

Cultural Practices among the Sena in Nsanje District Malawi: HIV and AIDS and the African Evangelical Church

By

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DECLARATION

I, Lucy Thokozile Chibambo a candidate of Masters' degree in Ministerial Studies in the School of Religion and Theology, University of KwaZulu-Natal, Pietermaritzburg, hereby declare that except for the quotations specifically indicated in the dissertation, and such help as I have acknowledged, this is wholly my original work and that it has not been submitted at any institute for the fulfilment of another degree.

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DEDICATION

I dedicate this work to my late parents Mr and Mrs Kamba Phiri. I also dedicate this work to my husband Songelwayo and to our three daughters Mandhlase, Nomusa and Sibusisiwe for their support in this research paper.

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ABSTRACT

This study focuses on the cultural practices that contribute to the increase of HIV and AIDS in Nsanje district of Malawi. The study also proves the hypothesis that the African Evangelical Church has not responded effectively to the cultural practices that influence the spread of HIV. As a result, this has led to the high prevalence rate of HIV in the Nsanje district.

Data was collected using content analysis.

The findings of this research are that people of Nsanje district have maintained their cultural practices within the context of HIV and AIDS. The key cultural practices that have been maintained are widow cleansing, widow inheritance, bonus wife, *fisi* (hyena) custom, polygamy and *bzyade*. The study has also found that sexual intercourse is used in most rituals as a tool for purification. It is a great challenge for church and the community to modify or stop these cultural practices because some of the people in Nsanje district claim that these cultural practices have been practiced since the existence of their forefathers in Nsanje district.

The study has also found that there are multiple sexual partners involved in the sexual rituals which increase high risk of the spread of HIV. Therefore, the study recommends that the community together with the church should take **a stand** in responding to the cultural practices in an attempt to combat the spread of HIV.

ACRONYMS AND ABBREVIATIONS

AEC	African Evangelical Church
AEF	African Evangelical Fellowship
AGM	African General Mission
AIDS	Acquired Immune Deficiency Syndrome
ARVs	Anti-Retrovirals
DC	District Commissioner
DHSs	Demographic and Health Surveys
EAA	Ecumenical Advocacy Alliance
HBC	Home Based Care
HIV	Human Immunodeficiency Virus
LAV	Lymphadenopathy-Associated Virus
LWF	Lutheran World Federation
MHRC	Malawi Human Rights Commission
MOHP	Ministry of Health and Population
NACP	National AIDS Control Programme
OIs	Opportunistic Infections
PWLHA	People who are living with HIV and AIDS
SIM	Society for International Ministry
UNAIDS	Joint United Nations Programme on HIV and AIDS
UN	United Nations
WCC	World Council of Churches
WHO	World Health Organization

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CHAPTER ONE

Introduction

1.1. Background introduction

This research focuses on the cultural practices in relation to the spread of HIV in the Nsanje district of Malawi. The concern of the study is the high prevalence rate of HIV in the Nsanje district which is 35% higher than in any other district in Malawi.¹ The spread of HIV is said to be caused by cultural practices.² As a result, we seek to explore what the response of the African Evangelical Church is to cultural practices, in relation to the spread of HIV in Nsanje district.

According to the Malawi Human Rights Commission (MHRC) (2006), “Malawi is governed by a culture whose beliefs, values, customs and a host of social practices have a powerful influence on community life.” The MHRC (2006), states that Section 26 of the Malawi Republican Constitution regards culture as a human rights issue, because it states that “Every person shall have the right to use the language and to participate in the cultural life of his or her choice.” This is why Lwanda in Kalipeni (2004:35) states that at the inception of HIV in Malawi in 1985 cultural practices were not considered, or recognized, or named as factors contributing to the spread of HIV. HIV and AIDS were related to *tsempho*, which is an illness that is perceived as a punishment given to a couple who violated some sexual intercourse taboo.³ *Tsempho* is related to AIDS because it has similar symptoms to that of a person who suffers from an AIDS related disease. This will be discussed in detail later in this study.

The National AIDS Control Programme (NACP) estimated that with the population of 12.3 million in Malawi, 1 million people are living with HIV and AIDS. The HIV prevalence rate in Malawi stands at 14%. This has caused the life expectancy of Malawian people to drop from 65 years in 1987 to 55 years in 2005.⁴ UNAIDS (2006) stated that AIDS is the main cause of death among adults in Malawi, as it is mostly a

¹ www.igh.org. Accessed on 26-09-2008

² Charles Banda states that the health workers in Nsanje district are blaming the spread HIV and AIDS on traditional beliefs and practices. <http://www.newsfromafrica.org>. Accessed on 26-09-2008.

³ <http://www.panosaid.org>. Accessed on 11-06-2008

⁴ [Http://www.unhabitat.org](http://www.unhabitat.org). Accessed on 03-06-2008

sexually transmitted disease. The estimated annual deaths caused by AIDS in 2005 were 86,592 people. This is why in 2003 Thengo Maloya, the minister of land affairs, urged Malawians to acknowledge that the main cause of death in Malawi is from AIDS related diseases.⁵ He emphasized that there is no cure as yet for AIDS. The drugs that are available are not a cure, but to prolong life.⁶

Although each and every district in Malawi is involved in cultural practices that may influence the spread of HIV, this study will focus on the Sena people of Nsanje district. Nsanje district is located in the southern region of Malawi and the district covers an area of 1,942 Km² and it has a population of 194,924 (1998 census). The district Assembly says the population now is between 250,000 and 300,000.⁷ The Sena and the Mang'anja are the predominant tribes. These tribes practice a strong patrilineal system, whereby the marital residence is at the husband's maternal home and inheritance is through the father.⁸ According to Tauzi (2006:14) "the Nsanje district is culturally very conservative and the people strongly value birth and death cleansing rituals as well as widow inheritance and polygamy." Tauzi continues to say that Nsanje district has the highest HIV prevalence rate in the country (Malawi), which is 35%, two times higher than the national HIV prevalence rate.

Tapiwa Gausi points out that Nsanje district has a high HIV prevalence rate due to the cultural practices.⁹ Some of the cultural practices demand that a widow has to have sex with a brother or male relative of the dead husband as a cleansing ceremony before the funeral.¹⁰ Gausi acknowledges that she does not have statistics that show the percentage of the cases that contributed to HIV through the cleansing ceremony (widow cleansing and other rituals), but she strongly believes that the cleansing ceremony is one of the contributing factors towards the spread of HIV in Nsanje district among the Sena people.¹¹

⁵ <http://cpafrica.org.uk>. Accessed on 11-09-2008

⁶ <http://cpafrica.org.uk>. Accessed on 11-09-2008

⁷ <http://www.nationmalawi.com>. Accessed on 19-05-2008

⁸ <http://www.friendsofmalawi.org>. Accessed on 26-07-2008

⁹ <http://www.wvi.org/wvi/archives/africa/malawi.htm>. Accessed on 02-04-2007.

¹⁰ This will differ from District to District, because some Districts demand that a widow should be cleansed after few days after the burial of her husband.

¹¹ [Http://www.wvi.org](http://www.wvi.org). Accessed on 02-04-2007

My interest in the study emerged through observations that have been made by the writers among the Concerned Circle of African Women Theologians,¹² concerning cultural practices, violence, issues of gender, HIV and AIDS and many others. Most of the observations made by Circle writers on the issues mentioned above were an eye opener to me because the information concerning certain cultural practices was new to me. This is despite spending part of my life among the Sena people in Nsanje district, who are said still to be involved in cultural practices.

When I was growing up among the Sena people, I was not told or taught about the cultural practices that involve sex as a ritual. For this reason I wanted to learn more about the cultural practices and how they contribute to the spread of HIV. I want to find out how Sena people understand their cultural practices in the era of HIV and AIDS. I also want to explore if there are any cultural practices that can be used as HIV prevention, rather than condemning all the cultural practices. Lastly, I want to find out how much the African Evangelical church in Nsanje is involved in combating HIV.

The study also explores what other researchers have uncovered or written in the area of cultural practices in Malawi, particularly Nsanje district. However, researchers have seemingly not noted the issue of cultural practices, or how the church can be involved in responding to cultural practices in relation to the spread of HIV. Tauzi (2006) focused on factors that contribute to HIV prevalence in Nsanje district. Her main focus was on how poverty forces people to be involved in cultural practices for financial gain.

The MHRC (2006) carried out research on *Cultural practices and impact on the enjoyment of human rights particularly rights of women and children in Malawi*. The focus of the MHRC was mostly on the rights of women and children. The study concentrated on cultural practices that deny women and children enjoyment of human rights. Other organizations that have carried out research on cultural practices are the United Nations (UN), National AIDS Commission (NAC) and many others.

¹² Elizabeth Amoah, Dorcus Akitunde, Musa Dube, Beverly Haddad, Fulata Moyo, Sarojini Nadar, Mercy Oduyoye and Isabel Phiri just to name few.

I would hope the outcome of the study may influence behaviour change and perhaps some of the rituals in the community and in the church, thereby reducing the spread of HIV and that it may also be applied to other districts in Malawi where similar cultural rituals are practiced.

The key research question in this study is: What is the response of the African Evangelical Church to cultural practices, in relation to the spread of HIV in Nsanje district?

The study is aware of other factors that contribute to the spread of HIV. Stigma and identity, which the study will not be primarily focused on has increased the spread of HIV in the area. However, this study will focus on sexual cultural practices in relation to the spread of HIV. The study is also limited to a literature review.

The hypothesis of this study is that the African Evangelical Church in Nsanje district has not responded effectively to cultural practices which may influence the spread of HIV. As a result this has led to the high prevalence rate of HIV in the area.

1.2. Preliminary literature study and the reasons for choosing the topic

This researcher has built on what other researchers have written with regard to cultural practices, the church and its response to cultural practices and the spread of HIV in Sub-Saharan Africa, Malawi and particularly the Nsanje district.¹³ As this study explores the involvement of the church in response to cultural practice in relation to the spread of HIV in the community of the Nsanje district, Bonino (1979:108) points out that parenthesis

The church responsibility is to respond to the suffering of those affected and infected by HIV and AIDS and to be able to see that there is no abuse of human rights. In addition it is the role of the church to tackle and condemn cultural practices that prevent women from being in charge of their bodies.

¹³ Including Elesinah Chauke (2003) Musa Dube (2004), Alta van Dyk (2008), Daniela Gennrich, Bev Haddad (2006), George Kamwendo (1999), John Lwanda (2004), Ronald Nicolson (1995), Isabel Phiri (2003), Neville Richardson (2006) and Mercy Tauzi (2006) just to name few.

According to Chauke (2003:140) the church is the messenger of God commissioned to serve the community (Matthew 28:16-20). So as God's messenger, God has equipped the Christian church for service and as Ephesians 4:13 points out, God has given every believer the spiritual gift in order for Christ to be seen through his messengers. This is why Nicolson in Richardson (2003:48) states that those churches or individual Christians who ignore facing the problem (HIV and AIDS) are out of step with the purpose of the church. He continues to say that the church cannot be a church if it does not minister to people with AIDS. One can say that the African Evangelical Church cannot be a church if it does not respond to cultural practices that may influence the spread of HIV, because people who are infected and affected as a result of cultural practices are made in the image of God. This is why the church is commanded to serve the lives of the people in the communities where the church is planted.

The literature that will be used in this study will be divided into three parts which are; i) literature on defining culture, ii) cultural practices, HIV and AIDS and iii) the response of the African Evangelical church to cultural practice in relation to HIV and AIDS.

1.3. Literature on defining culture

This section deals with the definition of the word culture according to different authors. Naude (1995:72) states that "Culture is notoriously difficult to define, people with different interests and concerns use the word in different ways." In other words Naude is saying that the word culture has no universal definition, it is broad and complicated. This is confirmed in Ayanga (2008:36) who states that "the term culture is complex because it encompasses the whole of human life and its activities. Culture is specific to human beings." It is lived by people and it describes people's way of life, both material and spiritual. Kidd (2002:9) agrees with Naude and Ayanga by stating that "Culture is one of the two or three most complicated words in the English languages," mainly because it has come to be used for important concepts in several distinct intellectual disciplines and in several distinct and incompatible systems of thought." Although, the word culture is a complicated word to define, Giddens (1995:31) defines culture as "the way of life of the members of society, or of a group

in a society.” In short Giddens is saying that culture is the way different people from different societies behave in their everyday life.

According to Kanyoro (2003:89) culture is defined as follows

A particular people (nation, tribe, ethnic group) has its own culture, its distinct way of living, loving, eating, playing and worshipping. Culture may refer to the musical and visual arts, modern influences on life and acquired tradition, or to regulations that bind the life of a community... culture can be a double edged sword: it can form community identity and it can also be used to set apart or oppress those whom culture defines as other.

Thus Kanyoro observes that culture is an everyday activity of a certain group of people. Culture can be used to build the society or oppress those who are perceived as weak in the society.

Boer in Dube (2003:89) defines culture from the Marxist perspective. He says that culture is “the product of the ruling class which serves to maintain dominion over the powerless.” In other words Boer argues that according to the Marxist perspective, culture does not serve everybody in the society because those in power control the powerless, so culture is for the benefit of the powerful people. In this definition Boer and Kanyoro agree that culture can be used to oppress those whom culture defines as others (the powerless, the poor and the marginalized).

However, Bodley in Ollielo (2003:24) states that “culture is not static; it changes according to generation, time and place.” This is confirmed by Ayanga (2008:37) who agrees with Bodley by stating that culture is not static and she continues to say that it becomes dangerous when culture is treated as too scared to undergo change. Bodley (2003:30) argues that culture is an institution that is made by humans and it has elements that are good and evil that can build or destroy the well-being of men and women.

Bodley’s and Ayanga’s definitions of culture can help the community of Nsanje to realize that times have changed. Some of the rituals that were used before HIV are no longer relevant during this era of HIV and AIDS.

Furthermore, Niwagila (1991:407) expresses his concern by stating that it is not a simple thing for people to stop or change certain cultural practices. He continues to say that condemning some of the cultural practices has very little effect on the person because most people grow up in the system of cultural practices. Oduyoye (2001:9-10) also argues that Africans have the ability to change the harmful rituals, so it is important that Africans should be given the right to make decisions about the modification of harmful cultural practices, rather than condemning them as Niwagila says.

1.4. Literature on cultural practices, HIV and AIDS

As stated in this study Niwagila (1991:407) points out that it is not simple to stop or change some of the cultural practices that may influence the spread of HIV, because some people grow up in these systems of cultural practices. This was confirmed by chief Ndamera who argued that the community of the Nsanje district has been engaging in certain cultural practices since the existence of their forefathers. So there is no way that people of Nsanje district are going to be told to stop practicing them.¹⁴

Tauzi (2006) carried out a study on high risk behaviours that contribute to the high prevalence of HIV in the Nsanje district. In the outcome of her research Tauzi found that cultural practices still exist and are maintained to the present day. She also found out that cultural practices in the Nsanje district have dual usages, being for ritual cleansing, which is for protection of life and for economic survival. In 2006 the MHRC found that cultural practices deny women and children the enjoyment of their human rights in Malawi. The MHRC (2006) further states that although there are some cultural practices which contribute to the enjoyment of women and girls, yet some deprive women and children the rights to education, health, personal liberty and dignity. On the note of cultural practices, Lwanda (2004) carried out a study of 'Political, Cultural and Medical aspects.' Lwanda explains that the aim of his study was to find out how politics, culture and medicine contribute to the spread of HIV. The outcome of his study was that there are some sexual cultural practices that influence the spread of HIV, because they are practiced without protection and people

¹⁴ <http://www.ipsnews.net>. Accessed on 28-05-2008

practicing them do so with more than one partner. Partners involved in ritual cleansing are not tested before the ritual for HIV infection.

Kamwendo in 1999 focused on a different direction in his research. Instead of condemning cultural practices he looked for cultural practices that can be used to combat HIV in Malawi. He encouraged Malawians to go back to the original cultural practices, because they would help to reduce the spread of HIV. In the outcome of his study Kamwendo found that cultural practices can do little to combat the spread of HIV. He states that although it is important to empower women, the most important thing is to sensitise men, so that both men and women would work together to combat the spread of HIV.

Ayanga (2008:37) acknowledges what Kamwendo has stated that culture is dynamic, changing as human needs change. Therefore, people cannot continuously rely on culture to solve new and ever changing challenges and situations, because HIV and AIDS challenge the communities to embrace culture as dynamic.

1.5. Literature on church in response to HIV and AIDS

The term 'church' will be used in the study referring to the body of believers belonging to the African Evangelical church.

Togarasei (2005:3) defines church as a congregation of believers made up of individuals who came together to make an institution called church. Chauke in Phiri (2003:64) has pointed out that God has given every believer the spiritual gift for the completeness of the Christian church (Ephesians 4:13). In other words Chauke is saying that the church has the capacity to respond to the issues affecting the community of Nsanje.

Jacob (2000:15) states that "Churches have strengths, they have credibility and they are grounded in the community. This offers them an opportunity to make a real difference in combating HIV and AIDS." This goes without saying concerning the African Evangelical Church, because it was one of the first missionary churches in Nsanje district. So it has been in the community long enough to know what is going on concerning cultural practices.

Waruta (2000:96) points out that the widow cleansing practice poses a danger of spreading HIV as well as being a moral problem. Therefore, the church has a duty to offer counselling to family members so as to alleviate the danger of spreading the disease. Waruta continues to say that the church should provide cleansing alternatives to avoid the feeling of guilt in the widows and widowers if traditional cleansing is not performed. The WCC Study Document (1997:33) explains that churches are expected to give both spiritual direction and moral guidance, not only among their own communities but with the society at large on issues raised by the HIV and AIDS pandemic. On the other hand Jacob (2000:15) argues that in order for the church to respond to this challenge, the church itself must be transformed in the face of the HIV and AIDS crisis, in order to become a force for transformation bringing healing, hope and accompaniment to all affected by HIV AIDS.

The issue of cultural practices in relation to the spread of HIV and the response of the African Evangelical Church is a serious problem; research into these issues shows as lack the church's involvement. It is important to understand that some of these cultural practices are not practiced just for the sake of pleasure, or financial gain as Tauzi says. This is why there is a need for the church to be involved in the community in response to these issues. Lastly, the researchers did not indicate or repeat what the people of Nsanje district say about the cultural practice. The only voices that are heard are the voices of the researchers and their subsequent findings on the cultural practices in Nsanje district.

1.6. Research problems and objectives: Key questions to be asked

As was suggested in section one, the key research question in this is: What is the response of the African Evangelical Church to cultural practices, in relation to the spread of HIV in Nsanje district?

Therefore, the study seeks to ask the following questions;

1. To what extent do cultural practices influence the spread of HIV?
2. How, if at all, has the African Evangelical church responded to cultural practices in light of HIV/AIDS epidemic?
3. What programmes should be put in place to address these cultural practices in order to minimize the spread of HIV?

The objectives of this study are:

1. To examine cultural practices in the light of the spread HIV.
2. To understand ways in which the African Evangelical church is addressing these cultural practices.
3. To explore ways that can be used by the African Evangelical Church in contributing towards addressing the cultural practices that influence the spread of HIV.

1.7. Research problems and objectives: Broader issues to be investigated

Human dignity and identity are some of the underlying issues to be investigated in this study, because human dignity and identity are not only for the elite and privileged. For “the source of human dignity is rooted in the concepts of *imago Dei* (image of God), which says that each and every human being is made in the image of God.”¹⁵ This is why Moyo (2005:131) says that the mission in the midst of the HIV and AIDS pandemic is to bring hope by reminding everyone that women as well as men are made in the image of God and therefore deserve equal life and dignity.

The research is important for it will deal with the issue of cultural practices that violate the dignity and identity of the people practicing them. This study is also necessary because it seeks to offer a Christian model that will contribute towards the social transformation of cultural practices that may influence the spread of HIV.

1.8. Principle theories upon which the research project will be constructed

This study will use the “feminist cultural hermeneutics” theoretical framework, the theory of Misimbi Kanyoro (2001), who speaks from a feminist perspective. Although Kanyoro’s focus is on women, this study will focus on both men and women because both men and women are infected and affected by HIV through cultural practices. This will be discussed in detail later in the study.

Kanyoro (2001:162-165) argues that African culture, biblical beliefs and practices need to be analysed from a gender perspective, because gender analysis seeks to identify injustices and to suggest that societal correction is warranted. Gender analysis

¹⁵ <http://www.ascensionhealth.com>. Accessed on 04-06-2008

helps to understand how societies are organized and how power is used by different groups of people. For Kanyoro (2001:164), it is not enough simply to analyse culture without reference to the people who maintain the culture and on whom the culture impacts. She continues to say that cultural hermeneutics seeks to raise questions of accountability of the society and the church to women, in taking responsibility for their lives. She states that any pattern of discrimination or oppression is contrary to God's justice, because both men and women are made in the image of God (Genesis 1:27). Therefore, women have the right to live in dignity. Also Ayanga (2008:37-38) argues that "concerned African women have insisted on approaching culture with critical hermeneutics and with readiness to change and adapt, particularly where life and death are so affected by the context of HIV and AIDS."

Oduyoye (2001:12) argues more deeply by saying that cultural hermeneutics enables women to view the Bible through African eyes and to distinguish and extract from it what is liberating, although not all in African culture is liberating. She says that "We come to the Bible with the same cautious approach we have to the culture. Any interpretation of the culture of the Bible is unacceptable if it does harm to women, the vulnerable and voiceless." Oduyoye points out that hermeneutics of culture direct women not to take things for granted, following tradition, rituals and norms as unchangeable givens. Hermeneutics of culture helps to identify the positive aspects of culture and to promote them. This is why Oduyoye (2006:9-10) argues that only those who practice these religious rituals can make adjustment about their modification or their usefulness. Africans themselves have the vital responsibility for evaluating their use. Kanyoro (2001:162) agrees with Oduyoye by calling both men and women to revisit their cultural practices and analyse them as to how they are promoting the well-being of the men and women practicing them.

As men and women analyse their culture in order to find out if they are promoting the well-being of both men and women, we observe that Edet in Oduyoye (2006:32) states that the questions that should be asked are: do these rituals oppress women or promote their welfare? What are the negative and positive points? Do the positive aspects fit the Christian perspective? What has Christianity been able or unable to do about these rituals? Lastly, Oduyoye (2001:14) states that cultural hermeneutics is the

African women's way of taking seriously the issues of continuity and change. This is why using the feminist cultural hermeneutics approach, the theory of Kanyoro, will help the study to analyse and confront cultural and religious practices that pose as a threat to the spreading HIV in the Nsanje district. It is vital that a careful and systematic analysis of the major cultural practices prevalent in the Nsanje district is undertaken to see how cultural practices impact on the well-being of men and women, enabling them to live life to the fullest.

1.9. Research methodology and methods

According to Blanche (2006:123) the methodology of research study is the approach that is used to collect and analyse data. Content analysis will be used as a tool of gathering and analysing the existing data in this study. According to Neuman (2006:321-322) content analysis "is a technique for gathering and analyzing the content of the text." This study is an empirical study analysing the existing data, which involves textual criticism, historical study, discourse analysis and content analysis, in endeavouring to address the issue of cultural practices from the theological and philosophical perspective. Content analysis also includes books, newspapers, magazine articles, speeches, official documents and advertisements. In addition Neuman (2006:323) says that content analysis allows the researcher to discover content in a different way, different from the ordinary way of reading a book or watching a television programme.

1.10. Structure of dissertation

Chapter 1: General introduction: This chapter deals with the general introduction of the study, which is background, preliminary literature study and also deals with research problems and objects, the theoretical framework, research methodology and methods.

Chapter 2: Defining culture. The chapter focuses on a general definition of culture in African contexts and other contexts outside of Africa. The study seeks to examine the impact of culture in the lives of Sena people in the Nsanje district.

Chapter 3: Basic facts about the HIV and AIDS pandemic. This chapter gives basic facts about the HIV and AIDS pandemic. How people of the Nsanje district

understand the HIV and AIDS pandemic. The chapter will look into the impact of HIV and AIDS pandemic and the sources of knowledge used in the Nsanje district in communicating the message of HIV and AIDS.

Chapter 4: Cultural practices, their function and the spread of HIV

Chapter four, deals with the cultural practices, their function and how they contribute to the spread HIV.

Chapter 5: Response of the African Evangelical Church to HIV and AIDS.

The chapter focuses on the African Evangelical Church, its strengths and its weaknesses in responding to HIV and AIDS. It also examines the challenges faced by African Evangelical church in responding to cultural practices that may influence the spread of HIV.

Chapter 6: Analysis of the cultural practice of the Sena people in Nsanje district

In this chapter, the Feminist cultural hermeneutics theory is used to analyse the cultural practices that may pose as a threat to the well-being of Sena people within the Nsanje district

Chapter 7: Conclusion and recommendations.

This chapter deals with a conclusion and recommendations. Issues raised in the study are discussed in this chapter. The outcome of the study will clearly show and recommend the way forward.

1.11. Conclusion

The study has discussed the issues of high rate of HIV in the Nsanje district in relation to cultural practices. The researcher in this chapter was seeking to explore how the African Evangelical Church has responded to both cultural practice and HIV and AIDS in the Nsanje district. The information has also shown that the officials from government sectors are concerned about the cultural practices that fuel the spread of HIV. Some are condemning the practices and commanding the community of Nsanje district to stop or modify the deadly cultural practices. In addition information given has shown that culture has great impact in the lives of people in most communities.

CHAPTER TWO

Defining Culture

2.1. Introduction

Throughout history, people all over the world have shared in common the fact that they belong to a certain culture. There are many different cultures in the world and each one of them is unique on its own. In this chapter the focus will be on defining culture according to different authors. The chapter will also explore the characteristics of culture, the culture and its challenges and culture as an obstacle to HIV prevention which will give some insights as to why people from different cultures behave the way they do. The information revealed in this chapter will be used in the forthcoming chapters when discussing cultural practices and the spread of HIV, theoretical framework and the response of the church to HIV and AIDS and cultural practices.

2.2. Defining Culture

For the purpose of this study, culture will be defined as: people's ways of life, their beliefs, and values, customs that guide and sustain them over a long period. As chief Ndamera pointed out their culture and their practices are as old as their tribe and they were practiced by their ancestors since time immemorial.¹⁶

According to Eagleton (2000:3) the word culture is not new; it has quite old linguistic roots in Latin terminology having to do originally with the care and tending of crops or animals. The idea that human societies differ in customs and practices is at least this old. In other words, Eagleton is saying that the word 'culture' has been in use since the existence of human beings, arising because of differences in customs and practices. In addition Kraft (1980:103) stated that neither anthropologists nor theologians can speak conclusively about the beginning of culture. The reason is that no one knows when culture began. Bate (2002:17) defines it as a complex concept with many different meanings and it is used in different ways. Bate recognises that culture is broad and complex and has no universal meaning. Most people define it according to their understanding and the way they observe the behaviour of certain

¹⁶ <http://ipsnews.net>. Accessed on 28-05-2008

groups of people. Kidd (2002:5) and Giddens (1995:31) are in agreement in defining the word culture they say that culture is the way of life of a group of people. In short the two authors are saying that culture consist of the everyday activities of the society. In addition Giddens (1995:31) states that these activities of the society include how people dress, their marriage customs and family life, their patterns of work, religious ceremonies and leisure pursuits. It also covers the goods they create and which become meaningful to them.

However, Hoebel in Kraft (1980:46) has defined culture according to the understanding of anthropologists. Hoebel states that anthropologists see culture as the integrated system of learned behaviour patterns which are characteristics of the members of the society and which are not the result of biological inheritance. In short Hoebel is saying that culture is the everyday life of the community, which is not inherited through birth, but through learning. Anthropologists state that culture is learned behaviour. Kidd (2002:33) has defined culture according to the understanding of Marxism. He defines culture as the product of the ruling group in order to justify its dominance over others. In other words Kidd states that according to Marxism, culture is a tool of oppression to oppress the voiceless and the marginalised.

However, Bodley (2003:2) explains that:

Culture consists of everything on the list of topic, or categories, such as social organisation, religion, or company. Culture is a social heritage, or tradition, that is passed on to the future generation and is shared, learned human behaviour, a way of life. It is ideas, values or rules for living. Culture is the way human beings solve problems of adapting to the environment or living together. It is complex ideas, or learned habits, that inhibit impulses and distinguishes people from animals. Culture consists of patterned and interrelated ideas, symbols, or behaviour on arbitrarily assigned meaning that is shared by society.

Bodley (2003:2) has defined culture in a broader way including different aspects of life to accommodate all that it takes to define culture. Bodley and others have defined culture as something that one learns from the society, yet Hillman (1975:57) argues that culture is something that can only be achieved from permanent human groups. Hillman points out that, "Culture is a complex system of learned patterns of thought and behaviour which belong commonly and characteristically to members of a permanent human group who share a common history and destiny."

Hillman (1975:57) continues to argue that human groups, like factory workers or the army, cannot claim to have culture. Culture is something that is created, developed and handed on, in a permanent human group.

Hillman's definition of culture is debatable, because in his definition of culture he emphasises that culture can only be learned in a permanent group. Yet culture is learned and passed on from one generation to another. The army and the factory workers have their own culture, considering the language they speak, the songs they sing, the uniforms they wear, the food they eat and the daily activities that take place in their community. Some of these activities that take place in the army or factory community have been passed from one generation to another. So, Hillman cannot say that the army or the factory people have no culture. Kidd (2002:5) and Giddens (1995:31), point out that culture is the way of life of a group of people, which therefore makes the army and the factory people qualify in having their own culture.

Gasa (1994:20) argues that people from the same racial group will not necessarily adopt the same culture. In short Gasa is saying that people from the same racial group are able to learn or adopt more than one culture. In other words Gasa is saying that despite the fact that the army and the factory workers have their own culture as individuals, this does not stop them from learning or adopting other cultures. Coming from the same racial group is not a guarantee that people will have the same cultural habits, because different people are influenced by other cultures they come across. One can even say that in a real sense there is no pure culture, because of intermarriages and because human beings interact with other human beings from different cultures, which means that at one point or another one is bound to learn from other people's culture. Although Hillman (1975:59) points out that each culture is unique, this does not mean that people cannot learn from each other's cultures.

Nida's (1954:28) definition of culture is different from Hillman because Nida defines culture as;

All learned behaviour which is socially acquired that is, the material and non material traits which are passed on from one generation to another. They are both transmittable and accumulative, and they are cultural in the sense that they are transmitted by the society not by genes.

In addition Nida (1954:28) points out that where there is a human culture, there is a human society not only expressing this culture but transmitting it. Castillo (1997:20) is in agreement with Nida by saying that culture is the body of knowledge that is always organised in a systematic fashion so that it can be easily passed on. This body of knowledge does not come from one culture, if one take into consideration that culture can be influenced by another culture. Gasa (1994:25) argues that although culture is passed from one generation to another, one culture influences the other, in a true sense. For example, we see the way the youth in Africa are influenced by American culture. In other words Gasa states that there is no culture that is pure because one culture influences other cultures. Although Gasa (1994:25) argues that one culture influences the other, Hillman (1975:60) explains that the differences in cultures do not mean that one culture is superior to the other and cultures should not be labelled as simple or complex, primitive or advanced, savage or civilised, because each culture is unique on its own.

This is why Kidd (2002:75) argues that human beings should not be removed from the wider society; because it means that one is ignoring the fact that human beings are social beings who live within a culture. Culture should not be neglected because that is where everything started and if it is not causing any harm it should be promoted.¹⁷ As Hillman (1975:59) points out “Culture should be recognized because each culture represents, conserves and communicates something of a total human experience in its own limited but unique fashion.” In other words Hillman is saying that culture should be respected, because different people communicate in different ways according to their culture. In addition people should not judge a custom of one society using his or her own culture, since they both have different societies and cultures.¹⁸

Kidd (2002:23) explains that it becomes a problem when one culture is seen to be better than another because no one is given authority to judge which culture is superior to the other. Niwagila states (1991:407) this was the mistake that was made by missionaries when they came to Africa; they judged African culture by comparing it to the Western culture. As a result missionaries felt that African people were not

¹⁷ <http://www.dailytimes.bppm.com>. Accessed on 16-10-2008

¹⁸ <http://ivythesis.typepad.com> Accessed on 05-10-2008.

civilized and their culture needed to be modified. Niwagila (1991:407) argues that one cannot condemn African culture without taking into consideration its religious context, that of the family, clan and society. The next section will deal with the characteristics of culture.

2.3. The Characteristics of Culture

In this section the focus will be on four characteristics of culture, how culture operates in a group of people, how it is learned, how transmitted and how it changes.

Firstly, culture is shared by a group of people, and it does not belong to individuals, it is also shared among many people of certain parts of the world.¹⁹ In agreement Olliello (2005:30) states that culture always refers to a specific group of people, which means that culture has its limitations of representation. In addition culture depends heavily on society,²⁰ as Nida (1954:28) states that where there is human culture, there is human society. In other words Olliello and Nida are saying that culture can only operate where there is human society, because it does not operate in a vacuum.

Secondly, culture is learned, which means that culture is not biological, no one is born with culture and the knowledge of culture. Human beings are raised through the teaching and guidance of their own culture. So the process of living is based on learning properly and in terms of the culture in which human beings live.²¹ Human beings do not learn culture only from their family members. Culture can be learned from the media, teachers, friends, and even strangers who can have an impact on cultural learning.²²

Furthermore, culture is transmitted from one generation to another. It can be transmitted in different ways, with some ways being through oral traditions, writings, songs, art, dance and symbols, just to name few. Culture is accumulated and whatever human beings have learnt in the past, the present and the future generation might add to it to produce something better as they go along the roads of everyday life.²³ In short

¹⁹ <http://ivythesis.typepad.com>. Accessed on 05-10-2008

²⁰ <http://ivythesis.typepad.com>. Accessed on 05-10-2008

²¹ <http://www.csus.edu/org>. Accessed on 11-09-2008

²² <http://www.cc.ysu>. Accessed on 02-08-2008

²³ <http://ivythesis.typepad.com>. Accessed on 05-10-2008

culture is something that is learned and the knowledge acquired is passed through from one generation to another and in a different medium. Lastly, culture is not static, it changes continuously, despite being broad and complex it loses some of its qualities and gains new ones.²⁴

Shorter (1987:17) points out that this transformation has greatly affected values, relationships and the institutions within humanity, including marriage and family life. In addition Bekker (1999:190) points out that “culture is never static, it is dynamic.” He continues to say that culture changes the same way human beings change. In spite of its changes, culture continues to give a community a sense of identity, dignity, continuity, security and binds society together.²⁵ It is difficult to change culture, as it requires people to change their behaviours. It is not an easy thing to do for people to change the old ways of doing things and to start performing the new behaviours consistently.²⁶ However, the rate of change and the aspects of culture that change vary from society to society.²⁷ This is why Kondwe (1999:3) says that there are always exchanges and inter-changes between cultures. Some aspects of culture change quickly such as technology and ways of dressing and eating habits.

Changes in cultural values are however much slower to take effect. Ollielo (2005:27) argues that if change has to take place it must come from within and not from without. This is confirmed by Oduyoye (2006:9) who also argues that it is only those who practice certain religious rituals or who practice culture that can make judgements about their modification. After all, Africans have the ultimate responsibility for evaluating their own cultures. Despite its definitions, its characteristics, certain cultural practices can be an obstacle in HIV prevention in the era of HIV and AIDS, as some customs may cause the exchange of body fluids, for example razor blades used for bodily adornment.

2.4. Culture and its challenges

Shorter (1987:17) cites that all cultures throughout history have undergone some form of regular change. The world today is experiencing rapid growth in scientific and

²⁴ <http://ivythesis.typepad.com>. Accessed on 05-10-2008

²⁵ <http://www.csus.edu/org>. Accessed on 11-09-2008

²⁶ <http://humanresources.about.com>. Accessed on 14-09-2008.

²⁷ <http://anthro.palomar.edu/culture/culture2.htm>. Accessed on 03-07-2008.

technological knowledge. This transformation has profoundly affected values, relationships and institutions within humanity including marriage and family life. This is why ethnic groups that cling to certain aspects of their culture have no space in modern society, because of the dangers with the issue of HIV and AIDS. No longer can we cling to every custom, tradition, myth and taboo.²⁸ Due to the change of scientific knowledge, culture has been affected because what was relevant then is not relevant now. Also there is no use for the society to hold on to cultural practices that are a threat to society and society today should consider the dangers of HIV infection. According to Berry (1995:25), culture is going through the challenge of change due to the influence of each culture equally. However, Berry argues that in the true sense, one culture does not influence all others.

Apart from cultural changes, some cultures are facing a threat of losing their language. It has been established that “a lost language is a lost culture; a lost culture is the loss of invaluable knowledge.”²⁹ In other words it is important for culture to keep its language because that is knowledge that needs to be passed on from one generation to another. The other challenge that is faced by culture is the ignoring of the traditional medicines. Some people prefer Western medication instead of tapping on traditional medicine and knowledge systems to combat diseases like HIV and AIDS.³⁰ Cultural medicines cannot heal AIDS, but they can sustain people who are living with HIV and AIDS (PWLHA).³¹ Despite its challenges culture can be used for the benefit of the society, by promoting traditional practices that promote the well-being of the society.

2.5. Culture as an obstacle to HIV prevention

Culture can be a tool that can be used to build or destroy the society. According to Hinga (2008:37) “culture is also a danger to women’s survival and health in the age of HIV and AIDS, since many cultural practices that are detrimental to women are considered too sacred to undergo change.” In this study, discussion on harmful cultural practices will include both men and women, taking into consideration that

²⁸ <http://www.csus.edu/org>. Accessed on 11-10-2008

²⁹ <http://www.csus.edu/org>. Accessed on 11-10-2008

³⁰ <http://www.csus.edu/org> Accessed on 16-09-2008

³¹ <http://www.csus.edu/org> Accessed on 16-09-2008

both men and women do get infected by the HI Virus through the practice of cultural rituals that are likely to spread the virus.

One of the factors that poses as an obstacle to HIV prevention is that of cultural taboos. Kanyoro (1996:163) defines taboo as something which religion regards or customs regard as traditionally forbidden. In addition Kanyoro points out that every belief, custom and tradition in Buganda in Uganda has taboos which accompany it. This goes for most African people in many parts of Africa. Kanyoro (1996:163) states that “taboos are used in the society to prevent the breaking of customs and principles, since the breaking of taboo is a disgrace in the society and is met with bad luck, rejection or even death”.

Taboo is an obstacle in HIV and AIDS media reporting because matters to do with sex are traditionally taboo topics in the traditional African communication. As a result these taboos remain the secret of the society.³² In addition Haddad (2006:84) points out that church leaders have a problem in teaching about sex in public because culturally sexual matters are not discussed publically. Kanyoro (2006:145) argues that some of the African taboos may sound strange in a country where issues are carefully analysed and people do not take things for granted. Kanyoro continues to say that these taboos are meaningful for those who stick to them and when they are analysed, a lot can be learned about the philosophy behind the people’s thinking. In other words Kanyoro is saying that not all the African taboos are bad, there are some that can be used for the benefit of the society.

Cultures find their expressions through language, but some of the cultural languages can be obstacles to HIV prevention, for example, when they are used in a negative way to describe someone who is HIV infected.³³ In short, if language is not used in the proper way it can be a tool to stigmatize and discriminate against people who are HIV infected. It is important that the society should be sensitive in the use of language, because in doing so it will be easier to preach the message of prevention and care to people who are infected and affected.

³² <http://aids-africa.union.org>. Accessed on 16-10-2008

³³ <http://aids-africa.union.org>. Accessed on 16-10-2008

2.6. Conclusion

Information given in this chapter has shown that the word 'culture' is broad and complex. It has no universal definition and is defined as activities of society. Culture is not biological, but is passed on from one generation to another. Culture is a tool that can build or destroy the community. One culture should not be viewed as superior to other cultures as each culture is unique. Despite this definition the study focused also on the characteristics of the culture which are: culture is not static, culture is learned and culture is transmitted through human beings from one generation to another. Also culture does not perform in a vacuum, where there are human beings there is culture.

Information given showed that culture, despite being a tool for building the society, may in turn be an obstacle of HIV prevention especially in this era of HIV and AIDS. Even though culture can be an obstacle of HIV prevention, it has some challenges that it faces. The changes taking place are due to modernity; they may be a threat to some cultural practices. The loss of language is viewed as the loss of knowledge. Therefore according to this chapter, culture is complex and wide and is changing from generation to generation. It is important that people dealing with culture should understand the culture they are dealing with before they condemn it. The understanding of culture, customs and taboos will point the research in a manner, that some societies may accept and that change is necessary to protect future generations from the HI virus.

CHAPTER THREE

Basic facts about HIV and AIDS pandemic

3.1. Introduction

In the previous chapter the focus was on the definition of culture, the characteristics, challenges and obstacles of the culture. In this chapter the focus will be on the basic facts about HIV and AIDS; how do people of the Nsanje district understand HIV and AIDS, the impact of HIV and AIDS in the Nsanje district and sources of knowledge about the HIV and AIDS pandemic in the Nsanje district?

3.2. What is HIV?

Van Dyk (2008:4) explains that HIV was discovered in 1983, but at that time it was called LAV (lymphadenopathy – associated virus), later on the virus was renamed HIV and this was in the latter part of 1983. HIV is a Human Immunodeficiency Virus that attacks and destroys the body's immune or defence system, which normally protects the body against infections. HIV attacks a particular type of white blood cell, called CD4 lymphocyte (a particular T. cell subtype) that plays a very important role in the immune system.

3.3. What is AIDS?

According to Van Dyk (2008:4) the first AIDS cases were recognised in 1981 in the United States of America. So AIDS stands for Acquired Immune Deficiency Syndrome. It is *Acquired* because it is not a disease that is inherited, but it is caused by the virus that enters the body from outside. *Immune Deficiency* is the weakening of the immune system so that the body can no longer defend itself against infection. A *Syndrome* means a group of health problems that make up a disease.³⁴

The Soul City programme (2004:5) has defined AIDS as the collection of diseases that are acquired from HIV once the immune system is no longer able to protect the body from illness. As HIV weakens the immune system a person with HIV develops a number of diseases that a body would normally be able to fight off.

³⁴ <http://www.aids.org>. Accessed on 18-11-2008

3.4. How is HIV transmitted from one person to another?

There are different ways in which HIV can be transmitted. It is said that 90% of HIV infection in Malawi, is through heterosexual intercourse. 9% of HIV infection is through mother to child and 1% of HIV infection is through unsafe blood products.³⁵ Hope (1999:165) argues that HIV transmission in Malawi cannot be divorced from discussing sex because in Malawi, as in most African countries, HIV is mainly transmitted through sexual intercourse. In addition Santon (2004:24) states that HIV and AIDS is not just a medical problem, but a developmental issue that has no boundaries, because it infects and affects people in all societies, regardless of religion, economics, politics, and culture.

Despite that there are different ways in which HIV can be transmitted; however, the major mode of HIV transmission in Malawi is heterosexual intercourse. Hope (1999:23) argues that the main reason that heterosexual intercourse is the primary way of HIV transmission in Sub-Saharan Africa is because of cultural sexual activities. However, the Ecumenical Advocacy Alliance (EAA) (2006:4) and Jacob (2002:5) point out that HIV can be transmitted through infected blood from one stream to another. In addition Van Dyk (2008:41) explains that HIV can also be transmitted from mother to child. The mother is likely to pass on the HI virus in the womb during the pregnancy, childbirth or through breast feeding. This is why the LWF (2007:20) states that Mother to child HIV transmission can be prevented by providing ARV drugs to HIV infected pregnant mothers because the drug lowers the level of the virus which is reflected in the viral load and it reduces the risk of the baby being HIV infected. HIV transmission from mother to child can also be prevented through caesarean section and by giving the baby an infant formula instead of breast feeding.

Jacob (2002:5) also states that a person can be infected with HIV if he or she shares needles or body-piercing equipment with someone who is HIV infected. Hope (1999:22), the EAA (2006:4), LWF (2007:13) and Jacob (2002: 5), point out that another person can also get infected with HIV through sexual intercourse with someone who is HIV infected and who does not use protection. There are no

³⁵ <http://devdata.worldbank.org/IDG/IDGProfil>. Accessed on 02-04-2007

documented cases of HIV being transmitted by tears or saliva, but it is possible to be infected with HIV through oral sex or in rare cases through deep kissing, especially if one has open sores in the mouth or bleeding gums.³⁶

3.5. Is there cure for HIV/AIDS?

“Researchers are testing a variety of preventive and curative vaccine candidates, but a successful vaccine is likely years away.”³⁷ This is why Hope (1999:14) points out that there is no cure for HIV and AIDS. The only thing that can be done is for people to take drastic measures in the prevention of HIV. The Lutheran World Federation (LWF) (2007: 19-21) states that HIV can be prevented by not having sex with someone who is HIV infected or by using a condom during sexual intercourse. It is necessary for people who are addicted to drugs and who inject themselves with drugs not to share needles with other people, in order to avoid HIV infection.

There are drugs that can slow down the HIV virus, and slow down the damage to the immune system, but there is no way to "clear" the HIV out the infected body.³⁸ Other drugs can prevent or treat opportunistic infections (OIs). In most cases, these drugs work very well. The newer, stronger ARVs have also helped to reduce the rates of most OIs. A few OIs, however, are still very difficult to treat.³⁹

3.6. How do people of the Nsanje district understand HIV and AIDS?

This section will focus on how people of the Nsanje district understand HIV and AIDS and this will include their misconceptions, negative attitudes or myths about HIV and AIDS.

In most parts of Africa nothing is believed to happen without a cause. This is why Oyaro (2004:47) points out that in every culture, rumours and myths exist about HIV and AIDS based on fear, denial, or misinformation. He continues to say that common

³⁶ <http://www.aids.org>. Accessed on 18-11-2008

³⁷ <http://www.globalhealthreporting.org>. Accessed on 01-10-2008

³⁸ <http://www.aids.org>. Accessed on 18-11-2008

³⁹ <http://www.aids.org>. Accessed on 12-08-2008

³⁹ <http://www.aids.org>. Accessed on 12-08-2008

misconceptions can hamper people's abilities to protect themselves from HIV infection and may lead to increased stigma and prejudice against people living with HIV and AIDS (PLWHA).

3.6.1. *Chiwerewere* (promiscuity)

Chiwerewere means promiscuity and is a misconception of how the Sena people of the Nsanje district understand HIV and AIDS. Lwanda (2004:128) says that the word *chiwerewere* has been used because of the transmission of HIV through sexual intercourse. People of Malawi or of the Nsanje district have just concluded the fact that because HIV can be transmitted through sexual intercourse, this means that people who are HIV infected are promiscuous. This is not the case, because it has been stated in this chapter in section 3.4 that HIV can be transmitted in different ways. The *chiwerewere* notion stigmatizes and discriminates against people who are HIV infected and affected. As a result most of the people do not want to take HIV tests or disclose their HIV status.

3.6.2. *Matenda a boma* (the disease of the government)

At the inception HIV in Malawi was understood as *Matenda a boma*, meaning the disease of the government. As Lwanda (2004:128) states that Malawians named HIV and AIDS as the disease of the government, because during the rule of Dr. Kamuzu Banda the government always told people that there is no cure for HIV and AIDS. Lwanda (2004:128) states that people questioned the government and said "how can there be no cure from the superior European medicine/government? This is a family planning plot." In other words, some Malawians thought that HIV and AIDS was a plan of the government to kill families, this is why it was called the disease of the government, which was not true. Passim

3.6.3. Punishment from God

The Demographic and Health Surveys (DHS's) in Malawi carried out research on the misconceptions of HIV and AIDS as a punishment from God⁴⁰. The outcome of the research was that most people believed that people who are HIV infected are as a result of the sin of sexual intercourse outside marriage, so God was punishing them.

⁴⁰ <http://www.pano'saids.org>. Accessed on 11-06-2008

One of the participants of the research even said that “I would not care for an AIDS victim because it was his fault to acquire the disease.”⁴¹ This understanding of AIDS as a punishment from God is not exceptional in the Nsanje District, because some people still believe in the theology of retribution, which says “You reap what you sow.” However, Jacob (2002:7) argues that the HIV/AIDS pandemic is not a punishment from God but it is an opportunity for the church to respond with love and care to people who are infected and affected with HIV and AIDS. The World Council of Churches (WCC) (Study Document: 27) agrees with Hope, by stating that a God who forgives is not a God who is concerned with the punishment of his people. Van Dyk (2008:202) also argues that there is no literature that indicates that traditional Africans attribute AIDS to the anger of ancestors or to God’s punishment. She continues to state that this notion of AIDS as a punishment of God was due to the influence of some African Christians, who believe that AIDS is God’s punishment for the sin of immorality. 7

3.6.4. Witchcraft

Witchcraft is one of the cultural beliefs that people of the Nsanje District practice. According to the Word Power Dictionary (2001:1124) witchcraft is “the practice of magic, especially the use of spells and the invocation of evil spirits.” Kondowe (1999:5) states that many communities in Malawi believe that HIV and AIDS can result from magic. This is why the people of the Nsanje district area believe that people who suffer from HIV and AIDS have been bewitched by one of their relatives, neighbours or anyone from the work place if the person is working.⁴² In other words HIV and AIDS are attributed to witchcraft.

Nxasana (2003:32) explains that for fear of being stigmatized and discriminated by the community, some families would prefer to say that their relative is being bewitched rather than saying that he or she is HIV infected. Therefore people who suffer from AIDS related illnesses are not considered promiscuous. Bate (220:147) points out that in African culture most people do not accept illness without any cause because everything that happens in someone’s life has a cause. This is why most African people cannot accept HIV and AIDS without attaching it to witchcraft.

⁴¹ <http://www.guttmacher/pubs/2004/12/01/or15.pff>. Accessed on 04-05-2008

⁴² <http://www.guttmacher/pubs/2004/12/01/or15.pff>. Accessed on 04-05-2008

Lwanda (2004:134) points out that there is a high risk of the spread of HIV because witchcraft sometimes prevents reasonable scientific understanding of HIV and AIDS. Many African communities believe that HIV and AIDS can result from magic and that it can be treated by herbal medicine, which is not the case.

3.6.5. *Kanyera or Tsempho* sickness

Kanyera or Tsempho sickness is the most common misconception of HIV and AIDS in the Nsanje district among the Sena people. It is believed that *kanyera or tsempho* is a sickness that is contracted when couples violate taboos related to sexual intercourse. It is also perceived as a punishment because of the violating of these taboos that are related to sexual intercourse.⁴³ In addition *kanyera* sickness is related to HIV and AIDS because a person suffering from *tsempho* sickness has continual coughing, swelling of the body, loss of weight and continual diarrhoea.⁴⁴ In short, a person suffering from *kanyera or tsempho* sickness has some similar symptoms to those of someone who is suffering from AIDS related illnesses.⁴⁵

As Van Dyk (2008:54-55) states some of the symptoms of someone suffering from AIDS related illness are mild moderate swelling of the lymph nodes in the neck, below the jaw and in the armpits and groins. The patient has chronic diarrhoea that lasts for more than a month. There is also significant and unexplained loss of weight and persistent cough and reactivation of TB, especially in people from low socio-economic communities where TB is common. The only difference between AIDS and *kanyera* sickness is that a person suffering from *kanyera or tsempho* sickness can be cured by the use of traditional medicines, while a person suffering from an AIDS related illness cannot be healed by any medication.

One can see that there are similarities between an AIDS related illness and *tsempho*, according to the information given in section 3.6.6. The HIV and AIDS educators made a mistake right at the beginning of HIV and AIDS education. They should have educated the Sena people about the similarities between the symptoms of AIDS

⁴³<http://www.pano'saids.org>. Accessed on 11-06-2008

⁴⁴<http://www.guttmacher/pubs/2004/12/01/or15.pff>. Accessed on 04-05-2008

⁴⁵<http://www.pano'saids.org>. Accessed on 11-06-2008

related illness and *tsempho* sickness. The community should be able to differentiate between the two and be able seek help at the early stages of HIV infection, instead of seeking help from the traditional healer.

3.7. The impact of HIV and AIDS in the Nsanje district

In this section the focus will be on the impact of HIV and AIDS in the Nsanje district. HIV and AIDS have a vast impact in the Nsanje district on individuals, families, communities, private organizations, government sectors and NGO's. People are dying daily and the average age of death has dropped significantly. In the era of HIV and AIDS children are the ones who suffer more than any other person in the family or society.

3.7.1. Impact on children

Cultural practices are practice, which have existed from time immemorial; they are being blamed for increase in the number of orphans in the Nsanje district.⁴⁶

Different people define children differently according to their understanding or according to their cultures. Growing up among the Sena people, a child is a person who is between the ages of 0 and up to any age as long as the person is not married and he or she is still living with his or her parents. In this research a child will mean a person between the ages of 0-15 years.

Most children in the Nsanje district have lost parents and guardians as a result of HIV and AIDS. The impact of HIV and AIDS can be observed in the high rate of orphans in the area, because at the end of 2006, it was estimated that there were nearly 40,000 orphans in the area.⁴⁷ It is possible that by now the number of orphans has increased. Orphans mean children that have lost one or both care givers,⁴⁸ which is a devastating thing to happen to a child because the children needs parents for comfort, provision, protection and guidance.

⁴⁶ <http://www.gonzagajil.org>. Accessed 13-10-2008

⁴⁷ <http://www.newsfromafrica.org>. Accessed on 26-09-2008

⁴⁸ www.eci.harvard.edu. Accessed on 02-08-2007

Another impact of HIV and AIDS on children is the decline of enrolment in schools. Some children are removed from school in order to take care of parents or family members who are suffering from AIDS related illnesses.⁴⁹ Often, children are not able to attend school if they themselves are living with HIV and AIDS.⁵⁰ In addition Hope (1999:180) states that some children drop out of school because of a lack of financial support to meet the school expenses. Children lose their childhood too, because they become responsible for earning an income and hunting for food in order to take care of their family or to take care of the parent or guardian who is suffering from an AIDS related illness.⁵¹

For example, some orphans work in the main market of the Nsanje district carrying luggage or produce for businessmen and women from the bus stops and the train station to the market. Most of the time what they earn is not enough to sustain themselves. It then follows that these children remain uneducated regarding HIV and AIDS because it is a taboo to discuss sex with children. At least at school there is that freedom for teachers to talk about sex and HIV and AIDS.

3.7.2. Health sector

HIV and AIDS have a great impact on the health sector in the Nsanje district. There is an increase of HIV and AIDS patients in the hospital and clinics, but the Ministry of Health does not have enough staff members to meet the demands of the patients. The Ministry of Health and Population (MOHP) estimates that over half of its posts are vacant.⁵² The resources that are at the clinics and hospital cannot meet the needs of the patients.⁵³ In addition Hope (1999:47) points out that “AIDS is also a burden on hospital resources, because the inadequacy of health resources, coupled with the shortage of workers, will further compound the problems of caring for AIDS patients.” The shortage of staff members is also caused by staff members caring for a family member, who is suffering from an AIDS related illness or suffering from it themselves, causing the members of staff not to be able to attend work.⁵⁴ The problem

⁴⁹ <http://www.avert.org/aidsimpact.htm>. Accessed on 09-06-2008

⁵⁰ <http://www.avert.org/aidsimpact.htm>. Accessed on 09-06-2008

⁵¹ <http://www.avert.org/aidsimpact.htm>. Accessed on 09-06-2008

⁵² <http://www.equinet africa.org>. Accessed on 11-06-2007

⁵³ <http://www.equinet africa.org>. Accessed on 11-06-2007

⁵⁴ <http://www.avert.org>. Accessed on 06-06-2008

of shortage of staff members in the health sector has affected the plans of Ministry of Health Programme (MOHP) in attempting to increase HIV testing and treatment.⁵⁵

Also HIV and AIDS has reduced the life expectancy of Malawians from 46 to 36 years, and as a result the health sector is affected, because it takes six to twelve months to replace a health worker who has died or left the service.⁵⁶ It means that the Nsanje district health sector is more affected in the area of shortage of staff members because the Nsanje district health sector has always had a problem of shortage of staff members due to its hot climate and mosquitoes in summer and winter. HIV and AIDS have worsened the situation in recent years.

3.7.3. Agricultural sector

Hope (1999:14) states that for the past two decades food production has been under strain in Africa due to the inception of the HIV and AIDS pandemic. It has been realized that HIV and AIDS is reducing the country's agricultural output and it is estimated that by the year 2020 Malawi's manpower will be reduced by 14%.⁵⁷ Most people in the Nsanje district depend on manpower for cultivation. Now with the HIV and AIDS pandemic, most people are not able to work in their fields to produce food to sustain them.

Someone from the Nsanje district, when she was interviewed, said that "We don't have machinery for farming, we only have manpower ...if we are sick, or spend our time looking after family members who are sick, and we have no time to spend working in the fields."⁵⁸ This is why the agricultural sector has an important role to play in combating HIV and AIDS in the Nsanje district, because apart from machinery it also relies on manpower. The shortage of labour that is caused by HIV and AIDS has had an impact on food security in the agricultural sector.⁵⁹

⁵⁵ <http://www.avert.org>. Accessed on 06-06-2008

⁵⁶ <http://www.cpafrica.org.uk>. Accessed on 11-09-2008

⁵⁷ <http://www.avert.org>. Accessed on 06-06-2008

⁵⁸ <http://www.avert.org/subadults.htm> Accessed on 06-06-2008

⁵⁹ www.eci.harvard.edu. Accessed on 02-08-2007

3.7.4. Educational sector

The impact of HIV and AIDS is not only on children who cannot attend school due to the loss of their parents or guardians; it is also on teachers. There is likelihood that teachers who are HIV infected or who are suffering from AIDS related illnesses will be absent frequently and for sustained periods. Also, teachers who have relatives who are HIV infected are likely to take time off in order to take care of their sick relatives.⁶⁰ When the teacher is absent, pupils are left without a teacher. Sometimes learners are combined with other classes and this put stress on the teacher who has combined classes, because classes are already too big for one teacher. The impact of HIV and AIDS is felt more in the Nsanje district when the teacher dies, because it is not easy to replace a skilled teacher.⁶¹

3. 7.5. Impact on church

Togarasei (2005:3) defines the church as “A congregation of believers. A church is made up of individuals who come together to make an institution called the church.” Togarasei (2005:4) states that many of the members of the church have been lost due to AIDS related illnesses. HIV and AIDS has created gaps in the church because some of these church members who have died due to AIDS related illnesses used to hold high posts in the church and some of them supported the church financially.

Togarasei (2005:4-5) has further explained that when HIV and AIDS affects the family it means that the church is affected too, because when the family is infected it has no strength to work, as a result the church loses its income. Yet sometimes the church has to spend its income in order support the families which are infected and affected with HIV and AIDS.

3.8. Source of knowledge about HIV and AIDS in the Nsanje district

According Moyo (1998:97) at the inception of the HIV and AIDS pandemic in Malawi, there were only two approaches that were used in combating HIV and AIDS. Most African government used these plans, which were Public Awareness Campaigns (PACs) and provision of condoms. As time went by the paradigm shifted to formal and informal education. This is why Jacob (2002:18) says that every person whether

⁶⁰ <http://www.avert.org/aidsimpact.htm>. Accessed on 09-08-2008

⁶¹ <http://www.avert.org/aidsimpact.htm>. Accessed on 09-08-2008

he or she is infected with HIV or not, has the right to accurate information about HIV and AIDS as well as a right to full access to information about prevention.

Hope (1999:178) points out that in Malawi AIDS education is provided by diverse means; through posters placed in public places, newspapers, magazines, radio broadcasts, church teachings, academic curricula, political rallies and so on. He continues to say that, although there are different methods of AIDS education in Malawi, he wonders if appropriate messages of education reach the right audience. According to Hope (1999:173), the AIDS campaigners have targeted female sex workers rather than women in general. There is a perception that women who are married and have one partner cannot be HIV infected.

3.8.1. Government

The government of Malawi, in its effort to combat HIV and AIDS, has focused on information, education and communication campaigns with the aim of creating an awareness of the HIV and AIDS pandemic and its impact on households, communities and the nation as a whole.

The government assumes that if people are educated about HIV and AIDS they will be able to take care of themselves by taking suitable measures of protection against HIV infection.⁶² This is not the case all the time, because some of the people who are HIV infected are people who do have the knowledge about HIV transmission. For example, some doctors and nurses, who are HIV infected, as a result of unprotected sex, are the people who have the knowledge about how one can get infected with HIV. However, this should not discourage the government from educating its citizens about HIV and AIDS.

3.8.2. Media

The Media is one of the sources of HIV and AIDS information for the people of the Nsanje district. Santon (2000:24) states that “The media sector has a critical role to play in presenting the facts about the epidemic in an accurate, realistic and non-discriminatory way.” In other words, Santon is saying that the media should not take

⁶² <http://www.guttmacher.org>. Accessed on 20-05-2008

sides in giving information; it should give information in a way that people who are receiving it should feel that they are being treated fairly.

On 11 July 2005 in the Nsanje district, health workers, students, pastors and other community members joined in a tour of HIV and AIDS awareness. About 1,300 participants were divided into two groups and they went around different communities carrying placards and wearing T-shirts with messages of prevention.⁶³ “Students recited poems and performed, while medical personnel provided information on the HIV and AIDS situation in the Nsanje district, and spoke about health services such as Voluntary Counselling and Testing, anti-retroviral drugs and prevention of mother to child transmission.”⁶⁴

Qakisha (2002:86) and Hope (1999:110) state that when the media presents information, it should take into consideration that different people from different cultures have different understandings of language. For example, people from the Nsanje district speak the Sena language and the mistake that has been made in the past was to teach people of the Nsanje district using Chichewa, which is a national language and most Sena people do not understand Chichewa very well. As a result the educational messages about HIV and AIDS are not understood the way they were supposed to be.

3.8.3. HIV infected people

People who are HIV infected are instrumental in HIV and AIDS education. Qakisha (2002:315-316) points out that at the beginning of the pandemic, HIV infected people never had a chance to share their stories. He continues to state that, even though stories were told about the HIV and AIDS pandemic, most people could not identify with the stories as they related to real people.

3.8.4. Conclusion

The information in this chapter has shed light about what HIV and AIDS are, how HIV is transmitted and the information has also shown that there is no cure yet for HIV and AIDS. In addition the chapter has shown that the people of the Nsanje

⁶³ <http://www.gutmacher.org>. Accessed on 20-05-2008

⁶⁴ <http://www.wvi.org/wvi/archives/africa/malawi.htm>. Accessed on 14-08-2008

district have different understandings of the HIV and AIDS pandemic; this is why some of them still practice the sex rituals without protection, which threatens the lives of many people in this era of the HIV and AIDS. This shows that there is an urgent need to educate and re-educate the people of the Nsanje district about the dangers of some of the cultural beliefs and practices.

The chapter has also dealt with the sources of HIV and AIDS knowledge in the Nsanje district. Information in this chapter has shown that the people of the Nsanje district have different sources of HIV and AIDS knowledge, but still some people are involved in cultural rituals and practices that are agents of spreading HIV and AIDS. The chapter has shown that HIV and AIDS have a great impact not only on people who practice cultural rituals, but also on people who do not practice cultural rituals. Information given has also shown that the impact of HIV and AIDS is not on poor people only, but also on educated people, for example people who work in health, agriculture and education sectors are also infected and affected by HIV and AIDS pandemic. Therefore the impact of HIV and AIDS has no boundaries.

CHAPTER FOUR

Cultural practices their function and the spread of HIV

4.1. Introduction

Since the inception of HIV in Malawi in 1985, several studies have been undertaken in the area of culture, and HIV and AIDS. The studies have endeavoured to find out the relationship between cultural practices and the spread of HIV in Malawi. In this chapter the focus will be on cultural factors that contribute to the spread of HIV and AIDS.

In every culture, important ritual practices exist to celebrate life-cycle transitions, maintain community structure, or to transmit traditional values to later generations. These rituals are performed as a part of the identity of the individuals and as a community as whole. Waruta (2000:97) points out that, most Africans believe in the power of ritual practices. In addition Mbuy Beya (2006:157) states that Africans undergo their initiation rituals between the ages of ten and twenty and the procedure differs according to gender. This depends on the culture and the purpose of the ritual performed. Oduyoye (2006:9) continues to cite that no matter how senseless or destructive the cultural practices may appear from the personal and cultural standpoint of others, yet they have meaning and they fulfil a function for those who practice them.

According to Muller (1993:24) rituals are part of everyday life for an individual or community. Rituals can be performed knowingly or unknowingly and sometimes they are performed to bring healing or change within individuals and the society. This is why the people of the Nsanje district and many others from different parts of Africa perform cultural rituals. Some rituals are harmful to the people practicing them and some are said to be rituals that protect the life of the community. This will be discussed in detail in this study.

In the Nsanje district, rituals are divided into different groups according to their functions; rituals related to marriage, rites of passage, pregnancy, child birth, funerals and other matters. In this study the focus will be on some of the rituals that involve

sexual intercourse as part of the culture of the Sena people of the Nsanje district. If there is one thing that is giving the Nsanje District Commissioner (DC), Solomoni Toby, sleepless nights, it is the cultural practices that involve sexual intercourse. Solomoni states that cultural practices that involve sexual intercourse pose the greatest threat to spreading HIV among the Sena people. He continues to point out that if these cultural practices continue to be practiced, there is a risk of the population being wiped out due to AIDS related illnesses.⁶⁵

4.2. Child marriage

There is a need to define the word child and marriage before defining and discussing child marriage in this section. The word child can be defined according to the understanding of different people from different cultures. As Oke (2005:37) states that in a Nigerian context, a child is any person between the ages 0 and 17; such children are believed to still need the protection and supervision of their parents before they can take very important decisions. Growing up among the Sena people, a child is a person who is between the ages of 0 and up to any age, as long as the person is not married and he or she is still living with his or her parents. When it comes to child marriage it involves the girl child who is between the ages of 10-15. So in this study a child will mean a person who is between the ages of 0 and 15.

Blum (1989:23) points out that “in every culture we find marriage as being one of the most important components of the culture.” In other words Blum is saying that culture without marriage is incomplete. Oduyoye (1995:132-133) explains that;

Traditional marriages are political alliances between two groups instead of between two individuals and, as such, the issue of choice on the part of the prospective husband and wife plays a minor role. Royal marriages among the Akan were quite often political allegiances that united two groups of people. In marriage, therefore, the private and the public meld together.

Oduyoye observes that in traditional marriages there is less freedom of choice for the two individuals to do things without involving their families and communities.

⁶⁵ <http://www.gonzagajil.org>. Accessed on 13-08-2008

Mbiti in Oduyoye (2006:120) argues that;

Marriage is the focus of existence. In each marriage, all the members of the family meet: the departed, the living and those who are yet to be born. In every marriage, the whole African family is deeply involved, and therefore, marriage to the African is a religious act.

Mbiti continues to state that traditional African marriage was also seen as the center of the society. According to Blum, Oduyoye and Mbiti, marriage is the involvement of two individuals and their families and their communities. This shows how hard it is in the community for individuals to make decisions without involving their families or communities. This includes the Sena people of the Nsanje district.

Child marriage is one of the cultural practices that have been condemned by many people. Amoah (2005:37) defines child marriage as a system whereby a female child goes into marriage at the earliest period and she cannot make her own decision because of her tender age. Amoah (2005:38) argues that most of these young girls given in marriage are still at crucial stages of development. Some of them have not even started the normal menstrual cycle or are too young to cope with marital life and the hardship of child bearing. Hope (1999:168) points out that in some part of Malawi marriages for very young girls are still fashionable. This is the case with the Sena people of the Nsanje district, because in some parts of the Nsanje district August used to be the month which the parents used to arrange marriages for their girl children.

It was a matter of a pride for the parents when their daughters were married to the men chosen by them. Most of these men came from all parts of Malawi to different villages in the Nsanje district looking for young girls to marry. Parents did not know the background of these men and not even where these men came from. Parents were only told the name of the district and most of them never leave their home addresses. Only a few faithful ones did write letters to the parents of the girl child. Most of the parents were only interested in the bride price money.

The girl child was sent to start a new life with a stranger, in a foreign land, foreign language, isolated from her family, relatives and friends. Some of the parents never saw their daughter again. Kidd (2002:5) and Giddens (1995:31); in chapter two

section 2.1., define culture as the way of life of a group of people. So this is how most of the Sena people live their life when it comes to child marriage. For most of the Sena people, there is nothing wrong with arranging marriage for a girl child with someone older than her or with a stranger, for it is part of their culture.

Refusing to marry the man that has been chosen by parents, or relatives can sometimes have serious consequences. For example the girl child can be verbally abused, or have death threats by parents, relatives and some members of the community.

Amoah (2005:38) argues that due to the greed of the parents the girl child is given to an early marriage. On the other hand, Amoah (2005:39) points out that due to poverty, the parents of the girl child view the girl child as a means of getting some money to relieve their financial problem. In agreement with Amoah, Joyce Banda the minister of gender, child welfare and community services in Malawi states that “Poverty is the cancer of our community”⁶⁶ because more girls are given to marriage not out of their own choice. The minister acknowledges that there is no statistic given about child marriage because these marriages happen in secret.

This practice puts the lives of young girls in danger, because in most cases the man would have been married several times or he has extra-marital affairs. Due to her age the girl is not yet empowered to be able to make decisions on her own. As a result she does not have even the power to ask her husband to use a condom during sexual intercourse. Not having the power to ask the husband to use a condom during sexual intercourse would put the girl child at high risk of being infected with HIV. As Banda states, some men who are HIV infected believe that having sexual intercourse with a girl child who is a virgin will heal them from HIV and AIDS, this of course is not true.⁶⁷

Hope (1999:168) points out that even when the young girl suspects or knows that the man that she is forced to marry maybe HIV infected, she cannot refuse to marry him

⁶⁶ <http://newsfromafrica.org>. Accessed on 26-09-2008

⁶⁷ <http://storiesonmalawi.blogspot.com>. Accessed on 11-06-2008

and cannot ask him to use a condom during sexual intercourse. In this era of HIV and AIDS, the girls are not protected from the diseases since they marry older men who might already be infected. Also the practice encourages the young wife to seek sexual satisfaction elsewhere because the aging husband is unable to satisfy her, causing the young wife to seek other men for satisfaction and so to be exposed to HIV infection.⁶⁸ This is why there is a need to revisit this cultural practice in order to save the lives of the young girls.

4.3. *Nthena* (Bonus wife)

Hope (1999:169) defines *nthena* or bonus wife as a practice, where a married man is given a younger sister or niece of his wife to be his second wife. James in Oduyoye (2004:150) points out that the practice of marrying young girls as young as 12 years old is still extensive in some parts of Africa and the Nsanje district is one of the Districts in Malawi where this custom is common.

There are different reasons given as to why the married man is given a bonus wife. Hope (1999:170) explains that if a man is hard working, prosperous, well behaved and takes good care of his wife and her extended family, his in-laws thank him for a job well done by offering him his wife's younger sister as a second wife. This is without the consent of the young girl. The other reason a married man is given a bonus wife is to replace the deceased wife.⁶⁹ The main reason for this cultural practice is to bring a mother figure into the family to take care of her sister's children. This does not make sense, because some of the children left behind by the deceased wife are often much older than the bonus wife. If they need a mother figure why not get someone who is older than the children, or a woman who is as old as the widower?

The bonus wife is also given to a married man who is rich.⁷⁰ His wife gets her younger sister or niece to join her in marriage so that the husband should not marry elsewhere; because if he marries elsewhere it means the wealth will go to a different family rather than his first wife's family. In continuation, when the wife is barren, a bonus wife is given to a married man for her to bear children with her

⁶⁸ <http://www.malawihumanrightscommission.org>. Accessed on 02-10-2008

⁶⁹ <http://www.malawihumanrightscommission.org>. Accessed on 02-10-2008

⁷⁰ <http://www.malawihumanrightscommission.org>. Accessed on 02-10-2008

brother-in-law. Among the Sena people in Nsanje, children born from the second wife address the first wife as mother and even treat her like their own biological mother. According to Bahemuka (2006:120), every African marriage is called for procreation. There was no marriage in the African sense unless the fruit of that marriage could be seen. It was a duty of every married couple to reproduce and re-contribute to the society by giving it new members. Marriage and procreation were seen as family unity. This means that through marriage and procreation, the African became immortal as the name was to continue through generations. In other words Bahemuka is stating that in most parts of Africa marriage without children was incomplete. In addition Oduyoye (1999:105) states that in African Culture, a woman must be able to bear children because it is after bearing children she is accorded respect within the society.

Nasimiyu-Wasike in Oduyoye (1995:102) points out that “a barren woman in Kenya was considered as a dead end and useless to the community.” Nasimiyu-Wasike continues to state that African women still see themselves as lacking identity when they are without children. This is similar for women in the Nsanje district, where a woman is told that she should die like a mother *shongololo* (centipede), which leaves the rings of its segments when it dies. So a woman should leave children when she dies as her rings of identity. This puts pressure on barren women and this can stigmatize and marginalize them.

This is why James in Oduyoye (2004:150) points out that the practice of marrying young girls as young as 12 years old is still extensive in some parts of Africa and Nsanje district is no exception. Some barren women end up being the mothers of the new born babies born from the young girl child, because the girl child is not mature enough to take care of the new born baby. So her children become her sisters' children.

Tauzi (2006:65) states that *nthena* marriage is related to HIV infection in the sense that if one person is HIV infected there is a risk of other partners being HIV infected. Tauzi (2006:65) explains that the chief of one of the villages said that *nthena* cultural practice is phasing out due to the HIV and AIDS pandemic, because girls do not accept being taken as *nthena* by their in-laws. They prefer to

have their own husbands. This is also not guarantee for the young girls being free from HIV infection, because most of the young girls are married to men who do not know their HIV status. Since these young girls marry men who are older than they are they might well also become infected.⁷¹

4.4. Polygamy

According to Mbiti (1977:142) polygamy is a marriage where there is one husband and two or more wives. Mbiti continues to state that having more than one wife is a custom found all over Africa though in some societies it is less common than in others. Malawi is one of the African societies where polygamy is deep-rooted and cuts across all ethnic groups in Malawi.⁷² In addition Hope (1999:170) states that in some Malawian tribes, a chief is supposed to have more than one wife, because culturally it is said that a chief is required to have a principal wife and a chain of junior wives in order to look after the chief. In addition Kondowe (1999:5) also points out that polygamy is practiced in a number of communities in Malawi and mainly in the northern and southern regions of Malawi.

There are different reasons that are given as to why men and women are involved in polygamy; Hope (1999:170) explains that polygamy in Malawi, (with no exception in the Nsanje district) is practiced as a result of the infertility of the first wife. In such cases the man is permitted to marry the second wife who can bear children for him. Hope also points out that sometimes it is a matter of marrying a wife who can bear sons (assuming the first wife only has daughters). According to Labeodan in Oduyoye (2004:209); Tauzi (2006:63-64); Nasimiyu-Wasike in Oduyoye (2006:105) and Bahemuka in Oduyoye (2006:124), polygamy is viewed as a source of labour and economic asset, because it enables the man to have more wives and children who will all work for him. In addition Oyaro (2004:28) states that in the old tradition, polygamy showed wealth. The greater number of wives and children, the richer the man became and he would gain much fame.

⁷¹<http://www.malawihumanrightscommission.org>, 28-08-2008

⁷²<http://www.malawihumanrightscommission.org>, 28-08-2008

Polygamy is understood as one of the cultural practices that can reduce the spread of HIV and STIs, besides being a source of labour or a sign of wealth for the man, As Van Dyk (2008:207-208) and Labeodan in Oduyoye (2004:209) state, polygamy often helps to prevent or reduce unfaithfulness, prostitution, STIs and HIV if it is practiced in the traditional African way. Van Dyk did not explain which way is the traditional African way of practicing polygamy. In addition Mbiti in Van Dyk (2008:208) states that polygamy is valuable for husbands who seek work in the town and cities because they can have one wife with him while the other or others are taking care of the children. The wives can have turns to stay with the husband in town rather than him having secret girl friends. It is a good system unless the wives are not on good terms with each other, because at the end of the day the children are the ones who are going to suffer while the couples are trying to protect themselves from HIV infection.

In agreement with Mbiti, Bahemuka in Oduyoye (2006:145) states that polygamy is better than having extra marital relations with girl friends. Bahemuka continues to explain that one woman once said that if monogamy is going to drive her husband into keeping girlfriends, which would be dangerous to the physical and psychological, well-being of the husband, it is better for the husband to take a second wife. It seems this woman was more concerned about the well-being of her husband?

Nasimiyu-Wasike in Oduyoye (2006:107) argues that all the reasons advanced to justify polygamy in African tradition reveal a distorted relationship that has crippled both women and men in different ways and with consequences. Also Kanyoro and Oduyoye (2004:209) argue that in polygamous marriages, the wife cannot share her love with other men, whereas the husband can share his love and affection with other women. In other words Kanyoro, Oduyoye and Nasimiyu-Wasike are saying that polygamy is for the benefit of the men not the women.

Agot in Oduyoye (2004:24) explains that it would be expected that, while there is still no cure, AIDS would act as a force of change from the tradition because no culture should hurt its practitioners and no tradition should lead its people to the grave. On the other hand, some Malawians claim that polygamy as a marriage institution is not harmful in itself. In fact it could be a cushion against extramarital sex. The problem is

taking a second wife without knowing her HIV status and the potential of infecting more people including children, if one member breaches the marriage contract.⁷³ In other words polygamy can be one of the ways of HIV prevention, only if the members of the marriage contract know their HIV status and if they are not involved in extra-marital sex. Otherwise polygamy can be one way of fuelling the spread of HIV. In addition Labeodan in Oduyoye (2004:220) voices his concern by stating that the practice of marrying several women is also a problem. Once one member of the family becomes infected with HIV the whole family automatically becomes infected. First the man and his wife, then the women if they are still of child bearing age, may pass it on to the innocent babies.

Labeodan in Oduyoye (2004:212) continues to point out that polygamy has the potential of expanding the HIV infection indefinitely. This is largely because unlike other sexually transmitted diseases where a line of infection can be terminated, HIV and AIDS still has no definitive cure and therefore any infection line started has a potential to multiply unimpeded. In the era of HIV and AIDS polygamy cannot be trusted hundred percent that it can be used as one of the tools of HIV prevention. As Tauzi (2006:64) explains the community perspective about polygamy is that it is associated with HIV transmission.

Women in polygamous marriages put blame on young girls who are also in polygamous marriages. They say that there is a possibility of the young girls having a boyfriend and becoming infected and in turn infecting the husband and other women. This is a dangerous perspective, where the older women are pointing fingers at young girls without thinking that even older women and men can be involved in extra-marital affairs that can lead to HIV infection. Also pointing fingers at each other will not help the process of HIV prevention.

4.5. *Kupita Kufa* (Widow cleansing)

Amoah (2005:48) defines a widow as a woman who has lost her husband by death and has not remarried. Hope (1999:169) defines widow cleansing as when a man or woman has passed away, a relative of the deceased is chosen to have sex with

⁷³ <http://www.hopeforaids.org> Accessed on 11-06- 2007

the widow or the widower in order to cleanse the widow or the widower. Although people in the Nsanje district practice widow and widower cleansing, widow cleansing is the most common ritual practiced.

The Sena people in the Nsanje district also use *Nyalumbi* for the widow cleansing ritual. *Nyalumbi* is one of the relatives of the deceased who plays a leading role during the burial of the deceased. Tauzi (2006:77) points out that if there is no male relative to perform the sexual ritual with the widow, a hired cleanser is asked to cleanse the widow. The cleanser is called *thika* or *fisi* (hyena). The cleanser is paid about R100-R400 depending on the nature of the death of the husband and the experience of the cleanser.⁷⁴ Whether the cleanser is paid or not this ritual puts both the widow, the brother of the deceased and the *fisi* at risk of getting infected with HIV, for the parties are not tested for HIV before performing the ritual.

In addition Tauzi (2006:72) points out that this death cleansing ritual can take place before or after the burial ceremony of the deceased. When the ritual should take place, all depends on the family or culture of the deceased, because in some cultures the ritual is performed three days before or after, or a night before the burial of the deceased.⁷⁵ It seems as if the widow is not given time and space to mourn the death of her husband properly, because a few days before or after the burial of her deceased husband, the widow is asked to have sex with another man.

If the deceased man died of an AIDS related illness, this means a few days after his death there is a possibility of the widow infecting the cleanser with HIV or the cleanser infecting the widow with HIV, if the cleanser is HIV infected.

Mwamalabo (2005:2) points out that the concept of ritual cleansing is rooted in almost all African traditions. He also states that purification is a religious term rooted in the belief that there are supernatural forces possessing dangerous powers that pollute things and people when they come into contact with them. Especially, the widow who is regarded as contaminated or ritually unclean because of the closeness and the relationship she had with her deceased husband.

⁷⁴<http://www.malawihumanrightscommission.org> 28-08-2008.

⁷⁵ <http://www.hopeforaid.org>. Accessed on 11-06-2007

Amoah (2005:57) states that traditionally, this is why a widow is considered unclean until she has gone through the widow cleansing ritual; then she is declared clean.

According Lwanda (2004:134), Mwenda (1999) and Mwamoloba (2005:9) the worst part of widow cleansing is that by its nature the practice is unprotected sex because the ritual emphasizes on having sexual intercourse in a natural way and it discourages the use of a condom. In agreement with Lwanda, Mwenda and Mwamoloba, James in Oduyoye (2004:151) states that the use of condoms is alien to widow cleansing, because cleansing is not considered complete unless the semen enters the woman. Widows have no power to ask the cleanser to use a condom, since the cultural perception is that a condom prevents proper cleansing. It is also believed that sex or semen in a natural way prevents illness, provides strength and solves community problems. In addition Solomon, the (DC) of the Nsanje district, points out that widow cleansing rituals expose many people to HIV infection daily and many are dying.⁷⁶

Despite the fact that widow cleansing is blamed for the spread of HIV, different reasons are given why people of Nsanje district and other parts of Africa practice the ritual.

Edet in Oduyoye (1992:31) points out most African people believe that if a widow is not cleansed there will be calamities for the widow, her children and the relatives of the deceased and sometimes even the whole community. For this reason Moyo (2006:139) states that a ritual has to be performed in order for the spirit of the deceased not to haunt the wife and the family. He continues to state that African people believe that widow cleansing helps the spirit of the deceased husband to rest in peace. According to Tauzi (2006:73) in the Nsanje district purification is not only for the widow, but also for the relatives and the whole village.

Mwamaloba (2005:2) states another reason why women accept widow cleansing is the stigma that plays a significant role in the widow cleansing, the community use stigma to pressurize the widow to be cleansed. For the fear of being stigmatised

⁷⁶ <http://nationmalawi.com>. Accessed on 17-07-2007

the widow accepts being cleansed, which puts the widow at higher risk of getting infected with HIV, because neither the widow nor the cleanser knows their HIV status. Tauzi (2008:76-77) states that if the widow refuses to be cleansed she is bound to lose the property that belonged to her and her deceased husband. Also the widow is bound to lose access to her children of the marriage.

Tauzi (2006:74) states that due to the HIV and AIDS pandemic some changes are being made in the Nsanje district concerning widow cleansing and other rituals that involve sex. She points out that the cleanser is asked to use a condom during the ritual. Kamkwamba points out that in any cultural practices modification must be conducted with utmost respect for the community belief system and values, and they must seek to strengthen partnership with traditional culture bearers to develop culturally appropriate behaviour change strategies.⁷⁷

4.6. *Kupita pa nyumba* (Widow Inheritance)

According to Labeodan in Oduyoye (2004:220); Tauzi (2006:75); Kondowe (1999:6) and Hope (1999:6) widow inheritance is a situation where a husband has died and the tradition demands that a widow be cleansed before she is inherited by the brother or one of the relatives of the deceased man. On the other hand Hope (1999:169) points out that widower inheritance is when the wife dies and a husband is given his deceased wife's younger sister as a new wife.

Tauzi (2006:73) points out that the person who cleanses the widow, if he is the relative of the deceased; he is allowed to inherit the widow together with the children and the property of the deceased husband. However, Hope (1999:169) explains that the difference between widow and widower inheritance is, in widower inheritance the woman who cleanses the widower is allowed to inherit the widower, but not the property that was left by the deceased wife. While on the other hand widow inheritance, as Tauzi (2006:73) points out, is when the person who cleanses the widow if he is a relative is allowed to inherit the widow together with the children and the property of the deceased husband. This is where the issue of gender imbalances comes in, because if both the widow and widower have

⁷⁷ <http://gateway.nlm.nih.gov> Accessed on 28-05-2008.

performed the same ritual why cannot they both be given the same privileges? However, the issue is about HIV infection not about who should be given privileges. Hope (1999:169) points out that both widow and widower practices are common in the Nsanje district among the Sena people.

Mwenda states that in Malawi and other African countries, death does not end a marriage. A widow is expected to move on into widow inheritance.⁷⁸ In addition Belay in Amoah (2003:82) states that the widow has to be inherited despite the cause of her husband's death and without the widow's consent.

Hope (1999:169) states that in Malawi, the justification for this practice is that the new husband being a relative of the deceased, should look after the widow as well as the children. Mwenda states that widow inheritance in Malawi was also put in place for the inheritor to assist the widow to manage the finances or the estate of the deceased husband, because the relatives of the deceased man believe that the widow is not fit to manage the finances and the state of the deceased.⁷⁹ Mwenda wonders why widows should be thought of as being incapable of running the affairs of their own matrimonial home or the estate left by their deceased husband? Some of the women have been managing the finances and estate of the family without their husbands (taking into account that the husband works in an urban area and the wife is in the rural area). Why now should someone take over caring for the finances for them?

The Human Rights activist and University of Malawi law lecturer, Ngeyi Kanyongolo, states that widow inheritance could be avoided if more husbands could be educated to write a Will before they die; to leave the property in the hands of their wives, so that the widow will have something to rely on when the husband is dead. This will empower the women to refuse to be inherited because they are financially secured.⁸⁰

⁷⁸ <http://www.gonzagajil.org> Accessed on 13-10-2008

⁷⁹ <http://ipnews.net> Accessed on 28-05-2008.

⁸⁰ <http://ipnews.net> Accessed on 28-05-2008

Waruta (2000:17) also points out that although the purpose of widow inheritance was for the good of the widow and her children, this ritual puts the widow and the person who is inheriting her at risk of being infected with HIV because it is a sexual ritual that is performed without using protection (condom). Also neither party knows their HIV status.

The Human Rights Commission (2006:91) points out that it appears that in various societies there is a belief that sex could be used as a tool for sorting out some social problems. This is why Mwenda argues that it does not matter whether the cleanser and the widow have come to an agreement about widow inheritance. The fact that this ritual is performed without a condom and neither of the parties undergoes a medical examination before being involved in the ritual; means the parties are at high risk of being infected with HIV.⁸¹

4.7. *Fisi* (Hyena) for procreation

Fisi is a word that will be used more often in this study and especially in this chapter. According to Hope (1999:169) *fisi* is a man or woman who is chosen by the family of the deceased to perform a sexual ritual for cleansing. *Fisi* means hyena, since the person operates at night as the hyena does when stalking cattle or domestic animals in the village. Jana (2003:25) states that there are different types of *fisi* (hyena) customs, which are; *fisi* for procreation, birth cleansing and initiation of girls and death cleansing.

Hope (1991:169) explains that when a man is infertile, *fisi* is used to have sex with the wife of the infertile man. Sometimes a man is told about the arrangement and sometime he is not told. Instead he is sent away or the elders wait until the man has gone on a trip so *that fisi* can have a chance of having sex with the wife.

Hope (1999:169) points out that a family without children is the subject of gossip and rebuke and is never respected. There are even songs that mock childless couples. This puts pressure on the couples to the extent that the wife of the infertile man accepts to have sexual intercourse with the *fisi* in order to become pregnant. The danger of the

⁸¹ <http://gonzagajil.org> Accessed 13-10-2008

hyena custom puts the hyena, the infertile man and the wife of the infertile man at risk of being infected with HIV, if one of them infected, because none of the parties use protection during the sexual ritual and neither of them knows their HIV status.

4.8. *Bzyade* (Fisi for protection and birth cleansing)

Tauzi (2006:14) defines *bzyade* as a ritual that is performed six weeks after the baby is born. This ritual is performed to chase away evil spirits that might interfere with the health of the new born baby. Tauzi continues to explain that the ritual is also performed to welcome and accept the baby as a human being. If the baby dies before the ritual is performed, that new born baby is not considered as a human being and the men in the community will not attend the funeral. The society believes that the baby is not yet welcome and not yet a human being. The funeral is only attended by women.

I witnessed men walking away from the funeral of one of my friend's new born baby, because the parents had not yet performed the welcoming ritual for their new born baby. She was asked by the elderly women if they had performed the sexual ritual with her husband. My friend told them that they had not done it. When the men were told that the parents had not yet performed the ritual, one by one the men left the house. Everything was done by the women even the digging of the grave. To my surprise, some of the men who walked out of the house were the elders from the Presbyterian Church in Malawi. I did not believe that they also believed in sexual rituals and this was a church in Lilongwe, the capital city of Malawi.

Culturally in Nsanje district, the parents of the new born baby are supposed to have sexual intercourse, while the whole clan abstain from sexual intercourse. The family members are well informed about the day of the ritual.⁸² When having sexual intercourse the father ejaculates on the baby, or on the cloth they wrap the baby in, or the father ejaculates on the floor and the baby is bathed with medicine. This ritual puts the baby at high risk because the father ejaculates on the baby's body. What if the baby has a cut on its skin and the father is HIV infected? It means that the baby can be infected with HIV through the father's semen. After the

⁸² <http://www.orf/wvi/archives/africa/malawi.htm>. Accessed on 14-08-2008

bzyade ritual the parents of the baby are told not to have sex until the baby is crawling or walking.⁸³ It is a long period for a couple not to have sex. This can tempt especially the man to have extramarital affairs, which may lead to HIV infection.

Jana (2003:25) states that *bzyade* is a ritual that can be performed with the baby of mother if the husband is away from home for a long time, or a single mother who has refused to reveal the name of the father of the new born baby. Also the *bzyade* ritual can be performed with the mother of the baby if the father of the baby refuses responsibility. In all these situations the ritual is performed with the mother of the baby and a man called *fisi* (hyena).⁸⁴ Once again, the ritual is a health risk, because there is a possibility that either the *fisi* man or the mother of the new born baby is HIV infected, taking into consideration that neither the *fisi* nor the mother of the baby knows their HIV status.

4.9. Conclusion

The information in this chapter has shown that the people of the Nsanje district are involved in some cultural rituals and practices that involve sexual intercourse, which poses as a danger to the lives of the parties involved in the sexual rituals. The rituals that have been dealt with in this chapter have shown that sexual intercourse is used as a form of cleansing, procreation and protection of the community. Also sex is used with more than one partner without protection or knowledge of each other's HIV status, which puts the partners at risk of being infected with HIV.

This is why there is a need to de-structure and re-structure the cultural practices so that the people of the Nsanje district can practice their rituals without putting each other at risk of being infected with HIV; taking into consideration that there is no cure yet for the HIV and AIDS pandemic.

⁸³ <http://malawihumanrightscommission.org> Accessed 11-06-2008.

⁸⁴ <http://malawihumanrightscommission.org>. Accessed 11-06-2008.

CHAPTER FIVE

Response of the African Evangelical Church to HIV and AIDS, Cultural Beliefs and Practices

5.1. Introduction

Chapter five will focus on the brief background of the African Evangelical Church (AEC), a definition of the church, the Body of Christ having AIDS, the response of the church to HIV and AIDS, the church, cultural rituals and practices and the response of the AEC to cultural beliefs and practices.

5.2. Brief Background of the African Evangelical Church

It is important to give a brief background of the AEC in order to have some understanding of why it responds the way it does in the era of HIV and AIDS. Phiri (1992:31) states that Christianity in Malawi was brought by different missionary societies who arrived from the last quarter of the nineteenth century onwards. After Dr David Livingstone, a number of traditional denominations began to be established in Malawi, such as the Church of England, the Presbyterians, with their Scottish background and the Roman Catholics.⁸⁵ The African Evangelical Church is one of the mission churches in Malawi and it is in the Nsanje district. Phiri (2005:31) explains that mission churches are churches that have their origin in Europe or America and were established in Africa through missionary work.

The African Evangelical Fellowship (AEF) was established in 1879 by a wealthy South African born widow, who lived in England.⁸⁶ The widow read about the difficulties of soldiers in a military camp in her home country (South Africa) and she came to Cape Town to open a Soldiers Home, which gave birth to the Cape General Mission in 1889. After the Boer war the South African General Mission began to expand into some parts of Southern Africa and then to some Islands in the Indian Ocean.⁸⁷

⁸⁵ <http://www.newtestamentchurch.org>. Accessed on 25-11-2008

⁸⁶ <http://ourworld.compuserve.com>. Accessed on 12-12- 2008

⁸⁷ <http://ourworld.compuserve.com>. Accessed on 12-12- 2008

In 1907 the African General Mission (AGM) was planted in Malawi in the Nsanje district, by Rev. William Price who was one of the first missionaries who came to Malawi from South Africa. At this time the AEC was called the South African General Mission, because the missionaries who were involved were from South Africa.⁸⁸ In 1967 the church was registered as the African Evangelical Fellowship. At this time the missionary group was composed of missionaries from the United States of America, the United Kingdom and South Africa. Later in the 1990s the church was named the African Evangelical Church, but it was registered and is still registered as AEF. Today the fellowship missionaries group is called the Society for International Ministry (SIM).⁸⁹

Phiri (2005:31) points out that mission churches in Sub-Saharan Africa still resemble their European and American counterparts. In addition Mugambi in Govere (2005:65) explains that the Christian religion, particularly in the Southern African region, dominated the African way of life and belief system and this was because the missionaries did not recognize, respect or value the African culture in their evangelizing mission. In addition Mugambi points out that the missionary enterprise robbed people of their culture, religion and moral integrity. The negative mentality the missionaries had on cultural practices in the Nsanje district, had an influence on the AEC. This is why Hillman (1975:59) in chapter two section 2.1, argues that culture should be recognised because each culture is unique.

5.3. Definition of Church

The African Evangelical church defines itself as the universal body of Christ made up of people who have accepted Jesus Christ as their saviour.⁹⁰ The word church comes from the Greek work “ecclesia” meaning “the called out.”⁹¹ In the religious sense, the word refers to those people who have been brought together by God seeking forgiveness for their sins.⁹² In addition Oyaro (2004:115) states that the church is the universal body of believers in Christ or a denomination in a particular area or region.

⁸⁸ <http://www.sim.co.uk>. Accessed on 12-12-2008

⁸⁹ <http://www.sim.co.uk>. Accessed on 12-12-2008

⁹⁰ <http://ourworld.compuserve.com>. Accessed on 12-12- 2008

⁹¹ <http://www.tftw.org>. Accessed 20-10-2008.

⁹² <http://www.tftw.org>. Accessed 20-10-2008.

According to Richardson (1996:46) church is the people and not a building. In other words a church is a group of individuals who believe in Christ and have been brought together for a common purpose to love in Christ. This is confirmed by Jacob (2002:15) who states that the church is a community of care, for care is the mission of God.

Nicolson (1996:198) has defined the church as a 'servant', serving God and serving God's people. This is why the church is there to serve God and God's people, not just to serve itself only. The church is also defined as the house of God, meaning that its members are a family. The Kingdom of God suggests that Christ is the King. The church is the vineyard meaning that Christ is the vine.⁹³

5.4. The Body of Christ has AIDS

Nicolson (1996:157) states that the Body of Christ is understood to be the collective body of Christians or all those who profess to a belief in Christ, acknowledging him as the Saviour.⁹⁴ The body is a unit, though it is made up of many parts; and though all its parts are many, they form one body. So it is with Christ (1Corinthians 12:12-13). As the body is made up of collective Christians it means that the Christians are infected or affected with HIV and AIDS because they are human beings just like other human beings. As Nicolson (1996:44) points out:

Some Christians have taken offence at the slogan 'Our Church has AIDS', since in their view people who get AIDS are sexual sinners, and sexual sinners by definition do not belong in the Christian church.

In agreement with Nicolson, Moyo (2006:29) states that in the African community when one person is ill it means the whole community is not feeling well. This is why the community finds ways to help the person who is ill to feel better, so that the whole community can also be healed. In other words Moyo reiterates that if one church member is infected with HIV, it means the whole church is affected, because the infected person is part of the Body of Christ. If one of the body parts is affected it means the whole body is affected too. As the Sena people say *zidze pano pya tonse*, meaning that what happens to one member of the family, or community affects the

⁹³ <http://www.tftw.org>. Accessed 20-10-2008.

⁹⁴ <http://www.tftw.com>. Accessed 20-10-2008.

whole family, community, tribe or clan. Another proverb that the Sena people use is: *chawona mzako chapita mawa chiri pa iwe*, which means they do not judge, despise or laugh at someone who is in trouble because tomorrow it might be you who will be in trouble. This is why Nicolson (1996:156) states that AIDS is not only an affliction of individuals or of particular groups, but it is an affliction of the whole human family. Our religious vision proclaims that living with HIV and AIDS is the condition in which we must all participate actively, because HIV and AIDS is no longer a problem out there, but is within or inside the church.⁹⁵ According to Nicolson (1996:154) the AIDS crisis shows where the church has failed, because people who are infected and affected with HIV and AIDS do not always find the support and the love that they look for in the church. This may well be true within the AEC. This is why Moyo (2006:29) argues that “the denial of the presence of HIV and AIDS in the church is fuelling stigma and discrimination”.

The World Council of Churches document (1997:43) argues that as a the Body of Christ, the church is supposed to be a place where God’s healing love is experienced and shown forth and God’s promise of abundant life is made freely available. But this is not the case in many instances. In addition Stone (1971:69) states that with the stigma around HIV and AIDS, it is clear that the church is no longer a place where people with HIV and AIDS can get help; rather fear of rejection pushes them away from the church community.

Ayanga (2008:44) argues that although the Body of Christ has a significant role to play, until now the Body of Christ has encouraged a culture of silence which has been deadly towards women. The culture of silence is not deadly only to women, but to children and to all people who are infected and affected with HIV and AIDS.

5.5. The Response of the Church to HIV and AIDS

Green (2003:286) points out those churches are found in all communities in the African regions and they are respected within communities. Nicolson in Richardson (2006:42) agrees with Green by saying that “since the churches are so uniquely placed to educate and co-ordinate assistance, not to respond would be a failure to love.”

⁹⁵ <http://groupwise.unp.ac.za>. Accessed on 02-06-2000.

Nicolson continues to point out that love should not be the church caring for ‘them,’ because HIV and AIDS are within as well outside the church.

Myeni (2001:81) explains that while the medical researchers are focusing on finding the cure for HIV and AIDS or better ways of managing the infected and affected, the church can also make a useful contribution in the prevention of HIV. The church should not give up being involved in the prevention of HIV thinking that there is no cure yet for HIV. The involvement of the church in combating HIV and AIDS will give hope and offer a positive attitude towards life to people who are infected and affected with HIV and AIDS. In addition Richardson (2006:38) states that until a cure or vaccine is found, the church is called to play the important role of caring for people who are infected and affected with HIV and AIDS.

Gennrich (2004:55) states that most of the time churches and Christians avoid getting involved in HIV and AIDS ministry because they feel that they do not have anything to offer or their offering is too small to meet the demands of HIV and AIDS. She explains that no action is too small in the era of the HIV and AIDS pandemic, because any action is better than no action at all. This is confirmed by Mudau (2001:19) who points out that even if the church cannot answer all the questions asked concerning the HIV and AIDS pandemic, this gives it an opportunity to be involved in the ministry of HIV and AIDS, because the church or the Body of Christ is called to be a healing community in the midst of pain and anxiety.

Churches in Malawi, with the help of the government, have an enormous role to play in co-ordinating AIDS education and in the area of care and prevention.⁹⁶ The African Evangelical Church as the Body of Christ is called to respond to the HIV and AIDS pandemic. In 2006 the African Evangelical Church in the Nsanje district, launched a Home Based Care (HBC) programme. This programme was launched in Chididi, a small isolated village tucked away high up in the hills of Southern Malawi. The programme is part of an AIDS initiative responding to the HIV and AIDS pandemic that is devastating communities in the Nsanje district.⁹⁷

⁹⁶ <http://www.malawimacs.org>. Accessed on 11-11-2007

⁹⁷ <http://www.hopeforaids.org>. Accessed on 11-06-2007

The HBC programme trains church volunteers to make regular home visit to patients and their families providing practical, emotional and spiritual support.⁹⁸ As Jacob (2002:15) states, the Body of Christ is the community of care. In responding to the HIV and AIDS pandemic the church should have in mind that every human being is created in the image of God (Genesis 1:27) and deserves human dignity and identity, because human dignity and identity are not only for the elite and privileged. Although the AEC has done little in combating HIV and AIDS, it can be encouraged to do more in the education and prevention of HIV and AIDS and there is still room and the need to do more in combating HIV and AIDS. As Nasoro (2005:26) points out, the Body of Christ has a special role to play in combating HIV and AIDS in the Nsanje district. The church can build a loving community where the community can find love and acceptance, care and counselling.

The AEC in the Nsanje district can respond to HIV and AIDS by listening to people who are infected and affected with HIV and AIDS. Lartey (2003:89) states that listening is the most important characteristic of counselling or is the heart of counselling, because without listening there is no counselling. The AEC needs to be able to listen to what its members and the community at large are saying about HIV and AIDS. Also, it is important for the AEC to show empathy which means being in the shoes of people who are infected and affected for a short time. This is what Lartey (2003:92) calls empathy, so that the church can feel what is going on with people who are infected and affected with HIV and AIDS. This will also help the church not to discriminate against people who are infected or affected with HIV and AIDS.

Waruta (2000:7) challenges that the church should be worthy of its name. It should be willing to confront human suffering and the conditions that cause it, following the example of its founder Jesus Christ.

Byamungisha (2002:50-51) states that prior to 1995 the church was not involved in the combating of HIV and AIDS and yet some of its members were dying of AIDS related illnesses. This is why Gennrich (2004:56) urges the church to integrate HIV and AIDS awareness into its life and ministry as the Body of Christ, because in failing to do so the local community will find it hard to trust and relate to the church as the

⁹⁸<http://www.hopeforaids.org>. Accessed on 11-06-2007

Body of Christ and people will also feel marginalised and isolated in their struggle. Aaltonen (2005:21) also argues that the integration of HIV and AIDS information should not be only in the church, but also in the theological education curriculum, in the Bible Colleges and universities, as a response to HIV and AIDS.

HIV infected people can be instrumental in HIV and AIDS education. Qakisha (2002:15-16) explains that in the beginning of the HIV and AIDS pandemic, HIV infected people never had a chance to share their stories. In this time of HIV and AIDS it is important that people who are HIV infected should be given a platform to share their stories. In doing so, some of the stigma and discrimination around HIV will be alleviated. In addition Nicolson (1996:157) states that PLWHA are not just people to be cared for though, this is important. They are people with something to offer. Nicolson (1996:155) continues to point out that AIDS is not the only matter the church should respond to, because PLWHA and their families deserve much love. In other word Nicolson is saying that people or the families of the people who are infected with HIV also need to be taken care of. As Ward in Stoos (2002:13) states that one aspect that is easily forgotten is that also those who care for people who are infected with HIV and AIDS also need care and support.

5.6. The Church and Cultural Rituals and practices

Nicolson (2000:12) explains that historically, churches do not have a good record with regard to their respect for African culture. Mwamaloba (2005:5) points out that this is due to the churches that inherited most of the missionaries' traditions and teachings. Unfortunately even the native church did not put any effort into investigating the cultural practices, before they condemned them. Mwamaloba continues to state that although there are some rules imposed on their members by church authorities concerning cultural practices, the events surrounding death are mainly practised in traditional ways. Mwamaloba (2005:5) states that:

In case of death and after death rituals, people are told not to practice the rituals because they are unchristian, but unfortunately the church is only present at the funeral for a few hours or days and after that people continue to practice their rituals without the awareness of the church. The fact that the ritual is performed secretly means the church lacks affirmative evidences to respond towards it. The current

problem of HIV and AIDS brings the challenge to the church in such a way as to continue research on it.

Mwamalabo says that the church is not aware of the rituals because these rituals are performed secretly, but the church is in the community and some of its members do practice such rituals. So which church is Mwamalabo talking about and who is this church? It is possible that the church is turning a blind eye, meaning that the church is just not interested in involving itself in the sinful practices, practiced by sinful people as they call them. In the report compiled by Kalyti (2006:11-12) on the Sensitisation Workshop on Gender Based Violence for Church Leaders in Malawi, the question was asked “how did the church allow negative cultural and traditional practices to continue?” There is a total rejection of cultural practices including some of the positive cultural practices. Kalyti continues to state that the church leaders do not want to confront their members on the issue of cultural practices that encourage the spread of HIV for the fear of losing their church members. As a result Hinga (2008:44) points out that the church developed the culture of silence.

5.7. Cultural Beliefs and practices and the response of the church

Nasimiyu-Wasike in Oduyoye (2006:40) points out that in all African ethnic groups one finds rituals that mark the peak moments in people’s lives – for example, rituals that mark ones’ birth, naming, initiation into adulthood, marriage and death. In addition Kareeba (2000:58) states that religion is woven into every aspect of life and religious beliefs play an important role in the sense of personal identity.

Furthermore, Magessa (1991:14) points out that the main task of the Body of Christ is to be an advocate in the society to break against the cultural marginalization. In the realisation that there are good and harmful cultural practices, Jacob (2002:8) explains that the Methodist’s response to PLWHA should be sensitive to people’s cultural traditions, customs and religious practices. He continues to state that as a Body of Christ the approach to cultural practices must encourage those aspects of culture that promote healing and wholeness.

Stoos (2004:14) points out those African traditions that have the potential to prevent the further spread of HIV, if only they are understood as to the way they operate. This is why Van Dyk (2008:130) states that the prevention programmes must be

contextualised so that they are sensitive to local customs, cultural practices, religious beliefs and values, as well as to other traditional norms and practices. Traditional African beliefs and customs should be taken into account when developing a HIV prevention programme in Africa. In this way the AEC will be able respond to cultural practice that influences the spread of HIV with sensitivity, without condemning them before analysing them.

Oduyoye (2006:9-10) is referred to in chapter one of this research, saying it is only those who practice the religious rituals who can make a judgement about their modification or their usefulness. She continues to state that Africans themselves have the ultimate responsibility for evaluating their use. The AEC can be in touch with the community as to how to modify the harmful cultural practices or promote the cultural practices that promote the well being of the human beings.

Jana (2003: 15) points out that the church of the Malawians can also respond to HIV and AIDS by using the positive traditional proverbs, which promote positive living among people with HIV and AIDS. Proverbs like *tsiku limodzi siliwoletsa nyama*, meaning that an HIV patient can live for sometime with a sense of hope. In addition Jana (2003:29) states that another proverb that the church can use in response to HIV and AIDS is;

mtambo ukula ukukana mvula, which means that sometimes it occurs that the darkest cloud does not result in rainfall. This implies that AIDS, which is the most feared disease, does not necessarily mean death...

This proverb therefore, might help our friends to live a normal life just like anybody else.

Nguru (2005:24) states that in order for the Body of Christ to respond to the HIV and AIDS pandemic it should use sensitive language, language that is inclusive, and gender sensitive. HIV and AIDS messages should show that HIV and AIDS affect all people of all ages, cultures, race, gender and sexual orientation.

Furthermore, Nguru (2004:20) and Ackermann (2006:221) explain that people who have discussed their HIV status have been stigmatised and discriminated against not only by Pastors and members of the church, but also by members of their own families. This is why Nguru (2004:21) argues that there is a need for the Body of

Christ to break the silence of HIV and AIDS pandemic through adopting a positive attitude towards PLWHA. By doing so the church is providing an excellent space within which to end the stigma and discrimination because the stigma and discrimination are against Christian values and beliefs of love of one's neighbour. In addition Nguru states that when churches break the silence on HIV and AIDS, greater awareness will be created in the members of all age groups as they become knowledgeable about the transmission and prevention of HIV and AIDS as well as their responsibility as Christians towards PLWHA. Churches can break the silence around HIV and AIDS through allowing PLWHA to share their stories.

5.8. Conclusion

Chapter five has focused on a brief background of the African Evangelical Church, definition of the church, the Body of Christ has AIDS, the response of the church to HIV and AIDS, the church, cultural rituals and practices and the response of the church to cultural beliefs and practices. Information given has shown that the African Evangelical church is one of the early missionary churches which were greatly influenced by the early missionaries, who did not respect and value the African culture. As a result the AEC did not see any need to respond to the spread of HIV through cultural practices that influenced the spread of HIV and AIDS. However the AEC started to respond to HIV and AIDS in 2006 by launching a Home Based Care programme.

CHAPTER SIX

Analysis of the cultural practice of the Sena people in Nsanje district

6.1. Introduction

In this section the cultural practices of the Sena people are analysed based on Kanyoro's theoretical framework which emphasises on analysing the cultural practices of the population being studied. The following questions form the basis for this analysis:

- Do the cultural practices oppress the people concerned or are they for their well-being?
- What are the negative and positive points?
- Do the positive aspects fit the Christian perspective?
- What has Christianity been able and unable to do about these rituals?
- Is there room for change of the cultural practice?

6.2. Child marriage

As indicated in section 4.2, in the Sena culture, a girl child has no choice regarding the man she would like to marry. This, together with the fact that young boys and girls are not allowed to argue or question people who are older than them, make this practice oppressive as it denies the girl child's freedom to make her own judgements regarding the type of man she marries.

Furthermore, by culture the Sena people perceive older people correct all the time. For this reason when the girl child gets married she is not able to voice her feelings, or ask the husband to wear a condom during sexual intercourse, because of the age gap between the girl child and her husband. This puts the girl child in an awkward position regarding the possible spread of HIV and AIDS, because the young child does not even have any idea about the HIV status of her husband. In the light of the above discussion, child marriage works against justice and the well-being of the girl child.

As pointed out in chapter five, in general, Churches tend to be passive regarding issues of cultural practices that encourage the spread of HIV. However, as with other

practices that promote the spread of HIV discussed in chapter five, Churches in Malawi could make a meaningful contribution to changing people's perceptions regarding child marriage as it is against the gospel message which promotes salvation, justice and well-being.

6.3. *Nthena* (Bonus wife)

As pointed out earlier in section 4.3, problems related to a bonus wife are similar to early girl child marriages. Once again the girl child is voiceless to ask the husband to use a condom during sexual intercourse. This puts the girl child in danger of contracting HIV, and there is no evidence that African Evangelical Churches in Nsanje district is fighting against this practice.

6.4. Polygamy

As indicated in section 4.4, polygamy makes possible the spread of HIV among the people involved in the marriage where one or more of the people concerned are unfaithful, and it also promotes gender imbalance. In the light of this, polygamy is oppressive and it does not promote the well-being of women thus it does not fit into the Christian perspective of marriage which insists on love and regards both spouses as equal.

6.5. *Kupita Kufa and Kupita pa Nyumba* (Widow cleansing and widow Inheritance)

As discussed in section 4.5 and 4.6, in the practice of widow cleansing the widow has no choice regarding selection of the cleanser or widow inheritor. Furthermore, the cause of death of the deceased and HIV status of the cleanser, inheritor and the widow are not discussed. In the light of this, widow cleansing is not only oppressive and unjust to the widow, but also it promotes the spread of HIV, thus it works against the well-being and human rights of the people concerned. As with other harmful practices indicated above, there is no evidence that the African Evangelical Church in Nsanje district is fighting against this practice.

6.6. *Fisi* (Hyena) for Procreation, Birth Cleansing and Protection

As described in section 4.7, none of the parties involved in the hyena custom is practiced use protection. This puts the hyena, the infertile man and the wife of the

infertile man at risk of being infected with HIV, if one of them is infected. Furthermore, this ritual is performed without the consent of the infertile man, thus it works against the human right of the infertile man concerned.

Likewise, with the *Bzyade* (*Fisi* for protection and birth cleansing) ritual the father or *fisi*, may ejaculate on the baby's body or on the cloth they wrap the baby in, or on the floor and the baby is bathed with medicine. This puts the baby at risk of HIV infection if the father of the baby or the *fisi* is HIV positive. In the light of the above discussion, both the *fisi* for procreation and birth cleansing and protection are unjust and promote ill-being of the baby, thus it is against the Christian perspective of the responsibility of parents as protectors of their children.

So far there is no evidence that the African Evangelical Church in Nsanje district is fighting against this practice. None of the rituals discussed above fit in the Christian perspective, because according to most Christian's child marriage is not allowed. Polygamy is not allowed, and widow cleansing, widow inheritance and the *fisi* system are not allowed, but the amazing part about these issues is that whilst the church does not accept them, the church is silent about them, life goes on as if there is no HIV and AIDS and yet people are dying everyday.

It seems that some Christians have done little if anything to respond to cultural practices that increase the risk of contracting HIV and AIDS. This is why there is a need for women and men to take serious steps in responding to HIV and AIDS. Both men and women need to be involved in modifying or abolishing the cultural practices that are a threat to the community of the Nsanje district.

6.7 Conclusion

The above section dealt with analysing the cultural practices of the Sena people of the Nsanje district basing on Kanyoro's theoretical framework. The rituals discussed in this section do not fit into the Christian perspective. Even though it seems that Christians have done little in responding to these cultural practices that increase the risk of contracting HIV and AIDS, there is enough room for the Sena people to transform or abolish the cultural practices that are a threat to the lives of

the people practises them. The next chapter highlights recommendations for the people of the Nsanje district.

CHAPTER SEVEN

Recommendations and Conclusion

7.1. Introduction

As much as the people of the Nsanje district want to preserve their cultural practices, it is important that there should be some recommendations for the African Evangelical Church on how it can respond to the issues of cultural practices and the spread of HIV and AIDS. The people of the Nsanje district should be able to practice their rituals without putting each other at high risk of being infected with HIV, remembering that there is no cure for HIV and AIDS. Also the community of the Nsanje district should understand that the impact of HIV and AIDS is on both the infected and the uninfected people and even on the people who do not practice cultural rituals because HIV is transmitted through sexual intercourse without the protection of a condom.

7.2. Integrating HIV and AIDS information into the life and the ministry of the African Evangelical Church

It is important that the church should know that HIV and AIDS is not just out there but that it is within the church, because there are church members who are infected and affected with HIV and AIDS. So when the church is responding to HIV and AIDS it is not responding to people out there, but it is also responding to people who are within its walls, because its people are also infected and affected with HIV and AIDS. This is why it is important for the church to integrate information about HIV and AIDS into its life and ministry. A lack of integrating of HIV and AIDS awareness into its life and ministry will make people who are living with HIV and AIDS feel that they are discriminated against and marginalised by the church as they become isolated and fear a lonely existence and a frightening death. The integration of HIV and AIDS information should not be only in the African Evangelical Church, but also in its Bible Colleges and its primary schools, and in the seminaries and all places of learning.

7.3. Education and awareness of HIV and AIDS

The church has an important role to play in HIV and AIDS education. It is important for the AEC to educate and make people aware of HIV and AIDS and its dangers, because each and everyday more and more people are infected and many are dying from AIDS related diseases. Educating people about HIV and AIDS will make people aware of what is going on around them and this will help them to take precautions concerning the transmission of HIV. Even though not all people will take precautions, this should not stop the AEC from educating people and making them aware about the transmission of HIV and AIDS. Wherever they go they should see and hear the educational messages about HIV and AIDS.

My daughter who is 18 years old now, once said that she believes that people have heard enough about the messages of HIV and AIDS education. As a result people will not take the HIV and AIDS prevention messages seriously. I argued with her by saying to her that HIV and AIDS messages of education should continue because most people have a tendency to forget.

I asked her a question, “How many times have I told you not to leave the gate open or unlocked?” She said “many times.” Then I said to her that this is why HIV and AIDS education needs to go on for people so that people can hear it again and again, just as I have told you not to leave a gate open or unlocked so many times.

It is also important that PLWHA should be educated as to how to take care of themselves and not to pass on the HIV virus to others. This will improve the quality of life for people who are HIV infected, because too often HIV and AIDS education is targeted towards people who are not infected and to people who do not know their HIV status.

The African Evangelical Church should have in mind that HIV and AIDS education and awareness will help reduce stigma and discrimination against people who are infected and affected with HIV and AIDS. The community will then have understood the methods, of transmission of HIV. The AEC can use the stories of those infected as they witness in the church, use drama, songs, competitions, and quizzes as a way of

educating its community at large. The church should be able to choose relevant ways of educating its community especially targeting their youth.

7.4. Collaboration with others

The African Evangelical church should realize that HIV and AIDS is a universal problem and it cannot be solved by one person, organization or church. So this is why it is important for the AEC to collaborate with others in responding to the HIV and AIDS pandemic. This could be realised through having a network with ecumenical groupings and other churches, the health sector in the district, other government sectors, nongovernmental organizations, the support groups and individuals that are HIV infected. Individuals will bring different skills and knowledge as to how, together with the church, they can respond to the HIV and AIDS pandemic. People say “united we stand and divided we fall”. In other words the African Evangelical church cannot stand on its own; it needs united efforts to combat the spread of HIV. It is also important for the AEC to be linked to the awareness programmes that already exist in the community.

7.5. Gender Imbalance

It will be unrealistic if one talks about HIV and AIDS without mentioning the gender imbalance in the area of HIV and AIDS. In this study in chapter four the research has shown that different issues (widow cleansing, widow inheritance, early marriage, bonus wife and polygamy) have indicated that gender imbalance is one of the issues that contribute to the spread of HIV in the name of culture. This is a cultural issue that the AEC should deal with in response to the HIV and AIDS pandemic. The AEC needs to emphasize that both men and women are made in the image of God and before God both are equal. There is no need for men to look down upon women as weaker vessels.

It is important for the AEC to reason with the community of the Nsanje district concerning the cultural practice and the spread of HIV. The AEC should encourage the cultural practices that promote the well-being of the people of the Nsanje district. At the same time they should challenge the harmful cultural practices that make the

people vulnerable to the infection of HIV, although, the church has to be respectful and sensitive when dealing with the issue of culture and cultural practices.

There is a need for the AEC to educate men and women on the issues of sex, sexuality, gender and their importance in the lives of the community. Also the AEC needs to empower women in order to be equal partners in relationships. There is a great need for AEC to contribute effectively to the empowerment of women especially in this era of HIV and AIDS pandemic so that women are able to protect themselves from being infected with HIV. This is the responsibility of the AEC, to preach the message of gender imbalance to its congregation and to rectify the patriarchal system within the church.

7.6. Holistic Approach and Pastoral Counselling

There are more orphans than ever in the history of the Nsanje district. This is due to the loss of one or both parents due to AIDS related illnesses. As a result the children are left without a breadwinner and most of them end up being taken care of by the grandmother or the eldest girl child in the family. Both the grandmother and girl child are people who are not employed and have no skills for employment, as a result some young girls end up being involved in prostitution to earn money for food. This is why the AEC should realize that a human-being is not only a spiritual being, but also a physical person who has very practical needs of food, clothing and shelter. The AEC has a very important role to play in taking care of the orphans and their care givers by providing the physical needs (food, clothing, and finances). Also the AEC can help the orphan teenagers to be trained in certain skills that can help them to get employment, or educational programmes that will help them to generate money to care for their siblings.

As the church takes care of the orphans it should also be involved in pastoral counselling of the orphans because most of the time when there is death children are left out, information is only given to the older people. As a result the children's questions are not answered, although not all questions can be answered, and at least children should have someone to talk to or someone who can listen to their explicit and implicit pain. At the same time the church has an important role to play in counselling the whole family concerning their fear, anxiety, disappointment and the

pain they are going through due to the AIDS related illnesses, or the death of a beloved. The most important thing for the AEC is to listen to its parishioners. Listen to the spoken and unspoken words in order to respond in a relevant way. Sometimes people just need someone to listen to their stories rather than give them advice, or preaching to them. Therefore the AEC as a Body of Christ, the messenger of God, the servant, has a task to fulfil in responding to HIV and AIDS.

7.7. A Possible Response

In response to the widow cleansing ritual, the AEC can have a ceremony at church or at the widow's house, attended by the relatives of the deceased, relatives of the widow, the community and the church members. In the preparation for the ceremony, the women from the church can bring a basin of water, depends where the ceremony is going to take place. They can also bring a new white towel, a mat or something comfortable for the widow to kneel on and a tablet of bath soap.

Before the cleansing ceremony, the pastor or any church members can open with a word of prayer and also the congregation, together with the community, can sing a few church hymns. The pastor can read the marriage vows where it says until death part us. Then convey the message to the people attending the ceremony by saying that, death has parted our sister and brother. According to our tradition when a married man dies, his wife is considered unclean until she goes through the cleansing ritual. As we all know in this time of HIV and AIDS, the rituals that our forefathers used for cleansing are no longer safe for our lives. Therefore, we will use water to wash our sister's head as a sign of cleansing her. The white towel used to wipe the head is a symbol of saying that now our sister is as white or as clean as the white towel.

Then the pastor can ask for the widow to come forward and kneel on the mat or on a small pillow. It is important that the pastor should pray for the widow before the ritual is performed. Then the pastor can ask one of the elderly women from the church to wash the widow's head with water and soap, and then wipe the widow's head with the white towel as a symbol of being made clean. In closing the ceremony the pastor can use some of the water that is prayed for to sprinkle the whole house of the widow, as a symbol of cleansing evil spirits

7.8. The Present Situation

This study found that there is no cure or vaccine yet for HIV and AIDS and as a result HIV and AIDS has a great impact on different people from different walks of life and its impact is both on the people who practice the cultural practices and on those who do not practice them. The study gave information on how the people of the Nsanje district understand HIV and AIDS. According to this study the people of the Nsanje district have a different perspective about HIV and AIDS, because of the *tsempho* illness that has similar symptoms to HIV and AIDS.

The study also raised the issue of cultural practices and HIV and AIDS. It has to be said that although some cultural practices may have a positive function on the health of the Malawian society, cultural practices such as widow cleansing, widow inheritance and child marriage have a negative impact on the health of Malawian men women and children; especially, women and young girls because of their subordinate role in society, which denies them the chance of negotiating for safe sex.

This research found out that most of the cultural practices contribute to the spread of HIV and most of these rituals use sex without protection. There is also a gender imbalance because most of the decisions about rituals are made by men. Although women and young girls are involved in some of these rituals, their voices are not heard because they are not given space and time to express their feelings, nor are they afforded a position of equality within the society.

The research focus is also on the African Evangelical Church in its response to cultural practices, in relation to the spread of HIV in the Nsanje district. The outcome of the study has shown that there is little that the AEC has done to combat the spread of HIV and AIDS, which is often caused by the practice of cultural rituals. Therefore, some of these cultural practices which give people physical and psychological satisfaction and a sense of identity and belonging are dangerous in this era of HIV and AIDS.

There is a way forward, and that is for the AEC to reconsider the customs around certain cultural practices and to find ways of offering the community meaningful new customs, such as the form of cleansing suggested above, which will satisfy the role of

the ancestors of the past and bring it into line with the traditions of a new present era in this time of HIV.

7.9. Conclusion

In conclusion, this dissertation has recorded a number of cultural practices which are practiced in the Nsanje district. Whatever others might say, the various cultural practices play roles which are generally valued by those who believe or practice them. The study further revealed that the various cultural practices impact on the extent to which people in the various communities enjoy their human rights. The study also found that women and girls, on the one hand, were affected differently from men and boys, and on the other hand, the cultural practices affected children differently from the way they affected adults.

The research study found that culture is complex and it has an impact on people's lives. Although culture is complex, it is also not static; it changes all the time according to time and location. This is why there is a need for the people of the Nsanje district to modify or abolish some of the cultural practices, because times have changed. The cultural practices that were relevant during the time of their ancestors are no longer relevant in this era of HIV and AIDS.

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