a daily struggle whose outcomes were never predictable.

Two brief life stories lend some insight into the various and complex ways Asante women encountered this contested process as school girls. Mary Anoyke, one of the younger daughters of Tafohene Dabanka, was enrolled in Mmofraturo’s first class. ‘I was one of the pioneers’, she recalls, and by all evidence Mmofraturo profoundly affected her life’s course. Persis Beer ‘saw to her marriage’, or more literally, ‘stood at her back’ (ogyina n’akyi) for the ceremony. She was married in the church to a young catechist and spent most of her adult life travelling with him from mission school to mission school. She and her husband had two children, delivered by a registered midwife in Kumasi, and always lived together. Mary Anoyke worked as a seamstress in her home – a skill she acquired at Mmofraturo – and relied on none of her matrikin, male or female, in the raising of her children. Her first child is named Persis.

Mary Anoyke’s life seems to suggest that an early missionary education profoundly shaped the next generation of Asante mothers – creating a group of young women who lived with their husbands in monogamous marriages, who remained in the home during the day (rather than going out to trade or to farm) and who did not share childcare responsibilities with others. However, Ama Dapah’s story suggests a very different outcome. Ama attended the small Methodist school in Tafo, not far from Mmofraturo, and reached about the same stage as Mary Anoyke before leaving. Her father was a servant (ahenkwaa) in Kumasi to the Asantehene (king of Asante) and Ama lived with her mother, a farmer, in the matrilineal family house in
Tafo. At about the age of twelve, Ama was taken out of school by her mother because her mother believed that ‘if you kept going to school you would be unable to have children’. Ama eventually had her first child, but did not marry the father. Nor did she marry, according to Asante custom or by colonial ordinance, the fathers of her other twelve children. She explained that ‘in those days, the women were trusted by their husbands, so when he took you, he would decide not to do the rites because he trusted you not to go to any other man apart from him’. Ama claims that she preferred this arrangement because of the flexibility it gave her: ‘if you kicked me, I would just leave you! That’s it. . . . If they weren’t any good, I just left’. Ama Dapah supported her children, including paying their school fees, through her work as a trader. She always lived in her family house and her mother looked after the children when she was out. She never lived with any of her ‘husbands’.51

The point of recapping these two stories is not to draw conclusions concerning which was a more typical outcome of missionary mother-making. Neither woman was more or less ‘colonized’ than the other; each simply negotiated the colonial map in a different way. Their stories illustrate how impossible it is to speak of a ‘missionary impact’ when the ‘mission’ itself constituted contested terrain and when so many factors external to the school itself came to bear on the making of Asante’s first generation of colonized mothers. For example, in both cases here the class and status of the father (particularly as relative to that of the mother) played a significant role in mediating the woman’s encounter with mission education. In short, while future mothers were certainly being made at Mmofraturo and other girls’ schools during this period, it was not always in the way advocates of girls’ education and mothercraft training had intended.

While the Methodist Woman’s Work that went into education did not always result in the intended harvest, there were other efforts not bounded by the walls of the school. From the very beginning, an important aspect of girls’ education entailed outreach programmes aimed at the mothers of tomorrow’s mothers. From Mmofraturo’s first year, its students and staff went out to nearby villages on weekends. At first these visits were rather informal, cast as efforts at ‘making friends’ with village women.52

By 1934, these friendly visits were far more organized and had gained a specific maternal and infant welfare agenda. ‘With added zest due to an increased interest in Red Cross work’, reported Beer, the students were visiting the neighboring town of Tafo and bathing babies.53 Beer’s 1934 report detailed the extensive nature of the students’ village work:

On Sundays they visit Christian and heathen women in their compounds, teach classes of women and children and sometimes do dispensary work. During the week the students go to Tafo. The second year do Infant Welfare work and hold a play hour for children up to eight or nine years of age. To this enjoyable hour only well-bathed children are admitted! The
third year students also go to Tafo each week, and have worked with some of the women in the compounds, teaching them clean ways of cooking, helping them to clean kitchens and compounds and giving health talks, and trying to arouse their interest in improving their homes.\textsuperscript{54}

In many ways, outreach programmes such as these constituted the most intimate of Asante women’s encounters with colonialism. Their daughters became targets of and agents in the colonization of the maternal in an ambiguous process of indirect social reconstruction. But did the intimacy of this particular colonial encounter render school outreach programmes more successful than, for example, welfare clinics in creating an uncontested colonized motherhood? Let us look briefly at the encounter from the perspective of the mother whose baby was being bathed.

In 1992 and 1993 I spoke to many women in the towns of Tafo, Effiduasi and Asokore who had direct experience of these outreach programmes in the 1930s. The majority of them had had their babies bathed by the Methodist outreach groups and all described very similar scenes. They recalled the missionaries arriving in town with a group of their students. Often the group was equipped with soap, sponges, powder and basins and, at times, they brought bandages and clothes made by the students and medicines for various skin ailments. Sometimes the group’s arrival was formally announced by the chief through the beating of a gong-gong, but more often it was informally announced by the women themselves singing a welcoming song to the missionaries as they went to fetch water for the baths.\textsuperscript{55} As Yaa Pokuua recalled, ‘When they came, they asked us to bring them the children so they could show us how to bathe them. We took them to the outside of the house. There, they showed us how to bathe them well and then powder them. They advised us to do that everyday when we got up’.\textsuperscript{56}

But how did Asante women perceive this encounter – as a welcomed instructional session or as a coercive intrusion into their private worlds? I expected to hear one or the other of these responses when I asked women what they thought of the bathing sessions. I heard neither. When asked what they thought of this bathing of their babies, virtually every woman responded quite simply that it was good. When I asked if it was good because it changed or improved the ways that women washed their babies, only a few could point to any differences at all. Mary Oduro suggested that the only differences were that the missionaries used a basin to bathe the children and that they powdered them when finished: ‘They told us to use a basin and not to bathe them like we were doing – just pouring water over them’.\textsuperscript{57} However, most could think of no difference and responded like Efuah Nsuah who said, ‘No, it did not change anything’.\textsuperscript{58} Only after encountering several responses like Efuah Nsuah’s, did I begin to realize that there was no contradiction in the reminiscences, that the sessions could be perceived, at once, as non-coercive, non-instructional and yet somehow ‘good’. For many
women, the bathing sessions were simply a means of gaining access to various imported items, including powder and medicated skin ointments. Rose Afrakoma remembers the encounter as follows:

RA: We would line up under a tree with our children. Those who had sores, they would treat them. They would bathe the children and powder them.
JA: You didn’t consider that to be interfering in your business?
RA: . . . No, it was good because some of the children had these sores called ‘doee’ [yaws].
JA: . . . I would find it rather strange if people from another country came to my house and said they were going to teach me how to bathe my children!
RA: Well, it didn’t bother us. They were teaching us something.
JA: Did the things that they taught you change the way in which you cared for your children?
RA: It didn’t change at all.
JA: Then why was it good?
RA: Because they were helping us. We were getting powder free and all of that!
JA: So, it didn’t change anything?
RA: No, nothing. 59

Adwoa Mansah recalls receiving clothes for her babies, in addition to medicine and powders. 60 But many women seemed to have no underlying agenda for attending the sessions; nor did they perceive any particular cultural significance in these baby baths.

When asked why she thought the missionaries wanted to bathe the children, Ama Dapah simply replied, ‘They were dirty!’ She did not consider the bath to be an intrusion. ‘We were not bothered [by it]’, she recalled, ‘because the children could be dirty, so they just came to help us’. 61 This perception of the session as a culturally uncluttered bit of assistance to busy mothers was not uncommon. After having been asked if the missionaries and students knew anything about bathing children that the mothers did not, Akua Kankroma replied, ‘We were doing it ourselves, but when they came they would ask if they could do it, so we just said yes’. 62 Indeed, some women found the whole spectacle rather amusing – a bit of entertainment to break the routine of daily life. When Adwoa Tana was asked why she thought the bathing sessions were good, she replied with a hearty chuckle, ‘It is good to have a white woman bathing your children . . . . You are just lucky to have whites who are bathing your children for you!’ 63 While Adwoa Tana obviously imputed some cultural significance to the bathing sessions, it was not the significance intended. She was struck not by the instruction she had received in mothercraft, but by the irony of having someone from among the colonizers bathing the babies of the colonized.
And as Adwoa Nsiah recalled, once the maternal colonizers went on their way, they left little in their wake: ‘It was whites who came to bathe the children, so it was good. But, as for my child, I bathed her myself! I bathed my children before they came. I bathed my children after they came!’ Indeed, some women recall only attending out of courtesy. As Afua Manu explained, ‘when someone comes to tell you something, you definitely have to listen to them. You have to honour the invitation, even if you already know what they are saying’. 

The reminiscences of women whose babies were objects in bathing demonstrations point to a fascinating, textured colonial encounter that defies simple categorization. It was neither one of coercion and resistance nor one of imparting and receiving instruction. It was a social occasion, at times even festive, that brought daughters to villages to instruct mothers through the medium of missionary outreach. Though the students came bearing some of the cultural baggage of their teachers, that baggage was not as heavily packed as many might assume. It did not dominate the encounter; it did not structure that encounter in incontestable ways. As Mary Anokye, who was a student at Mmofraturo, recalled of those bathing sessions, ‘We didn’t teach things that would contradict customs. . . . They always received the message happily. But I couldn’t tell if they turned deaf ears to it when we returned back home’. Anokye understood that Asante women participated in mothercraft exercises largely on their own terms. They did not come because they wanted to learn a ‘better’ way. They came because it facilitated access to powder or to baby clothes made from imported cloths or to medicine. They came because it was something to do, an expression of courtesy, a bit of entertainment on a Saturday afternoon.

This is not to suggest that the bathing encounter was wholly without social meaning, but to argue that its meanings were many and contested. For example, recollections of how the boundary between private and public in Asante fared during these bathing sessions provide striking evidence of multiple and embattled definitions. In recent reminiscences, most Asante women, like Rose Afrakoma, recalled bringing their children out of the house and into public space in order to take part in the bathing festivities. In contrast, much of the correspondence of the Methodist Women’s Department describes women missionaries entering the homes of Asante women in order to bathe their babies. These conflicting accounts are not about truth and falsehood; nor are they necessarily about what constitutes the ‘inside’ of a house and what constitutes ‘outside’. They are about the very meaning of the colonial encounter. In the first, the colonized mother leaves her private space and makes the decision to participate in the encounter on her own terms. In the second version, the colonizer, empowered by the state, by Christianity and by domestic science expertise enters on her own terms the private sphere of Asante women. In the first version, the boundary between private and public is not violated; in the second it is. In Tafo, Effiduasi and in a host of other towns throughout
Asante, missionaries, mothers and student-daughters crossed and re-crossed, mapped and remapped this boundary of contested colonial terrain while they engaged in a dialogue of basins, bathwater, powder and bandages. Motherhood was certainly invented through this process, but it was scarcely the ideal Christian motherhood of Persis Beer’s dreams.

Nor was that ideal realized through the Methodist Women’s Fellowship groups which spread throughout Asante in the late 1930s and early 1940s. These groups were spearheaded by the first evangelical women missionaries sent to the area – women who often delivered elaborate sermons on motherhood and Christian values. Heavily laden with the imperialist discourse of proper motherhood, these lectures were far more about Western nuclear-family values and parental responsibility than they were about bath powder or basins. The lectures delivered by Irene Mason in the mid-1930s were not atypical. Mason, according to her notes, always highlighted the importance and responsibilities of motherhood, the need for fathers to take an active role in disciplining their children and the ‘importance of unity in the home’, for training and proper discipline. The only way this unity could be attained, Mason warned her listeners, was through the ‘marriages of two people who love one another and choose one another in the sight of God and who are prepared to build up together a home according to the laws of Christ’.68

Yet Asante women who were active participants in these Fellowship groups in the 1930s and 1940s tend to recall missionaries not for their spiritual guidance but for very specific, mundane reasons. For example, Kathleen White arrived in Asante in 1941 as an evangelical missionary whose programme included the setting up of Fellowship groups. From the beginning, she saw the groups as forums for reconstructing motherhood. In one of her first reports back to London she wrote:

I used this initial visit to talk to the women on cleanliness in their homes and in most of the villages I bathed babies and washed sores... in the villages one is faced with illiteracy and all the things which go with it, such as dirty homes, sickness amongst the children, lack of desire and initiative.69

Several months later White was bringing unmarried young women into her home for weeks at a stretch in order to ‘teach them a few rules of cleanliness, and also to learn to read, sew, cook and such things’. She referred to these women as her ‘family’ and closed one letter with this apology:

Please excuse more news now, but my family is needing attention. I am going to talk to them about the care of their babies and try to show them how to feed them. If only they could realise that if they began to train their babies from birth it would be much easier for their children when
they grew up. Half the trouble in Africa is the absolute lack of physical control. 70

White’s message was a strong one, certainly far more burdened with maternal racism (for lack of a better term) than Persis Beer’s and with far less room for negotiation. Yet White is fondly remembered, but not so much for her message on Christian motherhood. When Victoria Adajye was recently asked what kind of work the women missionaries like White were doing in the early 1940s, she replied, ‘They taught us how to make pancakes, but I knew how already. . . . They taught us how to give a sick person food to eat when s/he has no appetite’.71 Most of the women in Effiduasi, the town in which White eventually based herself, echoed similar memories of food preparation: ‘White taught us how to cook — semolina, biscuit, pancake’.72 Others recall detailed lessons on making soup.73

Though White came on a ‘civilizing’ mission as burdened as any could be with European notions of godliness, cleanliness and discipline, it was a mission with which Asante women interacted largely on their own terms, much as they did with welfare clinics and outreach programmes. Their encounter with Women’s Work missionaries like White was mediated not so much by Bibles and hymns as by the practical, if not the mundane — by pancakes, biscuits and stews. In these ways, through daily choices, by taking some and leaving the rest, Asante women actively shaped their colonial world. By 1948 that world was changing quickly. Persis Beer had returned to England. Kathleen White’s mission had been given a permanent home with the construction of the women’s training centre at Kwadaso – a centre designed to provide instruction to rural women in infant welfare, hygiene, religion, and morality, as well as in reading and simple arithmetic. Yet for White’s and Beer’s successors, the making of colonial mothers remained a difficult battle. As Gwen Ash reported of a 1948 group that attended the centre: ‘They don’t seem as keen on child welfare . . . but are tremendously keen on the reading’.74 Woman’s work, it seems, was never done.

Final Thoughts on Colonizing the Maternal

What then was making mothers all about in colonial Asante? When put into action, did the rhetoric of the Geneva conference of 1931 come down to baby shows and baby baths? Was the gender chaos of the expanding cash economy addressed with pancakes and needlework? In a recent article on domesticity and hegemony, Jean and John Comaroff write that this was precisely what colonialism was all about, that ‘colonization . . . entailed the reconstruction of the ordinary, of things at once material, meaningful, and mundane’.75 Certainly, in Asante, colonization of the maternal did not take place, at least with any success, on the level of mothercraft lectures or through weighing clinics like the one in Kumasi. Rather, it occurred through the medium of ordinary objects and daily routines, through bathing basins and biscuits. And that it took place on that level, that it was mediated by the
Making Mothers

mundane, tells us much about the encounter between Asante women and British colonialism.

Although the Comaroffs further suggest that the ‘seeds of cultural imperialism were most effectively sown along the contours of everyday life’, Asante women’s encounters with British colonialism raise important questions of control and of agency in this imperialist enterprise. They suggest not only that there were few other places to sow those seeds, but that Asante women in large part determined how and where they could be sown. In other words, for maternal colonizers to sow the seeds of cultural imperialism in the ‘contours of daily life’ was to sow in ground over which, in Asante anyway, they had little control and to which they had only sporadic access. To extend the metaphor one step further, they were sowing seeds in ground they did not own, in a climate they could not predict and at intervals they did not determine. What eventually took root and thrived in that ground was something barely recognizable as imperialism’s own.

Certainly motherhood was reconstructed in Asante. The maternal was colonized. But the process was not a linear one, determined by one actor. Asante women were active agents in shaping that process, in negotiating the terms of their own participation in the colonial encounter. More often than not, they chose to participate through the medium of baby contests, basins and pancakes and NOT through the medium of mothercraft lectures or social welfare projects – those non-negotiable and non-negotiating initiatives that demanded the complete reconstruction of the private domain. That the Kumasi welfare clinic, that Persis Beer, that Kathleen White agreed, wittingly or not, to these terms of participation was an acknowledgement of Asante women’s power and autonomy, as well as a silent admission of the shallowness of colonialism’s ‘civilizing’ mission. Government agents, missionaries, medical officers and teachers set out to make mothers in colonial Asante, but in the end they could not make them just as they pleased. They did not, to recall a celebrated observation, make them ‘under circumstances chosen by themselves, but under circumstances directly encountered, given and transmitted from the past’ and on terms largely defined by Asante women themselves.
GUIDE TO REFERENCES AND ABBREVIATIONS

All interviews cited herein were recorded by the author and are currently in her possession. Citations below contain the name of the individual interviewed and the date and place of interview. Example: Mary Anokye, Old Tafo, 19 June 1992.

Further abbreviations include: BRCS: British Red Cross Society; NAGK ARA: National Archives of Ghana (Kumasi), Asante Regional Administration Collection; PRO CO: Public Record Office, Colonial Office; WMMS WA 11/224: Wesleyan Methodist Missionary Society, West Africa Collection, Fiche Box 11, Box 224; WMMS WW 1/1033: Wesleyan Methodist Missionary Society, Women’s Work Collection, Fiche Box 1, Box 1033.

NOTES

1 This article is part of a broader study of gender and social change in Asante which has been supported by the National Endowment for the Humanities, the Fulbright-Hays Faculty Research Programme, the Social Science Research Council, the University of Missouri Research Council and the Institute of African Studies, University of Ghana. I gratefully acknowledge this support and also thank the following for providing access to important archival documentation: the Methodist Church Overseas Division (Methodist Missionary Society); the British Red Cross Society, Archives Section; Rhodes House Library, Oxford; the Library of the School of Oriental and African Studies; the Institute of African Studies, University of Ghana; and the Public Record Office, London. An earlier version of this article was presented at the Ninth Berkshire Conference on the History of Women, June 1993. I wish to thank Anna Davin, David Roediger, Richard Rathbone and Anne Summers for their comments and suggestions for revision.


10 As Jean and John Comaroff have written, ‘colonialism is as much about making the center as it is about making the periphery’. See their ‘Home-Made Hegemony: Modernity,

11 In addition to colonial government documentation available in Ghana and Great Britain, this paper has utilized the archives of the WMMS, particularly its Women’s Work Collection; the archives of the British Red Cross Society; and the Oxford Colonial Records Project, Rhodes House.

12 Ann Stoler’s pioneering work underscores the importance of exploring colonialism as an ‘historically layered . . . encounter’ and warns historians against conflating ‘the makers of metropole policy . . . with its local practitioners’. See her ‘Rethinking Colonial Categories: European Communities and the Boundaries of Rule’, *Comparative Studies in Society and History* 31:2, April, 1989, pp. 134–161.


14 Austin’s earlier work ties the abolition of slavery and pawnage to the initial use of hired labour on cocoa farms, but not to changes in gender relations within the household. His recent work, however, demonstrates quite convincingly that pawnage was not simply abolished, but declined in uneven, ambiguous and very gendered ways that profoundly impacted upon conjugal relationships. See his ‘Cocoa-Farming’, pp. 264–65 and ‘Human Pawning in Asante, 1800–1950: Markets and Coercion, Gender and Cocoa’, in Toyin Falola and Paul Lovejoy (eds), *Pawnship in Africa*, Westview Press, forthcoming.


18 Countless numbers of such cases can be found in the record books stored at Manhyia Record Office in Kumasi. See, particularly, the records of the Kumashene’s Native Tribunal, 1926–1935, the Asantehene’s Divisional Native Court B, 1935–60 and the Kumasi Divisional (‘Clan’) Courts, 1928–45. For a recent examination of native tribunals and issues of marriage and inheritance in the southern Gold Coast Colony, see Roger Gocking, ‘British Justice and the Native Tribunals of the Southern Gold Coast Colony’, *Journal of African History* 34:1, 1993, pp. 93–113.

19 Roberts noted a similar pattern in Sefwi Wiawso. See her ‘The State and Marriage’, pp. 54–55.


22 For example, chiefs and elders refused to consider allowing wives to inherit from their
husbands, even if a woman had worked for years on her husband’s cocoa farm, for fear that Asante women would simply poison their husbands in order to gain their inheritance. See Asante Confederacy Council, *Minutes of the Third Session*, 7–23 March 1938. During this same period, the meaning of adultery was constantly reformulated in an effort to control women’s sexuality. For a record of the changes not only in the meaning, but in the penalties and compensation associated with adultery, see J.N. Matson, *A Digest of the Minutes of the Ashanti Confederacy Council from 1935–1949 Inclusive and a Revised Edition of Warrington’s Notes on Ashanti Custom*, (Cape Coast) Prospect Printing, c. 1951, pp. 26–27, 40–48 and throughout.

23 For a discussion of Asokore’s 1929 round-up of unmarried women, see Allman, ‘“Spinsters”’, pp. 182–83. I have recently located additional documentation on these arrests at the National Archives in Kumasi. The arrests are recalled today in vivid detail by many of the older women in Effiduasi and Asokore. Roberts discusses a similar episode in Sefwi Wiawso in ‘The State and Marriage’, p. 61 and Vellenga makes brief reference to similar incidents in ‘Who is a Wife?’ in Oppong, *Female and Male*, p. 150 and n. 11.

24 Jane Parpart, ‘“Where Is Your Mother?”’; Gender, Urban Marriage and Colonial Discourse on the Zambian Copperbelt, 1924–1945’, unpublished paper delivered at the Ninth Berkshire Conference on the History of Women, Vassar College, June, 1993, p. 19. Parpart’s recent work on the Zambian Copperbelt also highlights the connection between indirect rule and attempts to control ‘uncontrollable’ women. ‘Colonial officials sympathized with African men’, she writes, ‘when they complained about “cheeky, wayward” African women, and indirect rule was partially an attempt to address this concern’ (p. 20).


27 Dabanka also donated the land upon which Wesley College was built. Mary Anokye, Old Tafo, 19 June 1992; Efua Nsua, Tafo, 24 June 1992; and Akua Sent, Old Tafo, 19 June 1992.

28 NAGK ARA/1741: P.S. Selwyn-Clarke, ‘Kumasi Health Week, 1925’.

29 The Centre was originally based on an agreement between the government and the Methodist mission. The mission agreed to provide the doctor and nurses in charge, while the government covered all other expenses. PRO CO 96/674/4: J.C. Maxwell, Office Administering the Government to L.S. Amery, Colonial Office, dd. [dated] Accra 4 May 1927; Harry Webster, WMMS to Colonial Secretary, dd. Accra, 9 February 1927; E.O. Thompson, WMMS to Secretary of State for the Colonies, dd. London, 12 July 1927. To this day, the Centre continues to rely heavily on non-governmental support to carry out its day-to-day operations (Dr Irene Des Bordes, Principal Medical Officer in Charge of the Maternal and Child Health Clinic, Kumasi, 18 June 1992).


31 PRO CO 98/53: Gold Coast, *Report on Ashanti for the Year 1928–1929*. The figure for visits records the number of attendances, not the number of women who attended.


34 Mary Antwi, Ashtown, Kumasi, 8 June 1992; Adwoa Brago, Ashtown, Kumasi, 2 June 1992; Adwoa Poku, Ashtown, Kumasi 3 June 1992 and Efua Samata, Ashtown, Kumasi 3 June 1992. Based upon his research during the 1945–46 ‘Ashanti Social Survey’, Fortes wrote that ‘only about a third of all married women reside with their husbands’. See Fortes, ‘Kinship’, p. 262.

35 PRO CO 98/82: Gold Coast, *Report on the Medical Department for the Year 1947*.


37 PRO CO 96/700/12: ‘Report on the Midwives Ordinance, 1931’. For example, in 1937 there were 12,489 antenatal visits made to the Centre, but only 405 babies were delivered by certified midwife – that is, by one of the two! See PRO CO 98/71: Gold Coast, *Report on the Medical Department for the Year 1937*.


39 As note 38.
41 PRO CO 96/673/8: Harry Webster to F. Gordon Guggisberg, dd. Accra, 15 February 1927.
47 Persis Beer, ‘BEGINNINGS’, Woman’s Work, October, 1933, p. 82.
48 As note 47.
64 Adwoa Nsiah, Tafo, 29 June 1992.
73 Kate Baa, Effiduasi, 21 August 1992.
76 As note 75.