of Booths (Lange, The Dying and Rising God in the New Year Festival of Ifẹ. In: D. Lange, Ancient Kingdoms. Dettelbach 2004: 353 f., 369). Investigations into the Ọbamerì group – and other cult groups – and more attention paid to recently published works would have allowed the author to conceive of the festival as a joint celebration of more than one cult group, and to consider the palace and, in particular, the ancient Ilégbò as an integral part of the sacred space traced by the propitiatory activities of the *òrìṣà* devotees.

The most important festival of Ilé-Ifẹ̀ from a comparative perspective is the Edì festival dedicated to Mọrèmi, the Ifẹ̀ heroine who went to the Ìgbò and discovered that these people attacked the Ifẹ̀ by wearing masquerades (203–223). Olúpọ̀nà appropriately indicates that during the festival the Oluyare represent the Ìgbò, but he ignores that in their own perception the Oluyare are not enemies but friends of the Ifẹ̀ and that in addition they are allies of the people of Ọbamerì and Odùduwà. Since earlier authors suggested that the female deity Mọrèmi is none other than Miriam, the sister of Moses (J. A. Ademakinwa, Ife, Cradle of the Yoruba. Lagos 1958/II: 4; S. Biobaku, The Origin of the Yoruba. Lagos 1955: 12 f.), an in-depth description of the festival with similar attention devoted to the activities of the other cult groups would have been expedient. In addition, scholars of comparative religious studies would certainly have appreciated a critical discussion of the correlations suggested earlier. Suffice to say here that, apart from the important topic of Yorùbá origins, attention to the current feminist approaches to the biblical Book of Exodus and to debates concerning the historicity of the Exodus account in the Hebrew Bible should have induced a scholar of religions to compare the prophetess Miriam as depicted by her song (Ex 15:20–21) with Mọrèmi, the Ifẹ̀ heroine. Build on solid scholarship, such comparison would certainly have attracted more attention to the traditional cults of Ilé-Ifẹ̀ than considerations relating to the threatening encroachment of radical forms of Christianity.

Though Olúpọ̀nà points out the central role of the sacred king for the traditional civil religion of the town, he does not offer any detailed description of the palace organisation. He contents himself with mentioning that the Ẹmẹṣẹ̀ or palace servants provide sacrifices for the different cult groups, but he omits any reference to the former organisation of the inner palace, the Ilégbò. Not distinguishing between the three different sections of the palace officials – Ọ̀mìrìn, Òógun, and Ìlọsìn – and not differentiating between the corresponding three blocs of cult groups in the town, the author does not clarify the organisational structure of the town, although it was previously described by Bascom (1969: 30–38, 77–82) and others. His undifferentiated references to various categories of palace officials, participating in the performances of the cult dramas of the festivals, constitutes another serious handicap for understanding the precise relations between the king, the palace, and the cult groups of the town (129, 170; see Bascom 1969: 30–38, and Lange, Preservation of the Canaanite Creation Culture in Ifẹ. In: P. Probst and G. Spittler [eds.], Between Resistance and Expansion. Dimensions of Local Vitality in Africa. Münster 2004: 125–155). A king who no longer respects the religious significance of the whole palace organisation is certainly even more at odds with his inherited role as the custodian of tradition than a king who – as depicted by the author –merely chooses by personal conviction to be a devout Christian.

Finally, some attention to the renewed debate on transcontinental relations would have been helpful for allowing the reader to look at Ilé-Ifẹ̀ in a wider perspective. In reference to Leo Frobenius, Olúpọ̀nà briefly notes the outdated theories of migration from the Mediterranean world via the Atlantic Ocean, and rightly rejects them as a chimerical search for the "lost city of Atlantis." Arguing in favour of local creativity, he dismisses theories of immigration for their denial of African inventiveness (14). Though one does not exclude the other, it is certainly an ill-founded argument to claim that historical research should stop at the point where it does not confirm what one would like history to have been. Moreover, theories of immigration do not deny indigenous creativity any more than Evangelical fervour can be stopped by pointing out its foreign nature. Quite to the contrary, Christian intolerance is more likely to be disarmed by the suggestion of common historical roots in both traditions than by the declaration of insurmountable differences between a supposedly strict indigenousness of Ifẹ̀ cults and the extraneousness of Christianity. In this respect, Olúpọ̀nà could have relied on a number of Yorùbá authors such as Samuel Johnson (History of the Yorubas. London 1921: 3–7, 148) and Saburi Biobaku (1955: 12 f.), who suggested that the Ọ̀yọ́ tradition of origin and parallel legends concerning Noah, the Flood, and Moses's sister Miriam bear witness to common origins in the Near East. Moreover, apart from producing a tolerance-inspiring curiosity in the Christian intellectual *avant-garde* of Ilé-Ifẹ̀ with respect to their own cultural heritage, an open and constructive discussion of this issue is also likely to promote – while there is still time –intensive investigation of all aspects of Ilé-Ifẹ̀'s traditional culture and its ancient civilisation.

To sum up Olúpọ̀nà provides a remarkable description of the traditional culture of Ilé-Ifẹ̀ and makes a flamboyant plea for more tolerance and care for the town's illustrious legacy. Though there are some shortcomings in the author's perception of the cult groups, the festivals, and the palace organisation and his restrictive conceptions of Time and Space, his systematic survey of the city's ancient religious heritage and his skilful usage of Yorùbá terminology and oral ritualistic texts make his book an appreciated addition to the few comprehensive accounts of the vanishing traditional culture of Ilé-Ifẹ̀.

Dierk Lange

Parsons, Ross: Growing Up With HIV in Zimbabwe. One Day This Will All Be Over. Woodbridge: James Currey, 2012. 197 pp. ISBN 978-1-84701-048-3. Price: £ 40.00

Parsons, a Zimbabwean child psychotherapist and anthropologist, has created an ethnographic description of children living with HIV while growing up in a small Zimbabwe town under conditions of extreme adversity.

https://doi.org/10.5771/0257-9774-2013-1-349
Generiert durch IP '3.15.240.141', am 30.07.2024, 01:45:25.
Das Erstellen und Weitergeben von Kopien dieses PDFs ist nicht zulässig.

His aim was to understand HIV prevention, treatment, and care from the standpoint of these children and their caregivers. The opening sentence of the preface sets the tone of the book: "The following is a work haunted by suffering and grief" (vii). The suffering and pain witnessed explain the author's emphasis on an "ethic of constraint," implying that immediate recourse to theoretical analysis and policy formulation seems premature and inappropriate. Instead, Parsons invites the reader to take an "interpretive pause," an idea borrowed from Marilyn Strathern, that is "a form of deliberate hesitation before the headlong rush to policy and practice" (15).

In order to present as full a picture as possible of the lives of children growing up with HIV, Parsons closely observed their lives within their families, at clinics, and in churches. He also regularly observed pediatric care offered at a local hospital, interacted with the children's health care providers, interviewed traditional and faith healers, closely followed local media, and studied the existing scholarship on social, cultural, and historical issues shaping the children's lives. Much of his fieldwork focused on a support group of HIV-positive children, which met weekly for more than four years. He developed close relationships with 13 children and their caregivers, many of whom were also HIV-positive. Over the years, these relationships were transformed from being therapeutic associations with clients and ethnographic affiliations with informants to close social bonds of fictive kinship (173). He became more than the detached observer and analyst common in classic ethnographic and psychoanalytic practice. The extent of his involvement in the lives of the children is rare in anthropological studies and seems to be the appropriate choice, when exploring the suffering of children within the context of a collapsing health care system and a country in absolute crisis, when emotional distance and detachment is simply inappropriate.

The "Introduction" is followed by a description of the study site, Mutare, a border town in eastern Zimbabwe, an introduction to the children he came to know, as well as a summary of the study's methodology (chap. 2). Subsequently, children's experiences of care within their families and kin groups are explored (chap. 3), followed by a description of children's experiences of illness (chap. 4). Afterward, ideas about faith and healing are discussed (chap. 5) and children's experiences of death, dying, and grief are described (chap. 6). An epilogue with preliminary thoughts about the wider significance of the study concludes the book (chap. 7). This publication is rich in detail and themes; I will highlight some of them here.

Parsons informs the reader that the children, with few exceptions, were being cared for by their mothers or their mothers' relatives, what seems unexpected in patrilineal societies. He argues, drawing on the existing scholarship of Shona kinship, that idealized structures of relatedness are negotiated considering various factors. When family elders discussed who should take care of children who had lost at least one of their biological parents, their decision was influenced by the dire economic and social conditions, as well as by the availability of potential caregivers. There simply were not many people left to look after the children because relatives had passed away, in many cases because of HIV/AIDS. "This is a domestic, familial landscape of wholesale death, of absence and of cumulative bereavement" (79). When the mother and maternal kin are selected as caregivers, it means that they are cared for by kin more distant to them than their paternal kin, which often translates into the experience of not receiving the same level of care as other children in the same household. Parsons associates this, to some degree, with the common understanding that the care of children is an "investment" and, as one informant told him, that "[i]t is wise to wait and see if they are going to survive before putting a lot of resources into them" (89). Considering the short life expectancy of children living with HIV, caregivers may allocate their scarce resources to other children. Child fosterage is widely practiced in southern Africa, and I wish the author had made a comparison of children living with HIV with children who are not HIV-positive who are also brought up by their maternal kin. Most likely, they also experience lesser care than the biological children of their caregivers, e.g., because of conditions of extreme scarcity prevailing in Zimbabwe. The experience of HIV-positive children in the households of their maternal kin may also be related to the widespread stigmatization of HIV and AIDS, revulsion for the physical symptoms, and fear of being infected with HIV. Parsons refers to some of these issues but could have done it more systematically. Parsons argues that the perceived low level of support provided by caregivers encourages the children to develop and maintain fictive kinship relations in churches, hospitals, and schools. These are an additional possible source of support and care. The author himself accepted invitations to become fictive kin. The ultimate form of fictive kin for the children, according to the author, is God the loving father and Jesus the ultimate caregiver. The children expect to be supported by them. This marks a major shift from older ethnographies, where spirit elders are understood to be intensely involved in everyday life.

Access to support and care is made more difficult for the children, because of the stigmatization of the disease. Children are reluctant to admit their HIV status. However, an "HIV infection is lived as an intense secret, often even within domestic spaces where its existence is known to all … [T]he infection is everywhere inscribed and the secret everywhere observed" (92): the children have to get their medication, they have to be reminded of doctors' appointments, and they keep hospital notebooks. With frequent bouts of disease, their physical appearance conforms to the stereotypes of someone living with HIV and makes it even more difficult to hide the infection. The children cautiously try to pass as "normal" but this a nearly impossible task. Antiretroviral treatment prevents, or at least delays, their physical death but only marginally addresses their social suffering, which sometimes is akin to social death. This may explain why the children tend not to view the drugs as positive, but rather dislike and associate them with negative meanings, measuring them against the more immediate demands of their social worlds.

Their Christian faith and the fellowship experienced in churches are more important for the children than bio-

https://doi.org/10.5771/0257-9774-2013-1-349
Generiert durch IP '3.15.240.141', am 30.07.2024, 01:45:25.
Das Erstellen und Weitergeben von Kopien dieses PDFs ist nicht zulässig.

medical treatment. Churches are ubiquitous and belief and devotional practices are a daily feature in the children's lives, though they struggle with theodicy, trying to remain faithful to a belief in the benevolent and all-powerful God in the face of extreme suffering. They often conclude that their pain must be due to their lack of faith, a common explanation for failure in Zimbabwean Pentecostal and charismatic churches. At times, this understanding motivates them to stop treatment with antiretroviral drugs as the ultimate act of faith, to be rewarded by a cure.

The children in Parsons' study had very low expectations for their future; one of them said, "How long will it be before I die?" (153). They encountered death daily through multiple experiences of bereavement. In the unpredictability of their lives, when death was ubiquitous and could come any time, they felt dislocated and alone, identifying heaven as their home and longing to be there. Parsons experienced that children chose, at some point, to withdraw from treatment, deciding to end their struggles. In a life filled with pain and suffering, death is a relief. Such an assessment of reality is not just unique to children living with HIV, but is common among their caregivers too. At the funeral of one child, the mother said that "one day this will all be over. After all, who am I now that my child has gone" (169). Parsons adopted this quote as the subtitle for the book. Someone unfamiliar with this ethnography might interpret this quote as an expression of hope. The reader, however, knows that this understanding of hope is quite different than initially thought.

Parsons struggles to conceptualize and analyze his fieldwork experience and comes to the conclusion that there is no existing theory suitable to assist in an interpretation of the pain and suffering experiences of these children and their families. He argues that theorizing the Holocaust and mass deaths in Hiroshima and Nagasaki has been helpful to make sense of his fieldwork experience, but also exercises the "ethic of constraint" and does not attempt to develop detailed theoretical analysis. He also questions Western psychotherapy, with its emotional remoteness, and other profoundly cultural practices, profoundly alien to the southern African context, as offering little to the children. He also challenges anthropologists to ponder how to conduct ethnographic research of extreme pain and suffering.

As with any other study, this one has certain shortcomings. At times, the author leaves questions unanswered. For example, on page 1 he mentions that most HIV-positive children in Zimbabwe die before the age of five, even when they are enrolled in antiretroviral treatment. As the children in his study are of an adolescent age, they seem to be outliers and perhaps not representative of children living with HIV in Zimbabwe. Why is this the case? What distinguishes them from others? There are also a couple of factual errors in the text. For example, in footnote 2 on page 18, he writes that San live today in Namibia and Angola, forgetting the San in Zimbabwe (e.g., in the Ndolwane area) and Botswana. Similarly, in footnote 3 on page 20, he states that the term "Shona" was applied to *all* native groups in Zimbabwe, not mentioning the Ndebele. Does he imply that the Ndebele are not fully native? I wish he had also explained more about his own background. He mentions being Zimbabwean, though not fluent in Shona, relying on interpreters. At the beginning of his fieldwork, he seemed to have been quite naive and unfamiliar with local customs. For instance, he initially encouraged everyone to call him by his first name (79), something that a Zimbabwean should have known was inappropriate, considering his role and status, as well as expectations toward him. More detail on the researcher would have enhanced the reader's trust in the accuracy and validity of his observations and thoughts.

At times, the author promises something without delivering it. For example, on page 53, he says that children profoundly challenge current ideas about child rights, child-rearing practices, and the mental well-being of the young, but he fails to explicitly describe how these ideas are challenged. Sometimes he tends to overinterpret the fieldwork data. For example, he interprets a strong reaction of the public to a meat vendor who was rumored to have sold monkey meat in terms of the food taboo, i.e., the Shoko/baboon clan was outraged to eat their totem. He says that the "reaction only makes sense" (57) if many of the people belonged to the Shoko clan, but there are also other explanations to this reaction, e.g., being cheated.

However, these shortcomings are minor and do not diminish the quality of this ethnography's scholarship. This ethnography is perhaps the best study of chronically ill children since Myra Bluebond-Langner's "The Private Worlds of Dying Children" was published by Princeton University Press in 1978. This publication is excellent reading for both undergraduate and graduate courses in anthropology, sociology, psychology, religious studies, and the health professions. I am looking forward to future publications by this promising author after he has taken another "interpretive pause." Then, he may move beyond the "ethic of constraint" and come up with more advanced theoretical analyses and policy suggestions that were impossible to formulate at the time he wrote this book.

Alexander Rödlach

Perullo, Alex: Live from Dar es Salaam. Popular Music and Tanzania's Music Economy. Bloomington: Indiana University Press, 2011. 459 pp. ISBN 978-0-253-22292-3. Price: $ 27.95

Diese Buch ist das Ergebnis 20-jähriger Erfahrung mit der Musikszene von Dar es Salaam. Perullo hat schon seine Dissertation und die Aufsätze auf dem Weg dahin zu diesem Thema verfasst. Hier sind sie zusammengefasst in einem Band zu einer Ethnografie der Musikindustrie oder besser vielleicht eine Ethnografie der Ökonomie der populären Musik. Partiell bedient sich Perullo dabei der marxistischen Terminologie von Arbeit, Ware und Warencharakter, ja Verdinglichung. Er kreiert aber auch seine eigenen Termini, wie den der "creative practices", die auf ihre Praktikabilität hin zu überprüfen sein werden. Musik sieht er als eine anwachsende wirtschaftliche Ressource besonders für die Länder, die sich im gesellschaftlichen und wirtschaftlichen Übergang befinden, ausgelöst durch

https://doi.org/10.5771/0257-9774-2013-1-349
Generiert durch IP '3.15.240.141', am 30.07.2024, 01:45:25.
Das Erstellen und Weitergeben von Kopien dieses PDFs ist nicht zulässig.