Folklore, gender, and AIDS in Malawi

Chimaraoke Izugbara

a African Population and Health Research Center, Nairobi, Kenya

Published online: 12 Aug 2014.

To cite this article: Chimaraoke Izugbara (2014): Folklore, gender, and AIDS in Malawi, Sex Education: Sexuality, Society and Learning, DOI: 10.1080/14681811.2014.945323

To link to this article: http://dx.doi.org/10.1080/14681811.2014.945323

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BOOK REVIEW

Folklore, gender, and AIDS in Malawi, by Anika Wilson, New York, Palgrave Macmillan, 2013, xi + 190 pp., £60.00 (hardback), ISBN 978-1-137-32244-9

Malawi is a major HIV hotspot in southern Africa. Currently, 10.6% of Malawians are reported to be HIV positive. While HIV was first diagnosed in Malawi in the mid-1980s, the disease only received political recognition a decade later. Since then, however, successive Malawian governments have committed resources to preventing HIV, promoting HIV education and expanding access to HIV treatment. These efforts notwithstanding, the impact of HIV on social life in Malawi remains extensive. The suffering, hopelessness and wretchedness produced by the HIV epidemic have etched themselves on the social imaginary of ordinary Malawians, resulting in a collective social critique that occurs in the form of popular imagination.

Anika Wilson’s Folklore, Gender and AIDS in Malawi sets out to use rumours, stories and gossip circulating in Malawi to understand the everyday concerns, anxieties and struggles of Malawians as they engage a world shattered by a stubborn, deadly and omnipresent disease. It is a book that addresses the construction and reconstruction of social relations during an epidemic that has imperilled individuals, devastated social capital, transformed power relations and frustrated national development efforts. The book has five tightly argued chapters that underscore how gossip and related forms of communication offer useful insights into the imagined world, shared values and visions, and practical wisdom of everyday people affected by real issues.

Chapter 1 of Folklore, Gender and AIDS in Malawi weaves a clear account of the context of the study and carefully details its methodology. Many readers unfamiliar with Malawi and the use of journal-based data collection will learn a lot from the thick description offered about both in this chapter. Importantly, Wilson firmly admits to the potential of this method to be manipulated. Indeed, unless kept by well-trained, very experienced and honest fieldworkers and researchers, journals have a longstanding notoriety for being abused, yielding trivia and offering superficial information.

Chapters 2 and 3 address women’s strategies for managing HIV risks and threats in their marriages and relationships. Wilson conscientiously tracks the place of social networks – some of them ruthlessly battered by HIV itself – in shaping the outcomes of these strategies. Advice, which in Malawi is generally considered to be good medicine, as well as gossip, which ensures that nothing is kept secret, stand out not only as key sources of warning for women at risk of HIV but also as critical avenues through which tactics for managing these risks are communicated and learned. For Wilson, these strategies (which include confronting one’s husband, using love potions, spreading rumours about rival women, separating from a wayward husband and getting a formal divorce) have varying levels of success. Their effectiveness depends on the woman’s social network and position in the society, the reputation of rival women, the sources of the threats as well as several other situational factors. Women using these strategies were often caught between immobilising their men economically and ensuring they (the men)
do not get involved with other women; between revering cultural norms and exposing themselves to infection; and between openly challenging rival women and overlooking their husband’s adulterous affairs. Reading these two chapters, it is obvious that while some of the strategies help women, others fail them woefully and put them at heightened risk for negative social and health outcomes. Although Wilson does not fully explore it, she actually proves what many women studies scholars have always supposed: poor women’s strategies for managing risks are, sometimes, crucial sources of vulnerability for them.

In Chapter 4, Wilson energetically takes on rumours which emerged in 2008 about mphutsi, reportedly a new disease that was more fatal and dangerous than HIV. Men reportedly transmitted mphutsi, but it was only symptomatic in women and only they (the women) died from it. Mphutsi-infected women would have their vaginas infested with maggots. Wilson frames mphutsi as a powerful social and moral commentary on gender and sexuality in a context of poverty, HIV and inequality. Rumours surrounding mphutsi (and depending on the version one heard) say it was brought into Malawi by a Dutch, Chinese or Indian expat road builder who was part of the team constructing the vital Zomba–Jali highway. The expat first infected a sex worker, who then infected a truck driver, who then spread it further. The disease is not curable but victims can be kept alive by placing animal liver on the vagina for the voracious maggots to gobble. For Wilson, these rumours were admonitory tales about the answerability of affluent strangers, local moneyed-men and loose women in the spread of dangerous diseases and misfortune in Malawi. The emergence of these rumours at a time when HIV medication has become increasingly available cautioned Malawians against the superficially healthy looks of persons on ARV, informing them about the inevitability of death for people with HIV. Although Wilson may not realise it, throughout Africa, animal liver is a valuable and cherished delicacy, sometimes only reserved for select visitors, the elderly, and pregnant and lactating women. Feeding maggots with a choice human food is a powerful metaphor for the potential of HIV to deplete the livelihoods of infected people as they struggle to stay healthy and alive.

The last chapter of Wilson’s book focuses on mgoneko, which are rumours of magical rape circulated by different sources including the increasingly sensational Malawian media. Wilson’s analysis of mgoneko rumours highlights three variants: women raped mystically; school girls raped en masse in their dormitories; and nachipanti men who wear only underpants and use magical power to rape women, suck their blood, and rob and kill them. These collective imaginations of magical rape and defilement, Wilson suggests, emerge from women and girls’ deep-rooted and genuine concerns regarding initiation into lives of dishonoured sexuality in an era of ubiquitous and gendered vulnerability. Mgoneko stories caution against and alert to the many sexual abuses that go unpunished in a context where gender-related inequities clearly drive HIV, violence and other forms of injustices against women and girls.

Taken together, Wilson’s book is a major intellectual effort to understand popular responses to HIV and AIDS in Malawi. The book shows that a frightening epidemic notwithstanding, humour and hope, and agency and tenacity remain alive in Malawi. Folklore, Gender and AIDS in Malawi is clearly a useful addition to the emerging corpus of social research that seeks to push beyond the grim statistics often cited about HIV in Africa. Through this book, we gain important new insights into the way in which HIV is changing popular imaginations in Africa, how old beliefs are being re-imagined, and how new legends and rumours are being produced. For a world desperately in need of good advice to reduce human despair and suffering, Wilson’s book highlights the value of
looking carefully into the everyday lives of ordinary people to find solutions to the root causes of contemporary social unease.

Chimaraoke Izugbara

*African Population and Health Research Center, Nairobi, Kenya*

cizugbara@aphrc.org

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