



Orality Music and HIV/AIDS: interrogating the Malawi popular public sphere.

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Abstract

This paper argues Western derived research models have sought and continue to seek to situate gender and sexual discourse in overt forms, especially when emphasising public health aspects. Using these models many issues pertaining to culture, politics, sex and other personal and communal issues become hidden or invisible. Using qualitative and quantitative evidence from my PhD research of popular discourse in Malawi, and using some evidence from Zambia, Zimbabwe and South Africa, I argue that these perceived secret or invisible issues can be explained by the historical, social and cultural modes of communication, allied to other factors like male/female and intra-female power relations. Significant issues of sexual and medical concerns, for example, were 'hidden' in the easy to decode public social sphere.

Using a historical model of the colonial and postcolonial construction of this social public sphere in southern and central Africa I was able to demonstrate that key messages relating to sexuality and sexual behaviour can be easily found in social discourse, from where they can be exploited for health promotion purposes.

This essay, part of a larger study, argues for the concept of a musical and oral public sphere¹ where contesting and convergent received, perceived and emerging cultural ideas and concepts are both deposited and withdrawn. This musical and oral public sphere, we suggest, functions - apart from its entertainment role - as a tool of cultural continuity, re-invention, hybridity, diversity and social-cultural reproduction, construction and expression.

Introduction

Post-colonial cultural and political debates have intensified in the wake of the HIV/AIDS epidemic in Southern African countries.² (1) The democratic transition has made some of these debates more acute in Malawi, leading some observers to argue that Malawi is facing a 'crisis of social [and] cultural identity' (Phiri K 1998: 164 - 167; Schoffeleers 1999: 430 - 433). This cultural identity crisis is compounded by the large disparity between the 'globalised' hybridized educated elite, who control the modes of modern communication, and live 'urbanized globalised western' lifestyles, and the rural peasantry (Mhone et al 1992: 43 - 49; Lwanda 1996: 19 - 27) steeped in orality. It is also compounded by the culturally determined gender inequalities.³ HIV/AIDS discourses, both medical and cultural, where historical and power considerations privilege a written culture at the expense of the still vigorous majority oral culture demonstrate this identity crisis.

Mazrui (1990: 7) claims seven fundamental functions of culture, namely: perception and

¹ After Habermas' concept of the public sphere (1989).

² This essay, part of a larger study, contributes to these debates and argues for the concept of a musical and oral public sphere where contesting and convergent received, perceived and emerging cultural ideas and concepts are both deposited and withdrawn. (2) This musical and oral public sphere, we suggest, functions - apart from its entertainment role - as a tool of cultural continuity, re-invention, hybridity, diversity and social-cultural reproduction, construction and expression.

³ A good account is given in *Beyond inequalities: women in Malawi* (Lilongwe: UNIMA, SARDC 1997).



cognition; motive for human behaviour; evaluation; a basis of identity; a mode of communication; a basis of stratification and as an economic factor. And Kluckhohn (1952) sees

Culture [as consisting] of patterns of and for behaviour acquired and transmitted by symbols constituting the distinctive achievements of human groups, including their embodiment in artefacts; the essential core of culture consists of traditional [historically derived and selected] ideas and especially their attached values.⁴

Given the magnitude of the AIDS epidemic in Malawi (Chiphangwi et al 1987; Daly and Liomba 1998), we examine how medical and sexual issues are transmitted to and expressed or manifested from this public sphere. Certain assumptions are permissive of this work; including: Comaroff's (1982) contention that biomedicine [like traditional medicine] has a cultural construct; Chavunduka's (1973: 43) finding that '... individuals [in Zimbabwe] sought to find a social cause or meaning to their illness'; Mitchell's (1952) earlier assertion that 'Formal education is not directed towards changing the principles of social organisation and the moral code of the Africans'; and the World Health Organisation's definition (in its constitution) of health as 'a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity'. We argue that, given the limited colonial and postcolonial socio-economic change in Malawi, many indigenous cultural practices and modes of social expression, problematic or otherwise, especially in the social and sexual arena, continue to be practical, relevant and valid.

A number of observers (Vail, 1989: 151 –192; Kaspin, 1992: 34 – 57; Lwanda, 1993: 9 – 11; Forster, 1994: 477 – 497; Mphande, 1995 and Phiri, 1998: 149-167 have highlighted the role of culture in post-colonial Malawi governance and identity formation. Mapanje (1989; 1995) and Mphande (1996) show how the Writers Group, at Chancellor College – during Dr Banda's autocratic constraints - kept the academic cultural voice of dissent alive, using culture bound coded metaphors, appropriated from oral culture. It was also a period (1961 – 1993) when Banda's regime had strict and severe codes for dress and public discussion of things sexual (Cf. *Moni* magazine, 1991). Mphande (1995: 80 - 101) observes that:

Throughout this struggle for cultural influence, orality was seen as the site for the most intense contention between the writers and the Banda regime which had [...] chosen to [politically] exploit orality.

The thirty six years of the postcolony, given the limited socio-economic transformation or moves towards greater urbanization, cannot be said to have reduced the oral nature of Malawi culture. Orality still fills a greater part of the public sphere than do written texts. We argue that HIV/AIDS discourses that offer more comprehensive understanding of Malawian appreciation of and response to the magnitude of the epidemic in Malawi, overt and covert, are to be found, therefore, not so much and only, in the limited literatures but in also the realm of the vibrant orality.

African popular music, due to the multiplicity of languages and its dance orientation, is often judged by its form or style rather than content; ignoring the meaning. Nketia (1982: 241 - 245) made an early recognition of the inevitable adjustments to aspects of traditional African music 'because of the close integration of music and social life'. In Chewa, for example, *chamba* denotes either 'dance', 'custom or tradition' (Malekebu B, 1952). As modern mass

⁴ Quoted by Forster G in 'Culture, Nationalism, and the Invention of tradition in Malawi', *The Journal of Modern African Studies*, 32, 3 (1994): 477 - 497.



communication methods partly replace rituals, village dances and other forms of community performance and expression, Nketia's (1982: 245) problem of 'transfer of function' is manifested as partly one of musical hybrid formation, as well as the transfer of musical function in both context and medium. It is also manifested by the appropriation of traditional forms and contents by popular musicians; hybrid styles or appropriated forms that carry meanings in ways still communally identifiable and danceable (Cf. Coplan's 1985 study of urban South African music). The limited urbanisation and the rurality of Malawi make the transfer of functions more a matter of context than content. Music and orature are important in imparting knowledge and information in Malawi cultures (Read, 1968: 70; Musopole, 1998: 7-47). Kaspin, 1992: 34 - 57) noted that this social-nurture, in the non-Christian context, involves rituals, songs, initiation ceremonies, and dances - collectively called *mwambo* by the Chewa. In the Malawi context popular music - some musicians have re-appropriated the *alangizi* (social counselors) term for themselves - has inherited some of these functions; as well as developing the 'coded' ways of critiquing political power. As only 60,000 out of 10 million Malawians have access to the two daily newspapers the *alangizi* reach millions via orality, radio and cassettes, giving them an influential and powerful role.

In their introduction to *Land of fire*, Shoffeleers and Roscoe (1985: 7-13) quote Hallowell, AI (1947)

The study of oral literature ... could help significantly with the investigation of human psychology and the adjustment of the individual to his culturally constituted world.

Popular music, essentially part of the oral literature in Malawi is often pregnant with metaphors, symbols or cultural signifiers. Politicians, perhaps acutely aware of the power of music, attempt to invade and create a normative social complicity in this public sphere (Forster 1994: 491-20; Muyebe & Muyebe 1999: 236), as Banda attempted with the 'Dress code' and strictures on public sexual expression'. This political 'normative complicity' tends however to be transitory, quickly replaced in the public sphere by a new normative order. The non-political social and cultural symbols, signifiers and meanings, themselves paradoxically embedding elements of tradition and change, linger longer in the public sphere. It is these symbols, signifiers and meanings that are important in the visibility or invisibility of HIV/AIDS.

Methodology:

This study adopts an eclectic triangulation research approach was utilized to interrogate the Malawi popular public sphere, enabling the generation of seven different types of data for analysis:

- A historical review of the development of Malawi popular music between 1961-2002, with reference to its socio-medical content, is presented with reference to aspects of HIV/AIDS and other disease manifestation, prevention and health promotion, causality and *mabvuto* (socio-economic problems).
- An analysis of the 371 tracks in the Malawi section (1949 – 58) of Hugh Tracey's (1973) *International Library of African Music* field Long Play recordings (n=24) in my archives which give a flavour of the Malawi popular musical public sphere of the 1950s before radio had achieved its maximum penetration of the rural airwaves.
- An examination of the contents of 'all available new release 1998-1999 popular music cassettes (53 in number)' stocked since my previous visit, by the cassette dealers, *Portuguese Centre* and *OG Issa* in Blantyre (Cf. Lwanda, 1999: 533 – 538). From these 41 cassettes (425 tracks) were randomly picked and analysed.



- An examination of 241 pieces of music from some randomly taped Malawi Broadcasting Corporation (MBC) 1975 to 1999 programmes, in my archives. Here *mbumba*⁵ and *Nyimbo za m'maboma*⁶ musical tapes in this group were excluded.
- A literature review of contemporary written texts carrying/studying oral discourses.
- An observation of current oral discourse 1999 - 2002.
- A further review of musical discourse of the 2000 – 2003 period.

The Historical Perspective.

Nurse (1964), Chilibvumbo, 1972, Kubik (1987), Vaughan (1992), Lwanda (2002) and others offer some discussion of the effects of colonization on the popular Malawi public sphere. Between self-government in 1961 and independence in 1964, several socio-cultural themes influenced the formation of the public sphere:

- The self-government and independence political and cultural imperatives (1953 – 1961) that stressed 'a return to [undefined] African cultural values'.
- A short-lived era of communalism and self-help schemes (Dunduzu Chisiza, 1961) that utilized traditional music as a conscience-raising tool between 1961 and 1963, without necessarily challenging the accepted and the established 'traditional gender order'.
- A rural lead but vibrant postcolonial reassertion, often covert, of indigenous culture, music and dances between self-government in 1961 and independence in 1964.
- The hegemonising influence of the Malawi Congress Party, which had a constraining effect on social and oral discourse, especially that relating to politics and issues of sex and sexuality from 1964 onwards.

1961 – 1963: The period of Self-government

The urban elite initially largely ignored local music, 'tolerating and accepting' the sophisticated banjo and guitar local music available on state radio. Some of this 'tolerated' music filling the public sphere reveals culturally interesting lyrics. Ndiiche Mwalale's songs, for example, contained ascerbic commentaries on race, class, economics and politics. For example *KuNyasalande (azungu achuluiche)*, decried the lack of money for the [ordinary] people (*wandu*) despite the 'many whites in Nyasaland', leading to the *wandu's* emigration; *Musamuone kumangatayi mwayesa ndi akalaliki, Alonda alonda kwa Chusa* (Neck-tie or no neck-tie, he is Mr Chusa's night watchman) lampooned the pretentious tie wearing African night watchmen. And Enock Evans' *Akapasule* (the home wrecker) warned the cad:

You've taken my wife to the dance and I see you kept her out late,
You will travel by plane! *Mama mia*, what are you dying for?

'Travelling by plane' here being a euphemism for "you will die", an oral curse. Evans' genteel song was thus steeped in the *ufiti* (witchcraft) tradition. Even Alick Nkhata's *Ndithandizeni mbuye wanga* (Help me Lord), which took a modernizing stance, admitted to consulting, not one, but several *asing'anga* (traditional practitioners). Examination of the 'westernised' African music of the era shows many themes determined by the socio-economic circumstances of the majority rather than the expected western influenced themes.

But by the middle 1960's urbanites, given the universal popularity of the Beatles, Soul, Rhythm and Blues and other western popular music, appeared to have temporarily succumbed to the 'cultural imperialism' of the West and other parts of Africa, with the

⁵ Political songs by Malawi Congress Party women.

⁶ Mostly traditional songs from the districts. After 1977, many praised of Dr Banda.



dominant public sphere filled by foreign music whose lyrics were generally unintelligible to many Malawians. The migrant workers' culture was facilitatory here. The foreign African [Bantu] sweet music was not value free; glimpses of meaning, where possible, prove this to be true. Issues of class, the urban/rural dichotomy, and other social issues got an airing: from South Africa, the Izintombi ze Simanjemanje, despite the South African Broadcasting censor, politically advised *Vuka sekusile!* (Rise up its daytime), the Mahotella Queens sang about the *Umthakathi* (witch); and in Zimbabwe, Dorothy Masuka accused a *Muroyi* (witch) of 'finishing off her relatives'. In Zambia, Nkhata complained *Umphawi [uli ndi ine]* (poverty grips me) and observed alcoholism in *Chiperoni* (*Chiperoni* beer) in 1950s Blantyre.

After self-government there was an increase in the performances of traditional popular music in the rural and peri-urban areas. Traditional dances like the sexually expressive *minoghe*, *chintali* and *chiwoda* assumed higher public aspects than during the colonial era. The traditional and neo-traditional songs that filled public spaces of commerce and entertainment mirrored traditional dances. However health promotion campaigns (exemplars of the later HIV) continued to utilise western influenced music composed by elites and directed at the rural masses.

1964 – 1971: Independence and another dance

The mid to late 1960s saw the peri-urban cultural demands, the need to indigenise borrowed Afro-American and European songs and the founding of a small local (Nzeru) Record company force the emergence of a more recognizably Malawian popular music to emerge from foreign domination. Many early steps were based on substituting Malawi lyrics for foreign ones, keeping the melody and rhythm intact. The next step was the fusing of pan-African rhythms with rock and soul music chords, still using Malawi lyrics. Finally indigenous traditional music rhythms and melodies were appropriated and used as templates. Interestingly much of the appropriated popular music came from *pamtondo* (women singing at the mortar). However, the 1964 to 1971 period was marked by Dr Banda's attempt at creating and consolidating, 'via orality' a one-party state. He, with some success, fused a 're-invented' Chewa traditional culture – with him as the *Nkhoswe* (uncle) with aspects of puritanical Presbyterianism. In this climate those pioneers attempting to create a traditional culture based popular music were likely to encounter problems of rhythm, intention and meaning. One such major pioneer of all these experiments was Morson 'Chubby' Phuka and his Jazz Giants. His initial syncretisation of the soul classic 'Hully Gully' into *Gule Wina* (Some kind of dance) caused problems:

Pali Gule wina Gule Gule wina (There is some kind of dance)

Bambo angabvine, Mai angabvine (Dad can dance it, Mum can dance it,)

Ana angabvinenso (Children can dance it too!)

To the censorious Malawi authorities, this was an ambiguity too far: what was being discussed here: Pop music, dance, or sex? Sex, a cheap form of leisure for all classes in an impoverished 1960s environment, was already a dangerous taboo subject with significant socio-political overtones in Dr Banda's 'puritanical Presbyterian' Malawi (Cf. Mapanje, 1981). A rather puritanical westernized sexuality in the urban areas sat uncomfortably with the culturally determined rural modes of sexuality, public or private, of the majority (Cf. Mapanje's 'The cheerful girls at Smiler's Bar', *ibid*). This unwritten taboo on discussing sexual issues was later to be a factor in the HIV/AIDS epidemic. The Jazz Giants backed Jack Allison, a white Peace Corp volunteer on a health promotion song *Ufa wa mtedza* (Pea nut butter)



Ngati mufuna kuti ana anu (If you want your children)
akhale bwino pasikelo (to weigh heavy on the scales)
ayenera kudya ufa wa mtedza (feed them peanut butter)
nditu, m'mamawa, masana, ndi madzulo (Oh yes! morning, noon and night)

producing a classic jingle. Because of its novelty (Chewa lyrics sang by a white man), its realism and practicality, it was an immediate health promotion hit. The implied repetitive diet acknowledged the existence of malnutrition and when Banda later changed his mind about American Peace Corps (Phiri (1998: 161) the song was banished from the radio. Highlighting the repetitive diet of the poor turned the song into a coded symbol ridiculing poverty in Banda's malnourished Malawi.

By the late 1960s, Phuka, like his contemporaries the MBC Band, had turned fully to 'traditional' sources for lyrics and rhythms. The sexy *Chiwoda* rhythms, similar to those of the then popular 'Twist', were a useful resource. But the problems of meaning continued, as shown by the *chiwoda* tinged *Mtsinje*:

Mtsinje mtsinje mtsinje wadzadza, (the river, the river, the river is flooded,)
m'mtsinje muli n'gona tioloka bwanji? (in the river are crocodiles, how shall we cross it?)
Pamtunda pali mikango titawila kuti? (the hillsides have lions; where shall we run to?)
M'nyumba muli matenda, mankhwala ali m'manja... (In the home there is illness, the medicine is in the hands...)

This traditional resource had the effect of turning some popular songs into a minefield of metaphors, unwittingly or wittingly, contradicting Dr Banda's concept of a secure, well fed and disease free Malawi with images of predatory crocodiles, hillsides roaming with lions and diseased homesteads. But Phuka's musical image resonated well in rural Malawi and the 'medicine is in the hand' was a semiotic confirmation that illness existed.

1970 – 1983: The Jazz Bands and gender

The most visible trait of this era was the eruption of the jazz band genre, a syncretic or hybridised form of music incorporating aspects of the sixties *kwela*, the sexually explicit *sinjonjo* or *smanje manje* (Kubik G (1987), the East African benga beat and the highly syncopated local Malawi rhythms, for example *chopa*. Of significant note here is the fact that the original practitioners of this music were teenagers aged around 10 - 16 (Kubik 1987). They had generally already left school and most were unemployed; many were generally in transition from *kumpanda* (female environments and influences) to male ones; most were usually not in the party youth system (Malawi Young Pioneers); and most were located in rural or peri-urban areas. Although their experiences were located in rural culture, many had access to radios. Instruments were hard to come by due to poverty. Their music was designed for local performance - more conducive to freer expression using proverbs and idioms, and - given the immediacy of the performance - able to include self and society oriented deprecatory but critical humour. There were elements of allegory and allusion in some of the band names and song titles, such as *Nzeru Zatha* (The brain is finished) Jazz Band or *Miseche* (gossip). Unlike the sanitized colonial period school 'traditional musical performances' which were shorn of their explicit/implicit sexual dimensions, some of the jazz bands re-appropriated the sexual choreography in live performances away from the gaze of censorious state authorities. This sexual choreographical dimension was to further flourish after the dawn of multiparty rule in 1994.



The role of gender

As the lyrics became more indigenous the 'chauvinism' of significant parts of social 'male' Malawi popular music became evident. This is surprising given the nature of the musical connection between the juveniles who 'originated' the jazz band music and their mothers. Many of the lyrics in the early jazz band songs showed female influences (Lwanda 1998). In rural areas where maize meals may be distant or unaffordable, women commonly still pound maize at the mortar (*pamtondo*). In the process they sing blues, folk, or other songs that are heard and retained by prepubescent boys still allowed to hang around female locations. The songs later turn up whole or little changed in the boys own 'compositions'. The *pamtondo* influence is detectable also in the beat, the phrasing and the social modes in which women express sexual and matrimonial issues among each other. The younger the bands the more obvious the female music appropriation was. What is more difficult to explain is, given this early dominance of 'female' songs and 'meanings' in the rural public sphere and the abundance of rural female musicians, why chauvinistic attitudes later dominate Malawi popular music. A related query is why there is a paucity of female public singers in the modern arts. Part of this may be the coded language of *pamtondo* blues which women attempt, despite the appropriation by males, to guard. After all *pamtondo* songs are largely personal or group therapy for a disadvantaged group and not meant for wider dissemination. Like most disadvantaged groups, females also tend to more jealously guard their inner traditions than men do. Another reason may be the fact that popular music, outwith the traditional sectors is still not considered a proper career for a female; early female singers were considered *akazi amubala* (bar-girls). Popular singers, outwith the conventions of traditional dances may be considered to be flaunting their sexuality and availability.

The Oral poets

Malawi is well known in academic circles for its poetry. This poetry is recognized as a means of 'assembling another voice' (Mapanje, 1981) in the harsh climate of Dr Banda's regime. Here it is argued that, in retrospect the 'rural' lyrics filling the Malawi public sphere after 1971, chauvinistic or otherwise, were, for a one-party dictatorship like Malawi, far more socio-politically adventurous than appeared at the time. Arguably, Malawi musicians were, at the level of the public sphere, as adventurous, if not more, than Mphande or Mapanje's literary ones in critiquing the prevailing socio-political environment using 'coded' metaphors. Take Joseph Nangalembe's *ANangalembe ali bwanji nanga?* (Mr Nangalembe, how is he?)

ANangalembe ali bwanji, ali bwanji nanga? (How is Nangalembe, how is he really?)

Ali m'nyumbamo asoka zigamba! (He is indoors mending his rags!)

Mwauze atuluke, lero atuluke! (Tell him to come out; today let him come out!)

Ali m'nyumbamo asoka zigamba! (He is indoors mending his rags!)

The apparently comic song expresses serious health and poverty concerns; literal naked poverty to be hidden from view,⁷ a poverty compounded, as the song goes to tell us, by the lack of water for washing, drinking. Alan Namoko, another major jazz band musician used a 'normative' proverb *Patse patse nkulanda*, to subtly critique the prevailing culture of forced donations to the hegemonic Malawi Congress Party.

Patse patse nkulanda! Abale (Give me! give me! is tantamount to plunder! Folks!)

Mwana akakula adziwa yekha! (The child will know [what to do] when mature!)

⁷ Cf. Banda's claim that many Malawians, especially those from Mwanza/Neno areas were literally 'naked' before he developed Malawi.



The Mikoko Band, while apparently decrying polygamy in *Mitala*, offered another powerful rural critique of the prevailing socio-economic dispensation:

Mabvuto ali ndi ine, palibe ndiona ine! (I have problems, I earn nothing!)

Malaya ndi amodzi, palibe ndiona ine! (I have only one shirt, I earn nothing!)

Msonkho omwe ndilibe, palibe ndiona ine! (Even the poll tax I do not have, I earn nothing!)

Messenger yemwe nditomuthawa, palibe ndiona ine! (I will evade the tax messenger, I earn nothing!)

Mkazi wasowa chitenje, palibe ndiona ine! (The wife cannot afford a *chitenje* cloth; I earn nothing!)

Mwana walephera sukulu, palibe ndiona ine! (My child has failed school; I earn nothing!)

Using this discourse, Mikoko were able to openly critique one of the most politically constrained societies: they 'evade taxes', get away with 'not providing the *chitenje*' cloth that was required for political *mbumba* dancing, disparage the educational system and express 'despair for the future' in *palibe ndiona ine* (I see nothing!); all by playing the rural fool with 'problems'. To remove any lingering doubt, Jivacort Kathumba enumerated, in *Mabvuto simaliro okha*, the every day socio-medical problems

Mabvuto simaliro okha, mabvuto! Mabvuto! (Death is not the only problem, problems!)

Ugwe ndi njinga, amenewo ndi mabvuto! (Fall off your bicycle; that is a problem!)

Ukhale opanda chakudya, amenewo ndi mabvuto! (Be without food; that is a problem!)

Ukhale opanda nyumba, amenewo ndi mabvuto! (Be homeless; that is a problem!)

Ana ako adzidwala, amenewo ndi mabvuto! (Your children are ill, that is a problem!)

Pali ponse pali mabvuto...! (Everywhere, there are problems...!)

At times Kathumba, in line with the Malawi concept of regarding death as rest (*tikapume*), declares *mabvuto simaliro* (death is not a problem), omitting 'the only'! He thus succeeds in bringing forth issues of road safety, hunger, homelessness, disease in children, the ubiquity of suffering - petty headaches or unemployment - in a short, powerful song which one could ridicule, dance to or empathise with; one that was widely requested and played on the radio. All achieved without upsetting Dr Banda's censors. Contemporaneously Daniel Kachamba, complained that *kulibe mzimu* (lit. there is no ancestral spirit [left]), a possible reference to the lack of social justice in 1970s and 1980s Malawi. Thus in the public musical sphere there appeared to be an excessive brooding about disease, poverty, problems and 'traditional' themes of disease and social problem causality dominated. This brooding was expressed in coded manner using folk tales, proverbs and clever allegorical lyrics that appealed to a social conscience. Material recorded by the MBC Band for their first LP, *Kokoliko ku Malawi*, in 1974 shows 9 sociological tracks, 7 traditional tracks and only 4 political songs of praise to the president.

It was against this background that HIV entered the scene.

1983 – 1992: Arrival of HIV/AIDS

The informal musical discourse of this period became further dominated by issues of the worsening poverty, political repression, the issue of the succession to Dr Banda, the arrival of AIDS and other general quality of life issues. Robert Fumulani's *Kunja kuno imfa ikuthamanga* (out here the deaths are increasing) predates the official AIDS epidemic awareness programmes in its urgency. However, the initial phase of the HIV/AIDS epidemic



was marked by songs that blamed the (usually female) sufferer (Cf. Masaka Band's 1980' *Watenga AIDS iwe* (you have contracted AIDS). The almost universal response was to hide HIV/AIDS. In the mid 1980s the MBC began to feature HIV awareness jingles and songs with the theme *kunabwela* AIDS (AIDS has come) which saw and acknowledged AIDS as a new disease introduced into the country. This 'entry' of HIV/AIDS into Malawi was to be disputed by some traditional practitioners who saw the symptoms of HIV/AIDS as a manifestation of *kanyela* or *mdulo*, diseases which are caused by transgressing sexual taboos.⁸ This was because of the convergence of many HIV/AIDS symptoms with the wasting and diarrhea of *mdulo* and *kanyela*.

1992 – 2002: The Multi-party era

The transition from one party rule to a multi-party dispensation was marked by songs that continued to push the boundaries of expression but discussions of sexual issues remained largely coded. One 1999 hit, *Tikutha* (we are perishing) by Dennis Phiri, best illustrates the freedom of expression within a social vein which the musicians exploited:

Tikutha! Tikutha anthu! (We are perishing, people we are perishing!)

Ine chomwe ndaona (What I have seen is this,

Satana wamanga masiku, (Satan is now in charge)

kulamulira aliyense; (controlling everyone.)

zibale ziti zipita? (which relative will go next?)

Maliro ndi akale (Death has always been with us)

koma lero zanyanya (but now things are too much!)

Tawafunsemi agogowa (Ask grandmother)

momwe zimakhalira kale. (how things were in the old days.)

Magulu onse a wanthu (All groups of people)

alowelera inu (are engaged in this process,)

sitikuopa kuti kunjaku zinthu zabeba (not fearing that out there things are bad.)

Imvani anthu kusewera ndi moto (See people playing with fire,)

ungadzioche chabe (you will merely burn yourself.)

Chala mkamwa mwa njoka (Sticking a finger in a snake's mouth)

ndikudziputa dala. (is asking for it)

Musafunse za chifukwa machimo achulukwa. (Don't ask why - there is too much sin.)

Kadzayesenu tsiku lina mudzayende ku Lilongwe (Try one day walking around Lilongwe)

kuKabula kumahotela awa mudzawaona (and Blantyre hotels you will see them)

anamwali anu ali mbwanda mbwanda kuonetsatu (your maidens spread-eagled indecently showing)

kuti infa alibe nayo mantha. (that they do not fear death!)

Kubvuta kwache nchitoizi (The problem is that these deeds)

zimakonda kumdima, (prefer the dark,)

aliyense osafuna kuti adziwe inu (no one to recognise you.)

Mukadwala adzimvetsa anzanu (But when you fall ill your friends hear you)

amakayikilira makolo akale akazi anu; (blaming your ancestors, your wife...)

kudandaula kunamiza anzanu (you complain, deceiving your friends,)

anadilodza ine, (I was bewitched;.) (Phiri, D, 1999).

⁸ Or from the western perspective, malnutrition.



The song skillfully, utilising both Christian and traditional standpoints as seen from an experiential position, paints a graphic and epidemic rise in deaths blamed in sequential order on 'playing with fire', 'abundance of sin' and 'deliberate activities of the night in the full knowledge of the consequences'. The results of the epidemic disease are such that the mortuaries are overwhelmed either through inadequacy or lack of care, reducing the dignity of the dead who are now made to appear as if play-acting. Underlying the text is an assumption that the causation of the epidemic disease is known, since the victim is seen to be 'playing with fire'. In this scenario the maidens too, perhaps so materially desperate, have lost their fear of death. When consequences (illness) ensue, a denial occurs and the victim is reduced to reconstruct the witchcraft scenario. This gives him an excuse for seeking medical help and legitimises the selling of all the man's goods to pay for his treatment at the expense of his wife and children's inheritance. The family is left destitute and, in the wife or some ancestor's case, with an accusation of witchcraft hanging over them. The homestead is effectively reduced to penury. There are echoes here of the suggestion that the death of a husband effectively kills off the family; the wife and children being placed under the uncle's care. The song is interesting both for its use of a funeral hymn meter using an *ingoma* rhythm as well as for its engagement with the various socio-cultural and medical discourses of religion, ancestral worship, witchcraft, gender inequality, as well as its allusion to the cost of living (governance) in the cost of cement which is used in building graves. Thus HIV/AIDS is seen from a social and communal perspective. In the old days, the song suggests, sacrifices would have been made to appease the ancestors with resultant relief from the epidemic. This appears to be either an implied critique of the failure of imported beliefs or an allusion to the failure to construct an effective social response to the epidemic to reduce the genocide. Given the chauvinism of a lot of Malawi music the song's implied pro-feminist stance is also worth remarking on.

The communal theme of *Tikutha* continues in Ben Michael's *Tilire tilire* (Lets all cry). Michael, in an earlier work, utilised a dense Chewa proverb *Kamba anga mwala* (Tortoise is like a stone) to observe the contradictions and ambiguities of current Malawi socio-politico-medical culture. Michael, noting *anthu akupita* (people are going [dying]), then declares in *Tilire*, part of it sang in English:

Tilire tilire, let's all cry!

Not for the dead, but for ourselves!

Tilire tilire, let's all cry!

Not for the dead, their turn is gone! (Michael, 1999)

In *Tilire* it is acknowledged that the deaths were from HIV/AIDS and the victims had shared sexual partners. However the reluctance to talk about HIV/AIDS is questioned: 'Till when?' Michael asks.

An Analysis of recorded and broadcast music 1947 – 1999.

For the music lyric analysis I divided the music into seven categories; categories partly influenced by MBC programmes and subjective categorization. They are:

Pop: This was defined as music concerned with self-delectation, love, pure dance and pleasure.

Sociological: This was music involving social themes, culturally formative, normative or directive, and also music involving communal affairs. Gospel: This was religious music both Muslim and Christian of religious praise. Political songs were those that dealt with issues of governance, both national and local, colonialism and nationalism. Economic music dealt with



employment, poverty and financial issues. Medical songs were those that dealt with specific references to illness without causality issues. Traditional music included ‘pure’ traditional music, popular music with indigenous proverbs, traditional music with religious and philosophical themes, music derived from or of rituals, and songs dealing with causality issues, for example witchcraft and *kukhwima*.

Although the present paper concentrates on the lyrical content of the music, from the HIV/AIDS historical perspective and construction of the musical public sphere, certain trends in the forms, instrumentation and marketing are significant. Over the 1961 to 1999 period there was:

- i) A gradual indigenization of the lyrics, in line with postcolonial reassertions of indigenous culture, which reached its climax after 1971.
- ii) A parallel increase in both the syncretisation and indigenisation of musical forms, reflecting the globalization and indigenization dynamics.
- iii) A rapid increase in, and characteristic use of, home made instruments resulting from indigenisation incentives, poverty and – in the 1970s and 1980s - the effects of the 'Structural Adjustment Policy'. Locally made instruments themselves, on which foreign music could not be easily played, provided another indigenization imperative.
- iv) Increased saturation of the rural airwaves by the MBC from 1964, peaking in 1985.
- v) The increasing availability and popularity of affordable radio-cassettes after 1979; these attempted to break the 'hegemony' of the state run MBC.

We also note that economic (instruments, halls, recording facilities, marketing), political (state censorship and censoriousness), foreign (cultural imperialism), availability/lack of musical training, religion (the role of gospel) and audience expectations and tolerance influenced the form, content and presentation of the music.

Data Results and analysis

The results are shown graphically in Table 1.

Table 1. An analysis of the lyrical content of broadcast, archive and cassette music in Malawi.

<u>An analysis of the lyrical content of broadcast, archive and cassette music in Malawi.</u> (All figures are percentages and horizontal columns total 100%)							
Type	Social	Tradition	Popular	Religion	Politics	Medical	Economic
ILAM (n=371)	46	27	15	03	04	01	04
Cass. (n=425)	41	11	05	32	06	02	03
MBC (n=241)	43	14	23	16	03	01	00

The International Library of African Music (ILAM) data representing the colonial situation, and the closest to *mphonje* (the pre-colonial era) I could get, shows that, of all tracks: 46%



could be categorised as sociological, 27% traditional, 15% pop, 04% political, 04% economic and 03% religious. Of the randomly selected commercial cassette tracks: 41% were classed as sociological; 32% were religious, 11% had clearly identifiable traditional themes; 06% were political and 05% popular. Of the MBC musical sampling, 43% of tracks were sociological, 23% were classified as popular, and 16% were classified religious and 14% traditional. There were no identifiably economic songs but 03% were classified as political.

There are noticeable trends here:

- This is largely a social public sphere. Many 'personal' issues, including disease are dealt with in a communal vein, whether critical, compliant, formative or normative.
- The constancy of the social component perhaps underpinning the social - as opposed to the overtly medical, economic or political - nature of this public sphere is demonstrated by the remarkably similar figures: 41% (cassettes); 46% (ILAM) and 43% (MBC).
- Contrary to the perceived view, politics accounts for relatively little input of music composed voluntarily by musicians, whether professional or amateur. The political content of the samples are 04% (ILAM), 06% (cassettes) and 03% (MBC).
- Economic matters are also expressed within a social context. At 03% the economic component of the cassettes is less than the 04% (ILAM) of the colonial era. The MBC's zero (00%) economic quotient is a factor of the censorship of the MBC by both Banda and Muluzi era MBC administrators of music overtly critical of economic hardship for the peasantry.
- The relative paucity, despite the pervasive presence of illness and disease in Malawi, of medical discourses, whether referring to specific illness or personal stories, as opposed to the social approach; disease is seen very much in social terms. Songs dealing with HIV, such as *Tikutha* (we perish), *Ndichiritseni* ([God] heal me) and the Police Orchestra's *Kunja kwaopsya* (There is danger out there) are usually composed in a social vein.⁹
- The fact that 11% of tracks in pop music cassettes had traditional themes, 14% in the MBC samples and 27% in the ILAM samples. Allowing for the skewing due to *mbumba* and *nyimbo za maboma* tapes, which were excluded, (and the 'sponsoring' gospel in the cassette music tapes) the traditional component of this public sphere is probably around 25%.
- The constancy of the combined traditional/religious component: 30% in both the MBC and ILAM figures. The cassettes figures may be skewed by the gospel (Christians) subsidising the cassettes.¹⁰
- It is noted that the combined religious and traditional components in the cassettes and MBC (excluding *mbumba*) samples give figures of 30% and 43% respectively. This tends to indicate a highly moralistic, normative and formative, as well as still traditional public sphere.

This provisional assessment supports the historically derived concept of a public music sphere. The 'constancy' of the traditional and social components observed in the colonial, commercial and broadcast samples is worth noting in the context of HIV/AIDS epidemiological discourses.

⁹ In *Kuopsya*, the Police Orchestra liken the fight against AIDS to a battle, with HIV viruses (*tizirombo*) as bullets used by HIV/AIDS.

¹⁰ Gospel cassettes may include secular and traditional music – depending on who is funding the project.



Oral Discourse and language

Malawi literacy levels (Malawi National Statistical Office, 2002) and access to reading materials are both still low. Oral discourse is the dominant medium for many for expression, communication and illuminating both attitude and behaviour. During my fieldwork I observed the frequent use of cultural signifiers in ordinary oral discourse; these were often stated in normative terms, and could be held to have normative functions. For example, there were frequent references to *zaufititu izi* (this is witchcraft) to signify abnormal or aberrant behaviour. Cultural signifiers are, in the public sphere, used to construct new socio-political cultural norms based on appropriated rural traditions. In the context of the HIV/AIDS discourse, for example, they have given the governments a 'cultural alibi' (that rural people prefer and value traditional medicine) for deficiencies in medical services.

When HIV/AIDS 'arrived' in Malawi, one of the first problems was choosing a local name for AIDS. In traditional contexts, sexually transmitted diseases had encompassing communal aspects, mirroring the transgressive element of some sexual activity as shown by diseases like *kanyela*, *mdulo*, and *tsempho* [diseases caused by transgressing sexual taboos] (Drake, 1976). STDs still 'account for a significant burden of health services in Malawi (Daly and Liomba, 1998: 46 – 49). The name finally chosen or rather 'imposed from above via radio',¹¹ after little debate was *Edzi*, an onomatopoeic Chewaising of 'AIDS'. *Magawagawa* ('something shared' after *kugawa* to share) (*Moyo* magazine, 1986) had briefly been in vogue and would have resonated with the traditional social approach to illness; as had *chiwerewere* (promiscuity). Both had the advantage of invoking a sense of social 'communicability via promiscuity'. However, this culturally mutually educative opportunity was lost by opting for translating AIDS onomatopoeically to *Edzi*. The HIV virus became *kachiroambo ka Edzi* (the wee AIDS beast) making, from some indigenous causality concepts, AIDS a 'curable disease': remove the wee beast [however originated] and the disease is cured. Msiska (1981: 186), in his paper on the *Virombo*, *Vimbuza* and *Vyanusi*, (diseases caused by spirit possession) defines *virombo* as 'a kind of bodily illness associated with spirits of *vyanusi*... conveniently refer[red] to [...] as evil spirits...'. A *chirombo* patient being a less serious case than a *vimbuza* one, and a *vyanusi* being more serious than the other two... *Vimbuza/virombo* or *mashawe* [spirit possession] diseases are some of the most well-known and lasting concepts in traditional medicine (Chilibvumbo, 1972b; Soko, 1985), similar to *Mashawe* in Zimbabwe. Significantly, the cure of these diseases involves the exorcising of the causative spirits. In 2000, I found *Sing'anga* Kumpolota still practising healing *Virombo* using these concepts at Likoma. This spirit possession model was recruited by some into the HIV/AIDS discourse because of the *kachiroambo* concept. Thus part of the HIV/AIDS epidemic could be sited in the traditional medicine sector, as curable *virombo*, away from public/state epidemiological reach.

Contextually, the choice of the meaningless *Edzi*, the vague epidemiological and treatment options, the distrust of family planning initiatives by people who value large families, and the heavy-handed approach of Dr Banda's government, which kept repeating the 'no HIV cure' message, led to HIV/AIDS being named the 'government disease' (*matenda a boma*) (Kanjo, 2000). Recalling earlier 'superior *mankhwala achizungu* (European medicine) debates, it was often asked by ordinary people: 'How can there be no cure from the superior European or government medicine? This is a family planning plot to get people to use condoms!' (Kanjo, Oral interview, 5/7/2000; Cf. Schoffeleers, 1999).

¹¹ Tinangomva akuti basi Edzi. Ndim'mene zinali kale lija. (We were just told the new disease is AIDS. That is how it was in those days. (Tembo, Oral interview, 8/7/00).



The association between shingles and AIDS was another feature that endeared itself to the traditional causality theory. The phenomenological establishment of an association between the heralding shingles, the 'slimming phase' and deterioration into death quickly evoked witchcraft explanations, as some who got shingles did not die. But there was a socio-economic issue here. Those likely to die early were the HIV positive poor malnourished youth with unhealthy chaotic lifestyles, while the *achikulire* (richer patrimonials) lived longer.

Further, between 1985 and 1993 (the no cure period - *MNACP Manual, 1989*) a strong religious lobby considered 'immorality' and God's resultant 'wrath' responsible for the epidemic (Catholic Church, 1991). Neither view contradicted putative traditional medical practitioners' early theories that transgressing taboos was responsible for the HIV/AIDS epidemic. Some Christians, although decrying HIV promoting cultural practices, approved 'conservative' or formative aspects of African Traditional Religion (ATR) (Cf. Catholic Church, 1991: 51 - 53).¹² (15). As missionary hospitals run about 40% of the hospitals and about 50% of the schools, a significant Christian point of view was leveraged on the HIV/AIDS debate (Schoffeleers, 1999) driving HIV/AIDS visibility 'underground'. Forster (1998, 537 - 545) notes that the churches had a lot of influence in the school syllabus and were influential in pushing the line against condoms. Religious HIV/AIDS 'moral' input had the effect of driving HIV/AIDS discourse into the realm of 'saints and sinners', with 'sinners' anxious to avoid the HIV positive label and resorting to 'cancer' and other mysterious reasons for their illness.

Culture, activities and agenda

In Malawi, HIV spread is largely via heterosexual sex. Many cultural forms normal to rural Malawians are considered problematic by 'westerners' yet many are promotive of good health in the context of rural Malawi (Mwale, 1977; Peltzer, 1986).¹³ The whole range of *mdulo*, *tsempho* and *kanyela* (Drake, 1976; Morris, 1985, 14 - 36; Rangeley, 2000: 40 - 50) taboos were designed to control sexual relations by minimising extra-marital sex, infidelity and marital - and hence communal - breakdown. Given the abiding strength of these traditions any suggestion of HIV/AIDS acquired via the transgression of these or similar customs is more likely to be denied. Here being 'traditional', whether in practice or rhetorical, is in keeping or appearing to keep to the good side of HIV/AIDS prevention. The discourse in this area will therefore tend to reflect the perspective of the speaker. Certain discourses associated with gender issues will also tend to remain circumspect. Arguably the main cultural contributor and key to promoting both the extent of the HIV/AIDS epidemic and its apparent invisibility in relation to its magnitude is women's weak societal position (Cf. Akeroyd, 1996; UNIMA/SARDC, 1997). Consequently there are many practices that remove choice from women, forcing them into many secret and not so secret high-risk sexual activities such as those enumerated above.

A number of other imperatives have sought to hide HIV/AIDS from the Malawi public sphere. The approach of western trained health workers to HIV/AIDS prevention cut across some traditional customs; only a drastic socio-economic change would have enabled the implementation of these preventive measures. The inevitable resulting compromise is a partly covert continuation of cultural practices conducive to HIV/AIDS. And abandoning these traditions without substituting positive, sustainable and meaningful alternatives can only cause a resistance that drives the practices underground. The result has been a compromise

¹² Such as obedience to elders and avoiding breaking taboos.

¹³ In terms of reducing premarital sex, reducing communal tensions and preventing *mdulo* and *tsempho* (diseases caused by transgressing sexual taboos).



that favours a degree of 'communal denial'. Wamui (2001) makes a similar point about the persistence of clitoridectomy among the Kikuyu despite the criticisms of Christianity and the forces of modernity.

Further, the political agendas of both postcolonial regimes were elite centred. Given the limited health budgets, and the monolithic consumption of elites, both initially tended to minimise the extent of the HIV/AIDS epidemic, partly in order to justify the non-provision of resources.

As the main medium for official HIV/AIDS discourses in Malawi is English, communication between health workers and patients and research informants may be constrained. Further, despite the debates and suggestions, among elites, that tend to hold that local languages are not capable of accommodating new technological or medical advances, participant observation in markets and urban areas do not support this argument.¹⁴ Foreign concepts are adapted in both utilitarian and abstract terms within the contexts of their real lives. English speaking elites, on the other hand, whose possession of English is a key to economic power, attempt to posit themselves, as interpreters and facilitators, between the peasantry (*anthu wamba*) and resources, economic or medical. There is therefore a degree to which the English/vernacular dichotomy reflects and has become a barrier to those seeking to map out the extent of HIV/AIDS. Part of this barrier relates to the largely donor funding of HIV/AIDS work; issues of access to the economic advantages of this donor funding pertain here.

For their part vernacular languages possess more power, meaning and flexibility, outside the minority formal sector, than is usually conceded by the educated elite. When the musicians want to express profound ideas, these are given in the form of vernacular proverbs or discourse. As seen below code switching and code mixing are utilised. Messages about HIV/AIDS tend to come in vernacular proverbs like: *tikutha* (we are perishing), *mabvuto* (problems), *thawa moto* (run away from fire), *zomwezi* (the usual disease).

Crucially, language also functions as a tool of, and reflector of, the multiple identities, which hybridised Malawians adopt in daily life. In exploring code switching and code mixing among bilingual Malawians, Kayambazinthu (1998: 19 – 43) seeks to understand the relationship 'between linguistic forms and social processes in the interpretation of experience and the construction of social reality'. Kayambazinthu (1998: 23) asserts (after Heine (1990: 177) that

the 'horizontal media (indigenous languages) are associated with solidarity and social equality, while the vertical media (colonial languages) imply distinctions in role expectations, status, prestige and socio-economic stereotypes. Consequently, colonial languages may signal authority or even superiority, while the indigenous ones may be employed to play down personal aspirations and to emphasise egalitarian attitudes. In the African context, languages such as English, French and Portuguese came with political power and western institutions, the possession of which gave one prestige and high social status. The indigenous ones, on the other hand, expressed the African way of life, one's relationship with members of one's family and

¹⁴ For a flavour of these elite debates, see for example the *Nyasanet* archives at www.nyasanet@maelstrom.stjohns.edu. In their song *Ndachita manyazi*, the Police Orchestra, in critiquing the mores of the young, give lie to these elite assertions. The song tackles up to date concepts of 'designer clothes' in the vernacular with no difficulty evident.



members of the ethnic group

Thus, Kayambazinthu identifies a number of reasons for code switching among Malawians: economy or precision of language, exclusion, secrecy, abuse or façade, and of relevance to our discourse multiple identities; multiple identities that encompassed national, ethnic and socio-economic status. Kayambazinthu found code switching was used consciously and unconsciously, often for pragmatic reasons. For our subject the relevance of code switching is in its function as a tool of multiple identity construction. One of Kayambazinthu's fieldwork examples concerns a western educated man living with a foreign woman. As the relationship sours, he tells his friends within her earshot, in Chichewa, a language the lady does not understand, that she is only there 'to clean up the place'. The man brags about his infidelity using a Chewa proverb that invokes the 'traditional tolerance' to infidelity

Tonde azinunkha (A male goat should prove itself). (Kayambazinthu, 1998: 31).

The insights from a study of language and daily oral discourse in the HIV/AIDS debate thus become clear. The man is living in a duality, a duality that excludes the potential wife from some aspects of his sexual behaviour. His behaviour, as an educated man with means, is facilitated by the use of language to negotiate what would otherwise be a problematic sexual infidelity. Bilingual Malawians may use language to move in and out of otherwise rigid and problematic culturally determined situations. And where better to exploit this fluidity and advantage than in the sexual arena, especially by those powerful enough to afford such deceptions. The more educated and affluent the Malawians are, the more opportunities for this duality.

A related feature of this ability to use language to switch between cultural spaces in Malawian public culture is the tendency to avoid some subjects by resorting to what we have termed *ufiti* discourse (Lwanda, 2002). I found that this is done for a number of reasons: to maintain or preserve a mystical construct, to stop a certain direction of discourse, and as an ultimate explanation that does not cause communal or societal distress or disorder. *Ufiti* discourse is also used in light-hearted banter as a joke, or in ironic vein by westernised Malawians who understand that the explanation of *ufiti* in that particular situation is inadequate. For example, this use of *ufiti* discourse by the Malawi Broadcasting Corporation in programmes like *Za m'maboma* (district news) and *Mauthenga achisoni* (messages of condolences) where deaths are never attributed to HIV/AIDS. An examination of the government media shows that *ufiti* discourse is utilised by governance in modes that control order and legitimise the denial of resources to ordinary people.

Another method of disguising HIV/AIDS issues is by invoking *ufiti* discourse: for example, by labelling something *zosachulidwa* (things you do not talk about) or by indicating to the speaker *mutilaulira* (do not go there - you will provoke the wrath of the Gods). Even in elite circles discussion of *ufiti*, at all levels of the discourse (light-hearted, agnostic, serious) is common. Examples of *Ufiti* discourses may be found among all religious groups in Malawi. In examining the prevailing cultural background using the markers, it is noted that *ufiti* (witchcraft) discourse - because of its historical continuity and its persistence in localities due to socio-economic circumstances - continues to thrive. This *ufiti* discourse is adopted and used by students, and the general population, in discursive and jocular modes. It is also used in an unquantifiable section of (and, it is here argued, not the whole of) the population in



serious realistic mode.¹⁵ It is also argued that the use of this *ufiti* discourse is ‘helpful’ in explaining away and coping with the enormity of HIV/AIDS illnesses and deaths. This aspect may manifest as national or personal denial of the existence of AIDS illness in a particular situation.

A poem by Gracious Changaya (2000) graphically reflects the contradictions between observed ritual behaviour in the cultural arena in relation to HIV/AIDS and the underlying reality. It is worth quoting in full:

*Had he died of ‘diarrhoea’
the master of burial ceremony
would have pronounced it easily
without beating about the TB bush*

*Had the death cause been cancer,
pneumonia, anaemia or malaria
that bereaved uncle would have said so*

*Had heart attack been the cause
those lengthy biographies
and mysterious witchcraft stories
wouldn’t have covered the coffin*

*But because it was AIDS
the fatal-stone was better left
unturned
Is it a taboo then
to mention HIV/AIDS at a funeral?*

People were, as the poem shows, more likely to deny, not the existence of AIDS, but the fact that AIDS had taken their dear one.

Conclusion

Because Malawi retains a largely oral culture the concept of an oral public sphere has to be dominated by considerations of how it is filled. A public sphere is an area of contesting received and developing formative and normative as well as subversive cultural beliefs, ideas and wisdoms. The various historical, social, economic, educational, medical and cultural factors shape responses to HIV/AIDS and are reflected in this oral and musical public sphere. Beliefs and factors that impact on HIV/AIDS are manifested in many features, practices and discourses of daily life. This daily discourse reflects basic socio-economic realities as well as moral and higher concerns; hence its social situation. Being largely social the public HIV/AIDS sphere enjoys the added advantage or burden of orality: ambiguity. This ambiguity of orality lends itself to adaptability, subversion, dilution (for example with *ufiti* discourse) and obfuscation; all factors crucial in HIV/AIDS debates and visibility or otherwise.

This ambiguity is all the more useful in societies like Malawi with a weak literate civil society but a strong oral tradition whose practitioners are ‘disenfranchised’ from governance and socio-economic privileges.

¹⁵ My figures from student surveys did not support an overwhelming belief in *ufiti* among those in school education.



Given the dominance of indigenous oral culture, where (despite the explicitness of traditional dances) matters sexual are expressed subtly, HIV/AIDS and sexual discourses often take coded social paths rather than the overt expressions of personal sexual discourses of the western world. Noting the preponderance of religious, sociological and traditional themes we may speculate that hitherto, in the HIV story, these influences have tended to create certainties, difficulties and, mostly, ambiguities as in *kachiroambo ka edzi* where the ambiguity empowered some traditional healers to regard AIDS as a curable disease. This paper has attempted to show that HIV/AIDS, as indeed much illness in Malawi, is viewed through a social prism. Most Malawi public sphere HIV/AIDS discourse appeals to the community to respond as such, as *Tikutha* and *Tilire* show. Although not at first sight so obvious, this is a public sphere obsessed with HIV/AIDS.

As mass communications and ‘musical transfer of function’ processes are dislodging some of the contextual uses of traditional and popular music in Malawi, and literacy lags behind orality, an attention to what is posited in the public sphere can be illuminating and worth exploiting in the fight against HIV/AIDS.

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