

HIV/AIDS Prevention Interventions in Mozambique as Conflict of Cultures: the case of Dondo and Maringue Districts in Sofala Province

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Abstract

The purpose of this thesis is to report on issues concerning the continuous spread of HIV/AIDS in Mozambique in spite of the HIV/AIDS prevention interventions that are in place. This research was conducted in Dondo and Maringue districts, both situated in the Sofala Province. Sofala Province had higher prevalence that was 25 percent higher than the national average of 16.2 percent. An ethnographic research methodology was used in order to understand the reasons behind the continuous escalation of HIV/AIDS. It was significant for one to get to know the people that live in Dondo and Maringue, especially their daily lives, including their cultural practices as the driving force in people's behaviour and the manner in which people make sense of their daily lives. It was important to understand their cultural practices, because of their relevance to the issue of HIV/AIDS in terms of the manner in which cultural practices influence people in decision-making about their social life, which escalate to the issue of health practices. Although the concept of HIV/AIDS is acknowledged in Dondo and Maringue, *xirombo and*

phiringaniso were continuously used as local concepts in health issues and practiced as indigenous knowledge together with *kupitakufa*, *kupitamabzwade*, and *kupitamoto* rituals, and these practices were extended in dealing with HIV/AIDS. The acceptance of the Western medical interpretation of HIV/AIDS was low among the people in Dondo and Maringue. This reality is due to the preservation of local cultural knowledge in dealing with diseases. As a result, local medical concept and rituals becomes a challenge to the Western medical interpretation of HIV/AIDS and its health prevention and intervention strategies. In the context of Western medical interpretation of diseases the above local cultural practices are used as resistance against the western medical interpretations HIV/AIDS concepts. These cultural practices have preferences among local people in dealing with, and promoting HIV/AIDS health prevention interventions when compared with the public biomedical HIV/AIDS concept and the general biomedical practices. In conclusion this thesis suggests that there is a need for integration of these cultural practices within the Western medical interpretation, prevention and intervention strategies in dealing with the HIV/AIDS pandemic and its concerns at a local level.

Key words: Mozambique, HIV/AIDS, biomedical approaches to HIV intervention, cultural resistance, indigenous knowledge systems, *xirombo*, *phiringaniso*, *kupitakufa*, *kupitamabzwade* and *kupitamoto*.