

Indigenous Languages, Performing Arts and the HIV/AIDS Pandemic

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Abstract

This article looks at HIV/AIDS pandemic in Kenya. It shows that different players including the government, business establishments and the non-profit organizations have worked hard to fight the pandemic. Various steps have been taken to respond to the pandemic including policy formulation and implementation, intergovernmental collaboration, coordination, and sensitization through the media.

While we appreciate the wide range of interventions, the author takes the view that there is more room for expanding the battlefield against the scourge. He contends that performing arts constitutes a very effective weapon which should continuously used in war against HIV/AIDS pandemic. Finally, he argues that using Kiswahili and other indigenous languages in performing arts is likely to produce better results.

Introduction

This article is intended to be a contribution towards the efforts being made to roll back the ravages of HIV/AIDS in Kenya. It makes observations on the current state of the pandemic in the country as a way of showing the enormity of the problem before us. In view of the fact that the negative impact of HIV/AIDS is all encompassing, the article does not pretend to give a comprehensive audit of the multi-faceted ramifications of HIV/AIDS. Its scope and thrust does not call for such. Rather, the article highlights the magnitude of scourge as evidenced by the widespread mortality caused by the pandemic as well as some of the implications of the mortality on the country.

The article then looks at the steps taken so far in an effort to arrest the situation. It is shown that different players including the government, business establishments and the non-profit sector have used a wide range of strategies against the pandemic. The article highlights the spectrum of strategies put in place to respond to the scourge including a policy framework, implementation mechanisms and intra-government collaboration as well as the media used by the various players.

Finally, while fully appreciating the interventions undertaken by the government and other players, the article takes the view that there is more room for expanding the battlefield against HIV/AIDS. It is observed that

performing arts are a very effective mode of communication. Further, it is noted that most Kenyans, especially in the rural areas, communicate mainly in Kiswahili and other indigenous languages. It is argued, therefore, that employing performing arts in indigenous languages as an intervention against HIV/AIDS would be a worthwhile undertaking.

The State of the Pandemic

The first AIDS case in Kenya was observed in the year 1984. By 1995 63,179 cases had been reported. In 2001, it was estimated that the country had about 2.2 million HIV/AIDS- infected persons. Moreover, by same year, 1.5 million Kenyans had already lost their lives through the pandemic ¹

system consists of 42 clinics in government and mission health facilities selected to represent the different groups, regions, and rural and urban populations in the country. For three months each year since 1990, pregnant women registering in their first visit to the Ante-Natal Clinic (ANC) are anonymously tested for HIV and the results analysed by the National AIDS/STD Control Programme (NASCOP)

The *Preliminary Report of the Kenya Demographic and Health Survey of 2003* indicates that HIV/AIDS prevalence in Kenya has in the past been exaggerated. However, the survey “confirms that the Kenya has a severe, generalized HIV epidemic”.² This situation is borne out by the statistics for year 2003 shown in the following two tables from a document provided by National AIDS and STDs Control Programme (NASCOP). Table 1 gives information on the infections of HIV/AIDS among people in the 15-49 years age group whereas Table 2 shows prevalence rates.³

Table 1: People infected with HIV/AIDS within the 15-49 years age bracket:

Province	Total 15-49	Rural Infected	Urban Infected	Total Infected
Central	2,002,932	81,962	64,581	146,542
Coast	1,404,333	29,867	75,272	105,139
Eastern	2,378,760	91,103	49,338	140,442
Nairobi	1,436,914	0	172,430	172,430
North Eastern	541,673	16,189	2,739	18,928
Nyanza	2,203,503	246,282	198,543	444,825
Rift Valley	3,384,911	128,880	48,981	177,861
Western	1,694,571	89,990	60,014	150,004

Table 2: HIV/AIDS prevalence rates per province and for the country:

Province	Rural Province	Urban	Total
Nairobi		12.0%	12.0%
Central	6.5%	8.6%	7.3%
Coast	4.0%	11.4%	7.5%
Eastern	5.4%	7.0%	5.9%
North Eastern	4.0%	2.0%	3.5%
Nyanza	18.9%	22.0%	29.2%
Rift Valley	4.7%	7.5%	5.3%
Western	7.8%	11.0%	8.9%
TOTAL	7.4%	11.6%	9.0%

In a nutshell, Kenya has lost many people through HIV/AIDS pandemic. Many more have been affected by way of losing breadwinners, spouses, relatives, guardians, colleagues, neighbors, friends and acquaintances. It has been a truly chilling experience for the country. Those who are still alive have, at one time or another, attended a funeral made a contribution in a funeral expenses fundraiser or signed a condolence book for an AIDS victim. Many Kenyans know at least one person who has died from HIV/AIDS-related complications. They do not need to search far. We need only look at our workplace, village, church, mosque, cooperative society, school or shopping center. For the not-so-lucky, HIV/AIDS-related death has paid them one or more visits right in the home. Indeed, it is not surprising to hear of a family that has lost five or more members to the pandemic. This writer knows one such family in his village.

Besides taking away many able-bodied people from the pool of unskilled but economically vital labour force, the pandemic has also robbed the country of highly skilled individuals such as academics, engineers, managers, economists, doctors, nurses, teachers and military and police personnel. Moreover, the country has witnessed the demise of top administrators, politicians and entrepreneurs.

The danger posed to the national economy by HIV/AIDS is enormous. Commenting on the issue, the ministry of Health publication titled *AIDS in Kenya* (MOH, 2001) observes that:

AIDS has the potential to create a severe economic impact in Kenya. It causes a reduction in the size and experience of the labour force, increases health care expenditure, raises the cost of labour, and reduces savings and investments. It is different from most other diseases because it strikes people in the most productive age groups and is essentially 100% fatal. The economic effect of AIDS will be first felt by individuals

*and their families then will ripple outwards to firms and businesses and the macroeconomy.*⁴

One of the major consequences of the HIV/AIDS scourge in the country is the rise in the number of orphans. Once orphaned by AIDS many children drop out of school for lack of resources to buy uniform and other items not provided for under the free primary education. In some cases AIDS orphans discontinue schooling to take care of their young siblings.

Dropping out of school for the AIDS orphans has serious implications for both the children and the country as a whole. Instead of gaining knowledge and skills through the education system, their intellectual growth and a bright future are compromised. Furthermore, a big pool of illiterate, unemployable and frustrated people could have serious implications on the country's security.

Interventions against the Pandemic

In 1987, three years after the first HIV/AIDS case had been detected in country, the Government of Kenya formed the National AIDS and STDs Control Programme (NAS COP) as a Department within the Ministry of Health so as to galvanize the efforts of the various sectors involved in AIDS prevention and control. However, bureaucracy at the Ministry of Health was such a bottleneck as to make NAS COP ineffective. Moreover, donor funding could not be channeled through the organization. Such funding could only be given through the Ministry of Health where its disbursement was slow owing to the bureaucracy.⁵

Due to devastation visited on the country by the HIV/AIDS scourge, the Government has recognized it as a serious national concern. As a response to the problem, the government published the Sessional Paper No. 4 on AIDS in Kenya to act as a policy guidelines in the fight against the pandemic in 1997. In 1999, Daniel arap Moi, the former President of the Republic of Kenya, declared HIV/AIDS a national disaster. In making the declaration, he noted that:

AIDS is not just a serious threat to our social and economic development; it is a real threat to our very existence.... AIDS has reduced many families to the status of beggarsno family remains untouched by the suffering and death caused by AIDS....⁶

To overcome the bottlenecks impeding on the effectiveness of NAS COP, the Government formed another organization called the National AIDS Control Council (NACC) to coordinate HIV/AIDS prevention and control by, among others, formulating policies and establishing institutional framework for a multi-sectoral approach in the fight against pandemic. Unlike the

NASCOP, NACC was intended to be more autonomous (although still based within the Ministry of Health) and authoritative in receiving and funds from the government, private sector and international donor organizations.

Kenyans voted in a new government in the 2002 general election. The new government took over power in the January of the following year. Fortunately, the political will to fight the HIV/AIDS pandemic did not wane with the change of guard. Indeed, it grew stronger. The new President declared a total war on the scourge and went on to form a Cabinet AIDS Committee. According to the NACC, since the president's declaration and the formation of the Cabinet AIDS Committee, "the war on AIDS has taken a dramatic dimension and more emphasis has been laid on the scaling up of advocacy and the formulation of AIDS-related legislation by involving Members of Parliament in the fight against HIV/AIDS"⁷

To get a clear picture of the HIV prevalence in Kenya so as to evaluate the scope of AIDS epidemic in the country, the Government established a sentinel surveillance system. The Preliminary Report of the Kenya Demographic and Health Survey (2003), observes that:

An accurate estimation of HIV prevalence is necessary to assess the scope of the AIDS epidemic in Kenya and monitor its trend. In Kenya, as in most of the sub-Saharan Africa, national HIV prevalence estimates have been derived primarily from sentinel surveillance in pregnant women. Currently, the national sentinel surveillance system consists of 42 clinics in government and mission health facilities selected to represent the different groups, regions, and rural and urban populations in the country. For three months each year since 1990, pregnant women registering in their first visit to the Ante-Natal Clinic (ANC) are anonymously tested for HIV and the results analyzed by the National AIDS/STD Control Programme (NASCOP).

The National AIDS Control Council, together with other anti-HIV/AIDS initiatives, both in the public and the private sectors, have done a commendable job. Much of the efforts have been geared towards achieving behavior change among the people as well as promoting the use of the condoms as a tool for safe sex.

The campaign against HIV/AIDS has been carried out through a variety of media. Foremost in the campaign have been electronic and print media including the radio, television, newspapers and magazines. The radio and television have aired well-designed programmes to sensitize people on HIV/AIDS. Newspapers and magazines have carried features and other ar-

ticles with a view to highlighting the nature and the magnitude of the pandemic. Some of the media have provided forums for personal testimonies from HIV- positive people as well as from Aids patients. Besides electronic and print media, billboards, some of them in indigenous languages, have been erected to drum home the HIV/AIDS message. Occasionally, rallies and demonstrations have also been held for the same purpose.

One of the most important interventions against HIV/AIDS has been the provision of cheaper anti-retroviral drugs. For a long time after the HIV/AIDS became a reality in the country, only the very rich could afford life-prolonging medical care. Concerted efforts by the Government have changed that scenario. HIV-positive persons can now get anti-retroviral drugs which, although still expensive relative to the purchasing power of the average Kenyan, are much cheaper compared to the prices of the yesteryears. The changed situation has helped many HIV-positive persons to either delay the advent of full-blown AIDS or slow down its devastation.

Another step taken by the Government in its efforts to contain HIV/AIDS is the setting up of Voluntary Counseling and Testing (VCT) centers. The centers have been widely publicized through billboards, radio, television and the print media. Their purpose is to encourage members of the public to know their HIV status so as to better plan their lives. Unlike testing for HIV status in the past, testing in VCT centers is preceded by counseling. The individual voluntarily presenting himself/herself for testing is counseled on the implications of the results. The individual is therefore psychologically ready for the outcome of test. Moreover, the individual is given tips on how to live positively whether or not they turn out to be HIV positive. For those who are diagnosed as HIV- positive, part of the positive living includes avoiding self-pity and bitterness with oneself as well as with society. One of the societal benefits of a person so-counseled is that he/she is not likely to go on a offensive revenge against society.

Besides the strategies highlighted above, different art forms have also been used to combat the HIV/AIDS pandemic. These art forms include plays, skits, puppetry, verses, songs, dramatized dances and narratives. The main forum for the campaign against HIV/AIDS through drama has been the Kenya Schools and Colleges Drama Festival organized by the Ministry of Education, Science and Technology. The festival is held every year and takes place at the zonal, district, provincial and national levels. A special award is set aside for a secondary school play, poem, narrative or dramatized dance whose theme on HIV/AIDS scores the highest mark in the competition. A similar arrangement obtains in the colleges and primary school sections of the festival. The Kenya Music Festival, also organized by the same Ministry of Education, organizes music, poetry and dances in a forum where efforts are made to use the arts to fight HIV/AIDS. Another festival of arts playing a

similar role is the Kenya Music and Cultural Festival. Like the other two festivals, this festival is annual with participants from all over the country. It is organized by the Ministry of Culture, Gender and Sports.

The organizers of the three festivals publicize them through the mass media especially for the national level stage. However, whereas a sizeable section of the public might learn about the venue and the dates for the festivals, no special efforts are made to indicate, through the mass media, when the items on HIV/AIDS will be on the stage. Such information would be important in view of the fact that each of the festivals has a large number of entries. Moreover, the Kenya Schools and Colleges Drama Festival as well as the Kenya Music Festival last for more than a week. Publicizing in the mass media the days and the time when items on HIV/AIDS are to be staged would be beneficial to those members of the public who do not have the time or the wish to attend an entire festival.

Some non-governmental organizations have also used arts to campaign against HIV/AIDS. They have also experimented with the use of puppetry and organized performing arts festivals consisting of plays, verses, dances and narratives.

Combating HIV/AIDS through Performing Arts in Indigenous Languages

The use of performing arts in the campaign against HIV/AIDS has a lot potential to make an impact. This mode of communication should be expanded and intensified at all levels of the education system. For instance, with tact, HIV/AIDS messages can be communicated to children in the pre-unit and lower primary classes. Such messages can be carefully packaged in narratives and dancing games. At the upper primary classes, recited, chanted and sung verses as well as narratives and simple but carefully crafted drama can be effective media for sensitizing the children on the dangers of reckless experimentation with life. The use of performing arts is especially important for children in these age brackets. Art will probably catch their attention much more than posters, newspaper articles and radio and television programs which, unfortunately, rarely target children. Except in urban schools where English is used as a medium of instruction at the lower echelons of education, indigenous languages of the school localities should be used in the ant-HIV/AIDS performing arts.

Besides expanding the role of performing arts in the fight against HIV/AIDS pandemic in the education system, we should also make equally determined efforts to use the same tools to save the general population from the scourge. We can achieve good results by using performing arts to sensitize urban and rural dwellers on the pandemic. Moreover, in some rural areas

of this country, HIV/AIDS is shrouded in myths. For instance, in some communities the complications and deaths arising from HIV/AIDS and the related opportunistic diseases are treated as a curse. They are therefore not willing to take the advice of experts seriously. Performing acts can play a crucial role in demystifying the scourge. This can be done by using art forms such as drama deep in our rural villages.

As we have indicated above, most Kenyans communicate in indigenous languages. This is especially so in the rural areas. Therefore, the best way to achieve good results in the campaign against HIV/AIDS in the rural areas is to employ performing arts using the various local languages as communication tools. In other words, we should use ethnic languages for drama, story-telling, verses and songs.

Drama for the campaign against HIV/AIDS should be as varied as possible. Players can use conventional theatre complete with well scripted plays and skits. Already a number of scripts have been written on the theme of HIV/AIDS. Many of these scripts have been written for the festivals and especially for Kenya Schools and Colleges Drama Festival. These scripts can be translated into indigenous languages and used by grassroots players in their local areas. Original scripts can also be developed in indigenous languages.

Besides scripted drama, players can also improvise plays. The appeal of improvised drama has been demonstrated by street artists in Nairobi. Nyengese's group provides a good example of the power of improvisation in theatre. The late Nyengese and his co-actors would appear on a Nairobi street dressed in comical costumes and start their improvised act. Within a short while, they would be surrounded by a crowd of enthusiastic onlookers. In turn, the presence of the crowd would arouse the curiosity of passers-by who would also join the crowd to find why people are gathered. Such crowds would be characterized by keenness, laughter and enthusiasm.

There are potential performing artists in practically every village, market, hamlet and town. Such people are to be found in church and mosque congregations, self-help groups, youth organizations and welfare associations. Their talents can be harnessed for the campaign against HIV/AIDS. Moreover, members of the local communities, especially the youth, can also be recruited and trained, for instance, in basic theatre skills so that they perform in the local languages plays and skits with the HIV/AIDS theme. Reaching out to local populations using local talent and local idiom would be a sure way of striking the right chord in the hearts of the target audiences.

The local theatre troupes need not worry much if their localities do not have social halls in which to perform. With good public relations, the troupes can get permission to use churches, mosque compounds and school halls or classrooms when such facilities are free. Moreover, the local players

can also utilize open spaces such as football fields, roadsides, the market-squares and the school playgrounds.

Besides using drama, the local performing artists can also utilize narratives with a HIV/AIDS theme. The Kenya Schools and Colleges Drama Festival has given story-telling a new lease of life. In the festival, the narrators strive for good pronunciation, clear enunciation, powerful voice projection, effective eye-contact, strong stage presence and credible stage movement. When they utilize these theatrical tools effectively, the impact of the narrative on the audience is tremendous. This is especially so when the narrative has a strong story-line as well as a topical and relevant theme. And what can be topical and relevant than a scourge that is said to be killing 700 hundred Kenyans every day? What can be more relevant than a pandemic that has seen practically everybody loose a sibling, a child, a parent, an in-law, a neighbor or an acquaintance? Kenyans are greatly perturbed by HIV/AIDS and narratives on the problem will be enthusiastically received especially if they are rendered in a home-grown idiom.

Narratives on HIV/AIDS can fuse the past and the present for effective communication. For instance, they can employ familiar characters such as Ogre, Hare and Tortoise. There is already a strong foundation on which to build. Ogre, for instance, is a supper villain in many Kenyan traditional narratives. The character has tricked many a young person. For the purposes of illustration, let us look at a possible scenario in a traditional Ogre narrative. A young woman meets what she considers to be the most handsome man ever born. She reports her marvelous discovery to her parents. In their wisdom, the parents advise her not to have strong feelings for a stranger. In her naivety, not only does the young woman feel very strongly for the stranger but, to the chagrin of the parents, she insists on marrying him the same day. When the youthful newly-wed reach the bridegroom's house the young woman's eye catches a glimpse of what looks like a human skull at a corner of the bed. A closer scrutiny reveals a stalk of other human bones. As she turns around trembling with fear, she does not find her handsome groom but a horrendous monster. Death stares her in the face. Luckily, with the assistance of one her more intelligent sisters or cousins who has been following the bride and the groom with the intention of saving the former, the Ogre is tricked and the young woman escapes from the impending death. Accompanied by her more intelligent sister or cousin, the foolish young woman returns to her parents much wiser and determined to be less obstinate in future.

Narratives of this nature can be a precious resource in our campaign against HIV/AIDS. Metaphorically, every sexually attractive woman, every sexually appealing man, is a potential Ogre, unless she or he is a very faithful girlfriend or boyfriend, wife or husband. Every thought of casual sex is a result of the dangerous machination of Ogre. But if we do not succumb – we

need not die! The good old narrative can teach us, in our own indigenous languages, how to spot the skull and other human bones in Ogre's house before we throw ourselves into the brutal jaws of death.

Poetry is another art form, which can be used effectively in the campaign against HIV/Aids. Poems in indigenous languages can be recited, chanted, sung or dramatized. Besides other compositional devices, such poems should use powerful metaphors and similes, emotive imagery strong symbolism and locally recognizable allusions. Moreover, it should make generous use of local proverbs, sayings and other forms of communal wisdom.

Songs and music are other art forms that we can use in our war against HIV/AIDS. Traditionally, musicians played an extremely important role in educating individuals in the community. They did this by praising role models, admonishing social misfits and warning potential wrongdoers. Moreover, they ridiculed foolish behavior and give accolades to the wise. Singers in the villages, church and school choirs well as wedding and other forms of entertainment should be brought on board to pass across messages on HIV/AIDS.

We have already noted with appreciation the role played by the electronic and print media in the fight against HIV/AIDS. Use of these media is not mutually exclusive from the strategies advocated in this article. On the contrary, electronic media can serve as the conduits for the campaign against HIV/AIDS using indigenous languages. The Kenya Broadcasting Corporation has a short-wave transmission for indigenous languages. Recently, the Corporation launched its FM radio station called *Coro FM*. Besides the Kenya Broadcasting Corporation, private companies have also set up FM radio stations. Some of these stations either broadcast wholly in indigenous languages or have an indigenous languages component. Notable among these stations are Kameme FM, Mulembe and Ramogi. Such stations should be exploited fully to communicate messages on HIV/AIDS using indigenous languages. The messages can be passed across by way of interviews with medics and other specialists, talk shows, call-in question and answer programmes and testimonies from HIV-positive people as well as Aids patients. Poems, songs, proverbs, sayings and riddles relevant to the HIV/AIDS pandemic can be interspersed with such programmes to reinforce the messages.

Indigenous Kenyan languages may not have the capacity to effectively handle discourse in modern science and technology. To give them that capacity, it would require a lot of linguistic engineering. However, they do have a very rich idiom for day-to-day communication. Local artists using local languages in the campaign against HIV/AIDS can and should utilize the rich idiom of these languages.

Let me illustrate this rich idiom using two examples, one from Kitharaka and the other from Kiswahili. One day, a Matatu in which I was travel-

ing to my rural home in Tharaka made a stop-over at a place called Marimanti Market in Tharaka. Passengers headed for destinations beyond Marimanti Market alighted from the Matatu. And then it happened. A man called out to another man. Then in Kitharaka he asked him: "Ngakugurira ikara waria?." The English equivalent of the utterance is "If I were to buy an ember, would you eat it?"

Several years later, I have not forgotten the utterance at Marimanti Market. It hit me hard with its sophistication of artistry, harshness of insight and casualness of delivery. An ember (or a burning piece of charcoal) has the attractive color of something edible and delicious. It reminds one of a succulent ripe fruit. But all that is deception. An ember is hot and dangerous. It can burn and inflict serious injuries. Indeed, if thrown into the throat, it could kill.

The man who made the utterance at Marimanti Market was drawing a parallel between an ember and casual sex. The comparison between the two is brilliant. The two share a number of crucial attributes. Like the ember, casual sex is appealing. But, through the fire of sexually transmitted diseases casual sex, especially the type that can be sold and bought, can burn and inflict serious injuries. And when the ember, hot with the HIV, is thrown into the throat it kills.

The man at Marimanti Market was jokingly asking his friend "If I were to pay a prostitute for her services, would you go to bed with her?" In uttering the joke, the man made a most insightful commentary on the connection between the dangerous deception of the ember and the damning allure of casual sex especially in the era of the HIV/AIDS pandemic. To achieve this feat, the man ingeniously drew on the rich Kitharaka idiom.

The second illustration of the richness of indigenous languages comes from Kiswahili. The language has a proverb that says: "*Afadhali pazia kuliko bendera*" The proverb translates roughly as: "*A curtain is better than a flag*". The proverb makes an apt statement on the cause-effect connection between an individual's loose morals and his or her predicament.

The curtain maintains a non-adventurous and an honorable life in the house. Unlike the curtain, the flag does not hesitate to play with the wind whenever the wind so demands. Whatever direction the wind dictates, the curtain does not suppress the urge to go along with the wind. As a result of its outgoing behavior, the flag wears out and tears long before the curtain does. Unlike the curtain, the flag suffers misery due to its adventurous lifestyle. And so does a man or a woman who goes along with the wind of immorality whenever lust comes calling.

Other indigenous Kenyan languages have similarly rich idioms in the form of sayings, proverbs, myths, legends and folk songs. This precious her-

itage of rich idiom in the country can be effectively used by performing artists in the efforts to roll back the ominous cloud of HIV/AIDS.

Conclusion

This article has shown that Kenya has indeed a serious national crisis in the form of the HIV/AIDS pandemic. We have cited authoritative literature including statistics to give a vivid picture of a gruesome situation that goes far beyond the realm of health to threaten the very sustainability of the nation.

We have highlighted the various interventions that have been put in place by both the state and non-governmental players. Whereas we fully appreciate and commend the strategies currently in use against the pandemic, we have nevertheless contented that there is room to broaden the theatre of operation in our war against HIV/AIDS. We have also argued that indigenous languages are an important resource and that the resource should be used to open new battlefronts in our struggle against the scourge of HIV/AIDS.

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Footnotes

¹ MOH *Aids in Kenya, Sixth edition, 2001*

² *The Preliminary Report of the Kenya Demographic and Health survey, 2003*

³ NASCOP gave the statistics without indicating the document from which they were taken.

⁴ MOH *Aids in Kenya, Sixth Edition, 2001*

⁵ Ibid.

⁶ Part of the former President Daniel arap Moi's speech delivered to Members of Parliament in Mombasa on November 25, 1999. Quoted from *Aids in Kenya, Sixth Edition*

⁷ Prof. Miriam Were, Chairperson, National Aids Control Council