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**BODIES, CAPSULES AND FETISHES: THE TRANSFER OF CONTROL  
OVER TRADITIONAL MEDICINAL KNOWLEDGE IN ZIMBABWE**

**by Chloe Frommer**

Prepared for the Centre for Developing-Area Studies (CDAS), McGill University, as part of the Montreal Inter-University Initiative in International Development Studies, a program initiated by the CDAS with funding for the International Development Research Centre (IDRC).

As part of the **Montreal Inter-university Initiative in International Development Studies** at the Centre for Developing-Area Studies (CDAS), five graduate internships were instituted from September 2001 to March 2002. Interns were selected from each of the four Montreal universities and were in residence at CDAS to work on their own research as well as participate in CDAS seminars, conferences and other activities. The main objective was to help build their research capacity related to international development.

At the end of the internship program, each intern presented a final paper reflecting their research work over the seven month period. These documents (Discussion Papers (nos.95 to 99) – “Nouvelles formes de marginalisation socio-économique et évolution des systèmes de solidarité en milieu urbain africain : un état des lieux” by Mamadou dit Ndongo Dimé (Sociology, Université de Montréal), “Bodies, Capsules and Fetishes: The Transfer of Control Over Traditional Medicinal Knowledge in Zimbabwe” by Chloe Frommer (Anthropology, McGill University), “La réforme de l’aide au développement multilatéralisation des normes du développement” by Pascale Hatcher (Political Science, Université du Québec à Montréal), “l’Évolution socio-politique et la question agraire aux Philippines” by François Michaud (Anthropology, Université de Montréal), and “Ascertaining Real Needs of Education in the Amharic Speaking Regions of Ethiopia” by Sharmila Pillai (Education, Concordia University) – represent the work-in-progress of the graduate students in the 2001-2002 program.

Rosalind Boyd, PhD  
*CDAS Director*

Dans le cadre de l'**initiative inter-universitaire d'études en développement international de Montréal** au Centre d'études sur les régions en développement (CERD), cinq étudiants gradués furent admis en stage du mois de septembre 2001 à mars 2002. Les stagiaires furent sélectionnés parmi les quatre universités de Montréal et était en résidence au CERD pour travailler sur leur propre recherche mais aussi pour participer aux séminaires, conférences et autres activités du centre. Le principal objectif était de les aider à développer des capacités de recherche reliées au développement international.

À la fin du programme de stage, chaque stagiaire a présenté un texte final exposant le travail de recherche effectué depuis six mois. Ces textes (Documents de travail, nos.95 à 99) – “Nouvelles formes de marginalisation socio-économique et évolution des systèmes de solidarité en milieu urbain africain : un état des lieux” par Mamadou dit Ndongo Dimé (Sociologie, Université de Montréal), “Bodies, Capsules and Fetishes: The Transfer of Control Over Traditional Medicinal Knowledge in Zimbabwe” par Chloe Frommer (Anthropologie, Université McGill), “La réforme de l'aide au développement multilatéralisation des normes du développement” par Pascale Hatcher (Science politique, Université du Québec à Montréal), “l'Évolution socio-politique et la question agraire aux Philippines” par François Michaud (Anthropologie, Université de Montréal), et “Ascertaining Real Needs of Education in the Amharic Speaking Regions of Ethiopia” by Sharmila Pillai (Éducation, Université Concordia) – représentent donc le travail en cours des étudiants participant au programme.

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BODIES, CAPSULES AND FETISHES: THE TRANSFER OF CONTROL OVER TRADITIONAL MEDICINAL  
KNOWLEDGE IN ZIMBABWE  
**Chloe Giselle Frommer<sup>1</sup>**

***Bantu medicinal knowledge***

“I can give you something to be strong,” Majiki said flashing a wiry right bicep at me. “You know because you are a woman and might want to be able to defend herself...”

“Is it a *mangoromera*?!” I asked, surprised that the *n’anga* would actually refer to the legendary *mishonga* that gives unparalleled strength.

“Yes,” he affirmed smiling broadly at my recognition.

So I agreed to have it done.

Several days later, while sitting quietly in the dawn, Majiki appeared before me, and placed the dried hide of a particular *veld* animal on a stump. With a sudden *whummp!*, the nose was removed and he called for his wife’s assistance to go grind the nose to a fine black powder.

Several days later, I was brought to the outdoor thatched grass bathing-stand to have the black powder of that bush animal’s nose placed in tiny razor incisions cut on the major joints of my body. Two slices with the razor – behind the neck, just below the collarbone, on either side of my elbows, and both sides of my hand...

The sun shone brightly and the dry heat slammed through my parched mouth and sweat glands. Majiki’s wife worked down my body with the cuts and rubbed the black Mangoromera powder in each one. I was not all disturbed by the cuts, but the sensation of the *mishonga* entering and pulling along the blood of my veins was unexpected...

I passed out.

In the time Majiki’s wife screamed and he came scrambling for me shouting “Ms. Flora!” I went somewhere else. Possibly somewhere where ancestral spirits wanted to assert that I must acknowledge this *mishonga* was a gift from them. At least this seems most likely as my cognitive structures had, during my fieldwork, begun to be molded to the idea that the subconscious is a medium for communication with that spirit world and further, that the possessions they claim to give, have dual registers – of both responsibility and right.

***Intellectual and cultural stakes***

Knowledges kept through time by spiritual custodianships, a sense of responsibility, and following traditional codes of consecration have long been a source of Colonial interest and

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conquest<sup>2</sup>. Yet, even more so today, in an era of the Information Economy, capsules of those knowledges (information) are sought for their application and utility in the manufacture newly created niche products and commodities<sup>3</sup>.

The stakes over the outcomes of these knowledges, however, have been raised by increasing struggles for recognition as *the* authoritative body over traditional knowledge and spurred on by a decade of “crisis narratives” on diversity loss, including cultural, linguistic and biological. As a consequence, great international, yet bureaucratic, trade-related and institutional furor continues to rise over the valuable information to be found in “cultural” settings<sup>4</sup>.

Presently, there are four main legal platforms under which the management responsibility and rights over traditional knowledge are most likely to be carved between any given parties:

- The Convention on Biodiversity (CBD), particularly article 8(j) on traditional knowledge;
- Article 27, Trade-Related Intellectual Property Rights of the General Agreement on Trade and Tariffs (GATT) of the World Trade Organization (WTO);
- National *sui generis*<sup>5</sup> legal regimes to protect “local communities” and “plant genetic resources” and required as part of WTO membership;
- and/or customary law as developed from precedent and traditional authorities, and/or partially formalized as statutes in country’s constitutions.

The need for this legislation is driven by the occasion that, within “cultural” a.k.a. rural and local milieus, transnational pharmaceutical and agricultural industries have been, and are gaining, a wealth of utilitarian and industrially-applicable knowledge over biodiversity. The reason why the knowledge - as a valuable foundation of the information economy - is becoming available to these industries, simultaneously as some non-profit organizations and governments try to protect it as heritage, is a result of current and past economic and political pressures on local communities who custodian the knowledge in a traditionally-guided system. From this pressure, new *codes of consecration* on the knowledge-custodianship are also carving space for new local stakeholders who both respond to and add to new economic and political strategies.

### ***Culture change***

Although anthropology may be entering a Post-Modern identity crisis and losing earlier tight definitions of culture as Akhil Gupta and James Ferguson suggest when writing of “culture’s” new diasporas and deterritorializations (1997), the production of distinctive artifacts, created and derived, from particular knowledge passed down through lineages still exist in a very tangible, durable and identifiable way.

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<sup>2</sup> Grove, R.H., “The Transfer of Botanical Knowledge between Asia and Europe 1498-1800” *Journal of the Japan-Netherlands Institute*, Vol. III, 1991. pp. 160-176.

<sup>3</sup> UNCTAD/ICTSD *Report Intellectual Property Rights and Development – Policy Discussion Paper*, p. 49

<sup>4</sup> As witnessed in resistance to the GATT at the Seattle WTO Ministerial; in statements by the Third World Network and Coalitions of Indigenous Rights Groups published internationally and for the United Nations; as well as in individual legal cases in the United States and elsewhere - over the Neem, Basmati and Tumeric from India, Ayahuasca from Brazil; with Thailand, Costa Rica, Kenya and South Africa presenting other cases that have gathered international media attention.

<sup>5</sup> Unique, of its’ own kind

While theoretically, “culture” may defy static portrayals, some legal precedents have shown that demonstrating a break from the past and associated loss can be used in court to claim damages to culture for some indigenous and native communities<sup>6</sup>. Examining and predicting how change in the processes of keeping, sharing, using and valuing traditional medicinal knowledge as a system is also relevant to communities who may wish to argue for entitlements, benefits, or in some cases, compensation for damages.

How this is done and how to then value culture has been the subject of anthropologist Stuart Kirsch (2001). Working in an applied domain Kirsch acknowledges that culture is a fluctuating entity, yet his counterpoint is cases where the change in *praxis*<sup>7</sup> and capacity to live out cultural knowledge entails real, tangible loss and even internal conflict<sup>8</sup>.

In considering the interests of indigenous, aboriginal, native, rural and/or local persons and communities it may still behoove anthropologists who assist them to avoid “naturalizing change”(p. 234). Instead, for anthropologists who take on a politicized or applied approach<sup>9</sup>, to examine the dynamics that compel, impel and propel change, or likewise the agents that carry it, they are better positioned to see the “genealogy of power” over such projects.

This is further helpful for aboriginal, native, indigenous, traditional, local and/or rural interests who wish to protect their traditional knowledge as an adaptive strategy or approach to contemporary conditions (particularly in the case of declining State social services and subsidies).

Therefore, a focus on how traditional medicinal knowledge facilitates an indigenous knowledge system in the context where it is situated, and how that role and the system are changing, may support political, legal and economic arguments for those who are most directly dependent upon it.

### ***Knowledge distinct from information***

The “life science” industries use intellectual property law – with patents, trademarks, copy-right – in order to legitimate their claims upon a capsule of knowledge (information) that identifies the utility of a natural source and then further provides a blue-print for the manufacture of biochemical products. How that capsule of information can be thus “stolen” from an indigenous or local community is then the concern of this paper. While the “biological” in the “biopiracy” accusation is and has been mined as an alienable resource for centuries, information must first be separated from its embedded and embodied state within indigenous and local community members and communities. Although natural resources - land, minerals, animals ... have been extracted from a “passive” nature, knowledge that is contained within individuals, and

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<sup>6</sup> Kirsch, Stuart “Lost Worlds: Environmental Disaster, “Culture Loss” and the Law”, *Current Anthropology*, Volume 42, Number 2, April 2001.

<sup>7</sup> Practice derived knowledge, Bourdieu, Pierre from *Outline of a Theory of Practice*, Cambridge University Press, 1977.

<sup>8</sup> Kirsch, Stuart, “Lost Worlds: Environmental Disaster, “Culture Loss”, and the Law.” *Current Anthropology*, Volume 42, April 2001.

<sup>9</sup> Choosing to be political for developing areas, rather than depoliticized is supported by works such as Ferguson’s *The Anti-politics Machine: Development and Depoliticization in Lesotho*

particularly in the cognitive pathways of individuals residing in an oral culture, is not released so easily.

That is, knowledge cannot be mined, unless specific communication processes transfer, separate and extract the intellectual resource in an active way. Before beginning to explore how this is done, however, a vital distinction between knowledge and information must be established:

“If ever it was, ‘knowledge’ may no longer be synonymous with ‘information’. “To know” requires no object: etymologically knowledge is essentially personalized, as sensory or mental constructs. In contrast, ‘to inform’ must take an object to make sense. Logically, then, though it is rarely made explicit, ‘knowledge’ can be individualized and by English definition is impossible to transmit, as many teachers attest! ‘Information,’ on the other hand, requires sharing. But since 1937, in the context of ‘information science’, ‘information’ has been dehumanized, being that which is... separated from or without the implications of reference to, a person informed: that which inheres in one or two or more sequences, arrangements, etc., that produce different responses in something and which is capable of being stored in, transferred by and communicated to inanimate things. (Cheater, Angela, Globalisation and The New Technologies of Knowing: Anthropology Calculus or Chaos?)

Therefore, to answer ‘who is transferring what’, it is important to acknowledge then that information is only a part, or *capsule of knowledge*. Thus, in this era, we may witness information as something that has been abstracted, alienable, transportable and fluid. It is apparent as something that is disembodied through human agency – either through spoken words, written hand, a push of the “send” button on the internet, in the products of human manufacture, or in an another specific act of transferal. Knowledge, on the other hand, remains corporeal, embodied and embedded in human agency, experiences, relationships and communities.

Yet, while this distinction is important in order to situate the custodians of traditional knowledge with other users of information in the information economy, this conception of knowledge is not local. As will be supported in the following section, some knowledges can only be whole and complete among the ranks of spirits and ancestors. Some may be able to access knowledge, but only through these spiritual relationships and processes. As one Zimbabwean musician, Clayton Gunguwo asserts: “You can come close to knowing many things, but only when you are an ancestor (*mudzimu*) do you know for sure.”

### ***Magic//medicinal knowledge guided by and guiding traditional values***

Keeping, sharing, using and valuing patterns surrounding traditional medicinal knowledge in Zimbabwe have a distinct character – like an individual or a body. In several Zimbabwean communities traditional medicinal knowledge can be seen to exist as nodal cites, or nerve centers, that link and connect relationships between particular persons, family members, spirits, plants, or animals in knowledge acquisition, dissemination and distribution. Here, it becomes evident that knowledge is embedded, networked and suspended as a system that affirms, strengthens and guides these relationships.

### *Shona sign*

In the commonly used Bantu language, Shona<sup>10</sup>, the term for traditional medicinal knowledge is “*Mishonga ChiShona*” which possesses literal translations meaning both magic and medicine simultaneously. An alternate, although newer term that has corresponding use in southern Africa is the more cosmopolitan term “*muti*,” - for tree and medicine. Yet the two central meanings of *mishonga*, as the overarching term, inherently obliterates typical Modernist separations between spirituality and science. That the truth of magic is unverified in the results continues to make Bantu cosmology and faith in the possibility of transcending known human limitations and weaknesses, viable. In other words, possibilities and potential are not necessarily predetermined by what science has determined are “realistic” human capabilities and/or occurrences. Thus, because semiotically, “magic” - whether placebo or “real” power, has equal importance to “medicine” in the term “*mishonga*”, Shona language holders are confronted with co-existence of faith and healing, rather than a dualism existing between religion and allopathic medicine. This further unites Shona speakers in this particular metaphysical view and framework of the world. Whether the language holders choose to accept or even embrace the term, it still carries these meanings and weight – it is their choice then to drop or carry that weight and meaning through acknowledgement.

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### *Gift*

Central to Shona, and even Bantu cosmological frameworks, knowledge of *mishonga* is connected and connoted as a *chipo*, or gift. In particular, this idiom creates and affirms beliefs that the receipt of knowledge is a *chipo* from the spirits (*shave*) and/or the spirits of known ancestors (*mudzimu*). Yet, the *chipo* is only made accessible to special persons - who would have established an appropriate communing relationship with an ancestral, tribal, animal or mermaid spirits.<sup>11</sup>

The appropriate relationship is often seen in persons who will:

- 1) *Kurotswa* – are visited and spoken to by the *shave*/spirits in dreams
- 2) *Kusvikirwa* - to be possessed by the spirit/*shave*
- 3) *Kupiwa* - pray/speak to the ancestors (*mudzimu*) or other spirits (*shave*).

The typical process of receiving the gift of knowledge from a spirit through dreams begins in childhood through an apprenticeship with an elder relative. Afterwards, the same child’s relative’s spirit (*mudzimu*) continues to guide them as they had in life, only now it is through

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<sup>10</sup> A national language along with English and Ndebele.

<sup>11</sup> There is a hierarchy of these spirits. At the top are the *Mhondoro* – the spirits of the once living founding members of a people and their various *mutupo*. Then comes the *Mudzimu* spirits from one’s own clan’s spirits (usually within one or two generations preceding either a grandmother, grandfather, an uncle or auntie who were once healers too.) Most often these *shave* guide which *muti* to use, where to find them and how to heal with them to one in dreams.

Then there are other *shave*, that can come from totem (*mutopo*) animals like the baboon, or the crocodile these are credited in divining or healing powers as well.

An *njuzu*, a mermaid spirit, will often initiate a healer by taking them under water for several years. There are many myths about how one can evade *njuzu* spirits, identify their presence and/or learn from them. Many of the myths involve an element of fear and risk to be associated with the *njuzu*. Those with an *njuzu* shave also are said to be the *n’angas* who are more modernized.

Other *shave*, haunting spirits, can cause an illness only cured in ceremony. These afflictions which can take the form of a day-dreaming, an odd craving, or depression even are grouped as *madzeikirira*.



their subconscious in dreams.<sup>12</sup> Therefore, the consecrated knowledge-holder is one who maintains and demonstrates they receive *mishonga* from a spirit, and thus they affirm the importance of the spirits' gift when they serve others with it. Others also recognize this and show due respect to these persons<sup>13</sup>. In this way, the knowledge-holder is consecrated for their access to the spirits and their knowledge. This they then share, in services and *mishonga*, to seeking patients who subsequently become linked to the knowledge and gifts of the spirits as well – although only in part because they do not have full knowledge, only information.

#### *As social capital*

Symbolic or social capital, is the accumulation of prestige and renown<sup>14</sup>. It is the reputation, degree or status that brings one clientele, positions of authority and/or opportunity which is convertible to economic capital (Bourdieu 1977). It is also said to be the “most valuable form of accumulation in a society” as it enables a spread of potential strategies for accumulation of goods (p. 97).

In Zimbabwe, those who have been either socially or spiritually consecrated are most able to access this social capital as a reward for the custodianship they are both responsible and privileged to have.

A healer who has knowledge of reproductive *mishonga* for instance, does not share the knowledge with a small girl unless she is the *makumbi*<sup>15</sup>. Instead, she only shares it or performs it when she and her services are needed by a childbearing woman. And in this case, it is inappropriate to pass the knowledge without assistance in delivery and its use for that<sup>16</sup>. This then keeps a very special role and status for elder women, called *nyamakuta*, or *ambuya*. Their traditional mid-wife role, although functional, also gives them a bit of authority on women's issues and this gives them space later in family decisions and clan councils with the chief (*ishe*) and his councilors (*machinda*) called the *dare*. It also makes *nyamakutas* and *ambuyas* indispensable to rural women's experience. Men with *Mishonga ChiShona* knowledge, on the other hand, can be a chiefs' sub-chief - *subuku*, clan-leader – *sudunhu*, a *machinda* - chiefs' councilor, or one of the tribal elders that compose the *dare*<sup>17</sup>. This is because as they are authorized by the gift of ancestral or totem spirits' knowledge, they are also believed to be the ones with the most access to the ancestors, spirits' and subsequently *Mari*, or gods' wishes.

The social, political and economic benefits that accrue to a knowledge-holder then augers for a strategic consolidation and demonstration of this knowledge through ritual, performance and duty. Through such, the traditional medicinal knowledge-holder is linked as, or, to traditional authorities and the systems of power, honor and status. Once a knowledge holder is empowered with such authority and rewarded with such social capital, they are able to keep, share, use and value *mishonga chishona* in ways that define, maintain and uphold the traditional relationships, values, strategies and institutions for the communities, in accordance with the spirits' wishes.

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<sup>12</sup> Reynolds, Pamela *Traditional Healers and Childhood in Zimbabwe*

<sup>13</sup> Kuombera – clapping as if in praise, the same sort that is done for the spirits

<sup>14</sup> Bourdieu, Pierre 'Outline of a Theory of Practice'

<sup>15</sup> healers' assistant

<sup>16</sup> The childbearing woman cannot administer it herself at the point of need anyway.

<sup>17</sup> The other position female can occupy in Shona custom is as a *svikiro* or spirit-medium who often combine the talents of the *n'anga* with strong divining abilities.

### *As a moral device*

When economic strategies are embedded in cultural and social relations, good-faith exchanges that transpire mainly within circles of kin and acquaintance involve special treatments for the persons involved in the exchanges.<sup>18</sup> These can involve certain moral and cultural expectations that surround the particular good being exchanged.<sup>19</sup>

Thus “cure first, expect payment later,” is a very common idiom and it commands the moral and cultural expectation healers have on their practice. As their knowledge is believed to be a spiritual gift, it is also believed that healers cannot be greedy with it. It is their own (the healers’ individual) gift, yet they are not completely at their own (personal) discretion as to when to share it or when to keep it.

Recall also, that as the *n’anga* is in possession of their knowledge through their *shave*<sup>20</sup>, they are then also possessed by that *shave* to give the medicines and its associated knowledge. Many “good” *n’angas* will testify that their patron spirit harasses them in their dreams if they do not do this.

Linkages to kin and those within their circle of interrelation, thereby are strengthened as the *n’anga* provides what appears to be a service or gift, yet, in a delayed exchange they are often repayed by a hoe, or a *badza*<sup>21</sup>. Importantly, this expectation attached to the traditional medicinal knowledge custodianship, is such that it also loosely ties the knowledge custodian to marginal persons in a community who are in need. One may not be able to pay or, may be disliked generally, but because the knowledge is said to be a gift from the spirit, the knowledge holder must not be selfish with it when a healing service is needed. Herein, community relations, kinship, and the outer margins are drawn together more tightly.

### *As a magic*

Magic is very hard to define. Leach says it is an index, or a message-bearing entity that stands for past, present or future activity wherein the cause and effect cannot be verified.<sup>22</sup>

Yet, surrounding the presentation of the object, performance or index that wields the magic, perspective of potential is essential. Often things are magical to others, that would not be magical to the wielder. In fact, there can be a type of *undoing* of the magic when one is let in on its’ logic and secret – the technique, or *mapipi*<sup>23</sup> of how it is done. Yet, the wielders intention to indicate the non-obvious potential can only be proven by the belief in the correspondence between an identified cause and previously anticipated effect. For instance, not everyone can empirically verify that a series of microscopic electrons provide the potential of machines,

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<sup>18</sup> Polanyi, Karl *The Great Transformation*

<sup>19</sup> Gudeman, Steve *Economics as Culture*, 1986

<sup>20</sup> spirit

<sup>21</sup> literally, a hoe, but also the form of tribute traditionally used to pay a healer for their service.

<sup>22</sup> Leach, Edmund *Culture and Communication: The Logic by Which Symbols are Connected*

<sup>23</sup> The business of how *n’angas* do their profession

familiar actions prop belief anyway. Author and medicine man from Burkino Faso, Malidoma Patrice Some says that magic “is the knowledge that rational thought cannot eat.” And despite the incapacity of magic to be verified and established as potent through the obvious or rational observance, many “stories” of “events”, “phenomena” and “activities” continue to follow that fuel its reality in that context.

In its mysterious ways, magic also makes many linkages in a social system and network. It gives confidence to the would-be suitor, or belief in the success of a business venture. Or, it can be as simple as the way any religion or faith unites believers in a common centers of ritual, practice, perception and experience.

#### *As heritage and heirloom*

The *mishonga* knowledge is a spiritual gift. However, in the non-metaphysical sense the “gift” is passed socially through family ancestors/*mudzimu*, and even more specifically, from one elder to one second-generation descendant. The *kurotswa*<sup>24</sup> process that leads to knowledge of the *mishonga* effectively continues the relationship with the deceased relative through dreaming as the subconscious medium. Typically then, that elder relative, who upon death becomes a *mudzimu*<sup>25</sup>, passed on information to their *muzukuru*<sup>26</sup> through a direct mentorship. After the mentorship ends with the elders’ death, however, the gift still keeps on giving as the assistants’/*makumbi*<sup>27</sup> subconscious hosts the spirit of that relative in dreams so they may continue to know how to use the information they learned when young. At this state, however, the information matures into a more fully embodied knowledge as the individual is now complete with the spirits’ guidance close to them. Their new initiation into healing, independent of an older authority, also refines and ferments the knowledge into appropriate fashions, in accordance with the codes of consecration provided by the interrelation with their community of patients as well as the metaphysical relationship with their *mudzimu*.

So, kin relations are affirmed through this passage of information from the knowledge body. Yet, also in a broader sense, the knowledge, possessed by many individuals, families, clans, regions and language groups, is a heritage that is held in common and binds, strengthens and affirms national and regional identity as much as it divides it.

#### *As a weapon and justice-arbiter*

The performance and rituals associated with justice taken under the hands of customary law involves *mishonga* as well. *Kuuniswa* is the process of giving a *mishonga* to accused persons who will vomit if they are a witch, have done witchcraft, or are responsible for a theft.

Therein, the link in the system is how the *mishonga* facilitates the resolution of conflict between an accused and the victim.

In the past, chiefs, and heads of clans also used *mishonga* for justice through magic: A rural district councilor I spoke to referred this as someone’s “remote control” which would follow you

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<sup>24</sup> Dreaming in communion with a spirit.

<sup>25</sup> Ancestor

<sup>26</sup> a second-removed descendant. Could be a niece, nephew or grandchild.

<sup>27</sup> Healers assistant

even if the case never came to the tribal council, or *dare* for adjudication. These “remote control” have come from “deep” and “original” *mishonga* which were used in the past to either:

- 1) Protect and guard against witchcraft from other families or kingships - families can be defined as *dunhus* (clans) and *mutupos* (totems). (*Confessions of a Sorcerer*)
- 2) Gain an upperhand against other families or kingships

#### *As a ritual vehicle*

*Mishonga* are used as a vehicle in almost all African spiritual/healing ceremonies – whether as a good luck charm; for warding off of evil spirits like the *ngozi*<sup>28</sup>, *chikwombo*<sup>29</sup>, or witchcraft<sup>30</sup>; as direct individual healing; and even as a ritual ceremony to further psychological and spiritual healing and power of a clan as a whole. In these cases, the traditional medicinal knowledge may have its weight in the visual manipulation of it as a magical index, symbol and/or facilitator of rituals more than in its actual physical curing effects.

The health of the environment and nature around was also dealt with through *mishonga*. Use in rain-making, pests-eradicating and/or domesticated animal problems ceremonies, one or several combinations of the following: *n'angas*/traditional healers; the ancestors/*vadzimu*; *svikiros*/spirit-mediums; *manyosa*/male rainmakers; *mbongas*/female rainmaker; or the *mhondoros*/spirit-mediums of the tribal spirits; could be called upon to conduct rituals with *mishonga*, or to retrieve special *mishongas* for these environmental cures.

At these times, all ritual participants are linked and cooperating together because of their shared cosmology, language, cultural understanding, belief and concern for the problem or issue at hand.

#### *Respect for elders*

Elders have always maintained the highest positions in the community as chiefs, sub-chiefs, spirit-mediums and healers. This is maintained by their understanding, appropriate adherence to traditional codes and symbols with which they are agreed to have the monopoly on interpretation. Along with babies, it is believed in much of African cosmology that life is a cycle and as the elders are close to becoming ancestors, they are therefore are the closest to *mudzimu*/ancestors and spirits where knowledge is the most powerful and full.

While not all youngsters know they may want to become full *n'angas* and enjoy the status that follows, they do generally start to desire some of the *mishonga* knowledge that is of the practical sort. For instance, the *nyamukutas* or mid-wives know particular herbs women will actively also need to know – to induce abortion, to prevent conception, to cure STDs, or for her newborns and children. This relationship can establish a strong role and status for *ambuyas*, or elderly women in the communities. Some male *n'angas* also know some of the same herbs, or know how to treat barren women, but typically, there is an older woman who responsible for births and female reproductive health more consistently.

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<sup>28</sup> the haunting spirit of a murdered person

<sup>29</sup> a goblin that seeks blood in return for success or wealth

<sup>30</sup> With a tortoise shell filled with water and *muti* and a oxtail whip *nusque* to chase the sorcery away

The important linkage here, then, is in the significant relationship of information passage elders provide to younger members. Here, it is evident that knowledge is something that is processed, organized, analyzed and understood in clear ways and can only begin to be enculturated in younger generations through dense, abstract packets of information. These packets in fact may entail entire schema and guides about the world that are not always explicit.<sup>31</sup> Yet, the model the elders provide in their performance, in their strength as oral communicators and in their own continued deference to the various totem, forest, and ancestral spirits is one that can remain with further aspiring traditional healers.

### ***Knowledge-custodial systems***

Anthropologists have contributed abundant literature on indigenous knowledge: As a system (Rappaport 1976; Brush 1997); as a way of embodied knowing (Ingold 1996); as a functional social and environmental regulator (Rappaport 1967; Lansing 1984; Gelles 2000); as a source of shamanic spiritual ritual and as status keeping (Reichel-Dolmatoff 1976). How traditional medicinal knowledge keeping, sharing, valuing and using in Zimbabwe facilitates relationships and linkages between many institutions – ritual, justice, healing, family, economic and faith – in community life symbolically is then an addition to these literatures. That the knowledge's value rests in many local institutions and therefore cannot easily be limited to any one of them is also seminal. Further, it is evident that the value of knowledge finds its affirmation, character and attention in the intercourse between many community participants, in addition to primarily identified knowledge custodians such as the healers.

Yet, simultaneous as traditional knowledge is becoming defined as either a resource or property, its tangibility has often only been accepted after an articulated event, or written document – either a registry, title of patent or copyright is established. This objectification of knowledge, particularly in the age of the information economy, also makes it seem as if to only exist in abstracted, disembodied, fluid, alive, agential, moving ways – and also, significantly, as if it is infinite, reproducible and incapable of being “lost.”

On the other hand, a focus on knowledge as it is firstly, *vesselized* and contained within human agents, before it is then shared, valued and used dynamically in a local system reorients us to the reality that knowledge can only be disembodied and alienated through human agency. Therefore, to return to the state or condition before these transfers is to re-embed the knowledge in concreteness, or perhaps, more favorably, into those who contain it, in original custodianship or guardianship. This is significant especially in a knowledge system that still rests on oral traditions. Despite Colonial Mission schools and current education developments in Zimbabwe, much traditional medicinal knowledge that operates in the community system is still passed this way.

### ***First transfers and distributions***

While traditional medicinal knowledge is embodied and embedded in custodians, healers, assistants and communities, the categories identified above indicate some of the locations or channels through which traditional medicinal knowledge may be strategically sought, kept,

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<sup>31</sup>The notion of schema passage through enculturation rests in cognitive theory but also in some studies of complexity theory. See for instance, Hommon, Robert J. “Social Complex Adaptive Systems: Some Hawaiian Examples.” 1995.

shared, used or valued. To then see TMK – as it facilitates relationships and institutions around magic, moral service, spirituality, heirlooms, rituals, and or justice issues - the strategic importance of empowered keeping, exchange or deliberate use of it is more clearly delineated for us.

However, recently the utilitarian aspect of *mishonga* knowledge has become circulated more and more outside of these traditionally consecrated channels and compasses for community interrelations. What we must compare then, is the distribution of traditional medicinal knowledge as evidenced by differentiated types of TMK and the even more novel shifts ways in the ways it is distributed because of social and economic changes. Firstly, it is evident there are these types of distributions already:

Common *Mishonga* – seen in mostly the adult rural populace, amongst elders, pure herbalists, and former *makumbi*/assistants for simple ailments like cough or stomach ache.

Specialty, Regional *Mishonga* – each particular natural environment, the grasslands, highlands, swamps and riparian regions all have different types of *mishonga*.

Totem *Mishonga* – specialties that belong to family/clan/totem heritages.

Childbirth and Reproductive Health *Mishonga* – passed inter-generationally between women

Environmental *mishonga* – the health of the environment is also important and some traditional healers can cure with this as well. These include *manyosas* and *mbongas* – male and female rainmakers specifically.

Magic – these types, are not to be traded away. They have been used by individuals and by past chiefs to consolidate power and or manipulate their social, natural and political environment. Usually only *gorobori*, or very powerful *n'angas* and spirit-mediums knew these types. However, they are used now variously by powerful and less powerful healers who are needed also for social, environmental, psychological and cosmological problems.

While this list of types is by no means exhaustive, it represents to some extent, the patterns of knowledge distribution. These forms represent to some extent community specializations. As if there are guilds or corporations surrounding certain types of the knowledges but guilds that are still direct passage according traditional, rural, familial and cosmological values of local communities. In the past, there were also barriers between some. For instance, cross-totem family *mishonga* sharing was not likely. This is not just because of geographical separation, but because of the desire for power consolidation and protection. This same resistance was descendant of the chiefs' (*ishe*) expectations that their *machinda* or counselors remain loyal and keep the resources, power and technique only for that particular chief.

What is seen in the next pattern of distribution is that information of healing utility is no longer strategically kept, shared, valued or performed according to traditional community codes of

consecration or to affirm particular community cultural rights to reproduce the system. In fact, the colonial legacy of demonizing traditional healers as witch-doctors and current political and economic pressures are providing increasing pressure to separate out good mishonga from bad mishonga, simultaneous as there is an increasing separation between the types of “good” health providers and “bad” ones.

### *Codes of consecration*

Some of the identified physical substrates of *mishonga* knowledge include parts of plant roots, leaves, bark, stems, fruits, grasses, aloes, seeds, thorns, climbers, and symbiotic insect-plant growths, as well as any part of an animal and its excretions.<sup>32</sup>

The information indicating the *healing utility* of these natural sources has always been a valuable resource. Yet, as we have seen in the previous section, it was not a resource in such a strictly utilitarian or economic way. The ways it has been kept, shared, used and valued amongst consecrated custodians, *n’angas*, *nyamakutas*<sup>33</sup> and in families often served to specially link some community members, to facilitate community institutions and ritual and affirm the importance of this cultural knowledge as both faith and adaptive technique. Now, however, whilst these ways remain still very much in operation in rural settings in Zimbabwe, certain political, economic and cosmopolitan elements that are changing this.

Currently, some of the information indicating utility is being transported from the community consecrated system of keeping, sharing, valuing and using to markets. In Zimbabwe this process belies the factionalist legal struggle, global versus local. In fact, a spectrum of local agents involved in distribution have begun to carve new codes of valuation on both the knowledge and information. The historical precedents from which they are deviating are defined by the first two code sets below:

#### *Traditional-spiritualist Code 1*

In the past, said to be at the height of spiritual and, ultimately, healing legitimacy is the *svikiro*, or spirit-medium. Their role was to diagnose the spiritual causes of the illness and they were consulted first, even before the *n’anga*. Each illness would entail an opportunity for a *kusvikirwa*<sup>34</sup> ritual, and affirmation of the cultural authority of the *svikiro*. The expected symbols and appearance of the *svikiro* in maintaining this roles were these:

Closeness to ancestor spirits

Closeness is shown through *kudetembera*<sup>35</sup>, *kusvikiriwa*<sup>36</sup> and *kufembera*<sup>37</sup>.

Purity from the modern world

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<sup>32</sup> Chavanduka, Gordon, *Traditonal Modern Healers in Zimbabwe*. Original list of names and types in Appendix II

<sup>33</sup> elderly, traditional mid-wives

<sup>34</sup> Possession and determination of the will of the *vadzimu* or *shave*.

<sup>35</sup> Eloquent praising of the spirits in ceremony

<sup>36</sup> Temporary possession of the voice, mannerism and will of the spirit

<sup>37</sup> Divining or fortune-telling with divining devices made of bones, sticks or wooden flags.

Can identify root spiritual causes of illnesses

Know about the traditional clan and totem ways, heritage, *chivanu*<sup>38</sup> and precedents

Can speak of and solve for entire families, clans and totems problem/interests

Wears a black *cheera*<sup>39</sup>, a *nusque*<sup>40</sup> and tortoise shell for chasing *vamamehpo*<sup>41</sup>

Possess humility and dignity simultaneously

Will *kubika doro*<sup>42</sup>, host ceremonies for ritual purpose

Sacrifice *bute*<sup>43</sup> to appease the ancestors and spirits.

One of the best known spirit-mediums and still celebrated on Heroes Day is *Ambuya Nehanda*, who fought and was martyred in the first uprising against Colonialism. From a novel by Zimbabwean Yvonne Vera, a quote, that speaks volumes about what role the spirit-mediums had in communicating with the ancestors:

*“Once again the people return. She stays in the darkness of the cave, and speaks to the people from within, out of their sight. Her voice is that of the departed. It comes from the beginning of time. The people stand at the mouth of the cave, calling, asking her to pass to them the voices of the departed. The voices tell of the battles they have fought. The voice comes from within them, from the cave, from below the earth, and from the roots of the trees. The voice awakens the dead part of themselves, and they walk with new beliefs, with renewed wisdom. Purged of their fears, they are prepared to live and to die.”*

#### *Traditional-Spiritualist Code 2*

So, while the traditional healer was the second-in-line guru, they would be the ones to apply the healing spiritually diagnosed by the *svikiro*. Today, the roles are confused however, and many *n’angas* perform part of the *svikiro* role as well. As, *svikiro* services are declining in fact, the *n’angas* who attempt to replace them are gaining popularity and believed to be able to cure any illness. Such *n’angas* are distinguished by a new praising term - *gorobori*<sup>44</sup>.

Still, the typical *n’anga* must:

Have an ancestor/ *vadzimu* or spirt/*shave*

Wear a red *cheera* cloth as well as red, white and black beads for the ancestors

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<sup>38</sup> Customs

<sup>39</sup> Traditional cloth

<sup>40</sup> An ox-tail whip to chase bad spirits

<sup>41</sup> Bad spirits

<sup>42</sup> Brew ceremonial beer

<sup>43</sup> African tobacco snuff

<sup>44</sup> all powerful and omniscient healer



Or, wear a green, or white bead necklace for an *njuzu* spirit

Have gourds of *muti* and *mishonga* which they know by name<sup>45</sup>

Have suffered or have been sick as you are<sup>46</sup>

Not charge upfront, but will expect a tribute afterwards (delayed exchange)

*kunwiswa hun'anga*<sup>47</sup>, *kusvikiriwa* (get possessed) or *kurotswa*<sup>48</sup> (dream)

Cure the patients' common needs directly

Provide common, specialty and magic type *mishonga*

Have a specialty in curing

Indicate other *n'angas* specialties

Be humble with their *chipo*<sup>49</sup> and duties

*Kubika doro* – brew beer for their ancestors

*Kachinkatwawanga* - pound, or obscure the knowledge of the medicinal plants and process

*Kupira*, pray to the *varidzi resvango* – guardians of the forest – for successful and safe collecting of the *mishonga*

The *n'angas* that fulfill all of these codes are well respected and are often believed to have the more powerful *mishonga* because they do things the way their ancestors or spirits wish. Interestingly however, is a new term for these *n'angas* that follow the *chivanu*, or custom in this way. This term – *gorobori* in Shona discourse is not a common one but it refers to the idea that a healer is very traditional and powerful. Yet, the idea that a healer is *very* traditional versus somewhat traditional is a newer development in itself. Many *n'angas* have broken out of the code and are in fact transforming it. Some former *makumbi*<sup>50</sup> have grown to adulthood and chosen to convert to Christianity. In this case, this person knowledgeable in *mishonga* begins to be called a *propheta* and is no longer citing their ancestral *shave* as a source of healing power, but instead they are citing God for that. Interestingly however, these individuals cure using holy water and *mishonga*, illnesses that are often still considered traditional *vahmehpo*<sup>51</sup> or illnesses

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<sup>45</sup> A must according to Macheke Gombera, Founder of the first Zimbabwean *Varapi* (healers) Organization

<sup>46</sup> Reynolds, Pamela, *Traditional Healers and Children in Zimbabwe*

<sup>47</sup> Divining with the knowledge of *n'anga* practices

<sup>48</sup> Dream and receive answers from the ancestors

<sup>49</sup> Gift

<sup>50</sup> healer's assistants

<sup>51</sup> caused by bad spirits

caused by witchcraft, bad spirits or, *madzeikiria*<sup>52</sup>. This indicates that regardless of the influence of colonial missionaries on faith, there is still a place for the traditional beliefs – although in this case they are pejorative.

### Shifting Codes, *Urban-Political*

In 1957, the first African N'angas Association was established in the former country of Rhodesia. At the National Archives of Zimbabwe is an account of some of the details of this, given mainly through an interview with first president Macheke Gombera. After having seen healers suffer from a legacy of being called “witch-doctors”, the first order of business of Gombera was a political mission to be on record about what *n'angas* were or were not. In his own definition:

“A *n'anga* is a person who knows different kinds of herbs by their names and how to cure people with them till the person is alright...”

Earlier, Gombera had also been on record mentioning there are four types of *n'angas* – herbal *n'angas*, evil spirit *n'angas*, fortune-tellers who throw bones and *makumbi*.<sup>53</sup> As the official representative of the new healer's association, he also coordinated several events that showed a deliberate shedding of some of the old codes, spiritual associations and traditions of healers. These included a collaborative manufacture of *mishonga* into tablets with a domestic corporation, a collaboration with the Colonial government to formalize himself and make legible his group<sup>54</sup>, while indicting Zambians, Malawians and other fortune-tellers as not being “true” *n'angas*.

He writes:

“It is for this reason we have decided to change the name *n'anga* to *varapi*, fortune tellers to *vafemberi*. *Varapi* are the people who know how to treat the people by their knowledge of herbs. Before you can join this organization you must prove to know *muti* (plant *mishonga*) and must know to cure the sick by your herbs.”

Gombera's failed to overhaul the term *n'anga* and replace it with the term *varapi* in the everyday spoken usage and association. Yet, it was part of a series of changes in conceptualizations both communities and some *n'angas* had of themselves. Special distinction placed on these herbal *n'angas*, however, were disputed by the other types of healers. For instance, healers from neighboring countries, prophet healers, mid-wives and those who also used some traditional types of surgery fought to be included as legitimate. This was without much success until 1980 however, in part because it corresponded with gain of Zimbabwe's Independence, and in other part because of the large role traditional healers, and spirit-mediums of many sorts played in the struggle for it.

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<sup>52</sup> nightmares where one does not wake-up, cannot be cured by modern clinics.

<sup>53</sup> *N'angas* assistants

<sup>54</sup> In his agreement with the Provincial Official his stated mission was 1) To eradicate the word *n'anga* (witch-doctor) 2) To introduce *Varapi* with proper methods of healing 3) To introduce and instruct on the correct use of herbs 4) To be in touch with qualified African and European doctors and get the best from their advice.

Thus, on the eve of Independence in 1980, the old healers' association became the Zimbabwe National Traditional Healers Association (ZINATHA) with new political clout and support from the Zimbabwean leadership – the Zimbabwe African National Union (ZANU (PF)). Under the leadership of Gordon Chavanduka, a Zimbabwean sociologist, ZINATHA began to allow all types of traditional healers into their organization. They provided a member certificate to all those who could answer correctly several simple questions on healing and healing sources.

Currently, however, ZINATHA, has several projects that crystallize its aims and missions in ways that are far beyond the community and rural nexus in which it had traditionally rested. These include:

- ~An Herbal Healing College which teaches medicinal plants and pathologies
- ~ Works with scientists on isolating the active ingredients of several of members' *mishonga* for their own ZINATHA corporation,
- ~ Sells capsule forms of their *mishonga* in the office in down-town Harare
- ~ Actively promotes healers in HIV/AIDS prevention
- ~ Seeking foreign aid and partnerships for further research and development<sup>55</sup>

As legible and crystal as these plans are, it is equally clear that the economic and political goals of these unions are actively making a new type of healer on the scene in Zimbabwe. Many healers seem to be aware of the general threat US and even Zimbabwean scientists pose in patent cases over their traditional medicinal knowledge and have been encouraged by ZINATHA not to cooperate.

Still, if even if ZINATHA members do not cooperate there are others who may. These could include elders who have turned to the healing later in their life, *makumbi*<sup>56</sup> who are not part of ZINATHA, merchants, some herbalists who want to see the *mishonga* made “universal” and distributed more commonly, and/or healers who have not joined ZINATHA because it seems to *kuda mari*<sup>57</sup>.

### *Changing systems*

Despite those types of knowledge-holders, ZINATHA has a registered membership of 24,000 healers. While this is a large number the types of healers and members vary widely and even the current president recognizes its biases:

*There is an inherent danger that traditional medicine will be defined simply in terms of its technical herbal expertise, that this experience will in turn be recognized only for its empirical pharmacology, without reference to the symbolic and ritual matrix within which it is used – still less to the social matrix in which those rituals and symbols have meaning at any particular time and place (Chavanduka, 1986b, 267).*

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<sup>55</sup> Although this did not seem to be part of the “official” mission, the Chairman of the ZINATHA Manicaland Province who shared his application for aid with me, is in an area known for its extremely potent *mishonga* and as they are a bit isolated from the Harare centre, they may be considering to diverge plans a bit.

<sup>56</sup> Healers' assistants who know the medicinal materials.

<sup>57</sup> Love money

However, while Chavanduka recognizes the danger, he refrains from naming the actual danger or types of danger to the social matrix.

This is likely, because part of ZINATHA inherently undermines the social matrix already. Its organization that consolidates healer relationships and commonality in trade, is a large switch from the distribution of knowledge as totem-bound, or following familial and/or clan lines. In the past, the healers, in spite of their spiritual gift were often in competition with each other with common sentiments that other *n'anga* was a witch, and/or would murder for another's *mishonga*.

Further, to advertise and market the physical healing capabilities of the *n'anga* (as ZINATHA has done) detracts from the basis of their consecration in that position – that they are only the humble mediums of spiritual knowledge.

To fabricate capsules of *mishonga* and sell them to the cosmopolitan urban populace (also ZINATHAs' work) makes a gesture of support to the urban, industrialized way of life – which has been linked to increasing proletarianization from economic development schemes<sup>58</sup>.

And, to set up a college of healing (Established in both major cities by ZINATHA) also sidesteps the role kin, and the community have in helping to determine who is a character that is “fit” to heal – spiritually and socially. This further undermines any role that a community-bestowed and affirmed honor, as social capital, might have in the *n'angas* own development of confidence and strength in their healing abilities. Instead, the formalization of a separate college makes the selection, training and criteria for success different than the ways they were when they rested in family, totem or clan hands. This means money, connections and literacy are all new criteria.

Thus, ZINATHA's overtly divergent political and economic approaches pose radically new ways of valuing, passing, keeping, organizing, and benefiting from traditional medicinal knowledge.

Therefore, when we recall the codes, meaning, value and linkages found within a community system that custodians of traditional knowledge interact with, it seems obvious that the social, spiritual and environmental loom of interrelations and institutions will begin to crack under the competitive pressure a fields of knowledge production possessing an entirely different set of codes and measures of success. As there are already particular ways TMK is kept, valued, shared and/or used, that exist in such a nexus of community relations that are either strengthened, denied or created through it, then the particular design and character of that community will no doubt be changed as the individual healer is asked to deviate from the traditional and spiritual codes that gave both privilege and responsibility as a custodian.

#### Shifting Codes (*continued*), *Rural-Mercantilist, Urban-Mercantilist*

Other activities that are characterized by a different priority - the pursuit of money (*kuda mari*) is found in the selling of the *mishonga* and the information on its healing utility in local markets. This emergence clearly illustrate the newly carved space for an *agent of separation* with a particular cosmopolitan nature. These “*muti* merchants” began to set up shop, or stalls, with

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<sup>58</sup> McMichael, Philip, *Development and Social Change: A Global Perspective*, Sociology for A New Century, Pine Forge Press.

*mishonga* for sale, as early as 1970 in Pendanzahmo Market found on the outskirts of capital of Harare.

These markets appeared around the same time that Dr. Gombera established a store in the downtown area to sell the *mishonga*. The *mishonga* are now firmly established as the “people’s medicine” as the location of Pendanzahmo Market along with two others in Harare - Mbare and Machipisa – as well as other markets in other major Zimbabwean cities all are found in the high-density areas. Some of the merchants I spoke to collect the *mishonga* themselves and have a *n’anga* as a relative. In a high-density market called Mbare, however, amongst several lines of cupboards and stools are dealers who have a distributor – an *ambuya* who comes once a day, in a non-specific time in the afternoon, and delivers a few standard *muti* along with standard instructions of usage and illness. Hence, these particular merchants are not prepared to deal with symptoms persons describe, merely common names of illnesses such as stomach ache, or *jako*<sup>59</sup>, or types of well-known enhancing *mishonga* like *vhuka-vhuka*<sup>60</sup>.

#### *Shifting Codes, International-Mercantilist*

As much as these agents and agencies of separation disassociate information from TMK’s original custodians, contexts and connotations, information is still kept within the grasp of Zimbabweans who are familiar with it in a particular appearance, language and context.

The commonality between ZINATHA, the *muti* merchants and newer types of health practitioners for the local communities is that they continue to rely to some degree on local Bantu languages - Shona, Ndebele, Tonga, Chewa, Njanje, or Tswana, as well as local familiar faces. These local and national practices still locate and credit some of the peoples who have a deep understanding of traditional medicinal knowledge. The accessibility is also relatively the same.

Yet, it is evident that the aim of ethnobotanists’ registries is not the same. Their aim in preferencing the elements of the plant and animal biodiversity for conservation and/or research and development removes this valuable information for foreign management, development, distribution *and* consumption. The fact that little importance is put on persons, communities and the systems that cultivate and nurture the diversity, slices through the relationship some rural persons have with each other, with the animals, the spirits, and even the very sources of healing.

Because Bantu peoples have long had an oral tradition where comprehensive amounts of information cannot be passed so swiftly or easily, it seems there also may be an uneasiness about ethnobotanists’ written documentation of the knowledge. Consider this quote pertaining to oral traditions in a Zimbabwean novel *Nehanda* by Yvonne Vera:

“ *Our elders have taught us the power of words. Words must be kept alive. They must always be spoken. The white man wishes to remain a stranger to us. It is not only important that a man speaks with words, it is also important what gestures he uses for his argument. The stranger has refused to sit among us...*”

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<sup>59</sup> menstrual cramps

<sup>60</sup> for male potency.

*He says he has spoken. He carries his words in his palms, between his fingers. His words tremble with the wind. We will not surrender our words onto the side of a calabash which a child may break one morning. He has said that our words will last beyond several moons. Does he not know that there are other words for the future, plentiful like seeds? The white man held the paper like a sacred thing. His hands shook and we mistrusted him.”*

The idea that information can be mined from the cognitive storage of an individual who relies on spirit and dream-initiated memory recall, seems illogical to many *n'angas*, anyway. Despite the *kurotswa* process of revealing knowledge through dreaming, most traditional healers have been trained, and still train through oral tradition and memory recall. This would suggest that what is in their head cannot be taken away easy because it is not always on the surface of consciousness and often is only (remembered) or revealed through that *kurotswa*<sup>61</sup>. Most interviews of my own with different types of knowledge-holders – from the *gorobori*<sup>62</sup> to the assistant, only revealed piecemeal bits of information. I began to realize with certainty then that I would never be able to remember all of this, nor even write down all of the details. This is because it is always changing it seems. Further, even if I could have documented, in a very organized fashion, I am still certain that this knowledge is never fully revealed, but like a kaleidoscope manifests its brilliance in many multi-faceted, but ever shifting and incomplete ways. Its value, however, is encompassed not in one essential picture or capsule of it, but in its seeming active, agential organic and alive ability to be flexible, change, adapt and shift.

Of additional significance, nearly half, 47.6 percent of traditional healers Chavanduka has surveyed have not received any formal educational training and therefore are very likely to be nearly illiterate<sup>63</sup>. Still they remain known and consecrated as powerful for their ability to process, access and act on knowledge when it is most needed<sup>64</sup>. All of this, without literacy.

### ***Agents of Separation***

The recognition of a consecrated knowledge-holders role in a traditional knowledge system is threatened then, by the very act of translation and recording. For instance, registries remove parts of the knowledge (information) from the heads of its practitioners to a more fluid, mobile and an unkempt state. As sociologist Pierre Bourdieu notes (1993), literacy transcends the incorporated and human embodiment of knowledge preservation for particular reasons:

*By detaching cultural resources from persons... it enables a society to accumulate culture hitherto preserved in the embodied form, and correlatively enables particular groups to practice primitive accumulation of cultural capital, the partial or total monopolizing of society's symbolic resources in religion, philosophy, art and science, by monopolizing the instruments for appropriation of those resources (writing, reading and other decoding techniques) henceforth preserved not in memories but in texts (p. 185-6).*

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<sup>61</sup> Receiving knowledge from a spirit during a dream.

<sup>62</sup> The most powerful and knowledgeable of traditional healers.

<sup>63</sup> *The Traditional Modern Healer in Zimbabwe*, p. 43

<sup>64</sup> Reynolds, Pamela *Traditional Healers and Childhood in Zimbabwe*

Thus, when we consider this type of separation in opposition to other types of *agents of separation* in Zimbabwe, such as herbalists, *muti* merchants, and politically-correct *n'angas*. While they alienate information of healing utility from bodies of traditional medicinal knowledge who are attached to spiritual *hun'anga*<sup>65</sup> and as well as many community members who consecrate its function, linkages, use and value, the health services, still are technically aimed toward the Zimbabwean populace. However, the problems that may become associated with this are illustrated in the case of the African Potato below.

### ***The Fetish***

The African Potato<sup>66</sup>, latin name *Hypoxis Hymerocallidea*, became a hot potato in Zimbabwe in the year 2000. It began rather nondescriptly, appearing alongside ginger for stomach aches and other vegetables for consumption in some of the street markets in Harare - including the one next to the main public transport station on Union St. and Julius Nyrere Street. Who it was that first began marketing it for its cure-all/*gutchu*<sup>67</sup> effects could not be known at this late date - so many *muti* merchants have been marketing it that way since seeing its' increased popularity with the Zimbabwean public. The popularity of this potato, however is not from its' new notoriety as Roecar Holding's property- patent on the isolation of the potato's active ingredients for an anti-cancer solution, but from Zimbabwean citizens<sup>68</sup> who have responded to the potatoes' rumored anti-HIV/AIDS properties<sup>69</sup>.

During the height of the potato's popularity in the markets, some *muti* merchants, none of them licensed to know or heal with medicinal plants, began to sell a tuber on the market that they called the "African Potato"<sup>70</sup>.

However, as a result of accusations of fraud and concerns for public safety in diagnosis and use of the right healing substance, ZINATHA President Chavanduka was forced to appear on national television and distinguish the identity of the real, healing African Potato, and the "bogus" potato *muti* merchants had begun to sell in markets. Photos of the different types of potato were published in the national papers as well. Although Chavanduka did not reveal the entire trade secret - exactly the potato cured and how to prepare it - it was still evident to most of the population that the potato he identified as the "real" African Potato was a powerful *mishonga*. Chavanduka encouraged viewers in every one of his appearances that consumers of the African Potato should also consult a traditional healer for their health needs and they could be assured they were given the right *mishonga* as all of the healers were licensed by ZINATHA themselves.

### ***Transfer***

As this *mishonga* has been forcibly removed from the direct control, circulation and circumscription traditional *n'angas* put on knowledge, there are several types of results that auger for other changes for Zimbabwe. Economic and political removal of the information (on

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<sup>65</sup> The entire knowledge, practices, performances and actions of the *n'anga*, traditional healer

<sup>66</sup> No known Shona name.

<sup>67</sup> Shona name for a powerful *mishonga* that cures all that ails you.

<sup>68</sup> In a country known to possess an HIV/AIDS incidence of 2/3rds of its' population

<sup>69</sup> seconded in print in Van Wyk, Oudtshoorn and Gerickes' *Medicinal Plants of South Africa*

<sup>70</sup> The 40 percent unemployment rate that has been increasing in Zimbabwe since the Structural Adjustments have often been paralleled by such activities in the informal economy.

the utility of the plant) and its attached physical carrier (the tuber) by *muti* merchants and subsequently ZINTATHA, from the embodied spiritual authority of a healer entails several changes for the health services, relationships, economics and significance of health in Zimbabwe.

#### *Reification as a commodity*

There is the reification of the meaning of the potato for the patient and consumer population. Whereas the potato, physically and as a symbol was previously one of many *mishonga* in a repertoire of healing power a traditional healer had and delivered with consecrated codes, the potato now becomes a “magic bullet” of sorts, a quick fix pill you can pop for a quick cure. In both cases, there is a type of magical marketing element, but now the type of magic and who determines what type of magic reigns has switched. The magic now becomes inherent in the potato itself - as a material and tangible thing, and it no longer resides in the healer, who performs the magic healing in ritual and traditional forms. Further, it no longer rests in the bed of Shona or Bantu community beliefs in the power of the traditional healer - revealed through particular spirit(s) and performance and ritual. It is now, instead, seen as a commodity, and as a commodity:

*It is those productions of the human brain appearing as independent beings endowed with life and entering into relations with one another and the human race (Marx, Karl in Kapital).”*

#### *Alienation*

There is an alienation and detachment of one part of the healing knowledge from the healers as well as the healer from the public. This is via the interruption of the *muti* merchants, the media and even ZINATHA’s. This disrupts the close relationship *n’angas*, or knowledge holders have had with individuals and an entire community as these new *agents of separation* carve for themselves roles as intermediaries and ‘middle men’ and women<sup>71</sup>.

#### *Commodity fetishism*

It is possible to notice the traces of fetishization and desire for the potato that - as an individual commodity - has its symbolic healing utility amplified as a potential *gutchu*<sup>72</sup>. Additionally, there is also the added risk for the patient when the new spoken value attached to the potato come from an individual unauthorized in healing knowledge. In some cases this may seem to give the potato, additional power.

There is abundant literature since Marx on how commodity fetishism comes about.

As a “new independent object”, the commodity transcends original semiological control. The new objectification of it brings it “outside” of preexisting codes where semantic effects are produced or directly controlled (Pietz 1993; 129). Taussig also elaborates on commodity fetishism in different settings writing:

*Fetishism found in pre-capitalist economies arises from a sense of organic unity between persons and products. Stark contrast to fetishism of commodities which results from the split between persons and things they produce and exchange as*

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<sup>71</sup> The healing role often entailed a firm understanding of social relations - Chavanduka, Gordon *The Modern Traditional Healer in Zimbabwe*

<sup>72</sup> cure all



*a subordination of men to things they produce, which appear to be independent and self-empowered (1980; 30).*

Most social scientists attribute the distance from the original source of production to the market as a cause of fetishism with commodities, but Marx originally explicated how the laborer, who produced the product, can become so far removed from its actual selling form in the general market, with all its added labor value - additional manipulation, packaging and processes in production - that it becomes alien, strange and almost magical.

Yet further, is an additional character of a fetish - as an abstraction, “ghost” or part of real biological or social relational whole that, unobtainable through individual means, is therefore pursued in attempts to satisfy, at least partially, a biologically, or culturally-defined need or desire (Friedman 1973; Pietz 1993; 183). Thus, commodity fetishes can also be those things that satisfy biological and/or culturally-defined “needs”, but because of the added labor value attached to them, some may no longer have access to them<sup>73</sup>.

Once ritual fetishes<sup>74</sup> - used as a magic aid for direct use in healing – the *mishonga* are now becoming a new type of fetish simultaneous as an “erasure of genesis, the obliteration of history”,<sup>75</sup> occurs. Following this, the *use-value* of the sign of healing utility becomes only a “satellite and alibi of exchange value”... meaning that the labor of production - and the entailing exploitation – is not credited or fully attached.

In our case, however, the object still exists, only with the new marketed appearance of being magical, unbiased and innocent and a product of said merchant, or “Corporation”, rather than the healers, and their ancestors. This reality is echoed by the belief of some herbalists that *mishonga* in capsules will then have “universal” appeal – “Both Christians and Africans can use it”<sup>76</sup>.

The result is then that the original healers are now *also* human-fetishes-in-formation as their services, and even their image at times are exploited separate from their own agency and codes of consecrated keeping, sharing, using and valuing.

### ***Etrangement and uncertainty***

Finally, estrangement occurs as these *mishonga* in the market are repackaged as part of a “culture of no culture,” (Haraway 1987) or part of what I would say is more apt expression is the *culture of every culture*.

Donna Haraway’s phrase for how a culture of *technoscience* gets away with a mythical perception of itself as untroped, is a also relevant to how individuals with market, economic values, *kuda mari*<sup>77</sup>, make it seem as if their products have “universal” appeal and value.

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<sup>73</sup> this is because money become the primary means of access, which is inherently limited.

<sup>74</sup> Because the individual nature and technique of their performers are not revealed

<sup>75</sup> Miklitsch, Robert, *From Hegel to Madonna, Towards a General Economy of “Commodity Fetishism”*, State University of New York Press, 1998.

<sup>76</sup> Interview with Guruve herbalist, Sekuru Sizi Chifamba, June 2001.

<sup>77</sup> Love money

### *Translation*

When using the English term “African Potato” instead of the Shona name, *muti* merchants directly market the product with a more pan-ethnic approach. It may seem apt in the capital of Harare, - a cosmopolitan meeting point of many African ethnic groups whose only common language often seems to be English. However, that term, in English, is a new one and demands the individual patient or consumer enter a different linguistic framework than the one the knowledge was cultivated in.

It is interesting to note that most discussions around subjects like *mishonga*, *n’angas*, *mapipi*<sup>78</sup> and *madzeirira*<sup>79</sup> do not occur in English conversations, but only in Shona. Even then, the translation of these concepts are not easy. Linguist Michael Agar suggests that our cognitive frameworks are formed by what he calls *languaculture*<sup>80</sup> - wherein unique cultural and cosmological concepts are carried only through a specific language. If this is true, then English speakers are inappropriating the riches of Shona or African cultural language signs as their own without crediting the origin. In the past, English has actively incorporated words from foreign languages like French or German without translation before. Why then has there been a resistance to embrace African words as they appear in the original language?

In this case, it may be the translation rather than acceptance of African traditional and cultural concepts is a deliberate silencing and trivialization of the validity and importance of them. After a century of Colonial history that demonized the traditional healers as well as the spoken language, the continued denial of the significance of African linguistic terms and language, whilst still benefiting from its resources, indicts agents – both African, Shona and Foreign - of continued colonialism, or neo-colonialism as it appears in struggles for semantic authority as well.

### *The future*

The removals of information from the secure loom of knowledge systems, language and context, then, accounts for a type of reification. An estrangement occurs as the ability to identify where, who and how that knowledge was accumulated, kept, stewarded and valued when ethnobotanist registries focus only on the biodiversity threatened. While the knowledge of the healing utility essentially identifies the active healing agency of the plant, the added technology of reducing the plant to one or two compounds is viewed as the added value, the part that renders it industrially applicable.

And yet, a bias towards technical production rallying against scarcity, may even have the effect of de-development<sup>81</sup> of local systems. If not this, then the shift in keeping, sharing, using and valuing of traditional medicinal knowledge at least represents shifts in the social milieu from whence it was nurtured. As the sorcerers’ circle is redrawn around the newer agents, who represent newer codes of use based on political and economic interests, rather than spiritual or community institutions, the effect on the surrounding society is perceptible already.

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<sup>78</sup> the acts of magic

<sup>79</sup> an illness that cannot be cured by modern clinics, a type of trance or walking nightmare

<sup>80</sup> Agar, Michael, *Language Shock: Understanding the Culture of Conversation*, Quill Press, 1994.

<sup>81</sup> See for instance, Yapa, Laksham, “Constructed Scarcity”, *Post-Structural Ecologies*.

### ***Culture loss***

The phenomena of estrangement, alienation, reification and fetishization all show difficulty, threats to the traditional medicinal knowledge system, and forced adaptation for communities that have already institutions that keep, share, use and value the knowledge. This coerced change, as mentioned previously should not, however, be naturalized and any subsequent de-development could possibly give cases for damages. In summary these could be:

- 1) The estrangement that occurs between the patients/consumers and the services or mishonga they seek, is paralleled by the alienation/estrangement that occurs with the healer and their clientele. No longer a relationship of good-faith or sympathetic caring healing, the services are reduced instead to a more economic “naked self-interest.”<sup>82</sup> Whether this is magnified and echoed in the rest of society or not, the motivated, “selfish”, individual and ungifted muti merchant health providers are gaining in legitimacy, and now represent a crack, or bifurcation from the assured direction and position the “naturally and spiritually talented” healers had.
- 2) An alienation and estrangement also occurs between patients and traditional healers when the sanctity of the spiritual, moral codes and empathetic relationship of the traditional patient-n’anga becomes transformed to a consumer relationship with health products and merchants who clearly have more utilitarian and kuda mari<sup>83</sup> propensities.
- 3) As a patient becomes a consumer, and the mishonga a product and commodity, the magic, the spiritual linkages, and family ties through an heirloom are transformed – estranged. This, the mapipi, or techniques of healing, are adaptive tools and cultural technology that have provided guides for action, hope for initiatives and faith in a way of life. The estrangement of this may have perhaps the largest ramifications as it touches every part of the way traditional medicinal knowledge operates as a system, facilitates community and cultural institutions and connectivity.
- 4) Reification and a new form of fetishization of a magic object (opposed to the its use in ritual and spiritual events) is seen as its utilitarian potential is marketed. Whether this is magnified and echoed in other sectors of Zimbabwean society or not, the motivated, “profit-motivated”, individualistic and “ungifted” muti merchant are striving to become newly legitimated health providers at the expense of actual health service. If they are successful, capitalist-mediated relationships will have made an indelible foray<sup>84</sup> into an ***extremely sensitive and significant sector of Zimbabwean society – its traditional health delivery systems.***

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<sup>82</sup> Marx, Karl *Das Kapital*

<sup>83</sup> love money.

<sup>84</sup> With even more gravity than the privatizations of the State’s modern health clinics

## ***Analyses***

The organization, analysis and conclusions of some of this paper has been supported by some of the following theoretical frameworks and considerations:

### ***Fields of Cultural Production***

French sociologist Pierre Bourdieu has explored hegemonic devices legitimating some individuals' recognized access to signification and production of cultural material (1997). He identifies the authority of "codes" or criteria, visible by an emphasis on specific form, technique, genre and/or linkages to the orthodoxy, rather than content, as the internal gate-keeping device of restricted fields of cultural production. Only those cultural producers who draw upon these recognized codes of form and technique in production are legitimated either by peers, who are also competing to be legitimated and therefore fiercely maintain the standards, or by those consumers who have had the codes translated to them by an insider.

We have begun to see what happens when different schemas composed of such codes are forced to come into contact and competition via forcibly merging and "harmonizing" legitimation mechanisms. In the case of Zimbabwe who is facing new expectations to conform to intellectual property law as defined by the Trade-Related Intellectual Property Rights (TRIPS) article 27 of the GATT, the legitimating mechanisms are both the proprietary laws and the acknowledgement and protection it may or may not give to particular authors, as well as the agency of the audiences and consumers who recognize and acknowledge the codes themselves.

The African Unions and Zimbabwe's choice to accept the option to create *sui generis*<sup>85</sup> legislation to protect (and award benefits for) intellectual resources also threatens to crystallize the current social and organizations as it is presently. This "freezing of forms" as a frozen entitlement that makes permanent normally fluid interplays of keeping, sharing, using and valuing knowledge, could be beneficial only if we are stuck with the current political and economic inequities recognizes legal anthropologist Rosemary Coombes<sup>86</sup>. Since, indigenous and local persons currently have little weight in national constituencies, to entitle them as the custodians of their own traditional knowledge could give them more equal weight and in some cases, more recognition of their rights to sovereignty.

### ***Symbolic Goods***

However, despite economic and legal efforts to make legible knowledge as a property, commodity or a resource that can be managed or even to give political and economic weight to indigenous or local communities, much traditional medicinal knowledge continues in a very contemporary sense to facilitates relationships that should not become pooled amongst only those who have title. As anthropologist Marilyn Strathern notes the freezing of property as a title, is a set of relations that inhere ownership in an exclusive personhood and thereby halt processes of everyday dissemination.

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<sup>85</sup> latin for unique or its own kind

<sup>86</sup> Coombe, Rosemary J. *The Cultural Life of Intellectual Properties: Authorship, Appropriation and Law*. Duke University Press. 1998.

We can then juxtapose this type of good, commodity, or “resource” to the symbolic good in its symbolic-social-economic nexus. The relationship is seen in *The Market of Cultural Production* where Bourdieu distinguishes ‘symbolic objects’ as objects that have a rare and particular value in context and assist in the accumulation of *symbolic capital*. Symbolic capital, is seen in the accumulation of reputation and clientele based on the demonstration of submission to local, or culturally-upheld values and ideals in behavior. An example of this is in found in the “good-faith economy’ wherein, accumulation of social/symbolic capital occurs through economic exchanges or generosity that show a particular moral favoritism for kin, or acquaintances. Further, separate moralities guiding distinct *spheres of exchange* (Bonhannen, 1976) - dependant upon the type of good - also accounts for an either increased and/or a more tightly restricted circulation of these goods.

Additional literature advocates for a recognition of some goods to be kept from general market circulation. Anthropologist Anne Weiner in *Inalienable Possessions* discusses that proper value is only possible in particular contexts, while legal scholar Margaret Jane Radin suggests not only are some goods inalienable, like rights, but that our current market rationales could and should accommodate the idea of *Market Inalienability*.

In this sense then, even with good economic or legal intentions to conserve or protect the traditional medicinal knowledge, there may be rational, yet latent economic-cum-cultural strategies occurring in local community that should not be frozen, quantified, circulated, distributed or commodified.

### ***Cultural relations commodified***

Despite efforts to make legible the unique situation of traditional knowledge with categories like “traditional resource rights”<sup>87</sup>, “petty patents, “inventive step” and/or “trade secrets”<sup>88</sup>, there remains the considerable degree of desacralization that is associated with these approaches. For Zimbabwe thus far, the consequence of this is the unbinding of the traditional knowledge from a system, schema and sphere of keeping, sharing, using and valuing that has special, traditional, sacred and spiritual meaning that also crucially facilitates social institutions and relationships in local Zimbabwean communities.

As a trend, commodification of knowledge services is one that is evident in the universities and classrooms of industrial countries, However, the threat here is much more dire. As the schema of a market ethos towards health service threatens to undermine the traditional codes of health delivery, the real danger is that there is nothing in Zimbabwe to adequately replace it. The governments’ recent privatization of the modern health care system shows both institutions incapable of supporting cash-lacking citizens who are at risk for HIV/AIDS. As the HIV/AIDS rate is one-third of the population, and to date, two-thirds of the population rely on traditional healers, this is a serious, if not intolerable situation.

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*Intellectual Property Rights and Genetic Resources: Guidelines for Developing Sui Generis National Policies and Legislation to Promote Community and Farmers’ Interests for Southern Africa*. Compiled By Dr. Chitsike, IUCN and FAO Publication.

<sup>88</sup> Posey, Darrel A., Dutfield, Graham, *Beyond Intellectual Property: Toward Traditional Resource Rights for Indigenous Peoples and Local Communities*, International Development Research Centre. 1996.

Finally, as the strength of many the local institutions from health service, to justice delivery, to spiritual, family, ritual, economic and political spheres all rest on the culture (as carried through traditional knowledge) as tool, technique, strategy as well as cosmology, to shake the finely balanced and delicately designed loom of *Mishonga ChiShona* is to rip at the very fabric and strength of community resilience and subsistence.

While this definitely would not be the first case of a development project and nation-state doing such things<sup>89</sup> - undermining the strength of their own local institutions and constituencies to follow a capitalist and industrial model of development – the Zimbabwean State has a very special and significant role in its current approach to a *sui generis* alternative to intellectual property law. They could for instance, learn from the lessons of this research and understand that local and indigenous communities must not just be mere stakeholders who care about biodiversity, but they are intimately tied to that biodiversity and in fact maintain it through their own cultural and linguistic diversity. As has been a common critique of environmental programs in Zimbabwe in the past, such as CAMPFIRE<sup>90</sup>, such programs must not put “elephants or other natural diversity before people.”

### ***Conclusion***

The pattern resulting becomes one where when capsules of knowledge (information) are removed from a knowledge body, the transfer of control that follows initiates a capitalist symptom called commodity fetishism on traditional medicinal knowledge as non-distinct commodity or service. Further, when specially local information, previously existing and moving dynamically – as a bounded knowledge body - in a local community nexus and system of spiritually and culturally consecrated meaning, value and ritual, is alienated, shocks to the local system may result. Local roles, values, processes and interrelations thus are fluctuating and dislocated even as accusations of “biopiracy”, copy-right infringement and other injustices polarize and heighten conflict primarily between local and international stake-holders.

Finally, the ultimate relevance of these findings are in positioning and juxtaposing those who would alienate or share traditional or sacred knowledge eagerly, with those in the greater community whose desire is to keep knowledge out of a more promiscuous circulation.

### ***Methodology***

In spite of and during a three-year period of financial fluctuation, political fighting and agrarian reform in Zimbabwe, civil, non-governmental and academic communities have hosted efforts to design protective legislation on community-produced traditional medicinal knowledge. Now, propelled by recent passage of an AU document recognizing community rights over the knowledge holding, draft protective legislation has begun to be written up in Zimbabwe.

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<sup>89</sup> See for example Lansings, *The Balinese, or Gelles Water and Power in Highland Peru*

<sup>90</sup> Communal Areas Management for Indigenous Resources, sponsored by USAID.

This interest and enthusiasm follows on the tail of an unearthed case of unfair benefit-sharing between a U.S.-based Pharmaceutical Company, university scientists from a Swiss research team, the University of Zimbabwe and a trade union of traditional healers – the relationships between which being a typical example of the ways traditional medicinal knowledge is both misunderstood and bartered for by institutional stakeholders who neglect the actual producers themselves.

While it could be important to discover why this case and others similar to it should be occurring, I aimed rather to conduct fieldwork to illuminate the ways traditional medicinal knowledge can be said to be kept and shared, how it is valued, shared, performed, viewed and in what patterned ways it moves in the social milieu. Necessarily, my research also involved some oral history to discover what discourse will say is the “traditional” way it has been organized – without the presence of a statute in common law, or an institutionalized authoritative body regulating it. Additionally, however, the research also necessitated looking at the contemporary situation of traditional medicinal knowledge production and protection. How the former codes, or fields of production may be changing as interrelations with outside knowledge-producers - using different codes - was also an emphasis.

I began to do this in Zimbabwe from June 19 to September 7 – a country composed of several major Bantu groups – the major ones being Shona and Ndebele. During that time, because of the varying levels of instability in the country, I based myself in the capital of Harare which was less subject to fighting over issues of agrarian reform. I stayed with a young Zimbabwean couple who, although they could be considered cosmopolitan urbanites, were also familiar and often visited their family in the rural *kumushas*, or home compounds. The young woman in fact, was the younger sister of a friend I had met on a previous stay in Zimbabwe, and both friendships ushered me into their larger spheres of family, friends and neighbors – some of which would become important informants. In the capital I was able to access records, NGOs, academics, the Zimbabwe Healers trade union, merchants who sell medicinal plants in three markets – Pendenzahmo, Mbare and Machipisa, and also two practicing traditional healers.

Although I stayed securely in the capital of Harare, it was also possible to identify through news and embassy reports which rural areas were more or less unstable by: 1) their proximity to a commercial farm scheduled for reassignment: or 2) it was a ZANU-PF/ruling party stronghold which had many connections in the present army and former liberation army veterans – the latter who were reported near the scene of many of the conflict locations. Therefore, after two weeks in the country I ventured 6 hours north of Harare to a rural district, namely Chaminikire Village, just outside of a growth-point town named Guruve. I spent two consecutive weekends there involved in interviews. I had simply been told the area around Guruve was a very “cultural area,” in both the Zezuru and Kore Kore-Shona traditions. And that the people there were very hospitable and friendly. This particular area was also an area of high veld – or long, grasses.

A month after my arrival in Zimbabwe I also planned for a two week long trip to the southern part of the Eastern Highlands, a high altitude woodland that descends to a low-veld, Parinari grassland and Msasa grassland, that is very close to the Mozambique border. In this area, I moved through the towns of Chimanimani and Chipinge and then into the surrounding rural areas. I chose this area because I had been to the Chimanimani area previously and knew it for its

unique vegetation introduced to me then by an environmental scientist on a traveling seminar and I remembered well the tales of sacredness of the forest there. And more importantly, just south of there, Chipinge is a town renowned for being a gathering site for many very powerful healers – many who would go to both South Africa and Mozambique to add to their repertoire of healing medicines. In fact, one urban resident informed me that if one was in need of a powerful medicine - good or bad - they would actually say or threaten that “I’m going to Chipinge for you.” While staying several nights in both towns, the surrounding rural areas and villages I stayed in was the sole consequence of being low on funds and having a research assistant whose family lived in the areas where we stayed at and who were graciously willing to host me. These areas included Nyamasundu Valley, Chirinda Valley and the villages bordering Tilbury Estates – a tea plantation the villagers worked for.

I was in Harare again after that trip for a while, but 2 and half weeks later, I moved both West and North, with an ultimate destination of Binga which borders Lake Kariba in an area where the Zambezi widens to meet it – known as the Zambezi Escarpment and in possession of some unique flora and fauna that are found primarily in wetland, *vleis* and *danbo* areas. Binga and the surrounding areas were Mopane woodlands. This is an area of Tonga speaking people which is not even a dialect of Shona, although most persons I met there spoke fluently four languages – English, Shona, Ndebele, Tonga and frequently even Nanja (from Zambia). Although the language and traditions are a bit divergent from central Shona traditions I felt compelled to visit there as this was said to be the “jackpot” of healing traditions. Later, I discovered the healing concepts to be very close in fact to both Shona and Ndebele healing traditions. I stayed there for one and half weeks before heading to a Plumtree on the border of Botswana – an area of very dry, low-*veld* climate and environment.

The range of sites I chose was the result of having my main base in the cosmopolitan capital of Harare. There the healing traditions were stemming from all four Shona groups – Zezuru, Ndau, Kore Kore and Karanga, as well as many of the other Bantu groups - Ndebele, Tonga, Tswana, Nanja and Chiweshe who have mainly come to Zimbabwe from other English speaking countries such as South Africa, Malawi, Botswana, and Zambia. After being exposed to the range there, I believed it less important to stick to one ethnic groups’ healing practices rather than get the best sense of the range and then the commonalities between the healing traditions of all the groups that I could.

Ultimately, my research had a breadth of urban, cosmopolitan and rural, traditional healing knowledge, although it would be difficult to pin the rural healers into just one type of box. Many rural healers, in fact, had been well-traveled in South Africa as a consequence of collecting plants and animal medicines, sharing and networking with other healers, responding to directives to seek plants in a particular area, attending ZINATHA (Zimbabwe Association of Traditional Healers) meetings, or from just responding to patients problems who were located elsewhere. And many urban healers had come from a healing tradition that had its’ roots in the rural areas and still returned there to collect medicines.

Of the formal interviews I conducted, one was with a *svikiro*, a spirit-medium, 4 were with members of the local government and traditional authority structures (1 *sadunhu*, 2 *sabukus* and a rural district councilor), 7 were *makumbis* ( healers’ assistants), 12 were patients/consultants



and “connoisseurs” of healers, 12 were *n’angas* (traditional healers), 1 was right on the verge of becoming a *n’anga*, 3 would call themselves *chirembas* or *chitopotas* (doctors or herbalists), 5 were *muti* market merchants, 2 were officials of ZINATHA- the trade union of Zimbabwe Traditional Healers, 1 was a pharmacy student, and 6 were relatives of traditional healers. Other leads or bits of common knowledge came from conversation with informal sources who were friends or acquaintances. One portion of my data came from several eager acquaintances who wished to contribute to my understanding of the *n’angas* of their own family, or their own areas. Among my most key informative and helpful sources though were the *n’angas* assistants – *makumbis* – with whom I went to collect and identify medicinal plants with. Being that these assistants were closer to my age and were mobile for travel, it was with more ease that I could conduct extended, follow up and participating interviews with them.

Of the healers I interviewed, 5 were women. Three of the assistants were women. None of the traditional local authorities were women. The one spirit-medium I interviewed was a woman. Two of the herbalist/doctors were women as well. Two of the patients I interviewed were women. There were no female officials of ZINATHA with which to interview. And 3 of the *muti*-market merchants were women. All of the women I interviewed with the exception of one patient were mothers. None of the women called themselves *nyamukuta* (a mid-wife) but many seemed to have a repertoire in reproductive, children, sex and female-related health issues although some of the male healers also claimed a specialty in infertility and even abortions. All of the persons I interviewed with the exception of three of the *makumbis*, the pharmacy student and five of the patients were above age 30, and most of them were well past 50.

Each interview, involved first a description of myself as an anthropologist who studies human relationships and culture and a distinction of myself from scientists interested solely in medicinal plants. Each informant was explained orally the contents of my research consent form and asked if they wished to continue. All informants were also given a copy of a letter from Dr. Emmanuel Chiwome, a professor at the University of Zimbabwe supervising my project, asserting: I was not aligned with any of the major political parties; I was not involved in research around contentious land reform; and my aim was to talk to traditional, and cultural authorities and persons on the cultural topic of traditional medicinal knowledge production and keeping.

The participant-observation I engaged in was as an observer of patient/consultants of *n’angas* for healing and strengthening medicines, ritual cleansing and rituals for thanking and invoking the ancestors. Three times, as a friend of a family member whose family was enjoying the visit or finding it a reason for celebration, I got to see and participate in several more informal demonstrations of *bira* ceremonies where singing, dancing, brewing beer and praising ancestral spirits would occur.

As a friend of the patient/consultants I was able to access their opinions on the effectiveness and power of that particular healer. I also participated and observed as with three *makumbi* who assisted the healer in gathering, preparation and identification of medicinal plants and animals. Two were relatives of friends, the other was a fortunate meeting.

Further, I was a joint consumer and began to understand both the pricing scale and to some extent the quality scale as I would purchase medicines for friends in need and even sample some

myself to add to my understanding. As time passed several acquaintances who had assisted in some capacity or another also discussed their illnesses with me and would query me and would relate their fears or troubles with both healers and pharmacists.

The final portion of my research involved looking into available records and literature which included: anthropological literature written by anthropologists Pam Reynolds, Michael Gelfand and sociologist Dr. Gordon Chavanduka (current president of the Zimbabwe Association of Traditional Healers – ZINATHA); relevant Shona poetry, songs, novels and writings on *Pasi Chigare* (the golden and old days of Zimbabwe); newspaper accounts of the struggle healers were having in maintaining legitimacy, as well as documents available at the National Archives. Here I found several transcripts of oral accounts of the struggle healers had to undergo to be recognized as legitimate under the colonial and even the new government. Finally, I presented and participated in a conference on Intellectual Property sponsored by the NGO Biotech of Zimbabwe where in a representative from the Patents Office, the Ministry of Agriculture, the African Industrial Patents Office, and other scientists, academics and healers were present.

## **Appendix I, Glossary of Shona Terms**

Amai Guru - older aunt on father's side  
Amai Inini - younger aunt on father's side  
Ambuya - general grandma, or mother in law  
Ambuya Nehanda, Kaguwe, Gumbore Shumba, Mukwati, Chaminuka - Mhondoro Spirits  
Baba Makuru - older uncle on father's side  
Baba Munini - younger uncle on father's side  
Badza - hoe, traditionally used a tribute or token of thanks for healing  
Bakatwa - a traditional knife, part of a man's traditional inheritance wealth  
Bharanzi - old-fashioned  
Bharanzi, saga - old-fashioned (negative)  
Bhudhi - brother  
Bhudhi Mukoma - older cousin brother  
Bhudhi Munina - younger cousin brother  
Bira - a general ceremony that includes beer brewing, songs and possessions of traditional authorities in order to sort out a problem and simultaneously appease angry ancestral spirits of the past  
Bute - traditional tobacco snuff used in rituals and channeling the ancestors  
Bveni or gudo - baboon  
Chaunacho - possession  
Chaunacho - something which belongs to me, a possession  
Chengeta - to look after  
Chengetera - to save for, to keep for  
Chepasoro nhova - the unhealed fontanelle of a child  
Chigure - a carnivalesque figure who parades around with a mask and provoking people  
Chikesa or Muhiza - the traditional garments worn by trad. Healers  
Chikwambo - vengeful spirit of a foreign/ alien thing  
Chinena - cramps caused by witchcraft, can be a needle in the ankle  
Chipo - gift  
Chipuku (Tonga)- a spirit which has a human face and an animal body  
Chiremba - a general doctor  
Chitopota - a powerful herbalist who has a deep understanding of medicinal plants  
Chivanhu - customs or relating to traditional things  
Detembera - expressive process of luring or invoking spirits (mashavi) through reciting poems, singing songs or saying certain words  
Doro hwahwa - beer  
Dzanga radzimu - witches familiars/workers  
Dzangadzimu - witches familiars  
Gogo - fathers or mothers mother  
Guchu - a combination of medicinal plants, or one very powerful medicinal plant that cures everything  
Hakata - carved bones or wood used for divining - often made from the inside of a tortoise  
Hanzvadzi - sister/brother  
Hari - a traditional clay pot, part of a womyn's inheritance wealth  
Hombahomba - an excellent diviner  
Hosho - rattle  
Huku - chicken  
Hun'anga - knowledge of the practices of n'angahood  
Hun'anga - knowledge of the practices of n'angahood  
Hurudza - wealthy  
Ishe - Chief of a dunhu, ward or 1,000 families  
Jira or Machira - the traditional red cloth worn as a cloak by traditional healers  
Kachinkatwawanga - to pound medicinal plants  
Kafiemberi - to die after having been poisoned  
Kafiramberi - dying after being poisoned  
Kubatana - to help eachother, unity  
Kubika doro - brewing beer for the ancestors and rituals  
Kuchekeresa - to make someone go insane so a business can prosper

Kuda mari - love money and is business-minded  
 Kuda mari - to love money and be business-minded  
 Kudeemdeiko dzinou - from your ancestors  
 Kudhakwa - to be drunk  
 Kudhakwa - to be drunk  
 Kudyiswa - process of administering a dangerous muti  
 Kufamba sei - going in an indeterminate direction  
 Kufembera - to divine or know something without direct, prior knowledge  
 Kuimba - singing  
 Kununuka - to know beforehand something will happen  
 Kuombera - clapping hands for respect to the ancestors or others  
 Kupira - to pray or relate problems to the ancestors  
 Kurapa - to heal  
 Kurasikva - throwing away evil works or medicines  
 Kurasiwa - to throw a spirit away  
 Kurota - dreaming  
 Kurotswa - dream-learning/communication  
 Kurotswa - to receive knowledge from the ancestors when dreaming  
 Kurova guva - burial ritual to ensure the ancestor's spirit and the dead person's spirit is content  
 Kurova guva - unveiling the grave so the spirit can be carried away and reunited with the dead  
 Kurumbidza mashave - praise the shavi for it to come out of an ill person  
 Kurutsiswa - to vomit a muti - for snake bite, or to determine if one is a witch  
 Kurwara - illness  
 Kushanda - something that works, and is effective (cures)  
 Kushopera - the process of consulting a traditional healer who is using divining and fortune-telling methods  
 Kushumira - to pray  
 Kusimudza - the travel fee  
 Kusutswa/Kusvikiriwa - the process of possession by a spirit of a spirit-medium  
 Kutanda - get rid of  
 Kuuchika - barrenness  
 Kuuchika - when one is barren  
 Machinda - chiefs counsellors  
 Madzikirira - nightmares where you do not wake-up  
 Makumbi or Gombwe - the translator, and assistant to the traditional healers  
 Mambo - King  
 Mamhepo - sickness caused by black magic (general)  
 Mangato - a ritual wand  
 Manyusa - an unmarried male rainmaker  
 Mapfiya - stones used to cook medicines  
 Mapipi - magical things that defy logic  
 Maranje - festival for a good rainy season  
 Mashavi - alien patronal spirits that when inherited affect temperaments and character, derived from "havi" or eagerness  
 Mashiripiri - amazing, magical things  
 Mazai mheni - an egg (seed) of lightening  
 Mazviti/Manjozi - spirits of Shangani or Ndebele warriors who died long ago  
 Mbira - a thumb piano which can be used to lure the ancestral spirits  
 Mbiri yakare - something important in the past  
 Mbizi - zebra  
 Mbonga - an unmarried female rainmaker  
 Mheni - lightening  
 Mheni - lightening (sometimes sent by a traditional healer)  
 Mheni - lightening sent by a traditional healer  
 Mhondoro - the oldest of all of the ancestral spirits, a ruler  
 Mhururu, purudza - ululate  
 Mitundu - a traditional carved box which holds the hakata - often made from bamboo

Mombe - cattle  
 Msese - 7-days maize beer brewed for rituals and ancestors  
 Mubobobo - sexual intercourse done to you without you knowing  
 Mudzi - roots  
 Mudziyo - property  
 Mudziyo - property  
 Mukombo -a calabash full  
 Mukwasha - sister's, or tete's husband  
 Mukwerera - a rain ceremony where participants sacrifice snuff, chickens and/or goats  
 Mureveso - first cup of beer taken to address the ancestors  
 Muro Bumumbo - using concoctions  
 Murombo - a ceremony to cleanse a place  
 Muroyi - a witch or sorcerer  
 Muroyi - witches  
 Mushonga (plural) - medicine or magic, can come in any form or combination of plants and/or animal parts  
 Musqwe - a buffalo tail whip for beating or shaking away bad spirits  
 Muteuro - a medicine that makes you vomit e.g. especially if one is not a witch  
 Muti - a plant, medicine  
 Mutombo - general shavi ceremony  
 Mutupo - totem  
 Mututu - constantly bleeding nose  
 Mutwisyankonse konse - two-headed snake, the size of a shoelace  
 Muzukuru - general cousinbrother  
 Muzukuru - grandchild  
 Mwana - son, daughter  
 Mwari, Kaguwe Musikavanhu - the traditional god, who was only accessible via the ancestors  
 Mweya - spirits, or the air  
 N'anga - a traditional healer who uses a variety of techniques, medicines and therapies to deal with a variety of ailments, complaints, paranoias and problems  
 Ndari - a ceremony with beer, to celebrate good outcomes where everyone is invited  
 Ndarira - a bangle payment for a minor illness  
 Ndarira - a copper bangle  
 Ndenga - indigenous  
 Ndiro yomuti - traditional wooden plate  
 Nezvishiri - birds who beat people and are used by witches  
 Ngoma - drum used at times for luring the spirits  
 Ngozi - a vengeful spirit that can wreak harm on family members  
 Ngundu or Chigundu - a hat worn by a traditional healer  
 Nhokwe - small calabash  
 Njuzu - a mermaid spirit  
 Nyami nyami - an anaconda snake that is alive but rarely seen  
 Nyamukuta - mid-wives  
 Nyora - tattoos or incisions to insert a medicine into the blood stream  
 Nyore nyore - common  
 Nyore nyore - something that is ordinary, can be used and obtained by anyone, a commodity of sorts  
 Pasichigare - the golden age and traditional past when culture is said to be in tact  
 Runyoka - a lock, where two adulterers become stuck together  
 Runyoko - abdominal pains caused by adultery  
 Sabuku -headman of a clan of families  
 Sadunu - sub-chief of a dunhu - or ward  
 Saga - old-fashioned, dull  
 Sekuru - general uncle or grandfather  
 Shavi Recuba - a spirit which causes thievery in one  
 Shavi vekuhura or Chipfambi - a spirit that forces prostitution  
 Shumba - lion  
 Shumba mhondoro dzenyika - lions who roam around, protecting, but do not attack unless someone is bad

Sisi-taita - cousinsister  
 Svikiro - a person who is primarily known to get possessed by ancestral spirits and will give advice based on that  
 omunication, an agent of the ancestors  
 Tete - general aunt  
 Tezvara - Father in law  
 Tokolotchis - small goblins that bring success - for a price  
 Tokwani - ghosts  
 Tsambo - string of beads  
 Tsamiti - failure to pay a healer for a muti resulting in additional illnesses  
 Tsimba or Mudanja - a traditional carved stick (sign of authority)  
 Tsotso - small tree or shrub  
 Tsuro - hare  
 Upfumi - wealth  
 Upfumi - wealth, like cattle  
 Usamgo (Tonga) - ghosts who make fire in the night  
 Utano - good health  
 Uzhinji - abundance  
 Vadzimu - the eldest family/clan/totem members  
 Vafemberi - fortune-tellers  
 Vamamhepo - bad vibes, spirits  
 Vari kumhepo - those who are in the air (the spirits), agents of the Mhondoro tribal spirits found in the bush  
 Varidzi venzvimbo - owners/guardians of general places  
 Varidzi vesango - guardians of the forest  
 Venhuri (Ndau and Karanga) - for ancestors  
 Yairipira - compensation for a past wrong to heal  
 Zhou - elephant  
 Zvakakosha - rare  
 Zvakakosha - something that is special or rare  
 Zvakasiyana - different  
 Zvirotto - dreams  
 Zvirotto- dreams (often a time of communion with an ancestral spirit)  
 Zvitsinga - problems in the legs, or rotten legs caused by black magic  
 Zwiwanikwa - something that is useful ( a resource)  
 Zwiwanikwa - useful

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