



## THE PLACE OF INDIGENOUS LANGUAGES IN THE FIGHT AGAINST HIV/AIDS

BY

**OBIOMA BIBIAN ENWERE**

Dept. of Igbo Language  
Nasarawa State College of Education Akwanga  
E-mail: enwerecores@gmail.com

### ***Abstract***

***There is no doubt that language and information dissemination is directly related.***

*It has been argued that learning is much more facilitated through the Mother-tongue of an individual. In like manner, social messages/reproductive health information /reports, including messages to prevent or combat the spread of HIV/AIDS can best be passed across through a medium of the language which one understands better; in this case, the Indigenous language (or the mother tongue of an individual). This is because communication between a counselor /health worker and a counselee/patient is made more effective when it is passed uninterrupted by a third party or intermediary or an interpreter, who may not be able to interpret the psychological state of the patient or counselee. In a communication carried out via an indigenous language, confidentiality is preserved thereby giving the HIV-positive or an AIDS patient the opportunity of effective interaction between him and the counselor or health worker. An effective means of communication is the one that ensures one-to-one interaction; hence messages aimed at educating people on health issues are best put in a language that the patient understands better. This paper is then out to highlight the role of indigenous languages in communicating health messages especially as it regards educating the rural populace, who are largely illiterate in English but literate in their indigenous languages, on the activities that expose them to HIV/AIDS infection, taking into cognizance the fact that HIV/AIDS is prevalent in the rural areas. The advantages of using the indigenous languages in effecting behavioral change are highlighted. Also the problems facing the indigenous languages in their use to fight HIV/AIDS are spotlighted. Suggestions as to improve the indigenous languages to make them more effective for social communications are proffered. The work advanced a comprehensive conclusion.*

**Keywords:** The role of language in fight against the menace HIV/AIDS, Problem of the indigenous languages in the fight against HIV/AIDS, Method of using indigenous languages in combating HIV/AIDS.

## **INTRODUCTION**

The world has been remarkably advancing in science and technology since after the world war second. The field of medicine is not left out in this advancement and development to match up with challenges of the 20th and 21st centuries. Despite the tremendous records of growth in science and technology humanity is still being faced with challenges, especially in the area of health among which is the scourge of HIV/AIDS since the last lap of the 20th century.

Recent reports have it that about 1.7 billion youths are infected globally, and out of this 5.4 million are Nigerian youths. (African Journal of Reproductive Health AJRH 2012)

In the same vein, scientists and technologists have been striving hard to find a solution through several research efforts. Meanwhile, such advancements and break-through in science/technology and in the field of medicine can only be passed across via language and communication. For this reason, there is a need also for advancements in communication technology, and a choice of which language to use for passing the information etc.

Language, communication and education are in direct relationship with information dissemination concerning any issue at all. Language of course is the instrument of passing across these developments and advancements in the fields of science and technology. But unfortunately most of these latest developments are being carried out through only some of the languages of the advanced nations like English, French, Portuguese, German, etc., while the African languages have not featured in any prominent position in transmitting information on scientific/technological and medical findings, and not on the issues of reproductive health.

Wood (1997) cited in Aborisade (2004.2) contends, "Increasingly the language of publication (in the field) is English, adding further that the position of English in some fields is even more stark. The major journals in practically all disciplines are in English. "

Language is a veritable tool for effective information dissemination and education. It is intricately and intimately linked with the process of education whether formal or informal and at all levels. Communication in this work will be referring to behavioural change through communication and information on reproductive health and the use of language/communication in the fight against HIV/AIDS in Africa and Nigeria in particular, while education will refer to enlightenment through language for behavioural change in matters of health as it concerns awareness about HIV/AIDS transmission and 'cure'.

## **HIV/AIDS Explained: It's Prevalence and Pandemic Nature in the Sub-Saharan Africa**

HIV refers to Human Immunodeficiency Virus – This attacks the body's immune system and makes difficult to fight diseases, bacteria, virus and infections, leading to a breakdown of the immune system of the victim and subsequently leads to many other opportunistic conditions which eventually leads to the Acquired Immune Deficiency Syndrome (AIDS) and eventually death. AIDS on the other hand, is the Acquired Immune Deficiency

Syndrome - a clinical syndrome (a group of various illnesses that together characterize a disease) resulting from damage to the immune system caused by infection with the Human Immunodeficiency Virus (HIV). (Microsoft Suite 2003.14).

HIV/AIDS have been a global challenge to both the developed and developing nations, posing economic and political problems. HIV/AIDS pandemic has resulted into illnesses and deaths of a large number of adults in the prime of their age, leaving many young children orphans. For instance World Bank report (2011) says "HIV has caused immense human suffering in the continent. The most obvious effect has been illness and death, but the impact has not been confined to the health sector; households, schools, workplaces and economies have been badly affected."

HIV/AIDS is a major public health concern and cause of death in many parts of Africa.

Although the continent is home to about 15.2 percent of the world's population, Sub-Saharan Africa alone accounted for an estimated 70 percent of all people living with HIV and 70 percent of all AIDS death in 2011 (World Bank Report).

According to 2013 special report issued by the Joint United Nations Programme on HIV/AIDS (UNAIDS), the number of HIV positive people in Africa receiving anti-retroviral treatment in 2012 was over seven times the number receiving treatment in 2005, "with nearly 1 million added in the last year alone. The number of AIDS-related deaths in Sub-Saharan Africa in 2011 was 33 percent less than the number of new HIV infections in Sub-Saharan Africa in 2011 was 25 percent less than the number in 2001.

Microsoft Encarta Dictionary (1993 - 2003), reports that over 25 million people are estimated to have died from AIDS worldwide by the end of year 2002. At that time, 29.4 million individuals in sub-Saharan Africa were estimated to be living with HIV/AIDS, representing 8.8 percent of all adults of the estimated 5 million people who acquired new HIV infection during 2002, 3-5 million lived in Sub-Saharan Africa, and over 75 percent of 3.1 million adults and children who died due to AIDS during 2002 also lived in Sub-Saharan Africa. In four Sub-Saharan African countries of Botswana, Lesotho, and Swaziland, more than 30 percent of the adult population is now infected.

By the last decade, a total of about 25 million people were estimated to have died from AIDS since the start of the pandemic. What a figure! What a pandemic! "Since the early 1980s when it was first reported it has been a major cause of death in both the industrialized world and the developing nations including Sub-Saharan Africa, which has recorded the largest number of deaths ever among children under age 5" (Medicine Today Vol. 1 No. 2 1991).

Lamenting about South Africa, (Time February 2001:40), comments, "even as you read this, AIDS is taking lives in Sub-Saharan Africa, swallowing families, communities, hopes, adding." "An intimate look at a modern curse"

"In Sub-Saharan Africa, people with HIV-related diseases occupy more than half of all hospital beds.... Large numbers of healthcare professionals are being directly affected.... Botswana, for example, lost 17 percent of its healthcare workforce due to AIDS between 1999 and 2005. "The report adds, "the toll of HIV and AIDS on households can be very severe. It is often the poorest sectors of society that are most vulnerable. In many cases AIDS causes the household to dissolve, as parents die and children are sent to relatives for care and upbringing, much happened before this dissolution takes place: AIDS strips families of their assets and income earners, further impoverishing the poor". (World Bank 2011 Reports)

Nigeria the most populous country in Sub-Saharan Africa is not left out, with an estimation of over 6 million being positive with HIV/AIDS, with Benue State topping the list with 600,000 persons currently living with the virus. (247 UREPORTS 2012)

African Journal of Medical Science September (2010:233-9), notes Nigeria as “the home to the third largest number of persons living with HIV/AIDS”. It is no news that HIV/AIDS remains one of the most burdensome diseases in the world today.

Commenting on the menace of the scourge of HIV/AIDS on the global youth population, Prof. John Idoko, Director General National Agency for the Control of AIDS (NACA) in Nigeria, in (AJRH 2012), notes, out of the 1.7 billion global youth population living with HIV/AIDS, 5.4 million are living in Nigeria. According to him, “in Nigeria 40% of persons living with HIV are young persons and majority between the ages of 15 and 30”, adding, that “about 70,000 persons get infected with the HIV on a yearly basis”. The high risk factor according to him include:-

**“Early sexual initiation, heterosexual (biological vulnerability, inequality in relationships, sex with older men); men who have sex with men, sexually transmitted infections, alcohol, tobacco, and drugs; lack of awareness; and population effect/family level vulnerability”.**

Recently in a keynote address, the DG (NACA) in Nigeria, Prof. Idoko, laments the vulnerability of Nigerian youths to HIV/AIDS, noting in particular that young women of the age brackets of 15-24 tops all other groups living with HIV/AIDS.

Notes the (AJRH 2012), in Nigeria, the HIV prevalence rate among adults age 15-49 is 3.9 percent revealing that Nigeria has the third largest number of people living with HIV in the Sub-Saharan Africa.

### **The Role of Language in Fight against the menace of HIV/AIDS**

There is an urgent need for education and social communication. This work is an attempt to assess the place of indigenous languages (in Nigeria) and Africa as a whole in combating HIV/AIDS. It is meant to highlight the use of the Indigenous languages in communicating health information and practices that could help reduce the HIV/AIDS pandemic. It is also aimed at using the indigenous languages in educating the masses (especially the illiterate) on health practices and attitudes that can curb the spread of HIV/AIDS and enhance the lives of HIV positive victims, care and attitudes towards AIDS patients, information on retroviral drugs, etc. It is also meant to step up behavioral change through the appropriate use of language.

This is because according to the World Bank report (2011), “as access to treatment is slowly expanded throughout the continent, millions are being extended and hope is being given to people who previously had none. Unfortunately though, the majority of people in need of treatment are still not receiving it, and campaigns to prevent new infections are lacking many areas”

Language and appropriate information dissemination medium are important to drive home the UN's message and goals of “zero new infections, zero stigmas, discrimination and zero HIV related deaths”, through some strategic directions which according to the D.G NACA (2012) include:

(1). Revolutionizing HIV prevention

- (2). Advancement of Human Rights and Gender equality, and
- (3). Catalising the next phase of treatment, care and support. The work also highlights the problems facing the indigenous languages as a tool for carrying out the onerous task, in the face of lack of a body of literature, on some of these languages, difficulties in translating and transmitting scientific texts, etc.

### **Indigenous Languages in Education and Communicating Reproductive Health Issues.**

Language is intricately and intimately linked with the process of education - formal or informal and at all levels. Education on the other hand involves the socialization, integration and development of individuals' skills and intellect, for national survival, growth and development.

Communicating/reporting reproductive health has to do with passing information on health practices/issues, furnishing the people with new developments in issues of health and preventive medicine, through sensitization and enlightenment campaigns. The role of language in education and health campaigns cannot be over-emphasized, as effective communication is a product of well-packaged information through language. That is to say, language use is paramount to the kind of reaction to be produced. The use of the indigenous languages (African languages) in the fight against HIV/AIDS has much more to do with the use of appropriate language (of the immediate environment) for effective communication, and for communication to be effective it must have to produce result or must have produced result between the encoder and the decoder.

Speaking about the language of scientific discoveries into which the field of medicine falls, you talk about English. Most of the terminologies and publications in medicine appear in English.

The instrumentality of the indigenous languages as a medium of instruction has been eroded by many factors including contact with English language which has taken an advantage of it as a means of bridging communication gap in a multi-lingual and multi-ethnic settings which has been the bane of most of the African countries; and as such it has been used as the language of wider communication to enhance communication.

Yet the role of the language used as a medium of instruction in the Educational process and awareness campaign programs on HIV/AIDS depends (among other things) on whether effective communication has taken place between the health workers/agencies organizing such campaigns and the target audience or not. Thus education/campaign by any appropriate language medium provides knowledge, skills, values and information needed for effective behavioral change.

Emenanjo (1988 p.3) in that regard comments no two languages are ever sufficiently similar to be considered as representing the same social reality all learning is more meaningful, more effective and more creative when conducted in the mother tongue".

Effective information dissemination via the appropriate language is inevitable in the fight against HIV/AIDS in Africa, more so, when most of the inhabitants are rural dwellers and majority illiterate (in English). But the appropriate language for driving home the message of HIV/AIDS and some other health and reproductive health issues have been difficult to come by.

Laments a Pretoria University's Mary Crewe (Time February 12, 2001), "We have no language to talk about sex", adding, "We have no civil language about AIDS."

The risk factors contributing to the spread of HIV, including "prostitution high-risk practices among itinerant workers, high prevalence of sexually transmitted infections (STD) clandestine high-risk heterosexual and homosexual practices, international trafficking of women, and irregular blood screening", (AJRH 2012), need to be communicated through appropriate language. As the scourge of AIDS continues to rage through all Africa, people continue to perish in ignorance for lack of adequate information and communication in an appropriate language and inadequate information on HIV/AIDS based on the language which the cross-section of the mostly affected understand. Also issues on sexuality can be only effectively conveyed through the indigenous languages. To this end, flyers, pamphlets, workshops and meetings written or organized in the indigenous languages to reach the masses that are largely illiterate and dwelling mostly in the rural areas, with less information and education on health issues and sexuality.

Notes the Daily Sun (June 2, 2004):

***"Police and 'okada' riders top the HIV/AIDS carriers in Nigeria. No doubt, this is an area you find most illiterates and semi-literates being self-employed, and due to the nature of their jobs are exposed to unprotected sex which is the root cause of HIV infection, as they patronize the 'corners and joints to find succour after a day's hard work. The military and those on essential duties like long-distant driving which take some men outside their matrimonial homes for days/weeks, stand the greatest risk of contracting HIV infection".***

Sex education in the languages can be carried out using deejays and musical artists who compose music songs in the local languages.

Uganda used this method and was able to achieve appreciable result that is said to have kept down HIV/AIDS spread in the country (Newsweek July 17, 2000), the method of communicating HIV/AIDS messages through musicals in the languages was also used to change behavior in America and Europe.

Musicals on the indigenous languages from both the old and the young musicians in and around Africa, who are cherished by their fans as their icons can go all long way as a means of education to change behaviour and attitude.

According to the South African-born and world acclaimed musician, Miriam Makeba, (Time Magazine February 12, 2001), "The goal is to have each artist say a message in his mother-tongue. These messages and parts of the performance will be broadcast on radio and television all over Africa".

There is no doubt that education is more effective and more convincing in the mother tongue of an individual, hence the UNESCO 1953 Conference of Specialists emphasized the need for mother-tongue education or the language of the immediate environment as a medium of instruction for enhancing cognitive learning, scientific and technological development. India, China, Japan and of course, the former Soviet Union before the break up of Communism, have achieved remarkable scientific and technological feats through their indigenous languages (Ikara 1987:30). There is no doubting the fact that well-articulated messages in the indigenous languages will produce a better effect on the majority of the African populace who are rural dwellers, struggling to conquer hunger and poverty.

Towards the use of the indigenous languages for combating HIV/AIDS, effort should be

made to raise the standard and status of the languages against their counterparts in the advanced and industrialized nations, which have already made their marks on science and technology and medical terminologies and vocabularies.

### **Problems of the Indigenous Languages in the Fight against HIV/AIDS.**

In spite of the benefits accruing to the use of the African indigenous languages in combating HIV/AIDS, the languages are still facing a lot of handicaps to contend with. Apart from the age - long history of colonization and contact with English, French or Portuguese, which have seemed to subsume the African languages into the European languages. Most of the African languages are still grappling with the peculiar problems of status, standard and underdevelopment, to match with the alarming growth of scientific and technological discoveries and inventions in which they are deficient. English as in the case of Nigeria has become the lingua franca – the language of administration, law and politics, and the day-to-day running of government. In fact, it has been seen as a 'prestige' language and a gateway to public enterprises and economic attainment. This has only left a negative attitude on the part of the Nigerians towards the indigenous languages. To this end, policies that are meant to favour and uplift the Nigerian languages are treated with levity and in most cases relegated to the background. In Africa generally, Essien (1993:6) laments this situation;

*“For if African languages are not used as languages in which the business of government is conducted, if they are not languages of education, in particular, higher education, there simply will be no incentive on the part of the African populace to study them, for one wants to study a language that will give one access to a job, economic power, political influence and social acceptability”.*

Besides, most of the African countries have a linguistic history of multilingualism and multi-ethnicity and at the same time deficient in enough vocabulary, conditions which have made the Education Research and Development Council (NERDC) and the Nigerian Language Centre (NLC) to embark on the research and the publishing of the meta-languages of some of the major Nigerian languages and some of the minority languages, and I guess those of the other major Nigerian languages, if they have been published, might not have been earlier than 1980s and 1990s. The meta-languages have also been deficient and inadequate in their coverage, which has catered only for linguistic terms, political and government terminologies, while the major areas of science/technology and medicine are yet to be tackled. Similarly, most of the Nigerian languages lack (as has already been mentioned) standard and reliable dictionaries as most of what are in use today are only mere compilations by the 'colonial missionary linguists', whose work through informants might have been outdated and may not compare with a work done by a native-speaker linguist, who has a first-hand information on his language. Apart from the above, the teaching of the linguistics of most of these Nigerian languages in the universities is still done in English language for lack of appropriate registers and meta-languages for the teaching of the linguistics of these Nigerian languages. This could be termed 'one step forward and two steps backwards', as far as trying to develop the indigenous languages is concerned. In the same vein, translating and transcribing scientific texts into most of the indigenous languages with no standard orthography and standardization systems have left effective communication in the indigenous languages as it concerns the fight against HIV/AIDS on

the cross roads, as HIV/AIDS terminologies have not been able to be domesticated into the indigenous languages systems. This leaves health workers on HIV/AIDS with difficulties in passing across certain information on the subject of HIV/AIDS, on methods of transmission, stages of incubation and the tell-tale signs to be observed in HIV/AIDS infections. This of course creates communication barrier between health workers/counselors and HIV/AIDS carriers/patients. Confidentiality might be lost when an interpreter or a go-between has to be employed to decode information between health workers and the local communities. Vital information may also be lost on transit. Illiteracy and poverty also affect attitude and education on HIV/AIDS. Affection/detection, "especially in the developing countries where constraint to HIV tests and case reporting is particularly acute" (Medicine Today 1991). Effective communication is therefore achieved when the right language is employed to produce the right response/attitude from a target audience.

### **Methodology of Using the Indigenous Languages in Combating HIV/AIDS.**

Language is a necessary vehicle for communication and that is the major tool to be used to address issues concerning the scourge of HIV/AIDS in Africa. Preventive activity which is the most important tool in combating or reducing HIV/AIDS scourge can be communicated in the mother-tongue or a language most understood by the masses and the victims. For easy communication and effective preventive strategies on AIDS prevention and health practices, information should be in the indigenous languages. This has (as mentioned earlier), worked in Uganda, U.S and Europe to reduce AIDS spread. Using testimonial adverts on radio and television in the languages of the victims/AIDS activists (who are either carriers or patients of HIV/AIDS, to convince the masses about the dangers of HIV/AIDS, will go along way to convince 'die-hard unbelievers' about the existence and dangers of HIV/AIDS. This also worked in Uganda in 1993, when a former rebel fighter and army officer Major Rubara Mira Ruranga, publicly declares his HIV-status at a rally on world AIDS Day. He did not stop at that, he set up a network for those living with HIV/AIDS in Uganda, and says he, "so that people had somewhere to go to talk to friends" (Time Magazine Feb 12, 2001:54). Fans of musical artists, musicians, and artists hold their favorite artists as icons, so these deejays, musicians and artists performing in the indigenous languages, can drive home faster the message of HIV/AIDS.

Miriam Makeba once did that in South Africa (Newsweek July, 2001). Pamphlets, billboards, leaflets published in the indigenous languages and also workshops, are right steps to create awareness and raise campaigns against HIV/AIDS infection and sex education. Some of such billboard adverts exist in Hausa language in Nigeria used by USAIDS to drive home the message of condom use in preventing communicable diseases and family planning. HIV prevention policies should be translated into the indigenous languages and action plans to address the needs of people living with HIV/AIDS (where they come together to share experiences in a more intimate form) as the case in Uganda, (Op. cit.), should be organized from time to time. Simple health practices should be translated into the local language for the consumption of the general populace on issues of HIV/AIDS and general health matters. Health practices for HIV/AIDS victims and activities should be communicated in a more effective language - the mother tongue as the case may be. Also, food and nutritional habits should be produced in the local languages for both the public and

the victims of HIV/AIDS. Generally, basic information about HIV/AIDS is much more effectively transmitted through the indigenous languages. Since language and education work hand-in-hand, language and education are therefore needed by both the HIV/AIDS victims and the general public on information about safety application of the spread and prevention of HIV/AIDS in the society, thus the risk behaviours that expose people to HIV infection, care for the victims and interaction with them in order not to make them a carrier, thereby alleviating their psychological trauma. This information must be put in the appropriate language to ease understanding.

### **Conclusion**

The work has carried us through the basic definitions and explanations about language, its functions, HIV/AIDS, and the place of language in combating HIV/AIDS in Africa. From such detour, it is obvious that language as a source of information dissemination is relevant at every level of combating the HIV/AIDS scourge. Effective language education produces behavioural change that put people on the right pedestal to rise above the ugly monster ravaging the very basis of the Sub-Saharan African nations.

## References

- African Journal of Reproductive Health (AJRH)*, 2012) Special Edition.
- Bamgbose A (Ed),(1976). *Mother tongue education: The West African Experience* London. Hodder and Stoughton Educational.
- Aborishade P.A (2004) "*English in science and technology: Challenges for Nigerian Language Education*" A paper presented at the 11<sup>th</sup> Biennial Conference of the Modern Languages Association of Nigeria.
- Calvet L. I(1998) *Language wars and linguistic politics*. New York: Oxford University Press.
- Crystal D. (1997). *English as a global language*. Cambridge University Press.
- Crystal D. (2000). *Language death*. Cambridge University Press.
- Daily Sun*, (April 20, 2004) HIV and AIDS Solution and way forwards.
- Daily Sun*, (June 2, 2004) Preventive majors and role of education.
- Egbokhare F. O, (2004). *Language and contemporary issues in Nigeria's development: A lead paper at the 24<sup>th</sup> Conference of WALC*
- Emenanjo E.N, (1988) *Linguistics, Language and the Nation*. Port-Harcourt University of Port Harcourt Press.
- Emenanjo E.N, (1988) "*Nigerian language studies in Nigerian tertiary institutions. The Past, The Present and the Future*" In Nigerian language studies (A Journal of NINLAN No.1 1993).
- Emenanjo E. N,(1994) *Beyond rhetoric: From theory to practice in teaching Nigerian languages in Nigerian as second languages*" In: Nigerian languages studies (A Journal of NINLAN No. 2)
- Emenanjo E.N and Bleambo (1999). *Language endangerment and empowerment in Nigeria*. Aba: Unique Press Ltd.
- Essien O. (1993). *On enhancing the status of Nigerian languages In: Nigerian language studies (A Journal of NINLAN No.1)*
- Essien O. (2004). *Literacy in the mother tongue: A case study of the problems of the linguistic minorities in Nigeria (A Lead Paper at 11<sup>th</sup> Biennial Conference of Modern Languages Association of Nigeria)* Igbo meta language (Okaasusu Igbo) Vol. 1 (1990) Ibadan University Press.
- Ikara B. (1987). *Minority languages and Lingua Franca in Nigeria*. (A Keynote Address at 7th Annual Conference of the Linguistics Association of Nigeria). *Medicine Today (A Journal of diagnosis, treatment and prevention (Vol.1.1 No. 2 1991).*
- Newsweek Magazine July, 2000 STOP AIDS International vol.1 No.3. 1997
- UREPORT (2012) [http://247ureports.com/highest-HIV/AIDs-infected-state-in-Nigeria-ben-African-Journal-of-Reproductive-Health-2012\(Special-Edition\)](http://247ureports.com/highest-HIV/AIDs-infected-state-in-Nigeria-ben-African-Journal-of-Reproductive-Health-2012(Special-Edition))