

HIV & AIDS

IDENTITY AND THE BODY



Judith Chokumarara

HIV&AIDS, Identity and the Body

Judith Chokumanyara

ISBN 978-1-77928-279-8
EAN 9781779282798

©ZEGU Press 2025

Published by the Zimbabwe Ezekiel Guti University (ZEGU) Press
Stand No. 1901 Barrassie Rd,
Off Shamva Road
P.O. Box 350
Bindura, Zimbabwe

All rights reserved

DISCLAIMER: The views and opinions expressed in this book are those of the authors and do not necessarily reflect the official position of funding partners”

SUBSCRIPTION AND RATES

Zimbabwe Ezekiel Guti University Press Office
Stand No. 1901 Barrassie Rd,
Off Shamva Road
P.O. Box 350
Bindura, Zimbabwe

Telephone: ++263 8 677 006 136 | +263 779 279 912

E-mail: zegupress@zegu.ac.zw

<http://www.zegu.ac.zw/press>

Dedication

To my beloved family, your unwavering love, sacrifices, and encouragement have been my foundation. You taught me resilience, nurtured my dreams, and celebrated every step of this journey.

To my dearest friends, your laughter, support, and belief in me kept me going even when the path seemed uncertain. You are my chosen family, and I am forever grateful.

This book is a testament to the love, strength, and inspiration you have poured into my life. Thank you for being my pillars.

Acknowledgments

May I take this opportunity to thank my husband **Mazuruse Irony** who has been very supportive materially and spiritually in this long journey. It was a very difficult road but you made it all the more enjoyable. I hope that you appreciate the love that I am offering as payment for driving me to various places in search of material and electricity and patiently waiting for me for hours while I wrote my dissertation. Love you lots. To my supervisor **Dr. Musanga**, thank you for being patient with me even when I kept on disappointing and not meeting set targets and standards. You have shown me what it means to be an academic and I am hope I will be able to emulate your high standards. I would also want to acknowledge my classmates: **Skuu, Solo, Pious, Tafara** and my best friend Prim from whose house I was fed and given a comfortable place to stay when I came for my lectures. Thank you guys you made it all worth it and it wasn't that difficult either. Lastly, I would like to thank the one person who suffered the most. It was not easy leaving you behind and hearing you say goodnight whilst I was miles away. I hope you have not been feeling lonely because this was all for you **Tanaka Mazuruse**. Mummy will make it up because we have travelled a long journey together and you have been a brave little man. Thank you.

Book Synopsis

Writers tend to concentrate more on the disease and the soul or spirit, and in so doing, often ignoring the body; yet, it is an important site for further analysis in cases of the HIV&AIDS scourge. The body is the primary signifier of a person's identity and in its struggle with the virus it is tormented, ravaged and always under constant attack. It is the body that an individual tries to salvage in order to save his identity and sanity in the face of the scourge. The research aims at taking a closer look at the nexus between the virus, identity and the body in the two texts *The Haunted Trail* by Phillip Chidavaenzi and *Unlucky in love* by Tendai Westerhoff.

Keywords: *Body, HIV, identity, masculinity and femininity*

Acronyms

AIDS - Acquired Immune-deficient Syndrome

HIV - Human Immuno-deficient Virus

NGOs - Non-Governmental Organisations

Contents Page

IV	Dedication
V	Acknowledgments
VI	Book Synopsis
VII	Acronyms
1	Chapter 1: Introduction
16	Chapter 2: Conceptualizing the Body in a Context Defined by Hiv & Aids in <i>Unlucky In Love (2005)</i>
41	Chapter 3: Contagious Bodies and Destabilised Identities in <i>The Haunted Trail</i> by Phillip Chidavaenzi
58	Chapter 4: Hiv-Aids and the Masculine, Feminine Identity as Depicted in <i>Unlucky In Love (2005)</i> And <i>The Haunted Trail (2006)</i>
80	Chapter 5: Conclusion
83	References

CHAPTER 1: INTRODUCTION

This study critically examines the depiction of the nexus between HIV&AIDS, the body and identity in Philip Chidavaenzi's *The Haunted Trail* (2006) and Tendayi Westerhof's *Unlucky in Love* (2005). Writers tend to concentrate more on the disease and the soul or spirit ignoring the body; yet, it is an important site for further analysis in cases of the HIV&AIDS scourge. The Conradian curse on the African continent and body can be seen to be the backdrop from where conceptions about the disease have been analysed, depicted and looked at even by the Africans themselves. Africa, perceived in the Global North situatedness as a source of disease and lack, has been blamed for the spread of the disease on a global level and the African woman has borne the blunt of the blame as a carrier or vector in spread of HIV by the society yet all social power to control women's bodies and sexuality have been vested in male power. Susser (2009) has seen it apt to call this crisis a, 'contemporary tragedy' and she has gone on to note that confronting the threat of HIV&AIDS in their most intimate relations, women, like men, confront tragic dilemmas, but the dilemmas are not the same for women as for men. It is a tragedy when more people between the ages of 0-35 are dying men and women, children left to look after each other, families are devastated, husbands and wives blaming each other for being the vector and generally wreaking havoc on identities that had seemed impregnable in different societies. Susser (ibid) goes on to aver that there are social determinants at the centre of the scourge and things are breaking apart economically, socially and physically. The society's constructions of masculinity and femininity have come under fire as critiques have blamed these social constructions for the dilemma that society finds itself in.

Having the virus is synonymous to getting the death sentence and lives have been changed, reshaped and remodelled in order to

elongate lives that have been operating under the ominous cloud of the virus. This study will examine the link between body, identity in a context that has come to be defined by HIV&AIDS.

The body is the primary signifier of a person's identity and in its struggle with the virus it is tormented, ravaged and always under constant attack. It is the body and identity that an individual tries to salvage in order to maintain his and sanity in the face of the scourge. The research makes use of the text *The Haunted trail* by Philip Chidavaenzi and *Unlucky in love* by Tendai Westerhof as the primary texts that will be analysed in terms of how the body is faring in its struggle against the virus and how the body is used in a context where women's bodies are the property of male power and authority. Mcfadden (1992) observes that HIV&AIDS have forced a close examination of the intimate spaces where the politics of sex and embodiment are being played out. In Africa these intimate spaces where closed sites that could not be analysed publicly and the HIV scourge had seen the affected operating in closed cupboards hiding their 'shame' from public scrutiny. This had made the pandemic problematic and one can notice that society continues to blame women for the spread of HIV and not take responsibility collectively.

Identities are being fractured and reshaped due to HIV when one is declared to be a carrier or a family member has been diagnosed. The most common mode of transmission can be seen being entry through the body sexually. The study will analyse how women characters negotiate their frail identities in a society that has vested all power to the rule of the fathers; patriarchy. Javangwe (2013) contends that the body of the affected is marked by symbols of the virus and symbols of decay and the woman is being blamed for the total decay in morals and decay of the body as a primary vector. He goes on to call this type of society a 'diseased society'. The study will look closely at how society is constructing and remodelling these identities in relation to

the body of the male and female picking at social constructs of masculinity and femininity looking closely at sexuality issues. In most cases issues to do with power or lack of it are at play in the spread of the disease. Women's bodies are commercialised by themselves as well as by men and society at large and this becomes problematic as it speaks volumes about lack of control on one's body as well as the body of men. Men can marry many wives customarily and women do not partake in these decisions as they conform to cultural practises.

HIV (Human Immunodeficiency Virus) is the virus that causes AIDS (Acquired Immune Deficiency Syndrome). Jackson (2002) asserts that HIV&AIDS emerged in the 1980s and is likened to the 'black death' of the Middle Ages in Europe in terms of the number of deaths it has laid claim to. The most prolific aspect about the virus is the way it attacks the body's immune system. Antiretroviral treatment has recently been introduced as a counter panacea that is meant to boost the body's ability to fight off opportunistic infections. These tablets must be taken every day for life by an infected person whose CD4 count has been deemed to be too low to fight off infections on its own. Every missed dose has been said to increase the risks. Side effects appear shortly after starting an antiretroviral treatment which may be noticeable on the body or system of the affected person and disappear within a few weeks as the body gets used to the new chemicals. This is often the case with nausea, diarrhoea, skin rashes and headache. Rashes often appear as a side effect of antiretroviral treatment. These may be itchy but are usually harmless and short-lived. However, severe rashes can occur with nevirapine. Diarrhoea is a common side effect of many antiretroviral drugs especially Protease Inhibitors. A study review has found that 60 percent of people living with HIV report diarrhoea and it is one of the few aspects that society can use in making diagnoses of if possibly some is infected with the virus. Unfortunately, other side effects such as nerve damage and uneven body fat tend to worsen over

time and may never go away leading stigmatising of those people whose bodies are reacting to these new body management treatments. Losing fat on the face, arms, legs and buttocks, resulting in sunken cheeks, prominent veins on the limbs, and shrunken buttocks leading to those feared notions of a person who is slowly wasting away. The point being that even when has come with an antidote to that is aimed at assisting the impoverished immune system of the affected the body is still under siege and attack. The 'foreign' assistance for the body's compromised immune system comes with prize tag of all those side effects mentioned.

Manher (1986) states that the disease was only recognized as a global threat in 1986 and it became known as a pandemic or epidemic in years to come. In Zimbabwe one in every three adults is diagnosed with the HIV and most of these individuals are young. Jackson (2002) observes that a person who is affected by HIV develops slightly different strains of the virus over the years. HIV destroys the biological ability of the human body to fight off opportunistic infections. The virus also damages the capacity of the body to adsorb nutrients from the food leading to a person losing weight and gaining this skeletal appearance. A person can be infected with HIV for a long time without showing any symptoms of the disease. Jackson (2002) argues that having HIV infection means that, despite lack of symptoms of ill health, the virus is still present in the body and an individual can infect others or transmit the infection through sexual contact to other uninfected individuals. An infected woman can also transmit the disease to her unborn child or during breastfeeding. AIDS itself is defined in terms of weakening of immune system as evidenced by the presence of opportunistic infections. Virtually all infected persons 'may' die from the virus through gradual development of the virus into full blown AIDS.

Local lingo has developed different discourses that attest to the inevitable fear of death that has been associated with the virus. The transmutation of HIV into AIDS is what people fear most and despise about the disease as it speaks of the body's lack control and loss of the fight of the with disease. Antiretroviral drugs assist the body in combating HIV and have complicated the relationship between HIV, the body and identity. Ward (1999) notes that it is possible to live or survive with HIV for more than fifteen to twenty years without it developing into full blown AIDS. In addition there have emerged body projects that can be engaged in to promote a long and healthy life. Susser (2009) notes that people who are affected by HIV can live longer if they eat healthy food, practice safe sex and religiously take their medication. Under such control Susser (ibid) goes on to state that these body management projects have facilitated in the virus not deteriorating too fast into AIDS. As a result the body is in a position to resemble a semblance of normality.

The relationship between the virus, identity and the body is reflected at the level of language. Terms like 'tire puncture', 'death train', 'departure lounge' and others have been created by society and are reflective of the discrimination and segregation that infected individuals suffer at the hands of society's lack of empathy. One notices that in a way society views the affected as suffering from the sins of the flesh. The infected are marginalised and relatives just attributes the cause of the illness to unknown causes. A culture of silence has been created around HIV and the most appalling fact is that it is a disease that is difficult to hide from public scrutiny and hate. Sontag (1989) criticises the punitive metaphorical reference to HIV/AIDS and notes that society refuses to acknowledge HIV as its own problem and seeks to marginalise the infected. Traditionally, it was easy to identify individuals with HIV through the public gaze for the body's transformations registered that one was infected. However, through 'body management projects' that have gained

currency in today's world it is now a challenge to use the 'public gaze' to determine the health status of an individual. The introduction of ARVs have therefore complicated our understanding of the nexus that exists between the HIV, body and identity.

Traditional understandings of gender and identity have been significantly challenged by HIV. Patriarchy has invested in men the power or right to control women's bodies as Mcfadden (1992) observes that in intimate sexual relationships involving men and women the male dominates the female. In Pluto's days the mind is associated with men and the body with women and the men was invested with the duty to control that body because he is a reasonable being. Vambe (2003) argues that the woman has remained a critical aspect in the politics of the spread of HIV. Armstrong (1995) goes on to reinforce how women's bodies are controlled by stating the fact that coercive force of authority is powerful in Southern Africa where obedience to authority is an important norm. Jackson (2002) notes that it is not unusual for a man to discipline a woman by beating as a correctional measure that is not frowned upon by society. In Zimbabwe women have continued to be beaten as a correctional measure by husbands or brothers, recently stripped naked in the streets, trivialised over male heirs, in ways that have been culturally acceptable by the majority of the nationals. Legal measures to protect women have not had much impact in change of attitude in men as one can note that the Zimbabwean culture has not given the woman much choice to seek outside remedies legally if she is to keep her family together. Coupled with these notions that aims to control women's bodies are also ideas that women have had to measure up to expectations of the good wife, daughter or woman whose bleached images women in the texts under scrutiny are trying to be. Women have been defined by these constraints and power struggles and in some cases victory has been recorded as some individual have emerged from it all stronger and

better able to deal with challenges in a context defined by what Javangwe (2013) termed 'diseased identities.'

The irony here being in the way the body, which is often the experiential site of both oppression and acts of resistance, has its experiences elided in discourses attempting to emancipate it. In addressing this absence of the body, a new discourse has evolved recently. Urban local lingo has it that anyone taking ARVs 'ari kujuicer.' (The idea of *juicing*) borrowed from the telecommunication world as it refers to adding talk time to one's phone. Thus the more talk time depends on how much talk time one has been able or can afford to add to one's phone. Loosely, this translates into more ARVs an individual has to take in order to increase one's lifespan. The idea of depicting someone as 'juicing' their life through the continued uptake of ARVs is evocative of how discriminative discourses on HIV have transmuted. The new lease of life '*kujuicer*' is seen to as short lived to the point where one needs to be constantly taking lots of pills in order to add a boost their immune system. Consequently, HIV positive individuals still suffer discrimination in spite of the body management projects and the advent of ARVs that an individual will be engaged in. However ARVs do not make one immune from opportunistic infection, cases of sexually transmitted infections, tuberculosis, unexplained lymph nodes, skin cancers and so many other diseases that still terrorize the body. The body is therefore an important site where the battle for survival between is taking place. This struggle results in the reconfiguration of identities. Connell (2005) notes that the body is inescapable in the construction of male and female identities. Masculinity tends to be defined in terms of the male body. Similarly, Ouzgane (2005) contends that masculinity and femininity exists opposites as they are predicated on sexed bodies and their reproductive functions. Furthermore, Ouzgane (2005) notes that society tends to project a real man as someone who is self-reliant, successful, is able to provide for his family and kin. However, for man

the above characteristics of what it means to be a real man are difficult to sustain especially so in times of economic, cultural, political and social crisis. Connell (2005) buttresses the fact that the pressure of maintaining masculine identity often obliges most men to treat their bodies as instruments and even as weapons that can be used.

Grossberg (1996) defines identity as constituted out of differences and argues that there is an alternative understanding of the relations of the modern and identity that suggests that the modern transforms all relations of identity into relations of difference. Campbell (1992; 9) also asserts that identity is an; 'inescapable part of being' and nobody can be without it. He goes on to elaborate that identity is inescapable as it is it is not fixed, either by God or man but is constituted out of differences. Judith Butler (1990) argues that feminism had made a mistake by trying to assert that women are a group with common characteristics and interests regulating and reifying gender relations as well as reinforcing the binary views of gender relations in which human beings are divided into two clear-cut groups, women and men. This argument shows that rather than opening up possibilities for a person to form and choose their own individual identity, therefore, feminism has closed the options down. Butler (ibid) also observes that feminists rejected the idea that biology is destiny, but then developed an account of patriarchal culture which assumed that masculine and feminine genders would inevitably be built, by culture, upon 'male' and 'female' bodies, making the same destiny just as inescapable. The argument from feminists was criticized by Butler as not allowing room for choice, difference or resistance. In other words, rather than being a fixed attribute in can be seen as a fluid variable which shifts and changes. Butler argues that sex (male, female) is seen to cause gender (masculine, feminine) which is seen to cause desire (towards the other gender). This is seen as a kind of continuum. Butler (1990; 25) goes on to stress, '...there is no gender identity behind the expressions of gender; ... identity is performative constituted by the very

"expressions" that are said to be its results.' In other words, gender is a performance; it's what you do at particular times, rather than a universal who you are. In this vein Butler (*ibid.*) is suggestive of the fact that certain cultural configurations of gender have seized a hegemonic hold; they have come to seem natural in our culture as it presently is but, she suggests, it doesn't have to be that way. By choosing to critic the status quo which have become the cornerstone on which our identities are constructed society can work to change gender norms and the binary understanding of masculinity and femininity that have become problematic in crisis situations. We have men and women trying to hold on to conflicting identities that fail to serve them better in a context defined by HIV&AIDS. An identity category for her is a result of certain exclusions and concealments, and thus a site of regulation. However, Butler also acknowledges that categorized identities are important for political action and the running of nations or families. An important idea that Butler espouses in her works is that identity forms through repetition of acts or imitation and not due to a certain original identity that exists prior to repetition.

The act of coming up with personal, social or national identity is an act that identifies 'who is in' and 'who is out' by delineating territorial limits as these boundaries locate the parameters of difference and of sameness. Individuals with whom we share an identity with are marked out as the 'same', in contrast to those who are different. Sameness is featured by the use of 'we' and 'us' and 'our' pronouns which draw in those with whom the identity is shared and excludes those who are characterized as the 'other.'

Kobena Mercer (1990; 43) notes, 'Identity only becomes an issue when it is in crisis, when something fixed, coherent and stable is displaced by the experience of doubt or uncertainty.' In this case one can note that in most cases identity never worries an individual unless if there is something that is threatening to wipe away all those fixed forms that

an individual relies upon to demarcate his place in this universe. When a person is tested positive these fixed notions who he or she is are destabilized and threatened and it becomes necessary to problematise identity in relation to the body and HIV&AIDS. Woodward (2002) acknowledges that Identity gives one a sense of who s/he is and to some extent satisfies a demand for some degree of stability and of security. Crises occur when an identity position is challenged or becomes insecure. Stability is often sought through appeals to unity and to an essentialism which 'we' share. Times of threat are not moments that can tolerate fragmentation and diversity. The time of threat is one when people need greater certainty. Socially the crisis of HIV&AIDS has seen the marking and branding of positive members of the society as undesirables who are being punished for engaging in heterosexual relationship. Pastors and even the common man are seeing this crisis as a punitive measure that God has brought down on the promiscuous because the disease is just conceptualized in terms of sexual acts, prostitutes and dirtiness. At the end of the day today's society even when laying claims to enlightenment are failing to see that they have created their own 'evil forests' where the HIV infected are seen as an abomination who are cast away and left to die on their own. Society fails to realise that anyone can be infected by HIV and we are all the same humans.

The body offers a mark of visible difference which can be read in various, differently inflected ways (Woodward: 2002). Woodward (2002) has gone on to note the body also presents a site upon which meanings are inscribed and a discursive field which highlights the interrelationship between gender and identity. The body is seen as a source of identity security for the individual in the fact that as long as the body is alive and well a person can still retain a sense of self identity. However, destabilised identities begin to emerge in cases where the individual is confronted by a crisis that threatens his or her sense of self. A healthy body is a source of security but insecurities

emerge when the body becomes infected. Woodward (2002) argues that there are myriad other instances of the limits which the bodies which we inhabit present to one's identification with and occupation of certain identity positions.

All societies and cultures have a series of gendered attributes and expectations and practices that are associated with women and with men. These cultural associations vary across societies and across time and space, but they are often linked to the properties of the sexed body. Being in possession of certain physical features classified as female or male establishes the cornerstone of an individual's personal and social identity. As feminised and masculinised bodies there are issues of power relation in the bodies we inhabit to the extent that women's bodies are seen to be weaker or easily usable. The woman's body is a contested territory where issues of gender and sexuality are inscribed. Connell (2005) states that bodies are at play in the spread of the virus. The body is the 'carrier' the 'infected'

Our bodies are the primary signifier of gender. Bourdieu (2000) argues that the body is the only tangible manifestation of the person.

The major problem to investigate in the study is the complexity that governs the link between HIV, body and our understanding of identity in Philip Chidavaenzi's *The Haunted Trial* and Tendai Westerhof's *Unlucky in love*. This research area can, however, be split into minor research problems such as:

- The significance and impact of HIV on the body.
- The relationship between the body and identity
- The significance and impact of HIV on our understanding of identity
- The relationship between HIV and masculinity/ femininity and the emergency of suicides.

The topic and area of study has been chosen for a number of reasons. The study seeks to offer a nuanced analysis and understanding of the relationship between HIV&AIDS, identity and the body in Zimbabwean imaginative literature.

There is an absence of in-depth study of the relationship between HIV, the body and identity in Zimbabwe and the existing literature on the topic largely focuses on HIV and identity reformation. Muchemwa and Muponde in *Manning the nation* (2007) paints a sombre picture of the nature of patriarchy and power in Zimbabwe in crisis of failed state. Images of violence and domination are implicit in conception and practices of fatherhood as a result of the disempowering colonial experience and the violence during the liberation war and thereafter. this work negatively portrays models of fatherhood available to youth in Zimbabwe both in daily life and in literature the work of art argues that manhood is framed in fundamentally the same way by all racial groups in Zimbabwe which is advanced by Zenenga's (2007) critique of Zimbabwean manhood and of masculinity as "phalocentric and there are suggestion in the stories that the colonial experience rather feminised African fathers turning them into tragic nomadic subjects.' Chitando (2007) concludes by adding this warped image of fathers of Zimbabwe as, "A good father . . . is considered weak or *muKristu* (gentle Christian man) and that a man is expected to be feared in order to be respected.'

The researcher is also curiously interested in HIV, the body and identity for personal reasons. Because of HIV, no family in Zimbabwe can be said to be immune to the impact of the virus. We have all been affected personally or through close relatives leading to fragmentation of families. I have witnessed close members of my family dying a painful and slow death before treatment became available. Now treatment is available vestiges of stigmatisation and discrimination are

yet to open up honest discussions of HIV. I am still intrigued by how society has been evolved or has evolved owing to HIV in terms of the orthodox identities as well as how only a few individual are honest to admit their status and society's attitude to the infected body or person.

The central objective of the study is based on the need to establish the nexus that exists between HIV, the body and identity in Zimbabwean fictional literature. This will be pursued by taking a look at how Zimbabwean literature has depicted this problematic relationship in the selected texts. In the process the task will also be to look at how identities are reformed or transformed in the process of dealing with HIV/. HIV is a life-changing experience for all those who have had to deal with it at close range and the study will zero in on those intimate spaces as an exploration that can achieve the said objectives. To achieve this objective the study seeks to situate the exploration of HIV, the body and identity in a context informed by the womanist, hegemony and masculinity theories which can help unravel the complexities of patriarchy, powers struggles between men and women.

The womanist theory is afro-centric brand of feminism has both empowered and disempowered the female members of the society in dealing with this crisis. The womanist theory can be seen to be the most accepted brand of feminism by the most black women because of its acknowledgement of the ravages of the history of colonialism, the nuances of African cultures that have created a the unique spaces that have continued to disadvantage as African women. One can also note that from those marginal spaces the African women have curved out new identities that have seen them being better placed to deal with the HIV than their male counterparts.

Masculinity is another one of the theories that will be used to further elaborate on how male identities have been reformed and transformed and it is very useful in helping us gain a better appreciation of the special position that patriarchy has afforded to the male species through socialisation. We are able to critique how and why men are finding it harder to deal with the crisis. In most cases men are not willing to offer support, admit their positive status publicly and in some cases just bail out on the aspect of life after HIV. Cases of denial and change of lifestyle can be seen to be depicted as more prevalent in men and the theory can help to shed light on why it is harder to move on for men and accept responsibility in the spread of the pandemic.

Hegemony, as a theory that aims at explaining power relations in society, can help to illuminate issues to do with the how women navigate their way in a society where power is vested in patriarchy. Issues of whether they can choose not to be vectors and negotiate safer methods that can protect them better.

In this study, the following key questions shall form the basis of the investigation:

- What emerging identities are being depicted in Zimbabwean literature that deals with issues of HIV?
- Is there a link between HIV&AIDS and our understanding of the body?
- What is the impact of HIV-AIDS on our understanding of identity?

The methodological method that will be used is literary survey of the selected Zimbabwean fictional works that explores and covers issues of HIV, the body and identity. The texts will be subjected to critical textual analysis that draws on theoretical perspectives that are mostly locatable in the feminist theory.

For my theoretical framework, I will rely on an eclectic/ interdisciplinary approach but prominence will be given to certain strands of feminist theory that privileges issues of HIV&AIDS, the body and identity. Within the feminist theory I will engage the ideas on the body as postulated by Judith Butler and Mary Wollenstonecroft to help in broadening the research area on HIV-AIDS, identity and the body. The feminist theory, masculinity theory and modernist theory through Giddens' ideas will help to elucidate major points in the discourse of the connection that exists on shifting identities and the body in a context that has come to be defined by HIV.

CHAPTER	TOPIC	SUB-TOPICS
Chapter 1	Introduction	<ul style="list-style-type: none"> ▪ Background to the study ▪ Statement to the Problem ▪ Purpose of the study ▪ Objectives of the study ▪ Questions guiding the study ▪ Methodology ▪ Theoretical framework
Chapter 2	Contextualizing the body in a context defined by HIV-AIDS focusing on <i>Unlucky in Love</i> by T. Westerhoff	<ul style="list-style-type: none"> ▪ Modelling, the body as a commodity and HIV ▪ HIV, body projects and reconfigured identities ▪ HIV and the body projects (dieting and exercise)
Chapter 3	Contagious bodies and destabilised identities in <i>The Haunted Trail</i> by P Chidavaenzi	<ul style="list-style-type: none"> ▪ Destabilised identities in moments of crisis ▪ Societal perspectives on contagious bodies and destabilised identities
Chapter 4	HIV-AIDS and the masculine, feminine identity as depicted in <i>Unlucky in love and The Haunted Trail</i>	<ul style="list-style-type: none"> ▪ HIV and the feminine identity in <i>Unlucky in Love</i> ▪ HIV and the feminine identity in <i>The Haunted Trail</i> ▪ HIV and the masculine identity in <i>Unlucky in Love</i> ▪ HIV and the masculine identity in <i>The Haunted trail</i>
Chapter 5	Conclusion	Conclusion

CHAPTER 2: CONCEPTUALIZING THE BODY IN A CONTEXT DEFINED BY HIV&AIDS IN *UNLUCKY IN LOVE (2005)*

The previous chapter focused on illuminating the course that this study will assume in examining the depiction of the nexus between HIV&AIDS, the body and identity in Philip Chidavaenzi's *The Haunted Trail* (2006) and Tendayi Westerhof's *Unlucky in Love* (2005). The writer established that writers tend to concentrate profoundly on the disease and the soul or spirit ignoring the body; yet, it is an important site for further analysis in cases of the HIV&AIDS scourge. The body is conceptualized as a site of contestation as it the very site that largely endures HIV infection. Chapter Two will focus on conceptualizing the body in a context that is defined by HIV in the text *Unlucky in Love* (2005) by Tendai Westerhof. The chapter, however, will examine the significance of the body in our understanding of HIV&AIDS in contexts that have come to be defined by the virus. Varas-Díaz *et al.* (2005) observe that since the body is our vehicle for interaction with the world and others, it is through it that people experience the HIV epidemic. The body, therefore, cannot be separated from the experience of "living" with HIV&AIDS. People are exposed to infection through their bodies. It becomes a very pertinent embodiment site for exploration in situations that have come to be affected and infected by HIV. The body in years before ARVs provided proof of the infection through how an individual struggled with the virus. Recent body management project such as ARVs, dieting and exercise have greatly aided the body's immune system and therefore prolonging life for the HIV positive.

The body, according to Durkheim (1984), is a means through which individuals are attached to, or ruptured from, society. In western intellectual thought the body was for a long time either dismissed or ignored as a site that was not worth of serious study by scholars like

Pluto and Shillings argues that it was as if the thinking person was disembodied. More emphasis was given to the soul. Woodward (2002) argues that the body constitutes our active 'vehicle of being in' the world. The body is therefore seen to be, according to Woodward, (2002) a secure certainty, the certainty that comes with scientific knowledge that an individual exists or existed in terms of being of not to be. As a result some might view the body as the ultimate source of truth about human identity and human existence. As a result we can note that the body is deeply involved in the routes through which identities are forged and Woodward (*ibid.*) further elaborates that this does not mean that the body is the root of identity. It is through this very body that a person's 'being' is manifested and made more real even in terms of identity and in a context that has come to be defined by HIV the body is engaged in a vicious fight with the virus. A lot of changes take place when an individual has been diagnosed with HIV pertaining to physical structure and general health of that individual. In most cases HIV has led to direct death of an individual due to the effects of HIV related illnesses. The body's fight is a fight for survival against an onslaught of attacks from the vicious virus that seeks to dominate and subdue.

Featherstone (1982) is of the opinion that in recent decades people have become increasingly preoccupied with the appearance, size, shape, texture and performance of their bodies. Appearance seems to be the preoccupation of this modern world in individual where science has acted in many ways to enhance the aesthetic qualities of the human body. Giddens (1990) attributes these changes to the consumer culture that characterizes a capitalist world where global identities are being foisted on individuals through various media. Too much attention has come to be paid to the body and lots of emphasis is being placed on eating healthily, being healthy, and exercise and in general how to prolong the effects of aging. This situation is even compounded in situations where an individual has been diagnosed with HIV. People

are already anxious about their body without adding on the burden of being positive because it means the body is potentially at risk as the disease has proved to elude medical and scientific advances for a lasting cure. Leder's thesis (1990) argues that the body ordinarily 'fades' and 'disappears' from our experience when we are engaged in 'purposeful action' that creates our environment and governs our daily routines. He further states that the body can abruptly reappear as a focus of attention when we are ill or in pain and when our bodies are at their least socially productive. The argument being that our daily lives are most commonly marked by the absence rather than the presence of the body as depicted by the following thought:

When reading a book or lost in thought ... I experientially dwell in a world of ideas, paying little heed to my physical sensations or posture. Nor is this forgetfulness restricted to moments of higher-level cognition. I may be engaged in a fierce sport, muscles flexed and responsive to the slightest movements of my opponent. Yet it is precisely upon this opponent, this game that my attention dwells, not on my own embodiment (Leder, 1990: 1)

There are few instances that individuals pay attention to what the body does or how it does it. In most cases most of the body's functions are taken for granted unless, as Leder (1990) has aptly analysed, if something is wrong or an individual is in pain and concludes that there is little suggestion that the body can become a major, prolonged focus of attention in its 'normal' state. One argues that this is the state that usually confronts HIV sufferers. They can go on living their normal lives but they are ever mindful of how their bodies are performing functioning. Peter Freund (1982) has made significant inroads in focusing on how people's experiences of health and illness are shaped and transformed. At the centre of Freund's work (1982) is a concern with people's experiences of health, illness and disease. It has been established that the body must be able to regulate and maintain such features as its blood pressure, body temperature, hormonal levels

and electrolyte balance within, parameters that demarcate conditions of excess or deficiency. When the individual has been tested positive to HIV the body becomes a focal point in terms of treatment, stigmatization, body projects as well as fear of loss of control. Individuals begin to pay attention in trying to assist the body to be in a better position to fight off HIV related illnesses and generally putting the body first in order to prolong life through body projects like exercises, dieting and healthy living.

Foucault (1977) conceives of the body as 'the inscribed surface of events' and as 'totally imprinted by history.' The body is also the site that struggles are being played out. Women's struggles against patriarchy can be seen to be performed in how women's have been struggling to free their sexuality from men's control for a long period. The history of who was able to write women's history can be seen through how women's identity have been defined by men and the history of their subordinate position in society can be read through women's bodies. Women struggle to please men and Spivak (1988) calls them the 'subaltern' because they always have to look at themselves through the eyes of the other and are always being spoken for. Spivak (1988) contends that these women are doubly subjugated by colonial rulers and indigenous patriarchy. Women are blamed for being vectors in the spread of the deadly HIV. In situation where an individual is sick from HIV this struggle can be seen to be played out on the bodies of both men and women indiscriminately and women getting blamed for being spreaders of the virus in society. But with the thesis of Westerhof (2005), she is able to stand up and add a voice to her body's struggle with HIV and how she manages conquer.

McFadden (1992) observes that there are some people who say that a woman never expresses desire for sex, she always says no. He goes on to suggest that in every sexual act there is an element of force in most African society where it is frowned upon for women to be candid

when it comes to their sexual needs. Most women who express their sexual needs are looked at as prostitutes and as a result we may find that it is most women's desire to conform to these expectations of a good chaste woman. The woman in this cycle becomes the hunted as opposed to the hunter an identity that is associated with the men. Looked at from *Unlucky in Love* one can note this aspect in the way that Rumbi, the main character, is hunted down by all those men who end up becoming her husbands in Emmanuel, Joe and Horst. She states that she knew that Joe had several other women beside herself but she accepts this kind of arrangement even when it endangers her life. Women are abused physically, sexually and economically and this just shows lack of power in controlling the spread of HIV in their relationships.

Our normal conception of the body is that it is the mass of flesh that an individual embodies or carries outside. As such images of 'decay' can be seen to be associated with the state of the body when it has been diagnosed to inhabit strains of the HIV virus in the body. All flesh is perishable to some degree and in the case where HIV has been detected the body can be seen to be wasting or decomposing fast. Woodward (2002) notes that the body's association with the flesh means that it is devalued in relation to the mind, which is seen as the source of human agency and the body just becomes a vassal that the mind commands. The body is not given due attention because it does not seem to be agentive without the mind. Shillings (2003) views the body as a source and recipient of collective symbolism that possesses the capacity to incorporate individuals into the moral life of the group. Issues to do with honour can be seen to be inscribed on the body be it an individual's or that of one's wife. Today in Zimbabwe we have cases where women have been stripped naked due to the reason that men think that they should dress properly and not leave the body exposed for viewing by others. Symbols of continuity of human life are represented by women giving birth and symbols of death and decay

can be seen to be represented by the ceaseless attack on the human body that HIV has been known to make on the immune system of a positive person. At the prospect of death due to HIV the individual is filled with fear. Berger (1972) points out that death is an essential feature of the human condition that requires people to develop means of coping with it and it is only in the context of the body's inevitable death that we can understand its (body) full social importance. As such in a context where HIV is the cause of death societies act like they have not heard of death through other ways before. The prospect of death constitutes a threat to people's 'world-building' and 'self-building' activities. Giddens (1990) makes the suggestion that the experience of living in high modernity is like riding a juggernaut which is out of control. He observes that the body provides individuals with a 'last retreat', an entity which appears to be a solid basis on which a reliable sense of self can be built and in a context where everyone around us is either affected or infected one desires the infallibility of the body to provide a steadying effect on the essence of life.

An individual's ability to exert control over one's body is being challenged with the development and rapid spread of AIDS, and with the present failure of the medical community to find a cure for, or prevention against, HIV infection. Shilling (2003) argues, that this is just one instance of the increasingly recognized limitations of medical knowledge. The modern man prides himself on being able to control the universe and it is intriguing that there are a few exceptions where he is yet to take control. The decay or death of the individual is a problematic area in HIV cases. Giddens's (1990) analysis suggests that high modernity places individuals in an environment which constructs death as a particular problem. One knows that death is the final end to everyone's life but there seem to be denial by individuals to perish through this loss of control when the body's immunity succumbs to the virus. The prospect of death from the result of HIV is disturbing for most people. Consequently, it should not be surprising if the prospect

of dying makes modern individuals particularly anxious. Shilling (2003) makes the observation that this is so for the individual whose self-identity has become closely connected to their body, death is disturbing partly because it represents an end to value invested in the body. In *Unlucky in Love* (2005), Rumbie's past career as a model makes her place a lot of value of her body and one can note that she has invested a lot of money and care into looking her best all the time. Her body has earned her a lot of money in the past. Death represents the ultimate end of the self and HIV has proved fatal to the young, as well as to the old, as a result of what Shilling (2003) notes has long been considered a major or source of personal gratification, that is, sexual activity. Shilling (*ibid.*) further elaborates that this link between sexuality and death confronts the living, sensuous body with the prospect of its own demise. It exposes the intimate connection between the flesh as a source of 'ultimate' joy and the source of decay and death. It confronts even the society with the reality that in addition to the argentic possibilities which stem from having bodies; humans are limited by the brute fact of being bodies. The fear associated with HIV&AIDS can also be understood partly by reference to the attack of death when people become aware that death may be already lurking in their bodies, and those of their sexual partners, its reality becomes more pressing. In high modernity, death is not present simply at the end (Bauman: 1 992a) The destruction wrought by AIDS tells people not only that the meaning they have invested in their sexual relationships cannot protect them from the reality of death like Rumbi's search for her knight in shining armour in Horst and her other husbands, but that the very focus of this investment can be a channel through which death now enters their lives. Rumbi is searching for someone to put a ring on her fingers when she discovers that she has also searched her way to an infection. As a result one can note that HIV has come to symbolise a debauched society that is slowly digging its own grave if control on the human body and morals is not heightened. Humans have been blessed with the capability of

learning, and of producing and sustaining social life and that capacity through HIV in our midst is being undermined as it is seen to be occurring in the very spaces that largely account for sexual pleasure and reproduction processes.

The production of women and men as separate and unequal categories has created a lot of strife in a context that sees one sex being dominated by the other. Connell's (1983) analysis of gender focuses on what can be termed the 'exterior' of the body; on its shapes, sizes and musculature. He notes that women's and men's bodies are defined as different through social practices such as categorization. The contradiction in contemporary realities of human embodiment, according to Shillings (2003), is that social categories give a qualitatively new meaning to bodies which cannot be justified with reference to their biological constitution. Birke (1992) goes on to argue that while social categories define people's bodies as different, other social practices exert a much more direct impact on the body. Gendered social practices do not simply negate the body but transcend and transform it. Women and men differ enormously in their height, weight, strength, endurance and the distribution of these features overlaps between the sexes. Berger's (1972) argument states that a man's presence (be it fabricated or real) is dependent on the promise of power he embodies. The power can be seen to be manifested in his body, his stride and his power to control his environment and define it. What Ouzgane and Morell (2002) termed the 'patriarchal dividend' that is enjoyed by all who embodies the male body whether poor, young old or physically disabled. This power is always an active power, a power which can be exercised on and over others especially in the form of hegemonic masculinity. In modern times where the scourge of HIV is looming near, society can target men for behavioural change ideologies that can help to curb the disease because in African society a man has got more room to acquire many women as wives or

girlfriends. Messages of using protection can be filtered through this group in order to make inroads on curbing the crisis.

According to Gane (2007), the masculinist worldview sees virgins as pure and as appropriate objects of male desire—though of course the goal of the desiring male as he notes is precisely to destroy that virginity. Similarly, virgin forests and untouched nature are seen as inviting men to conquer, subdue, and exploit them, and this conquest and exploitation is approved and encouraged. Set against the virginal, whether a female body or a forest, is the impure and experienced, which is at least potentially contaminating and dangerous. Not only is this a dangerously polarized way of thinking as Gane (2007) notes, but it is one that sees women and land alike only from the perspective of their exploiters. This becomes problematic in that it casts women's bodies as objects of male honour or respect and Javangwe (2013) notes that when the body is defiled it becomes symbols of shame and condemnations. He treats her body like his possession as noted when he forcibly has unprotected sex with her;

His hands fumbled roughly on my breasts and I heard him whispering in my ear, not words Of love but, "You are my wife and I will show you who is the boss now dirty bitch with AIDS' (Unlucky in love 2005: 70)

MacBride (2004) argues that among the chief reasons for women's greater vulnerability to HIV is their greater biological susceptibility to transmission than men. The way women's bodies are made makes it easier to sustain bruises and abrasions that can facilitate greater absorption of the virus leading to infections. In addition gender roles narrow the possibilities for women to be in a better position to protect themselves. Women are more susceptible to HIV as a consequence of their disadvantageous position in society where they have few means of economic independence and virtually less control over their own bodies in sexual relationships. A UNAIDS report (1999) identifies traditional norms of masculinity prevalent in many sub-Saharan

countries as highly problematic in relation to HIV. Micheal Denga in *The Haunted Trail* (2006) believes that he cannot be an HIV carrier,

'If you think you can kill me with your AIDS, you're fooling yourself. Carry your AIDS away with you' (2005: 100)

Michael therefore erroneously believes that the male body cannot transmit or carry HIV. Michael acknowledges that though HIV claimed his mother's life it would be different for him as he was a man. The material success he seems to be favoured with in life can be seen to be transmutable to success in dodging HIV even when he is careless enough not to protect his life. Gupta *et al.* (1994) in their discussion of the reasons why so many men continue to be promiscuous point to traditional beliefs in many societies which encourage men to have multiple partners as a sign of manhood which in turn undermines messages of abstinence and faithfulness to change behaviour - most men are tested through their spouses and generally just do not want to know what their bodies contain unless it becomes very necessary or they become very sick. Women's roles as bearers and primary nurturers of children entail that they make efforts to know their status and at the same time take corrective measures if found infected because they have a family to raise and the nation at large depends on their infallible hope for the future. A woman generally looks to the future but when a man's status is confirmed he tends to be myopic. This is exemplified by Michael who commits suicide after his realisation that he was HIV positive. Horst in *Unlucky in Love* as a representative of men in society and their attitude to HIV also typifies this behaviour when he blames Rumbidzai for his infection and ceases to be a loving and caring partner.

Muponde and Muchemwa (2007) observe that gender at its most intimate and visible finds the body as one of its most important sites.

This intimate site is also the most vulnerable since it is also used as a site of dominance, misogyny and othering. Muponde and Muchemwa (2007) further argue that rape, torture, disfigurement, and killing are ways in which recalcitrant bodies are controlled. Macfadden (1992) observes that in intimate sexual relationships involving men and women the male dominates and places the female in victimised positions. The male body, according to Muchemwa and Muponde (2007), is a site of menace from which Zimbabwe's stories of sexual and political vulnerability emerge and it is also from the same site that new strengths can be constructed from the collapse of the menacing male body. The female body on the other hand is seen to be suffering from the Conradian curse which depicted Africa as the harbinger of diseases. Africa is imagined as a woman and nations according to Hubinette (2005) are imagined as 'female.' Therefore the general spread of HIV has come to be blamed on female body.

Unlucky in Love (2005) by Tendai Westerhof is a semi-disguised autobiography that explores the life and struggle of Rumbie the main protagonist who discovers through her husband's testing positive that she is also positive. She narrates the pain of the abuse that she suffers at being blamed for infecting her husband and how her life takes a turn for the worse leading to the breakup of her marriage to Horst her white husband. It can be noted that before her marriage to Horst, Rumbi was a part time model and won a few crowns such as Miss Mufakose and used to do a few jobs as a fashion model travelling across the southern African borders. She later opens a modelling agency business called 'Models against AIDS.' She states that modelling was the first thing in her life that she really felt good about (p.43). Rumbi notes that the modelling world is a high risk business for young girls who are constantly mobbed by men who are attracted by their bodies and beauty.

Modelling is all about one's body, there are certain physical requirements one should be aware of when considering becoming a model the like 1.78 metres tall for girls and 1.80 metres for men is about the minimum height that a model can be expected to have. The simple fact of the matter is that taller models display clothes better than shorter a model that is why there is preferences for taller people in this industry. Models also need to be quite slim in proportion to their height in order to fit into the types of clothing that designers want them to wear as result they need to watch their weight they also need to be within the age range of between 16 to 28 years. In text *Unlucky in Love*, Rumbi also triples her work as a secretary, modelling with being a hostess at business dinners that her boss held. In this case one can note that her job again centred on diverting male attention at these dinners in her finery and makeup because she is obviously not invited to talk business. She ends up being picked up by these older men for dates who later become her husbands in Emmanuel, Joe and Horst.

Bourdieu's (1980) statement that the body is in the social world but the social world is in the body point to the many social uses of the body in modern society. Rumbi, as a model, parades her body on the ramp while men and women sit watching and clapping. This consumer culture fuelled on by globalization has created women who are trapped in the visual spaces which defines them in terms of their body and appearance. Tseelon (1995: 124) argues that women have constantly to wrestle with a normative mask which reflects male notions of female essence. These attributes are normally defined by the male gaze on the true essence of female beauty. In context where HIV has come to affect those who are unable to say no to female beauty one can note that it creates spaces for women to become temptresses that men cannot resist fuelling the spread of HIV in society. When Rumbi goes on these business dinners as a model she is actually being cast into the role that allows or tempts men like Emmanuel and Joe to be tempted to take them on as small houses because most men are afraid

that these beautiful women cannot be easily satisfied by one man as their market value is placed high above ordinary women. Beauty pageants are normally fashioned to please men who occupy spaces that have created these insecure women who parade their bodies as commodities that have helped them earn money. Some of the reasons that can be seen to push women into modelling their bodies, according to Tseelon (1995), are cultural and global pressures on women to achieve an 'ideal' body in the tall, slim and facially beautiful woman opposing the essence of individual beauty and tolerance for differences. Women who subscribe to these requirements can be seen to have a much higher social and economic value than those who do not have the model beauty qualities. Tseelon (1995:12) suggests that the mask of womanhood is framed as a manipulative essence masquerading behind 'false decoration': its 'beauty and finery' acts as a 'vehicle to dazzle men to their destruction.' Rumbi's body, even though she has acquired an education as a Secretary, is her most priced economic asset. This is the product that she struts on the labour market disguised in her modelling escapades and trade seems to bloom and dip depending on the market price supplied by men who are interested in possessing it at different times in her life. It can be noted that the moment this body is pronounced to be infected by the virus she is faced with challenges that cannot be ignored. She faces the fact that she can no longer live off her beautiful body as she had done before. This body now needs to be maintained harder than before by a plethora of body projects for survival sake not for the sake of admiration and it sort of now gets attention as Leder (1990) once noted on its own terms as a focal point now that the body is at its least socially productive state. It spells out a decline in the market in terms of men who will now be attracted to Rumbi's body. HIV becomes a threat which can be seen to create by the virus that has now entered her body threatening to culminate into loss of income, opportunities, value as well as market as one can note that in the modelling business the face and the body are weighed and valued to such levels where we

see that one will do anything to restore it to its original state. In a context defined by her infected status modelling, the body and HIV cannot be sustained. One cannot be a model whilst claiming to be HIV positive because in most cases people translate the outside beauty to the inside and this industry thrives on its untarnished definitions of beauty. The contamination of the inside seems to sip through to affect the aesthetic value of the outside.

The body as a 'mask' can be seen to be true looking at the struggle that women go through in order to hide their true selves in. One of Rumbi's nightmares is to be seen as an ordinary girl from Ndararma Mine. She relishes the thought of being seen as a Mrs. Somebody in marrying Horst. This in itself points to insecurity complex in her appearance which is fixed by the masks that she wears every day. Goffman (1969) is of the opinion that the body can act as a mask in projecting particular appearances. Shillings (2003) asserts that women misrepresent themselves in order to gain benefits from others. In this case body work in the form of make-up is seen as a way of masking the true selves. Goffman (1969) suggests that this idea is suggestive of the fact that there exists a private, authentic self behind the shifting identities projected by the donning of different masks: masks designed to create false impressions of an individual's social status, economic worth, or moral trustworthiness. These masks can be seen to be aiding in the folly of trusting that the outside is representative of the beauty contained in that person's blood. When Rumbi meets Horst she is so awed that her beauty has managed to attract the notice of a white man, who is wealthy and well known in Zimbabwe that it never occurs for her that he could infect her with HIV. She says:

'I was going to have a wealthy, handsome, white husband. It was my very own Cinderella story, (p.16)

The same can be said for Horst who immediately strikes up a marriage with the most beautiful lady he met at one of the business dinners that

she frequented as a hostess. These two are so engrossed in the outside appearances or masks that individuals wear every day that they fail to realise that in this day where HIV is not discriminatory one needs to have pre-sexual tests to determine whether the inside is beautiful as well. Horst is justified when he cries, '...what good is love if it kills you!' Before Rumbie is tested positive she notes that Horst had been so proud of her physical beauty. She notes that he always wanted her to be beautiful and well-groomed and dressed her in the bests designer wear money could buy. Even their first encounter Rumbi's body had attracted him to her when she was standing at a bus terminus and he had wooed her like an experienced hunter with money and the promise of social honour. In a context defined by HIV one cannot that all that glitters is not gold and one should not trust what they see on the outside being displayed by the body. Rumbi could have been a vector as when she states:

'I had already accepted the possibility that I might have HIV. After all my two previous partners had children by several women while we were together, so it was obvious that they were not using any kind of protection' (p.10)

This statement shows us that she may have had an idea that maybe she had been infected way before meeting Horst and he might have been the unfortunate victim here but was not as resourceful as she was as one can note that men do not seek publicity for bad images in their lives as women do. She says that she just put the knowledge aside of her possibility of infection before meeting Horst at the back of her mind and waited for it to 'say Hello' thus going back to Leder's (1990) position that the body is an absence that the individual is prepared to ignore as long as it is functioning well. Foucault (1978) identified the body as the principal site upon which power is enacted and exercised. However, Foucault observes that there are limits to how much power can be exercised on the body. Biblically women are projected as appendages of the men's ribs or body as a result she is controlled

sexually, physically and economically. Javangwe (2013: 50) aptly notes that the infected person becomes a 'social aberration' making further suggestions that Westerhof's narrative can be read as a metaphor of where HIV can represent other meanings outside its daily reality of being an outer cover of the bones. Furthermore, Javangwe (2013: 50) observes that the body can be conceptualised as symbol of 'decay of the nation.' McClintock (1993) states that a nation cannot be understood without a theory of gender power. In addition, McClintock (1993) notes that women are projected as mothers of the nation or continent. Similarly, Hubinette (2005: 15) notes that:

...the nation imagined as female body gives rise to strong familial connotations and it is the task of patriarchal nationalism and ,male power ...to rescue defend and sacrifice and die for her.

The first time that Rumbie comes to realise that their lives may be in danger Horst never stops to consider how this information may impact on her.

It's your entire fault you bitch! They tested me for HIV and I am positive. I must have got it from you, and you have destroyed everything for me'
(p.8)

In this statement one can note that women are seen as the principal carrier in the spread of HIV (Harris 2008). It never crosses Horst's mind that he could have been the carrier and not her. Horst sees his male body as being immune to HIV because he is a man and has been socialized not to take responsibility for his actions or accept that their promiscuity has actually done harm to their marriage. In most cases men believe that it is a man's right to experiment and women have been raised to aspire for chastity when sexuality is concerned. It has to be the woman's fault and Rumbi reiterates this point throughout her narrative and her stance in not confronting Horst to supply the empirical evidence that supports his notion that her body was the

vector in their marriage when they had not had pre- tests before they had started engaging in sex. She later surmises that both of their sexual networks could have endangered their lives and it was prudent for the kettle not to call the pot black. Horst blames Rumbie for his positive status and it easier for him to live in denial and later not see any reason for change of behaviour because it was not his fault in the first place. It is easy to play the part of a victim of HIV for men and go on a HIV spreading rampage in the defence that they must have got it from some woman so in the long run it is not their fault. Only their bodies know the truth but as it is the individuals are now engaged in shifting identities so as to project a better image and appeal to the audience to the fact that they are the victims. The postmodern views of identity suggests there is no such thing as an unchanging, authentic self, and that social life is dependent on us projecting different embodied identities to various audiences (Gergen :1991). We are different people in different situations. Sennet (1992) also points out the idea that social life represents a theatre in which people stage performances. Our lives are acts of acting because of the fact of us passing on after our time is up. So in this way people are engaged in efforts that seek to maximise their time on earth by these grand masks that hides their true selves. As Gimlin (2002:) argues, 'by engaging in body work, women are able to negotiate normative identities by diminishing their personal responsibility for a body that fails to meet cultural mandates.'

The woman's body is seen as a critical vector of the spread of HIV. Vambe (2003) notes that women remain a critical aspect in the politics of the spread of HIV. Harris (2008) also notes that women are seen as the principal carrier of the disease. Statistics indicates that more women than men are infected. Javangwe (2013: 50) therefore argues that, 'the sexualised body of the woman can only be imagined in terms of corruption and disease.' A woman becomes a potential killer not because of the way she looks but the infection that she carries inside her blood. One interesting concept that comes out of Westerhof's

(2005) narrative is the body is casts as a potential killer. Chitando (2011) thesis looks at the symbols of danger that the female body is ascribed. The woman as an appendage of the male body is seen as a vector. In a way the whole nation becomes diseased and dysfunctional. Chapman (2000) argues that the body is largely conceptualized as a site of death, contamination and prejudice. It is also critical to note that the body is a primary signifier of a person's identity.

Men can be seen to be using Rumbie's body only to discard it like a used 'condom' in the dustbin. Rumbie's is raped by her husband and she becomes pregnant from this act. Despite the fact that her body has borne children for the men in her life she is labelled 'spoiled goods' because these men are not interested in marrying her. Emmanuel gives her two children and walks away; Joe does the same and one can see that the body is being used only to be discarded later in an unhonourable way. The good part is that these experiences seem to have made her stronger and much surer of the identity that she has to carve out for herself in a context that is defined by HIV. She is able to negotiate for acceptance of her diseased status as well as to come out with spoils of the victims that actually speak of winning. She goes ahead and buys herself a car with the money from 'their safe' when she realises that even though the money was given to Horst to terminate his contract when he is tested positive what belongs to him belongs to her. These experiences make her stronger when she realises that no man is prepared to stick around for better or worse therefore she shall have to go it alone. She is able to rationalize; 'Now I know that happiness comes from within and that no one else can make you happy or sad.' Wittig (1990: 115) notes that women have been reduced to 'sex,' and cannot escape carrying sex as a burden they have to bear in the negative form. The body becomes very crucial when rhetoricizing about HIV. The woman's body is a contested territory where men and women struggle sexually, socially, economically and

physically. Connell (2005) contends that the body is inescapable in the construction of identities.

The body is treated as an enterprise to be worked on, and altered in a process that is meant to reconstructs one's self-identities in line with a developing conception of the ideal self. Before when Rumbi is younger she builds her identity around her beautiful face and body. But later when she cannot rally around her body she begins to hope for a man who could rescue her image and bestow respectability to her failing beauty. Thus we see her reconfiguring her identity at different points in her life in order to gain the status of a married woman rather than a single woman, one time beauty queen who has had children by 4 different men pointing to the hollowness of all who partake a career in the modelling. In the case of *Unlucky in Love* Rumbi can be seen to be engaged in fight that is meant to show that she has not lost the fight that is meant to wrestle control from the virus. She claims, 'My virus and me are happily married' because she is able to control the virus instead of allowing it to control her body, various body projects have helped her to gain control which includes healthy eating, correct dieting, exercise as well as the continued taking of ARVs.

Rumbi in *Unlucky in Love* notes that her life fell apart when she was diagnosed with HIV and these projects can help to take her mind off what is happening around her by concentrating on the most important aspect of her identity: the body. Helping it fight the disease by taking care of her body. It can also help her live healthier while ageing with HIV. Showing how the body has become central to our sense of who we are so that the body itself is part of reflexive self-identity; a component to be worked on, as the representation of the self. Woodward (2002) is of the opinion that the body is the source of frightening uncertainty. He goes further to elaborate that far from offering stability, the body presents terrifying insecurities. The security that comes from knowing that one lives to see tomorrow is taken away

in a context where HIV has been detected. Even the identity that Rumbi in *Unlucky in Love* used to boast of through her beauty and the security that being famous and rich offers is also threatened. One can note that for a poor girl from Ndarama Mine having lots of money and security to maintain a lavish lifestyle was what mattered before she found out that she was positive with HIV. HIV comes in and creates a situation where her dreams and aspirations now seemed frivolous compared to what she is facing now necessitating changes leading to the reconfiguration of identities. These insecurities can be analysed from Giddens's (1991) suggestion that the self has become a reflexively organized construct in the contemporary era of high modernity. The body becomes an object of attention in modern times in the fact that people will do anything to enhance their appearances, lives and look younger in a bid to display the ideal body.

Smith and Watson (2001) have gone on to argue that there is no unified, stable, immutable self that can remember everything that has happened in the past in its tiny, minute or even bigger details. They argue that the process of construction, deconstruction, selection, suppression takes place through the mediation of memory. The individual is confronted with a wide repertoire of experiences that the self would have gone through. The process of selection, even disguising or discarding, is not an innocent act and in this case it becomes an individual's attempt at projecting a better view of her past sexual relationships. There is no doubt that some of her most scandalous narratives have been suppressed and those that have come out are meant to project the idea of a disciplined body. One can note that an autobiography is subjective and the truths contained also become subjective truth in that the author trying to achieve certain rhetorical acts of justification of her honour and in the process may highlight some of those aspects that would paint her in the right at the same time back grounding some important aspects that can be verified by Horst's story had he written one. In short her autobiography seems

to be stressing the point that even though society has coined her 'promiscuous' she was just searching for love albeit from wrong men and came out scathed.

Obsessive dieting, for example, has been seen as a display of simple hatred of the body that one has been blessed with. In a context where an individual has been tested positive with HIV this obsessive behaviour seems to be heightened since one will be battling for control in terms of fighting the virus is concerned. Efforts in one's involvement in restructuring the body which Shilling (2003) defined as 'body projects' are also increased because of fear of HIV. Shilling (2003) describes this need for enhancing the performance of the body as associated with an almost religious devotion to an ideal self. The body is a demi-god that extroverts worship. The ideal body in the case of HIV is a state where the body has been rid of HIV and the body is no longer battling the virus on a daily basis. In short, being healthy inside and outside the body. In an article published in *The Herald* on 3 May 2013, Tendai Westerhof, who is the character Rumbi in her semi disguised autobiography *Unlucky in Love* who was said to be living positively for the last decade, was pronounced to have been miraculously cured of HIV by claiming to have an undetectable viral load. This means if she gets tested for HIV today, she would test negative. She is quoted saying;

I have had an undetectable viral load for the past two years. I still take my ARVs religiously because I have to. ART is for life and this new lease of life can see me live 30 to 40 years since I started medication.

One's CD4 count going up is a sign that the ARVs are working well, but should never be used as a measure to stop ART, Westerhof. (*The Herald*; 3 May 2013)

This problematises the whole concept of the body and HIV whereby the body refuses to be subdued and defined by the virus as now the virus has become undetectable but it is still lurking inside waiting for one to relax their guard and stop those body projects that have helped

to subdue the virus. Rumbi is still harbours the virus in her body but the virus cannot be detected but her body can also pass on the virus to other people if she engages in unprotected sex. Shilling (2003) makes the pertinent observation that body projects are drawn on to by individuals seeking to stabilize their identities in a runaway word. In this way a kind of stability has been achieved as she becomes fearful that Horst denial of the virus may endanger the lives of his unsuspecting girlfriends. Shilling (2003) notes that all individualized identity projects all involve management and maintenance and the notion that the body is open to reconstruction and can be subject to change and to control. Woodward (2005) ideas that, by taking control of our bodies and presenting an attractive physical image of ourselves, we can present an attractive self. An attractive self is one that the individual is confident of and in control of.

HIV's difference with other diseases is that it has a longer incubation period. According to Barnet and Whiteside (2002), this long incubation period facilitates its silent spreading through populations for longer periods. When an individual discovers that they are positive with HIV they are encouraged to engage in body projects like exercises and dieting to improve or enhance the body's fighting spirit against the virus. Body projects provide a myriad of opportunities for investing in the 'real' body for combating the negative effects of ageing, through cosmetic surgery or through working out at the gym or by buying products which will enhance one's appearance as noted by Shilling (1997). However these scholars also note that exercise and dieting cannot control or fight HIV disease on their own, but it may help one feel better and fight many of the side effects of HIV disease and HIV such as loss of body fat as well as constant feeling of fatigue and depression. One can note that one of the many side effects of ARVs is constant feelings of fatigue which affect an individual performance in everyday activities or even at work. These two projects, dieting and exercise can help in making the individual feel that they are being

proactive in fighting HIV. Rumbie in *Unlucky in Love* engages in these activities and one can note that she was able to feel that she was doing something that can enhance her life and prolong her lifespan.

Body projects are a way of demonstrating 'self-discipline' in a world where the individual is seeking to differentiate himself from his uncivilised brothers who lived in the years before civilisation. Sue Benson (2005) notes that the bad body is fat, slack, uncared for; it demonstrates a lazy and undisciplined "self". One can note that this is one of the chief reasons why the modern man is engaged in a fight against fat bodies and unhealthy bodies. The good body is sleek, thin and toned and healthy. Shillings (1997:123) notes that to have such a body is to project to those around you - as well as to yourself - that you are morally as well as physically in shape. It is all about public image and Rumbi as a public personality against AIDS engages in body projects as a way of demonstrating that the virus can be contained and controlled. In her narrative she speaks of how she is able to tame the virus until it can no longer be detected in the body.

Giddens (1991) places the body as a highly malleable resource and in a context where HIV has been detected it is reassuring to note that there are projects that the individual can engage in to reshape their bodies so that it is able to fight off the virus. Rumbi in the text *Unlucky in Love* grows a positive drive that she will do all she can to keep alive and be healthy and it seems all her efforts have paid off. Giddens (1990) theorises that in this context, the body is seen as one last 'raw material' over which the individual could exert influence. One can almost hear the determination in her saying if she cannot control the virus she will she cannot fail to control her body. Giddens (*ibid.*) goes on to note that bodies are now seen and subject to intervention in terms of their genes, blood pressure, cholesterol, size, shape, appearance, aerobic capacity, colour, weight, and a host of other variables. As such, they can appear to provide a firm foundation on which to construct a reliable and

meaningful sense of self in the modern world. He goes to note that however, bodies also often refuse to be moulded in line with our intentions. He gives the example of how most of the weight or fat taken off during diets is put back on again. In the end one can note that even though all bodies age and decay and the reality of death is ever present in an individual who has been tested positive with HIV one can still do something and control how they will die through HIV. It does not have to be the classical death where an individual dies as a skeleton image of his former self but one can actually achieve some dignity where the virus aims to rob one of that even in their last moments.

In summation, the chapter has established the link that exists between the body and HIV. It has been established the body has for a long time been ignore as less important as it is easily seen as a vacuum without the mind which is more agentive. This chapter has established that in times of pain and illness the body is again foregrounded and the individual engages in projects that are meant to fix and manage pain in the body. Bodies matter and as a result the analysis of Tendai Westerhof's narrative is meant to show that there is life after being tested positive as she manages to control her body thereby indicating control of the virus in the process through religiously taking her ARVs, dieting staying healthy and exercises. The chapter also established that the body is a central part especially in situations where there is pain or it has ceased to perform according to expectations. In cases where an individual has been diagnosed with HIV the individual engages in a lot of body projects that are meant to restore the body to its good condition. Theses body projects can be seen to aid in the body's struggle against HIV. However, through these efforts, the individual is also engaged in the reconfiguration of his or her identity in line with the ideal self. An ideal self in a context defined by HIV is a self who looks normal outside and there are no signs that the body is fighting a life of death war inside. Rumbi seems to have achieved that ideal in

that HIV can no longer be detected in her blood when tested. She can be said to have successfully reconfigure her identity developing the ideal conception of the self.

CHAPTER 3: CONTAGIOUS BODIES AND DESTABILISED IDENTITIES IN *THE HAUNTED TRAIL* BY PHILLIP CHIDAVAZZI

Chapter Two focused on conceptualizing the body in a context that is defined by HIV in the text *Unlucky in Love* (2005) penned by Tendai Westerhof. The chapter examined the significance of the body in our everyday understanding of HIV&AIDS in contexts that have come to be defined by the virus. It was established that the body of the infected is looked at negatively especially if it belongs to a woman and is infected. She is seen as a vector and potential killer and is now viewed as an abomination in her society. It was also established that the body of the affected is marked by symbols of decay. The body, far from offering stability, presents terrifying insecurity of to the continuity of human life due to the vicious nature of the virus. In this chapter I would want to look in more detail at some of the ways in which identities become destabilized in crisis situations leading to destabilised forms as represented in the text *The Haunted Trail* (2006) and how society deals with contagious bodies in their midst. Mercer observes,

..identity only becomes an issue when it is in crisis, when something assumed to be fixed, coherent and stable is displaced by the experience of doubt and uncertainty' (Mercer, 1990).

Being HIV positive is an identity that most characters in the text being analysed subscribe to. Being HIV positive has become a crisis for many individuals who are seen losing hope for living and even contemplate suicide as a solution to ending their misery. The individual is riddled with identities that are weak representations of the self. These identities have been fostered on their bodies medically and socially. Caruth and Keenan (1995) assertion is that one's identity is reduced to the status of one being healthy or not. Healthiness takes prominence in

this case where society seems divided on who the health scare is and who is not. Differences are being marked out by one's health status in a way that is meant to make others feel less secure in themselves and as part of the human cosmology in society and reject these people as not belonging to normal society.

A destabilised identity means that an identity has been rendered less powerful, less safe or weaker through some changes in an individual's life. The contagious nature of the body contributes to loss of stability physically and socially as well as economically. According to Sanchez-Arce (2014,) illness is destabilizing due to the reason that it is regarded as a stigma. One can note that illness is being separated from daily life normal life and a contagious body is isolated because of fear, shame, and humiliation in the self who is seen as separate from the everyday life because of his or her HIV status. Illness fragments and destabilizes the self because one usually feels hopeless and frail and there is a tendency to look at the infected person as an invalid or potential invalid who will be a burden to the healthy family members. The HIV positive usually feel loss of independence because coming out usually resembles the act of airing one's privates in public. Society usually start to hypothesis on how one must have got the disease, if one is promiscuous or private matters like if they know one was going out with someone they jump to conclude that that person must also be suffering. The body begins to be seen as a contagious thing that should be propped up by medicines and body projects for its survival. The body being contagious is seen in terms its polluting potentials and this emphasis the fact that someone does not belong or deserve to be among the living.

Biblically, men were created in the image of God. This concept has helped to create strong images of men in society as they seem to possess more social power through patriarchal dividend. In the text analysis will centre on female and male characters and how their once

strong identities are made weak through being tested HIV positive in *The Haunted Trail*.

Hall (1996) argues that the self is reflexive and takes itself as an object and can categorize or name itself in a particular way in relationship to others. He goes on to argue that social categories in which people place themselves are already prescribed and human are just born unto them. In the text strong characters like Michael can be seen to be drawn to identities that speak of power and control socially, economically as well as physically. These categories (social identities) were already existent before they were born due to social stratification process and people place themselves according to how they may have chosen to be identified within certain classes. There are certain identities like gender identity in which biology and society play pivotal roles. Male characters identify themselves in relation to male figures present in their lives in most cases the father if he is alive. 'Identity belongs to the future as much as to the past' (Hall, 1990). The past is represented by all the influencing figures that impacted positively or negatively in an individual's life.

Identity is made up of the ways in which we see ourselves and how others see us. In the following analysis insight will be drawn from how the individual has constructed ideas about themselves in a context defined by HIV and where those identities are now being challenged and are being rendered weak by changes in the character's life. Beside the identities displayed by an individual care will be taken to zero in on how society defines the individual who is HIV positive. This framework will aid to illuminating a comprehensive analysis of individual destabilized identities thereby establishing links between the individual and the social world that he or she we inhabits. Hall (1996) is of the idea that people mark themselves out as the same as or different from others, and are so categorized, through the language they use, the way they speak, the words, images and symbols they

deploy, including the clothes they wear and the practices, rites and rituals in which they engage. In most of the cases one can notice that male characters would want to project images of one in total control of situations all the time and these identities are weakened when an individual discovers that he now has to battle to contain HIV as well as the social world and economic. This casts doubts on the individual who in most cases sees may not be able to see way out of this social milieu. The individual may not be able to juggle the contagious body and all its demands alongside these other images that demands that he is always on top of the situation. One's identity is a reflection of one's conscious self and the conscious self may not be able to accept a weakened version of the ideal self.

There is constant comparison of the ideal self in relation to the contagious self who exhibits a weak version of what the individual would like to become. Hall (1996) notes that the self exists in relation to the 'Other,' that is , in a relationship of identity and difference, which is shifting and hierarchically constituted. Hall (1996) goes on to emphasise that there is no end to this process of becoming, for one is constantly *becoming* in relationship to others. Identity exists not as an ontological reality, but as a linguistic practice where some dominant articulations normalize "ways of being." As a result one can note that through this analysis one can note that identity is constituted out of differences as well as the fact that it is not static and fixed states where one can talk of an unchanging character in an individual. These destabilised states of being in the characters that shall be analysed in the text *The Haunted Trial* are therefore natural in relation to Hall's statements of the changeability of an individual's traits in relation to his or her changing circumstances and situation in contagious environment whereby a lot is at stake. The contagious individual becomes an outsider in a world where everyone is being conscientised on his danger to humanity as a vector or carrier of HIV. The society sees the HIV positive as the other that is to be named and avoided and

this also weakens an individual's conceptions of his identity in relation to the environment that he is supposed to identify with. It is every HIV positive person's ideal to be rid of the virus and that is how in these instances one can talk of destabilised identities because the infected are seeking to define their identities in relation to the HIV negative which is their ideal states of being but these states can no longer be seen to be achievable.

Butler (1993) notes that identities are constructed and the process is never complete. This shows us that these identities on display by individuals in the text *The Haunted Trail* are not natural states but are freely chosen by an individual and there is effort to live up to those chosen standards. Kellner (1992) contends that it (choosing and ticking to an identity) becomes a freely chosen game, a theatrical presentation of the self. One can therefore argue that in this vain identity since they are not casts in stone they are open to changes and recasting or representations in accordance to changes in an individual's life. It therefore should not shock if characters in a text for example female characters, like Chiedza in *The Haunted Trail* and Rumbi in *Unlucky In Love*, re-configure their identities to accept less stronger identities or weaker forms of identities that also take into cognisance their diseased states of being. These are necessary measures that will enable them to deal with the presence of an infection in their body at the same time give them hope for living. In other words they are able to negotiate for a nurture hope for a brighter tomorrow as opposed to characters that deny their diseased status and try to live without acknowledging that there is something wrong with their bodies.

The HIV/AIDS pandemic can be described as one plagued by social meaning. Vara- Diaz (2005) defines stigma as the negative evaluation of a particular difference that may be associated with a person. Stigma can be seen as a way in which society tries to define an individual and attach an identity to that individual. These definitions of the HIV

positive in society in most cases have led to discrimination in relation to the contagious bodies that they inhabit. In this case one can note that HIV&AIDS have inflicted a pervasive and intrusive destabilisation of the entire society – individuals, families, communities and institutions.

Burr (2003) is of the opinion that each individual constructs their own version of reality and at the same time nothing is static. In text we are confronted by characters who try to write their own destiny and are active in the construction of their individual identities. One can note that this process that Burr alludes to aids the character in assuming responsibility for their actions when things go wrong. Where it becomes easy to blame men for infecting them as is the case for HIV positive persons where the blame game seeks to lessen one's responsibility for their diseased status. As a result, the female characters in the text *The Haunted Trial* can be seen to be coming from a position of inequality to assume more powerful identities where they are now the authors of their own destiny. In the text *Unlucky in Love* (2005) Rumbi declares that she is now happily married to her HIV. She seems happier and much more at peace and one can wonder if the result of being tested HIV positive means that all characters will end up with destabilised identities? One can see them negotiating for better identities even with though they are now largely seen or viewed as contagious bodies in their society. Society views them as individual that should be shunned or avoided or who should try by all means to bury their existence inside their homes. An individual's identities are born out of different situations. Burr (2003) argues therefore that people have no fixed selves but rather change as each situation changes which poststructuralist associate with modern trends of self-definitions. Holstein and Gubrium (2000) argue that in the twenty-first century, the self has become so fragmented and fluid that its very existence is seriously questioned. This on its own destabilizes identities whether one is positive or negative with HIV. The environment that

we are living in is so hyper tense that the existence of stable selves is in question. At the end of the day one can note that identities are already destabilised but the HIV positive can use this trend to negotiate for better identities because they are now surer about what choices they have open unlike the negative person who is confronted by a myriad of choices.

Mahoso (1999) reasons out that destabilised identities are prevalent in society because HIV-related diseases attacked the psychological and spiritual health of society and destroyed relationships and institutions long before it finally destroyed the infected body. In this case one can note that the mind is an HIV positive person's number one enemy. Defeat is being achieved in the mind long before bodies have been destroyed by the infection. Chapman, (2000) notes that is not surprising considering that the HIV or AIDS body has been conceptualized as a site of death and contagion. To society the HIV positive are walking cadavers and if an individual thinks likewise one can notice that the prevalence of destabilised identities will become many. This chapter will carry out psychological analysis of the infected individuals in a bid to understand how individual come to have the cadaver-mindset when they are tested positive. Burr (2003) notes that the self is created in the context of different social circumstances which require different responses. An analysis of those social circumstances is necessary in understanding destabilised identities in each and every character. As a result one is able to understand each response to the differing social circumstance that created that individual.

As earlier discussed in the introduction, destabilized identities are those identities that come out as weak representations of the self. People who are ill having been diagnosed with HIV often exhibit destabilized identities. Sontag (1978) notes that everyone who is born holds dual citizenship, in the kingdom of the well and in the kingdom of the sick. She notes that although we all prefer to use only the good

passport, sooner or later, each of us is obliged, at least for a spell, to identify ourselves as citizens of that other place. In the text *The Haunted Trail* Michael has risen from rags to riches and has worked hard to improve his meagre background. He is presented as a Mbare prostitute's ill begotten child whose father is said to have died in violent circumstances due to criminal and shameful activities. This is the background he inherits from his parents, a background that forms the basis of the identities that he forms in later life as an adult. Michael Denga represents the worst that society can produce in an individual who seeks to win in everything in life. When his mother dies, he walks away from her corpse but he does not know that he will find himself in the same situation when the wills of fortunes seems to be running away from him. He is tested positive with HIV and is back to being poor when his empire crumbles due to corrupt tendencies and a failing national economy.

Woodward (2002) notes that adulthood is seen as an effect of childhood. In this vein one can note that adult lives are controlled by our past childhood experiences. Woodward (2002) notes that individuals often seek the security of a named 'true' parentage that confirms the ties of kinship as well as seeking the revelation of their 'real' 'true' self. Micheal is curious about his past especially the lack of a father in his life. He is constantly told that he was just a criminal. Micheal in *The Haunted Trail* said that he felt 'marked' being a fatherless son of a prostitute. At School he felt marked because all the students had fathers but, '...he did not have a known father like everyone else.' He sees his life destined to be poor or mediocre because his parenthood had comprised of two of society's unscrupulous individuals; a dealer named Taruza and a shabean owner and former prostitute called Stella. Micheal sees his mother as a failure in life because she was destined to a life of struggle and poverty and vows that he will never be like her. According to the street gossip he is able to gather, his father had died as a result of stab wounds sustained from

a gang fight over a young prostitute called Melina. Gabriella Gobbi (2013) has indicated that children growing up without a father are far more likely to abuse substances, or to be involved in antisocial behaviour and criminal activity. A father is a human model for his son. A son looks up to the father to provide support and guidance in his early life. McLanahan (1994) is of the opinion that a boy's search for the self-starts with his father. She notes that without a father, most boys have a harder time knowing who they are and where they came from. There is constant feeling of 'being different' in Micheal's life due to the absent father and can see to be true of Micheal through his fervent search for belonging in the amassing of wealth and his determination to be a person of worth. It is noted, 'He suffered the absence of his father who could have shown him the ritual pathways into manhood. 'This fatherless identity destabilised him firsts before his HIV status did further harm. He searches for belonging in all the wrong places and is too determinist to a point where it leads to his destruction as he tries to run away from the poor background he inherited from his parenthood.

Hall (1990) asserts that, 'identity belongs to the future as much as to the past.' In looking at Micheal's past life and parentage one is able to understand why he is always accumulating women and money around him. As a rich man he is able to commandeer his life to greater levels. His greedy nature does not allow him to refuse opportunities be they good or bad which led to his downfall with Chiedza, his empire and his health. McLanahan (1994) notes that growing up with one parent also deprives children of important economic resources ultimately undermining the children's chances of future success. In Micheal's case, he is able to prosper due to the help of scholarships but one can note that he is determined never to be poor again. In this sense adult identities are derived from childhood experience. Identities premised on wealth creation are never stable and once the money is gone as when Micheal's empire falls so does the identity he had built

around his affluence. It is said he 'thrives on challenges' and, '...nothing stood in the way of his insatiable yearning for wealth.' It is only inevitable that one of the challenges and insatiable appetites are bound to form the cornerstone of his demise.

He cannot see himself living as a poor person with nothing. As result one can note that childhood experiences have aided in the construction of weak adult identities that fails to sustain him in times of crisis. Woodward (2002) states that conflicts within the self are best understood through retelling stories of childhood, and especially of relationships with family members. Michael's relationship with Chiedza looks solid on the outside but one can note that it is destabilized by Michael's past relationship with his mother, Stella. He grows up with the constant image of men trampling on her life and never staying for long. She is used like a 'condom' by men and one can say that this forms the basis on which Michael's relationship with women is premised. He uses Fiona's body to settle office business, he sleeps with his girlfriends' friend, Jackie and many other women that he just takes on only to use and discard. He sees women as 'pawns' that he moves around in a game of chess in which only he has total control. In a context which has come to be defined by HIV one can see that the Casanova identity can be fatal if the individual does not practice safe sex and he ends up infected and taking his own life.

Chiedza in *The Haunted Trail* comes across as someone who knows where she wants to go and how to get there. She is depicted as a more stable character as compared to her friend Jackie who sleeps around indiscriminately. Chiedza works hard in school and even at work she does not use her privileged background as an unfair advantage as she is able to prove her mantle at the prestigious accounting firm where her mother manages to use her influences to secure a place for her. Hall (1996) is of the idea that people mark themselves out as the same as or different from others, and are so categorized, through the

language they use, the way they speak, the words, images and symbols they deploy, including the clothes they wear and the practices, rites and rituals in which they engage. In this case Chiedza is different from other women or girls in that she is morally upright and refuses to engage in sex before marriage with Michael her fiancé of many years. She is principled and one cannot help juxtaposing her to her friend Jackie who is the exact opposite. This is a big feat in a world where sexual immorality has become the norm for modern women, a world in which women have fought and won the rights to determine their sexuality and exercise it without restraint as symbolised by the character Jackie whose sexual immorality even surpasses men's. Sontag (1989) decries the fact that Christianity has made sexual behaviour the root of social virtue. Catherine Hakim (2004) makes the pertinent observation, 'sex is no more a moral issue than eating a good meal is.' In other words being a morally upright person should be divorced from issues of sex. In Chiedza's case, she is naive in her love-worship relationship of a tycoon like Michael who is busy getting what she withholds from other women. In this case the author can be seen to have highlighted the instability of identities that are built on issues of sexual virtue in these modern times. Chiedza is taken by surprise when she is raped and infected with HIV and her good girl image is tarnished in the blink of an eye. Girls like Jackie who are sexually amoral come out as the moral ones because they are able to protect themselves and are better prepared in a world where one needs never let one's guard down. Jackie notes in a discussion with Chiedza on their sexual practises, 'At least you are safer because you don't sleep around.' She goes on to joke that AIDS is probably closer to her but she uses protection all the time. Chiedza has been brought up to expect the best in all humans but this trait proves to be her undoing. She is too trusting of Micheal and believes being good will rub on to him but she fails to change him. Giddens (1991) stresses the autonomy of the self as an agent who is engaged in producing accounts of oneself. The account that Chiedza produces about herself are rendered unstable in a

world where instability is the order of the day. In modern times that naivety and innocence have been shown to lead to devastating effects. She fails to identify Michael with the mafia leader he is, the man who masterminded Leslie Gatsi's murder just so that he can take over his ailing bank. She negotiates a lifestyle that proves to be bigger than her in choosing Michael as a partner because Michael would have fared better with a partner like Jackie who is wise in the ways of the world. Choosing to live in Harare meant that Chiedza had to be tougher if she was fare better. Her innocence proves to be fatal in that she would have suspected that Michael was the devil that her family warned her against. Harare is described in the image of a 'spent harlot' and it is not a place where one can retain her innocence or incorrupt nature. In moments of crisis when Chiedza is told about her HIV positive status she had contemplated taking her own life but her morals had saved her sanity and she realises that she cannot be cruel to her unborn child. She begins to see Michael for what he is. Her identity begins to change. Javangwe (2013) substantiates this when he states that 'The self is ever changing...' Whereas before she had seen her life stretching further than the horizon, as an HIV positive person she explains that she began to feel like a cripple. She talks of having deep scar that have blemished her once untarnished image of the well brought up child. She now sees her life as over and one can see how these self-images aid in destabilizing the self. She begins to see herself as a victim and according to Maureen Kambarami's (2006) women are portrayed as 'innocent' and naïve recipients of the disease and she notes that these narratives limit the sexual options available to women in and out of marriage, and stereotype men as callous agents of the disease. In this case Chiedza's agency is taken away from her and one can note that there is an attempt to define her identity in terms of her enemies or the perpetrator who is Michael. Delanty and Kumar (2006) have noted that victimhood is divisive and there is an attempt at imposing an artificial hierarchy in which one side is said to have suffered more than the other. In this case the author Chidavaenzi has built Chiedza's

identity in relation to Michael's and there is an attempt to portray her as the innocent untainted virgin who was more wronged because she was infected the day she got deflowered. This has the negative effect of perpetuating existing hatred against men as the spreaders of HIV by failing to recognise that both men and women can be the victims as well as the perpetrators. In this case Michael is a bad guy through and through and there is a tendency at condoning Chiedza's innocence and blaming it on the wine she consumed at Michael's place before she was raped. The author failed to look further into problems that Chiedza would have faced had she waited to be deflowered after marriage because in marriages it has been noted that couples are at a higher risk of infection because they do not use protection. As long as she carried that overly trust in Michael one way or the other she would have been infected. This goes against the image we had created of her to be intelligent individual because one realises that the self consists of multiple selves in different situations. Burr's (1995) theory of social constructionism stresses the fact that:

Instead, then, of people having single, unified and fixed selves, perhaps we are fragmented, having a multiplicity of potential selves which are not necessarily consistent with each other. The self which is constantly on the move, changing from situation to situation...'

These new forms of consciousness and selves are at the core of an individual's identities. Hall (1996:4) makes distinct and important observations in this regard:

...identities are never unified and, in late modern times, increasingly fragmented and fractured; never singular but multiply constructed across different, often intersecting and antagonistic discourses, practices and positions. They are subject to a radical historicisation and are constantly in the process of change and transformation. We need to situate the debates about identity within all those historically specific developments and practices which have disturbed the relatively 'settled' character of many populations and cultures, above all in relation to the processes of globalization, which I would argue are coterminous with modernity...and the processes of forced and 'free' migration...(Hall;1996)

Erikson (1968) is of the view that Identity is sometimes used to refer to a sense of integration of the self, in which different aspects come together in a unified whole. In the end it is all those different pieces that make up the composition of an individual's unique identity.

In our society one's identity can be determined by the society, what people say about the individual can be seen to aid in identity of the infected. Sontag (1989) shows how the metaphors and myths surrounding certain illnesses, especially cancer, add greatly to the suffering of patients and often inhibit them from seeking proper treatment. Sontag (ibid) goes on to note that HIV is seen as a 'plague' and as a 'judgment' on the individuals suffering from it despite the fact that it is a heterosexual disease as well as a global issue, it is still often discussed as a consequence of decadence and a punishment for 'deviant' sexual behaviour. Erickson (1968) argues that social identification is the process by which we define ourselves in terms and categories that we share with other people. Identity is clearly developed in relation to others and individuals often have to negotiate their way into societal categories. Jane Crisp (1995) talks about the power of others in determining our identities. Identity can therefore be seen to comprise of self-definitions as well as definitions by society at large. In most cases people living with HIV are defined by their status and as a result become non-persons. HIV positive and HIV negative are all identities and categories that have become ways of defining individuals in our society. It seems like society has been divided into two camps that people identify with. The negative and the positive and these are some of the categories that people use to define those who are contagious. Sabat and Harre (1992) have theorised that the negative reaction of others to contagious people brings about loss of self in the identity of the sick. Thus in the case of *The Haunted Trail* Chiedza is told to stay away from a club they formed when she was negative. Sentiments in the club are that she had become a prostitute when she was infected in Harare. There is an attempt at just

identifying her in terms of being unhealthy and contagious to others which are negative identities that further destabilize for new found hope for rebuilding her life. The society is afraid of her infection and Shildrick (2000) defined contagion as unclean, notions where the disease can be spread by touch or proximity. Those who are infected are stigmatised as unclean in an effort to emphasize that they must be removed from society and that they contain something that people should stay away from.

There is an attempt at talking through the infected in society. Shildrick (2000) notes that those who are sick are talked about by their society as if they are not there and in so doing deny them space to create viable identities. Fungai, Chiedza's mother discusses her daughter's life with her boss and other women as if Chiedza is not there. It can be noted that she made efforts to thwart Chiedza's need for going public. Fungai contends that Chiedza had to learn to live with the virus without drawing in people. In this case one can note that people do not want to be drawn into the shame that comes from identifying with a daughter or neighbour who is HIV positive. Society would rather that the infected suffer on their own. Society perceives the infected as risk agents because they are interpreted as a threat to others. Risky lifestyles different from everyday life like prostitution are blamed for the spread of HIV by the society. Prostitutes inhabit those spaces that are wild, free and uninhibited by morality that govern others. Goffman (1994) views the body as the material property of individuals, yet they are defined and made meaningful by society. So society is heavily involved in ascribing meanings to the individuals but it can be noted that those identities attached to positive people have negative meanings that shows that society is afraid of the contagious bodies that it cannot deal with using available medical science. Society usually sees the diseased as frail bodies that will later become a source of societal burden that it cannot afford to live with at the rate at which humans are becoming infected. According to Rose (1991) in this sense,

the self, like the body becomes a project to be 'worked on' and improved so that the individual can go on without overburdening the society. Chiedza goes on strict diet and her mother supervises her ARV uptake to make sure that her body is prepared to fight the virus. The insistence that the person living with HIV have their "own dish, spoon everything that you are using must be 'different' demonstrates the imagined danger, which the person living with HIV poses to the rest of the family and to society at large. This actually weakens their conceptions of the self because society at every turn the individual is confronted with a lifestyle that is discriminatory and a sense of being different from the normal healthy person next-door. Those who stigmatize people living with HIV falsely believe that the virus is highly contagious and that they could easily become infected. Society views HIV positive women and men as a threat to social moral integrity.

The chapter analysed contagious bodies and destabilised identities in the text *The Haunted Trail*. It was established that society and the individual are all afraid of the contagious body, and in most cases, seeks to attach negative meanings to the identity of the individual who has been infected. The discussion centred on the weak identities that were displayed by characters in the text through the analysis of Michael, Stella and Chiedza during the times that they had been diagnosed with HIV. It can be noted that Michael's background as a rootless and fatherless loner who was running away from poverty, were the causes of the factors that destabilised his identity leading to his decision to take his life when he was now facing the demise of his powerful identity. He had been advised that every men fights alone by his mother and that the individual does only favours for itself thus in a context defined by HIV lonely figures often seek to end their life because it can be noted that HIV needs the support of the family members and society. When faced with the demise of his body he fails to apply those principles that had made him a winner in life because

they could not sustain his new identity as a positive person. He fails to look beyond his present calamities and thus it had spelled disaster. In the case of Stella she is also a strong woman who succumbed to HIV but she is not able to get the medication needed to save his life. Chiedza in times of the HIV crisis folds but it can be noted that her firm family background helped her achieve a stable identity even though she had to deal with the same stigma and discrimination that led to the demise of her fiancé. She is able to construct a new identity that is based on acceptance of her HIV status.

CHAPTER 4: HIV-AIDS AND THE MASCULINE, FEMININE IDENTITY AS DEPICTED IN *UNLUCKY IN LOVE* (2005) AND *THE HAUNTED TRAIL* (2006)

In the previous chapter I looked, in more detail, at some of the ways in which identities become destabilized in crisis situations leading to destabilised forms as represented in the text *The Haunted Trail* (2006) and how society deals with contagious bodies in their midst. It was established that everyone is afraid of contamination from and having HIV meant living with constant feelings of shame, fear and weakened sense of the self. This chapter seeks to establish the association between HIV infection and gender identities in the texts *Unlucky in Love* and *The Haunted Trail*. Masculine and feminine identities can be seen to be gender identities that exist as oppositional categories with the feminine identity as the subordinated and the masculine identity being the dominant of the two. Ouzgane and Morell (2005) are of the opinion that Masculinity and femininity can exist only as each other's opposites. While women's subordination to men increases their risk of HIV infection as they are unable to negotiate safer methods of protection, researchers such as Peacock et al. (2009) draw attention to the fact that men also suffer from harmful gender norms demanded by the masculine identity as manhood requires that men behave in ways that heighten their risk of HIV infection. Contrast between the worlds of masculinity and femininity, and in particular on a 'double standard' of sexual reputation behaviour that made men successfully masculine or real men, caused women to lose their reputation—to be seen as looser promiscuous. This is a reputation that can be seen being policed just as forcefully by women as by men. Men's acceptance of the masculinity of the male body is markedly different from women's distancing of their femininity from their bodies (Holland, et al, 2002).

Connell (2000) defines masculinity as patterns of social practices associated with the position of men in society's set of gender relations. Another definition by Connell (1995) defines hegemonic masculinity as the culturally exalted form of masculinity. Research has shown that there are multiple masculinities that are present in society and the hierarchies' present evidence that the most domineering form of masculinity as postulated by Connell (ibid) is what has come to be known as hegemonic masculinity. Boateng (2007) elaborates that masculinity is fluid and diverse across different times and contexts and is mediated by factors such as socio-economic position, race, religion, age and geographic location making it appropriate to refer to these as 'masculinities' because they are so many forms available in different societies. Female gender roles narrow the possibilities for women to protect themselves as it can be seen to have been constructed from positions of inferiority to the masculine identity. On the other hand the construction of masculine identity in society has been said to perpetuate the general spread of HIV through the patriarchal ideology that has invested a lot of power in men. The spreading of HIV/AIDS has a gendered dimension (Soderstrom, 2006). Soderstrom, (2006) defines gender identity as our perception of the self as psychologically female or male. Gender relations shape the world of men and women. These gender relations are important in our understanding of the actions of men and women as well as to enable us to understand why women are more seriously affected by HIV than men. The shapes that are representative of feminine and masculine identities in today's society have shown that women's social roles are set on unequal footing to men's.

Wilton (1994) commented:

... unequal relations of power between women and men are not simply of academic interest. In the context of HIV/AIDS they are literally life or death issues, for men as well as for women' Tamsin Wilton (1994).

Femininity constitutes an unsafe sexual identity in that it is a subordinate identity that is built and constructed around men's powerful position in a patriarchal system. Conventionally feminine behaviour puts women at risk because they are not supposed to initiate anything of value as well as the fact that they are supposed to be docile and subservient to men and basically a tabula rasa when issues of sexuality are mentioned. Peacock *et al.* (2009) note that to be feminine is to appear sexually unknowing, to aspire to a relationship, to let sex 'happen', to trust to love, and to make men happy. They further note that safer sex is not just a question of using protection, avoiding penetration, or being chaste, it brings questions of power, trust and female agency into sexual relationships. In essence discussions on gender and HIV bring us straight to the issue of sexuality and power and in most cases the feminine identity can be said to be powerless thus leading to more chances of women being infected with HIV.

Women accommodate illness and men view illness of any kind as a weakness to the identities that they are immortal and stronger than any illness (Green & Pope, 1999). Peacock *et al.* (2009:120) also buttress the view that studies repeatedly show that men who adhere to rigid notions of manhood, who equate masculinity with risk-taking, dominance and sexual conquest, and who view health seeking behaviours as a sign of weakness experienced a range of poor health outcomes. In this vein it becomes difficult to protect the individual and their sexual partners because the men will be busy trying to adhere to the dictates of the masculine identity at the expense of safe behaviours. Larkin *et al.* (2006) is of the opinion that young people tend to overlook the fact that unhealthy attitudes and behaviours on the part of males, as reflected by men in society affect both them and their female partners. As a result one can note that toxic masculinity becomes a danger not only to the person practising it but to the whole community and society. The competition amongst males to demonstrate sexual

prowess exceeds their fear of HIV infection, demonstrating that risky behaviour is indeed a hallmark of masculinity and this puts the feminine identity at risk because it is an identity that is interdependent on the power of the masculine identity. Travers & Bennett (1996) are of the opinion that women become the passive receivers of male sexuality and men's sexual attention.

Soderstrom (2006), men and women are supposed to have different abilities and characteristics where the female is considered caring, nursing and sensitive while the male is connected to ambition, rationality and self-reliance. Sexually there are also identities that mark the identities of women in which a woman is placed either as a Madonna (good) or a whore (bad). In most cases men are not negatively marked by sexual identities as much as women even though their sexual behaviour warrants negativity. Soderstrom (2006) contends that sexual behaviours decides which of these roles the woman sides with and her sexual conduct is judged by men and marked negatively by men. This limits her and deprives her of power and control within sexual relationships because most women feel that they have to conform to the dictates of those identities that men have carved out for them. Historically, marriage for women meant they became defined by their relationship to their husband, their children whereas marriages for men meant they had someone to take care of the home and the children but they are not seen to be defined by it. Men's identities are not defined by marriages.

In most cases women lack the financial means to cater for the lifestyles that they desire. For most women they seek out relationships that are not conducive for self-development because of the need for financial support. They end up involved in relationships that expose them to HIV. Sexually active women who were engaged in sexual relationships because they received gifts or money expose women to danger of infection and exploitation (UNAIDS 2001:32). The situation where

women have limited economic resources puts them in the situation where they engage in relationships in order to obtain money or other gifts. In the texts *The Haunted Trail* and *Unlucky in Love* one can note that the women in the text are can be seen to be attracted by the gifts and money that their sexual partners are able to offer. These monetary attractions can be seen to be creating spaces where women's dependency on men is seen to be working against them in positioning them in spaces where they are quick to accept subordinate positions in a relationship further endangering their lives to HIV.

Femininity on the other hand is constructed in dialectical opposition to masculinity and is associated with subordination, docility and emotionality. Modern Western feminist history is split into three time periods, or 'waves', each with slightly different aims based on prior progress. First wave feminist movement of the years up to the 1960s focused on overturning legal inequalities, particularly women's suffrage. Perhaps the most cited feminist writer of the time was Mary Wollstonecraft characterized as the first feminist philosopher in her book, *A Vindication of the Rights of Women* (1792), which is one of the first works that can unambiguously be called feminist, albeit in it, she is focusing on the women of the nobility, the elite of society (coddled, fragile, and in danger of intellectual and moral sloth) ideas that can now be viewed by postmodernist as outdated but they created the platform from where women were prepared to stand up and remove the shackles and manacles that had seen them relegated to the periphery of society. Wollstonecraft (1792) identified the education and upbringing of women as creating their limited expectations based on a self-image dictated by the male gaze. Second wave feminism (1960s-1980s) broadened the debate to include cultural inequalities, gender norms, and the role of women in society. The ideas and efforts of this era continue to coexist with third wave feminism. The movement encouraged women to understand aspects of their personal lives as deeply politicized and reflective of a sexist power structure through

what came to be known as hegemonic masculinity. Third-wave feminism began in the early (1990s–2000s) in response to what young women perceived as failures of the second-wave. It also responds to the backlash against the second-wave's initiatives and movements. It sought to challenge or avoid second-wave "essentialist" definitions of femininity, which over-emphasized the experiences of white, upper middle class women. Freedman (1992) argues it is noted that a post-structuralist interpretation of gender and sexuality, or an understanding of gender as outside binary maleness and femaleness, is central too much of the third wave's ideology. Feminist leaders of colour who are mostly black women, called for a new subjectivity in feminist voice. They wanted prominent feminist thought to consider race-related subjectivities. Cleonora Hudson-Weems' *Africana womanism* arose from a nationalist *Africana* studies concept. In *Africana Womanism: Reclaiming ourselves* (1995), Hudson-Weems explores the limitations of feminist theory and explains the ideas and activism of different African women who have contributed to womanist theory. At its core, *Africana womanism* rejects feminism because it is set up in a way as to promote the issues of white women over the issues of Black women. Hudson-Weems argues that feminism will never be right for black women due to the implications of slavery and prejudice. She further asserts that the relationship between a Black man and a Black woman is significantly different from the relationship between a White man and a White woman, because the white woman battles the white man who is subjugating her, but the black women battles all oppressive forces that subjugate her including the white woman, culture and the black man. She further asserts that racism forced African-American men and African-American women to assume unconventional gender roles. In the African perspective the colonial experience introduced new methods of disempowering women from the western concepts. In this context, the desire of mainstream feminism to dismantle traditional gender roles becomes inapplicable to the black experience. Unlike womanism, *Africana*

womanism is an ideology designed specifically with women of African descent in mind. It is grounded in African culture and focuses on the unique struggles, needs, and desires of African women. Based on this reasoning, Africana Womanism posits race and class based oppression as far more significant as gender- based oppression. Weems refutes Africana womanism as an addendum to feminism, and asserts that her ideology differs from Black feminism, Walker's womanism, and African womanism.

Lerner (1986) is of the view that men and women are biologically different, but that the values and implications based on that difference are the result of different cultures. Lerner (1986) goes on to note that differences that are discernible between men-as-a-group and women-as-a-group are the result of the particular history of women, which she notes to be essentially different from the history of men and can be attributable to the subordination of women to men. The most influential work was Ortner's 1974 essay, in which she persuasively argued that in every known society women are identified as being closer to nature than to culture. Ortner (1974) posits that women took their current gender identities due to the fact that their bodies' functions place them closer to social roles that are considered of a lower status compared to men's.

Chodorow (1978) postulates that in order to find their identity, boys develop themselves as other-than the- mother; they identify with the father and turn away from emotional expression toward action in the world. She further notes, 'Boys come to define themselves as more separate and distinct' Chodorow (1978). Freud saw the origin of male aggressiveness and competitiveness in the oedipal rivalry of father and son for the love of the mother. Lerner (1986) notes that women themselves became a resource, acquired by men much as the land was acquired by men. Women were exchanged or bought and the first gender-defined social role for women was to be 'those' who were

exchanged in marriage transactions and men defined the terms of exchange. Lerner (ibid) goes on to note that the gender-defined role of warrior led men to acquire power over men and women of conquered tribes. In the texts *Unlucky in Love* and *The Haunted Trail* one can note that marriage for the women becomes an act of loss of power and independence. Marriages comes in to destabilise feminine identities and in most cases one can note that option for women are closed whist for men they can chose to terminate of continue with their relationships once their HIV status have confirmed them to be positive or not.

Whitehead and Barrett (2001) in their definition of masculinity, state that masculinities are those behaviours, languages and practices existing in specific cultural and organizational locations, which are commonly associated with males. It should be noted that masculine identities reflect social and cultural expectations of male behaviour rather than biology. Connell (2005) deals with the relation between the male body and masculinity. She goes on to describes how true masculinity is always perceived as something which stems from men's bodies and that true masculinity is engraved in the male body or expresses something in regards to that body. Connell is of the opinion that the sociological task of understanding masculinity starts with understanding the male body and its relation to masculinity and gender. In most cases the male body is abused so as to make it conform to the dictates of the masculine ideals that society has endowed on men. There are different forms of masculinities and Connell (1995) identified a hierarchy of masculinities in which the dominant forms comprises of dominance, authoritativeness, aggression, male honour, competitive behaviour, bravery, and rationality are more prevalent and dominant in most societies. Connell (ibid) argues that the ideology of patriarchy legitimizes violence towards women and subordinated forms of masculinity as a result of the hegemonic masculinity's superiority over them. Furthermore,

violence is a male institute which usually functions between men and in recent times has become directed at women. Violence of minority men is the rebellion of masculinities which were marginalized by hegemonic masculinity. Violence is, according to Connell (2005), a part of the system of domination, but it is also a sign of the system's weakness, for it would not have to resort to intimidation if its legitimacy was not questionable. In most cases violence against women has resulted in rape and physical torture and these can be seen to be represented by the characters in the texts.

Toxic masculinity is one of the ways in which patriarchy is harmful to men. It is the socially-gender roles constructed attitudes that describe the masculine as violent, unemotional, and sexually aggressive that has led to more harm than good in masculine identities in the context of HIV. There is the perception that a man is born to be in charge (Silberschmidt, 2004). These perceptions have hindered women's efforts at negotiating for safer methods to protect themselves in cases where they fear that their spouses philandering tendencies might be harmful to their persons. Women are actually more likely to suffer from depression looking at their gender identities which have been constructed from subordinate positions and have rendered them powerless and more male defined in most cases. Women are more likely to seek help when in crisis situation and when they encounter trouble or problems. Connell (2005) blames the stereotypical forms of masculinity: men in control, men the invincible and men the immortal which lead to men not seeking help leading to them taking their own lives instead of facing problems head-on and seeking help first. We do operate in a culture where men, by and large, talk about their feelings less. They are self-conscious about talking about weakness or expressing their feelings and this has come to be accepted as the standard measure of masculine identity in most societies. The rules of masculinity prevent men from asking for help or talking about feelings and one can note that the male characters in the two texts either do not

discuss their feelings about being diagnosed with HIV or just plain refusal to accept that they are responsible for spreading this virus to those that they claim to love. As a coping strategy one can see a high prevalence in men who abuse alcohol or drugs in order to block feelings or hide feelings and it becomes a cycle where we note identities of men who have these lifestyles where drinking beer and being drunk all the time becomes an identity that in recent times women have also copied as a coping strategy. The man is always out all hours and one can note that their masculine identity has had an incremental value in how they formulate coping strategies in dealing with crisis situations in a context where HIV has become a reality to most families.

In most cases, the masculine identity has been constructed on the basis of men the provider and it can be seen that both male and female characters in the text *Unlucky in Love* and *The Haunted Trail* experience poverty at some point but it is men who are more likely to kill themselves if they are poor. Male characters can be seen to be more afraid of poverty than HIV in *Unlucky in Love* and in *The Haunted Trail* one can note that fear of losing financial properties led to the decision by the character, Michael Denga, to end his life. For men the act of acquisition has been a historical phenomenon of male power and virility and the act of losing those acquisitions becomes unbearable because it threatens to unsettle their sense of self based on material goods.

A true man should be able to handle more than one partner. This fact has been accepted by a lot of people in society. In our African society polygamy is an accepted thing and a man can own up to twenty women who live together and they all belong to him as their wives. It is something that does not raise eyebrows in society when a man engages in sexual philandering with a lot of women and calls them small houses. Society is quick to mark women who are seen as sexually

amoral but for men society tends to think that those are the true masculine identities that men should display. Society tends to believe that a man cannot stick to only one woman and he has a constant need for sex (which women do not have). Because of this, men tend to have more partners and these identities become problematic in situations where HIV has become the bane of societal pain. Men's attitudes, behaviours and needs tends to be excused and tolerated in society but this can be seen to have created spaces where men become vectors to their innocent partners.

The feminine identity can be seen to be an identity that is riddled by definitions that men have ascribed to the female members of their society because men have been instrumental in recording the history of humans. According to Brittan (1998), gender will reflect the material interests of those who have power and those who do not and in most cases what can be noted from the configurations of gender identities in society is the fact that women are the powerless, the subaltern and the subordinate of the two genders. In the text *Unlucky in love* the story centres on Rumbi the main protagonist's struggle in her marriage to a white man when both of them are confirmed to be positive with HIV. One can note that it was Rumbi's greatest wish that a man should want to put a ring on her finger. One gets the constant feeling that she feels that she has to belong to a man in order for her to be of substance. She even had a dream when she was young in which she saw herself in a white dress marrying a white man and takes it as a conformation from the above that her marriage to Horst was meant to be. This was supposed to be a dream come true for her after two failed relationships in which she had been used and discarded and left with a 'soiled goods' label. The advent of the news that they are both infected with HIV disrupts everything. One can note that Rumbi has been socialised into believing that a marriage is necessity for a woman. The men in her life are only seen coming in to disrupt her sense of self once and leaving her to pick up the broken pieces. After her escapades with

four men all of whom she was not so 'lucky' with she still cherishes the dream that one day her, 'knight in shining armour' will come and bestow respectability to her life by marrying her. In this case what comes out of her dreams and wishes is that her identity has to be tied together with a man in order for her to feel acceptable in society. At the end of the day she accepts Horst without raising questions because she is desperate to be married. Horst's thumb card can be seen to be his threat that he will cancel the wedding and he knows she cannot afford that because she needs the assurance of being Mrs. Somebody. Her desperation leads her into acceptance of a shoddy deal in which he can go on abusing her by continuing to live like a bachelor and carrying on with her friends, maids and receptionists which puts her life at risk from HIV infection. What comes out of her narrative is the fact that the feminine identity is constructed around the presence of a man and women's desperation to keep unhealthy relationships often expose them to risks of infection from their unfaithful partner.

In our African society, a woman is 'bought' through the paying of bride price and Lerner (1986) is of the opinion that this was the first gender-defined social role for women. Lerner posits that this role was to be 'those' who were exchanged in marriage transactions and men defined the terms of exchange. Women became a commodity that could be negotiated through monetary or exchange between the woman's parents and the husband-to-be. Even in wars women became goods that the victor could claim as spoils of the war. As such one can note that Lerner's historical perspective on the subordination of women (1986) is insightful when she notes that women themselves became a resource, acquired by men much as the land was acquired by men. Horst can be seen marrying Rumbi because she came to represent to him a resource that he can parade around with in terms of her being a former model. She was beautiful and in this case Horst wanted a trophy wife, much like Chief Nanga wanted Edna as a parlour wife in *A Man of The People*. Rumbi notes:

He always wanted me to be dressed in the best designer clothes. To be beautiful and well groomed. That is the only thing I was allowed to spend money on without him complaining' (15)

In essence she was just a prize, something he had won so that he could parade it and make other man envious. We have to note that the masculine identity is competitive and possessive and only claims to possess the best in society. The real man as defined by hegemonic masculinity always has to have the best ladies in the society. At most Rumbi could have been married by Horst so that he could claim citizenship through marriage. In most cases it is apparent that women look for love and eternal bondage in marriages but for men it quite different.

Rumbi lacks the financial means to be in a position to take up an independent identity. This has been the case with most women, marriages for them means that they have got someone to take care of the bills. One can note that Joe, Emmanuel and Horst are what society terms sugar daddies for Rumbi when we compare their ages to hers at the point when they had their relationships. She says she never thought about the fact that Emmanuel was twice her age. As a result one can note that it has been a common trend for Zimbabwean women to try and marry someone who represent a father- figure by being the provider of all their daily needs. A father –figure as a husband meant that one will lose control of the relationship and it can noted when Rumbi notes that Emmanuel never allowed her to use contraceptives because he feared it would encourage her to go out with other men. There is a belief that if a man wants to tame a woman he has to make sure that she is always pregnant. In so doing women create a dependency syndrome where a woman's daily life is controlled by her spouse in every aspect. In most cases women lack the financial means to cater for the lifestyle that they desire. Rumbi can be seen to be someone who was attracted to the high lifestyle but could not afford it

without a man. Thus Horst, Emmanuel and Joe all represented individuals who,

..Will have to be able to keep me in the lifestyle that I've become used to.'

(p.1)

The question being at what costs? She ends up contracting HIV all in the name of aiming for that lifestyle she reveres. Shefer (2003) talks about the fact that a woman being involved in relationships for economic gain creates barriers for negotiating safer methods of protection. For most women they seek out relationships that are not conducive for self-development because of the need for financial support they end up involved in relationships that expose them to HIV. A woman's place is marked far below that of the husband and this creates a system whereby the woman and the children are all powerless against the father. In this case she never questions Horst's past sexual life and just plunges into marriage with him without first making sure that it is safe. Sexually active women who engaged in sexual relationships it was because they received gifts or money (UNAIDS 2001). Thus women's roles as the dependant, the ones who must be taken care of have opened up avenues where it becomes easier to be infected in the name of looking for a benefactor because one is coming from a position of powerlessness and one will do anything to safeguard unsafe marriages as women are encouraged to do all they can to safeguard their marriages.

In most cases women's conduct is classified as either Madonna (good) or whore (bad) Soderstrom (2006) notes that one's sexual behaviours decides which of these roles the woman sides with and her sexual conduct is judged by men and marked by men and other women also take part in labelling other women. Rumbi is marked promiscuous because she has had sexual experiences with more than one man. Rumbi responds to these social attacks on her sexuality by making a vehement attempt to rescue her tattered sexual identity by making the

claims: 'I can count the number of sexual partners I have had on the fingers of one hand.' Somehow what comes out of this defensive stance is the fact that since she can still count her sexual partner one hand it is still okay because she has not crossed over to the other hand. Somehow she is saying that she has not had that much experience and is trying to fit into those spaces where she can still claim the Madonna identity that society is trying to take away from her. A woman will try by all means to down play her sexual experience but men will try by all means to advertise their sexual prowess and adventures including cases where they were sick with an STI from those sexual escapades. It is common practise that a man has to have sampled everything before he settles down to marry and even in marriage Horst is still the proverbial 'bull' around the house who takes every woman as his for asking. Rumbi cannot even trust him with her friends. She says that she lost all her friends because she feared Horst would have affairs with them. Shefer (2003) points to the pervasiveness and ambivalent nature of the traditional double standard where men are encouraged to actively pursue sexuality and take multiple partners, while women may be punished for being sexually active and are constructed as loose and promiscuous.

Women are blamed for the spread of HIV. Sathiparsad and Taylor (2006) are of the opinion that females were considered by males to be the carriers of HIV&AIDS.

Just as there are different masculinities, there are also different femininities that are displayed in the text through the characters Chiedza, Stella and Jackie. Stella and Jackie are much strong-willed and agentive than Chiedza whose can be seen to be guided by Christian morals in most of her conduct. Again the image of the Madonna is recurrent in Chiedza and can be seen to be reinforced by her stance remain a virgin until after she and Michael have wedded. She remains a tabula rasa in terms of exploring her sexuality. Peacock

et al. (2009) note that to be feminine is to appear sexually unknowing, to aspire to a relationship, to let sex 'happen', to trust to love, and to make men happy. They further note that safer sex is not just a question of using protection, avoiding penetration, or being chaste, it brings questions of power, trust and female agency into sexual relationships. Jackie is afraid of commitment and one can note that her feminine identity is depicted in a positive light because she knows how to get what she wants without strings attached. In this case Chiedza is juxtaposed to her friend Jackie who is in charge of her sexuality and sense of self and she testifies that even though she has numerous sexual partners she uses protection all the time. The feminine identity in *The Haunted Trail* the Chiedza's virginity is not empowering tool for women. It becomes a stumbling block that actually leads to Michael eventually getting his way and infecting her on the first day of their sexual encounter. What comes out of Chiedza's narrative is that the feminine identity is a passive and vulnerable identity. It seems such a waste of good intentions when she had remained chaste for a long time only to get defiled and infected at the same time. Young women are being educated to guard their reputations and protect themselves from danger (men). Young men on the contrary are learning that real men are knowing agents in pursuit of sexual pleasure. Whilst Chiedza is saving herself for Michael he is being promiscuous with other women. Sex is an empowering moment through which agency and identity are confirmed. The moment a boy engages in his first sexual encounter he crosses over and becomes a man. A man gains something and a woman loses and this fact is apparent in Chiedza's first and only sexual encounter in which she is left infected and pregnant. Frustrations and inner disturbances may even result in men raping children and women (Masenja and Urassa 1993). Thus Michael's life can be seen to slipping away from him economically his businesses are folding and the only way that he can assert his manhood is by raping Chiedza even though she is not sure that it was rape.

In the text *The Haunted Trail* one can note that marriage for the women becomes an act of loss of power and independence. Jackie is in control she does not live for the day when a man puts a ring on her finger. In fact she seems to enjoy her lack of commitment to any man. She even initiates her sexual encounter with Michael overturning the belief that women are supposed to wait until a man has courted them. She is ready and protected and in this day of HIV this attitude may win the fight against spreading it to unknowing partners. Men find it difficult to refuse sex because of the expectation of the male gender role is that men are always ready and willing to have sex. Michael in this case could not afford to refuse Jackie's sexual innuendo for fear of losing his masculine identity as a person who is ready for anything. Babatunde (2014) contends that the extent of the sexual risks facing young women began to make more sense when we could see that both accepting conventional femininity of being passive receivers of male attention. Women need to be ready, confident but at the same time they need to stop valorising men and think that men should initiate efforts to protect them sexually. Wollstonecraft (1792) identified the education and upbringing of women as creating their limited expectations based on a self-image dictated by the male gaze.

This analysis shall focus on the masculine identity as displayed by the character Horst who is Rumbi's white husband in *Unlucky in Love*. Horst's masculinity is constructed around dominance, authoritativeness, aggression, male honour, bravery, and rationality. This can be noted through the ways he treated Rumbi according to her accounts she was violently pushed from a vehicle and left in the deserted streets in the middle of the night when they had had an argument coming from a function. In this case his actions can be seen to be an exercise of male authority and power over subordinate groups. One can note that Rumbi had to walk in her high fashion to a friend's place to get help so that she could get home but Horst never

returned to check to see if she was fine. Connell (2005) argues that the ideology of patriarchy legitimizes violence towards women and subordinated forms of masculinity as a result of the hegemonic masculinity's superiority over them. Such cruelty can be seen as a sign of male power in which men are socialised into believing that a woman is an object and not a real human being that can be kicked around when it gets out of place. Connell (2005) has made reference to how the masculine identity is strongly connected to the male body. Being masculine means having physical power and this physical power can be seen working for men in asserting their authority over subordinate groups. When a man is not happy about something they have been socialised into believing that talking over something is a woman's thing a man just acts and in most cases this usually leads to violence towards children, women and other men. Violence is, according to Connell (2005), a part of the system of domination, but it is also a sign of the system's weakness. She further argues that masculinity's legitimacy has been put in question through its use of violence.

Mutekwa (2009) notes that we do operate in a culture where men, by and large, talk about their feelings less. This trend can also be noted through Horst who never wanted people to know that he was HIV positive. He says, 'I don't want this thing getting out there in the public.' Thus the issue of their HIV status was to be a secret that was never to get out. At one point Rumbi notes that he said he felt like a criminal by carrying the HIV virus; this analogy to feeling like a criminal brings to the fore that Horst thought that his status should never be disclosed to anyone and in the meantime he will just carry on like there was nothing wrong with him whilst this he was suffering inside. Ouzgane and Morell (2005) argues that Masculinity and femininity can exist only as each other's opposites but Female and male are symbolic opposites, which implies mutuality, but they also

note that the autonomy of the phallus negates the feminine. A real man is economically and emotionally self-reliant. Thus Horst is the opposite of Rumbi whereas she would want to discuss their status and stay together as both of them are infected he would want to be alone and run away as far from her as is possible. In the ends these oppositional categories have been imposed by society but can be seen to be fuelling cases where men refuse to accept their status and go on infecting acting irresponsibly.

Men do not believe that they should be emotional and share their pain with others. It is a manly trait to grind it through and never to whine about the pain inside because being diagnosed with HIV can be a devastating thing and in most cases can lead to other side effects like depression. Pattman's (2005) found that male drinking is construed as being a defining part of male culture. Men drink a lot when in crisis because they do not want to face bare facts. Horst is said to have taken to staying out late with friends and drinking a lot. Rumbi had noted that Horst and his friends indulged in drinking and spending all their time in nightclubs and beer halls, picking up girls. Thus it can be noted that male identity was never constructed to show any sign of weakness and in most cases drinking a lot is a sign that all is not well as it is used as a coping strategy. Horst blames Rumbi for infecting him but he does not sit down to look deep into what he has constructed as the image as the man who is free to sleep with anyone in the house being the problem to their infection with HIV.

In the text *The Haunted Trail* analysis will centre on Michael who embodies the masculine identity. Michael's path is haunted by his past. The text contains elements that speaks of a troubled past in that the same things that Michael seeks to run away from are the same things that he gets to confront later on in his life. When his mother gets sick Michael is horrified at the devastating effects HIV has on her

body. In turn he packs his bag and runs away from her eerie presence. He is haunted by the fact that in his mother's times of need he is not man enough to be there to offer her his support and help even when what had killed her had been a source of their livelihood. Stella's notorious reputation in Mbare and Michael testifies that he had seen several men in his mother's bedroom but had a feeling that none of them were his father. Thus, one notes that even his reaction to Lina's pregnancy showed points to a disturbed past that had the effect of a bad shadow hanging over his neatly arranged life. Lina hangs herself after Michael rejects her pregnancy. Marco tells him that he did the 'macho thing' by sending her away but Micheal knows that he had to own up and take responsibility for Lina's pregnancy. At the end, Lina commits suicide. Responsibility scares Michael into running even when he is an older man and Chiedza tells him that she is pregnant and HIV positive he is quick to deny responsibility and chase her away from him

Chodorow (1978) postulates that in order to find their identity, boys develop themselves as other-than the- mother. Connell (1995) asserts that masculinity and femininity are identities that exist as oppositional. Thus it becomes imperative that Michael should want to develop his identity away from his mother's which he sees as weak in the fact that she dies suffering from a virus that he sees only to be attacking the weak. Michael's father runs away from the responsibility of taking care of him. It has been noted that when boys are growing up they need a father-figure that they can learn masculinity from. In this case Michael ends up taking ideas from the streets and in the ends his sense of what a man ought to do in times of crisis have been warped out of shape by all the bad advice he accumulates from his fatherless status.

Micheal is gifted with a fighting spirit only when he is winning but in times of crisis one can note that his masculine identity tends to fold. Thus he always makes sure that his body exudes confidence and it can

be noted that nothing stood in the way of his insatiable yearning for wealth. The way he dresses and walks emphasizes on the masculine identity. It is said, 'There was something compelling about his brisk, sure -footed step as he walked...' Connell (2005) deals with the relation between the male body and masculinity. In most cases, one can note that the masculine identity emphasised that a man should always be in control. He is able to use women as his objects in the form of Fiona Kanda who he manages to persuade to sleep with him at a lodge as payment for helping water down her disciplinary actions. With other women he corners them into carpet interviews for jobs and generally one can note that he tends to treat women as objects of his desire. He manages to lure Chiedza on like an experienced hunter but one can note that Chiedza held the thrills of an undefeated conquest for Michael and in the end she fails to see through his shattered images of the troubled self who is who not powerful enough to resist casual sex with strangers and Farrell (2012) redefines what power means by stating that power is the ability to control one's own life. He goes on to note that if we have the ability to control our own life, we have power. In this case Michael can be seen to be a powerless individual who has lost control his own destiny through the acquisition of material things and conquest of women's bodies. His definitions of his identity can be seen to have destabilised his identity to the extent that suicide is the only way he can accept his lack of power to drive his life after being pronounced HIV positive. Larkin et al. (2006) are of the opinion that young people tend to overlook the fact that unhealthy attitudes and behaviours on the part of males, as reflected by men in society affect both them and their female partners. It can be noted that Michael never changed his casual approach to life even when he was now an influential wealthy man. He continues to indulge in casual sexton the detriment of his future. In the end he ruins both of their future by unhealthy attitudes that sees him think that he is impervious to HIV and when it is confirmed he sees no way out because he does not want

to end up like his mother who died dependant on others because HIV had demobilised her body and taken way her power to drive her life.

True masculinity is always perceived as something which stems from men's bodies and that true masculinity is engraved in the male body or expresses something in regards to that body. This chapter has highlighted that society's formations of masculine and feminine identities has fuelled cases where women are at the receiving end and men have adopted toxic forms that have made them unable to deal with crisis situations. Men's fighting and winning spirit seems to desert then in times of crisis like HIV and one can note that formations of gender identities have been instrumental in creating these men whose ideas of what a man ought to be have been warped out of shape by HIV which demands that conceptions of how a man is supposed to behave should change accordingly. Men should map new forms of masculine identities that recognize the need to look before the leap, to be ever mindful and take all measures to protect themselves as well as their future. Women's identities, on the other hand, have been constructed from a subaltern position where men speak for them and label them. In the end women lack the voices that articulate stronger images of themselves. She is forever dancing to other people tune in this case she exposes herself to HIV because she lacks the drive and capacity to take control and revolt from her subordinate position creating spaces where it becomes easy for them to be infected with HIV through their partners.

CHAPTER 5: CONCLUSION

In summation, the study has established the link that exists between the body and HIV. It has been established that the body has, for a long time, been ignored and perceived as less important as it is easily seen as a vacuum without the mind which is more agentive. In times of pain and illness the body is, again, made more important and the individual engages in projects that are meant to fix and manage pain in the body. Bodies matter and as a result the analysis of Tendai Westerhof's narrative showed that there is life after being tested positive as she manages to control her body thereby indicating control of the virus in the process control of her life through religiously taking her ARVs, dieting staying healthy and exercises. The body is a central part especially in situations where illness has been discovered and the body is not at ease and has ceased to perform according to expectations. In cases where an individual has been diagnosed with HIV the individual engages in a lot of body projects that are meant to restore the body to its good condition. These body projects can be seen to aid in the body's struggle against HIV. However through these efforts the individual is also engaged in the reconfiguration of his or her identity in line with the ideal self. An ideal self in a context defined by HIV is a self who looks normal outside and there are no signs that the body is fighting a war with a virus. Rumbi seems to have achieved that ideal in that HIV can no longer be detected in her blood when tested but she regretfully notes that she has failed to save her marriage to Horst. She can be said to have successfully reconfigured her identity developing the ideal conception of the self in that the virus can no longer be detected in her body. Thus the body can now be managed but what remains to be managed are issues of destabilised identities.

Contagious bodies and destabilised identities was analysed in the text *The Haunted Trail*. It was established that society and the individual are all afraid of the contagious body and, in most cases, seeks to attach

negative meanings to the identity of the individual who has been infected. The discussion centred on the weak identities that were displayed by characters in the text through the analysis of Michael, Stella and Chiedza during the times that they had been diagnosed with HIV. It is argued that Michael's background as a rootless and fatherless loner who was running away from poverty were the causes of the factors that destabilised his identity leading to his decision to take his life when he was now facing the demise of his constructed and artificial powerful identity. He had been advised that every men fights alone by his mother and that the individual does only favours for itself thus in a context defined by HIV lonely figures often seek to end their life because it can be noted that HIV needs the support of the family members and society. When faced with the demise of his body and empire he fails to apply those principles that had made him a winner in life because they could not sustain his new identity as an HIV positive man. He fails to look beyond his present calamities and thus disaster stuck and he ends up being buried like a pauper just like his mother. It shows that he had more in common with her than he was able to discern. In running away from her he was unable to change the route of fate and destiny built and sustained by an unstable past that goes on to haunt or trouble his new found self later on in life. In the case of Stella she is also a strong woman who succumbed to HIV but she is not able to get the medication needed to save her life. Chiedza in times of the HIV crisis folds but it can be noted that her firm family background helps her achieve a stable identity even though she had to deal with the same stigma and discrimination that led to the demise of her fiancé. She is able to construct a new identity that is based on acceptance of her HIV status

Society's formations of masculine and feminine identities has fuelled cases where women are at the receiving end and men have adopted toxic forms that have made them unable to deal with crisis situations in times of HIV&AIDS. True masculinity is always perceived as

something which stems from men's bodies and that true masculinity is engraved in the male body. Men's fighting and winning spirit seems to desert then in times of crisis like HIV and one can note that formations of gender identities have been instrumental in creating these men whose ideas of what a man have been warped out of shape by HIV which demands that conceptions of how a man is supposed to behave should change accordingly in order for an individual to be safe. Men should map new forms of masculine identities that recognize the need to look before they leap, to abandon their dare-devil attitudes and to be ever mindful of dangers lurking in all places where they have been taught to exploit without regard. Men should take all measures to protect themselves as well as their future partners in the context where an HIV positive person could be anyone whose body looks healthy and even yourself. Women's identities, on the other hand, have been constructed from a subaltern position where men speak for them and label them. In the end women lack the voices that articulate stronger images of themselves. She is forever dancing to other people's tune in this case she exposes herself to HIV because she lacks the drive and capacity to take control and revolt from her subordinate position creating spaces where it becomes easy for them protect themselves from infections in the homes as wives and as girlfriends.

REFERENCES

- Acker, S. (1987). 'Feminist theory and the study of gender education' in *International review of education*, Vol. 33 no 9.
- Barnett T, Whiteside, A (2006). *AIDS in the Twenty-First Century: Disease and Globalisation*. 2nd Edition. Hampshire: Palgrave Macmillan.
- Bazili, S. (1991). *Putting women on the agenda*. Johannesburg, Rowan press.
- Beauvoir de S. (1949). *The Second Sex*, Harmondsworth, Penguin.
- Berger, L. (1972). *Ways of Seeing*. Harmondsworth: Penguin.
- Birke, L. (1992). 'In pursuit of difference: scientific studies of women and men', in G. Kirkup and L.S. Keller (eds), *Inventing Women, Science, Technology and Gender*. Cambridge: Polity Press.
- Boateng J. (2005). *Multiple meaning of manhood among boys in Ghana*. In: T Shefer, K Ratele, A Strebel, N Shabalala, R Buikema (Eds): *From Boys to Men: Social Constructions of Masculinity in Contemporary Society*. Lansdowne: UCT Press, pp. 50-74.
- Bourdieu, P. (1990a). *In Other Words: Essays towards a Reflexive Sociology*. Cambridge: Polity Press.
- Bourdieu, P. (1992). 'The purpose of reflexive sociology', in P. Bourdieu and L. Wacquant, *An Invitation to Reflexive Sociology*. Chicago: University of Chicago Press.
- Butler, J. (1990). *Gender Trouble: Feminism and the Subversion of Identity*, London: Routledge.
- Butler, J. (1993). *Bodies that Matter*, New York: Routledge.
- Butler, J. (1990). *Gender trouble: feminism and the subversion of identity*, New York: Routledge.
- Butler, J. (1993). *Bodies that matter*, New York: Routledge.
- Bryson, V. (1992). *Feminist political theory*. Basington, The MacMillan press.
- Campbell, David (1992). *Writing Security: United State Foreign Policy and the Politics of identity* (Minneapolis: University of Minnesota Press).

- Chapman, R & Rutherford, I. (eds) (1988). *Male Order: Unwrapping Masculinity*. London: Lawrence and Wishart.
- Chidavaenzi, P. (2006). *The haunted trail*, Longman Zimbabwe, Harare.
- Connell, R.W. (2005). *Masculinities*. Oxford: Polity Press.
- Connell, R. W. (1995). *Masculinities*. Sydney: Allen and Unwin.
- Chodorow, N. (1978). *The Reproduction of Mothering: Psychoanalysis and the Sociology of Gender*. Berkeley: University of California Press.
- De Beauvoir, S. (1974). *The Second Sex*. New York: Knopf, 1953; rpt. New York: Vintage Books.
- Dowd (2010). The Man Question- Male privilege and advantage
- Giddens, A. (2001). *Sociology*. Oxford, Polity Press.
- Durkheim, E. (1915). *The elementary forms of the religious life: a study in religious sociology*, translated by Swain, J., London: Allen and Unwin.
- Durkheim, E. (1964). *The division of labour in society*, New York: Free Press.
- Eagleton, M. (1997). *Feminist Literary Theory*. Oxford: Blackwell.
- Erikson, E. (1968). *Identity, youth and crisis*, New York: W.W. Norton.
- Emecheta, B. (2007). Feminism with a Small „f“! In Olaniyan, Tejumola and Ato Quayson (eds): 551 – 557.
- Featherstone, M. (2000). Post-bodies, ageing and virtual reality. In Bell, D. and
- Featherstone, M. (1995). *'Post-bodies, aging and virtual reality'*, London: Routledge.
- Featherstone, M. and Hepworth, M. (1991). *'The mask of ageing and the postmodern life course'*, in M. Featherstone, M., Hepworth and B.S. Turner (eds), *The Body: Social Process and Cultural Theory*. London: Sage.
- Featherstone, M. (1982). *'The body in consumer culture'*, *Theory, Culture and Society*, 1:18–33.
- Foucault, M. (1978). *The history of sexuality*, Vol. 1, New York: Vintage.
- Foucault, M. (1979). *Discipline and punish, the birth of the prison*, New York: Vintage.

- Foucault, M. (1980). *Power/knowledge: selected interviews and other writings*: 1972.
- Freund, P. (1982). *The Civilized Body: Social Domination, Control and Health*. Philadelphia, PA: Temple University Press.
- Freund, P. and McGuire, M. (1991). *Health, Illness and the Social Body*. Engelwood Cliffs, NJ:Prentice-Hal.
- Giddens, A. (1991). *Modernity and self-identity: self and society in the late modern age*, Oxford: Polity Press.
- Giddens, A. (1990). *The Consequences of Modernity*. Cambridge: Polity.
- Giddens, A. (1991). *Modernity and Self-Identity*. Cambridge: Polity.
- Goffman, E. (1968). *Stigma: Notes on the Management of Spoiled Identity*. Harmondsworth: Penguin.
- Hall, S. (1990). 'Cultural identity and diaspora', in J. Rutherford (ed.), *Identity*, London: Lawrence & Wishart.
- Hall, S. (1993). 'Cultural identity in question', in S. Hall, D. Held and T. McGrew (eds), *Modernity and its Futures*. Cambridge: Polity.
- Hall, S. (1995). 'Fantasy, identity, politics', in E. Carter, J. Donald and J. Squites (eds). *Cultural Remix: Theories of Politics and the Popular*, London: Lawrence & Wishart
- Haralambos, M. and Holborn, M. (2004). *Sociology; Themes and perspectives*. London, Harper and Collins.
- Henslin, J.M. (1999). *Sociology; down to earth approach*. Boston, Allen and Unwin.
- Holland, J. et al., (1998). *The Male in the Head: Young People, Heterosexuality and Power* the Tufnell Press, London.
- Hudson-Weems, C. (ed.), *Contemporary Africana Theory, Thought and Action: A Guide to Africana Studies* (Asmara: Africa World Press, 2007).
- Jackson, S. and Scott, S. (eds) (2002). *Gender: a sociological reader*, London: Routledge
- Kennedy, B.M. (eds), *The cybercultures reader*, London: Routledge.
- Keller, E. F. (1985) *Reflections on Gender and Science*. New Haven: Yale University Press.

- Larkin J, Andrews A, Mitchell C 2006. Guy talk: contesting masculinities in HIV prevention with Canadian youth. *Sex Education*, 6: 207-221.
- Leder, D. (1990). *The Absent Body*. Chicago: University of Chicago Press.
- Legal Age of Majority Act* (1982). Legal Resources Foundation, Harare.
- MacKinnon C. A (1989). *Towards a Feminist Theory of State*, Cambridge Mass, Harvard University Press.
- Makuchi, J. (1997). *Gender in African Women's Writing: Identity, Sexuality and Difference*. Bloomington and Indianapolis: Indiana University Press.
- Makombe, R. (2010). The Feminism of Buchi Emecheta's *Second Class Citizen: A Post-Colonial Reading*. Unpublished Seminar Paper. University of Fort Hare.
- Marcus, M. and Ducklin, A. (1998). *Success in sociology*. London, John Murray publishers.
- Meena, R. (1990). *Gender in southern Africa: conceptual and theoretical issues*. Harare, SAPES.
- Mead, G.H. (1934). *Mind, self and society*, Chicago: University of Chicago Press.
- Mercer, K. (1990). Welcome to the jungle. In Rutherford, J. (ed.), *Identity, community culture, difference*, London: Lawrence and Wishhart
- Menzis, K. (1982). *Sociological theory in use*. London, Routledge and Kegan Paul.
- Merchant. (1995). *Earth care; women and the environment*. New York, Routledge.
- Miller, D. (1997). Consumption and its consequences. In Mackay, H. (ed.), *Consumption and everyday life*, London: Sage.
- Momsen, J.H. (1998). *Gender roles in Caribbean agricultural labour*. Basingtoke, MacMillan.
- Momsen, J.H. (2004). *Gender and development*. London, Routledge.

- Morse, S. and Stocking. (1995). *People and the environment*. London, University college press.
- McFadden, I. (1982). *Southern Africa in transition; a gendered perspective*
- Ncube, W., Steward, J.E., Dengu-Ndlovu-Gatsheni, S.J. (2003). 'Patriarchy and domestication of women in Zimbabwe; critique of female to female relations of oppression' in *Zambezia* Vol. 30. No.II.
- Nfah-Abbenyi, J., M. (1997). *Gender in African Women's Writing: Identity, Sexuality and Difference*. Bloomington and Indianapolis: Indiana University Press.
- Njiro, E.I. (1999). 'Women's empowerment and the anthropology of participatory development'. *The feminization of the development process in Africa. Westport, Connecticut*; 31-50.
- Ortner, S. B. (1978). 'The Virgin and the State.' *Feminist Studies*, vol. 4, no. 3 (Oct. 1978)
- Peacock D.M.S.W, Stemple L.J.D, Sawirwes, S.M.A, Coates T.J (2009). Men, HIV and Human Rights. *Journal of Acquired Immune Deficiency Syndromes*, 51(3): 119-125.
- Pilcher, J. and Wheleham, I. (2004). *Fifty key concepts in gender studies*. London, SAGE Publishers.
- Sanderson, S.K. (1998). *Macrosociology; an introduction to human societies*. New-York, Harper and Row publishers.
- Rose, N. (1996). *Identity, genealogy, wishing*. In Hall, S. and du Gay, P. (eds), *Questions of cultural identity*, London: Sage.
- Rose, J. (1986) *Sexuality in the Field of Vision*, London: Verso.
- Sandi, A.M. (1997). 'Preparing a new history for future generations' in *Beyond literacy; Preparing gender equity for future generation*, Bucharest, School of education.
- Sathiparsad R, Taylor, M. (2006). 'Diseases come from girls': Perspectives of male learners in rural KwaZulu- Natal on HIV infection and AIDS. *Journal of Education*, 38: 117-137.
- Sánchez-Arce, A.M (2014). *Identity and form in contemporary literature* Taylor & Francis Group, Routledge. UK.

- Sathiparsad, R. (2007). Masculinities in the era of HIV/ AIDS: the perspectives of rural male Zulu youth. In: T Shefer, K Ratele, A Strebel, Shabalala, N, R Buikema (Eds.): *From Boys to Men: Social Construc-tions of Masculinity in Contemporary Society*. Lansdowne: UCT Press, pp. 181-194.
- Shefer T (2003). *Heterosexuality*. In: K Ratele, N Duncan (Eds): *Social Psychology: Identities and Relationships*. Lansdowne: UCT Press, pp. 289 – 302.
- Silberschmidt, M. (2004) Masculinities, Sexuality and Socio-Economic Change in Rural and Urban East Africa. In: ed Arnfred, Signe. *Re-thinking Sexualities in Africa*. Uppsala: Nordiska Afrikainstitutet.
- Shilling, C. (2003). *The Body and Social Theory*, 2nd (edn). London: Sage.
- Shilling, C. (1997). *The body and difference*. In Woodward, K. (ed.), *Identity and difference*, London: Sage.
- Sontag, S. (1979). *Illness as a Metaphor*. New York: Vintage.
- Tseelon, E. (1995). *The Masque of Femininity*. London: Sage
- Tseelon, E. (1 992). 'Is the presented self-sincere) Goffman, *impression management and thePostmodern self*, *Theory, Culture and Society*, 9: 1 1 5-28.
- Vara-Diaz *et, al.*, (2005). Stigma, Discrimination and Living with HIV/AIDS: A Cross-Cultural Perspective on Porto-Ricans living with HIV.
- Wittig, M. (1982). 'The category of sex', *Feminist Issues*, Fall. 63-8.
- Wittig, M. (1992). *The Straight Mind and Other Essays*. Boston, MA: Beacon Press
- UNAIDS (1999). *Gender and HIV/AIDS: Taking stock of research and programmes*.
- UNAIDS (2001). *Gender and AIDS Almanac*. UNAIDS and Sociometrics Corporation
- UNAIDS (2004). *Women and HIV/AIDS: Confronting the crisis*.

Woodward, K. (2002). *Questions of identity*, London: Routledge.

Zvobgo, K.C., Donzwa, B.R., Gwaunza, E.G., Kazembe, J.L. & Nzira, T.G.
(1997) *Paradigm of exclusion: women's access to resources in Zimbabwe*. Harare, WLSA research institute.

Synopsis

Writers tend to concentrate more on the disease and the soul or spirit, and in so doing, often ignoring the body; yet, it is an important site for further analysis in cases of the HIV&AIDS scourge. The body is the primary signifier of a person's identity and in its struggle with the virus it is tormented, ravaged and always under constant attack. It is the body that an individual tries to salvage in order to save his identity and sanity in the face of the scourge. The research aims at taking a closer look at the nexus between the virus, identity and the body in the two texts *The Haunted Trail* by Phillip Chidavaenzi and *Unlucky in love* by Tendai Westerhoff.

About the Author



Judith Chokumanyara is an accomplished academic, researcher, and lecturer specializing in African and diaspora literature, English, and Communication. She holds a Master's degree in African and Diaspora Literature (Midlands State University), a Bachelor of Arts degree in English and Communication (Midlands State University), and a Post Graduate Diploma in Education, Zimbabwe Open University (ZOU). Currently serving as a Lecturer at Marondera University of Agricultural Science and Technology (MUAST) Department of Teaching and Learning, Judith is dedicated to fostering critical thinking and scholarly engagement among her students. Her teaching spans literature, communication studies, and interdisciplinary approaches that bridge the humanities with broader socio-cultural discourses. Her research interests focus on gender studies, language acquisition, communication, and exploring how narratives,

media, and linguistic practices shape identity, power dynamics, and social transformation in African and diasporic contexts. She is particularly interested in the intersections of literature, feminist theory, and postcolonial discourse, contributing to ongoing academic conversations on representation and equity. Committed to both pedagogy and research, Judith Chokumanyara continues to inspire students and peers through her intellectual rigor and passion for advancing knowledge in her fields of expertise. Her work underscores the importance of inclusive scholarship that amplifies marginalized voices and reimagines traditional literary and communicative frameworks. Beyond academia, she engages in mentorship and community initiatives that promote literacy, gender awareness, and effective communication as tools for empowerment.