

# Prevalence of Gender Role Reversal among spouses in Nyeri County, Kenya

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**Abstract:** *Although there is a growing concern about reversal of gender roles among spouses in patriarchal societies in the developed and developing world, not much is known about the extent of the prevalence of the reversal and the factors contributing to it in Nyeri County Kenya. Therefore, the purpose of this study was to establish the extent of prevalence of reversal of the provider, decision making, childcare and home keeping roles among spouses in Nyeri County, and the factors contributing to it. The study used a descriptive survey design with mixed methods. The target population was married Kikuyu men and women with dependent children and not necessarily couples. Multi-stage sampling was used to select a sample of 392 participants constituting of 200 women and 192 men. 68 focus group participants were purposively sampled from the 392. Data was collected using questionnaire and focus group discussions. Descriptive statistics were used in the analysis of quantitative data while qualitative data was thematically analysed. The findings revealed a 48.2% and a 48% prevalence of reversal of the provider and decision making roles respectively and a 7.7% prevalence of reversal of childcare and home keeping roles. Alcohol abuse and inadequate gender role socialization were found to be the main contributing factors to the role reversal. The highest ranked suggested interventions by both gender were psychosocial, namely, family life education, marital counselling, and reverting to traditional socialization practices*

**Keywords:** Gender role reversal, provider, decision making, childcare, home-keeping

## 1. Introduction

Gender roles are culturally defined and construed sets of behaviours, tasks and responsibilities that are ascribed to men and women, in any given culture and acquired as individuals interact with others at the family and community levels. [1].

To better comprehend gender roles, it is imperative to differentiate between sex and gender. Gender denotes the socially constructed characteristics of women and men while sex refers to the biologically determined characteristics [2]. People are born male or female but they become masculine or feminine through learning [3]. Masculinity and femininity are enacted through socially prescribed gender roles that society ascribes to individuals, on the bases of their sex [1].

The Social learning and the Social Cognitive theories [4], [5] suggest that gender roles are learned through interactions with gender role models in the family and community. Bandura underscores the significance of same-sex models especially parents in transmitting gender role messages to their children. In patriarchal societies, fathers and other adult males are expected to model society's gender role expectations to boys and young men while mothers are expected to do likewise to the girls and young women. Masculinity entails being hardworking, independent, competitive, and ambitious while femininity entails being gentle, submissive, caring and nurturing [6]. These masculine and feminine attributes correspond to male roles of family provision, decision making, protection and leadership and female roles of childcare and home keeping respectively.

However, despite the elevated status of masculinity and male roles in patriarchal cultures, gender roles are dynamic and are therefore subject to change. This is highlighted by Bannon and Correia [7] who indicated that men's traditional gender role as provider has been eroded by

“globalization, economic change, poverty and social change”.

In the developed world, changes in gender roles have been observed in several European countries [8] and in the U.S.A [9]. In those countries, wives have increasingly taken over the breadwinning role while their husbands have taken over childcare and some home keeping tasks. These researchers found that economic depression led to massive layoffs of the male workers because male dominated manufacturing sector was affected as factories and industries closed down or reduced their workforce. This corresponded with increased entry of women in the workforce especially in the service sector partly because many of them had acquired higher education.

In Africa, studies indicate that in some families, socio-economic and political situations have made it difficult for men to earn income or acquire material resources that would enable them provide for their families [10] - [13].

Other past studies show that in Africa, socio-economic changes such as poverty and unemployment have also affected men more than women [14] - [19], thus eroding men's abilities to provide for their families. These researchers also established that while there was a decline in men's economic earning opportunities, women became the new breadwinners because they were able to revive some of the traditional income earning activities and invent new ones.

In Central Kenya, some men appear to have abdicated their role as family providers to their wives not only because of unemployment but because unlike women some of the men are reluctant to engage in small-scale income generating activities especially in the informal sector [18], [20]. These studies have shown that some men prefer idling around in small trading centers locally referred to as ‘mungetho’.

Performance of gender roles by men in their families has also been compromised by alcohol abuse [21] – [23].

In Africa, although some studies have established the prevalence of the provider role reversal and the socio-economic factors that have contributed to it, not much is known about the extent of the prevalence. Moreover, data on reversal of decision making, childcare and home keeping roles is scanty.

This study thus, sought to establish the prevalence of gender role reversal with focus on the provider, decision making, childcare and home keeping roles among spouses in Nyeri County.

The study was guided by the following objectives:

- 1) To establish the extent of prevalence of gender role reversal amongst spouses in Nyeri County.
- 2) To identify the factors contributing to gender role reversal amongst spouses in Nyeri County.
- 3) To identify measures that could mitigate the prevalence of gender role reversal in Nyeri County.

## 2. Methodology

The study adopted a descriptive survey design that utilized both quantitative and qualitative approaches.

Purposive sampling was used to select Nyeri County out of the five Counties in Central Kenya as the County has in the recent past experienced high levels of negative media publicity highlighting women publicly demonstrating against their husbands for alcohol abuse and abdication of their gender roles. Multi-stage sampling was used to select the County, Locations, Sub-locations and a sample of 392 participants.

A table of sample size determination in a known population that was developed by Krejcie and Morgan [24] was used to determine the sample of participants. The table gave a sample size of 373 participants. However, based on the accuracy of data, the margins of error associated with sampling and other random effects at 95% confidence level was kept at a maximum of +5% for a sample size of 373 participants. This yielded a sample of 392 participants. The calculations in the table are based on the following formula.

$$s = \frac{X^2NP(1 - P)}{d^2(N - 1) + X^2P(1 - P)} \quad (1)$$

Where;

$s$  = the required sample size

$N$  = the population size (14, 124 participants)

$P$  = the population proportion (assumed to be 0.5)

$d$  = degree of accuracy (expressed or taken as a proportion 0.05)

$X^2$  = Table value of chi-square for 1 degree of freedom taken as 3.841 for 0.95 confidence level

Proportionate sampling based on number of participants in the Sub-Locations was used to determine sample of participants per Sub-Location. Finally, the local administration mobilized potential participants to designated venues. Simple random sampling was used to select the

predetermined proportionate sample for each Sub-location from those who met the inclusion criteria for the study.

Purposive sampling was used to sample 68 focus group discussion participants (10-12 participants) from those who had participated in the questionnaire.

## 3. Findings

### 3.1 Extent of prevalence of Gender Role Reversal

The study established the extent of prevalence of reversal of the provider, decision making, childcare and home keeping gender roles among spouses in Nyeri County. Findings on reversal of provider role are presented in Table 1 below.

**Table 1:** Prevalence of Provider Role Reversal

Gender			No-Role reversal	Role reversal	Equal role sharing	Total
			Male	Fq. 102	68	22
		%	53.1	35.4	11.5	100
Female	Fq.		68	121	11	200
	%		34.0	60.5	5.5	100
Total	Total	Fq.	170	189	33	392
		%	43.4	48.2	8.4	100

Table 1 reveals that a total of 189 (48.2%) respondents, of which 68 (35.4%) were male and 121 (60.5%) female participants, indicated that there was a reversal of the provider role in their families. Therefore, these findings show a 48.2% extent of prevalence of reversal of the provider role in Nyeri County.

These findings are consistent with findings from the focus group discussions (FGDs) where both gender unanimously concurred that reversal of gender roles is high particularly in the provider role. One male participant responded with a statement that seemed to be representative of the rest of the group's views as he stated: *"We can say it is breadwinning."* The study also established the extent of reversal of the decision making role. The findings are presented in Table 2 which shows a total of 188 (48.0 %) participants, composed of 82 (42.7%) males and 106 (53.0 %) females, indicated that there was a reversal of the decision making role in their families.

**Table 2:** Prevalence of Decision Making Role Reversal

Decision Making Role Reversal						
Gender			No role Reversal	Role reversal	Equal Rolesharing	Total
			Male	Fq. 92	82	18
		%	47.9	42.7	9.4	100.0
Female	Fq.		74	106	20	200
	%		37.0	53.0	10.0	100.0
Total	Total	Fq.	166	188	38	392
		%	42.3	48.0	9.7	100.0

The FGDs supported the prevalence of reversal of decision making role as seen in the following response from a female participant:

*"So, when you as a wife is the one who engages in income earning activities leaving him behind in bed, then, you end*

up finding that you are the one who makes all the decisions in the family.

The quantitative findings on prevalence of reversal of both the provider and decision making roles show that more females than males reported a higher prevalence of reversal. This resonates with Vital i & Arpino [8] who noted a bias when data is collected using self-report measures. The study established that the prevalence of reversal of these two male roles was almost equal at 48.2% for provider role and 48% for decision making role.

The link between the loss of decision making role and the provider role is consistent with remarks of an elderly man in Hollander [13] study who linked a husband’s failure to provide and the loss of decision making power in stating: “So the woman is getting in charge because she is the one providing. But in terms of customs, the man had the power in the house, taking the leadership, and being the pride of the house. But this is not the case anymore since the woman is the one feeding the house. As a result, women express themselves more. Men have to keep a low profile. I don’t have the breadwinner’s power anymore. My wife has the breadwinner’s power now, so she is also the one making the decisions, while I remain quiet.” (Hollander, 2014, p.169/170).

In traditional patriarchal African societies, the power and authority of a husband was rarely challenged by members of his household. This was because by virtue of living and deriving all their economic provisions from the land owned by the husband’s clan, the husband was considered as the provider and therefore automatically the primary decision maker. However, as revealed in the focus group discussions and consistent with the quote from Hollander [13], with the introduction of the monetary economy, decision making is dependent on a spouse’s ability to provide for the family. This supports the almost equal extent of prevalence in the provider and decision making roles.

Findings on reversal of childcare and home keeping roles revealed that overall, only 30 (7.7%) of the participants, 11(5.7%)male and 19 (9.5%) female acknowledged that there was a reversal of childcare and home keeping roles in their families. The findings are presented in Table 3 below.

**Table 3:** Prevalence of Reversal of Childcare and Home keeping Roles

Child care and Home keeping Role Reversal						
		No role Reversal	Role reversal	Equal Role Reversal		
Gender	Male	Fq	153	11	28	192
		%	79.7%	5.7%	14.6%	100.0%
	Female	Fq	168	19	13	200
		%	84.0%	9.5%	6.5%	100.0%
Total		Fq	321	30	41	392
		%	81.9%	7.7%	10.5%	100.0%

Similar findings were established from the focus group discussions where both gender concurred that it was rare to find a husband who would agree to take over domestic and childcare responsibilities. However, there were exceptions as indicated in the following response from a male participant:

“Some wives are over involved in church activities to the extent that the husband has no choice but to cook for the children.” (Male Participant)

The low prevalence of reversal of female roles is not unique to Nyeri County. For instance, in Somalia, El-Bushra and Sahl[11] found that some husbands shun off female roles even when their wives are the main breadwinners. In concurrence, Chant as cited in Kabeer [25] argued that exemption from unpaid domestic chores appears to be one of the privileges most strongly defended by men despite having lost or abdicated their role as primary breadwinners.

**3.2 Factors contributing to Gender Role Reversal in Nyeri County**

The study sought to establish the various factors that contribute to gender role reversal by use of an open-ended question in the questionnaire. Participants attributed the reversal in gender roles more to socio-cultural than socio-economic factors. This is shown by a total of 440 responses on socio-cultural factors comprised of (271 from females and 169 from males) and 203 responses on socio-economic factors comprised of (130 from males and 73 from females) as presented in Table 4.

**Table 4:** Number of responses on various factors

Gender	Number of Responses	
	Socio-Cultural Factors	Socio-Economic Factors
Male	169	130
Female	271	73
<b>Total</b>	<b>440</b>	<b>203</b>

Among the socio-cultural factors, alcohol abuse ranked highest as indicated by 30% (132) of the participants who included 33.7% (57) male and 28% (75) female participants. Inadequate socialization was ranked second as indicated by 24% (106) of the participants who included 30.8% (52) male and by 20% (54) female participants. This is indicated in Table 5.

**Table 5:** Socio-Cultural Factors by Gender

Factors	Male Response%	Female Response%	Total %
Alcohol Abuse by men	33.7	28	30
Inadequate socialization	30.8	20	24
Laziness, idleness and refusing to work	13.6	20	18
Irresponsibility	7.1	12	10
Selfishness	4.1	9	7
Others	10.7	11	11
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>

Among the socio-economic factors, poverty was the highest ranked by a total of 45.8% (93) participants comprised of 37.7% (49) male and 60.3% (44) female participants while unemployment was ranked second by 26.6% (54) of the total participants comprised of 26.2% (34) male and 27.4% (20) female participants as shown in Table 6.

**Table 6:** Socio-economic Factors by Gender

Factors by Gender	Male	Female	Total
	Percent	Percent	Percent
Poverty	37.7	60.3	45.8
Unemployment	26.2	27.4	26.6
No government funding for Men	35	11	26.1
Others	1.5	1.3	1.5%
Total	100%	100%	100

The above findings revealed that more males than females attributed gender role reversal to socio-economic factors although both gender attributed the reversal mainly to poverty and unemployment. However, a much higher number of males than females attributed the reversal to gender funding inequality. Males attributed gender role reversal to the inequality in funding both gender than to unemployment.

In the FGDs, male participants attributed the reversal to discriminative funding of women leaving out men, as revealed by a male participant who stated the following: *“Women and youth have funds from the government but none for men. This has led to abuse of Kikuyu culture.”*

On alcohol abuse, a male participant asserted that: *“All these things have been caused by alcohol abuse.”* This was similarly emphasized by a female participant who stated: *“I can only say it is alcohol. Alcohol! Alcohol is playing a major part!”* Past studies show that alcohol abuse compromises performance of gender roles and gender role socialization [22] while some men go to the extent of selling household goods to meet their alcohol expenses [26]. Reversal was also attributed to inadequate socialization. For instance, a female participant had this to say: *“What we know is that traditionally, men used to be taught their roles by their fathers but now they are taught by their mothers.”* On the other hand, a male participant reported the following:

*From the period of emergency some women acquired a lot of power in the home. She is the one who was left at home. Therefore the boy child had no way of learning how to be a man. And many men died during the war. And this is the period when thingira and boi collapsed.*

These findings resonate with Dolan [10] who found that when the Acholi were put in camps, they lost the *wang’oo*, which was the Acholi village hearth that served as an informal cultural socialization institution. Dolan noted that loss of *wang’oo* compromised men’s ability to live up to their cultural expectations as men. The findings on Nyeri County imply that the main hindrances to gender role conformity in the County are not necessarily socio-economic but socio-cultural. As observed by Barker & Ricardo [28], socialization of boys and men is crucial as it emphasizes the need for men to have financial independence and a source of income before marriage. However, their findings also established that marriage is one of the benchmarks for masculinity in Africa. There is therefore a possibility that some men in Nyeri County rush into marriage ignorant of what is expected of them as husbands and fathers.

### 3.3 Measures to mitigate the prevalence of Gender Role Reversal

The strategies for mitigating gender role reversal are presented in Table 7.

**Table 7:** Intervention strategies

Intervention Strategies	Male %	Female %	Total %
Family life education & Marital Counselling	31.7	34.6	33.2
Revert to Kikuyu traditional socialization system	19.2	12.4	15.9
Eradicate poverty/create employment in rural areas and boost farming	16.0	15.8	15.9
Teach men their roles	4.8	21.8	13.2
Ban alcohol	3.4	10.4	6.8
Funding for men	14.4	0.5	7.6
Empower boy child/equal empowerment of boy and girls	3.8	3.5	3.6
Government should introduce cultural centers in rural areas	1.0	0.5	0.7
Ban Women Groups	1.4	0	0.7
Others	4.3	0.5	2.4
Total	100	100	100

The study findings as shown in Table 7 indicate that overall 33.2% participants, specifically 31.7% male and 34.6% female participants recommended family life education and marital counselling while 15.9% of the participants recommended the need to revert to Kikuyu traditional socialization practices. The highest ranked recommended socio-economic intervention was eradication of poverty by creating employment in the rural areas and boosting farming.

These findings were supported in the FGDs where male participants urged the government to start funding men. Participantssimilarly urged the government and churches to start organizing family life education seminars to teach gender roles to both gender. They also suggested the use of these seminars as platforms to educate men and women on the effects of role reversal in the family. Similar views were noted in a study by Kimani & Kombo [27] where the government was requested to sensitize men and women on the dangers of the abdication of male responsibilities to women by men.

A key intervention that was particularly suggested by male participants in the FGDs was as reflected in the following excerpt.

*“We should revert to traditional Kikuyu socialization practices. Boishould be reintroduced. These days, we men usually say the bar is our ‘boi’ because that is where two or three men meet to discuss their issues.”*

The suggestion to revert traditional socialization and specifically reintroduction of cultural institutions such as *boi* was similar to a finding by Lwambo[12] where participants suggested that *barza-style* settings would be ideal platforms for men to engage in debate and peer to peer education. Male participants in Lwambo’s study “claimed they were more likely to internalize content communicated in this setting, as it allows them to weigh different options and

actively participate in discussions with other men whom they know and trust". This implies that in Nyeri County, *boi*-style settings can probably be used as platforms for sensitizing men on behaviour change and the importance of being good role models.

#### 4. Conclusion

The findings of this study revealed a high prevalence of provider and decision making roles in Nyeri County where wives have become the primary providers and decision makers in almost 50% of the families. However, reversal of childcare and home keeping was minimal. This implies that responsibilities of women have increased while those of men have decreased. This may have negative implications on marriage and the psychological well-being of both spouses especially in a patriarchal community like the Kikuyu.

The study also found that socio-cultural factors especially alcohol abuse and inadequate socialization of men have contributed more to the reversal of male roles. Psycho-social interventions such as introducing family life education, marital counselling and reverting to traditional Kikuyu socialization practices ranked higher than socio-economic interventions such as eradication of poverty by creating employment in the rural areas. This suggests the urgent need to mobilize community elders to revisit the issue of traditional socialization practices in order to prepare young men and women for marital roles.

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