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AIDS, religious enthusiasm and spiritual insecurity in Africa

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The connection between the AIDS epidemic and the efflorescence of religious ‘enthusiasm’ (construed in both classical and contemporary senses) in Africa in recent decades is best understood, this paper argues, by reference to a concept of ‘spiritual insecurity’. The article offers a general description of the condition of spiritual insecurity and argues that it is best studied within a relational realist paradigm. The article presents a critique of the concept of ‘belief’ as commonly used in the social science of religion, arguing instead for an opening of the study of social relations to include the universe of relations within which people experience the world, including their relations with entities such as spiritual beings that might otherwise be considered virtual.

Keywords: AIDS; religion; Africa; spiritual insecurity; religious enthusiasm; belief

Introduction: AIDS, religious enthusiasm and a miracle cure in Tanzania

In August 2010, in the remote northern Tanzanian village of Samunge in Loliondo, 325 km north of the nearest town, Arusha, God spoke to a 75-year-old retired pastor of the Evangelical Lutheran Church, Mr. Anbilikile Mwasapila, and gave him the recipe for a miraculous medicine. By boiling the bark of the ‘mugagira’ tree and dispensing it to patients one cup at a time, God would cure people of AIDS, cancer, diabetes, high blood pressure, asthma, and anything else that ailed them (Guardian-on-Sunday-Team 2011).

Word spread quickly of the ‘wonders’ being performed at Loliondo. By early 2011, stories were appearing in newspapers and on radio and television across East Africa. Tens of thousands of people made the difficult journey to Loliondo for a cup of Mr. Mwasapila’s medicine. By March, traffic to the village was backed up for 15 km. Thousands claimed to have been cured, including Members of Parliament and Judges who ‘testified’ to the medicine’s efficacy. Others, not yet ill, trekked to Mr. Mwasapila’s bucket to gain protection from future harm. Gravely ill patients were dying on the road to the cure. (Tour operators recommend that people unable to handle the 6-hour journey by road from Arusha take a helicopter. See www.loliondotravels.com.) Health Ministers from Kenya and Tanzania warned the public against trusting untested medicines but were constrained in attempting to regulate Mr. Mwasapila’s enterprise by his phenomenal popularity. Doctors in Arusha saw the wards of the hospital emptying of patients (NTV Kenya 2011). Mr. Mwasapila was modest in the price he charged for his miracle drink, only 500 Tanzanian

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Shillings (about 30 cents), but was not circumspect in his claims: the brew could cure AIDS, cancer, diabetes, high blood pressure, asthma. Everything. God is great.

Mr. Mwasapila's miracle cure is but one of thousands of similar phenomena in recent decades in Africa, notable only for the scale of his operations and the publicity he has received. In the mid-1990s, for example, a Malawian villager treated more than a million people with his 'cure' for AIDS (Probst 1999, Schoffeleers 1999, Doran 2007). Across the continent, hundreds of thousands (if not millions) of healers are brewing their decoctions daily, usually with recipes inspired by communication with spiritual beings of one kind or another. A similar number work directly with God, Jesus, the Holy Ghost, Allah, ancestors, or other invisible beings spoken of in doctrines of religion to cure illness, restore good relations in families and communities, bring wealth and good fortune, cast out demons, protect against witchcraft and sorcery, and much, much, more.

In this article I argue that the key to understanding phenomena such as the Loliondo miracle cure and the connection between AIDS and religious enthusiasm more generally, is the concept of 'spiritual insecurity' referring to the sense of danger, doubt, and fear arising from efforts to manage relations with invisible forces. I present the outline of a framework for thinking about religious culture and AIDS in contemporary Africa in terms of a paradigm of security, which incorporates a broad field of power relations in the scope of analysis. This framework, I argue, allows us to move beyond approaches that focus on questions of belief in relation to healing and religion in order to analyse the broad range of forces that people experience as shaping their lives in all dimensions.¹

So, how should we interpret something like the Loliondo wonder?

Religious enthusiasm: a relational realist approach

The most appropriate term for describing events at Loliondo, it seems to me, is 'religious enthusiasm'. In the original Greek, from whence it derives, the term enthusiasm means possessed by a god (*en/theos*). In the seventeenth and eighteenth centuries, in England, it was used to disparage Protestant religious movements promising a direct connection with the Almighty (Knox 1950). David Hume (1963 [1742–1754]), for example, wrote an essay denouncing enthusiasm as a corrupted form of religion, an equivalent, if opposite, delusion to priest-ridden superstition. In the twentieth century, the term has come to signify a positive, energetic, embrace of something (Tucker 1972). I use enthusiasm here in all these senses. The term is particularly apposite, given the long history and contemporary traditions of spirit possession in Africa and the centrality of relations with invisible beings in African practices of healing (Behrend and Luig 1999, Kalu 2009). Enthusiasm, it should be noted, is by no means exclusive to Christians (PewForum 2010, Manglos and Trinitapoli 2011). Since Christianity predominates in the regions of Africa most affected by generalised AIDS epidemics, however, I shall concentrate on Christianity here.

Mr. Mwasapila claims to have communicated directly with God in the making of his medicine. His medicine, which has to be dispensed directly from his hand – hence the need for people to trek out to his village rather have it shipped to town in tankers – substantiates a relationship with God mediated by Mr. Mwasapila. God has chosen this substance, derived from a particular plant found in this particular region, to be

the instrument of his power. As a healer, Mr. Mwasapila does not need to articulate a theory of healing other than referring to the power of God. Evidently that is sufficient for a very great number of people. In performing the work of brewing the medicine in the light of a narrative telling of his relationship with God, I would argue, Mr. Mwasapila is, among other things, promising a form of security for his patients. He is bringing them into connection with the ultimate power upon whom all life depends. The implicit promise in his medicine is that access to this power will allow the patient to manage relations with the evil forces – be they viruses, cancers, evil spirits, or witchcraft, to name but a few – that are currently causing them to be sick, or may do at some time in the future. The Loliondo healer's popularity, along with testimonials to his medicine's effectiveness, provides customers with confidence. The fact that he is a retired pastor probably helps, but would be less significant than evidence of his present relationship with God manifest in his success at healing the sick.

Unfortunately, for most of Mr. Mwasapila's customers this confidence that evil forces are under control will be short lived, assuming of course that none of their incurable diseases are actually cured. Before long they will begin to wonder why their suffering has not ceased. Their sense of danger, doubt, and fear regarding the invisible forces acting upon their lives will probably return, perhaps increase. When this happens, however, there will be no shortage of others promising relief to whom they can turn.

The AIDS epidemic in Africa, in tandem with the dramatic political, social, and economic changes of the past few decades, has spawned innumerable crises of authority regarding the interpretation of the actions of invisible forces in human lives. Talk of 'viruses', for example, has forced Africans to figure out how this new invisible force relates to others they have known in the past. Along with the biological ravages of the virus, itself an invisible agency, dramatic new forms of knowledge and institutions of healing – long the wellspring of religion in Africa – have spread through the continent in unprecedented ways. The AIDS epidemic has produced a widespread and pervasive sense of spiritual insecurity. Spiritual entrepreneurs of every stripe flourish amidst this insecurity. Ordinary people, too, have struggled to fashion new modes of knowing how to manage the invisible forces acting on their lives. They have been eager to embrace the promise of security. The religious enthusiasm evident across the continent is the result.

To understand phenomena such as the Loliondo Wonder or the thousands of similar events that mark the era of AIDS in Africa, we need to take seriously the narratives of power relations they embody. We need to analyse the relations spoken of in such narratives as *relations* and to take seriously the question of the politics of such relations in any particular instance, despite the fact that some of the stories we hear might seem absurd and the entities involved in the relations imaginary. The key concept here is 'spiritual insecurity'.

Spiritual insecurity emerges from relations with invisible forces (and by 'forces' I don't merely mean beings) when suffering is interpreted as harm – that is, as damage, hurt, or misfortune deliberately inflicted by malicious persons or spiritual beings.² Spiritual insecurity can be a cause for mere anxiety, or a matter of life and death. The struggle to find security in the face of dangers posed by invisible forces can, at times, be all consuming. By emphasising security issues, I focus on the analysis of power

relations. Of course, religion, in all its multiple aspects, is about more than mere relations of power and questions of security; the quest for spiritual security, similarly, involves more than merely the religious, particularly as it involves institutions and authorities in mundane and secular domains. For most humans, however, the ultimate source of security is to be found in relations with spiritual powers of various sorts, which is why, despite reservations, I retain the term '*spiritual* insecurity' to describe this condition rather than, say 'existential' insecurity.

In this article, drawing on decades-long field experience in southern, central, and east Africa, I propose a relational realist approach to studying spiritual insecurity. By emphasising security issues, I focus on the analysis of power relations. But, crucially, I shall argue that the field of relations under analysis must include relations with and among entities beyond the merely human. Following Charles Tilly (1998, 2002), particularly in his later works, I consider that the elemental unit of human social life is the social relation – a repeated interaction between two or more persons or entities. This notion, grounding an approach to social science that Tilly called 'relational realism', stood in contradistinction to the methodological individualism, often taken-for-granted, of most social science, emphasising as it does the dispositions, motives, and calculations of individual actors. Relational realism, as performed by Tilly, also rejects the quest for governing laws to explain large social process such as war, revolution, urbanisation, class formation, and the formation of national states or responses to epidemics such as AIDS. Instead, Tilly advocated careful analysis of social relations, empirical examination of the chains of connections linking persons through time and space in larger compounds of relations. He sought to uncover the elemental logic of interactions; the causal mechanisms that recur time and again in different contexts with different results, which, he argued, could explain the dynamics of social change. Relational realism enables the social scientist to connect the actions of individuals, each constituted in relations with others, with the large processes and big structures that seem to govern their existence. Where I part company with Tilly, to some extent, is in my willingness to contemplate relations among a much wider field of entities than merely the ordinary human person.

That is to say, I propose we take seriously relations between persons and invisible entities and treat them as *relations* rather than merely as 'beliefs', a term that is seriously misused in contemporary social science (see below). While we can remain agnostic about the existence of particular parties to a relationship – say, between human and spiritual beings – and recognise thereby that we can have only a limited understanding of the relationship as it is lived, or imagined, by those engaged in it, we can nonetheless treat the relation itself as real while treating the non-human entity as virtual. Hence, this approach is a form of relational realism. Moreover, insofar as relations are treated by the persons engaged in them as relations with entities conceived of as beings or agents of some sort or another, we can analyse these relations as if they were social relations. Relations, repeated interactions between two or more entities, are far more complex and messy than the mere products of cognition and ideation known as 'beliefs'. Even if, ultimately, we are only interested in the affairs of humans, framing our understanding of their relations in this capacious way opens a much wider, more fertile, and productive field for understanding what is really going on in the world.

What is spiritual insecurity?

Merely living in a world with a lively appreciation of invisible agencies, as most humans do, does not necessarily produce spiritual insecurity. Even living with a vivid sense of exposure to evil forces in what some Christians describe as a condition of 'spiritual warfare' does not necessarily produce this insecurity. What I am calling spiritual insecurity is an existential condition marked by epistemic anxiety produced by ignorance of, uncertainty about, and/or disagreement among relevant authorities over the proper and effective modes of managing relations with agencies deemed capable of causing harm as well as those deemed responsible for the subject's safety and well-being. It is produced by crises in interpretive authority, when the people who claim to speak the truth about how the world works seem to lose persuasiveness. Insecurity mounts particularly when a superfluity of competing authorities claim the capacity to communicate and manage relations with those invisible agencies said to be responsible for causing harm – as well as those from whom protection is sought. In such circumstances people experiencing harm often face choices among conflicting authorities invoking powers rooted in radically different religious traditions, modes of ritual practice, and incompatible epistemologies. In the history of Christianity in modern Africa, for example, the central issue for Christians has been how to reconcile faith in the Biblical God and their relations with ancestors and other spirits upon whom well-being depends. Spiritual insecurity, then, is heightened by conflict among, or crises within, interpretive authorities governing relations with invisible forces, such as religious figures or healers.

Spiritual insecurity can be experienced, both individually and collectively, within a wide variety of social forms, from the solitary individual in the dead of night, to the family mourning an AIDS death together while wondering whether it was caused by witchcraft, to a whole village mobilised against Satanic bloodsuckers, or a nation reeling from a natural disasters said to have been caused by God. Although my focus in this essay is on Africa, spiritual insecurity is not a phenomenon exclusive to that continent. Yet, while the condition may be universal, the character of the relations from which it emerges – the entities experienced as being in relation, the powers they deploy, and the available modes of interpreting and managing relations – will be particular to times and places. In every context, people have to work with what we might call, with suitable homage to Charles Tilly (1977, 2008), the repertoires of spiritual action available to them, repertoires that are shaped by the particular histories of each place.

Spiritual insecurity is related to, but not reducible to, other forms of insecurity such as poverty, violence, disease, oppression, to name but a few from the UNDP's list of the components of 'human security' (1994). In the absence of manifest suffering, questions of spiritual insecurity rarely arise. Affluence and comfort give rise to their own forms of angst, to be sure, but it is in circumstances where life and death is at stake, where serious harm is feared and invisible agencies are involved that spiritual insecurity arises. The spiritual insecurity that has followed in the wake of the AIDS epidemic in Africa and that has fed the new religious enthusiasms emerges from the struggle to make sense not just of the affliction wrought by the disease, but of the conflicting schemes of interpretation propounded by medical authorities, healers, and religious leaders.

The epidemic in Africa has upended established procedures for interpreting the meaning of death. Historically, African conceptions of illness and health had no place for the notion of incurable disease, which is a condition of bodily pathology identifiable in terms of definite signs and symptoms culminating inevitably in death (Comaroff 1981, Ashforth and Nattrass 2005). Illness and health were not interpreted simply as products of biological processes, but rather as outcomes of decisions by, or struggles among, spiritual entities responsible for preserving the good in human life and those agencies – human and spiritual – seeking the destruction of the individual, his family, and community. The AIDS epidemic has not only brought the painful experience of terminal illness to multitudes in sub-Saharan Africa but also their exposure on a hitherto unseen scale to bio-medical modes of explanation and the global cultures of medical science and public health policy. In recent years, moreover, the work of interpreting the nature and meaning of illness and death has become more complicated still as anti-retroviral therapies and the news of possibilities for treating AIDS become widespread.

In sum, spiritual insecurity presents distinct epistemological problems for those experiencing it, since it emerges from uncertainty, ignorance, or disagreement over how to manage relations with invisible forces. Spiritual insecurity also poses vexing problems for those who would study it. Observers of spiritual insecurity are ordinarily unable to directly access those entities with which, or with whom, those whom they study relate, particularly those of us who dwell as secular humanists and materialists on the lonely rationalist side of the ontological divide. But though I may doubt the reality of many of the entities from which emerge the dangers, doubts, and fears I am calling spiritual insecurity, the insecurity itself is real enough, as are its consequences. How, then, might it best be studied?

Interlude: what's wrong with talking about 'beliefs'?

Before outlining a framework for the study of spiritual insecurity, let me make a case against using the concept of 'belief' in this regard. Typically, matters pertaining to what I would call spiritual insecurity are treated as questions of 'belief'. Legions of social scientists have devoted oceans of ink to describing putative 'systems of belief' within which people describe these issues. For at least half a century, however, a small number of scholars – led by Robert Bellah (1970), Rodney Needham (1972), Wilfred Cantwell Smith (1977), and Byron Good (1994) – have struggled against the tide of uncritical discourse embracing the concept 'belief'. They have mostly failed. The struggle, though futile, should continue nonetheless.³

There are five reasons, at least, why we should not talk about religious 'belief' and 'beliefs' in our endeavour to understand Africans' responses to AIDS. First, when social scientists refer to 'a belief' they are typically designating some spoken utterance or written sentence as a distinct propositional statement: a unit of belief. Few writers who use the word 'belief' pause to examine what the word refers to in the particular contexts about which they deploy it in their descriptions. Fewer still bother to define it. Far too many are far too naïve about the ideological underpinnings of their distinction between knowledge and belief. The term is used, even within putatively scientific discourse, as a taken-for-granted category of analysis. 'Beliefs', that is to say, are simply treated as if they are things that actually exist in the world and merely need to be discovered in any particular context.

Use of the term ‘beliefs’, moreover, almost always occludes systematic examination of the different kinds of propositions being advocated in various types of discourse. In most usages of ‘belief’, for example, writers obliterate the distinction between propositional statements that are articulated as explicit objects of belief by persons connected to human social institutions constituted through acts of faith (think of the Nicene Creed), and propositions reconstructed by observers as if they were such (think of the ‘beliefs’ reconstructed from answers to questions in a survey). Behind this tendency lies the history of Christian dogma – not to be mistaken, note, for those bodies of ‘law’ that define adherence to other religions in the Abrahamic tradition. Dogma is a comparatively tightly organised system of propositional statements to which ‘believers’ are supposed to actively grant credence as the foundational act of ‘faith’ that makes them Christian.

Propositions to be designated ‘belief’, whether they are reconstructions by researchers of everyday conversations to resemble the form of dogma, or actual statements by real persons designating that which is to be believed, are typically distinguished from those accorded the status of ‘knowledge’, usually by virtue of the institutional framework within which they are propounded. Furthermore, the distinction between knowledge and belief leaves open a huge problem concerning ignorance: how do we categorise that which our subjects don’t know? Do they know not what to believe? (Which is not the same as not knowing what not to believe). Do they not know what they should? Do they wilfully refuse to believe what is true? Do they know (or think, or suspect, or fear) that a proposition is, or might be, true and still refuse to believe? As Murray Last pointed out long ago, we should never forget the ‘importance of knowing about not knowing’ (Last 1981).

Second, speaking of statements as “beliefs” implies that someone actually believes them. That is, that some person or persons experience an affective relation to the truth of the proposition in question – at the very least that they care, in some significant way, that the proposition be true. Very few people who write of ‘beliefs’, however, bother to examine, or produce evidence pertaining to, such affective relationships; instead, they merely imply that the meaning of a particular proposition labelled a ‘belief’ matters a lot to the person or persons who purportedly ‘hold’ it. As it happens, it is extremely difficult to demonstrate whether, and in what ways, a belief is believed even for a single individual, let alone a social collectivity. Again, the typical model implied in most discussions of ‘belief’ is that of the Christian “believer.”

Preconceptions about what it means to be a believer frequently obscure analysis of *how* people believe when they believe themselves to be believing something. When making claims about the ‘holding’ of ‘beliefs’, most observers merely reconstruct utterances as if they were elements of a dogma, or, worse, the preconceptions that purportedly underpin utterances reconstructed to resemble dogma. Few analysts ever bother to examine *how* putative believers believe, or struggle against believing, such reconstructed sets of propositions. In research on AIDS in Africa, for example, how extensive is the literature on *akrasia* of belief, the failure of the will to resist believing something a persons knows she should not believe (such as the proposition that witchcraft can cause AIDS; Ashforth 2005)? It is virtually non-existent. Rather than presuming some *thing* to exist within a person’s mind, a belief he can have and hold, it would be better, it seems to me, to listen to what people say.

Third, talk of ‘beliefs’ generally presumes that particular propositional statements exist as elements of a putative ‘system of beliefs’ in which a set of ‘beliefs’ are logically interrelated. Yet again, the implicit model here is the Western Christian phenomenon of dogma. Dogma, as it happens, was – and still is – written down. Systems of belief outside of written texts designed for such relations, and their corpus of exegetical writings, may, or may not, exist. That is an empirical question. It would be hard, I fear, for someone schooled in the ‘Western’ tradition of distinguishing tradition from modernity or the popular from the established to distinguish whether what his informant is telling him is really part of a ‘system’ of beliefs. Writers who refer to such systems and their related ‘structures of belief’, rarely bother to demonstrate the systematicity of their putative ‘system’, let alone how the existence of such a system can be determined as a product of the utterances of mere humans, blathering away as we are wont. Beyond the bounds of institutions governed by authorities entrusted with enshrining specific holy texts and ritual practices with an expectation of credence, it is extremely difficult to demonstrate the existence among ordinary people leading ordinary lives that a ‘system of belief’ exists, or describe what it is, and explain in what sense it is systematic.

Fourth, those who write and talk of ‘systems of belief’ tend to presume that this entity maps in some way, usually unspecified, onto particular individual minds, and, what turns out to be the same thing, some social collectivity treated as if it were an individual mind. Ordinarily, ‘a system of belief’ is treated as a synonym for ‘a culture’ (a concept usually defined in terms of a shared system of values, attitudes, and beliefs within some socially bounded collectivity). Social psychologists, who have dominated research in the social science of AIDS in Africa, tend to do this reflexively on account of their methodological individualism. Despite an increasing awareness of the complexity of questions of identity, however, many social researchers who should know better do the same. Anthropology, which was an enterprise built upon the promise of deciphering a collectivity’s ‘culture’ by means of a few conversations with representative members thereof, has long ago recognised the futility of the endeavour to find and describe a bounded culture (Geertz 2000). Habits, however, are hard to break. Few researchers who now bear the burden of ‘culture’ in their efforts to explain ‘behaviour’ bother to engage with the empirical question of whether the ‘belief system’ at issue really belongs to the particular collectivity under study in any meaningful sense. It is theoretically possible to do this, but difficult and expensive. Specialists in market research are making some headway in demonstrating when and how this occurs, with a view to selling products. I doubt, which is to say I do not believe, that this methodology will soon make much headway in revealing things that matter in relation to AIDS and religion in Africa.

Fifth, talk of ‘beliefs’ carries another embedded presumption that is rarely subjected to critical scrutiny or supported with empirical evidence: that the propositional statement so labelled serves as a motive to, or governs in some sense, action. Again, we are dealing with a legacy of Western Christendom in this usage of the term belief. In the universe of propositions that may be uttered, those that are presumed to matter when we talk about believing, resonate in, refer to, or emerge from something that has come to be known as the Conscience. Yet, as anyone who has tried to accurately account for the relation between what a person says and what he does will know, whether from experience in the courtroom or the bedroom, this is difficult work. Rather than presuming a connection between particular propositional

statements and actions, it seems to me, the social researcher should examine the various forms of connection between thought, talk, and action in particular contexts.

Rather than proceed with an uncritical usage of ‘belief’, then, let me stipulate a few simple rules for analysis of narrative and discourse. We should start by always seeking to specify who says what, to whom, where, when, how, and why? We should examine the ways in which narratives are constructed in order to identify common patterns and reveal the predicates underpinning their meaningfulness. Further, we should examine the statements made in narratives explaining and justifying action. We should try to identify the implicit rules underpinning the making of valid statements in conversations and debates including claims about ‘belief’. (These usually become clearer in the breach). We should examine the assumptions and predicates underpinning statements that serve as valid. And we should inquire into the conditions of plausibility governing these assumptions. Plausibility, I take to be the condition of being believable. It is far easier to demonstrate that a proposition is believable, by analysis of the context of life within which it might be stated without provoking efforts at refutation, as well as the presuppositions that logically underpin its possibility of being stated, than that it is actually ‘believed’ in some person’s putative mental state. It is also easier to demonstrate how certain propositions gain or lose plausibility than to explain why persons might have changed, or not changed, the things in which they believe.

A relational realist framework for the analysis of spiritual insecurity in Africa in the time of AIDS

Security is a relational concept. Whatever it is that we talk about when we talk about security and its absence, we are referring to a feature of relations, more specifically power relations with human persons and other entities intent on causing harm. Thus, proper analysis of conditions of security and insecurity requires broad examination of the power relations within which people live – or think they live. Where people see themselves as living in relations with invisible beings and powers, which is almost everywhere, failure to take account of these relations as social relations, rather than mere beliefs, will prevent a proper understanding of the questions of security relevant to that particular context.

For the analysis of spiritual insecurity, in Africa and elsewhere, four broad sets of relations require examination.

First, analysis must resolve questions of relations among persons as ordinarily understood in the specific context, particularly in terms of their putative access to occult powers. These powers are usually classified under the rubrics ‘witchcraft’ and ‘sorcery’ and are typically said to derive from inherent capacities, secret knowledge, or relations with invisible beings – or some combination of each. Presumptions regarding the motives of otherwise normal persons for using occult power are typically spoken of as hatred, jealousy, and the desire for illicit wealth and power. Most Africans also know a category of persons – conveniently translated as the English word ‘witch’, though known by a variety of local terms across the continent – who are deemed so devoted to the pursuit of evil through the use of supernatural powers they no longer remain truly human.

The predicament of living in a world with witches, such as I have tried to describe in my work on Soweto, can sometimes surprise those of us who have not grown up in

such places and can produce much misunderstanding. Because of witchcraft, a presumption of malice underpins community life. You must presume witches will harm you because they can. If they choose to kill you with AIDS, they might contrive by mystical means for you to contract HIV from a sex partner. If you already have AIDS and a witch wishes to kill you his task is made simpler and the crime of witchcraft will be harder to detect (which is another reason people say you should be circumspect in talking openly about the disease). They might also kill you with a man-made disease, witchcraft fabricated to look like AIDS though without traces of HIV infection. You never know. Anyone who has experienced what witches can do, will know that no one can say for sure that such things are impossible.

A central fact of life in the parts of Africa I know is that when a misfortune such as the illness unto death that is AIDS strikes, people are forced by all the weight of custom and existential dread to face the question: who is to blame? It is impossible to tell a satisfying story of death without imputing responsibility to someone. Talk of AIDS, in which blame is usually attributed either to the victim or a sexual partner, takes place within contexts shaped by older practices of attributing responsibility, notably witchcraft. AIDS discourse does not supplant witchcraft discourse in narratives of illness and death but becomes another resource in the micro-politics of suspicion and accusation. For people who need to know the 'real' reasons for an illness, however, the competing frames of interpretation provided by different types of healers can prove utterly destabilising. The advent of anti-retroviral therapy with dramatic mortality declines in some parts of the continent has changed this dynamic to some extent, though it remains to be seen what the long-term impact will be.

The AIDS epidemic in Africa has brought massive new misfortunes to families and communities where the fear of human access to supernatural occult powers is pervasive. An 'epistemological double bind', then, pervades relationships with neighbours, colleagues, and kin (Ashforth 2005). Since you can discount neither the motive (his jealousy and hatred can be deeply hidden) nor the capacity (anything is possible) of the witch, you should be distrustful of all, always. As my friend Madumo was fond of saying of life in a world with witches, it is 'exposed' (Ashforth 2000). The danger of occult assault is ever-present, though not always expected – witchcraft is almost always experienced as a surprise. Most of the time occult dangers are more or less manageable. The most successful religious movements and entrepreneurs in contemporary Africa are those promising protection from occult assault. Huge amounts of time, energy, and money, however, are invested in this business and have been for generations. In recent decades these have to a large extent been channelled into enthusiastic religious movements such as Pentecostalism.

Second, the analysis needs to properly frame questions pertaining to relations between persons and the powers inherent in substances (particularly substances such as medicines and poisons presumed to possess agency, but also inert polluting substances); images (particularly images of human persons and spiritual beings); objects (both embodying or representing invisible powers); and texts (particularly books, a sort of talismanic hybrid of image and object, containing the word of God). This is a massive field of inquiry, hugely dynamic, and I shall not begin to survey it here.⁴ Understandings of these relations in the places where I work are constantly changing, sometimes rapidly. For example, in many parts of Africa a notion of 'African Science' has become a primary frame of plausibility governing supposition about the powers of witches and sorcerers to manipulate the powers inherent in

substance in order to cause harm (Ashforth 2005). Similar presumptions are at work in the commonplace talk of traditional healing as 'science', and the related investment, particularly in post-apartheid South Africa, in demonstrating the scientific basis of supposedly 'traditional' remedies. Everyday experience of technologies such as computers, cell-phones, and the remote control have made suppositions regarding relations with powerful substances more plausible to young people, though in a new register. Science, that is to say, shows few signs of driving out superstition.

African talk about the powers in substances both harmful and health-giving should not be mistaken for a form of elementary pharmacology. Remember the story of the healer in Loliondo dispensing medicine made from the 'mugagira' tree. As he made clear in numerous interviews, the active force in the medicine was the power of God. To be effective, moreover, the decoction had to be dispensed by the healer's hand directly. The efficacy of this substance, then, is a product of relations among God, the healer, some active element in the brew, and the set of forces producing whatever it is that ails a patient. The actual bioactive properties of the substance are almost beside the point. Indeed, many healing churches omit the herbs and work solely with water and prayer.

When interpreting the ways people make sense of and manage relations with the forces they see operating in the world around them, we must be wary of presuming systematicity and stability. My experience in this field convinces me that a profusion of confusion is the norm, rather than neat and tidy 'systems of belief'. Recent decades in Africa, as elsewhere, have seen a proliferation of interpretive authorities, people claiming to know the truth about invisible forces and the ability to manage relations with them, particularly healers and religious entrepreneurs offering access to miraculous substances or holy words and images capable of delivering miraculous healing. Perhaps the most significant substance to enter the scene in recent years has been the 'ARV', a substance whose agency and modes of action is not easy to understand in any language.⁵ A popular term for ARVs has emerged recently in Malawi where they are referred to as '*maUnits*' by analogy to the ubiquitous prepaid cell phone units for sale on every street corner. Similar terminology, I suspect, can be found elsewhere. They are used, I am told, to 'top up life'.

Third, we need a better way of analysing the politics of power relations among invisible beings and between persons and invisible beings than is currently available under the rubric 'belief'. These relations can conduce to a sense of insecurity as well as being the foundation, for most people, of their sense of security in the face of invisible forces intent on harm. Ritual, for example, on which there is a massive literature in Africa as elsewhere, almost always involves communing between ordinary persons and invisible beings. Dance, trance, and the wide expanse of otherworldly out-of-body experiences make these relations seem real. Watch the trembling, shaking, shrieking, and falling that goes on during a Deliverance Service in a Born Again church, when demons are driven out and the sick cured, and you will see the bodiliness of these relations with invisible beings. Insecurity arises in this domain when people are torn between competing interpretations of the nature and intentions of invisible beings with whom they experience relations, or find themselves ignorant of how to supplicate unto spiritual powers and protect themselves from evil agencies. It can also arise when the moral nature of invisible beings with whom

people experience relationships – in all the emotional intensity and bodily presence that such being are known to dispose – is cast into doubt.

The two central questions about relations with invisible beings that AIDS confronts Africans with are: to what extent is God and other entities responsible for the suffering and death (and why has He, or they, done this?); and: how do we access the power of spiritual beings to heal the sick and protect against injury? It is a commonplace of everyday discourse throughout the continent, for example, that God is punishing Africa with AIDS (Behrend 2007). Many preachers and theologians try to teach otherwise, though with limited success (Bongmba 2007). At the same time, legions of preachers are at work proclaiming the news that God, through the Holy Spirit can perform miracles of healing (and that they, by virtue of their spiritual powers can help their followers access that power). Across the continent there is an enormous ferment of religious activity, most notably in the form of Pentecostalism (Kalu 2008), that I would argue is in large part a response to spiritual insecurity, much of which is a response to AIDS.

Religious faith, I should emphasise, is not in itself the source of the insecurity I am describing as ‘spiritual’. Spiritual insecurity, however, cannot arise in the absence of faith; it flourishes in the space between faith and doubt, for without faith there would be no relationship about which one might worry. The new religious movements of Africa are alike in their insistence of certainty in their relations with invisible beings, though they wreak havoc with older ways of managing relations with spiritual beings, and not only in the realm of the ‘traditional’ (Engelke 2010). Nowhere is this more evident than in Pentecostal preachers’ demonisation, literally, of ancestors as evil spirits and denunciation of their veneration as ‘idol worship’ (Muller and De Villiers 1987). This at a time when older missionary Christian denominations are striving to incorporate African ‘traditions’ into their rituals and theology (Bate 1995). ‘Born Agains’, it should be noted, have a similar repugnance for Catholicism’s saints. But the increasing obsession with Satan and his demons that is common across Africa, along with the enthusiasm for ‘deliverance’ that countless preachers are harvesting, brings a danger similar to that long experienced by traditional healers who faced suspicions of witchcraft: one man’s Spirit-filled miracle working pastor is another’s devil worshipping Satanist.⁶

Fourth, and finally, in order to understand the dimensions of spiritual insecurity in any given place, we need to understand relations among the internal agencies said by people there to be internal to, and constitutive of, their sense of being alive, their ‘personhood’ as it is sometimes called. Among the entities ordinarily said to be in action within the self, such as body, mind, spirit, soul, will, etc. – the list could go on – a new one has come on the scene in Africa recently: the immune system. For those of us schooled in the quaint notions of modern individualism, it can be hard to appreciate how others might understand the constituent elements of their selves as being capable of action independent of their ‘will’, or, more problematic still, how these agencies might interact with other agencies beyond the purview of a person’s perception and consciousness, let alone control. Think about dreams. Those of us accustomed to living in the dull sublunary realms of Western modernity tend to conceive of dreams as phenomena internal to the mind of an individual, products of the functioning of a brain. We tend not to think of the dream world as a domain of action wherein agents of one sort and another, such as the manifold internal essences of human personhood (of the dead as well as the living), along with spirits, demons,

deities, and what have you, interact with each other and actually do things – real things that have concrete repercussions in the waking world.⁷

I would describe relations among constitutive elements of personhood in political terms involving power relations. This ‘politics of personhood’ can produce what might be termed ‘vulnerabilities of the soul’. Vulnerability, I should mention, is not the same as insecurity. A healer who opens himself to the agency of spirits in his work of healing while certainly vulnerable, need not necessarily be experiencing spiritual insecurity. A man, who fears he has been doctored with love medicine such as *korobela*, which hijack his sexual desire and make him vulnerable to feelings of love, probably is. Vulnerability generates insecurity in the light of the presumption of malice regarding the motives of others. Love medicine, for example, when deployed by a wife against her husband can make him her slave, blind to her sexual infidelities, and thus at risk of HIV infection – or so I’ve heard men in Malawi argue. (Women, on the other hand, can argue that such stuff, known locally as *konda ine*, can protect a faithful wife from being infected by binding the husband to his home and marital bed, regardless of his will or faithless desires.)⁸

The point of this brief survey of some of the possibilities imagined in contemporary Africa as power relations from which a sense of insecurity can emerge in the context of AIDS is to underline the fundamental fact that for the vast majority of people, a sense of security derives primarily from relations with those invisible beings that are usually referred to as ‘spiritual’. Hence, the importance of understanding spiritual insecurity.

Conclusion: AIDS and religious enthusiasm

In the decades since AIDS began ravaging the continent, Africa has witnessed an efflorescence of religious enthusiasm. New Christian and Islamic movements have flourished as Africans embrace global religious organisations and export their own brand of enthusiasm to global markets. Religious entrepreneurs bearing novel doctrines and extravagant promises are everywhere to be found. Healers proliferate, marketing their ‘medicines’ with a mixture of ‘science’ and ‘spirit’. Preachers promise prosperity. On banners stretched across roads, paintings on the sides of shops and vehicles, simple signs perched atop poles or painted on rocks – anywhere, it seems, that words can be written – the landscape of the continent is littered with advertisements for salvation. Everywhere people seem obsessed with demons, witches, and occult forces. Enormous amounts of time, energy, and money are being invested in efforts to secure protection from supernatural dangers.

This efflorescence of religious enthusiasm has been roughly coterminous with the AIDS epidemic. The question this paper addresses is: how are we to understand the connection?⁹

For reasons that remain obscure, though if Darwin is any guide probably have to do with survival of the species, humans seem to have evolved a sense – we might call it a conviction – that their security depends upon agencies and entities that are sometimes described, amongst a plethora of possible terms, as supernatural, extra-human, spiritual, or invisible. Most people, in most places, to paraphrase a former senior adviser to President George W. Bush, seem not to live in ‘reality-based communities’ (Suskind 2004). Realists ignore this fact at their peril. And while a suspicion has recently emerged among a small elite of the species over the past couple

of centuries that such convictions are merely products of the human mind, a form of belief, and thus irreducibly subjective, most people throughout what we know of the history of humanity, have lived in ways that are premised upon the objectivity of these entities and the forces they embody.

Conventionally, these matters are discussed under rubric 'religion'. Such a framing, however, narrows the issue by tying it too closely to the concept of belief, and its cousin faith (Bellah 1970, Smith 1977). A better solution, this paper has argued, is to open the analysis of power relations, upon which human security ultimately depends, to include relations with other agencies and entities beyond the merely human. This is not as outlandish as it might sound.

Notes

1. Space precludes a comprehensive review of the literatures relating to healing and religion here. For a good recent survey of literature pertaining to religion, see Harri Englund's introduction to Englund (2011). And for a good recent survey of the literature on healing in Africa, see Manglos and Trinitapoli (2011).
2. It is beyond the scope of this paper to why suffering is experienced as harm. Suffice it to say that the ethnographic record of Africa, exemplified by the enormous literature on witchcraft, is replete with examples showing *that* this is the case. For a survey of this literature, see Moore and Sanders (2001).
3. Space precludes detailed critique of the large number of publications that are drawn on here. Instead I commend the reader to a single paper, which exemplifies the errors catalogued below. See Kalichman and Simbayi (2004).
4. For a more detailed elaboration, see (Ashforth 2005; Pt 2).
5. For a discussion of an effort to translate the action of ARVs into 'culturally relevant' terms, see Ashforth and Natrass (2005).
6. Nowhere is this more evident than in attitudes to the enormously successful Brazilian church the Universal Church of the Kingdom of God. See Van Wyk (2011).
7. For a classic ethnographical description of what can be accomplished in dreams, see Evans-Pritchard (1937).
8. For a study of these 'herbs' in Zimbabwe, see Goebel (2002).
9. This period has also seen major political and economic transformations in Africa such as structural adjustment and democratisation, which have also impacted on religious life, but I shall not touch on these here. For a good account of the more general field, see Ellis and Ter Haar (2004).

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