PARTICIPATORY ACTION RESEARCH AS A FORM OF MUTUAL AID AND SELF-HELP IN MALAWI

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ABSTRACT

This article examines a participatory action research project that attempted to respect the principles of shared control and the conceptualization of mutual aid/self-help as: “The recruitment of peers in a non-hierarchical setting, and the sharing of common experiences.” All too often the interventions of non-governmental organizations in developing countries like Malawi, Sub-Saharan Africa, represent an outsider’s top-down approach that shows little respect for indigenous ways of knowing. The Teachers, Children, AIDS, Photovoice Project formed an attempt, instead, to honor local knowledge as U.S.-based researchers and Malawian teachers co-constructed culturally comprehensible HIV/AIDS prevention strategies to be owned by the teachers as knowledge-makers in their own right. Teachers and children engaged with educators from the United States in classroom discussions that reflected personal experience of HIV/AIDS and dispelled common myths, creating a mutual aid learning community in the process. Empowered, one teacher wrote the new strategy of teacher-authored HIV/AIDS big books developed from personal photos into national curriculum.

INTRODUCTION

This article follows Borkman and Schubert’s (1994) conceptualization of participatory action research (PAR) as a strategy for studying self-help groups
internationally in developing countries. Focusing on self-help/mutual aid in developing country settings as a community process draws on an old but often under-developed idea. Mutual aid/self-help has been defined as a participatory process of sharing common experiences, situations, or problems through which knowledge and experience are brokered in getting help, giving help, and learning to help oneself (Borkman, 1999). Such initiatives are voluntary in nature with the primary focus on emotional and practical support and information exchange, and are “especially salient during periods of social fragmentation and unrest . . . characterized by loss of relatedness and alienation” (Chapman, 1997, p. 150).

While the development of contemporary self-help groups has been linked with the 1935 founding of Alcoholics Anonymous in the United States (Borkman, 1997), the seeds of self-help/mutual aid as we know it today were sewn in the societal changes of the 1970s. Since then, the self-help movement has mushroomed to include groups for almost every presenting problem that clinicians confront, with millions of members worldwide (Toro, Zimmerman, Seidman, Reischl, Rappaport, Luke, et al., 1988). As Davison, Pennebaker and Dickerson (2000) describe it, “through self-help groups, millions of Americans attempt to overcome addictions, discuss innovations in insulin treatments, grieve for the loss of a breast, or share fears about the possible progression of HIV” (p. 205). These examples, however, refer to a conceptualization of self-help/mutual aid that recognizes group intent to problem-solve, but defines “self” as an individual person, and focuses on manifestations taking place in the developed West (North America, Canada, Europe). Self-help/mutual aid in developing countries like Malawi takes very different forms.

This article builds upon Borkman’s advancement (in the introduction to this volume) of notions of self-help/mutual aid beyond individuals to communities, and beyond developed to developing countries. It examines mutual aid/self-help articulated through a PAR design that respects the principles of shared control as outlined by Chesler (1991), and conforms to Gidron and Chesler’s (1994) conceptualization of self-help/mutual aid as: “The recruitment of peers in [a] . . . non-hierarchical setting, and the sharing of . . . common experiences as the basic building blocks for . . . self-help” (p. 3). Malawian teachers and U.S.-based researchers came together to fulfill the functions of community that characterize mutual aid/self-help efforts. The resulting Malawian learning community provided participants with a locus for the development of culture and identity, in this case a culture of change and set of identities as knowledge-bearers and knowledge-makers that fostered the development of culturally comprehensible HIV/AIDS teaching materials. The Malawian learning community further provided a social support network to scaffold the efforts of individuals in a time of crisis and change. Malawian teachers had been charged by their Ministry of Education to teach about HIV/AIDS in all Standards 1-8, yet lacked the materials, as well as the cultural climate, to facilitate doing so.
Finally, the article examines the role of professionals as members of a mutual aid/self-help community, particularly as regards the sharing of power across possible hierarchies of status. The Malawian learning community served as a venue for empowerment that improved the skills of individuals as well as the quality of the social services provided. When the U.S.-based researchers departed the Malawian setting, the knowledge, expertise, and climate for facilitating change stayed with the teachers, one of whom advanced the empowering technology of teacher-authored instructional materials into national curriculum revision. Such a process of change mirrors Freire’s (1970) notion of “conscientization” within communities of oppressed workers in South America.

The Teachers, Children, AIDS, Photovoice (TCAP) project utilized PAR as a form of mutual aid/self-help to explore and expand upon health literacy for HIV/AIDS prevention and treatment among Malawian teachers and school-children, and through them, into their families, villages, and nation. TCAP’s most important function, however, was the development of a Malawian learning community which empowered teachers to transcend monumental barriers to success in teaching about HIV/AIDS in their classrooms and schools. Malawian cultural practices and a lack of medical care and accurate medical information, along with a general inability to read difficult text in English (a second national language and the language of most health information there), create barriers for the people in fully understanding the prevention of illness, care of illness, and treatments. Building on collaborative problem-solving relationships that pre-existed this research, and forging new ones among U.S.-based researchers and Malawian teachers and children, participants generated new knowledge and facilitated a culturally comprehensible strategy for teaching about HIV/AIDS prevention. All too often the interventions of non-governmental organizations in developing countries represent an outsider’s top-down approach that shows little respect for indigenous ways of knowing. TCAP attempted to honor local knowledge by crafting research strategies that could be owned by knowledge-makers on the ground in Malawi.

THE MALAWIAN CONTEXT

Known in the travel guides as “Africa for beginners” or “the warm heart of Africa,” Malawi is recognized for the warmth of its welcome. The tender affection so easily awarded to strangers draws on a strength now tested to the limits, however. Landlocked and sharing borders with Mozambique, Zambia, and Tanzania, Malawi is one of the poorest countries in the world, with three-quarters of the population living on less than $2 a day (Human Development Report, 2005). Alongside poverty, Malawi faces a devastating AIDS epidemic that has caused over 650,000 deaths, and which continues to be responsible for the deaths of up to ten people every hour (Reuters New Media, 2005; The Chronicle, 2005). AIDS is the leading cause of death among adults, and a major factor in the
country’s life expectancy of only 38.5 years. Malawian children stand at particular risk of HIV as more than 10% of children ages birth to 14 test positive, themselves, with the majority of infections occurring among 13- to 16-year-olds. Prior to 1994, AIDS education could not be undertaken without fear of persecution by the regime of Kamuzu Banda, Malawi’s first elected leader who proclaimed himself “president for life” and reigned unopposed for 30 years (Englund & Mapanje, 2002). However, in 2004 with the election of new President Bingu Wa Mutharika, Malawi’s first National AIDS Policy set the goal of providing prevention, treatment, care, and support services, and called for a multi-sectoral response. Social and practical considerations often stop people from taking measures to prevent infection even when they know the risks involved, and between this and the lack of human and financial resources available, prevention campaigns have so far failed to curtail the epidemic. It has been suggested that efforts to prevent the spread of HIV in Malawi need to be more flexible to the cultural contexts within different regions. There are six main languages spoken in Malawi, and within each language group there are culturally distinct ways of conveying prevention messages. It has also been recommended that as the majority of HIV infections occur among young people, greater emphasis should be placed on HIV education in schools. Despite the existence of HIV clubs at every level Standards 1-8 (analogous to U.S. grades 1-8), school-wide assemblies carried out by the children on this topic, and a mandate to teach all children about HIV/AIDS, Malawian schools currently lack the time, resources, and training needed to carry out adequate sex education (Bennell, Swainson, & Hyde, 2002). Furthermore, the government of Malawi to date will not officially endorse any education program that promotes the use of condoms.

**RESEARCH METHODS**

Any discussion of research methods that involve researchers from a developed country working alongside individuals in a developing country setting must begin with a careful consideration of culture and relationships. Even the ways in which relationships are understood differ radically by culture, and it is crucial to understand that there is no “Malawian culture” per se. Within the continent of Africa the boundaries of countries are not ethnic ones, but those imposed by colonialism. Thus, no country’s boundaries capture an ethnic or language group. Within Malawi, 17 different language groups exist, and in Domasi Province, where this research took place, three distinct and (often at odds) cultural groups exist side-by-side: the Chewa, the Ngoni, and the Yao. Further, it would be impossible to capture the culture of any one of these groups, as Rosaldo (1993) warns us. Of closest study, then, within TCAP, is the emerging “culture” or community of practice that emerged as U.S.-based researchers attempted to join with Malawian teachers in an effort to both accomplish a tangible goal—the
creation of culturally comprehensible HIV/AIDS instructional materials—while at the same time sharing power as peers.

A few definitions of terms are helpful here. Within the context of TCAP “peers” are defined as Malawian teachers and U.S.-based researchers who had known and worked with each other on various educational projects at Domasi Demonstration Primary School every summer for a period of at least 5 years, or had been introduced to each other by individuals they had come to know in this way and for this period of time. The “Malawian learning community” is defined as this group of peers—Americans and Malawians—that came together in summer 2007 to devise strategies for solving the problem of a lack of culturally-comprehensible HIV/AIDS instructional materials for use by teachers in their Standard 1-8 classrooms.

Documenting such a project allows us to study both the process and its outcomes, although we use the term “outcomes” loosely. TCAP outcomes are still emerging, and in Malawi, at least, TCAP is still very much a work in progress. Documentation strategies used (and still in use) include: standard ethnographic methods of participant observation (Hammersley & Atkinson, 1983; Smith, 1978); life history methods, prompted recall, and “power sensitive conversations” (Bhavnani, 1993; Briggs, 1986; Gluck & Patai, 1991; Haraway, 1988; McCall & Wittner, 1990); fieldnotes (Geertz, 1973, 1983; Glaser & Strauss, 1967; Van Maanen, 1988); photo- and video-ethnography on the ground, as well as Malawian teachers’ e-mailed accounts of developments since that time. Teacher accounts are taken as analyses in their own right (Rosaldo, 1993). Case analysis (Abbott, 1992; Ragin & Becker, 1992) forms an ongoing analytic tool.

TCAP had its genesis within a social and political context of turmoil: a devastating HIV/AIDS epidemic and a controversial president’s mandate for AIDS education in the schools. We argue that TCAP’s success in such a context resides within the long-term investment in change shared by U.S.-based researchers and Malawian teachers, which is characterized by a commitment to sharing power and empowerment.

**Research and Relationships Prior to TCAP**

Following Gidron and Chesler (1994), TCAP participants were “recruit[ed] and mobiliz[ed]...in an informal and non-hierarchical setting.” The recruitment of Malawian teachers had in many ways taken place through self-nomination in years prior to TCAP itself. Relationships among Malawian teachers in the Domasi region and U.S.-based researchers had been initiated in summer 2004, when a Fulbright-Hays grant funded a teacher exchange that brought educators from the states to Malawi, and two Malawian teachers to the United States. During summer 2004 and the Malawians’ visit the following fall, educators from both sites forged a commitment to a long-term collaboration aimed to promote change and understanding across both sites. The U.S.-based researchers pledged to return
to the Domasi region each summer accompanied by students from their respective universities (Virginia Polytechnic Institute and State University, and later Radford University, and North Carolina Agricultural and Technical State University) for the purpose of providing support for the projects requested by Malawian teachers, in exchange for the opportunity to learn about teaching, research, and sustainable change in a developing country setting. In the years since that time, students and faculty from each partner university had returned to fulfill their promise to Malawian teachers. A U.S.-based researcher who had this background of summers working alongside teachers at Domasi Demonstration Primary School was situated to draw on insider perspectives on teacher needs. She corresponded with Malawian educators between summers, and particularly with those who served as spokespersons and cultural interpreters among their colleagues. One of these was Standard 7 teacher Gift Kawiza, one of the two Malawian teachers who had visited the United States for several weeks in fall 2004.

The U.S.-based researcher’s awareness of power distance boundaries (Hofstede & Hofstede, 1997) in Malawi—male/female, administrator/teacher—tempered her ability to hear teacher voices in the “power sensitive conversations” (Bhavnani, 1993) they shared with her. Awareness was further heightened just a day before introductions at the Demonstration School when a colleague at Malawi Institute of Education chatted with two of the U.S.-based researchers about the project, and cautioned that the unspoken cultural prohibition of females to refuse men had consistently foiled attempts to ameliorate the AIDS epidemic.

**TCAP Inception, Spring 2007**

In spring 2007, the U.S.-based researcher who had collaborated over time with Malawian teachers in the Domasi site suggested to the principal investigator and two other colleagues the Malawian teachers’ request for help in developing HIV/AIDS classroom materials that would make sense within their socio-cultural context. The principal investigator, herself a medical researcher, inquired more deeply about this need for HIV/AIDS instructional materials, expressed interest, and recruited the university researcher with experience in the site, along with two other U.S.-based researchers, to join her project.

The principal investigator drew upon her own knowledge in the field of health literacies in framing the research problem, and upon the in-country experience of the researcher familiar to Domasi teachers in selecting a PAR design (Chesler, 1991; Wadsworth, 1997, 1998) for empowering teachers to explore and expand upon their knowledge on the prevention and treatment of HIV/AIDS. Empowerment of teachers was key to project aims from the outset, as researchers recognized the problematic situation of HIV/AIDS education, and its purveyors, the teachers, in the Malawian context. The education sector, like all sectors in Malawi, continues to lose people to HIV/AIDS. The loss of qualified teachers, reduced
productivity, increased absenteeism (on nearly every day a teacher is absent visiting another in the hospital), and low morale have had a direct impact on the quality of education, which still reels to meet the demands of the country’s 1994 universal public education initiative. Despite aid from the United States and other donor countries, the pupil:teacher ratio is typically 125 to 1, and many teachers possess only a Standard 8 education, themselves (at the Demonstration School, however, most teachers hold a Malawi School Certificate of completion through Standard 12, and a few have taken some college courses). Further, teachers as a group are more affected by HIV/AIDS than the general population. At the end of 2005, an estimated 91,000 children in Malawi were living with HIV, and over half a million had been orphaned by it (UNAIDS, 2008). Teachers who make only about a dollar a day still hold regular jobs, and as regular wage-earners are often required by families to bring up the children of deceased siblings. It is not uncommon for teachers to be supporting their own families of several children, plus three or four more that they have taken into their households.

While awareness of HIV is high in Malawi, taboos and stigma limit open conversation about it. In order for outsiders like the U.S.-based researchers (it is critical that researchers recognize their outsider status, cf. Matua & Swadener, 2004) to be useful to teachers facing the mandate to educate children about HIV/AIDS, they needed these teachers’ voices. Malawian children and their families honor and respect teachers, and often look upon them as surrogate, if not actual, parents or leaders. Drawing on teacher knowledge of the context and cultural norms for acceptance of the information to be delivered, U.S.-based researchers would become learners at the teachers’ sides, and assist by providing simple technologies for generating ideas, and the needed materials.

Needed was a PAR design, “a special form of action research in which some of the people in the community or group under study, participate actively with the researcher throughout the research process and action phases of the project” (Whyte, 1991, p. 20). PAR involves all parties in actively examining current action which they experience as problematic in order to change and improve it, and has been used to aid self-help/mutual aid groups in expressing grief and anger in order to heal and/or generate solutions to problems. Through PAR, researchers from outside communities and local actors/insiders work to develop relationships of trust and reciprocity “through which praxis not previously envisioned by either can materialize” (McIntyre & Lykes, 2004, p. 57). Within PAR relationships among researchers and participants become “creative sites for knowledge creation and participatory processes of meaning-making and change” (p. 57). PAR can involve differing amounts of power sharing from minor to moderate to extensive.

While TCAP would evolve in the Malawian context and U.S.-based researchers could not fully predict the level of power sharing that would unfold there, they knew that many decisions would need to be made prior to travel in order for them to bring the needed supplies to the Domasi site. As much as possible,
however, U.S.-based researchers worked through e-mail contacts with teachers in-country to “member check” their ideas prior to implementation.

The university researcher with experience in the site provided contact information, and e-mail correspondence ensued among U.S.-based researchers and Malawian teachers across the year prior to travel. The researcher with experience in the Domasi site suggested teacher-authored big books (giant, poster-size books used in Western classrooms for early literacy instruction, equally useful in classrooms of 125 or more children struggling to learn English) as a technology that might make sense within the Malawian context. Malawian teachers were familiar with big books, as several had been brought to their school by this researcher and others in previous summers. Although the teachers had never created any big books themselves, Malawian teacher collaborator Kawiza confirmed in an e-mail letter that teachers might like to do so.

That decision made, U.S.-based researchers searched for a methodology to facilitate teachers’ authorship of HIV/AIDS big books, and settled on photovoice (Wang & Burris, 1994). The U.S.-based team wanted a strategy that would facilitate Malawian teachers in recognizing and employing their own ideas, voices, and analyses of the problem of communication about HIV/AIDS in Malawi, despite the pervasive temptation to look to U.S.-based researchers for guidance. Photovoice engages individuals in taking pictures that allow them to document and reflect upon “the everyday social and political realities that influence their lives” (Wang, Wu, Zhan, & Carovano, 1998, p. 80; see also www.photovoice.org). Photovoice situates authorship and ownership of research within the members of a community, allows them to express themselves and their issue(s) to new audiences, and has been used with populations who might otherwise lack a political voice (cf. McIntyre & Lykes, 2004, who employed photovoice in feminist PAR with urban working-class women in Belfast and rural Mayan women in Guatemala for the purpose of “co-construct[ing] narrative in a relational terrain wherein indigenous meaning-making and Euro-American/Western knowledge and technologies are interlaced by co-participants and researchers,” p. 58). Further, some of the teachers at the Demonstration School had used cameras in an earlier summer to document aspects of Malawian life about which they wanted to write. Kawiza agreed that teachers would like to use cameras again, this time for a new purpose. Photovoice seemed a perfect fit to meet TCAP aims.

**The PAR Process in Malawi, Summer 2007**

On the ground in Malawi, U.S.-based researchers followed cultural protocol in making first contact through the Domasi head teacher, Ausman Ngwali, who was new to the school that year. After introductions, the researchers asked Ngwali’s permission to meet with his faculty. In the meeting that ensued, the
researcher already known to the faculty introduced others from the United States, and reminisced with teachers about their experiences together in years past. In Malawi, where poverty can strip away a person’s material possessions, knowledge and relationships stand as the strongest of cultural values. Thus, appropriate time was included for old friends to rekindle bonds by remembering together, and for the finding of common bonds among new acquaintances.

Next, U.S.-based researchers talked with teachers about ways they might use their own experiences and knowledge to create big books for classroom instruction on HIV/AIDS. U.S.-based researchers showed a blank big book and disposable camera, and shared with teachers their understandings of the photo-voice strategy (McIntyre & Lykes, 2004) for capturing images that could be used to generate knowledge: a photo of a family member or friend currently living with HIV/AIDS, or of a special place or event that brings back memories of a deceased loved one. Somewhat familiar with the use of cameras to facilitate writing, all were eager to make photos, this time for telling and writing HIV/AIDS stories for use in making their own classroom big books.

U.S.-based researchers had considered suggesting the photovoice strategy at the Demonstration School site as well as at two nearby schools, then working with those who were interested. Because teachers from every Standard at the Demonstration School wanted to create books, limited supplies kept the work within this site alone. Even though the Domasi teachers had not previously collaborated to create classroom materials, they appeared exceedingly pleased to do so. While more recent efforts at teacher preparation in Malawi encourage teachers to collaborate to create their own learning tools (Teaching and Learning with Locally Available Resources, TALULAR, had recently been emphasized in teacher preparation at nearby Malawi Institute of Education), the notion of “teacher inservices” or teachers working together to craft their own materials was incompatible with the strict top-down control of schooling inherited from colonialism and reinforced by political instability across the intervening years. Despite this lack of cultural congruence, the learning community of Malawian teachers and U.S.-based researchers coalesced to discuss logistical matters such as how long it would take to get photos developed, and made a plan that would leave time for everyone to gather to share experiences and construct big books. A date was set to gather after school hours to share photos, tell HIV/AIDS stories, and make books, and the U.S.-based researchers modeled how to operate the cameras. In less than an hour Malawian teachers and U.S.-based researchers had become a community of friends—old and new—joined together in the common effort of addressing the need for culturally comprehensible HIV instructional materials. While much of this fusion of purpose resulted from the university researcher’s longer-term experience with this group of teachers, it was also a result of the nature of the teachers, themselves, as warm-hearted Malawians are known for their friendliness to strangers.
Teachers’ Stories

The sharing of power across researchers from a developed country and teachers from a developing one was (and continues to be) no easy matter. Malawian teachers are aware of the difference in education level—researchers all held or were pursuing doctorates, and while teachers at the Demonstration School were in general far more educated than most in Malawi, none held a bachelor’s degree. Malawians holding such a degree would become teacher educators rather than teachers, themselves. Further, the schools always hold a number of new teachers, as teachers die often and must be replaced. Such teachers lack the confidence of more experienced ones, and are closer to and more sensitive regarding the hierarchy of those with degrees. Finally, all that is west—European and American—is the object of unspeakable desire to many Malawians, and the presence of the U.S.-based researchers was (and is) often revered as if we were deities, in a manner that both humbles and embarrasses. Nevertheless, based upon several years of collaboration, insistence that the teachers and schoolchildren are truly teaching us about their realities, and their observations of our leaden feet and bumbling mis-interpretations of their lives and realities, an ability to at least exist as co-learners has at times been possible, if fleeting. It stands as an ongoing goal.

One of the most important ways in which power sharing was negotiated with teachers was through the reciprocal act of sharing stories about family members, friends, and colleagues who had died from HIV. Awareness of the power differentials present at the table as U.S.-based researchers sat down with Malawian teachers to begin the sharing—power of the head teacher over other teachers, power of males over females, and their own power as “the American teachers”—allowed U.S.-based researchers to devise an empowering opening to the storytelling. At no point in their work with the teachers was the U.S.-based researchers’ awareness of the “power sensitive” nature of conversation more important. Modeling and release of power to the teachers facilitated everyone present in accepting vulnerability, exemplifying connectedness, and confirming the joined effort to use the stories to craft better futures.

After school was out on the appointed day, the teachers and Ngwali gathered with U.S.-based researchers to tell personal HIV/AIDS stories and begin crafting big books for classroom use. The web of stories drew the individuals at the table closer to each other in a connectedness that, for a time, transcended social and cultural barriers. The stories were cast across international and cultural distances; American researchers were trusted to share their personal HIV stories along with those of the educators at the table. Power distance (Hofstede & Hofstede, 1997) is high in Malawi: it is rare for an administrator, a head teacher, to share personal information and socialize with those he is responsible for. Also, men and women do not typically speak of such things as HIV/AIDS together in a public arena. Regardless, on that day every teacher, the head teacher and deputy head teacher, males and females together, sat down at the table to tell
stories tinged with a mix of tenderness and sorrow. The told stories ranged in depth from one about a promiscuous colleague who contracted AIDS and subsequently infected his spouse, to another about a self-proclaimed healer who hoodwinked money from AIDS victims declaring his medicine would heal them, whose patients eventually died for lack of seeking medical care. A story about burial practices emphasized that the washing of a body must be done using gloves rather than with bare hands.

U.S.-based researchers and Malawian teachers gathered around an oblong table, everyone seated at the same level. A shaft of sunlight cut across the room to interrupt the silence. The unusualness of the moment was upon all present—when did such a group sit down together for such a purpose? Then one by one, U.S.-based researchers told their own HIV stories first, using a ball of yarn tossed from one to another as the signal for who would tell the next story. Each teller, however, held onto the string as the ball was tossed, to connect every story and teller. Then the ball was tossed to the first of the Malawian teachers, who, following the U.S.-based researchers’ lead, with clear voice and passion gave her personal account. In this way U.S.-based researchers set the stage and provided a model for telling and taking turns. Then after that first teacher, as all the researchers had told their stories previously, only teachers chose each next teller, and all listened together. The U.S.-based researchers look back on this day with the deepest respect and reverence. One of those teachers, only 35 years old and single father to three children, has now fulfilled the sad prophecy of life expectancy in Malawi.

Children’s Stories

Teacher stories, however, were not the only ones being shared that day. At the same time teachers and researchers were telling their stories, a group of Demonstration School students who had been chosen by their teachers as ones most likely to share, were making HIV books of their own in a nearby classroom. The U.S.-based researcher with long-term experience in the Domasi site had worked closely for several years with Standard 8 teachers Reuthers Malembanje and Frank Chikhasu, who expressed interest in having the TCAP researchers work with their 87 pupils. On the appointed day, the principal investigator and researcher who had long-term relationships with these teachers ventured into their classroom. Previously, Malembanje and Chikhasu had their pupils write what they knew about HIV/AIDS prevention for the U.S.-based researchers to review. Students were asked to respond to a set of questions, and write their answers on sheets of notebook paper. The students drew on prior teacher instruction, and were eager to put their thoughts on paper. The exercise aided the children in two ways: it allowed them to apply their English writing skills for a real-world purpose, and gave them the opportunity to display their knowledge as well as their attitudes and beliefs about a topic that impacted their lives in significant
ways. This exploration and expansion of student health literacy on prevention and treatment of the disease revealed consistency in their knowledge about HIV prevention, in particular:

- **What is AIDS?**
  - Acquired Immunodeficiency Syndrome
  - AIDS is a virus.
  - AIDS, if left untreated, can lead to serious illness and sometimes death.

- **What are the signs and symptoms?**
  - Constant fever
  - Loss of weight
  - Night sweats
  - Skin rashes
  - Persistent tiredness

- **What can you do to prevent HIV/AIDS?**
  - Abstain from sex
  - Do not have sex until you are married
  - Be faithful; one woman one man.
  - Avoid sharing skin piercing instruments
  - Use condoms if you are having sex.
  - But a condom is not 100% safe.
  - Avoid sharing your toothbrush.

This data was analyzed and synthesized into a PowerPoint presentation which the principal investigator presented to Standard 8 pupils. She followed the presentation with a question and answer period, aiming to both honor the children’s knowledge and address some misconceptions evidenced in their writings. Following this presentation, teacher Malembanje shared some myths and misinformation about HIV/AIDS that he knew existed in the children’s villages. Malembanje then worked with U.S.-based researchers to develop a second PowerPoint presentation to address these. Interaction with the students across these two classroom experiences revealed that, for the most part, the Standard 8 students were knowledgeable about how to stay safe from HIV, and eagerly interacted with U.S.-based researchers and their teachers in a rich discussion that allowed adults to dispel some of the myths around the disease:

- I heard there is a cure for AIDS.
- It is harder for a girl to get AIDS than a boy.
- I could get AIDS from using the same toilet used by someone with the virus.
- Teaching students about sex, condoms and drugs will encourage them to be sexually active and use drugs.
- Teachers who are HIV positive are bad role models.
I don’t want my child to have a teacher who is sick.

There are no good reasons to keep HIV positive students and teachers in the school.

However, at one point in the discussion a young girl raised her hand to speak, stood, and courageously asked a key question as regards the Malawian HIV dilemma: “But Madam, what if a girl cannot say no?”

While Malawians chant “just say no” the same as Americans, in Malawian culture women and girls do not feel empowered to refuse the request of a male. In the past, Chewa culture set aside certain “cool” periods in a marriage when the couple was not allowed to engage in sexual relations; however, males in the culture had tacit approval to seek satisfaction outside the marriage during these periods. During the Banda regime all females were declared to be wives of the president, and were required to dance for him upon his visits to a region, and if summoned, to go with him for periods of time. Currently in the country there is a positive shift toward females having more control of their bodies, yet some villages still circumcise females and allow them to be initiated into sex at puberty by a senior male. Even more disturbing is the practice of “healers” in prescribing that a male with HIV get cured by having sex with a virgin.

The voicing of this girl’s question to two female U.S.-based researchers in the presence of her two male teachers presented no quandary, however. The researcher experienced in the setting pulled other girls into the discussion to voice the problem as a group, and then to brainstorm possible alternatives. Once the girls in the classroom were allowed time to set out the problem, which was extensive, the U.S.-based researchers then turned the talk toward the boys in the classroom. Drawing on her knowledge of the close friendship relationships among boys and girls at school—which differ dramatically from same age male/female relationships in the developed West—she urged the boys to remember that the girls are their sisters and playmates from early childhood, who will become the mothers of all the children of the future, and need their understanding and protection. In Malawi, older students speak of “loving each other,” meaning caring deeply when a friend does not make the grade s/he wants, coaching each other on schoolwork, cheering each other in sports. These friendships cross gender lines for Malawian youth. The appeal to the boys to remember the girls as their playmates and sisters, and to respect and defend their right to say no, was a powerful one and a new way of thinking.

No answer to the girls’ dilemma will be complete, however, until a cultural change takes place. A researcher working on another project shared that her work, which involved collaboration with chiefs and elders in villages to change attitudes, was showing some success. If convinced, chiefs and elders can do much to re-train the thinking of Malawian males in terms of listening to a female’s “no.”

As the principal investigator reflected on the classroom HIV/AIDS discussion, she decided to work with teachers in the upper standards to locate a group of
students who had good oral and written English, and who were the most likely to share their work with others, for the purpose of inviting them to craft personal HIV/AIDS books to share with peers. Among their supplies the U.S.-based researchers had some regular-size hardbound blank books that the students could use for this purpose. Thus, on the day that Domasi teachers and researchers gathered after school to tell HIV stories, this group of children were also crafting their own books in a classroom nearby.

A great sadness and moment of irony came in the spring after the U.S. researchers’ summer work at Domasi Demonstration School, with news of the death of a teacher who had spoken so eloquently to children about the importance of including HIV/AIDS pupils and teachers in the school community. He had testified to a need for acceptance, tolerance, and respect for HIV/AIDS patients, yet his own fear had kept this bright, valued, and energetic young man from getting the care that might have saved his life.

One Big Book Instead of Many, For Now

Among the HIV/AIDS big books started by Domasi teachers on that day, one that stood out in its clarity and completeness was crafted by teacher spokesperson Kawiza, who often worked on curriculum development projects at nearby Malawi Institute of Education. His book used no photos at all, but was filled with attractively rendered information. Kawiza explained his process of creating the book in an e-mail to the principal investigator, and elaborated further in an interview.

At first I was thinking of what is happening to people who are HIV positive and thinking of how I can let the learners be aware of the deadly disease?

The book should include the ways of spreading HIV, how to avoid it, and if you have the virus how to live longer after found HIV positive.

The big book took me almost nine months [to make].

This was to make sure that the information in the book was accurate and approved by the government through the Ministry of Education and Culture.

As a writer of his country’s Life Skills Curriculum within which student information about HIV/AIDS is located, Kawiza was uniquely situated for access to the most accurate information. The new curriculum is based upon current statistics from the Malawi National AIDS Commission, and is scheduled for dissemination in 2010, yet Kawiza’s students were getting this information during the 2007-2008 school year:

The big book has helped me because the information in the book is current, and in the Teachers Guide and Learner’s book you can not find [this information].
Hence my students are benefiting because they are able to know the new information about HIV and AIDS.

At first we had VCT: Voluntary Counseling and Testing, and now it has changed to HTC: HIV Testing and Counseling.

What they are saying is that everybody is asked to go for HIV testing and they have established the door to door testing here in Malawi.

Through my HIV and AIDS book my learners are able to know these things, while other teachers are empty of that knowledge.

Being one of Life Skills new curriculum writers at MIE I am also gaining a lot of information because I am using different books on HIV and AIDS to construct the materials.

Kawiza revealed a good deal about the cultural situation of school-based HIV/AIDS education in his explanation of how students react to his book differently depending upon their age. Children younger than age 9 tend to be quite interested in the book’s information because, as he put it, it is new to them. At age 9 children in the villages undergo initiation ceremonies in which sex and family responsibilities are taught in great detail. While no anatomy is taught in these initiations, and some of the information may not be accurate, children age 9 and older bring to school with them an attitude of “already knowing” which lessens their interest in HIV instruction in general. Nevertheless, Kawiza stated that his Standard 7 students react well to his book because they know they are getting something more than students in other schools:

The students’ reactions have been positive because they know they are also learning new information on AIDS, as they know this disease is the worst of all diseases found in the world, and to them it is to their advantage because they are better off than with other teachers.

Kawiza offered an idea for dissemination of updated information to other teachers in his zone, and ended his e-mail with a request that demonstrates the tenuous reliance on “the kindness of strangers” for funding even the simplest of dissemination efforts in Malawi:

The other thing I would like to do if I can find some funds is to make a pamphlet of notes on the information found in my HIV big book, and I can share those notes to all the schools in my zone which has 9 schools. If you can find other well wishers to give me money I can do it that way so that teachers of my zone have this information about HIV.

Kawiza’s emphasis on accurate information approved by the Ministry points to the schism in Malawian teacher understandings of the uses and purposes of literacy, in particular, its public uses. While the teachers’ told stories could be personal—these were shared orally—they appeared to view their written materials (the big books for use with children) as public, formal, and thus subject to the
censoring of first person knowledge and referents. Practices in developing
countries in the East often reflect and exaggerate dilemmas present in what we
imagine to be the more enlightened West, such as the use of first person narrative
in a research article such as this one. Despite its power as a data source and analytic
tool (cf. Rosaldo, 1993), the use of personal narrative continues to be contested in
many research contexts. For the teachers in Malawi, as well as for many of us
in the West, written text for use in schools had to sound what we imagine to be
“scientific” and unassailable.

However, Kawiza was not to be foiled in his attempts to spread accurate and
up-to-date information about HIV/AIDS. Armed with his position as national
curriculum writer, and buoyed by his own teaching success with his HIV book,
he eagerly shared his big book with his entire school such that all teachers
there now use his book to teach about HIV/AIDS in their classrooms. Kawiza
carefully trained each of his colleagues in how to use his big book to supplement
the existing Life Skills Curriculum and texts, which lack updated information.
Further, knowing first-hand the power of the teacher-authored big book as a
technology of information dissemination that could overcome the schools’ lack
of paper and photocopying capabilities, he has written into the 2010 Malawian
curriculum that all teachers will create their own photo-inspired HIV/AIDS
big books. Thanks to Kawiza, the Malawian curriculum now also includes
an “instructional guide” on how to create and use big books in all areas of
the curriculum.

ANALYSIS OF TCAP OUTCOMES

Project analysis revealed a number of surprises for the U.S.-based researchers,
but also evidence of success, and a number of research lessons learned. TCAP
project outcomes were analyzed for a number of purposes and in a number of
different ways. U.S.-based researchers examined their methods for consistency
with or divergence from the principles of mutual aid/self-help, PAR, and photo-
voice. The following questions guided this level of the inquiry:

- Were peers recruited in a non-hierarchical setting?
- Were the initiatives voluntary in nature, with the primary focus on emotional
  support, practical support, and information exchange?
- Was the project participatory in nature?
- Was one specific model forced upon participants, or did a way of working
together evolve from the specific context? Was there a sharing common
  experiences, situations, or problems through which knowledge and experience
  were brokered in getting help, giving help, and learning to help oneself?
- Were common experiences employed as building blocks for self-help?
- What role did outside researchers play?
- Was control of the project shared, and if so, how?
Another strand of inquiry in the TCAP project focused on the level of project efficacy: How well did the PAR and photovoice process facilitate the creation of HIV/AIDS instructional materials? Did collaboration and problem-solving lead to a culturally comprehensible strategy for teaching about HIV/AIDS prevention in the Malawian context? Did the teachers make useful big books? Did the big books created serve the purpose of disseminating accurate HIV information to children and youth? Much of this examination relied on researcher reflection, reflexivity, and cross-researcher evaluation, with a few exceptions. U.S.-based researchers remain in e-mail and postal-mail contact with teachers and particularly Kawiza, head teacher Ngwali, and a member of the Ministry of Education, Alippo Ussi, who is responsible for the school. Teachers in the Domasi site reported on outcomes of the project through e-mail across the year following the TCAP implementation, and through face-to-face interviews and informal conversations the following summer.

Photovoice, as intended by TCAP’s U.S.-based researchers, relied upon Western assumptions about camera use, whereas Malawian teachers operated upon their own understandings of the photovoice process and expressed confidence in their decisions about how to use the cameras. Some of their photos came out blurry or did not process at all, as might be expected on a first attempt at using a new technology. Content of the photos at first perplexed U.S.-based researchers. Malawian teachers took personal photos of healthy family members and friends, perhaps motivated by the fact that as most of them had never had access to cameras nor could afford to develop film with their own personal funds, the cameras formed the opportunity of a lifetime to showcase family and friends. Cameras provided teachers with pictures to carry in their wallets or share with other family members or acquaintances. Cast within the cultural valuing of relationships, such a response is understandable.

One member of the U.S.-based research team brought a different lens for interpreting the teachers’ use of cameras, however. Each U.S.-based researcher had remarked how similar life in Malawi in 2007 was to life in the U.S. just after the turn of the 19th century. Then one recalled as a child asking about an old family photo of a child who looked very odd in the picture. She was told that, at the turn of the century, photographers would travel by buggy through the countryside, stopping to make photos for those who could afford them. The odd-looking child in the photo was dying when the photographer came through. The family, wanting to preserve what they could of this child’s image, brought him from his deathbed, dressed him and propped him up so his image could be preserved forever through the magical medium of photography. Such magic seemed not so different from what the Malawian teachers may have been experiencing as they made “snaps” of those dear to them, who, healthy now, could be gone in a year.

Whether relationships existed between photos taken by Malawian teachers and the specific HIV stories they told and shared would be a matter of conjecture,
but it is reasonable to assume that the photos made represented the valued things in life that could be threatened by the HIV/AIDS epidemic. However, the photography aspect of TCAP appears to have facilitated teachers in telling HIV stories, whether they told stories about specific photos or not. Photography supported the development of community across the teachers and researchers, as the daily conversation about the pictures they were making brought teachers together in new ways of relating with each other, and with the research team. Without the photography to unite the group, research team members doubt that teachers would have been able to share oral stories in the ways that they did. The teachers’ oral HIV stories were full of pathos and illustrated their strong desire to make a better future for themselves and the children they taught.

An e-mail letter from Kawiza provided a report on his process of big book construction, use, and pupil responses. In summer 2008, the U.S.-based researcher experienced in the Domasi site returned and spoke with teachers about the conduct of the project and its outcomes. Further, a researcher conducting a different project in the school 1 year later interviewed a teacher in depth about big book construction and use, and examined that teacher’s big book.

E-mail letters from head teacher Ngwali and Ministry representative Ussi confirmed their satisfaction with the conduct of the TCAP project, described it as a “major contribution to the school,” and expressed their desire to collaborate in similar projects in the future. In e-mails and face-to-face conversations, teachers spoke of satisfaction with TCAP, and interest in further work with both commercially produced and self-authored big books. Domasi teachers evaluated big books as a highly useful technology for teaching content, for teaching literacy in English, and for anchoring their own and student ideas for further examination and exploration. In Malawi, the conception of schooling is based almost exclusively on a lecture model inherited from colonial rule. Yet many pupils lack books, paper, and writing tools needed to take notes or complete assignments (children who beg on the streets often ask for a pen). Teacher interest in big books reflects a small but promising shift to technologies of teaching that provide access to all children, rather than just the few who already read and write English, or who have families that can afford school materials.

Employing the photovoice process, nine teachers and head teacher Ngwali volunteered to tell and write stories relying on photos they had made as prompts (McTaggart, 1991). Photovoice provided a medium through which teachers could narrate their own personal stories of what it is like to live with or have a family member or friend with HIV/AIDS. Photovoice enabled the teachers to act as recorders and potential catalysts for social action and change in their own communities. TCAP appeared to have empowered mixed groups of teachers, as well as mixed groups of children, to articulate personal stories and/or information—this was no simple accomplishment. Further, Kawiza’s big book success provided a tool for his entire school, and through his efforts at curriculum writing, for his country.
PAR and Mutual Aid/Self-Help: Strategies for Understanding Across Cultures

Following Gidron and Chesler (1994), the TCAP project mobilized peers, defined as teachers and researchers from two sides of the globe, in a non-hierarchical setting—teachers defined the problem and everyone had a voice in how we would work together, to culminate in a sharing of experiences. As the problem was a community one, the self-help/mutual aid process unfolded at the community level. Unlike most efforts of NGOs (Bate, 2005; Edwards & Hume, 1996; Makoba, 2002), TCAP took place at the local level as a situated project that took into account distinct local cultures and identities as mechanisms of support and empowerment. Within the photo and HIV/AIDS story-sharing in particular, teachers and researchers crafted a self-help community that will probably facilitate future collaboration involving both groups, and researchers left behind a galvanized community of teacher-learners who, led by Kawiza, held the potential to restructure how education is thought about in Malawi toward a more student-centered approach. From their work with the teachers, researchers gained insights into ways of working in cross-cultural settings that they would use again in their futures, as well.

Hallmarks of PAR in the TCAP project included exploring and providing accurate information on causes and consequences of HIV/AIDS by those who were impacted the most in the social, political, and cultural community context. Educational materials about HIV/AIDS were collaboratively developed with Malawian teachers: to promote healthy lifestyle behaviors and disease prevention; to explore and expand the regional knowledge base of the target population regarding AIDS health risks; and to disseminate scientifically-sound, culturally-sensitive health information. Children made HIV/AIDS books and participated in both sharing and inquiring further into disease prevention. Teachers and U.S.-based researchers came together, moved apart, and came together, the closenesses facilitated by PAR and photovoice strategies that made spaces for voicing one’s realities.

Teachers told powerful and empowering HIV/AIDS stories, and for the first time worked together on a project to support their teaching. One among them used his positioning as national curriculum writer to craft a big book that could be used by teachers at every Standard in his school, and to embed big book technology in all areas of the Malawian national curriculum. While the PAR and photovoice approach yielded somewhat different outcomes from those expected, it provided an open-ended strategy that facilitated Malawian educators’ self-help/mutual aid, and as such it holds potential for future cross-cultural knowledge exchange efforts in developing country settings.

As demonstrated in the account provided by Kawiza, teacher-shared experiences and teacher-authored instructional materials in a project such as TCAP empowers teachers with the realization that they can make a difference
and provide a positive contribution to their students, school, villages, and nation through addressing the goals of improving health literacy and reducing HIV/AIDS. That there is only one HIV/AIDS big book in use at Domasi Demonstration Primary School instead of many, may or may not be problematic. Empowerment of all the teachers to create their own books probably requires more support than the U.S.-based researchers could provide at the time.

Malawian teachers’ desire to continue to collaborate in similar PAR projects constitutes tacit approval of the ways in which the TCAP project was conducted, although researchers should use caution in over-reliance on positive feedback from colleagues in developing country situations. Despite efforts to level the power relations in such a project, the fact remains that educators in such settings lack the resources—the infrastructure and funds—to operate regularly as critical innovators, and rely largely on outside sources for support: over 90% of the Malawian budget for public education comes from foreign aid. U.S.-based researchers, while they may be long-term friends and colleagues, nevertheless represent the power of donors. It is difficult to imagine individuals living in a developing country situation, regardless of how much they are encouraged to do so by outsiders, having the freedom to critique the ideas of those who come attempting to help. In recent Malawian history dissenters disappeared in the night, never to return (Englund & Mapanje, 2002).

The best that outsiders in such a setting can do is challenge themselves to conduct the best cross-cultural research that they can. Following Mutua and Swadener (2004), researchers can employ “critical personal narratives”—such as the HIV stories told by teachers on the day they sat down with the TCAP team—to develop outsider understandings (their own and those of others unfamiliar to the situation) of the social and cultural realities such individuals and groups face. Researchers must recognize that they are outsiders in the culture and strive for an “I don’t know” status to avoid approaching life and circumstances in a developing country setting with a colonizing perspective. Etzioni (2004) speaks of the need for outsiders new to a culture to bring a “service learning” perspective to their experiences there. Further, there is no question that good cross-cultural research requires sustained time within the cultural context. TCAP relied upon an ongoing relationship previously established in the Domasi site.

Drawing on data sources (in this case, teachers’ and children’s told and written texts; photography and drawings; researcher photos, videotape, and fieldnotes; and e-mail and postal correspondences with participants) researchers must constantly remind themselves of their own positionings within the power sensitive conversations they share with collaborators. Contexts in which individuals must work across power divides require a special kind of researcher sensitivity. Assent in such contexts may not mean agreement, but rather signify a lack of power to dissent. Dissemination of findings should take place in ways that are relevant to local stakeholders, and begin within the specific research site. Further, findings from such collaborations must then be shared beyond the immediate context, in
this case with aid-sponsoring organizations such as USAID and UPIC, and school reform leaders at Mzuzu University and Malawi Institute of Education (as Kawiza has done), to shape future action research interventions. Most importantly, researchers from the West working in developing countries in the East must continually question the privilege they enjoy and the myth of meritocracy, while strengthening their alliances to nudge at the centers of power to which they have access.

REFERENCES


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