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In African societies, discourses about “disability” have changed due to cultural differences and historical processes. In this regard, it is necessary to understand the local trajectory of the discourse of charity and aid to the weak, which gradually gained legitimacy as Islam and Christianity spread. In this paper, I focus on people living with disabilities and their relationships with others among the Baka hunter-gatherers and the Bantu farmers in southeastern Cameroon. I also explore the role of the expectations imposed on these individuals based on their local context and historical background. First, I attempt to redefine the concepts “disability” and “sickness” in the study area based on the experiences of my informants. Next, I focus on the framework of “people with disabilities” (*les personnes handicapées* in French), which has become more widespread in the study area, and I consider the social background from two perspectives: (1) efforts of the national and international society, and (2) charitable activities by missionaries. Finally, I suggest caution when allowing outsiders to make distinctions and to define standards for local people and local communities regarding disability and sickness.

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1. Introduction

The media tends to promote an image of an “uncaring Africa,” in which the poverty-stricken people of Africa lack extra resources to care for others and leave the most vulnerable members of society, individuals with disabilities, to fend for themselves. Additionally, some reports of canonical international organizations often note a discourse that disability in Africa is associated with “curses” and “sin,” leaving the impression of the “hidden disabled” who are concealed from the public and neglected by communities, leading many casual observers to believe that it must be difficult for disabled people to live in Africa, especially in the African forests.¹⁾

Since 2006, I have conducted fieldwork in the rainforests of southeastern Cameroon, which is inhabited by the Baka hunter-gatherers and some Bantu-speaking farmers.²⁾ In contrast to this image of the “hidden disabled,” I have met individuals with disabilities participating in “ordinary” daily activities, such as agricultural work and child-rearing. I have witnessed a woman with paraplegia using a machete to perform farm work and a man with a visual impairment walking through the forest using a cane. People with physical disabilities must obtain multiple forms of assistance from community members to perform the activities of daily living (Toda 2011). Thus, these individuals become more “social,” because they engage in more intimate and meaningful relationships with their neighbors than do able-bodied individuals. The traditional structure and social composition of Baka or Bantu society significantly influences these relationships.

1.1 Study Area

My field research was conducted over two years in 13 villages in the Boumba and Ngoko Department of the East Region of Cameroon (Figure 1). The site is located on the northwestern edge of the Congo Basin. Here, the Baka people, a pygmy hunter-gatherer group, live side-by-side and interact closely with people from a number of language groups who primarily practice shifting agriculture.

The relationship between the “forest world” of pygmies and the “village world” of agriculturalists or farmers, to use Turnbull’s terms (1962), has a history characterized by ambivalence. It has been described as, at times, cooperative: a mutual dependence based on the exchange of forest products and agricultural goods and fictive kinship relationships among certain pygmies and farmers; at other times, it has been antagonistic, due to exploitation of the pygmies by the farmers and the dominant-subordinate relations accompanied by a hierarchical relationship based on employer-employee relations.

Before the French colonial era, the Baka were engaged in a nomadic life of forest camps. The Bantu had been living in settlements in the forests. After the

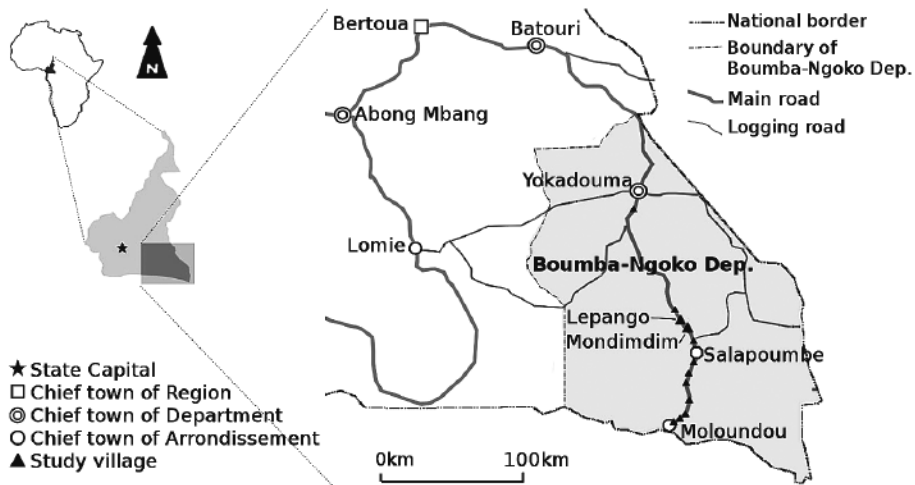


Figure 1 Study Site (Boumba and Ngoko Department)
Source: Made by author based on Institut National de Carthographie (2010)

1920s, Bumba-Ngoko became a colonial Arrondissement in French Equatorial Africa, and missionaries arrived in the region. In the 1930s, the French government introduced cacao cultivation, and the Bantu sedentarized along the roads and cultivated cacao. The Baka earned an income by working in the farmer's cacao fields. Muslim merchants, such as the Hausa people, opened a regular market and local populations started to get some daily necessities there. After the second policy of resettlement in the 1950s, the Baka started to live along roads. The Baka began to use cash regularly in the 1970s. Since the 1970s, timber logging companies have expanded in eastern Cameroon, and so has the poaching and trading industry. Also in the 1970s, a full-scale Catholic missionary aid began for the Baka people.

Today, the Bantu farmers and the Baka hunter-gatherers work together in a clear employer-worker relationship. The Baka provide the Bantu farmers with labor, in exchange for which the farmers pay the Baka with cash, agricultural goods, or liquor. Although the farmers and the Baka live alongside each other, negotiating on a daily basis, there is a clear social boundary and hierarchical relationship between the two groups, as seen in their residential arrangements and the selection of marriage. Their habitat is clearly divided along ethnic lines, and marriage between the Baka hunter-gatherers and the Bantu farmers is very rare, occurring only when a Baka woman marries a Bantu man. Moreover, Bantu individuals can become village chiefs in this region, but Baka individuals cannot hold these positions. The political and economic advantages of the farmers, who have relatively high adaptability within the macrosystem. Nonetheless, the Baka hunter-gatherers and the Bantu farmers, while holding mutually ambivalent feelings of discrimination

and respect, of affection and hatred, have established a necessary relationship of interdependence between their cultures and lifestyles.

It was in the context of such complex inter-ethnic relationships in the study area that I met my Bantu informant, Dieudonné,³⁾ and Baka informant, Djema, in 2006. Dieudonné was paralyzed from the waist down and, as a consequence, moved around the village using a manual wheelchair. He was always accompanied by a young Baka boy named Martin, who played every day with Dieudonné's daughter as if they were brother and sister. Dieudonné explained that he felt safest when he was with the boy, and he had the boy accompany him when going to the field to harvest cacao or to friends' houses in other villages. A Baka informant, Djema, works in the kitchen or house of Bantu. My informants were closely connected to other ethnic groups in their daily activities.

In this paper, I focus on these two informants: Dieudonné and Djema, as well as another Baka men named Avanda and Jean. I describe how they subsist on a practical level and how their local context and historical background exerts certain expectations on these individuals. First, I attempt to redefine the concepts of "disability" and "sickness" from the experiences of my informants.

2. Who is Disabled?

Impairments of the mind, the senses, and the motor functioning of the body are found in all societies. There are people everywhere who must live with biological defects that cannot be cured and which inhibit, to some extent, their ability to perform certain functions. However, the significance of a deficit always depends on more than its biological nature; it is shaped by the human circumstances in which it exists. Disability, as a category of discourse, is foreign to sub-Saharan African thought (Burck 1989; Devlieger 1995; Devlieger et al. 2006). It is fundamentally a Western category that should be understood as a result of historical developments between people and society, and particularly between people and states. Words referring to the concepts of "handicap" or "disability" simply do not exist in African languages. However, while a category of disability does not exist in the African language, it should be stated that concrete translations for disability (physical impairment, blind, deaf) do exist.

The first issue that engaged me during my fieldwork was the ambiguity of the distinction between "sickness" and "disability" that was pointed out by some anthropologists (cf. Devlieger 1995). People who were introduced to me by villagers as *wà pòà*, meaning "people with a physical impairment" in the local language, could suddenly start to treat their impairment as a disease. Here, I would like to introduce an example, an occasion when I met a marabout, a traditional Islamic healer, for the first time in a village, which occurred when I stayed in the

village during the third period of fieldwork:

One day, a marabout clothed in Islamic costume visited the Mondimdim village. Many villagers had been waiting their turn in a queue to consult the marabout about day-to-day events or their illness. Two women were deemed to need traditional healing by the marabout and went to the neighboring village with the marabout for the treatment; one woman was elderly and suffered from asthma attacks, and the other was a woman who had twice had abdominal operations but now complained about a stomachache. When I went to see how they were doing, the marabout was treating a paraplegic boy who I had met for an interview before in an obscure part of the village. I asked, “Why not go to the hospital?” because I knew there was a Catholic missionary hospital in Salapoumbe, a town 12 km away. The marabout said, “It’s because there is a cause for this.” And people said, “This should be cured here (in the village).”

(Field notes, January 1, 2009)

The boy was a farmer living in a village near Salapoumbe. He could hardly walk as a result of paralysis, which he had since birth. I thought that his family would shortly find it difficult to carry him on their backs, once he had grown a little more. I could not find any meaning in the treatment by the marabout and could not be convinced that it required the same amount of money as the medical expenses of the missionary hospital or rehabilitation facilities. Above all, in his case, it seemed to me that efforts at adapting and improving his living environment (in other words, accommodation) would be important. For his family, however, the biggest concern with his disability was to answer the question “Why?”

This interest in the cause of disability, as though it were a disease/illness, dictated the treatment. In other words, an interest in the cause of disability shaped the practice of dealing with disability. I had thought of “disability” as something other than “disease/illness” and considered that it was difficult to heal a disability; when thinking of disability, my response would be an interest in adapting to the environment and society. The experience in Cameroon told me that such thinking was nothing more than a stereotype.

2.1 Sickness and Disability in the Study Site

How people with mental and physical impairments, in other words “people with disabilities,” are recognized and identified within a certain society is greatly affected by the society’s culture. In some case studies of non-Western countries, it has been noted that “disability” is not linked to any categorization or identity and has not yet become a cultural construct (Talle 1995; Last 2000). For example, Helander (1995), who carried out field research in southern Somalia, notes that there is no clear distinction between disease/illness and disability [impairment] among the Hubeer, a group in the Bay region of southern Somalia, and that “the

practices and ideas surrounding disabled people can be described within the framework of health seeking and health management through which all health problems are processed.” (Helander 1995: 89). This means that disability is socially created through a process in which it is related to normal disease/illness. Below, we will look at the situation from the life history of my informants.

The disability of Avanda, an elder of Baka, reveals a process through which there was a change in the social recognition of a normal illness versus an illness that was difficult to heal:

Avanda and his son had been suffering from a disease called *yoli* in the Baka language since around 2004. A *yoli* is “an imaginary animal with a snake-like body, changes its body color like a rainbow and speaks any language. It is believed that *yoli* living in the forest invades the body of a passing victim and causes an illness which trembles the affected part” (Sato 1998: 39). They have undergone treatment using an herb called *toma* in Baka (*Pachypodanthium staudti*) from a healer (called an *nganga* in Baka) and his wife. Although the son recovered, Avanda remained rigid in both his fingers and knees.

(Talk with Avanda and his family on January 1, 2007)

In recent years, there has been a rumor that he has not recovered because the cause is sorcery, *kò-nà-mbù* in Baka.

(Talk with a Baka man in a neighboring settlement on June 11, 2009)

It is a mystery to me that the *nganga* diagnosed the same illness for Avanda and his son, because I know that his son walks without any difficulty. They understood only that the sickness of Avanda was not cured and that the etiology was sorcery by someone unidentified. When I visited the village 10 months later, in February 2010, Avanda stayed for treatment for sorcery at the house of a friend, a Bantu male he had known since they were in elementary school. Avanda said that he must be hated by someone, because his son is a clever Baka who can go to high school. He had been living in the same house for two weeks, waiting on a healer coming from Yokadouma, about 120 km away. However, his Bantu friend told me secretly, “The healer did not guess the real cause of his illness. For this treatment, I have a feeling of distrust.”

When these kinds of symptoms happen, it does not mean there is not a definite common perception of them. People who cannot move their legs, such as Avanda, are called *wà kùmà* in the Baka language. This much is certain: *wà kùmà* has been recognized as one of the most common physical impairments.

Djema, a Baka male, has clouded eyes and declining eyesight, perhaps because of cataracts. He is a man in his late 40s. After his mother divorced his father, Djema traveled from a group of villages about 120 km away, near the town of

Molondou, to his maternal village. He met his wife in her father's village, and now he lives with his wife and two daughters.

Djema often visited the farmers' settlement, occasionally with his wife, where he did domestic labor and drank liquor from the farmers. His eye[sight] is impaired; it had become a routine for him to walk around the village with a stick of wood. A Bantu man in his 40s who lived in the same village said, "Djema can walk freely with the cane because he was born blind."

(Field notes, July 2007)

In fact, Djema said his eyesight had gradually declined in the last seven to eight years, when he was married and his wife gave birth to their daughter. The first time I met with him in 2007, his eyes were getting worse. He could not even see people who were talking to him. He could see light with his right eye, but he said that he had never visited the hospital and had called the *nganga* to treat his eyes.

(Talk with Djema and his family on June 27, 2009)

For Djema, his impairment was nothing special. Among the villagers, his blindness was treated as a matter of course, and the cause of the illness was not explored by Djema or his family. By contrast, a Bantu man called Banguie, who was the fourth son of a pioneer of Mondimdim village, experienced serious family problems, due to the community's perception of his blindness:

Banguie was born in Mondimdim village in 1972 to Kako farmers. He made a living in cacao farming [on land] inherited from his father and from fishing. From 2006, his vision gradually decreased. He ground some herbs and dropped them into his eyes every day. His wife and mother also went looking for herbs on a daily basis, because his eyesight improved. His seven brothers and sisters living in the village were worried that he did not leave the house. By 2007, his relationship with his brothers and sisters seemed to change for the worse. In January 2007, a young farmer died in the village connected by paternal relatives to people 50 km away from Mondimdim. The adult males in the village decided to go to the funeral. When they had a meeting in the assembly house, his big brother said, "Some male needed to stay in the village, because there are only women, children, and handicapped in [the] village." Banguie resented that remark and left the place. A year later, he moved to the home of his wife, with his wife and daughters, because his eyes had got well in Mondimdim village. After that, he did not go back to Mondimdim village. The people of Mondimdim village said he would never come back.

(Field notes, January 2007 and December 2008)

In the region being studied, there is a word that means "*l'infirme* (people with a physical impairment), or *mal-formation* (deformity); *corps courbé* (people with the curved body)." This word is *wà póà* in the Baka language and *mo j'emti* in the Kako language. Djema and Avanda are both *wà póà*. In addition, those who have

difficulty moving are referred to in Baka as *wà kùrà*, meaning “people whose legs cannot move freely.” However, these local terms, *wà pòà* and *wà kùrà*, which are used to indicate that people “don’t work” and “cannot see,” are not used as the generic terms for such people in everyday conversation. Avanda has been recognized as *wà kùrà*. His age was about 50 years old, who has not reached the age of elderly in Japan. According to Bundo (2001: 53), the generation when their strength was declining and they could not work like before is called *bekwa* in Baka. Avanda has been treated like *bekwa*. Practically, he could hardly move because of his paralysis and sat at the assembly house (called *mbanjo* in Baka) all day. There were constantly Baka’s adolescents and children around Avanda every day. Baka people gathered at the *mbanjo* where Avanda was if any matters came up. Seeing him like that is dignity. The social position of Baka elders, including Avanda, in their villages and in their families were not determined unconditionally by the presence or absence of disability.

Talle, a Norwegian social anthropologist who carried out field research in the Masai residential area of Kenya, explained that the term used to translate the English word “disabled” actually refers to a lizard that walks in an awkward way (Talle 1995: 59). She reported that, while the Masai are aware of various kinds of functional damage, one word does not exist as such to encompass the idea of “disability.”

Such a recognition is not a minor concern for me, living in the village as a researcher. I felt uneasy with the French term *handicapé*, used by the farmers when they spoke in the local languages (Baka and Kako), particularly as in the case of the pre-funeral meeting, referring to Mr. Banguie. Because a foreign language has suddenly appeared in dairy conservation in the village, I feel that a new framework of *les personnes handicapées* has been introduced. What is the social background, then, that gave rise to the term “disability”?

2.2 Framework of Disability in Cameroon

Oliver (1996), a British scholar of disability studies, has described the developmental process of the category of “disabled” in connection with the establishment of the capitalist market. This word exists, Oliver claims, due to the capitalist labor market, in that there needed to be a clear distinction between the “person who should work (workers)” and the “person who cannot work (non-workers).” At the same time, the “normal person” was established in the community, and anyone who could not be a “normal person” was considered to have a “disability” and was reduced to being treated in the same manner as children or the elderly would be treated (Oliver 1996). Stone (1984) also analyzed disability as a category in the social welfare system of the state. Stone argued that the category of disability in the early stages of capitalism made it possible to

develop the labor force and is therefore essential for the country as a means of managing the supply of labor, even today.

The framework of the “disabled” was unlikely to exist in African countries as a way to engage livelihoods among the community. Modern history has shown, however, that African countries are already approaching the Western view of disability. In many African countries, the Western framework of the “disabled” (or “handicapped”) has been introduced through colonial policy. In Cameroon, after independence, social welfare was modeled on that of France’s, during the colonial era. Under the intervention of the United Nations, the framework of *les personnes handicapées* spread along with the international movement for the rights of persons with disabilities.⁴⁾ The literacy rate in Cameroon is high compared to rates of neighboring African countries (Oda 1986: 84-85); in the region under study, primary schools teach only in French. The Bantu farmers and many Baka men also speak French. The word *handicapé* is thus known in the village. A primary school teacher (a male Kako farmer) explained to me that *wà pòà* and *mo j’emti* are the general terms used to represent *handicapé* (February 12, 2010).

3. Subsistence of People with Disabilities

In this section, I describe how individuals with disabilities subsist and explore the expectations exerted on these individuals based on their local context and historical background. Then I will provide an overview of livelihoods in the study area.

3.1 Ownership of and Cash Income from Cacao Fields

Bantu farmers practice shifting agriculture for self-consumption and cultivate cacao as a source of cash income. In addition, they acquire the provisions needed for daily life through hunting, gathering, and fishing, among other activities. Meanwhile, the Baka people, since their sedentarization and agriculturalization, primarily live along main roads and engage in agricultural activities in villages. However, even today, the Baka continue to practice hunting, gathering, and fishing during the dry season, and these forest activities retain an important place in the livelihoods of the Baka people.

The main source of cash income in the study area is the sale of cacao beans. The purchase price of cacao varies annually and increases steeply with later harvest periods. In February 2010, I asked the heads of households who are primarily engaged in cacao cultivation about the harvest volume (unit = bag; one bag = 80 to 100 kg) and the selling price at the time (price per kg changes monthly), and I used this price to estimate annual income from cacao yield in 2009. Approximately 53% of Baka households (25 of 47) and 61% of farmer’s households (27 of 44) own cacao fields. Although the Baka practiced hunting and

gathering as their main livelihood in the past, at present, the number of cacao field owners is increasing. That said, the cacao fields owned by the Baka are smaller than those owned by the Bantu farmers. Accordingly, the mean income of the Baka (141,444 CFA franc⁵) is lower than that of the Bantu farmers (255,580 CFA franc). Furthermore, 21% of the cacao fields owned by the Baka (as compared to 7% of those owned by Bantu farmers) rely on the system known as “location” and are loaned out to others. One potential reason for this is the fact that continued maintenance of the fields may be difficult for the Baka who have few resources. In addition, because the fields held by the Baka for staple crops are of insufficient size, the Baka acquire most of their subsistence crops by helping the farmers perform farm work.

3.2 Livelihood of People with Disabilities in Village

Before examining the livelihoods of individuals with specific disabilities, it is helpful to first identify the characteristics of livelihoods practiced by Bantu farmers or Baka individuals with physical disabilities based on a wide-area survey. Data regarding the livelihoods of individuals with disabilities in three villages in Yokadouma Arrondissement and 10 villages in Moloundou Arrondissement in Boumba-Ngoko Department were collected through direct observation and interviews. Because the study subjects were identified based on villagers’ reports, the Baka with physical disabilities, referred to as *wà pòà* in the Baka language and *mo jémtí* in the Kako language, did not include individuals with light physical disabilities, such as partial-sightedness, and was biased towards individuals with severe disabilities such as motor dysfunction of the lower limbs and complete blindness. In order to maintain compatibility of data, individuals with speech impediments and visual impairments due to old age were excluded, leaving Dieudonné, Djema, and Avanda in Mondimdim and Lepango village. The interview sample included 15 male farmers, nine female farmers, 13 male Baka, and seven female Baka.

In the interviews, the interviewees were asked to report their most frequently used method of securing food. It was found that the farmer individuals with disabilities either supported themselves or were supported by the family members with whom they lived. Many of the farmers, both men and women, responded that they supported themselves, at least in part. Specifically, many of the farmer men responded that they supported themselves by earning cash income. Nine of the 11 farmer men aged 16 and above, excluding a young man who had migrated from the Central African Republic to work and a man who repaired and maintained cars, owned cacao fields. Many of these individuals also owned cassava, yautia (*xanthosoma* spp.), peanut, and maize fields. While many had inherited the fields from their fathers, there were some who were trying to expand their holdings by

buying land using cash earned from their cacao fields. For example, the male chief of Y village, one of the farmers of the Bangandou people had a paralyzed right leg but was living with his five wives and more than 25 children and owned an enormous field.

In summary, the results of my survey indicate that Bantu farmers with physical impairments are included by their families in the farming and that most male farmers with disabilities also have cacao fields that they cultivate as a cash crop. In contrast, Baka individuals with disabilities sustain themselves with food provided by their extended families and by working in the farmers' villages; able-bodied Baka hunt and gather food in the forest. In the following cases, I focus on two informants: a Bantu man, Dieudonné; and a Baka man, Djema, to describe in detail how they subsist and earn an income.

Case of Bantu male: Dieudonné, a cacao field owner

Dieudonné is a 33-year-old Bantu man who lives with his first wife, who is Baka, his second wife, who is Bantu, and their five children. He inherited his father's farm, a 2.5 ha cacao field. His cacao harvest in 2009 was five bags (total range: between 400 and 500 kg), worth approximately 260,000 CFA franc. He is also the only tailor in the village, and, between 1999, when he bought a sewing machine, and 2006, he had tailored clothing for 62 people, from which he had earned an income of approximately 190,000 CFA franc. He explained that his work in the village as a tailor was an important source of cash which he used to support his cacao production.

Cacao fields are passed down from fathers to sons, and the choice of who receives what can be adjusted within the family according to each individual's needs. The field inherited from Dieudonné's father is located adjacent to the road, approximately 1 km from home. Although the cacao field owned by his father is larger, it is necessary to walk more than 200 m through another person's overgrown field to get to it, which would make it inconvenient for Dieudonné, who gets around using a manual wheelchair, to access. For that reason, Dieudonné's father gave him a smaller field with easier access.

The presence or absence of disabilities does not influence the ownership of cacao fields. However, it does not change the fact that farm work may be difficult for individuals with specific impairments. Cacao trees bear fruit on branches and trunks between one and five meters above the ground. The work of harvesting cacao from high branches using a long pole was extremely difficult for Dieudonné, who is paralyzed below the waist. For that reason, Dieudonné enlists the help of young Baka men during harvest season:

In early September at the start of the cacao harvest season, Dieudonné went to the

cacao field in his wheelchair every day along with four or five Baka individuals. Upon arriving at the field, under Dieudonné's directions, the Baka youth harvested cacao from high branches using long poles that were two to three times their height. Dieudonné cracked open the cacao pods using a hatchet and collected cacao from low-hanging branching (Photo 1). Dieudonné paid 1,000 CFA franc per day to the Baka as wages.

(Early September 2007)

Dieudonné receives help from the Baka not only during the harvest, but at all stages of cacao production, including field clearing, cacao fruit inspection, and the application of chemicals (Table 1). The harvest work, lasting five hours each day, was repeated day after day. Both the Baka youth and Dieudonné were exhausted. The cacao harvest season is the busiest and most difficult season for male farmers.



Photo 1 Cacao harvest work. Dieudonné (left) collecting low-hanging cacao fruit using a machete and a Baka youth (right) harvesting fruit from a high branch. (Photographs by author, September 2007)

Table 1 The harvest work of Cacao for Dieudonné

Activities	Place	Weight of Labor	Working Hours	Main Provider
Field Clearing	Field	++++	1~2 weeks	Bakas
Checking of Cacao Beans	Field	+	1 hour per day	Bakas, self
Pesticide Spray	Field	++	2~3 days	Bakas, self
Harvesting	Field	+++	1~2 weeks	Bakas, self, wives
Drying of Cacao Beans	House	+	2 weeks	Bakas or wives

Source: Author's field work

Heads of households secure labor outside of family members through various means, including paying money and handing out liquor. In addition, it appears that the relationship between Dieudonné and the Baka is not limited to agricultural work. Such employer-employee relationships between the Baka and Bantu farmers observed during the cacao harvest season are not limited to individuals with disabilities, such as Dieudonné, and are quite common. Often the Baka assist persons with physical disabilities as they engage in various activities. Here is an example of this relationship outside agricultural work:

Two Baka who lived near Dieudonné's house (Martin and Nestor, although they are young men, because they began to attend school late in life, they are still in elementary school) harvested 19 yautias from Dieudonné's field on their way home from school in the middle of Mondidim village. Dieudonné, divided the yautia into four piles, taking 10 for himself and his wife and giving the remaining 9 to the two Baka. Thereafter, the Baka youth hung around the *mbanjo* of Dieudonné's settlement for a long time, going to draw water for Dieudonné and helping him service his wheelchair (greasing and washing). They returned to their own (Baka) settlement only in the evening after six o'clock.

(February 22, 2007).

If labor depends on "individual ability," the subsistence activities of people with physical impairments would be remarkably difficult in a society that makes a living by farming and by hunting and gathering. However, subsistence activities, such as farming, hunting, and gathering, are carried out in the context of face-to-face relationships. Furthermore, the key elements of economic relationships between the hunter-gatherers and farmers take place locally, which benefits people with disabilities.

Case of Baka male: Djema (visually impaired)

Mobility within the forest environment is an important part of contemporary life among the Baka, including subsistence activities. Meanwhile, the Baka people, since sedentarization and agriculturalization, primarily live along main roads and engage in agricultural activities in villages. However, even today, the Baka continue to practice hunting, gathering, and fishing during the dry season, and these forest activities retain an important place in the livelihoods of the Baka people. In this context, during periods when others would be in the forest hunting, Baka individuals with impaired vision or movement spent their time in farmer's settlements securing food by helping with farm work. Here, I would like to examine the livelihood activities of Djema, who is visually impaired, is married, and has two children, in the permanent settlement:

The goods acquired by Djema and his wife today included a meal prepared by farmers, luxury items, such as tobacco leaves, and three glasses of liquor, and seven plantains. The farmers know of Djema's fondness for such luxury items and provide him with liquor and tobacco as well as agricultural crops. And, in this manner, the farmers are able to secure stable assistance in housework and/or field work. Meanwhile, from Djema's standpoint, the majority of items provided by the farmers are consumable goods that he often distributes to others on the way home. Accordingly, it would be difficult to describe such activities as work that enables stable household maintenance. However, a different picture emerges if we look at Djema's relationships with not only farmers but also with other Baka who are a part of his kinship group.

(June 12, 2009)

Even today, the nomadic life in the forest remains an important element of Baka life. Accordingly, the fact that no special consideration is given to individuals with disabilities in Baka society undoubtedly makes it difficult at times to secure caregivers for individuals with disabilities. If Baka individuals with disabilities were to rely solely on family members for regular care, the family members would have to change their seasonal livelihood cycles, which could result in tension within relationships. The choice of a Baka with a vision impairment, such as Djema, to not rely solely on his family but, rather, to adopt a lifestyle that takes advantage of the Baka-Bantu relationship of employee and employer can be said to be a strategy to avoid the creation of tensions related to his care within his own Baka community.

The life in permanent settlements of individuals with disabilities, such as that introduced in the example described above, would appear to be one that is cut off from the forest world. While it is certainly true that it is difficult for such individuals to function as hunter-gatherers, they are, by no means, completely cut off from the forests. This point is illustrated in the following example:

Djema came to the agricultural camp in the forest on June 9, 2009 along with community members (with whom he had lived in the permanent settlement up to 2008 and lived apart from as of 2009). The 7 km trip from the permanent settlement to the forest camp takes Djema four hours on foot. In the camp, Djema and his wife cultivate cassava and plantains.

(June 27, 2009)

In contrast to his life in the permanent settlement, in the forest camp, Djema has spent all day leisurely sitting in the *mbanjo* (assembly house) doing nothing. The Baka males had set traps near the camp, and it was possible for Djema's household to eat bushmeat, which they were not able to obtain in the permanent settlement. It is normal for Djema not to return to the permanent settlement for two

weeks once he has come to the forest camp. On June 30, 2009, a Kako farmer man who had stopped by the camp in the middle of hunting trip relayed a message to Djema that, “Ngombe (male Kako farmer) wants to ask you to mill some cassava.” I returned to the village the following day (July 1, 2009). However, despite the message from Ngombe, Djema did not return for another two weeks.

In the permanent settlement, Djema built a house in which he, his wife, and son reside alongside the main road in a location that is fairly close to the farmer settlement. The persons supporting Djema’s daily activities are his cohabitating family and the farmers. Meanwhile, in the forest camp, he lives and has meals with relatives. There was almost nothing for those with disabilities to do in the forest. However, supporting oneself does not only mean taking part in work. In the forest camp, the ingredients for meals are readily available, and people can enjoy a certain type of leisure. Even individuals with disabilities such as Djema are able to choose how they will live, at least to a certain degree. What can be gleaned from the conduct of their daily lives is that individuals’ lifestyles are not determined by caregiver-care receiver relationships but, rather, that the means of livelihood are determined first and the “care” relationships with those around them are formed only after this determination is made.

Djema occasionally visits the forest camp and settlements and participates in the food-sharing practices of the cohabitating group. Sharing is the primary means of sustaining Baka individuals who have disabilities but who lack cash resources. The Baka currently hunt and gather in the forest for long periods of time on a seasonal basis. On one occasion, Djema’s wife left him in the village and went to the forest camp with her companions for several weeks. Thus, while others hunted and gathered food in the forest, Djema milled cassava at some Bantu houses in exchange for cash and food.

3.3 Subsistence Crossing the Boundary

The term “disability” has been used in the context of justifying the exclusion of individuals with disabilities from society based on low labor productivity (Oliver 1996). If “labor” is taken to mean “abilities,” in societies where livelihoods require physical labor, such as agricultural or hunter-gatherer work, it is extremely difficult for individuals with disabilities to carry out livelihood activities. However, if the ownership of agricultural land by the Bantu males in the forest area of Cameroon and the distribution of food among the Baka is examined, it is evident that there is not a large gap between individuals with and without disabilities. This is the foundation on which individuals in the study area are able to secure their means of survival. Furthermore, the economic inter-relationship of the Baka and Bantu people at the study site plays an important role in the subsistence of people with disabilities

How are individuals with disabilities able to carry out livelihood activities within the context of the previously-mentioned sensitive inter-ethnic relationships between hunter-gatherers and farmers? Compared to able-bodied individuals, individuals with disabilities require help in various situations that arise in the context of livelihood activities. In this sense, individuals with disabilities must develop deeper relationships with those around them. It is the high sociality of such individuals that enables them to cross the boundaries between the hunter-gatherers and the farmers. Having a disability does not result in segregation from society and relegation to a limited space but, rather, opens up new possibilities. In other words, it can be said that disabilities propel individuals in the study area across boundaries into other societies.

Inter-ethnic relationships are the result of the advancement of permanent settlements and agriculturalization, which started in the 1950s (Joiris 1998). However, merely facing one another is not enough to guarantee face-to-face relationships. In this context, the Baka and Bantu individuals can transcend social restrictions by building interpersonal connections. Although the inter-ethnic relationship is asymmetrical, it leads to face-to-face interactions. Thus, the inter-ethnic relationship they foster is characterized by duality, asymmetry, and the ethics of coexistence, which is evident in face-to-face interactions.

This study shows a contemporary phenomenon of subsistence and care being carried out as a result of asymmetric relationships stemming from the mixing of ethnic groups, which is one of the characteristics of African society since the migration of hunter-gatherers to agricultural villages. The resulting sociality of people living with disabilities is dynamically different to those without; therefore, it can be understood that individuals with disabilities, influenced by their own background, now live in communities with their own unique role and expectations.

One specific case: Jean, Baka male who begs

There is an intersection called Carrefour S.E.B.C. about an hour's walk to the south of Mondimdim village. There is a branch of the main road that follows from Yokadouma City to the Republic of Congo and a logging road to the timber company. Some shops and a restaurant for drivers or travelers stand side-by-side there, and it has become a little resort area for the local people. There was always a Baka man in his early 30s suffering from quadriplegia. He sat in the corner of the cafeteria along the road, after begging money from truckers having a meal there.

(September 2007 at Carrefour S.E.B.C.)

His name is Jean. He was born in the mid-1970s in the Baka camps 2 km from Carrefour S.E.B.C. He and his mother said that there was nothing abnormal when he was born, but, around the time he began to crawl, a sorcerer caused his legs and

hands to give out. Today, his mother and brother are not in the camp in the daytime because they go to the cacao fields or hunt and gather in the forest. In the meantime, he comes to this intersection and solicits money or drinks liquor.

According to the story of a Belgian Sister, the mission took him to the rehabilitation center eight years ago. That was when he obtained his wheelchair and began coming to this intersection. He had a job for a while at the intersection carrying luggage using his wheelchair, but – the Sister says – the wheelchair soon broke because of rough treatment. Now, he moves by using his hands; he frequents this place to get goods or money.

The appearance of Baka begging in this region may be partially motivated by two kinds of social change.

(1) Influx of money and outsiders among hunter-gatherer society: Behavior associated with the cash economy

First, since the 1990s, many logging companies have entered the Boumba-Ngoko Department of the East Region of Cameroon (Ichikawa 2006). Consequently, a new relationship among non-local residents, such as truck drivers, arose in this region. The fact that this area has rapidly been incorporated into the market economy has prompted the appearance of those who beg. In that regard, it suggests that Jean cultivates behavior associated with the cash economy, like begging.

According to many researchers of hunter-gatherers, foods obtained by hunting and gathering are thoroughly distributed, and private property is limited among hunter-gatherer societies. As a result of these characteristics, their societies have been described as “egalitarian societies.” Woodburn (1982), who studied the Hazza hunter-gatherers of Tanzania, has described their immediate-return system, in which the rewards (returns) obtained directly by subsistence activities were consumed immediately, as the foundation of “egalitarian societies.”

Today, however, the forest region of southeast Cameroon where the Baka live sees cash from commercial logging (Hayashi 2000; Toda 2014), an active bush meat trade, and the cultivation of cash crops (Yasuoka 2006, 2012). According to Oishi (2012), who studied the cacao cultivation of the Baka and neighboring farmers, the Baka today accept a kind of farming which requires some investment; with cacao cultivation, the harvest (the reward) cannot be obtained immediately, and farmers even need investments, such as pesticides. Meanwhile, Oishi said, Baka society is changing to a “delayed-return system,” with the provision of goods and labor based on and subject to return to the same degree (Oishi 2012).

(2) Baka with disability-oriented charity: Behavior as weakness

The mission has positioned the Baka with disabilities as the “vulnerable who

should receive assistance” and treated them as a target of charity. In the context of relieving the poor in Africa, it can be said that charity for the Baka with disabilities is quite right.

4. Disability and Charity: The Case of Southeastern Cameroon

Next, I explore what “disability” and “charity” mean to the Baka and Bantu people by exploring the local trajectory of the discourse of charity and aid to the weak, which gradually gained legitimacy as Christianity spread. The Mission of the Catholic Church started activities in the 1930s in the forest area of southeastern Cameroon (Photo 2). Two Christian churches had been established in the region: the Presbyterian Church in Cameroon (*L'Église presbytérienne camerounaise*, EPC), which the American Presbyterian Mission advanced from Gabon since 1850, and the Catholic Church, which arrived at Douala in 1883-1884 with the Polish explorer (Lomo Myazhiom 2001).

However, missionaries were sent off to distant locations because of reports of a sleeping sickness epidemic in the 1920s. Since 1925, the French army surgeon Dr. Eugène Jamot and his colleagues had been carrying out screenings of individual with sleeping sickness around Nkol-Mvolan station, near the Abong-Mbang town in the East Region, under the French colonial government. The Presbyterian Church followed and built a missionary station at Nkol-Mvolan village in 1926 and at Momjepoum village near Yokadouma in 1933, as well as at

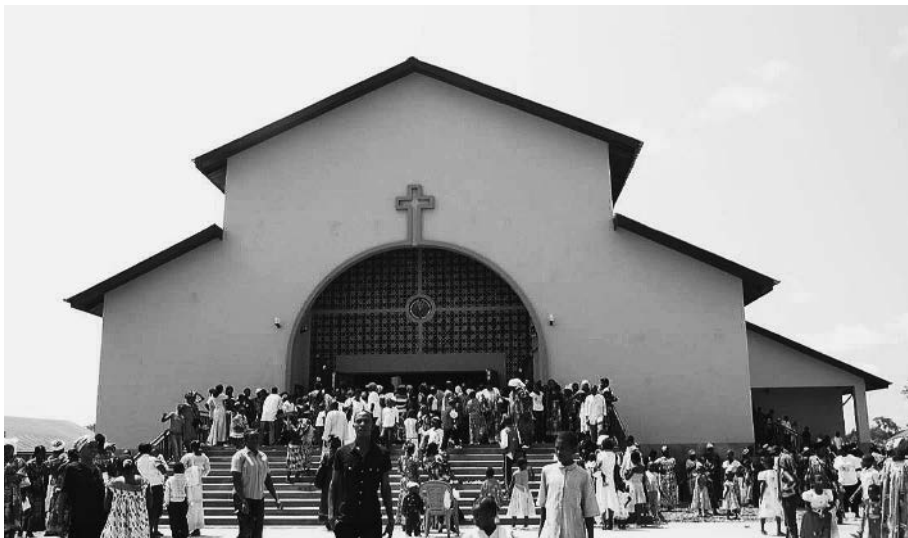


Photo 2 Catholic Church at Yokadouma town. Many believers come to worship on Sundays. (Photograph by author, August 2010)

the chief town of Department, Batouri, in Kadei Department (Messina and Slageren 2005: 93-95). In 1943, a leprosarium was established in Kwoamb Village, 18 km south from Abong-Mbang, by the East Region government, the medical director, and government officials. Father Dhellemmes of Spiritains, a Roman Catholic sect, was appointed the first missionary. Father Dhellemmes completed his mission in the leprosarium in 1952, and he dedicated his service to pygmies as his fundamental mission. Later, Father Dhellemmes wrote in his autobiography:

I [Father Dhellemmes] met pygmies when I took care of leprosy patients there. ... Once I met a man who came for treatment [who] came with a group of men, women, and children who [were] ragged. From curiosity, I asked the man [about the leprosy patients]. He replied, “they are my pygmies ... I own pygmies.” They [pygmies] belonged to villagers, or had been confined in the same way as the goat and chicken. (Dhellemmes and Macaigne 1985: 32), author’s translation)

This situation shows exploitation of Baka by Bantu. The mission emphasizes the need for sedentarization, farming, and school education for their independence from the Bantu. During the 1970s, the Catholic mission began to aid the Baka living along the main road by offering a free clinic and school. The Catholic mission designated the Baka hunter-gatherers as a “Minority People” and has been active in efforts to assist this group. The perception of the Baka as a minority people still exists. Photo 3 shows Children’s Day on 2007. It was held for the Baka children in front of Bantu children, and their families. The mayor and missionary gave notebooks only to Baka children. While the missionary focused on activities for the Baka, the missionary built the Institution for Rehabilitation in the East Region. In 1995, they provided short-term rehabilitation for the Baka children along the main road in the Boumba-Ngoko area.



Photo 3 Separation of Baka as a “Minority People” (Children’s Day at Salapoumbe Town, February 11, 2007) (Photographs by author)

As shown in Photo 4, the Catholic mission in particular provides metal braces and other equipment to the Baka children free of charge, whereas Bantu farmers pay more than 10,000 CFA franc to purchase metal braces for their children. Thus, the aid provided for disabilities and development has different mandates for different groups.

The Catholic mission has designated Baka hunter-gatherers as a “Minority People” and has been active in efforts to assist this group. In this way, these charity activities for the Baka children with impairments as a “minority (disability) among the minority (hunter-gatherers)” have created a new framework of “the Baka with impairments to be serviced” and “many another people with impairments to be not serviced” in the same area where the Baka and Bantu live together. This movement through the missionary charity seems to be giving a new meaning to “disability” in this region, such as in the case of Jean. The mission has positioned the Baka with disabilities as the “vulnerable who should receive assistance” and treated them as a target of charity. In the context of relieving the poor in Africa, it can be said that charity for the Baka with disabilities is quite right.

In today’s context, a new category is being created between the Baka and the Bantu due to the movement of indigenous peoples and the spread of charity. However, I suspect that new discrimination among the Baka and Bantu people may

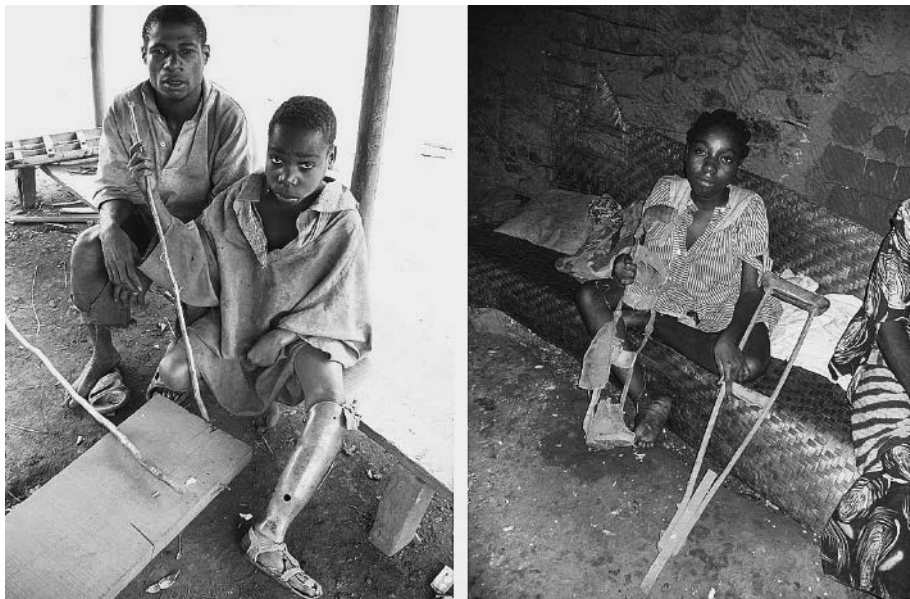


Photo 4 Aid for the Baka children provided by the mission (Left: Baka child with metal braces provided with the mission's aid; Right: Bantu child with broken metal braces)
(Photographs by author, August and September 2007)

affect their subsistence and the care practices in their inter-ethnic relationships.

5. Discussion

My informants, Dieudonné and Djema, have built relationships with those around them, being on first-name terms with them, and the use of local language terms such as *wà pòà* and *wà kúmà* that imply “do not move,” “blind,” and so on are not used as generic terms for them (ex. Avanda) in ordinary conversation. While summarizing my informants as “people with disabilities” in this paper, I was concerned with one feeling for the first time in a while. It was a feeling similar to the hesitation I had in dealing with the “sensitive issue of people with disabilities” in my first fieldwork. It was probably because I grew up in a modern society and think nothing of recognizing the term “disability,” being affected by modern Western concepts.

So, while keeping in mind a position such as that of a researcher who came from modern society, this paper rethinks persons with disabilities in my study site. I would also like to consider the views of disability held in non-Western societies.

5.1 Disability in Modern Africa

In modern African societies, discourses about “disability” have changed due to cultural differences and historical processes. In this regard, it is necessary to understand the local trajectory of the discourse of charity and helping the weak, which gradually gained legitimacy as Islam and Christianity spread. For example, the idea of charity has been important in predominantly Muslim areas, where individuals with physical impairments are able to make a living by begging from alms, as *zakat* and *sadaka*. In addition, missionary and charity organizations have been involved in educating people with disabilities, not the national government. With the spread of Christianity, people with disabilities again became a target of charity provision.

The historian Iliffe reconstructed African history in the 1980s using the keyword *poverty*. He noted that structural and long-term poverty occurs in land-rich societies like Africa. The very poor are characteristically those who lack access to the labor needed to exploit land – both their own labor, because they are incapacitated, elderly, or young, and the labor of others, because they are bereft of family or other support. Historically, very few “public institutions” focused on the poor, and no systematic organization of charity existed in Africa. Therefore, the poor of Africa have been forced to depend on “family” (Iliffe 1987). Modern discourses preaching the need to “help the poor” may be necessary for the survival of people with disabilities. However, they may also cause people to accept the medical and institutional practices of missionaries uncritically. With regard to the

Western concepts of sickness and disability in relation to sick people, or infectious patients, and people with disabilities, if we link the activities of missionaries and government that were introduced in this paper, we will find two different concepts coexisting: the view of discrimination, isolation, or exclusion of the sick and disabled in modern society, and the view of the sick or disabled as the subject of compassion who need special help in the aid policies of missionaries and the government. We know that these two views of disability seem to generate opposing policies, and in reality, the actions motivated by the two views of disability may be different. However, it can be said the root of their recognition is much the same: to deal with “the exception for persons with disabilities.”

5.2 Responses for the Disabled in Cameroon

Currently, the modern trend is beginning to penetrate the forest area 600 km from the capital (my study site), positioning people with disabilities as “subjects who should receive aid” from charity or public service, via the missions or government. The Cameroonian with disabilities, as a pathetic person but also as a person deserving of compassion and aid, is treated as if they had been granted the social category of “the poor,” as pointed out by Iliffe (1987), who are easy to attack and do not have enough financial resources.

However, it should be added that this paper does not mean that welfare and charity for people with disabilities are not needed. The missionaries concerned consulted me about whether Japan would “help or not” and have been constantly busy trying to acquire a funding source for disability support. They say that they desire to help all people with disabilities if possible. Moreover, of course, there are economic disparities between the Baka and Bantu people. In this context, providing specialized support to Baka individuals may be considered only “fair” in some sense. Even so, I suggest caution when it comes to allowing outsiders to make decisions about distinctions among local people and the standards to be used in local communities. When outsiders impose a new category, there is a risk that those in this category will become objects of pity or targets of discrimination. This risk applies to the category of the “disabled,” which could engender a bias against Baka individuals with disabilities in particular. Therefore, I recommend that we use approaches that capitalize on local communities to empower persons with disabilities in a way that is consistent with the reality of their abilities and that we rely primarily on local people rather than on specialized disability support systems that separate persons with disabilities from their communities.

Acknowledgments

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Notes

- 1) Ingstad (1997, 1999) conducted fieldwork in Botswana and pointed out that the images of “hidden disabled people” and “uncaring Africa” are shared by both Western and local administrators that legitimated the introduction of disability programs such as CBR, emphasized by the mass media and treated as “official facts” by canonical international organizations. She went on to critically refer to this perspective as “the myth of the hidden disabled.”
- 2) These materials used in this paper were obtained from my fieldworks of six times since 2006 the Boumba and Ngoko Department of the East Region of Cameroon. My study periods are as follows: (1) from January 2006 to March 2007, (2) from July to November 2007, (3) from December 2008 to January 2009, (4) in June and August 2009, (5) in February 2010, (6) in December 2010. The total is about two and a half years.
- 3) All personal names described in this paper are pseudonyms.
- 4) In 1949, the Social Affairs and Culture Department for the Life Environment Improvement of Urban Residents was established in Cameroon by the high commissioner of the French government (*Haut-commissaire de la République Française*). In 1950, the welfare division in Cameroon was approved (Law No. 2763), and in 1953, it began activities considered to be social welfare for the disabled of Cameroon. In August of the same year, aid to the blind (*aveugles*) and the provision of prosthetics for the physically disabled (*infirmes*) was defined by the high commissioner of the French government (Law No. 3945), and the Social Affairs Department (*Direction des Affaires Sociales*) was established, becoming the origin of the Ministry of Social Affairs (*Ministère des Affaires Sociales*, MINAS for short), which has current jurisdiction over policy for people with disabilities, women, children, and minorities (Haut-commissaire de la République Française au Cameroun 1953).
 In the year of Cameroon’s independence, 1960, the first organization for the disabled in Cameroon (*Union Général des Grands Infirmes du Cameroun*; UGAGIC) was founded (Ndjenteche 1988). When was the term *les personnes handicapées* first clearly recorded in an official document in the Republic of Cameroon? That would be in *loi no. 83/013 du 21 Juillet 1983 relative à la protection des personnes handicapées*, enacted in 1983, two years after the International Year of the Disabled Person, which was carried out at the initiative of the United Nations. From 1983 through 1984, statistics about the disabled were compiled for the first time throughout all around Cameroon (République du Cameroun 1982, 1983).
- 5) 1 Euro = 655.957 CFA franc, fixed parity.

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