

## A divisive disease

### Clashing treatments for HIV/AIDS in Swahili literature

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The aim of this paper is to illustrate the historical evolution of the “clashes between epistemes in relation to the treatment of illness,” which characterize Swahili literary genres on HIV/AIDS (Nicolini 2022) through an exploration of Swahili novels. Therefore, I will investigate the epistemologies of a pandemic both analytically, by investigating both the knowledge of HIV/AIDS and the plural ways of treatment involved, as well as aesthetically and linguistically, by examining the metaphorical doubles of HIV/AIDS. Moreover, I will compare the metaphorical doubles of HIV/AIDS in Swahili literature to the metaphors in Anglophone literature from East Africa. Finally, I will conclude the study with a glance at the recent Covid-19 pandemic. The clash, between modern medicine and non-scientific knowledge(-s) in relation to the treatment of illnesses, seems also to be a continuous feature in the contemporary discussions dealing with Covid-19 circulating in the social media.

**Keywords:** treatment of illnesses; pandemic; traditional healing; witchcraft; metaphorical doubles; Swahili literature; HIV/AIDS; Covid-19; Afrophone philosophies; epistemologies

### 1. Introduction<sup>1</sup>

This paper examines and explores plural epistemologies of a pandemic aiming to demonstrate how both the topic of illness and the heterogeneous ways of treatment manifest themselves to be a field of “clash of epistemes,”<sup>2</sup> which is illustrated through Swahili literature on HIV/AIDS (Nicolini 2022).

HIV/AIDS in Swahili VVU/UKIMWI (*Virusi Vya UKIMWI* ‘the virus of AIDS:’ *Ukosefu wa Kinga Mwilini* ‘the lack of body defences’) is only the scientific, but not the sole, definition for identifying this illness,

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<sup>1</sup> I presented this paper originally on the occasion of an invited lecture in the course *Literary Studies/ African Literatures in Context: African Literature in the Context of a Pandemic* (AY 2021/22) led by Prof. Alena Rettová, whom I acknowledge, University of Bayreuth, online lecture due to Covid-19 (15-12-2021).

<sup>2</sup> Plural knowledge systems.

which was firstly officially reported in the Kagera region, in the north-western part of the country, at the Tanzanian-Ugandan borders, in 1983.

Since the beginning of the pandemic in the country, local socio-cultural interpretations and traditional ways of healing this new mysterious ailment have been clashing with modern biomedical approaches and scientific answers. As a consequence, Swahili literature reacted immediately by producing oral poetries dealing with the new health issue (Mutembei 2001; 2009). Subsequently, other literary genres have been discussing the topic from multiple viewpoints (Mutembei 2011a, b; 2015).

In this article, I will investigate especially the literary medium of Swahili novels on HIV/AIDS to isolate both the relevant treatments for AIDS described, and the metaphorical representations of HIV/AIDS triggered. In Swahili literature, the novelistic genre has been dealing with the topic of illness and its treatment since the ethnographic novellas, such as Banzi's (1972) and Kitereza's (1980) novels, describing the powers of traditional healers against sterility, barrenness and common diseases (Garnier 2013) as well as the first Swahili novels such as Shaaban Robert's *Kufikirika* ('Thinkable,' 1967) that also deals with infertility by intermingling the scientific with the supernatural.

Therefore, in my first case study I will analyse four novels on HIV/AIDS: *Kisiki Kikavu* ('The Dry Stump,' Mutembei 2005), *Firauni* ('The Debauchee,' Mauya 2017), *Ua La Faraja* ('The Flower of Consolation,' Mkufya 2004) and *Kuwa Kwa Maua* ('The Existence of Flowers,' Mkufya 2019), by observing analytically the different types of treatment involved in the narratives. Subsequently, in my second case study, I will analyse HIV/AIDS stylistically through its doubles, which are the metaphorical expressions through which it is conceptualised, by establishing a comparison between fictions written in both Swahili and English.

Finally, I will look at the recent evolution of the "clash between epistemes in relation to the treatment of illness" through contemporary literature and current discussion dealing with Covid-19, which circulate in the social media (Nicolini 2021a).

## 2. Some divergent theories about HIV/AIDS in Tanzania

In this review of literature, I draw from socio-anthropological scholarship upon which I have built my literary analysis. A preliminary remark to start with is that in East Africa once scientific and biomedical explanations fail to supply all the answers,<sup>3</sup> supernatural explanations and traditional healing

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<sup>3</sup> Premised that scepticism towards scientific and biomedical explanations of illness is not an African prerogative, such an example is in the Western anti-vaccination movements occurring during the current age of Covid-19. In the East African

knowledge(-s) intervene to support peoples' causes and their struggles. Indeed, the resistance of "traditional medicine" (Meneses 2007: 352) is part of the "African struggles for epistemic freedom" (Ndlovu-Gatsheni 2018: 1) consisting of "provincializing Europe while deprovincializing Africa" (Ndlovu-Gatsheni 2018: 3). Therefore, I will confront in a provocative way two diverse responses to HIV/AIDS: traditional healing and modern medicine, with the objectives not only to demonstrate that the effective resolution is multifaceted, but also to overcome binary rivalries, by investigating how contrasting facets intermingle in literature.

### 2.1. Socio-cultural interpretations

"She was bewitched and caught an illness similar to AIDS" (Mshana *et al.* 2006: 45). This is one of the most popular expressions circulating in everyday speech about HIV/AIDS in Tanzania to explain the causes of sexually transmitted diseases. For example, *Lusumbo*, a "witchcraft-induced illness" is known as the epidemic that preceded AIDS (Mshana *et al.* 2006: 54). Particularly when sexual customs established by the ancestors are infringed, the ancestral spirits, disapproving of their descendants' behaviour, leave them without their protection and exposed to all kinds of malignant assaults (Mshana *et al.* 2006: 47).

Among the heterogeneous African cultures, in Tanzanian culture, the aetiology of illness is commonly explained through the witchcraft paradigm, which means a bewitchment, or an evil spirit thrown by a jealous witch (*mchawi*), as well as curses or malevolent forces sent as a punishment for the breaching of cultural norms and/or a violation of sexual taboos (Mshana *et al.* 2006; Lugalla *et al.* 2004). In other words, the illness's aetiology means an "aggression" diagnosed by a traditional healer (*mganga wa jadi*): the one who is capable of identifying the type of aggressor. The aggression can be diagnosed as being either a witch's curse that symbolises the result of a conflict in interpersonal relationships, or possession by evil spirits that represents a conflict with the ancestors and their rules (Hountondji 1997: 28).

The witchcraft theory includes the interactions of "human, super-human and non-human entities" (Ashforth 2002: 127) as a concatenation of casualties (Sogolo 2005). Since Evans-Pritchard's clear-cut distinction between witchcraft and sorcery<sup>4</sup> (1976) seems to have been overcome, in

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context modern medicine is often associated with the Western centring modernity imposed during colonial times that clashes with local traditional healing practices.

<sup>4</sup> In Swahili *uchawi* or *ulozi* ('witchcraft') and *uramli* or *sihiri* ('sorcery' is the malicious creation of harmful organic substances) (Kirusulia 2017: 366).

contemporary practice the concept of witchcraft incorporates sorcery practices as well, and thus a witch is someone who crafts harms through the interactions of in-born powers, supernatural-spiritual interventions and manufactured materials (Ashforth 2002: 126; Moore and Sanders 2001). Nevertheless, the phenomenon of *uchawi* (witchcraft) is made up of both the individual's mystical powers to harm and do evil as well as anti-witchcraft medicinal powers (*uganga*<sup>5</sup>) to counteract the craft of the witches (Abrahams 1994: 9-10, 23).

Witchcraft belief also implies a traditional epistemology of healing or, better say, the exercise of a “moral power” (Stroeken 2012) to either healing or harming as well as saving or convicting. Indeed, witchcraft is an aetiology as well as divination is a diagnostic practice and a treatment for illnesses. In fact, the invasion by supernatural evil spirits “thrown” by an envious person or a curse crafted by a witch (*mchawi*) can be both diagnosed and expelled by a diviner/healer (*mganga*), who, supported by ancestral spirits, triggers a self-healing treatment that consists in a synesthetic shift of sensory experiences (Stroeken 2012; 2017a: 165-166).

Illnesses and “maladies,” as Langwick (2011) translates the Swahili concept of *ugonjwa*, can be classified into the three following categories: “maladies of God,” which correspond to biomedical diseases and cannot be prevented; “maladies of the person,” which result from witchcraft and can be prevented by protective practices and cured by healers; and “maladies of *mashetani*” (demons), which result from run-ins with devilish non-human actors and in some cases can be prevented and cured by healers (Langwick 2011: 151 - 231). Likewise, HIV/AIDS can be caused by God (*UKIMWI wa Mungu*); by sexual relationships (*UKIMWI wa kawaida*); and by sorcery and witchcraft (*UKIMWI wa mazingira ya kichawi*) (Olsen and Sargent 2017: 5).

Moreover, different kinds of non-human actants (spirits and disembodied entities) come into play, such as the Islamic spirits of *majini* (djinnns), benevolent or malignant creatures of this world; *mashetani*, evil spirits and dangerous demons who invade a person; *mizimu*, spirits of the ancestors; and *mahoka*, ancestral shades, who know medicine and help the healers (Langwick 2011: 21). Therefore, illness, which can be caused by biological sources, or by human or “non-human actants” (Langwick 2011: 21), can be prevented by either restoring relationships and avoiding conflicts (Hountondji 1997) or establishing natural protective body boundaries.

HIV/AIDS is a complex of diseases manifesting themselves through a multiplicity of symptoms: the immune systems of the body collapse, the psychological status falters, and finally the reproductive capacities of human species are seriously affected. Therefore, this psychophysical turmoil is clearly

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<sup>5</sup> The concept of *uganga* includes the practice of healing, traditional medicine and magic (Acquaviva 2018: 145-146).

experienced as a fight against an invisible supernatural power (Ashforth 2002) or a “sorcerer at work” (Rödlach 2006: 55). Witchcraft theory not only provides a convincing explanation anchored in local beliefs for HIV/AIDS, but it also makes AIDS treatable, offering the possibility of being healed by healers’ interventions and improving health conditions when hospitals fail (Rödlach 2006; Stroeken 2017a).

Particularly, the transmission of HIV/AIDS is represented through three main formulas: firstly, a bewitchment (*uchawi*) accomplished by jealous female witches against wealthy men; secondly, malicious spirits such as *majini*, oversexed supernatural creatures who, controlled by a witch, force into illicit sexual relations their victims; and thirdly, a punishment from ancestral spirits, who castigate people for their neglect of traditions (Mutembei 2009: 36-37; Hasu 1999: 410-411).

The supernatural-spiritual ontologies of ailing or healing, which can all be thrown by witches and expelled by healers, are of multiple kinds; for example, “alien spirits” who eat human flesh and blood (Hasu 1999: 430), or men-eating cannibals resurrected by a witch to eat people (*abali wa wantu*, Behrend 2007: 41). There are also, more typical spirits along the Swahili coasts such as *majini*, *mashetani* and *mapepo* (Giles 1999; 1995; 2018; Dilger 2007). Certain *pepo* spirits embody immoral behaviours (adultery and fornication); whereas, others embody chronic diseases (HIV/AIDS, epilepsy, cancer) (Dilger 2007: 68).

In addition to them, the *popobawa*, a shapeshifter evil spirit who, gifted with abnormally large sexual organs, sodomises both male (homosexuality) and female (adultery) victims, is typical in the Zanzibari legends (Thompson 2017).

Conversely, *eyembe/mahembe*, popular in the Haya and Luganda traditions, are animal horns used as divinatory objects that metonymically refer to the spirits inhabiting them (Mutembei 2001). Divinatory spirits can be consulted through the horns by diviners to heal people, or malicious djinns and vampire spirits can be dispatched to harm people through witches blowing inside the horns (Reynolds-Whyte 1997: 61-64). Vampire spirits in this category suck human blood, condemning the victims to a slow death such as by HIV /AIDS (Mutembei 2001: 117).

Furthermore, a common feature in many African cultures is what I call hereditary generational curses, which implies that those who do not respect the ritual prescriptions and taboos are castigated according to a sort of “punitive theology” (Trinitapoli and Weinreb 2012: 5). In other words, the divine judgement on misdeeds, moral transgressions, and sins, in the form of illness, misfortune and death, falls upon entire families, through specific curses such as *Chira*, in the Luo culture (Dilger 2008; 2009; Hussein 1988), and *Bakuntumile*, in the Haya culture (Mutembei 2009). These curses have not only symptoms, but also consequences similar to AIDS, also known as the “bad death” or “apocalyptic

disease” (Dilger 2008: 212-214), such as a decline in reproduction and a threat to the continuity of clans and lineage, as young people either have died prematurely without leaving any heirs, or they are unable to bear children because of HIV positivity (Dilger 2008; 2009; Mutembei 2001). The Luo concept of *Chira*, which means *bahati mbaya* ‘bad luck and misfortune’ (Hussein 1988), is a curse that involves a whole family or the entire bloodline, and is caused by the transgression of ancestral rules, ritual prescriptions, and cultural norms, as well as the breaching of taboos, especially on sexual relationships (Dilger 2008). *Chira* is a “wasting disease,” similar to AIDS, which causes weight loss, diarrhoea, skin disease, and finally death (Dilger 2008: 220; Ongolo *et. al.* 2017). Even though forbidden sexual intercourse is the cause of both *Chira* and HIV/AIDS, the traditional concept of *Chira* sprouts from the inside, in other words, from troubled relationships among people; thus, it can be cured by harmonising and restoring necessary relationships. Conversely, HIV/AIDS comes from outside: it is the intrusion of a virus that blocks the continuity of life; thus, it is necessary to erect boundaries to protect one’s body from outside (Geissler and Prince 2007: 136). Likewise, *Bakuntumile*, ‘it has been sent for/to you,’ in the Haya culture, is a form of *Nemesis*, God’s revenge against hubris, and a well-deserved punishment for human arrogance (Mutembei 2009: 26-30).

To sum up, it can be observed that Tanzanian societies reflect the syncretic hybridization of religious thoughts and beliefs constructed by the superimposition of Islamisation and Christianisation, particularly the Lutheran church in the northern regions (Setel 1999; Hasu 1999) and the Pentecostal church in central and north-western Tanzania (Dilger 2001a,b; 2007; Stroeken 2017b), layered upon local spiritual beliefs, animistic cults and spirit possession practices (Giles 1995; 1999; Lambek 1993; Swantz 1999; Dilger 2007). In fact, “Swahili religious knowledge” is made up of *mila* (indigenous Swahili customs and rituals) and *dini* (Islamic beliefs and practices) (Topan 2009: 56). In addition to this, the advent of the Christian church took place during colonial times (Hasu 1999).

In conclusion, the witchcraft theory is relevant either as a challenge or as a support to scientific reason and biomedical theories. Indeed, the belief in witchcraft implies believing in the possibility of improvement: diviners, by “questioning misfortune,” deal pragmatically with and are fully aware of the uncertainty of life that science fails to handle (Reynolds-Whyte 1997: 232; Stroeken 2012). Thus, traditional and modern forms of knowledge should be integrated (Hallen and Sodipo 1997; Mosley 2004: 148-149) and mutually included, not excluded.

## 2.2. Biomedical methodologies

The biomedical conceptualisation is represented by the positivist epistemology of modern science and western medicine, strategic pillars of which are condom use, HIV testing and ARV treatment and therapies (Dilger and Rising 2014).

Scientific knowledge is conveyed through educational projects and prevention campaigns managed by NGOs, which are leaders in the fight against HIV/AIDS in Tanzania (Dilger 2012; Marsland 2007; Langwick 2008). In fact, following the post-independence economic collapse of the country in the late 1970s, the SAPs (Structural Adjustment Programs) were implemented by the World Bank and the International Monetary Fund starting in 1983, followed by the introduction of other neoliberal reforms in the 1990s (Lugalla 1995; Mbilinyi 1993; Brooks and Kessy 2017). One of the first consequences of the country's economic collapse was the massive cut in government expenditure on the health sector. Thus, after the privatization of the healthcare system in 1992, there arrived a trans-nationalisation and “NGO-ization of the Health Sector” (Dilger 2012: 61; 2010), especially regarding the HIV/AIDS epidemic that is also criticised as the “epidemic of NGOs” (Smith 2014: 165). The privatization of the health sector affected seriously AIDS-related care among the local population, who reinvented a home-based care system supported by NGOs (Dilger 2010: 115).

NGOs are mainly involved in public health interventions, in which educational strategies are based on methodologies such as BCC (Behaviour Change Communication), SCSC (Strategic Communication for Social Change), and ABC (Abstinence, Be faithful and Condom use) (Mwita 2010; 2011; Johansen 2010; 2011; Plummer 2012; 2013), which follow “bio power regulations” (Dilger 2012) to keep under state control sexual relationships in the form of safe sex campaigns (Foucault 1998; Halperin 2016).

## 3. Divided treatments for HIV/AIDS in Swahili novels

In this section, I will, firstly, introduce the topic of the treatment of illness in Swahili novels, and then, I will analyse the four selected novels dealing with HIV/AIDS.

Swahili novelistic productions have been described as “written in the swing” (Rettovà 2016a), swinging between different phases from realism, passing through experimentation and magical realism (Rettovà 2016b; Khamis 2003; 2005), to end up swinging back into neorealism (Rettovà 2016a; Diegner 2018; Bertoncini *et al.* 2009).

The treatment for illness has always been a theme discussed in Swahili prose, since the first ethnographic narratives, such as A. Banzi's *Titi la Mkwe* ('The Daughter-in-law's Breast,' 1972) and A.

Kitereza's adventures of *Bwana Myombekere na Bibi Bugonoka Na Ntulanalwo Na Bulihwali* ('Mr Myombekere and his wife Bugonoka ('misfortune'), their son Ntulanalwo and their daughter Bulihwali,' 1980; Mulokozi 1984), which celebrate traditional healers' knowledge and their mystical powers capable of healing every kind of psychophysical ailment (Garnier 2013; Bertoncini *et al.* 2009; Mazrui 2007).

After that, I argue that Shaaban Robert (1909 - 1962), who has been recognised as both the real father of the Swahili novel<sup>6</sup> (Bertoncini *et al.* 2009; Garnier 2013), producing narratives which, deeply rooted in traditional features, are mostly oriented towards modernity (Garnier 2013: 47 - 62), and as an "idealist philosopher" (Masolo 2010: 102), was also a pioneer in featuring the clashing encounter between modern medicine and traditional healing practices in the novelistic genre. Particularly, in the novel *Kufikirika* ('Thinkable,'<sup>7</sup> 1967), Robert explores the role played by traditional healers in the fight against disease, sterility and barrenness with *ubora na ustadi* 'high quality and dexterity' (Robert 1967: 8); yet the novel endorses "the positivist epistemology of science" and medicine (Rettovà 2021: 306). Indeed, in *Kufikirika*, Roberts first explains how healing practices are part and parcel of the traditional Tanzanian culture and local knowledge of healing, by describing thoroughly the categories of healers ruling the country affairs, *i.e.* herbalists, exorcisers, demonologists, those who perform sacrifices, those who craft talismans, foretellers and diviners (Robert 1967: 8). However, in the end, he starkly contrasts positivism, rationalism and modern medicine with local traditional divinatory and healing practices accused of being "*ushirikina* ('superstition') and fallacy" (Rettovà 2021: 304-308). Robert criticises all the groups of healers who represent the ruling classes in the fictitious country of *Kufikirika*, where the novel is set, aiming at a "righteous community" (Masolo 2010: 97). In fact, the protagonist *Utubusara Ujingahasara* ('Humanity-is-wisdom, Ignorance-is-loss,' Ngonyani 2001), at first, pretends to be a traditional healer himself to gain the trust of the sovereigns, so as to be able to express his innovative viewpoint.

*Ingawa nilitabiri uzazi wako lakini, kwa kweli, utabiri ulikuwa si kazi yangu kabisa. Nilijitia katika kundi la watabiri wakati Mfalme alipojituhumu kuteswa na ugumba ili niweze kupata nafasi ya kusema niliyoyajua. Nchi, kama ya Kufikirika, ambayo uganga wa kienyeji wasadikiwa kuwa*

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<sup>6</sup> See also the *34th Swahili Colloquium*: "Celebrating Shaaban Robert," organised by Bayreuth University in partnership with Moi University, 27-29.5.2022. Prof. Dismas A. Masolo in his keynote lecture: "The Idealism of Shaaban Robert," clearly defined Shaaban Robert's works as "philosophical texts."

<sup>7</sup> Or "The Nature of Ideas" (Masolo 2010: 162).



*umetawala mambo yote ya wanadamu neno lo lote geni halifaulu bila kupitishwa kwanza katika njia inayoaminiwa na watu wote* (Robert 1967: 48).

Even though I prophesized your birth, to tell the truth, divination is not my job at all. I hid myself among the diviners when the King supposedly suffered barrenness so as to gain the opportunity to express my knowledge. In a country such as Kufikirika, where traditional healing is believed to administer all aspects of human life, whatever foreign opinion would have not succeeded without having passed first through a way that is trusted by everyone.<sup>8</sup>

Subsequently, he defeats local healing treatments and divinatory prophecies, demonstrating that the young prince has effectively recovered only after receiving hospital treatment and so all occult practices and human sacrifices are condemned (cf. Rettovà 2021: 306-307).

*[...] Kwa jambo hili njia bora ya kutumia ni kuwaona au kuwashauri waganga waliokuja Kufikirika kwa Bahari ya Kufaulu. Hawa ni waganga stadi kabisa. Namna zao za uganga ni nyingi sana [...] Maradhi kadha wa kadha yaliyodhaniwa kuwa hayatibiki zamani sasa hutibika rahisi sana kwa dawa zao. Mahali pa kazi ya uganga wao huitwa hospitali.* (Robert 1967: 45-46)

[...] For this matter the best way to use is to meet and be counselled by the healers who reached *Kufikirika* sailing across the ‘Sea of Success.’ They are real expert healers, and their healing skills are wide [...] A lot of illnesses that were believed to be incurable in the past, now can be treated easily with their treatments. The place where those healers perform is called hospital.

In the end, Robert’s novel supports firmly the positivist epistemology of science and technological development (Rettovà 2021).

In contrast, I will illustrate two other novels, C. Mung’ong’o’s *Mirathi ya Hatari* (‘A Dangerous Inheritance,’ 1977 re-edited 2016) and G. Ruhumbika’s *Janga Sugu La Wazawa* (‘The Chronic Calamity of Native People,’ 2001), which recognises an “epistemology of marvel” (*ajabu*) consisting of witchcraft, black magic, occultism and curses (Rettovà 2021: 314-319). These novels deal with the harmful side of witchcraft that is hazardous but real, and thus, respected and feared at the same time. In fact, even though the forces of witchcraft cannot be seen, its occult powers can kill.

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<sup>8</sup> All the translations in this paper are mine, if not otherwise indicated.

Firstly, Gusto the young protagonist of Mung'ong'o's novel is secretly yet meticulously initiated into the practice of witchcraft, which is fully acknowledged as proper knowledge, so he is taught about both its value and hazards:

*Ni urithi kubwa ukitumia vema; bali pia ni mirathi ya hatari usipojihadhari nayo (Mung'ong'o 2016: 12). [...] Hii ni elimu ya pekee. Ukiifahamu na kuitumia vizuri unaweza kuumiliki ulimwengu. Ni siku hizi tu Wazungu wamekuja na elimu yao ya uwongo [...] hiyo ndiyo elimu tuliyokuwa nayo Waafrika tangia awali. Lakini ajabu ni kwamba vijana wa leo wanaidharau. Wanaioonea haya jadi yao. Wanataka Uzungu badala yake! (Mung'ong'o 2016: 20).*

It (witchcraft) is a valuable inheritance if you use it well; however, it can also be dangerous if you are not cautious with it. [...] This is a peculiar and special knowledge. If you master it, you can rule the universe. It is only recently that the European came with their false knowledge [...] this is indeed African traditional knowledge. It is surprising that the young nowadays ignore it. They are ashamed of their own cultural traditions. They want Western knowledge instead.

Secondly, Ruhumbika's novel illustrates the mysterious endogenous calamity affecting the local population of the village of Ngoma on Ukerewe island, particularly Mzee Ninalwo's entire progeny, whose family is cursed and condemned to disappear. In fact, the entire bloodline of Mzee Ninalwo starts dying from mysterious and supernatural calamities.

*Ndivyo walivyoziidi kuona maajabu (Ruhumbika 2001: 41). [...] Mji wa Mzee Ninalwo unaandamwa na majanga yasiyo ya dunia hii (Ruhumbika 2001: 55).*

Indeed, they kept experiencing mysterious events [...] The city of the old Ninalwo was chased by supernatural calamities, which are not pertaining to this world.

For instance, three Ninalwo's twelve sons and daughters were found dead on the shore standing upright without any support, like living persons, with their foreheads pointing to the north and the napes of their necks pointing south, while their left hands, left feet, left ears and genitals were amputated in a ritual-like manner. Likewise, many others in the family started suffering from a strange illness that caused vomiting and the defecation of flies until they died.

*Wote hao wakachukuliwa na ugonjwa huo wa ajabu wa huhara na kutapika inzi! (Ruhumbika 2001: 59).*

All of them were caught by that mysterious illness that causes diarrhoea and vomiting flies!

In the last two novels, even though superstitious human sacrifices and occult black magic practices are condemned, the practice of witchcraft is epistemically recognised as a valid way of knowing and a “mode of cognition” (Gyekye 1995: 202).

Then, at the crossroads comes HIV/AIDS, which is a divisive disease connected to various methods of treatment. The divided debate about HIV/AIDS treatment implies a “therapeutic continuum” (Olsen and Sargent 2017: 1; Feierman and Janzen 1992) consisting in a kind of balancing and rebalancing of the scale between modern hospitals and the performances of traditional healers, who have their epistemic role to play. In fact, the inadequacy or the inaccessibility of hospital care pushes people to prefer the counselling of traditional experts who intervene to alleviate AIDS-related diseases. In literature, the healers are portrayed either as professionals or as swindlers, whereas the hospitals’ scientific efficiency is unquestionable, though they are viewed as morally corrupt.

In this section, I am analysing four selected Swahili novels from Tanzania, namely, *Kisiki Kikavu* (‘The Dry Stump,’ Mutembei 2005); *Firauni* (‘The Debauchee,’ Mauya 2017), which I defined elsewhere as “descriptive-reflective” novels (Nicolini 2022); and two philosophical novels: *Ua La Faraja* (‘The Flower of Consolation,’ Mkufya 2004); and *Kuwa Kwa Maua* (‘The Existence of Flowers,’ Mkufya 2019).

Aldin Mutembei’s novel *Kisiki Kikavu* (‘The Dry Stump,’ 2005) is a historical and documentary novel, entirely based on empirical findings collected during the author’s research on the ground conducted in the Christianised context of the Kagera region (1992 - 2006). The novel is set in the aftermath of the Uganda-Tanzania conflict, also known as the Kagera war, a period from 1979 and after 1983, when AIDS started spreading in the country. The protagonist Kalabweli is one of the *Abekikomela*, the black-market dealers at the borders, also known as the “young of Juliana,” from the popular landmark clothes they sell (see Mutembei 2001; 2009). In the period described in the novel, HIV/AIDS was relatively unknown and incurable disease, which challenged both hospital and herbal treatments. In addition to this, the region was economically devastated because of the war; thus, not only were the hospitals lacking adequate equipment and treatments, but also swindlers and fraudsters took advantage of the situation pretending to be professional healers.

*Hospitalini hawakuona ugonjwa wowote. [...] Kumwambia arudi nyumbani. [...] Wakaona heri waende kwa waganga wa jadi kuuliza kulikoni. (Mutembei 2005: 28) [...] Watu wakishaanza kuzungumzia majini. Vifo vya ajabu vilikuwa vinasimuliwa karibu kila kijiji. Mara utasikia kuwa fulani ugonjwa wake hausikii dawa. Mara, mwingine kafa kwa ugonjwa wa ajabu. Ni waganga wa kienyeji tu waliokuwa na ufahamu kuwa mahembe sasa yanawaingilia watu kuliko kawaida. Kila*

*aliyekuwa na mgonjwa akamwondoa hospitalini na kumpeleka kwa mganga. Waganga wakatajirika. Mganga mmoja alisema kuwa ni lazima tuweke zindiko. [...] Huu si ugonjwa. Na hospitalini wameshidwa. [...] Baada ya muda kifo. Kifo cha ajabu. [...] Waganga [...] Wakaahidi kuondoa laana. Wakachuma mali. [...] Vifo havikwisha. Wala wagonjwa hawakupungua. (Mutembei 2005: 31)*

At the hospitals, doctors did not see any disease. Thus, they told him to go back home. They thought it was better to go to the traditional healers to ask what was going on. [...] People started talking about devilish spirits. Strange deaths were told of in almost every village. One time, you hear about someone whose illness does not respond to any treatment. Another time you hear about someone who has died of a strange illness. Only the traditional healers were aware that vampire-spirits were assaulting people in an unusual manner. Each person who had an ill-relative took them from the hospital to the healers. The healers became rich. One diviner said that we must wear protective charms. [...] This is not a disease. The hospital has failed. [...] After a short time, death descended. A strange death. [...] The cunning healers [...] they promised to remove the curse. They acquired a lot of wealth. Neither did the deaths end nor did the number of ill people decrease.<sup>9</sup>

However, local pharmacopeia seemed to be effective. For instance, when an herbalist gave Kalabweli a black flour and chopped leaves concoction popular as *muarobaini*,<sup>10</sup> so called because it is believed to treat over forty different human illnesses in seven days, he came back home relieved of his symptoms (Mutembei 2005: 50).

In this novel, even though HIV/AIDS-sufferers were condemned to die at that time, people were desperately chasing after an effective treatment in a continuous rebalancing of the scale between traditional healers and medical doctors. In the end, healers seem to prevail because they could at least mitigate AIDS-related opportunistic diseases and give hope even to people without economic resources.

*Mimi sikukubali kama walikuwa na ihembe, wala sikuweza kukataa hilo. Afadhali **suala la ihembe** lilileta mantiki kutokana na dhuluma (Mutembei 2005: 33).*

I did not agree with the vampire-spirit explanation, nor could I disagree completely. In fact, the **vampire-spirit theory** at least provided a logical explanation from the injustice.

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<sup>9</sup> All emphasis mine.

<sup>10</sup> *Muarobaini* or *Mwarobaini* is the Neem Tree (*Azadirachta indica* A. Juss; Meliaceae) also well-known in the Ayurvedic tradition.

Indeed, social injustice (*dhuluma*<sup>11</sup>) has become an epistemic device from which at least a portion of knowledge can be extracted so as to fight for “epistemic justice” (Fricker 2007; Medina 2013). People were struggling and starving because of the war and because of the ignorance that both medical doctors and healers had regarding AIDS. So, in the end, the solution to both injustice and AIDS has a supernatural key element.

Athumani Mauya’s novel *Firauni*<sup>12</sup> (‘The Debauchee,’ 2017) is a realist novel set at the threshold of the 90s, which criticizes the socio-political condition of Tanzanian society, following the process of neo-colonisation begun after the implementation of neoliberal reforms, SAPs and the over expansion of NGOs. The effectiveness of scientific medicine for treating HIV/AIDS is unquestioned in this novel; however, not only did the privatization of the health sector make hospital treatment expensive and unaffordable for the majority of people, but also corruption spread among medical doctors. As a result, once again traditional healers both honest and dishonest came into play to cope with the situation. In fact, witchcraft in the 90s also became a supporting element for neoliberal business under the spell of *chuma ulete* (‘reap and bring,’ Mgumia 2020) so as to both boost and protect individual small businesses (Sanders 2001).

In this novel, the three pillars of modern medicine are observed. Firstly, HIV blood testing is regularly performed at the hospitals (Mauya 2017: 24-25) as the most effective method of ascertaining if someone has been infected, though test results are often fraudulent (Mauya 2017: 15). Secondly, condom use is promoted to prevent the infection effectively:

*Kondomu tu ndiyo kiboko ya UKIMWI* (Mauya 2017: 161)

Condoms are the only “whip” against HIV/AIDS.

Finally, HIV/AIDS is no longer a mortal disease - it has become a chronic illness that can be controlled with ARVs, even though the treatment is not available to everyone in the country:

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<sup>11</sup> Cf. the novel *Bomu la Virusi* (‘The Viral Bomb,’ Machume 2004) which also deals with HIV/AIDS, and which is also set in the Kagera region in the Kagera war aftermath: *wafanyabiashara wengi walia mini kuwa wamerogwa kutokana na wivu wa watu au dhuluma waliofanyia wenzao* ‘Many black-market traders believed that they have been cursed because of other people’s envy or the **injustice** that they themselves perpetrated towards others’ (Machume 2004: 9).

<sup>12</sup> *Firauni* is not only the literal translation of ‘Pharaoh,’ the Hebrew biblical figure appearing in the books of Genesis and Exodus as the enemy of the Israeli people, but also has the metaphorical meaning of villain.

*Dawa za kupunguza makali ya VVU ili kurefusha Maisha yenu* (Mauya 2017: 20)

Medications for suppressing the HIV virus strength and to prolong our lives.

Nevertheless, following the privatization of the neoliberal health sector, corruption spread as fast as HIV transmission itself, both in the new private structures and in the old public structures that remained in poor condition without adequate economic and technical resources.

“Daktari alikuwa muuaji, asiyekuwa na maadili ya udaktari. Hakika ni **firauni**” (Mauya 2017: 19)

“The doctor was a murderer, without medical ethics, actually he was a **debauchee**”

Healers are not effective, but hospitals reject people who cannot afford to pay, so the treatment of AIDS is described as a ping-pong between hospitals and healers.

*Tulimpeleka hospitali ya wilaya kwa matibabu lakini hakupata nafuu hata kidogo. Madaktari walitumbia hawakuona ugonjwa wowote ule. [...] tulimpeleka kwa Waganga wa kienyeji kumuagua<sup>13</sup> ilishindikana* (Mauya 2017: 38-39).

We brought him to the district hospital for treatment, but he did not get any relief. The doctors told us that they could not diagnose any disease. [...] We brought him to the traditional healers to get their treatment, but it failed as well.

*Hakuna tunakosifika kwa uchawi au tiba mbadala ambako hatukwenda [...] tumefika hadi kwenye Mizimu na kwenye makaburi ya Masharifu, lakini wapi! [...] tumemaliza waganga na waganguzi lakini wapi [...] hakuna nafuu ugonjwa hausikii dawa asilani [...] tukarudi tena hospitali, lakini nako wapi hakuna nafuu [...] tukarudi tena kwa waganga wa jadi na sasa tumerudi tena hospitalini* (Mauya 2017: 13-14)

There is no place popular for witchcraft or herbalism where we did not visit. [...] We visited African ancestral worship places and Sharif graveyards, without succeeding! [...] We went to all the healers including the most respected, but they failed! [...] There was no relief, this illness is stubbornly resistant to all the medication we have tried. [...] Then, we came back to the hospital, yet there was no relief to the ailment! [...] We went again to the traditional healers and now we are back to the hospital once again!

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<sup>13</sup> The verb *-agua* includes both scientific and traditional healing practices: treat medically; treat magically to remove a spell or witchcraft; predict, foretell, divine, interpret dreams (TUKI 2012).

To sum up, science and modern medicine are unquestioned, however cures are unavailable for those who cannot afford them. In fact, several socio-political institutions are criticized because of the cuts as well as the privatization of the health sector and because of the network of bribery as well as corruption. In the end, the fairest answer to both social injustice and AIDS is a supernatural witch's craft.

In conclusion, the two “descriptive-reflective” novels (Nicolini 2022) not only illustrate how all epistemological reflections develop from the accurate descriptions of characters' actions, events and the environment as portrayed by the narrators' voices, but they also adorn their prose with the inclusion of magical realist devices that show irreverence towards science. These novels endorse an “epistemology of indeterminacy and inclusion/complementarity” (Rettovà 2021: 319-23) aiming to include as a third way or middle ground indefinite and clashing worldviews, epistemologies and realities as “the included third” (Medina 2011).

William Mkufya's trilogy *Diwani ya Maua* ('The Poetry of Flowers') consists in two<sup>14</sup> philosophical novels: *Ua La Faraja* ('The Flower of Consolation,' 2004) and *Kuwa Kwa Maua* ('The Existence of Flowers,' 2019) which reflect on the meaning of life, fear of death, and religious attitudes towards sex and sexual pleasure in connection with HIV/AIDS - the core which links together death, sex and faith<sup>15</sup> (Nicolini 2022).

In these two novels, HIV/AIDS is mainly approached through the positivist epistemology of modern science and medicine. Scientific answers to cope with the disease are unquestioned, such as HIV testing to prolong one's life as explained by the protagonist of the trilogy Dr Hans, a virologist who is also a philosopher:

*“Ukipima ukajua mapema kwamba una virusi”* (Mkufya 2004: 208) [...] *“Ni kweli kufa ni kufa tu, lakini kila mtu ana tarehe zake, na kama inawezekana kuziahirisha tarehe hizo ni vyema zaidi”* (Mkufya 2004: 209)

“If you test, you'll know in time whether you have the virus.” [...] “This is true to die is to die, but each person has their own date, and if you are able to delay this date it is even better.”

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<sup>14</sup> The third volume is still a work in progress.

<sup>15</sup> “A story in three novels about HIV/AIDS, fear of death and existential absurdity,” Mkufya unpublished (January 2019).

Condom use is promoted as everyday good practice: *Mambo kwa Soksi!*<sup>16</sup> ('Doing things with socks,' Mkufya 2004:18), as well as ARV therapies are encouraged to transform HIV/AIDS from a mortal to a chronic disease (Mkufya 2019: 99) and *kuokoa kiasi cha maji ambayo hayajamwagika* ('save the amount of water that has not been poured yet,' Mkufya 2019: 145). Finally, Dr Hans explores the clash between scientific progress and *utamaduni*, 'local culture' through a debate speculating about the prospective production of a vaccine against HIV/AIDS in the country:

*Ukitaka utamaduni wako ushamiri, ufungulie, uweke wazi na uruhusu unufaike kutoka kwenye tamaduni nyingine ili zineemeshe ule wa kwako. Lakini uchague cha kuiga. Sisi huwa hatuchagui. [...] Tukiletewa chanjo na kulazimishwa tuchanje watoto wetu, hatukai chini kwanza na kuchunguza usafi na ubora wa hizo chanjo. Ni rahisi kwa mtu mwovu huko Ulaya kuingiza kitu kibaya cha kuteketeza vizazi vya baadaye. [...] Chanjo ni muhimu sana. Mimi ni daktari na ninajua umuhimu wa chanjo. Ninachopinga ni kule kutozikagua kwa makini... (Mkufya 2004: 358-9) [...] Kitu ambacho kitamtatiza mwanadamu daima ni kifo [...] kutodumu wake. [...] teknolojia ya wanadamu itakapofanikiwa kuondoa magonjwa yote duniani, watu watakuwa sasa wanakufa kwa uzee [...] hivyo havina dawa (Mkufya 2004: 418).*

If you want your culture to be spread, be released, be open and allow it to profit from other cultures so as to be more comfortable with your own culture; however, you must choose what to imitate. We are not choosing [...] Take as an example the vaccine; if vaccination is imported and we are obliged to vaccinate our children, we are not reflecting and evaluating the security and effectiveness of these vaccinations. Like this it is easy for an evil European man to bring a dangerous mechanism to destroy our future generations. [...] Vaccines are really important. I am a doctor and I know the importance of vaccination. The one who opposes, is the one who is not examining carefully. [...] What has always been challenging for a human being is death [...] transitoriness [...] when human beings' technology will succeed in overcoming all the diseases existing in this world, then people will die because of old age [...] for this there exists no treatment.

Nevertheless, the materiality and tangibility of life are also imbued with mystery and the unknown. So, once positivism fails to unveil all such mysteries that remain unknown, practices such as divination enter the picture to deal with the supernatural and the spiritual realm. Mkufya suggests an "epistemology of *miujiza* (miracles)" (Mkufya p.c. 18-10-2021): a way of knowing by "*mambo ya kimiujiza*" that interprets miracles of nature - to be distinguished from the miracles of faith and religious doctrine, supernatural events and mysterious phenomena. Such ways of knowing pertain to the code of mystery

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<sup>16</sup> *Mambo kwa Soksi* ('Things with Socks') is the title of a song by Remmy Ongala (1947–2010), who made the expression popular.



and the realm of miracles, for they have not yet been documented and comprehended by the positivist epistemology of science.

*Mbuyu ulimsikia bundi<sup>17</sup> akiuchulia kwa ulozi, akizuza na kunuiza* (Mkufya 2019: 290).

The baobab could hear the owl bewitching with an ominous recitation and chanting an evil spell.

Divination and witchcraft are practices that access knowledge by means of an “epistemology of extrasensory perception and paranormal cognition” (Gyekye 1995). In Mkufya’s second novel, diviners are involved in diagnosing a hereditary curse called *kinda la mlapeke* (‘the chick/baby bird who eats alone,’ Mkufya 2019: 476), also known as the child who loves only himself. *Kinda la mlapeke* is a traditional curse which describes the ominous birth of someone whose existence destroys that of their close relatives. For instance, the character of Omolo is an orphan, his daughter kills herself because of HIV and his son Masumbuko, whose name means ‘agony,’ kills his mother in childbirth, even though the diviners perform an exorcism to propitiate the spirits of the ancestors (*tambiko*) both to ensure a safe delivery for Masumbuko and save his mother’s life (see also Nicolini 2022).

“Masubo na Nyasubo fungueni njia,

*Chaubaya Masumbuko apite*

*Atuachie mwali wetu*

*Salamaaa!”*

(Mkufya 2019: 476)

*Masubo na Nyasubo* (ancestral spirits evoked by the *waganga*) open the way,

to let the evil (child) Masumbuko (agony) be born

and leave our maiden

safe!<sup>18</sup>

To sum up, firstly, “The Flower of Consolation” embraces modern science, and so “The Existence of Flowers” reflects the postulation of a co-existence and mutual complementarity of antagonistic strength and diverse epistemes, which cooperate (Nicolini 2022). This epistemology of balance, which Mkufya postulates in his ecocritical novel *Face Under the Sea* (2011), winner of the Burt Literary Award,<sup>19</sup>

<sup>17</sup> *Mbuyu* (‘the baobab’) and *bundi* (‘the owl’) are symbolic links between the natural and the supernatural world.

<sup>18</sup> Mkufya’s translation 31-12-2019.

<sup>19</sup> [www.burtaward.org/wemkufya](http://www.burtaward.org/wemkufya).

encourages people to live well together in difference; it can also be compared with the manifesto of the Latin-American philosophy of *bien vivir* (living well) (Medina 2011; Santos 2014; 2018).

Furthermore, in these two philosophical novels, the illness HIV/AIDS itself acquires a metaphorical meaning in denouncing social problems similar to Kezilahabi's 'Hydrocephalus' (*Kichwamaji*, 1974) (Rettovà 2007a; Stacey 2020), who gives a deformed body to the alienated postcolonial African identity. Mkufya's *Ukimwi wa kijamii* (Mkufya 2004: 357) is a metaphor to explain the 'AIDS of the African societies' that were unable to protect themselves from foreign imperialist assaults (slavery and colonisation), including imported religions (Islam and Christianity), which weakened their cultural identity (Mkufya 2004; see also Nicolini 2022).

In conclusion, I have illustrated how, on the one hand, *Kisiki Kikavu* and *Firauni* embrace traditional healing practices as the most available and acknowledged by people, as well as the existence of supernaturalism. On the other hand, Mkufya's novels endorse science and scientific worldviews, yet the presence of mystery is strongly acknowledged.

#### 4. VVU/UKIMWI and its 'doubles:' multifaceted literary representations

People's rhetoric deals with illnesses through metaphorical representations, for "illness as a figure or metaphor is the most truthful way of regarding illness and the healthiest way of being ill" (Sontag 1991: 3). The metaphorization of HIV/AIDS in Swahili literature has not only a signifying scope to understand and cope with the disease (Mutembei 2001; 2009; 2007; Mutembei *et al.* 2002), but also aesthetic, cognitive and strategic roles (Vierke 2012; Askew 2015). Furthermore, metaphors are "epistemic devices" (Nicolini 2022), which, culturally interpreted, articulate specific messages and locally contextualised knowledge.

The main double for VVU/UKIMWI in the Swahili novels analysed is the concept of *janga* ('calamity'), which can be either a natural calamity or the result of witchcraft that manifests itself in the form of generational and hereditary culturally specific curses; for instance, *Chira*, among the Luo (Dilger 2008; 2009; Hussein 1988), or *Bakuntumile*, among the Haya (Mutembei 2009), both of which are concepts similar to the Greek *Nemesis*: God's revenge against the sin of arrogance (hubris). These curses generate illnesses which have the same symptoms as AIDS, and which cause the death of the entire bloodline of the guilty person. Thus, AIDS is personified as the angel of death *Bakuntumile* or *Chira* who punishes mankind for its pride (Mutembei 2009: 27; Hussein 1988) and/or for illicit traffic and immoral behaviour as shown in Mutembei's novel *Kisiki Kikavu* (2005):

*Baada ya muda kifo. Kifo cha ajabu. [...] Hiki ni kisasi. Ni lazima tufanye kafara. Twende tukamwage kahawa katika mto Kagera, tuvuke na kufika mpakani tukaombe radhi na kutoa sadaka* (Mutembei 2005: 31).

After a short time, death descended. A strange death. [...] This is revenge, *nemesis*, a kind of God's revenge (Mutembei 2009: 27). We must give an offer or perform a sacrifice. Let's pour coffee into the Kagera river, cross it and get to the border where we can ask for forgiveness by offering a sacrifice.

VVU/UKIMWI can also be classified as *ugonjwa wa ukoo* ('the kinship disease,' Mutembei 2005: 50), or *endwala enkulu* (in Luhaya), which are genetically transmitted disorders. In fact, *Kisiki Kikavu*, the dried roots and stump of a tree, is not only a metaphor for a person who has lost hope and is infertile like a dry stump, but it also means the hopelessness with regard to the continuity of the family. For instance, Kalabweli the protagonist, who dies young and without heirs, cannot procreate because of HIV/AIDS which works like a kinship curse.

Likewise, the novel *Firauni* (Mauya 2017) explains and familiarises UKIMWI through the interface of *Kitigo*, which is a typical disease among the Zigua ethnicity from Bagamoyo and Handeni, and which not only affects people who have incestuous relationships with close relatives, but also has the same symptoms as AIDS (see also the novel *Harusi ya Dogoli* 'Dogoli's Wedding Ceremony,' Mauya 2016). However, *kitigo* is well-known and treatable by traditional healers, so it offers people the hope of recovery.

*"Ni vigumu kutofautisha UKIMWI na Kitigo"* (Mauya 2017: 5) [...] *"Kitigo kina dawa. Ukimpata mganga anayejulia ugonjwa huu unapona mara moja"* (Mauya 2017: 15)

"It's difficult to distinguish between HIV/AIDS and *Kitigo*." [...] *"Kitigo is treatable. If you find a healer who knows it, you will recover immediately."*

Finally, Mkufya's novel *Kuwa Kwa Maua* (2019) is entrenched with bad omens predicting the HIV/AIDS calamity: *uchuro wa janga la UKIMWI* ('the omen of AIDS calamity,' Mkufya 2019: 179), which can also manifest itself as the hereditary kinship curse *kinda la mlapeke* (Mkufya 2019: 476), which is similar to God's revenge against human hubris, or the fatal bird flu epidemic called *mdondo* (Mkufya 2019: 407).

Sometimes, traditional punitive kinship curses are exacerbated by religious attitudes of both Islam and Christianity that explain HIV/AIDS as a well-deserved punishment for sinful behaviour. A

final example is the Safal-Cornell (2018)<sup>20</sup> award-winning novel *Mungu Hakopeshwi* ('God Doesn't Borrow Time,' Baharoon 2017) in which the villain character is punished by HIV/AIDS, the shameful disease:

“Nimelipwa kwa dhambi nilizozitenda [...] leo nimekuwa na miongoni mwa watu wanaoishi na virusi vya ukimwi!” (Baharoon 2017: 243)

I have been repaid for the sins I committed [...] today I am one of those people living with HIV!

Furthermore, the HIV/AIDS doubles are supernatural and spiritual entities conjuring into prose the vampire-spirits of the Haya tradition, the *ihembe* (*ma-* in the plural), who inhabit Mutembei's novel, or the Islamic evil spirits, *majini* ('the djinns'), who populate Mauya's novel.

Alikuwa amepigwa na **ihembe**, jini analotupiwa mtu na watu wabaya. Alikuwa na **jini**. [...] Ihembe hilo ni la ughaibuni. Sio ihembe la kawaida. Na kuliondoa ihembe lililotoka nchi za ng'ambo siyo kitu cha mchezo. (Mutembei 2005: 29) [...] Wote walikuwa ni wagonjwa wa ugonjwa usiofahamika, ugonjwa ambao vijijini waliuita **mahembe** au **majini**. Ilisemekana kuwa wafanyabiashara walidhulumu na sasa wanapata **laana** (Mutembei 2005: 32-33).

He was affected by a **vampire-spirit**, a kind of bloodsucking evil creature which is caused by a curse made by evil people. He had a **djinn**. This vampire-spirit is from foreign lands. Not a common one. To expel a vampire-spirit, which has come from abroad is not a joke. [...] All were ill with an unknown illness which in the villages was called **vampire-spirits** or **djinn**s. It was said that businessmen treated other people unjustly and now they are **cursed**.

The figure of *ihembe* has been interpreted as a “metaphtonymy” (Goossens 1995): metaphor for HIV/AIDS, as well as metonymy for both its cause: *ihembe* is the horn by which a witch awakens the evil spirit; and its consequences: the wasting disease that causes loss of weight and hair as well as skin problems (Mutembei 2001; 2009). Moreover, the first name used in East Africa (from Uganda to Tanzania) for HIV/AIDS (Iliffe 2006; Barz 2006) is *silimu* (Mutembei 2005: 40, 45; Mutembei 2001; 2009),

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<sup>20</sup> Safal-Cornell Kiswahili Prize for African Literature:

<https://kiswahiliprize.cornell.edu/>;

<https://www.jamesmurua.com/zainab-alwi-baharoon-jacob-ngumbau-julius-are-mabati-cornell-kiswahili-prize-2018-winners>

or “the new stranger disease called *slim*” that makes people “passing away like a shadow” (Mapalala 2009: 24). *Silimu* (slim), which is also a “metaphtonymy” (Goossens 1995): a metaphor for AIDS and a metonymy for one of its symptoms—the massive loss of weight—is indeed connected to the mythological narrations of the *mahembe* or the *mumiani* djinns, bloodsucking djinns traditional on the Islamised Swahili coasts (Giles 1995; 1999; Swantz 1999). The djinns, who inhabit the East African coasts, can be of many different kinds and have distinct characteristics:

*Kila tulipokwenda tunaambiwa kuwa kakaliwa vibaya huko kwenye biashara zake, amerogwa, katupiwa jini makata, wengine wamesema jini subiani, wengine jini la msukule, wengine wamesema amekumba upepo, wengine wamesema kategewa tego kwa mke wa mtu, wengine wamesema kategewa usinga* (Mauya 2017: 13).

Wherever we went, we were told that something went wrong at his business, he has been **bewitched**, a **djinn makata** (who kills by cutting down its victims) or a **djinn subiani** (who kills by sucking victims’ blood) has been thrown at him. Other people said he was assaulted by a **living dead** instructed by a witch, or he has blown the **wind**, or he was affected by the curses of either **tego** (a disease caused by witchcraft: if an adulterous man has sex with a married woman, she will infect that man) or **usinga** (a witchcraft practice performed by betrayed married women against their unfaithful husbands or their extra-marital lovers) or **limbwata** (a type of food prepared by women to bewitch men so as to avoid men’s infidelity or to cast a love spell).

Non-human actants (Langwick 2011) such as djinns and *mahembe* as well as kinship curses (*Chira*, *Bakuntumile* or *Kitigo*) eat, chew, suck, and drain both the flesh and blood of human bodies. In fact, these supernatural entities represent the AIDS symptoms such as skin diseases, diarrhoea, vomiting, weight loss, falling hair and a progressive wasting away of the body. Likewise, spirit possession renders the psychological breakdown of AIDS sufferers. To sum up, rage, experienced at stomach level, is transformed into either diarrhoea or a curse crafted by jealousy, while mental illness is interpreted as spirit possession. In addition, vampire-spirits are the explanation for the loss of weight and vital strength; skin diseases are an effect of the djinns; and illicit sex with supernatural oversexed creatures is the cause of STIs.

These mechanisms can be explained at the level of neurolinguistic programming as follows: neurologically the experience occurs at the level of sub-modalities; subsequently, the representation implies a synesthetic shift of sub-modalities (Gordon 2017: 130-131), which produces an effective cross-over from one sub-modality to another equivalent sub-modality in another system (kinaesthetic,

olfaction, vision, taste, audition) (Gordon 2017: 137, 148). The transition between the two systems produces a novel representation or a “therapeutic metaphor” aimed at interpreting and exploring illnesses “through the looking glass” (Gordon 2017).

To conclude, HIV/AIDS in Swahili novels is articulated through metaphors and the figurative language of doubles, not only to explain cause and effect, but also to offer relief from trauma and fight against stigma (Mutembei 2015: 77). *VVU/UKIMWI*'s doubles not only express epistemological explanation, knowledge of the illness, but they also have both a therapeutic scope (Gordon 2017) and a theatrical cathartic effect aimed at condemning injustice and alleviating people's suffering by enacting their inner fears. Metaphors and reality double each other (Artaud 2017) and create an effective communication between the literary text and its readers.

## 5. HIV/AIDS and Its 'Doubles' in Anglophone Literature from East Africa

I have thus illustrated the applicability of an epistemology of the double in Swahili literature, where metaphors convey therapeutic knowledge. However, I will expand the boundaries of my analysis of Swahiliphone prose by exploring the metaphorical doubles in another language and in another literary genre: firstly, I will give examples of Anglophone Kenyan popular fiction; secondly, I have selected two plays from a collection of stories, namely “Tell Me, Friends: Contemporary Stories and Plays of Tanzania” (Osaki and Noudeho 2010), written in English by university students and collected by lecturers at the University of Dar es Salaam. In fact, since Julius Nyerere's translations of Shakespearean plays into Swahili, Tanzania has been committed to, and is to be praised for supporting and expanding Swahili language and literature. As a result, literature written in English is not as rich as in the other East African countries (Gromov 2015).

### 5.1. Two Anglophone Novels from Kenya

Among the vast production of Kenyan popular fiction, I have selected two novels. First, Meja Mwangi's novel “The Last Plague” (2000) narrates the events of the people of the village of *Crossroads*, who are haunted by an unknown spectre, who never shows itself nor is revealed. The ghost or the spectre, *Zimwi* ('an ogre' Morgan 2010<sup>21</sup>), represents ignorance about virus transmission which allows the virus to spread and kill people uncontrollably (Mutembei 2015: 68), manifesting itself as a recent plague

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<sup>21</sup> See also the plays written both in English and Swahili by Samwel Morgan: *The Beast* (Morgan 2005), and *Zimwi la UKIMWI* (Morgan 2010).

punishing humanity for its behaviour. Likewise, the Kenyan novelist Omar Babu in his novel *Kala Tufaha* ('He Ate the Apple,' 2007), tells the tragic story of Fumbwe who "eats the infested apple" (Kinara and Japhet 2016: 582), which recalls the concept of the original sin that brought upon humanity HIV/AIDS. The protagonist could not resist sexual temptation, abused young innocent girls, and died of AIDS, contextualizing HIV/AIDS in a moralistic discourse influenced by biblical traditions (Kinara and Japhet 2016). Fumbwe's punishment has also been compared (see Kinara *et al.* 2015: 66) to the predestined and punitive doom: "*kudra*" (fate/destiny, Mkufya 2004: 93) that strikes Ngoma, one of the characters in *Ua La Faraja*, with AIDS.

Second, Marjorie Macgoye's anglophone novel *Chira* (1997) narrates how "bad deeds bring about *Chira*" (Oruka 1990: 81):

*Chira* is a misfortune which befalls one because of an evil deed in the past - *gima rach matimoreni nyime ni mar rach ma isetimo chien*. It is also seen as a misfortune on one following one's conduct in breaking a taboo (Macgoye 1997: 69).

*Chira*, that if you did something forbidden (if you break a taboo), the evil would be seen in the wasting away of your body (Macgoye 1997: 46) [...] *Richo e makelo chira* - it is sin that causes the wasting disease. That is, you know... (Macgoye 1997: 49) [...] But there was a new culture of silence (Macgoye 1997: 51).

This novel illustrates how people are well aware of HIV/AIDS, but they prefer to talk about it by referring to its double: *Chira*.

In conclusion, anglophone novels from Kenya use metaphors to produce knowledge of AIDS, as Swahili novels do; yet they exploit metaphorical doubles to voluntarily deny or conceal HIV/AIDS in a culture of silence. Likewise, traditional practices are denounced as superstition in order to support modern medicine. In fact, what I call ping-pong effect, seeking a cure alternating between hospitals and traditional healers, who are involved to counteract evil spirits and curses, is also described; however, the healers are stigmatised as futile with the aim of encouraging hospital treatment.

Nevertheless, I will show that anglophone plays from Tanzanian illustrate a different landscape, wherein science prevails in the end, but local knowledge is not ignored.

## 5.2. Two ‘Ghost Stories’ in English: *Judges on Trial* and *The Monster*<sup>22</sup>

It is indeed common practice at the University of Dar es Salaam for the students of the Literature department to be assessed on the basis of fictional works they write, for example, a play, a poetry collection, or a short story. In the period between 2006 and 2008, a collection of plays and tales dealing with contemporary social issues was gathered and published by the university staff (Osaki and Noudeho 2010: vii-xiii). Not only does changing the language shift the meaning, but also changing genres, from novels to plays, for example, communicates philosophically in a different style; thus, in this section, I am presenting two plays from Tanzania written in English. “The Artist, the Ruler of society” (p’Bitek quoted in Osaki and Noudeho 2010: viii; Otieno 2021) criticizes the colonial and neo-colonial situation, confronting “Western epistemes from the inside” (Mudimbe 1988) which comes from writing in English (Osaki and Noudeho 2010).

The plays *The Monster* (henceforth M) (Chikoti 2010) and *Judges on Trial* (henceforth JT) (Nyoni 2010) are tales reproducing allegorical realities, which are set respectively in an “idyllic village in Africa” (M) and in the “fictional country of *Panajambo*”<sup>23</sup> (JT). Both suggest an “epistemology of return” (Rettovà 2016c), casting our minds into the mythical, precolonial and unpolluted Africa of the past tense.

HIV/AIDS is a “nameless Monster” (M 63) or “unknown Monster” (M 69), similar to a “beast or *Zimwi*” (Morgan 2010), who lives on “the sweet tea” prepared by a beautiful woman, a sorcerer who prepares magic potions and curses (M 66):

We have used every possible medicine in this village, starting from the roots of the tree to the highest leaves. Nobody has been cured (Chikoti 2010: 64).

The villagers, confronted with the failure of their herbalists, call a medical doctor from the town to bring his scientific knowledge to heal the extraordinary illness. The supernatural clashes with science, but the “awe—unknown” (Rettovà 2017) prevails, defeating both of them. The winner is the “sage” (Oruka 1990) and the choral character of the teacher, who shares his wisdom with the community, proposing a holistic epistemology of “dancing together” and “being human through humanity” (Senghor quoted in Rettovà 2007b; 2021). In fact:

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<sup>22</sup> This section is based on *Appendix 6: Two Plays in English: Judges on Trial and The Monster* in Nicolini (2021b: 324-326).

<sup>23</sup> From the Swahili saying “*penye ngoma ujue pana jambo*” (‘when you hear the drum beating, be aware that something is happening’). See also the proverb: “*Ukiona ndwee ikishindana na dawa, mganga sijisumbue, pana jambo litakuwa*” (‘When you see a disease struggling with medical treatment, doctor, don’t be upset, something will happen’, [swahiliproverbs.afirst.illinois.edu](http://swahiliproverbs.afirst.illinois.edu)).



If all of us stick together and sacrifice ourselves, then the monster will leave, but not in us” [...] “The unity you have shown me here should be induced in every villager. Each of you is a protector of the other (Chikoti 2010: 71).

The play ends with the communal chorus of the villagers singing and dancing together.

“The HIV/AIDS dilemma is referred to as a crossroads where characters have either to confess or face trial” (Mutembe 2015: 203). Therefore, what we attend to in *Judges on Trial* is an allegorical trial inside a courtroom where the play is set, and which takes place between Judge Noma and the ghost of *Panajambo*. The two characters embody the clash between dissonant epistememes: on the one hand there is the judge Noma, who is the representative of a Western education and financial system while, on the other hand, there is the Ghost Judge and the chorus of Ghosts, who tell a tale, singing as a story inside a story, which opens up new frontiers into the world of the supernatural:

Ghost Judge: [...] There is no way you can run away from the monster (AIDS) [...] It’s visible and sometimes invisible (Nyoni 2010: 108).

The story sung by ghosts has the same pattern as the fairy tale told in the Swahili play *Kilio Chetu* (‘Our Lament,’ MAF 1996). Likewise, the confession of the ghosts is similar to the skeletons’ explanations in I. Ngozi’s *Ushuhuda wa Mifupa* (‘The Testimony of the Bones,’ 1990), the first Swahili play on HIV/AIDS created in Tanzania in 1989.<sup>24</sup> The story narrates the arrival of a monster (HIV/AIDS) in a peaceful village. In the meantime, the ghosts confess their own sins, by explaining how they caught the virus before dying and becoming ghosts: raping, sugar-mummying, adultery, having sex with a witch doctor to get pregnant, prostitution, casual and unprotected sex: “I walked barefoot” (JT 111).

However, the cause of these bad deeds lies in the poor economic conditions of the villagers resulting from financial investments in international schools and NGOs. As a matter of fact, this money never reached the poor urban and rural areas of the country (JT 114-115). Although Western institutions as well as foreign development aid (from the IMF and the WB) and the government administration of loans are under attack, the progress of science is welcomed. In fact, *Panajambo* urges people to use condoms and thereby have safe sexual relations:

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<sup>24</sup> The two plays *Kilio Chetu* and *Ushuhuda wa Mifupa* are both included in the compulsory syllabus of Swahili literature for secondary schools and universities in Tanzania.

It is the monster who is killing you, put on shoes when walking and never fight the monster unprotected (Nyoni 2010: 112); I've never walked barefoot, I've always carried a protective shield (Nyoni 2010: 113).

Thus, witches (JT 108), omens (JT 113), and ghosts, as well as the unknown monster, appear in the play as elements naturally included in political and economic discussion. The ominous song is sung by the spectral chorus which predicts that “only ghosts will remain;” in other words, the future is foreseen as apocalyptic for the country (JT 116), while *sote tunalia* ‘we are all crying’ (JT 111).

The epistemic irreverence of these plays is clearly highlighted by “heteroglossic” genres (Bakhtin 1981) such as fairy tales and songs, which break the dialogues to integrate epistemic fractures, opening up the way to immaterial realities.

## 6. Lately, *Korona*, the ‘New Virus,’ has arrived...

On the 16<sup>th</sup> of March 2020 (Tarimu and Wu 2020) the recent pandemic of Covid-19, in Swahili *UVIKO-19* (*Umoja wa Virusi vya Korona* ‘the cluster of coronaviruses;’ BAKITA 2020), landed officially at Kilimanjaro International Airport (KIA) in the North-East of Tanzania. Currently, the pandemic seems to be extensively discussed in the social media as well as in poetry and songs that also circulate on the web (blogs, forums and other multimedia channels) such as *Shairi linalotoa tahadhari juu ya Ugonjwa hatari wa Corona* (‘The Poetry that warns about the dangerous disease of Corona,’ KIZARO TV);<sup>25</sup> *Shairi La Corona* (‘Corona Poetry,’ Life Vibes);<sup>26</sup> *Ushairi Kuhusu Korona* (‘Corona Poetry,’ UMATI)<sup>27</sup> (see also Nicolini 2021a); and *Kwaheri Corona* (‘Goodbye Corona’ on YouTube),<sup>28</sup> the musical performance by Mrisho Mpoto, a popular performer, poet and singer, featuring THT (Tanzanian House of Talent). The last video poem, deeply inspired by Nyerere’s socialist ideology of *ujamaa*, fosters unity, patriotism and nationalism to fight against Covid-19, which is “the patriotic duty of each individual toward the nation” (Otieno 2021: 6) and the health and welfare of the community.

Hitherto, it can be noted that *UVIKO-19* in Swahili communications is straightforwardly called *Corona* or *Korona*, and it does not match yet with any double, in contrast with European communications

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<sup>25</sup> Source: <https://www.youtube.com/watch?v=pqBYUdk4Ufc>

<sup>26</sup> Source: <https://www.youtube.com/watch?v=B57a0TdOgbk>

<sup>27</sup> Source: <https://www.umati.or.tz/index.php/umati-media/blog/95-announcements/145-ushairi-kuhusu-korona-covid-19>

<sup>28</sup> Sources: <https://www.youtube.com/watch?v=utyHbLAcE6U>

<https://afrikalyrics.com/mrisho-mpoto-kwaheri-corona-lyrics>

<https://www.youtube.com/watch?v=utyHbLAcE6U>; <https://afrikalyrics.com/mrisho-mpoto-kwaheri-corona-lyrics>

on Covid-19 that seem to discuss appropriately and sensitively the pandemic through “Fire metaphors” (Semino 2021).

Nevertheless, on the one hand, Tanzanian discourses on the pandemic illustrate that *UVIKO-19* is fully recognised as a pandemic generated by pathogens (e.g. *kidudu* in Mpoto’ song 2020) in contrast to what happened with *VVU/UKIMWI*. On the other hand, the clashing encounters between heterogeneous and divided treatments for the symptoms of Covid-19 are a core theme in communications about the pandemic. The “rival complementarity” (Mshana *et al.* 2021: 18), between modern medicine and traditional healing or religious healing, demonstrates the efficacy of both traditional herbal remedies in preventing or curing respiratory infections, and prayers to relieve people’s suffering; whereas, modern medicine is not always available to everybody, nor is it quick in offering effective health improvements; rather it is a long way from endogenous epistemologies of healing (Mshana *et al.* 2021). For instance, the treatment *kufukiza nyungu*, which is a steamed herbal concoction obtained from a mixture of local medicinal plants, and which is used to unclog mucus in patients’ throats, has always been effective in treating lung disease such as pneumonia – as explained by the novelist William Mkufya<sup>29</sup> (document emailed on 2-05-2021; see Nicolini 2021a). In addition to this, “Covid-organics,” which is a popular herbal treatment obtained from *Artemisia annua*, is imported to Tanzania from Madagascar (Richey *et al.* 2021). Thus, Tanzanian herbal strategies to deal with Covid-19 are a unifying strategy of pan-Africaness aimed not only to cope with the virus, but also to develop “South-South humanitarianism” among African countries (Richey *et al.* 2021).

Lastly, *UVIKO-19* has also entered the prose of Swahili novels such as: C. G. Mung’ong’o’s *Salamu kutoka kwa Popo: Hekaya ya Janga la Corona* (‘Greetings from a Bat: The Tale of the Coronavirus Calamity’, 2021). These examples identify *UVIKO-19* as a promising topic to be further examined through Swahili literary genres.

On the other hand, Halfani Sudy’s *Kirusi Kipya* (‘New Virus,’ forthcoming publication), the manuscript winner of the Safal-Cornell Kiswahili Prize 2021,<sup>30</sup> is another example of how the virus itself becomes a metaphorical symbol for contemporary social issues in the novelistic genre. According to Sudy<sup>31</sup>, the ‘new virus’ in Tanzania is drug trafficking and traffickers. Similarly, Ruhumbika’s novel (2002: 185ff) condemns the *janga* (‘calamity’) of *ushirikina* as superstition, black magic practice and

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<sup>29</sup> I acknowledge Mkufya for this document.

<sup>30</sup> <https://kiswahiliprize.cornell.edu/>

<sup>31</sup> Halfani Sudy, whom I acknowledge for the information (e-mail 18-03-2022), is a teacher of social welfare at the New Mafinga Health and Allied Institute as well as a young and prolific author of popular novels, especially thrilling crime fiction novels.

sacrificial killing (Rettovà 2021: 307-308; Mbogoni 2013); it also condemns the harvesting and trafficking of human organs (see also Mbogo's novel *Vipuli Vya Figo*, 'Kidney Trafficking,' 1996). For example, the character of the criminal *Padri-Sheik*, a black priest, who pretends to be a healer, rapes and kills his patients in order to export their organs (Ruhumbika 2002: 144ff).

## 7. Conclusions: clash of epistemes in relation to the treatment of illnesses in Swahili novels

Since the scope of this research has been to explore how literature copes with the encounters between diverse and divided perspectives in Swahili literature, an instrument that should be considered to guide literary critics, as Kezilahabi has taught us, is the “bifocal lenses” that interpret the African experience by including both pre and post encounters with the West (Kezilahabi 1985). However, literature has demonstrated itself to be capable of providing these lenses to its readers.

HIV/AIDS is a divisive disease, which gives rise to varied perceptions as well as divided realities, and which is understood through clashing epistemologies. Therefore, Swahili novels on HIV/AIDS can be depicted as a matrix of “intermittent clashes” (Nicolini 2022) wherein scientific positivism and modern medicine clash and cooperate with Afrocentric knowledge(-s), or else “African-centred knowledges” (Cooper and Morrell 2014). For instance, supernaturalism, divination and witchcraft practices are epistemological categories, which are not only included in literature by means of an “epistemology of indeterminacy and inclusion/complementarity” (Rettovà 2021: 314), but also accessible through epistemologies such as the “epistemology of marvel (*ajabu*)” (Rettovà 2021: 315), and the epistemology of extrasensory perception and paranormal cognition (Gyekye 1995: 201). These are a third “source of knowledge” (Gyekye 1995: 201) that can be disclosed by including paranormal and parapsychological phenomena as well as supernatural and mysterious events. Likewise, “epistemology of *miujiza* (miracles)” (Mkufya p.c. 18-10-2021) means knowing through natural and supernatural wonders and miracles.

From an aesthetic and linguistic analysis of literature, I have also detected an “epistemology of doubles” through metaphorical interpretations capable of doubling the reality. “Figurations have their own way of transmitting knowledge” (Vierke 2017: 153). Indeed, metaphors not only represent a meaning, but they also create meanings by reclaiming their epistemological status, as explained by Mersch's “epistemology of the aesthetic” (Mersch 2015; Vierke 2017: 138). Two classes of metaphors can be distinguished in literature. First are metaphors evoked to explain illnesses, which, as “the healthiest way of being ill” (Sontag 1991: 3), “overcome the detachment from subject to object” (Stacey 2020: 73). These metaphors are “lived reality” (Stacey 2020: 73) in the shape of natural or supernatural ontologies that can be found in what I classified as “descriptive-novels” (Nicolini 2022). Secondly,

illnesses as metaphor are instruments to lead disguised critiques. The ‘veiled speech’ of *mafumbo* (Vierke 2012), by producing a “gracious detachment from subject to object” (Stacey 2020: 73), denounces social issues in philosophical novels. For instance, Mkufya’s *Ukimwi wa Kijamii* (‘the AIDS of society,’ Mkufya 2004: 357) describes the weakened, alienated and traumatised African identity as well as *Ukimwi wa VVU* (‘the illness of AIDS transmitted by the HIV-virus’) interlinked with sex, faith and death, denounces religions imported into Africa and their negative attitude against sex and sexuality (Mkufya 2004, 2019; Nicolini 2022).

In addition to this, endogenous explanations for HIV/AIDS such as the traditional curses of *Chira*, *Bakuntumile* (Mutembei 2005) and *Kitigo* (Mauya 2017), which put scientific explanations on trial, are based on the criterion of a punishment for bad deeds that break with ancestors’ norms. This criterion is exacerbated by religions imported into Africa, which represent AIDS as the punishment for the sin of lust and sexual satisfaction. Swahili literature describes not only the clash between science and beliefs, but also an inter-clash of different beliefs: religious doctrines, traditional religious thoughts and spiritual beliefs. Nevertheless, if some questions against religion are silently mentioned in Mutembei and Mauya’s novels, set respectively in the Haya Christianized and Zigua Islamised cultures, critiques against the imported credo are loudly voiced in the novels of Mkufya, who wishes to free human minds from excessive morality, religionism and fanaticism.

*Par contre*, spiritual worshipping not only implies “human and non-human actor interconnectivity” that characterizes literature with an “aesthetic of proximity” (Iheka 2017: 22) and “animist materialism” (Garuba quoted in Quayson 2009: 160), but it also provides the lenses for an ecocritical reading of Swahili literature (Nixon and Ronald 2014). Indeed, spiritual entities intervene in human actions, keeping under control somewhat both human arrogance and pollution in order to preserve the natural environment (Egya 2020: 70). Hence, the metaphorical image of “*janga*” as ‘environmental destruction and/or ecological disaster’ is an admonishment to prevent the predicted calamitous future of humanity, whose ravaging nature obtains its self-destruction in the form of severe illness such as cancer (see Mbogo’s novel *Bustani ya Edeni* ‘The Garden of Eden’ 2002) (Nixon and Ronald 2014: 33), and pandemics such as HIV/AIDS and Covid-19. The authors of Swahili “new novels” are both concerned with and responsible for the future (Gromov 2014: 50), so they struggle to move the centre from “anthropocentrism” to “ecocentrism” (Acquaviva and Mignanti 2019: 75-76) with the goal of shifting the horizon from an apocalyptic to sustainable future in Africa. Thus, I argue that mixing diverse epistemologies in Swahili texts is also a drive for Afrocentric ecocritical thinking. African environmental knowledge conveyed in literature is a form of “postcolonial regional particularism”

(Caminero-Santangelo 2014: 6) that designs a counter epistemological narrative capable of challenging western environmental literature (Caminero-Santangelo 2014: 6).

Finally, witchcraft is an epistemology or a way of both knowing (Mosley 2004; Hallen and Sodipo 1997; Gyekye 1995) and crafting epistemologically the reality, which literature includes through magical realist devices and intertextuality, by inter-textualizing into the prose orality as well as conjuring spiritual and supernatural elements (Mwangi 2009; Khamis 2003; 2005; Cooper 1998; Warnes 2009; Syrotinsky 2007). The inclusion of supernaturalism, paranormal and parapsychological phenomena is a strategy of “epistemological irreverence” (Warnes 2009: 151) and “epistemic disobedience” (Mignolo 2009: 159) against “epistemicide” (Santos 2014: 154).

Therefore, I argue that “African-centred knowledges” (Cooper and Morrell 2014) as well as “cross-cultural theories” such as witchcraft (Hallen and Sodipo 1997) can be “interculturally translated” as “epistemologies of the South” (Santos 2014; 2018), which are partisans in the fight to validate non-scientific ways of knowing, oppressed by the hegemonic western science, through the weapon of literature (Nicolini 2022). Likewise, Swahili novels are partisans in the epistemic war of resistance against “epistemological fascism” (Santos 2014) that they fight by means of narrative style and the aesthetic of language. Furthermore, traditional healing paradigms also seem to encourage “South-South humanitarianism” among African countries (Richey *et al.* 2021).

To conclude, Swahili literature is a *clash-inclusive arena* wherein heterogeneous epistemologies, multiple knowledge, and plural rationalities co-exist together. Lastly, even though I have been arguing that the study of Afrophone literatures is a *sine qua non* to develop Afrocentric philosophical and epistemological discourses, I also argue that it is significant to compare and correlate inter-language and inter-genre literature when dealing with the epistemologies of pandemics.

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