# CONSEQUENCES OF A GLOBAL ADULT EDUCATION STRATEGY: The case of rural African migrant women in Spain<sup>1</sup>

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The title that was initially proposed to the organisation of the Seminar "Educational strategies, families and population dynamics" was: "Learning about motherhood and reproductive health as a global adult educational strategy". Later, during a visit by Dr. María Eugenia Cosío-Zavala to the Center of Demographic Studies in Barcelona, we had the chance to comment on the focus for this paper's content. We agreed that it would be interesting to talk about the global consequences of adult education upon the migrant Senegambian population in general and upon their process of social integration, although stressing the insistence of the African women themselves, on their concern regarding the new reproductive patterns in the society of their destination, and the change these imply for establishing new gender relationships while providing an opportunity for access to the literacy process.

Celestin Freinet (1979) said: "Education is not a school formula but a life project." Gaining literacy cannot be separate from the school of life in which people have been engaged. Were it otherwise, it would become an absurd duality. For liberation pedagogue Paulo Freire<sup>2</sup>, the literacy process must reflect upon whom it is aimed at and what his/her specific reality is, its objective being to go beyond the reading of words and pronunciation of syllables to focus on reading reality and pronouncing the world. For this reason, the theoretical framework, the methodological approach and the content of the present paper could not be developed other than from an interdisciplinary perspective, that is, demographic as well as pedagogical, with an anthropological linkage. The text aims at an approach to the relational knowledge established between these various contributions with regards to the construction the people make of their own reality, in relation to education as an adaptive strategy for their social integration, and its consequences on the families and their dynamics.

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<sup>&</sup>lt;sup>2</sup> Paulo Freire was born in Recife, Brazil in 1921. With a degree in Law he was the co-founder of the Popular Culture Movements. His educational method was first proposed in 1961 and was forbidden by the coup d'etat in 1964, after which he was persecuted and imprisoned, accused of "international subversion" and of being a "Traitor of Christ and the Brazilian people". He was finally force into exile. Freire worked at the head of international organisations such as the UNESCO and directed literacy campaigns in South America and Africa, bringing together various contributions from social and cultural anthropology. His book "Pedagogy of the Oppressed", which has continued to cause controversy and to awaken sleeping consciences, has opened areas of struggle for men and women to be transformed and become subjects through a process of getting to know their own reality. His first contact with the African world he describes as "a loving encounter with a continent rich in experiences, with an extraordinary history, consciously ignored by the Western world, with peoples who fight oppression, at times in silence and unnoticed to the eyes of the stranger, but not for this less difficult and brave." Africa accentuated Freire's historical and cultural sensitivity, this being the main influence upon his praxis when he returned to Brazil in 1980.

The methodological process followed throughout the global research which started in 1988 and remains open to new questions and new actors, is set within what Maria Mies and Vandana Shiva (1997:38) define as a partial identification of the research object from a conscious partiality. They state "that the vertical relationship between researchers and 'research object', *the view from above*, must be replaced by *the view from below*. This is the necessary consequence of the demands of conscious partiality and reciprocity...This has both a scientific and an ethical-political dimension".

## A brief history of migrations in Spain: from a country of emigration to a country of immigration

Traditionally, Spain has had both an emigration trend, mostly to America and northern European countries, and traditional, intensive internal migration, primarily from southern to northern provinces. This pattern changed from the middle '70s, when the migration balance turned from deficits to surpluses. That is, from out-migration to immigration. The Spanish migratory pattern must be considered as part of the post-war international migration which took place on a massive scale from the '50s to the '70s in Western Europe. Spanish "guestworkers" succeeded Italians as the main suppliers of the labour force: between 1965 and 1975 a total of 872.974 Spaniards emigrated, 92% chiefly to Germany and France. By the middle '70s, this pattern of emigration ceased and almost half of them returned to Spain. The causes were diverse, though namely economic (recession, end of contracts, etc.) social (integration difficulties in host countries, social hostility, etc.) and life-cycle causes (parental, marriages and family ties, etc.).

Parallel to Spaniards returning home, foreign immigration to Spain began a steady increase, mainly from European countries, South America (the majority proceeded from the dictatorships in Argentina, Chile and Uruguay), USA and Japan, but also of unqualified workers from Morocco and sub-Saharan Africa. This implies a significant qualitative change that can be attributed basically to three processes: a) the tightening of visa restrictions, which produced a decrease in immigration to northern Europe; b) Spain's economic boom in the late '70s and early '80s (after the Franco regime), which created a new demand for cheap labour force, traditionally provided by internal immigrants; c) various economic, political and demographic push factors throughout the countries of origin.

Despite the fact that in absolute numbers Spain is still a country of emigration rather than a country of immigration, the tendency is towards a receiving country of oversea populations, significantly from LDC areas. The plurality and heterogeneity of the groups composing the current social structure provide for differentiated relationship between groups and between the native population itself, which are often defined in terms of inequality, discrimination, and hierarchies.

#### **African immigration to Spain**

As with other countries, LDC immigration to Spain is greatly conditioned by traditional, colonial links. The Moroccans -the largest African community by far- come mainly from the provinces which became a Spanish protectorate after 1912. This population began its migration to Spain in the decade of the '70s and is still one of the most significant influxes, given its geographic proximity: only 14 kilometres separate the European and African shores across the Strait of

Gibraltar. Throughout three decades of migratory crossing, new types of immigrants have continued to come to Spain, new insofar as their routes, their migratory patterns (clandestinity, human trafficking), as well as the composition and structures of their members (greater numbers of young, single women and men from urban areas with a considerable academic level).

In fewer numbers, the Equatorial-Guineans have done the same. Equatorial Guinea was a Spanish province before their independence. The characteristics of this migratory flow -young, both sexes, strongly identified with Spanish cultural patterns (mainly language, religion, and education)- have allowed for "agile" social integration processes, access to higher education for many of its members, and a diversified social and employment insertion.

Since the early 80's, however, West Africa has become an increasing area of origin within the new migratory groups, mainly from The Gambia and Senegal. At present, it is the major sub-Saharan group living in Spain, with no historical, commercial or cultural (religious, linguistic, etc.) links between both countries. The communities keep a high degree of internal (kinship) solidarity, forming homogeneous groups by ethnicity: mandinka, sarahole, fula, wolof, djola and serer.

In broad terms, the socio-demographic characteristics of this population are: young people (in the 1991 Census, 56,4% were between 20-39 years old), mainly men (152 men per 100 women), Muslims, illiterate, from a rural place of birth, and with the objective of improving their living standards. African immigrants are basically economic migrants, who settle into contexts of economic crisis and wide-sweeping social cutbacks, taking the more precarious jobs in agriculture, construction, services and manufacturing while supporting a large diversified underground economy.

The unbalanced sex ratio favourable to men is important due to the fact that there is a tradition of single male migration and employment, which is asymmetric in terms of gender. Women remain in their domestic place of origin, carrying out the fundamental tasks and generating the means of subsistence for the group's survival, as prime food producers, biological and cultural reproducers, caretakers, and administrators of the domestic economy. Once the men reach a certain stability as regards employment, legal and residential status, they begin the process of family regrouping. In this way, women are induced to initiate their migratory process, with the will to reunite with their husbands and begin or continue to build the family.

#### The Processes of Social Integration/Social Exclusion

The definition of both concepts is of the highest importance within the theoretical framework, since both have to do with a dichotomy of positions which defines conditions of inequality in contexts which are themselves unequal. The concept of social integration places the subject within a status of substantial well-being encompassing access to social and economic resources, such as participation in political life, the development of a pluralistic cultural and education policy, as well as in job, health care, legal, and housing integration. The position of the various social groups along the virtual axis connecting both poles, are characterised by the degree of enjoyment of these resources, a position which is not always stable nor equitable in all places, at times not even in a

few. This produces a broad range of possibilities, which places the subjects nearer or farther from the extremes of well-being (integration) o social deprivation (exclusion).

Women migrants, besides being generally "invisible" subjects until recently in the theoretical and political discussion regarding this kind of migration, although not as regards their reproductive potential which is viewed as "social burdens", participate doubly in these inequalities. If we include the analysis of social relationships between men and women and the distribution of different roles between them, we see how the social structure becomes a gendered system where specific manifestations of inequality and discrimination, that is, exclusion, are contextualized and displayed.

Forms of social integration/exclusion in the host society, and gender systems already existing in the societies of origin, are combined through the migratory processes, paving the way for a social construction of this difference in terms of subordination. It is into this "cocktail" and the various spheres of domination, including the reproductive, that African women settle. Given their financial and legal dependency on their husbands, their illiteracy and their linguistic limitations as well as their lack of contact with the host society, and thus, the situation of exclusion from which they start, this female population is denied the full development of their capacities, their autonomy, their independence, and basically, their most essential rights, while relations of power and domination are legitimised for reasons of ethnicity as well as social class and gender.

Nevertheless, the tradition of having practised leading roles in African society and being the principal motors of change and dynamisation of ancestral structures as tireless creators of strategies, paves the way for these women to become new and active participants within their own communities, as well as within society as a whole. If indeed, they find themselves in the less powerful and more unfavourable role in their relationships, they do not assume the role of victims under such circumstances, but to the contrary, they develop forms of interaction which allow them to improve or transform them. On the other hand, they contribute to the promotion of new patterns of solidarity, and are agents of cooperation beyond the frontiers of their own group.

Therefore, another level of analysis in the study of African women in migratory processes arises, focusing on their role as integrators in the host society, by way of the expression of priority centres of interest. This integration entails not only the learning of new values and patterns, but also implies becoming part of a whole range of strategies which makes them protagonists of change.

The role that migrant African women play in this sense is torn between:

- a) The resistance of the religious and cultural values of the society of origin, upholding the traditions within their homes as custodians of the customs and stable bonds with the community of origin.
- b) Women immigrants as transgressors of values in relationship to their culture of origin, when new practises and new roles come into play to ride out the storm of old dilemmas.
- c) Women immigrants as producers of new adaptive strategies that revolve primarily around their reproductive health, gaining literacy and their insertion in the social and labour markets.

As we focus on women as transmitters of culture within the family, as perpetuators of traditional values and as principal agents of change, we may also gain insight into the greater disposition of these women to identity transformations in their perception of maternity.

### Reproductive health: roles, contexts, and relationships confront long-standing interests

Tengio Urrio (1991) mentions that African society has traditionally always been concerned about the survival of the last born, and this is why it has shown itself contrary to pregnancies produced during the breastfeeding period. It is for this reason that some kind of fertility regulation has been practised, such as post-partum sexual abstinence (based on the belief that semen contaminates the matters milk, and the resulting establishment of the so-called breastfeeding taboo), the use of the *alkunut*<sup>3</sup> or the *dabarkuto* or pieces of cloth which the women tie around their waists to prevent pregnancy, or the fact that women who are "tired and with a deep womb" bury the placenta face down in order to not become pregnant again.

However, a study carried out by Bledsoe and Hill (1993) in The Gambia, reveals that the use of "modern" contraceptive methods is still very rare among the rural population. Only 9.3% of the women said that they used some sort of "new technologies" such as injectable Deprovera, oral anovulatories, or condoms. The reasons given were basically the desire to resume sexual relations with their husbands while breast-feeding, which enabled them to uphold the socially established child-spacing intervals.

In this sense, it is essential to mention the changes taking place with regard to the mixture of modern technologies and traditional methods among those who adopt contraceptive measures in Africa (Kaplan, 1998). In demographic terms, the signs of transition denoted by these behaviours are not very promising for family planning programs, in spite of clear and evident efforts to control reproduction. Either way, Bledsoe and Hill (1994) question the deterministic idea of natural fertility in sub-Saharan Africa because it leaves very little room for flexibility between the intentions of the fertility role and personal options.

Generally, in Africa, and particularly in West Africa, the birth of the first child opens the door to the world of motherhood for married adult women through a rite of passage with the intervention and legitimization of, in the first instance, the elder women of the society. In the first phase of this ritual, women usually deliver under the attention, support and care of the traditional birth attendant, in a specific place prepared for such an event. During the second phase of the ritual, after delivery, the mother and the new-born remain separate from the rest of the community for seven days, with special care and also specific food taboos. If the baby survives this period of time, a third phase of aggregation occurs, during which he or she is given a name and is accepted by all the members of the society as a new member. Given the fact that the infant mortality rate in these African countries is high<sup>4</sup> -in The Gambia it stands at 126/1000 and in Senegal at 60/1000, mainly

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<sup>&</sup>lt;sup>3</sup> Terminology used in this text is mandinka, the language majoritarily spoken in the Republic of The Gambia and in certain regions, also in Senegal

<sup>&</sup>lt;sup>4</sup> According to data published by United Nations in "Africa Recovery", vol. 10, n°2, October 1996.

due to neonatal tetanus and low birth weight-, there is a cultural response and social support in the face of such a painful event as the loss of a child: a person is not considered a person until the seventh day, when the naming ceremony is held. It is from then on that the facts about motherhood and the regulations affecting their new status are transmitted to the mother. This is called the "the knowledge or wisdom of women".

During the forty days after delivery, women are forbidden to approach their husbands. This period enables women to "recover and cleanse the bad blood", while they are daily bathed, given enemas and purging immersions by the traditional birth attendant or other elder women of the community. Following this period, the advice of the *sunna*, the tradition, is that sexual abstinence should continue while the mother is breastfeeding. Women understand this post-partum amenorrea period as a "divine rest", enabling them to adequately nourish their baby while physically recovering until their next pregnancy. This has been interpreted and used in health campaigns as a natural contraceptive method taken from the Koran, in order to prove that Islam is not against family planning but rather specifically, recommends this kind of fertility regulation and allows for convenient time space between pregnancies.

In many societies of sub-Saharan Africa, muslim or not, the period socially stipulated for breastfeeding is usually about two years, and during this time there are cultural restrictions established by means of a puerperal sexual taboo which forbids breastfeeding women to resume coital relations in order to preserve both the child's and her own well-being. In the area of Senegambia, this taboo reinforces the *sunna* 's advice.

There are even specific terms used to identify the women (in mandinka, *nef*) and the children who are conceived while the mother is breastfeeding her last born (*buru*). These names are not only mocking; they have punitive connotations and mean that the mother has not known how to care for her child, has been negligent and has not been able to stay away from the man; that is, she has transgressed the breastfeeding taboo. In the words of the elder mandinka men, it is said that "a woman must not give birth like mango trees (*duutuyiroo*); rather, her pregnancies must be like those of elephants (*sama wuluwoo*), separated by long and generous spaces of time".

In rural areas, when mandinka, fula and serahole women give birth, they are sometimes moved for this taboo period to her parent's domestic unit or are kept in the *musu-bum-bah*, the big house of women, under the mother-in-law's supervision, and are exempt from spending nights at the husband's house. When there is a situation of poliginy, the turn for conjugal overnight stays, which are every two days, is taken up by the other co-wives. This is also a chance for continuity in the transmission of knowledge regarding mother and child care by the elder women.

In rural areas, this born is rarely transgressed, due to tight social control exerted by the elders of the community and because social discipline concerning religious beliefs and practices is generally followed quite strictly. However, the ethnographic work carried out in The Gambia clearly indicates that this normative system is not rigid, even though attempts are made to uphold it strictly. There is even a ritual for repairing moral transgression such as the *bamburang-janoo* (burning of the cloth that covers the baby and is tied to the mother's back) among the mandinkas (Kaplan, 1995). And the fundamental variable found, which comes into play and defines this break with the norm, is the situation of poliginy. That is, from all the interviews held and from the focus

discussion groups created, it came clear that when there are no other co-wives, the sole woman tends to reduce the sexual abstinence period in order to resume coital relations with the husband. She sometimes goes to the *marabout* to ask for the *alkunut*, other times it is the husband himself who provides her with the *dabarkuto*, very few ask for hormonal contraceptive methods, usually behind their husband's back and that of the other women in the domestic unit; other times she simply gets pregnant again before weaning.

#### Education, new reproductive strategies and motherhood

It is from the attitudes, ideas and social practices concerning sexuality and reproduction in the lives of these migrant Senegambian women, and as a support to the centrality of this universe, that bridges are tended toward access to adult education.

In order to analyse the issues relative to the populations schooling, we must first distinguish three very distinct levels of education the Koranic school, the "modern" school, and adult education. The specificity of each one of these is given according to the place where it is carried out (origin and destination), the objectives proposed, teacher typology, the methodology employed, the use of the language and knowledge that each affords in the different fields of application of this learning.

Formal schooling starts at the age of seven, it is public and non-compulsory. In rural areas it is spreading as a substitute for the *madrassas*, the traditional Koranic schools, which had held strong as a stalwart for learning the Koran, Arabic reading and writing and for the preservation of Islamic norms. The teacher is usually the village Imam himself or an elder man with a deep knowledge of the Koran who is known as the *karamo*. Girls must interrupt attendance as soon as they have their first menstrual period (considered a contaminating element by the Holy Quran), while primary schools offer an equalitarian education allowing girls access with no age limitations. In this sense, Mary Douglas (1991) states that "it is not hard to see how contamination beliefs may be used in a dialogue of reivindications and counter-reivindications of a social category. As we explore contamination beliefs, we discover that the sort of contacts considered dangerous also carry a symbolic weight. Some contaminations are employed as analogies to express a general view of the social order, and the ideas concerning sexual dangers are best understood when interpreted as symbols of the relationship between the parts in society, as configurations reflecting a hierarchy or asymmetry applied in a broader social system."

In modern schools, in spite of cost-free education, child must purchase their uniform, books, bench and desk. A study carried out by UNICEF in 1991 revealed that 44% of the desks and 40% of the chairs in all schools surveyed were contributions made by the pupils themselves. This makes for high rates of absenteeism and school-leaving, especially for a population discriminated for gender reasons: girls. In The Gambia<sup>5</sup>, 59% of the boys and 49% of the girls attend primary school, while in the adult segment, almost 25% of the population has had access, in differing degrees and continuity, to formal schooling. In Senegal<sup>6</sup>, figures are even lower, adult literacy

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<sup>&</sup>lt;sup>5</sup> According to data published in "The state of the gambian children and women", Ministry of Education, November 1995

<sup>&</sup>lt;sup>6</sup>.According to data published by United Nations in Africa Recovery, vol. 10, n°2, October 1996.

standing at 19%, of which 29% corresponds to the female population, and boys and girls attending school amounts to 59%.

In rural areas, the percentage of women with access to formal education is even lower, since priority is given to boys because of the family economy's inability to cover the costs of this kind of education. It must be noted that a good share of the remittances sent by migrants living abroad are set aside for schooling both boys' and girls' in the domestic unit they belong to.

However, one most not forget there is harsh distrust towards the kind of education and values transmitted in these schools. Learning by rote and repetitive techniques are part of the education system, as well as punishments for disobedience and transgression of norms. Moreover, the importance of data facilitated by the Survey School Facilities, funded by UNICEF and carried out by The gambian Ministry of Education, must be emphasized: 54% of primary school teachers, excepting those from NGO Action Aid, do not have appropriate training for teaching. More than 85% of secondary school teachers have the right titles, although the report reveals that the majority are foreigners, mainly Nigerians and refugees from Sierra Leone and Liberia.

We thus see that the Senegambian migrant population arriving in Spain has a low level of formal schooling, illiteracy in the case of women is as high as 83% compared to 72% for men, and a global 87% have had a Koranic education (Kaplan, 1998). Institutional adult education is offered according to the migrants' residential enclaves, and attendance is prevailingly male. Women's attendance is very low, and is, in any case, irregular and not very stimulating. It is rather a meeting-place with other women of their community, with no greater expectations for learning, be it language or reading and writing.

But, what is education? Is literacy the answer to the lack of education? But, of what education? And, therefore, what will be the meaning of literacy?

Now, for this female population adult education doesn't make much sense if it doesn't answer to priority centres of interest, such as mother and child health and family planning. And this is the great difference between the two migratory flows arriving in Spain in the '80s and '90s. The majority of the first women were initiated in Africa in the knowledge on motherhood, whilst women arriving later are younger and primipars at destination, who lack not only a previous experience but also the traditional networks for female enculturation and learning embodied by the elder women. We know that the practice of solidarity among members of this population is strong and active, but even so, they request information and spaces for reflection on central aspects of reproductive culture, which necessarily reflect changes, continuities and readaptations in a complex displacement situation such as migration.

This is to say that requests for "literacy" are expressed by the female population concerning sociosanitary issues that establish what kind of interactions there are between breastfeeding, the postpartum amenorrea period, the puerperal sexual abstinence taboo, sexual relations, contraception and family planning, in a setting, that of the host society, where space organisation and distribution of marital relations are different, where the majority live together in monogamy, where the decrease of infant mortality is fortunately drastic, where the financial cost of supporting children is high, where large families are no longer functional, and where feeding guidelines in paediatrics are strict.

If, on the other hand, in the doctor-patient relationship we take into account the difficulties in verbal and non-verbal communication, and we add the lack of cultural knowledge and the slanted approach of health programs for attending this population, together with the different attitudes of health personnel, who ethnocentrically facilitate, obstruct or mediatize medical instructions and prescriptions, we may easily understand the interest of these African women that contents covered in adult education focus on peremptory and relevant aspects of their social integration.

It is within this reality and stemming from this need that the first socio-sanitary workshops are set up and pave the way towards a broader literacy process. Paulo Freire stated that education requires educational contents, programs and methods to be adapted to the end pursued, that its objective be consciousness of reality since reality cannot be modified unless the person discovers that it is modifiable and that she herself can do it. Education thus understood, is a process of taking possession of reality which enables one to reach that which has not been experienced before, by means of a spiral movement of coding, decoding and re-coding carried out by the people involved. Let us not forget that human beings are creators of culture, as long as, within a given context, we may reflect upon it and find answers to the challenges facing us.

Here it is worth turning back to Mies and Shiva's methodological proposal stated in the first pages of this paper, given that the characteristic and intrinsic value of this approach lies in the reciprocity of the learning process. It is a chance not only for the migrant women themselves, but also for the people involved in a global process linking education and social integration in the areas of health in general, and reproductive health in particular. Both health personnel and adult education teachers have had to create new dynamics, methodologies and techniques stemming from new realities and new common interests.

The consequences resulting from this schooling process concerning models of motherhood, fertility and contraception, may be resumed as follows:

- a) Networks for the transmission of specific traditional knowledge are lacking, while the appearance of other models supporting clear acculturation have been observed in two senses: 1.-the role of new/different source of knowledge and personal support which is attributed to health personnel in the development of the relationship established in the socio-sanitary workshops held in the school of adult education; 2.- in the contents of specific practices related to sexuality, reproduction an motherhood.
- b) In marital relationships, which reach other levels of communications and in other spheres, which are shared in terms of participation and co-responsibility, and which carry deep changes in gender relations.
- c) A great transformation is observed, at the level of both reproductive practices an attitudes at destination, compared to those at origin, in the sense that most women visit family planning centres. The amount of children does not grow proportional with time of residence in Spain nor with the mothers age (as would have probably occurred in Africa).

- d) These changes, resulting from the schooling received, reveals progressive functional adaptation to the new situation at destination: 1.- the development in women of their will to control their own reproduction, by means of a greater capacity for decision and action within the social setting of their destination; 2.- the will to control procreation is firm enough that it enables the apparently easy incorporation of contraceptive technologies in the culture of destination, more in the sense of their requests than in their correct application and follow-up.
- e) In spite of the personal and cultural ambiguities and conflicts which may arise in different settings, adult education enables social and cultural representations to be more easily questioned and transgressed. These are part of a broader and longer term process of experimenting and learning in their social integration.
- f) Educational, socio-sanitary, financial and relational factors determine new attitudes at destination, enable and accelerate acculturation induced by migrant women upon return or during temporary visits to their domestic units, and incipient changes being produced at origin.

This schooling process shows how it is possible to refute the widespread idea of reproductive practices being constrained by normative systems affecting them (social, kinship, religious, etc.). Access to adult education allows both the men and the women of the African migrant communities to be flexible in their approach to norms that modify personal attitudes toward events such as fertility, contraception, parenthood and gender relations.

So finally, the objective, as proposed by liberation pedagogy, is to achieve the freedom to be and to be able to choose, without needing others to decide for you. The basis of intervention in adult education is to create options from which to choose, in order that the Senegambian migrant population may again become producers of their own process. The dependent society is, by definition, a silent society whose voice is a simple echo of the governing society in power. Breaking with dependency implies conquering the right to words.

To understand the world, to read reality, as Freire said, is a right which is denied to many men and women, be it because of their illiteracy or because, though literate, they are not able to participate given their marginalisation and their status as foreigners. Education goes far beyond learning to read and to write; education makes human beings creators of their own history. Pronouncing the world and assuming a creative, thinking and responsible role towards their reality and their history.

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