


# Cultural religion and infertility in South Africa with particular focus on amaXhosa



**Author:**  
Mlamli Diko<sup>1</sup> 

**Affiliation:**  
<sup>1</sup>Department of African Languages, School of Arts, College of Human Sciences, University of South Africa, Pretoria, South Africa

**Corresponding author:**  
Mlamli Diko,  
dikom@unisa.ac.za

**Dates:**  
Received: 24 June 2023  
Accepted: 05 Dec. 2023  
Published: 29 Feb. 2024

**How to cite this article:**  
Diko, M., 2024, 'Cultural religion and infertility in South Africa with particular focus on amaXhosa', *Theologia Viatorum* 48(1), a208. <https://doi.org/10.4102/tv.v48i1.208>

**Copyright:**  
© 2024. The Author.  
Licensee: AOSIS. This work is licensed under the Creative Commons Attribution License.

**Read online:**



Scan this QR code with your smart phone or mobile device to read online.

The challenge of women's infertility in the South African context, particularly in rural communities, continues to be a plague because of cultural and religious systems that are interwoven in these communities. The amaXhosa ethnic group is no exception to this challenge given that it is profoundly rooted in its ethnological and religious belief systems. Nevertheless, the fair popularity of this conundrum does not denote that it is not a problem that compromises people's welfare with major adversarial effects on women. Therefore, this article aims to conduct a scoping literature review to reflect on and explore the cultural and religious implications as well as intricacies of infertility among the amaXhosa ethnic group. The principal findings and discussions indicate that amaXhosa, specifically those that are deemed a couple, are compelled to bear children because of cultural and religious expectations that are further linked to societal expectations. On account of this, the principal arguments herein indicate the necessity to contest and examine how African religious systems, in the context of amaXhosa, configure the overall existence of many individuals, with special reference to issues of infertility.

**Contribution:** The scholarly significance of this article lies in the stimulation of ethnological and religious dialogues that pursue to serve as agents of social transformation in the South African context. In addition to this, the emphasis is on the existing gap that points out that some of the injustices that exist in today's society are profoundly rooted in African culture and its religious facets.

**Keywords:** culture; religion; infertility; amaXhosa; scoping literature review.

## Introduction

Cultural religion and infertility are two interwoven components that have significant implications for individuals and communities in South Africa and elsewhere in the global village (Sewpaul 1999). As a diverse nation with an affluent tapestry of cultural traditions and belief systems, South Africa's religious mores play a significant role in shaping people's perceptions and experiences of infertility (Woods et al. 2022). Infertility, a condition characterised by the inability to conceive or carry a pregnancy to term, can profoundly impact individuals' welfare, relationships and societal subtleties. In view of this reality, infertility may be problematic and challenging as it can lead to emotional distress, strained relationships and a sense of loss and unfulfilled desires for individuals and couples who aspire to have children but are unable to conceive (Bornstein et al. 2020). In fact, this may be worsened by societies that are male orientated or established in patriarchal systems. In addition to this, infertility can potentially perpetuate societal stigmas, intolerance and gender disparities, placing burdens and blame on those experiencing infertility and affecting their sense of dignity and social inclusion. In this context, the cultural and religious belief systems prevalent in South Africa not only influence the understanding and interpretation of infertility but also shape the available coping mechanisms, support systems and treatment options (Logan et al. 2019).

South Africa is home to a multitude of cultural and religious communities, including indigenous African traditions, Christianity, Islam, Hinduism and various other belief systems (Petersen 2016). These variegated cultural and religious backgrounds tend to shape individuals' attitudes towards fertility, reproduction and the perceived importance of having children within their respective communities. Cultural practices, such as ancestral worship, initiation rites and traditional healing ceremonies, continually intersect with religious belief systems and influence how infertility is perceived and addressed within indigenous South African communities (Cilliers 2007). Within many South African cultural and religious contexts, fertility and procreation hold extraordinary significance and are regarded as fundamental components of personal identity, family continuity, social cohesion and consciousness (Church et al. 2023). With this in

mind, infertility may be regarded as a source of profound agony, often associated with feelings of humiliation, guilt and a sense of failure (Cilliers 2007). Because of this, the pressure to conceive and fulfil societal expectations can exert significant emotional and psychological strain on individuals and couples struggling with infertility.

The reason for this, among others, can be pinned on cultural and religious perceptions towards infertility in South Africa given that they perpetuate stigmatisation and discrimination (Taebi et al. 2021). For instance, traditional gender roles, such as motherhood, expectations and societal conventions, may place aspersions and burdens solely on women for infertility challenges (Xie et al. 2023), leading to ostracism and strained relationships. Women may face stigma and exclusion because of the cultural perception that their reproductive capabilities define their worth and fulfil societal expectations. Certainly, it stands to reason to view this skewed presupposition as problematic on account that it advances gender-based discrimination and obstructs opportunities for women, particularly in contexts where fertility is regarded as eminent. As a matter of fact, it undermines women's individuality and equality and might lead to prejudiced treatment and unbalanced representation in various aspects of life. Over and above this, cultural and religious belief systems that place emphasis on the importance of biological children may subjugate individuals who cannot conceive, potentially affecting their sense of belonging and self-worth (Xie et al. 2023).

The discussion of cultural, religious and societal perspectives on infertility in South Africa is a complex and multifaceted one with different scholars debating its interlaced fabric. For instance, Frank (1983) asserts that traditional belief systems, often homogenised with cultural and spiritual practices, influence how infertility is understood and managed in various South African societies, including those of amaXhosa. Adding to this view, Larsen (2003) underscores that some cultures ascribe spiritual or supernatural causes to infertility, while others prioritise fertility as a symbol of cultural continuity. By the same token, Abebe, Afework and Abaynew (2020) contend that cultural religion plays a significant role, with some religious groups offering support and understanding for individuals facing infertility, while others may stigmatise or isolate those who cannot conceive. It is clear, therefore, that the issue of cultural religion and infertility, particularly in the context of amaXhosa, is engulfed with different understandings that vary in tone.

Given this challenge, Esan et al. (2022) bring to the fore that the healthcare system in South Africa offers various infertility treatments and support services, including in-vitro fertilisation (IVF), but access to these services is limited and costly, creating disparities in care. Having said that, it is important to note that Esan et al. (2022) do not make reference and provision to the cultural nuances that pertain to infertility among amaXhosa. This is enough to indicate that there are shortcomings and limitations in the context of infertility including disparities in access to infertility treatments,

particularly for subjugated and low-income communities (Diko 2023). Beyond this, this is indicative of the necessity to challenge these imbalances in a bid to address the conundrums that are associated with cultural religion and infertility, with special reference to the culture of amaXhosa. Having said that, one would recall that cultural and religious beliefs can sometimes hinder individuals from pursuing medical assistance, leading to delayed diagnosis and treatment while succumbing to the pressures of society that expect them to bear children (Madziyire et al. 2021). With these shortcomings and limitations, it is clear that there is a necessity for improved awareness and education on infertility and fertility preservation options. In reality, dismantling stigmas and providing ethnologically sensitive care are essential dimensions for addressing these challenges. Over and above this, addressing the complex interplay between ethnological, religious and medical perspectives is central to providing holistic and patient-centred care for those experiencing infertility. This requires multi-collaboration between healthcare providers, indigenous communities and religious leaders to guarantee that individuals facing infertility are not only supported medically but also culturally and spiritually and hence, the significance of this article.

In light of these complex undercurrents and intricacies, it is crucial to explore the intersection between cultural religion and infertility in South Africa. The intersection between cultural religion and infertility is critical to examine because of the nuanced attributes at play. This is on account that cultural belief systems and religious practices may significantly impact individuals' experiences and decisions regarding fertility, healthcare and family planning, necessitating a heightened comprehension of more culturally sensitive and effective support and healthcare services. For this reason, the principal aim of this scholarly discourse is to reflect on and explore how cultural religion configures perceptions concerning infertility among the amaXhosa ethnic group. The objective is to attain a significant understanding of the cultural context in which individuals and communities experience infertility, enabling the development of more inclusive strategies that address the unique challenges, belief systems and coping mechanisms influenced by cultural and religious factors. Ultimately, it is to foster compassion, promote awareness and provide reasonable scholarly support to individuals navigating the complex web of infertility within diverse cultural and religious frameworks in order to promote holistic well-being. In any event, it is imperative to understand that this article follows a specific research methodology, hence the next section.

## Research methods and design

This article uses a scoping literature review as a research technique to advance its aims and objectives, as outlined in the introductory section. A scoping literature review is a comprehensive approach to scrutinising existing literature on a specific phenomenon or research question (Davis, Drey & Gould 2009). This research technique aims to map out key concepts, sources and gaps in the body of knowledge, providing an overview of the breadth and depth of knowledge on the

subject of interest (Wilson et al. 2020). In the context of cultural religion and infertility in South Africa, a scoping literature review involves systemically searching and scrutinising pertinent scholarly articles, books and book chapters, reports and other sources to identify the existing research, theories and findings related to the intersection of cultural religion and infertility in the South African milieu. Central to this process, the significance of opting for a scoping literature review, as a research technique, lies in its capacity to enable the researcher herein to chart the expanse and extent of pre-existing literature within the phenomenon of interest, underscoring areas that require further exploration. Typically, this research technique furnishes an all-encompassing survey that guides the research endeavour, facilitating the formulation of more precise and knowledgeable research inquiries and approaches.

A scoping literature review hereunder began by defining the scope and objectives of the review – the phenomenon of interest – such as identifying the cultural and religious traditions examined, the specific dimensions of infertility considered and the geographical and temporal parameters. The researcher then conducted a comprehensive search using appropriate databases such as libraries, digital scholarly engines, keywords and inclusion and exclusion criteria to gather relevant literature. The identified articles, books and book chapters, dissertations and theses were then screened, and data extraction was carried out to extract key information such as pertinent views, main findings and emerging themes. The following keywords were entered into the library search engines and databases: infertility, culture, religion, South Africa and stigma and amaXhosa culture.

In effect, different scholars define what a scoping literature review is. For instance, Munn et al. (2018) suggest that a scoping literature review is a systemic and methodical examination of existing literature, primarily concentrated on providing a comprehensive overview of a specific research area. This process does not follow a specific theory or theoretical framework as it relies on existing discourses (Munn et al. 2018). On the other hand, Hlongwa et al. (2020) underline that unlike a traditional systemic review, which assesses the quality and findings of individual studies, a scoping literature review aims to map the scale and magnitude of available literature, identifying key subjects, gaps and trends. Considering this, Tricco et al. (2016) promulgate that this research technique helps researchers gain an absolute understanding of the subject and lays the groundwork for more targeted, in-depth research by highlighting the areas that require further scrutiny. On account of this, it is important that scholarly discourses that depend on a scoping literature review, as a research technique, provide recommendations for the phenomenon of interest at the end.

Through a scoping literature review, it is supposed that this article will provide an extensive overview of the cultural and religious belief systems, practices and perspectives on infertility in South Africa and potentially, elsewhere in the world. However, it must be observed that the attention

hereunder is on the cultural religion of amaXhosa, as will be demonstrated during the course of the discussions. This denotes that by utilising a scoping literature review, this article identifies the prevalent themes, gaps and variations in the existing body of knowledge, shedding light on how cultural religion shapes perceptions, coping mechanisms and support systems regarding infertility. This, in turn, offers valuable perspectives into the profound impact of cultural religion on how individuals perceive, cope with and access support for infertility-related issues. By doing so, this article contributes to a more interlaced understanding of the complex interplay between ethnological belief systems and infertility experiences, offering a foundation for more ethnologically sensitive and effective support systems in this context.

In a nutshell, this research technique allows the researcher hereunder to synthesise the findings, highlight the key debates, and identify areas requiring further deliberation, thereupon providing a foundation for the article's discussions and potential recommendations related to cultural religion and infertility in South Africa, with specific reference to amaXhosa. Ultimately, it is important to accept that the significance of a scoping literature review as a research technique in this article lies in its propensity to provide an exhaustive prospectus of existing knowledge and discourses on cultural religion and infertility. Having said that, by probing a wide range of literature sources, this methodological technique helps to identify the breadth and depth of available discourses. Thus, the next section is concerned with the findings and central discussions.

## Ethical considerations

This article followed all ethical standards for research without direct contact with human or animal subjects.

## Review findings and discussions

### Ancestral and traditional belief systems

In many amaXhosa cultural ethnicities, ancestral worship and belief systems play a central role in shaping perceptions of infertility (Kainz 2001). For example, one may consider a married couple from an amaXhosa cultural background who has been struggling to conceive a child. Within their cultural framework, the amaXhosa ethnic group believes that the inability to conceive is a result of ancestral displeasure, wrath or a spiritual blockage (Moyo & Muhwati 2013). The reason for this cultural notion is that this ethnic group perceives infertility as a sign that their ancestors are not pleased with the couple or that there is an imbalance in their ancestral connections (Ngubane 1984). This belief underscores the significance of ancestral worship and the influence of ancestral spirits on fertility within the cultural context of amaXhosa. In contrast, this assertion underlines the profound impact of ancestral worship and belief systems within amaXhosa cultural ethnicities on how infertility is regarded. It emphasises that within this ethnological framework, infertility is recurrently attributed to ancestral wrath or spiritual factors, pointing to the strong influence of ancestral

spirits on fertility perceptions. This highlights the ethnological significance of understanding cultural and religious belief systems in configuring individuals' attitudes and coping mechanisms regarding infertility.

Having said that, by perceiving infertility as a sign of ancestral dissatisfaction, individuals and couples may pursue to restore harmony and connection with their ancestors through rituals, ceremonies or other practices aimed at addressing the perceived imbalance. This cultural belief underscores the deep-rooted spiritual and ancestral connections that shape perceptions of infertility and influence the approaches taken to address it within the amaXhosa ethnic group. In this instance, the couple may be compelled to seek guidance and remedies and might consult a traditional healer or diviner who is knowledgeable in amaXhosa cultural belief systems and practices. Concerning this view, Mathibela et al. (2015) underline that in many African cultures, when it is believed that the wrath of ancestors is causing issues or difficulties, people continually turn to traditional healers or diviners for guidance and solutions. On account of this fact, these traditional practitioners are regarded as mediators between the physical and spiritual realms, and they use various rituals, herbs and divination methodologies to communicate with ancestors (or the spiritual world) and address perceived challenges (Maholela, Twala & Kompi 2022). This practice mirrors the significant role of cultural and spiritual beliefs in many African communities, where traditional healers or diviners play a central part in maintaining harmony and seeking resolutions for various challenges, including those related to fertility and ancestral connections.

In the context of the amaXhosa ethnic group, the healer, commonly known as *igqirha* or *isangoma* will ordinarily conduct divination rituals or use various methodologies to communicate with the ancestral spirits in a bid to remedy infertility that has affected the couple (Bogopa 2010). Through these rituals, the traditional healer aims to identify the specific ancestral causes of infertility and provide guidance on how to address them. In the process, the traditional healer or diviner may prescribe rituals such as offerings, prayers or ceremonies to honour and appease the ancestors (Ngubane 1984). These rituals commonly involve specific actions, such as pouring libations, presenting symbolic offerings or participating in cleansing ceremonies. The couple engages in these practices with the belief that they will establish a harmonious connection with their ancestors and receive their blessings for fertility.

On the grounds of this, it can be argued that ancestral worship and belief systems in the amaXhosa culture influence how infertility is perceived and addressed. One would recall that the couple's understanding of their infertility is ordinarily framed within the context of their ancestral lineage, and thus, they may pursue spiritual restorative strategies to restore balance and seek the favour of their ancestors (Makanya 2014). To this view, one may further argue that the cultural belief systems and practices surrounding ancestral worship provide the concerned couple with a fabric for understanding

and coping with their infertility struggles in a way that aligns with their cultural identity and traditions. Within these cultural traditions, infertility can potentially be viewed as a disruption in the ancestral pedigree or a failure to fulfil one's familial responsibilities (Thabede 2008). By the same token, the ability to conceive and bear children is seen as a fundamental constituent of continuing the ancestral line and ensuring the family's legacy (Manganyi & Buitendag 2013).

Over and above this, consulting traditional healers or diviners not only provides a means of pursuing spiritual solutions for infertility but also serves as a source of emotional support and cultural validation (Church et al. 2023). The rituals and restorations prescribed by these practitioners are profoundly entrenched in the cultural traditions of the amaXhosa ethnic group, reinforcing a sense of identity, belonging and ethnological continuity. That is the reason Spies (2010) remains optimistic that it is culturally important to note that these beliefs and practices surrounding ancestral worship and infertility vary across different amaXhosa ethnic groups such as amaXesibe, amaBhaca, amaMpondo and many others. In spite of this, they are all deeply rooted in cultural identity and religion. While some amaXhosa individuals may deeply embrace and rely on these traditional perspectives, others may adopt a more syncretic approach, blending traditional beliefs with other religious or medical frameworks (Taebi et al. 2021).

For example, some may homogenise their amaXhosa ancestral belief systems with Christianity. This homogenisation of cultural and religious traditions is a common phenomenon observed in various cultural contexts around the world, where individuals reconcile and synthesise different belief systems to create a unique spiritual framework that resonates with their personal and cultural identity (Church et al. 2023). The influence of ancestral worship on perceptions of infertility highlights the complex interplay between cultural traditions, spirituality and reproductive experiences in the ethnic group of amaXhosa.

What is additionally important to note is that linking ancestral worship and infertility holds significant cultural importance within many indigenous communities in South Africa, with specific reference to amaXhosa (Ngubane 1984). In various cultural contexts of this ethnic group, ancestors are revered as powerful spiritual beings who play a central role in the lives of their living descendants. On account of this, ancestral worship involves honouring and seeking guidance, protection and blessings from these ancestral spirits known as *iminyanya* (the departed) or *izinyanya* (the living). When it comes to infertility, the cultural significance of linking ancestral worship lies in the doctrine that ancestors have a direct influence on fertility and the ability to conceive (Kainz 2001).

Bearing this in mind, Fortes (1961), Karani (2023) and Kgatle (2023), using different intonations, underline that the connection between ancestral worship and infertility can vary based on cultural doctrines and practices in Africa. In some cultures that incorporate ancestral worship, there is a narrative that ancestors play a role in the fertility and welfare

of the living. That is the reason Fortes (1961) continues to suggest that cultural practices related to ancestral worship may include specific taboos or requirements during pregnancy or fertility-related rituals. As a result of this, transgressing these practices may be believed to result in infertility or complications during pregnancy. In contrast, it is imperative to appreciate that belief in ancestral worship is not universal, and there are individuals and communities who do not subscribe to these beliefs (Frank 1983). This denotes that cultural and religious beliefs are diverse and not everyone adheres to or practices ancestral worship. This is the case in the context of amaXhosa. In fact, this may be veritable given that people's belief systems and spiritual practices vary significantly, and there is a wide range of religious and spiritual traditions around the world that do not involve ancestor veneration. In view of this reality, it is perceptive to respect and acknowledge these multiplicities in belief systems and practices, as cultural and religious variegation is a fundamental component of human societies.

Given that some amaXhosa communities believe in the interrelationship between ancestral worship and infertility, it stands to reason that infertility is, thus, seen as a potential indication of ancestral vexation in the ancestral connections between the living and the spirits of their ancestors. This doctrine stresses the interconnectedness between the spiritual realm and the physical realm, with the ancestors being seen as guardians of fertility and the advancement of the lineage. Conclusively, by homogenising ancestral worship and infertility, individuals and couples seek to restore balance and harmony in their ancestral connections, addressing any potential causes or spiritual obstacles that may hinder their ability to conceive. This cultural significance further lies in the narrative that by proactively engaging with the ancestral spirits, individuals might potentially restore their ancestral connections, gain favour and increase their chances of successful conception. Given that cultural religion and infertility in the context of the amaXhosa people possess intricacies, it is crucial to explore the importance of procreation within this philosophical realm, hence the next section.

### Importance of procreation

Within the amaXhosa cultural group, the concept of procreation holds immense significance and is deeply ingrained in societal values (Taylor et al. 2013). This suggests that having children is recurrently considered not just a personal desire but also a critical duty and responsibility (Papu & Verster 2006). Thus, procreation within the ethnological setting of amaXhosa is viewed as a means of ensuring family continuity, carrying forward the ancestry and securing the future of the community. Infertility, on account of this, may be perceived as a *personal* and *social crisis*, disordering the expected trajectory of family life and challenging traditional norms and expectations. This is predominantly problematic for queer individuals who choose or are unable to bear children (Mogotlane, Ntlangulela & Ogunbanjo 2004). In fact, one would recall that procreation in Africa, and in particular, within the context of amaXhosa, is enormously influenced by patriarchal structures, which grant

men significant control and authority over matters related to family, reproduction and lineage (Mudau & Obadire 2017). These patriarchal norms impact various dimensions of reproductive decision-making, such as family size, spacing of children and access to healthcare and family planning services. On the grounds of this, it is important to acknowledge that Africa is a vast and diverse continent with a wide range of cultural and societal subtleties and the extent to which patriarchal structures influence procreation can vary between regions and communities. In some areas, efforts are being made to challenge and transform these structures to promote gender justice and women's reproductive autonomy.

In the same vein and observing the earlier assertions, the pressure to conceive and fulfil societal expectations surrounding procreation can be particularly intense for women. For instance, amaXhosa women are assigned the primary role of motherhood and are expected to bear children to continue the family ancestry (Hook et al. 2023). In this context, the inability to conceive can have far-reaching implications for their identity, social status and relationships within the community. In some instances, it can create tensions and conflicts as the man may be required to marry or get another woman through the process of polygyny. That is the reason amaXhosa women who are unable to bear children are sometimes referred to as *amadlolo* (the infertile ones). *Amadlolo* is a plural form in the isiXhosa language, while *idlolo* is a singular form. The concept *amadlolo* contains a negative and detrimental connotation given that it diminishes the dignity of amaXhosa women (Wang, Liu & Lei 2023). Fundamentally, diminishing language such as the use of words like *amadlolo* or *idlolo* towards women is a significant problem as it normalises gender-based stereotypes and discrimination, perpetuates inequality and can contribute to a hostile or oppressive environment. In this regard, using respectful and inclusive language is essential for promoting gender equity, buttressing a culture of respect, and combating gender-based discrimination and prejudice.

Furthermore, it is crucial to understand that infertility can lead to feelings of inadequacy, mockery and perception of catastrophe to meet societal standards. This is against the reality that amaXhosa women may face ridicule, criticism and even stigmatisation because of their perceived inability to fulfil their expected maternal role (Mogotlane et al. 2004). In addition to this, the emphasis on motherhood can extend beyond the individual and impact marital relationships, extended family dynamics and community interactions. In other words, this emphasis may potentially affect marital relationships by placing expectations on women to fulfil traditional motherly roles, potentially impacting their career choices and personal aspirations. Beyond this, it can shape extended family attributes as families may exert pressure on women to have children, and within the community, it can contribute to cultural norms and expectations surrounding motherhood. It is for this reason that I argue that recognising these dynamics is vital for promoting more inclusive and supportive environments for women's choices and roles within the amaXhosa society.

Thaldar (2023) confirms this in that infertility may strain spousal relationships, as couples may face extensive pressure to conceive and may experience blame or tension within their marriage because of the perceived failure to conceive. Within the wider community of amaXhosa people, infertility may lead to social exclusion, marginalisation and strained relationships with friends, relatives and neighbours, as individuals may be seen as deviating from the expected norms and values associated with procreation (Donkor & Sandall 2007). Other South African ethnic groups such as Basotho, amaNdebele and many others are no exception to this challenge (Mlotshwa 2018).

It stands to reason, therefore, to contend that the cultural value placed on procreation in South Africa creates a complex social landscape for individuals and couples facing infertility. In fact, it underscores the need for support, understanding and compassion within communities to address the emotional, psychological and social implications of infertility. That is the reason Mathibela et al. (2015) and Madziyire et al. (2021) state that addressing these challenges requires not only medical support but also a compassionate and understanding community that provides emotional and psychological support to individuals and couples facing infertility. As a matter of fact, Esan et al. (2022) concur that recognising the unique cultural subtleties at play and promoting inclusivity and affinity within communities is essential for addressing the multifaceted impact of infertility on individuals and relationships.

Adding to this view, Mlotshwa (2018) suggests that addressing these implications requires a shift in societal attitudes, increased awareness and supportive interventions. Cultivating empathy, understanding and education within the community can help challenge and denounce the stigma associated with infertility. In the process, establishing support networks, counselling services and advocacy programmes can provide much-needed emotional support and foster inclusivity for individuals and couples facing infertility challenges (Spies 2010). This means that by promoting a more compassionate and inclusive environment, the negative social implications of infertility can be mitigated, and affected individuals can find the support they need to navigate their complex journey with greater resilience and well-being (Donkor & Sandall 2007).

## Gender roles and stigma

In South Africa, cultural norms dictate distinct gender roles and responsibilities within the family, which can have significant implications when it comes to infertility. Women often bear the brunt of societal expectations as they are typically assigned the role of child-bearers and are viewed as responsible for continuing the family pedigree. Consequently, when a woman faces infertility, she encounters considerable scrutiny and blame, both from her immediate family and the wider community (Domar, Seibel & Benson 1990).

This blame can manifest in various forms, such as questioning her womanhood or suggesting that she is not fulfilling her

duties. Considering this, the inability to conceive may result in stigmatisation, leading to social exclusion and strained relationships within the community. This view can be observed in Nomsa's case study – a fictional character in a rural community in the Eastern Cape, South Africa (Dyer et al. 2005). Nomsa and her husband have been attempting to conceive a child for 8 years without success. As time passes, Nomsa starts facing increasing scrutiny and blame from her immediate family and the wider community (Dyer et al. 2005).

Within her immediate family, Nomsa's mother-in-law is particularly vocal about her inability to conceive. She constantly reminds Nomsa that her primary duty as a wife is to bear children and accuses her of being 'barren'. Nomsa's sisters-in-law, who have already become mothers, also contribute to the pressure by questioning her womanhood and openly discussing her infertility within the family. Outside of her immediate family, she faces judgement and whispers from other community members. When attending social gatherings or community events, she overhears people speculating about her fertility, spreading rumours and questioning her worth as a woman. The pressure mounts as the community places expectations on her to fulfil her role as a mother and contribute to the continuity of the family lineage.

As a result of this scrutiny and blame, Nomsa experiences profound emotional distress. She internalises the negative perceptions and begins to question her own self-worth. The strained relationships within her immediate family intensify, and she starts feeling isolated and excluded from community activities. The weight of the stigma surrounding her infertility takes a toll on her mental welfare, causing anxiety, depression and a sense of hopelessness (Dyer et al. 2005). Thus, Nomsa's case exemplifies how the cultural norms and expectations prevalent in South African communities, with special reference to amaXhosa, can lead to the scrutiny and blame faced by women when they experience infertility. The impact of this blame goes beyond individual distress, affecting relationships and community dynamics. It highlights the urgent need for education, awareness and support systems that challenge these detrimental perceptions and promote empathy, understanding and inclusivity for individuals navigating infertility within the South African context and beyond (Upton 2001).

While women face heightened pressure and scrutiny regarding infertility, it is important to recognise that men are not exempted from societal expectations either. Zhao et al. (2022) argue that men may also face pressure to father children and may experience their own emotional distress and feelings of inadequacy if they are unable to do so. However, in the amaXhosa culture, the burden and blame associated with infertility tend to be disproportionately placed on women, reinforcing traditional gender roles and perpetuating the idea that women are solely responsible for issues of fertility (Zhao et al. 2022). On account of this, it can be argued and accepted that infertility is a condition that can negatively affect both men and women in the context of

amaXhosa and, possibly, elsewhere in the global village. As a matter of fact, infertility does not discriminate based on gender, and it can result from various factors related to either partner, including medical, physiological or reproductive issues. Thus, recognising that infertility affects both men and women is essential for addressing and supporting couples who experience fertility challenges, promoting gender equality in discussions of reproductive health and ensuring that healthcare and treatment options are accessible to all individuals regardless of gender.

By the same token, it is important to understand that these cultural norms and expectations place significant emotional and psychological strain on individuals and couples struggling with infertility, as previously said. They can exacerbate feelings of shame, guilt and failure and contribute to the erosion of self-esteem and strained relationships. That is the reason Cilliers (2007) suggests that challenging these gendered norms and promoting a more inclusive understanding of infertility is crucial to create a supportive environment that recognises the multifaceted factors contributing to infertility and fosters empathy and understanding for all individuals and couples facing these challenges. With this in mind, it is important to observe some of the potential recommendations that may be implemented as well as concluding remarks in the next section.

## Recommendations and conclusion

To address the intersection of cultural religion and fertility, it is essential to promote education and awareness about diverse ethnological belief systems and practices surrounding infertility in South Africa and elsewhere in the global village. This includes advancing open dialogues, challenging and denouncing stigmas and providing support systems that are sensitive to individuals' cultural and religious backgrounds, ensuring that comprehensive reproductive healthcare and inclusive infertility support services are accessible and available to all individuals regardless of their cultural or religious affiliations.

In the same vein, researching the issue of cultural religion and fertility in South Africa is of utmost importance. For instance, it can contribute to a significant understanding of the complex undercurrents between cultural belief systems, religious practices and infertility, illuminating the unique challenges faced by individuals and couples within specific cultural contexts. This knowledge can eventually inform the development of culturally sensitive interventions and support systems.

In the same fashion, researching this conundrum can help to identify and challenge detrimental norms, stigmas and gender injustices associated with infertility. On account of this, by examining the multifaceted ways in which ethnological and religious factors influence perceptions of infertility, researchers can work towards promoting more inclusive and compassionate attitudes within communities, fostering supportive environments for individuals experiencing infertility. Over and

above this, addressing infertility challenges that are interwoven into the culture of amaXhosa can ensure that reasonable solutions are brought to the fore for future and further scholarly scrutiny. Unlike this article, which has an ending, challenges that pertain to cultural religion and infertility do not seem to have an ending, hence the necessity to continue the discourse.

## Acknowledgements

### Competing interests

The author declares that no financial or personal relationships inappropriately influenced the writing of this article.

### Author's contributions

M.D., is the sole author of this article.

### Funding information

This article received no specific grant from any funding agency in the public, commercial or not-for-profit sectors.

### Data availability

Data sharing is not applicable to this article as no new data were created or analysed in this study.

### Disclaimer

The views and opinions expressed in this article are those of the author and are the product of professional research. It does not necessarily reflect the official policy or position of any affiliated institution, funder, agency, or that of the publisher. The author is responsible for this article's results, findings, and content.

## References

- Abebe, M.S., Afework, M. & Abaynew, Y., 2020, 'Primary and secondary infertility in Africa: Systematic review with meta-analysis', *Fertility Research and Practice* 6, 1–11. <https://doi.org/10.1186/s40738-020-00090-3>
- Bogopa, D., 2010, 'Health and ancestors: The case of South Africa and beyond', *Indo-Pacific Journal of Phenomenology* 10(1), 1–7. <https://doi.org/10.2989/IPJP.2010.10.1.8.1080>
- Bornstein, M., Gipson, J.D., Failing, G., Banda, V. & Norris, A., 2020, 'Individual and community-level impact of infertility-related stigma in Malawi', *Social Science & Medicine* 251, 112910. <https://doi.org/10.1016/j.socscimed.2020.112910>
- Church, A.C., Ibitoye, M., Chettri, S. & Casterline, J.B., 2023, 'Traditional supports and contemporary disruptors of high fertility desires in sub-Saharan Africa: A scoping review', *Reproductive Health* 20(1), 1–16. <https://doi.org/10.1186/s12978-023-01627-7>
- Cilliers, J.H., 2007, 'Religious and cultural transformations and the challenges for the churches: A South African perspective', *Practical Theology in South Africa=Praktiese Teologie in Suid-Afrika* 22(2), 1–19, viewed 17 June 2023, from <https://hdl.handle.net/10520/EJC88622>.
- Davis, K., Drey, N. & Gould, D., 2009, 'What are scoping studies? A review of the nursing literature', *International Journal of Nursing Studies* 46(10), 1386–1400. <https://doi.org/10.1016/j.ijnurstu.2009.02.010>
- Diko, M., 2023, 'The ramifications of the neglect of Indigenous South African languages by the South African Government: COVID-19 as a case study', *African Journal of Inter/Multidisciplinary Studies* 5(1), 1–12. <https://doi.org/10.51415/ajims.v5i1.1148>
- Domar, A.D., Seibel, M.M. & Benson, H., 1990, 'The mind/body program for infertility: A new behavioral treatment approach for women with infertility', *Fertility and Sterility* 53(2), 246–249. [https://doi.org/10.1016/S0015-0282\(16\)53275-0](https://doi.org/10.1016/S0015-0282(16)53275-0)
- Donkor, E.S. & Sandall, J., 2007, 'The impact of perceived stigma and mediating social factors on infertility-related stress among women seeking infertility treatment in Southern Ghana', *Social Science & Medicine* 65(8), 1683–1694. <https://doi.org/10.1016/j.socscimed.2007.06.003>

- Dyer, S.J., Abrahams, N., Mokoena, N.E., Lombard, C.J. & Van Der Spuy, Z.M., 2005, 'Psychological distress among women suffering from couple infertility in South Africa: A quantitative assessment', *Human Reproduction* 20(7), 1938–1943. <https://doi.org/10.1093/humrep/deh845>
- Esan, D.T., Nnamani, K.Q., Ogunkorode, A., Muhammad, F., Oluwagbemi, O.O. & Ramos, C.G., 2022, 'Infertility affects the quality of life of Southwestern Nigerian women and their partners', *International Journal of Africa Nursing Sciences* 17, 100506. <https://doi.org/10.1016/j.ijans.2022.100506>
- Fortes, M., 1961, 'Piety in ancestor worship', *The Journal of the Royal Anthropological Institute of Great Britain and Ireland* 91(2), 166–191. <https://doi.org/10.2307/2844412>
- Frank, O., 1983, 'Infertility in sub-Saharan Africa: Estimates and implications', *Population and Development Review* 9(1), 137–144. <https://doi.org/10.2307/1972901>
- Hlongwa, M., Mashamba-Thompson, T., Makhunga, S. & Hlongwana, K., 2020, 'Evidence on factors influencing contraceptive use and sexual behavior among women in South Africa: A scoping review', *Medicine* 99(12), e19490. <https://doi.org/10.1097/MD.00000000000019490>
- Hook, J.L., Li, M., Paek, E. & Cotter, B., 2023, 'National work–family policies and the occupational segregation of women and mothers in European countries, 1999–2016', *European Sociological Review* 39(2), 280–300. <https://doi.org/10.1093/esr/jcac046>
- Kainz, K., 2001, 'The role of the psychologist in the evaluation and treatment of infertility', *Women's Health Issues* 11(6), 481–485. [https://doi.org/10.1016/S1049-3867\(01\)00129-3](https://doi.org/10.1016/S1049-3867(01)00129-3)
- Karani, S., 2023, 'Worship or veneration: An analysis of whether the African veneration of ancestors equals the Biblical understanding of worship', *ShahidiHub International Journal of Theology & Religious Studies* 3(2), 21–36.
- Kgatle, M.S., 2023, 'Consultations in New Prophetic Churches and African traditional religions: A case study of divine healing in assessing syncretistic practices in the South African context', *Religions* 14(3), 400. <https://doi.org/10.3390/rel14030400>
- Larsen, U., 2003, 'Infertility in central Africa', *Tropical Medicine & International Health* 8(4), 354–367. <https://doi.org/10.1046/j.1365-3156.2003.01039.x>
- Logan, S., Gu, R., Li, W., Xiao, S. & Anazodo, A., 2019, 'Infertility in China: Culture, society and a need for fertility counselling', *Asian Pacific Journal of Reproduction* 8(1), 1–6. <https://doi.org/10.4103/2305-0500.250416>
- Madziyire, M.G., Magwali, T.L., Chikwasha, V. & Mhlanga, T., 2021, 'The causes of infertility in women presenting to gynaecology clinics in Harare, Zimbabwe; a cross sectional study', *Fertility Research and Practice* 7, 1–8. <https://doi.org/10.1186/s40738-020-00093-0>
- Maholela, K., Twala, C. & Kompfi, B., 2022, 'Mythology, symbolism and syncretism at the sacred sites of the eastern Free State, South Africa', *South African Journal of Cultural History* 36(1), 160–177. <https://doi.org/10.54272/sach.2022.v36n1a8>
- Makanya, S., 2014, 'The missing links: A South African perspective on the theories of health in drama therapy', *The Arts in Psychotherapy* 41(3), 302–306. <https://doi.org/10.1016/j.aip.2014.04.007>
- Manganyi, J.S. & Buitendag, J., 2013, 'A critical analysis on African Traditional Religion and the Trinity', *HTS: Theological Studies* 69(1), 1–13. <https://doi.org/10.4102/hts.v69i1.1934>
- Mathibela, M.K., Egan, B.A., Du Plessis, H.J. & Potgieter, M.J., 2015, 'Socio-cultural profile of Bapedi traditional healers as indigenous knowledge custodians and conservation partners in the Blouberg area, Limpopo Province, South Africa', *Journal of Ethnobiology and Ethnomedicine* 11, 49. <https://doi.org/10.1186/s13002-015-0025-3>
- Mlotshwa, K., 2018, 'Invisibility and hypervisibility of "Ndebele women" in Zimbabwe's media', *Agenda* 32(3), 87–99. <https://doi.org/10.1080/10130950.2018.1484616>
- Mogotlane, S.M., Ntlangulela, J.T. & Ogunbanjo, B.G.A., 2004, 'Mortality and morbidity among traditionally circumcised Xhosa boys in the Eastern Cape Province, South Africa', *Curatiosis* 27(2), 57–62. <https://doi.org/10.4102/curatiosis.v27i2.980>
- Moyo, S. & Muhwati, I., 2013, 'Socio-cultural perspectives on causes and intervention strategies of male infertility: A case study of Mhondoro-Ngezi, Zimbabwe', *African Journal of Reproductive Health* 17(2), 89–101.
- Mudau, T.J. & Obadire, O.S., 2017, 'The role of patriarchy in family settings and its implications to girls and women in South Africa', *Journal of Human Ecology* 58(1–2), 67–72. <https://doi.org/10.1080/09709274.2017.1305614>
- Munn, Z., Peters, M.D., Stern, C., Tufanaru, C., McArthur, A. & Aromataris, E., 2018, 'Systematic review or scoping review? Guidance for authors when choosing between a systematic or scoping review approach', *BMC Medical Research Methodology* 18, 143. <https://doi.org/10.1186/s12874-018-0611-x>
- Ngubane, J.B., 1984, 'The role of Amadlozi/Amathongo as seen in the writings of WB Vilakazi', *Religion in Southern Africa* 5(2), 55–75.
- Papu, J. & Verster, P., 2006, 'A biblical, cultural and missiological critique of traditional circumcision among Xhosa-speaking Christians', *Acta Theologica* 26(2), 178–198. <https://doi.org/10.4314/actat.v26i2.49044>
- Petersen, E., 2016, 'Working with religious leaders and faith communities to advance culturally informed strategies to address violence against women', *Agenda* 30(3), 50–59. <https://doi.org/10.1080/10130950.2016.1251225>
- Sewpaul, V., 1999, 'Culture religion and infertility: A South African perspective', *The British Journal of Social Work* 29(5), 741–754. <https://doi.org/10.1093/bjsw/29.5.741>
- Spies, B., 2010, 'Five new South African short operas: A report', *Journal of Musical Arts in Africa* 7(1), 79–90. <https://doi.org/10.2989/18121004.2011.619691>
- Taebi, M., Kariman, N., Montazeri, A. & Majd, H.A., 2021, 'Infertility stigma: A qualitative study on feelings and experiences of infertile women', *International Journal of Fertility & Sterility* 15(3), 189.
- Taylor, T.N., Mantell, J.E., Nywagi, N., Ciske, N. & Cooper, D., 2013, 'He lacks his fatherhood: Safer conception technologies and the biological imperative for fatherhood among recently-diagnosed Xhosa-speaking men living with HIV in South Africa', *Culture, Health & Sexuality* 15(9), 1101–1114. <https://doi.org/10.1080/13691058.2013.809147>
- Thabede, D., 2008, 'The African worldview as the basis of practice in the helping professions', *Social Work/Maatskaplike Werk* 44(3), 233–245. <https://doi.org/10.15270/44-3-237>
- Thaldar, D., 2023, 'Performing IVF for surrogacy before confirmation of the surrogacy agreement by the court: A critical analysis of recent case law in South Africa', *Humanities and Social Sciences Communications* 10(1), 1–7. <https://doi.org/10.1057/s41599-022-01492-y>
- Tricco, A.C., Lillie, E., Zarin, W., O'Brien, K., Colquhoun, H., Kastner, M. et al., 2016, 'A scoping review on the conduct and reporting of scoping reviews', *BMC Medical Research Methodology* 16, 1–10. <https://doi.org/10.1186/s12874-016-0116-4>
- Upton, R.L., 2001, '"Infertility makes you invisible": Gender, health and the negotiation of fertility in Northern Botswana', *Journal of Southern African Studies* 27(2), 349–362. <https://doi.org/10.1080/03057070123286>
- Wang, G., Liu, X. & Lei, J., 2023, 'Cognitive behavioural therapy for women with infertility: A systematic review and meta-analysis', *Clinical Psychology & Psychotherapy* 30(1), 38–53. <https://doi.org/10.1002/cpp.2792>
- Wilson, D.M., Anafi, F., Kusi-Appiah, E., Darko, E.M., Deck, K. & Errasti-Ibarrondo, B., 2020, 'Determining if nurses are involved in political action or politics: A scoping literature review', *Applied Nursing Research* 54, 151279. <https://doi.org/10.1016/j.apnr.2020.151279>
- Woods, B.M., Patrician, P.A., Fazeli, P.L. & Ladores, S., 2022, 'Infertility-related stress: A concept analysis', *Nursing Forum* 57(3), 437–445. <https://doi.org/10.1111/nuf.12683>
- Xie, Y., Ren, Y., Niu, C., Zheng, Y., Yu, P. & Li, L., 2023, 'The impact of stigma on mental health and quality of life of infertile women: A systematic review', *Frontiers in Psychology* 13, 1093459. <https://doi.org/10.3389/fpsyg.2022.1093459>
- Zhao, S., Tang, L., Fu, J., Yang, Z., Su, C. & Rao, M., 2022, 'Subclinical hypothyroidism and sperm DNA fragmentation: A cross-sectional study of 5401 men seeking infertility care', *The Journal of Clinical Endocrinology & Metabolism* 107(10), e4027–e4036. <https://doi.org/10.1210/clinem/dgac458>