



## KOTOSA: PALAVERS UNDER THE MANGO-TREE

Kotosa is a documentary, directed by Ronnie Ramirez, about Sub-Saharan elderly in Brussels, Belgium. The film is the result of a co-creative process between the (former) Brusselse Welzijnsraad and the self-organisation 'Ntiya Mangulu' (Flowering Mango tree).

Kotosa means 'to respect' in Lingala, one of the four official African languages in the Democratic Republic of the Congo. Congo is a large country in central Africa and is a former colony of Belgium. Both countries share a turbulent and at times violent past. The traumas of colonization and the chaos of post-colonial Africa are still very much alive in the minds of the Congolese.

In this article we want to give you a small introduction on elderly in Brussels and Sub-Saharan immigrants (Sub-Saharan Africa is the area of the continent of Africa that lies south of the Sahara). Afterwards we'll explain the goal of the film and highlight some topics of the documentary.

### Elderly in Brussels

In Brussels almost 30% of the elderly (65+) have an immigrant background. Within a decade this ratio will increase to 50% of the elderly. These elderly immigrants are a very diverse group. The biggest group are the West-European elderly (French, Dutch, German) followed by the South-European (Spanish, Italian, Greek), Moroccan and Turkish elderly. Asian, Latin-American and African (Sub-Saharan) elderly are a small portion of this group. So Sub-Saharan elderly are not a particularly big group, but they are diversifying and growing fast.

Sub-Saharan immigrants are known to have specific medical frailties like sickle cell anaemia, hepatitis-B and HIV/aids. Women of Sub-Saharan origin are also confronted with specific issues like female genital mutilation and women emancipation. Quite a lot of self-organizations in Belgium work on these various topics. However they are not so familiar with age-related diseases like dementia nor with the concepts of nursing homes, day- or homecare for the elderly, or new trends like co-housing.

## **White clients, coloured staff**

In comparison to our neighboring countries the Netherlands and Germany, we feel we are lagging behind on accessible care for immigrant elderly. Ntiya Mangulu and the Brusselse WelzijnsRaad have been working on this issue for 19 years and we still don't experience real progress. Barriers remain very high.

These barriers are even more distinct when you look at the 'clients' and caregivers of Brussels' care-organizations. Most of the elderly using these services are white, whereas much of the staff has an immigrant, in particular a Sub-Saharan, background.

Sub-Saharan immigrants are often highly educated. One of the biggest issues is the non-recognition of their professional skills and diplomas in Belgium. There are doctors, PhD's, engineers, etc... who find themselves obliged to take lower skill jobs like housekeeping or care worker. According to research one third of all women of Sub-Saharan origin has worked as housekeeper, in childcare or as a care worker. For some people, becoming a care worker is the only achievable job goal.

## **4 testimonials in the spotlight**

At the start of this project, we believed it was interesting to search for people on a "cross-road": nurses and care givers of African descent, working in Brussels in the 'white' environment of classical, home care and nursing homes. We found five women, of whom 4 are testifying in the documentary; Angélique, Espérance, Hélène and Marie. They work as a nurse, a volunteer, a social entrepreneur, an intercultural mediator and a care worker. They are active in self-organizations, and some of them are still very active in their homeland. They are in a unique position to reflect upon the two cultures in which they belong, and by doing so they can offer a mirror of reflection to the care organizations.

## **The African respect for the elderly**

A widespread African phenomenon is the way elderly have a deciding role in community life. The village elders give advice to the younger ones and have an influential role regarding important decisions in their community. 'Kotosa' means 'to respect', but it also means 'to obey'.

Remarkable for me is the sincere joy of life and even the joy of aging, which is celebrated by 'palavering', dancing and singing together, showing off colourful dresses and haircuts, even at an advanced age.

In the documentary we meet the mother of Angélique. She is over ninety, and looks amazing with her purple dress and head scarf. It is as if her image is crying out to us all: don't put me in a grey and boring nursing home!! "They view their old age and coming death in a very open, respectful and peaceful way" Angélique says.

## **Animism and the cultural clashes with western medicine system**

Hélène tells us that a lot of Africans, whether Christians or Muslims, are in different degrees familiar with or believers in animistic religions. 'Animism' is the belief in different spiritual powers in nature and it is older than Islam or Christianity. Caretakers should be aware of animistic beliefs especially regarding their interpretation of health, sickness and treatment. For example, the use of medicinal plants and the role of healers should be taken into consideration.

Hélène shows us how the western medicine system has its own culture. It mainly focusses on somatic diseases and therefore on physical solutions by medication or surgery. In a western context, social and family conflicts and psychological problems need a separate professional: a psychiatrist, a psychologist or a life-coach. Traditional African medicine is holistic: one therapist treats all these problems because the problems, in their view, are interwoven. So psychological or psycho-somatic problems are often not recognized, because they are viewed in relation with the physical diseases.

## **Racism**

There is a very important issue in the film which raises a lot of debate: that of racism and discrimination in the care sector. Angélique, Espérance, and Marie, have all been subjected to racism. For Marie the racism is so bad she only wanted to testify anonymously. The fifth person, Monique, eventually chose to be edited out of the documentary. It is evident that good care is not compatible with racist attitudes and behavior. They witness explicit racist behavior from patients towards 'black' nurses but also from (white) nurses towards (black) patients. Even their co-workers make racist comments from time to time.

Racism can also take a more 'implicit and more structural' form "like when management puts 'black' nurses with the black patients" as Marie says. They do it with good intentions but the effect can be hurtful.

## **Behind the camera**

Africa is undergoing new trends, for example urbanization. Many young people migrate from the rural areas to big cities, in search of work and a better life. "Traditional village-life with the typical solidarity between generations is in decline in Congo" Angélique says. On her last trip she witnessed elderly being abandoned because the children are out working. These trends are shocking for elderly immigrants because it is in stark contrast of when they were young. Solidarity was organized in a traditional, agricultural community, where care was organized communally: like the providing of food, the care for psychological problems, the care for children, the care for elderly. Alas this is changing in their countries of origin.

The trends and developments in Africa are unravelling at the same time as events like war, corruption, climate change and epidemic diseases ravage the continent. Ripples of these events even perspire in our small group where the war between Ruanda and Eastern-Congo, was a subject of debate. Emotions and traumas of war are very hard to leave behind. We thank Espérance, Monique, Hélène and Angélique so much for being able to work together despite the painful and bloody situation in Eastern-Congo.

Espérance has experienced the destruction of the war in Ruanda first hand. She fled her country at her 30s. This is a trauma that ruined her life and dreams of starting a family. She is confronted with all kinds of problems adjusting to the society she's living in. At the same time she is struggling with her African heritage. "In African communities not having children is like being cursed" she says "a lot of Africans look at it as a punishment from God".

The experience of racism for Angélique has a direct link to the traumas of colonization. "This is very important for the current elderly" Monique, who has been cut out of the film, said. "White' elderly in nursing homes or home care look at the African staff as 'their boy, their servant". Angélique also assumes that this feeling of being 'inferior' is an internalized relic of colonization which prevents Africans to really stand up for their rights and their place in society. They lack self-esteem and assertiveness to really affirm their presence, citizenship and competences. "Where is our place in this society, I don't see it" she asks with a pessimistic tone.

### **How do we proceed with the movie?**

We feel that there is still an enormous amount work to do. After watching the documentary one can only wonder: where is the light at the end of the tunnel? Is it really that bad? Is the trauma of colonialism still present?

It is difficult to raise awareness for the issues in the film in times were 'optimism is a moral duty' becomes the new creed. Popular opinion in Belgium says that immigrants complain too much. We really struggled with this conundrum when making the documentary. Eventually Ronnie Ramirez chose not to weaken the message, because the situation for black (elderly) in the care sector is really not good at this moment. Angélique tries to anticipate to this critique, "We have to fight for our place in society" she says "Of course not by violence but by coming out on the streets, showing our competences". By making this film, we're trying to show that we, as a group, are working together for a better world.

The documentary raises a lot of issues for debate. That is what it is meant for. It is a movie that points out some problems, which holds up a mirror for the western care taker. The aim is to stimulate self-reflection, to open the eyes, to point out blind spots. The aim is eventually to stimulate a culture of active listening to the lived history and the specific needs for the elderly immigrants.

We go 'on tour' to churches, care organizations, social service centers and classrooms. The documentary is subtitled in four languages: Dutch, French, English and Spanish. Please do not hesitate to contact me.

*Els Nolf*

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