

Social Relations in the Understanding of Physical Events among the Eastern Korekore

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Durkheim and Mauss (1901-2) were the first seriously to consider how the structure of society can influence the way in which people understand the physical world, but they considered the classification of objects rather than the explanation of events. More recently Horton has suggested that in African traditional thought the explanatory models of religious beliefs come from the prototype of human society (1964, 99), and has claimed that to traditional Africans 'the human scene is the locus *par excellence* of order, predictability, regularity' (1967, 65). That there is some relationship between the social structure and the understanding of events, particularly of misfortune, is shown in the changing patterns of explanations found among urban Africans (see Mitchell, 1965; Hammond-Tooke, 1970). Horton went on to emphasise the role of beliefs in spirits in providing explanatory theory, an emphasis which detracts from the direct relationship between the observed state of social relations and the understanding of physical events.

This paper examines the relationship between the social order and the understanding of certain physical events among the Eastern Korekore, a Shona-speaking community in the extreme north-east corner of Rhodesia between the Mozambique border and the Mazoe river. The paper concerns beliefs about and reactions to sickness and death, and attempts to analyse how the Korekore explain and understand these.

The topic is a matter of convenience—reactions to sickness and death are to some extent ritualized and are easy to observe — but it should be noticed that while these physical events have considerable social significance, one should beware of applying the analysis to the Korekore understanding of all physical events.

ILLUSTRATIVE CASE HISTORY

I shall focus my analysis on the illness and death of a young man (No. 17 in the genealogy). He was the youngest son of his parents, about twenty years old when he died, unmarried and still living at the home of his parents. The family was poor with no source of cash income at the time in question. There were then eleven residents at the homestead: the parents, four sons (13, 14, 15, 17), two daughters-in-law and three grandchildren (20, 21, 23).

The father closely associated with his late *sekuru* (5) (in this context, classificatory mother's brother), his mother's brother's son, who in life had a good source of monetary income. This *sekuru* invited the family to live near his home and helped to finance one of the marriages of the youngest living son (15). At the former's death, his eldest son (9), the present *sekuru*, who had a smaller and dwindling source of monetary income, continued this association and the family in question moved to within fifty yards of

the *sekuru's* homestead. The boys of the family helped their *sekuru* by herding his cattle and doing other chores. He in turn kept a daughter of the eldest son (19) and often provided food for the boys.*

The numerous moves of the homestead site are of interest. About 1956, at the death of the father's father (3), the family moved at the suggestion of the late *sekuru* about five miles to within a mile of the latter's homestead in order to be near some relatives. A couple of years later they lost a twenty-year-old son (16) and moved to a site about three miles away on the other side of the *sekuru's* homestead: they did not consult a diviner about the cause of the death but they do hold that such deaths are always due to witchcraft*. They did not build huts at the new site and within a year moved a mile for no ostensible reason to a suitable place which they inhabited for about six years. They moved again at the death of the father's mother (2) in 1966 to within a mile of the late *sekuru* where they were living with the families of the father's younger brother (8) and of the eldest son (12). At the new site, the father's younger brother lost four children (18) and the son lost one child (22), after which they moved in 1968 to their present hamlet next to their *sekuru's* homestead. In a dozen years, the family moved five times, and four of these moves were occasioned by death in the family.

We come now to the sickness and death of the youngest son (17). In March of one year, he had sores that went septic and would not heal. The family consulted a man with a healing spirit who gave him some medicines and divined that the illness was caused by the *sekuru's* sister (10) who was bewitching him

because her brother, the *sekuru*, was paying too much attention to the family in question and not enough to herself and her children. Her brother was maintaining the kinship relationships he had inherited from his father to the neglect of his personal relationships. The sores still failed to heal and the young man went to the nearby mission hospital where he was treated for three weeks. This state of affairs lasted until October, with one of the wounds re-opening and finally healing at the mission. About this time the young man started complaining of severe headaches, and when the remedy of certain roots and leaves known to his father had no effect he asked for European medicines. In November, after a severe dose of what appeared to be influenza, he consulted a diviner to find out who had caused the illness, it being supposed that his mother's late mother (1) was troubling the family. Divination again pointed to bewitchment by the *sekuru's* sister.

Early in December, he was again very ill with severe headaches and general weakness and went to consult a local woman known to have a healing spirit. She claimed that the illness was due to a very bad spirit, the spirit of a person who died very long ago and not at rest. The spirit was in his blood and her healing spirit would need £1 to drive it away (the usual fee being 7s. 6d.). The family raised the money and were told that they would have to find a black chicken into which to transfer the evil spirit before driving it into the bush. Although they found the chicken, the members of the family claim that she later said that she could not cure the sick man, whereas she claimed that they changed their minds and did not go for treatment. In either case, the traditional cure was not carried out and the sick man went instead to the mission hospital some twenty miles away. There his condition improved spontaneously and he left after two days: according to the hospital records he simply had his ears cleaned. He was again very ill and returned to the hospital ten days later where, after rallying strongly, he died suddenly early in January.

Before he died the accused sister stayed some days with her brother, the *sekuru*. She openly stated her grievances saying that her brother was caring for and feeding the family of their late father's *muzukuru* (in this context, classificatory sister's son) whereas she wanted

*The late *sekuru* is in fact the late chief and his son is the acting chief. The close association between the families of a man and his *sekuru* is not uncommon in the area although the financial aspect varies with the finances of the parties concerned.

*Although a case can be made for the classical distinction between witchcraft and sorcery (cf. Evans-Pritchard, 1937, 21, 387) in Korekore thought, the Korekore use one word (*huroyi*) for both and the distinction is somewhat vague. For the purposes of this paper the distinction is not useful and I use 'witchcraft' in a broad sense that does not exclude sorcery.

her own children to stay with her brother. Before she left for her own home some ten miles away, she said that she would not return until she had heard of a death in the family concerned — a remark regarded as an open threat of bewitchment. Although on that day the young man had appeared to be well on the mend, the next day he suddenly lapsed and died.

Although everything pointed to witchcraft on the part of the *sekuru's* sister, the *sekuru* himself would not accept this and a week later summoned a diviner. This diviner is related to, and lives with, the *sekuru's* brother-in-law (11) who is on close terms with the family, and divines while speaking in a state of possession by his divining spirit. He had been consulted by the father of the young man before the death, when he had stated that the sickness was being caused by the *sekuru's* sister. Now, when summoned by the *sekuru*, he repeated his finding together with a few intimate family facts in support of it. In particular, he remarked that the sister in question had helped her mother to bewitch her father, and added that the old man had during his last illness claimed that he was being bewitched by his wife (4), to which the son agreed.

TYPES OF EXPLANATION

It the above case, the supposed action of the witch does not appear to be entirely dissimilar conceptually from the 'modern' idea of a malevolent person putting poison into someone's food to cause illness and death in his victim. It is true that according to one interpretation the witch had introduced an evil spirit into the blood of her victim, but the spirit was treated as an impersonal object and it could be removed independently of the witch just as we would treat a poisoned person independently of the agent who introduced the poison into his food. The difference between the two types of explanation appears to be in their content rather than in their logic. The explanation in terms of witchcraft was based on the empirical evidence of the open jealousy of the supposed witch, and her threat followed by the sudden and surprising death. That the sickness was in the blood followed from the fact that the septic sores appeared in different parts of the body and from the final general weakness.

In the case cited, the woman healer suggested that the witch operated on her victim by introducing a bad spirit into his blood. The more usual manner in which witches are thought to operate is to place some harmful concoction or poison in the victim's food or drink or on a path along which the victim is likely to pass. Witches are also believed to keep certain animals to help them carry out their nefarious deeds: an owl alighting on the roof of a hut or a snake in the vicinity of a hamlet immediately rouses fears of a witch at work. If a man is bitten by a snake and dies, it is quite clear that the snake is the physical cause of the death. People take care to hunt out and kill a snake seen near their homestead, and if the snake is killed, the witch's plan is foiled. So far, the witch appears as a human agent using her special knowledge to make use of techniques not available to the ordinary person. This requires no peculiar logic to understand.

It is true that the Korekore more readily than ourselves suspect the presence of a personal cause: a personal agent is believed to be involved in any premature death through sickness. Opinion is divided on whether a man washed away while crossing a river or killed in a car crash must first have been bewitched. A common view is that when the causes are so clear, the relatives of the deceased would not even bother to consult a diviner, though younger men say that there is always witchcraft operative in such accidents and that anyone who urged the deceased to make the journey resulting in his death would be suspected. All agree that a very old person dies simply from old age, though a few say that they would consult a diviner at the death of an aged relative in order to be sure that there is nothing else. Thus the Eastern Korekore do accept the possibility of a purely natural death in certain circumstances, but they generally expect other causes.

The fact cited in the case history that the family moved their place of residence four times after death in the family does not necessarily indicate some 'mystical' fear of death. This practice is common at the death of an adult, and the reason given by informants is that the old homestead with the hut of the deceased has too close an association with the dead relative: they move in order to forget.

The Eastern Korekore do not normally move residence at the death of a child, but in the case of a number of deaths the family does move through fear that more will die. In such a situation the locality is regarded as dangerous to the family, possibly on account of the presence of an enemy, and to abandon such a place might be regarded as reasonable in any society.

Even customary precautions against the infection of death need not be understood in a 'mystical' sense. Thus everyone attending the burial of the young man had to wash his arms and legs in a river before returning to the village, and those whose tasks brought them into contact with the corpse or grave had to wash their whole bodies. All had to wash their eyes with certain leaves crushed in water or else the eyes would 'die', and children were not allowed to see the corpse for the same reason (formerly they would have been shut away in an empty hut). All shoes worn at the grave and implements used for digging it had to be carefully washed before returning to the village. There is something about death which is believed to be infectious and precautions must be taken to avoid it, yet there is nothing in the rites mentioned which radically differentiates them from the way in which Europeans might treat contact with the corpse of a victim of cholera or bubonic plague (though other Korekore rites do require further explanation). Even the possibility of blindness from looking at the corpse need not be understood 'mystically' — one can become blind from looking at the sun. Certainly the Korekore have some concept of illness being passed on through contagion. The occurrence of venereal diseases, and often of measles, is understood in this way and it appears that the idea is extended to that aspect of death which is regarded as infectious.

The use of leaves to protect the eyes is not altogether dissimilar from the western use of prophylactics. The Korekore understand their many traditional protective charms and curing concoctions in the same way as they understand European medicines. People frequently switch from traditional to European medical treatment if the former fails to achieve the desired effect, and vice versa. The fact that the traditional medicines are usually scientific-

ally unsound does not necessarily imply that the people who use them regard them as having some magical power any more than the use of scientifically unsound 'natural' remedies by many Europeans implies that they believe in magic. It is simply a matter of believing in the good effect, or possible good effect, of some substance without knowing how this effect is achieved.

There is an element in the Korekore understanding of sickness and death which involves the explanation of physical events in terms of physical or natural causes. The situation becomes more complex when we move into the realm of personal causes.

PERSONAL CAUSES

The first point to establish in a discussion of personal causes is that even in Western society personal causality is conceptually distinct from physical causality.* Compare the statement, 'My finger is moving because electrical impulses are passing down the nerve cells and contracting the muscles,' with 'My finger is moving because I so wish' or 'I am moving my finger'. The two explanations are not mutually exclusive, but they refer to distinct types of causes. In one case the cause is considered as a chain of prior physical events; in the other case the cause is a conscious person controlling the effect without reference to a chain through time. Physical causality, or the relation between physical cause and effect is diachronic; personal causality, the relationship between personal cause and physical effect, is conceived as synronic or a-chronic and operates at a different level.

One can extend a belief in personal causality to belief in causation by spirits. In contemporary Western society, there are many who accept the physical explanations offered by

*I do not here wish to enter the philosophical debate about the verifiability of possible meanings for causality: I am speaking of common concepts of the relationship between the cause and the effect, a relationship which in some way and to some extent involves determination. People believe in different types of relationship, different ways in which the cause is supposed to influence the effect, and these I call types of causality.

modern science yet still believe in spiritual causes which control the outcome of empirical events, normally in accordance with the laws of scientific causality but sometimes, possibly, interfering with them. The question we must now consider is whether the Korekore understand causation by their spirits in this way.

The classic description of a similar kind of reasoning is found in Evans-Pritchard's work on the Azande who consider witchcraft as a concomitant secondary cause ('the second spear') working on a different plane from that of known causes. The author cites an example in which witchcraft is used to explain why a granary weakened by termites collapses precisely when certain persons are sitting underneath it (1937, 69f). This is analogous to the statement made by Korekore informants that it was witchcraft that made a man try to cross the flooded Mazoe river against the advice of his companions. Yet not all the Korekore look for secondary causes when the physical cause of death is quite clear, and even when a duality of witchcraft and physical causes is accepted the question remains whether such a conceptual duality applies when the spirits are believed to be involved.

I shall now examine the interplay between the concepts of physical and spiritual causality, exposed firstly in the reactions of the Korekore to sickness and secondly in their beliefs about the causation of sickness. I shall then compare explanations in terms of witchcraft with explanations in terms of spirits.

When a person first becomes ill, the only reaction is to seek treatment by means of traditional or European medicine. If, however, the disease becomes serious, or if a mild illness lingers for a week or more, the sick person or his close relatives go to consult a diviner about the cause of the trouble and the action they should take to remedy it.

Usually divination on the cause of chronic or serious sickness points to the spirit of a dead person. Usually it is the spirit of a grandfather or grandmother asking for beer to be brewed in its honour, but it may be some other spirit, perhaps an alien *shave* spirit, and it may want some other rite performed, or restitution for some grievance. When the spirit and its desires are revealed by divination, the sick person or

a close relative (always someone who is *muzukuru* — a classificatory grandchild or sister's child — to a family spirit) formally addresses the spirit stating the result of the divination and saying that the persons concerned are about to take the appropriate action. In the case of a spirit wanting beer, the *muzukuru*, while making his invocation holds a calabash containing a little grain which he then hangs up over where the sick person is to sleep. Provided there is some sign of improvement in the morning, the brewing process commences. When the beer is ready, further rituals involve offerings to the spirit at the beginning and end of the proceedings and on each occasion the *muzukuru* invokes the spirit demanding that it cease troubling its descendants. The sick person should then recover completely if he had not done so before.

Even after the spiritual cause has been revealed, most people continue to treat the illness with medicines in order to help the spirits to heal the patient: the spiritual cause must be appeased and the physical symptoms must be treated. In such a case, the reactions to illness suggest a duality between the spiritual and the physical worlds working concomitantly. Although common, this dual treatment is by no means universal: many cease all medical treatment once they are sure that they know the spirit causing the trouble and that they can appease it. Occasionally people treat a mild chronic illness with medicine alone without recourse to the spirits. One traditional healer affirmed emphatically that people should either appease the spirit causing the illness or, if there is no spirit, use medical treatment (traditional or European), but never take both courses of action together; and though uncommon, this view is not unique. So in their treatment of sickness most, but not all, Korekore show a belief in dual causation involving both physical medicines and controlling spirits.

Even when dual treatment is used, belief in a duality of spiritual and physical causes of sickness does not necessarily follow. In fact, troubles such as venereal disease and protracted labour, the physical causes of which are believed to be known (in the latter case, illicit sexual intercourse), are not believed to have any spiritual causes. On the other hand, a case of pneumonia believed to be caused

by a spirit is said to have nothing to do with the patient having caught a chill while out in the rain. The Eastern Korekore rarely if ever consider an illness to be caused both by spirits and by some purely physical phenomenon: it is either one or the other.*

A duality of supposed causes does, however, sometimes occur involving witchcraft and a physical cause (which we have already mentioned) or witchcraft and a spiritual cause, either the witch using the spirit to injure the victim or a displeased spirit giving a witch access to the victim. In one case the death of a child was divined to be due to a spirit of its mother's family and the ensuing divorce case of two three-hour sessions ignored any distinction between the suspected action of the spirit and the mother's suspected witchcraft.

This does not, however, imply that causation by witchcraft and causation by the spirits are conceptually the same.

There is a similarity in that both witches and the spirits are believed to be conscious agents capable of causing serious illness and both are frightening when angered. Witchcraft nevertheless differs considerably from the action of spirits in that the former is essentially evil in design and is normally a deliberate action on the part of a witch, neither of these points applying to the spirits.

Witchcraft is always evil in intention whereas the action of the spirit is usually friendly. It is true that the Korekore do believe in evil spirits which must be driven away — the evil spirit in the blood of the young man in the case cited is an example — but these are rare and are not generally associated with any particular dead person. It is said that occasionally a person who died with a grievance becomes active as a deadly avenging spirit. One such spirit of a man murdered some eighty

years ago is believed to have caused the death of the two brothers who plotted his murder, their father and six of their children. It still claims the occasional victim among their descendants, while the surviving relatives are still trying to raise the fine in cattle necessary to appease the spirit. But such spirits become quite amenable when once appeased, as opposed to witches who are always dangerous. Generally, witchcraft is associated with death and the spirits are associated with illnesses that can easily be cured.

The fact that spirits normally make their presence felt through causing illness does not necessarily imply that their influence is regarded as evil. Although some people regard such requests by spirits as a nuisance, it is generally said that if a spirit is simply asking for beer or some other rite it is a good spirit. It is significant that the spirits of deceased parents never ask for beer from their children. The most common requests come from deceased grandparents who are regarded with less respectful fear and more affection. The spirit is only regarded as evil when the illness persists after the beer has been brewed, and should the illness become serious, especially if it results in death, the accompanying work of a witch is normally assumed. The most common form of causation of illness by a spirit is a friendly spirit requesting beer from its descendants.

A more fundamental difference between the actions of the spirits and those of witches lies in the manner in which they are supposed to cause illness. We have remarked the the Korekore concept of witchcraft normally involves deliberate intention and the use of physical techniques. Sickness caused by a spirit, on the other hand, is the concomitant physical phenomenon of the spirit's displeasure, anger, desire, for beer, etc. I shall illustrate this point with a case in which illness in a small girl was interpreted as a request for beer by her living paternal grandfather. The event was regarded by all as being very unusual, but the fact that the different parties concurred independently in their explanations of the event makes the occurrence informative with respect to the present discussion.

The sick child's father went to consult a diviner about the illness and was told that it was caused by his father-in-law who wanted

*In this paper, I omit any discussion of causation by *Dedza*, or *Mwari*, the remote high god. In cases where there is believed to be no witch or spirit of a dead person causing illness or death (especially in the case of the death of a very aged person), informants sometimes remark, '*IDedza basi*' [It is God alone]. Generally, people speak little about the high god and then only in the vaguest terms. It appears that they think of him as remotely permitting what comes to pass and only very rarely taking any positive action: 'You know *Dedza* when the lightning strikes'.

beer to be brewed for him. Since his father-in-law was alive and relatively young, the child's father was not satisfied with this surprising result and consulted a second diviner who came to the same conclusion. The family then approached the father-in-law and the sick child formally addressed her grandfather, telling him the result of the divination and saying that they were about to brew beer for him — all according to the procedures followed when a spirit asks for beer through illness. At first the father-in-law refused to have anything to do with it saying that it was nonsense that a living person should ask for beer in this way. Under the persuasion of the son-in-law's family, and no doubt influenced by the fact that the condition of the child improved after the invocation, he eventually agreed to attend the beer drink and admitted that he would like to be honoured in this way (an honour that a man can occasionally expect from his daughter's husband). When the day for drinking the beer arrived, friends and relatives gathered and the father-in-law went into a hut with close relatives of the family where the first pot of beer was served. The grandchild who had been ill drew the first calabash, sipped a little and gave it to her grandfather saying that this was the beer he had asked for. He accepted responsibility for the illness by taking the beer and demanding that his agnatic relatives be served first. Although the rites for honouring a living person with beer were followed and the rituals of setting aside beer for the spirits were omitted, there was clearly a close conceptual association between this case of a living man asking for beer in the same way. It should be noticed that the son-in-law and his family were on good terms with the father-in-law and that neither he nor his child had failed in any of their duties towards their senior. It should also be noticed that there was no question of the father-in-law having done or said anything to make the child sick and any suggestion of witchcraft was emphatically denied by all.*

*Months later, people were inclined to make remarks about witchcraft when reminded of the event, it being considered that a very old man can ask for beer like the spirits but that the father-in-law concerned was too young. Although they claimed that the event was very unusual, they do admit that it was possible without the use of witchcraft and this admission is sufficient for the purposes of analysing the concepts involved.

The child was sick simply on account of the grandfather's desire to have beer brewed for him.

This type of causality is further illustrated by a case of a woman very ill with pneumonia. Relatives presumed that the illness had been caused by her brother who had had angry words with her at a meeting shortly before the symptoms appeared. Again there was no suggestion of witchcraft or sorcery. The illness was regarded as the physical concomitant of the brother's anger.

During disputes at the chief's court it is often said that quarrelling brings sickness and I once heard a remark that quarrelling is worse than witchcraft. Clearly we have here an idea of causing sickness by a means other than by witchcraft. Bewitchment arises from a deliberate action, or at least intention, on the part of the witch to cause some evil effect, an action which can be suspended by the witch and possibly thwarted by the victim. In the cases just cited, the illness is believed to be the necessary physical concomitant of the current social relations.

EXPLANATORY ROLE OF SOCIETY

Compare the statement, 'The compass needle is pointing north because that is the direction of the magnetic field in which it is lying', with 'A is sick because B is angry with him', or 'C is sick because his late grandfather wants beer.' In the latter statements it is true that the causal explanation normally precedes the effect in time; nevertheless, the grudge or desire must be operative at the time of sickness for the explanation to be valid. The suggestion is that for the Korekore the complex of interpersonal relationships, or the social structure, to some extent takes the place of physical structures in the understanding of events. This would result in a certain difference in understanding even where the Korekore concepts appear at first sight to be similar to ours, and we now return to examine in this light the examples cited earlier in this paper.

Comparing the Korekore concept of witchcraft with the western concept of crime, we notice that the latter is considered valid only within a physical spacio-temporal framework: a good alibi exonerates a suspect. The witch, on the other hand, is supposed to be able to

work wherever her (or his) social presence is felt. The *sekuru's* sister was jealous of the young man wherever he was and could consequently kill him while he was still at the mission hospital some thirty miles from her home. The fact that witches are believed sometimes to send familiars to achieve their ends does not affect this argument since they have control over their familiars just as far as their social influence is felt. It is significant that phenomena such as mental telepathy, readily acceptable to more primitive peoples, are problematic to a more scientific mind.

The means by which witches obtain their power is also understood in terms of the social structure. One reputed witch is believed to have strengthened his medicine horn by poisoning his daughter-in-law, in keeping with the common belief that a person can become strong through the performance of evil. One informant explained the incest myth, in which a powerful ancestor of the tribe is said to have gained his position through sexual intercourse with his sister, by pointing out that the ancestor in question did what others were afraid to do. Because he does what others are afraid to do socially it is presumed that he can do what others are afraid to do physically, and the same applies to the witch.

In this context, it is significant that the most powerful medicines are considered to be the secret concoctions of specialists and the most powerful charms a man may have are kept secret from the general public. Although many informants state that the motive for such secrecy is simply economic (you cannot sell a medicine if everybody knows how to make it), the power of the medicine or charm is, nevertheless, judged with reference to the relative knowledge of the person who makes or owns it. If one man knows what others do not, he is presumed to have power that others have not. The converse is also true: if a man can do something extraordinary, it is presumed that he knows of some charm which he is keeping secret from the community at large. This is well illustrated by one man who had remarkable success at hunting small buck. Although he openly displayed the whistle with which he could summon them and readily explained his tactics with respect to weather and wind conditions, he was unable to persuade his friends that he had no secret medicine to bring

him success. Their focus was not on the physical reasons for his success but on the fact that he was conspicuous in the realm of hunting.

We come now to the fear of the infection of death. If this fear is understood with reference to social rather than physical structures, people leave a place at which a number of deaths have occurred among their numbers not so much because such a place is regarded as unhealthy in the sense of the physical presence of a dangerous influence but because it involves social contact with some witch. By moving a few miles, they are able to remain in contact with the relatives whom they trust while removing the danger of contact with the witch who may remain unknown to them.

The funeral rites show more clearly the relationship between social phenomena and the danger of being infected by death. It is relevant that the implements used for digging the grave have to be carefully washed before being carried back to the homestead although they come nowhere near the corpse: a grave is conceptually a place of the dead whether or not it has yet come into contact with a corpse. At the homestead, the poles left over from making the bier*, ashes from the fires at which mourners sat through the night and certain personal possessions of the deceased are collected by the ritual burial friend and deposited in the veld some distance from the homestead although none of these come anywhere near the corpse. It is a social rather than physical association with death which makes objects supposedly dangerous.

Further, the danger of being infected by death varies with a person's position in the social structure; and this applies both to the deceased and to the survivors. The death of an influential person is more dangerous than of a common man, and a relative of the deceased is more endangered than one who has no ties of kinship with him. Thus all who attend any ceremony at the grave of a deceased chief must wash themselves all over on their way back to the villages in order to avert

*A stretcher like a bier is always associated with death: if a sick person must be moved, he is carried on someone's back — never on a stretcher.

subsequent illness, whereas non-functionaries returning from the grave of any other adult need wash only their arms, legs and faces, and many do not bother to wash at all when returning from the grave of a small child. At death, only the burial friends, who are not kinsmen of the deceased, may attend to the corpse and place it in the grave. Distant relatives may occasionally help to carry the bier but close relatives may not have anything to do with the corpse,* and should any touch it he must take medicines to keep away illness. Also of interest with reference to the question of infection by death is the belief that should a burial friend visit a very sick man (a social event), death will shortly follow (the physical concomitant of the structure of the social event).

The Korekore concept of infectious diseases also requires some modification in that the social rather than physical aspect of contact is considered to be the cause of infection. This is not readily verifiable where (as in the spread of measles or venereal diseases) the social and the physical are inseparable. It is, however, significant that the effects of measles are believed to depend on social conditions — it is believed that a child will die of measles if, and only if, the mother has illicit sexual intercourse. Just as the social status of the mother affects the social status of the child, so the action of the mother is believed to affect the physical state of the child. This is further illustrated by the belief that illicit sexual intercourse on the part of a pregnant woman will result in a protracted labour. Although this might be understood in terms of simple physical causality coupled with technical ignorance, the fact that the effect of a protracted labour is not considered to be caused by intercourse

with the husband suggests that the physical evil is understood in terms of what is socially evil.

This is radically distinct from modern psychological explanations of bodily malfunctioning. Integral to these are the attitudes of the patient which can relate the physical state to the moral or social order and resultant worries and anxieties. When, on the other hand, the Korekore regard physical disorder as arising from moral or social disorder, the attitudes of the individuals are not considered to be relevant: the physical is the direct concomitant of the social. Although their conclusions may occasionally be in accordance with those of modern psychology, their reasoning is different.

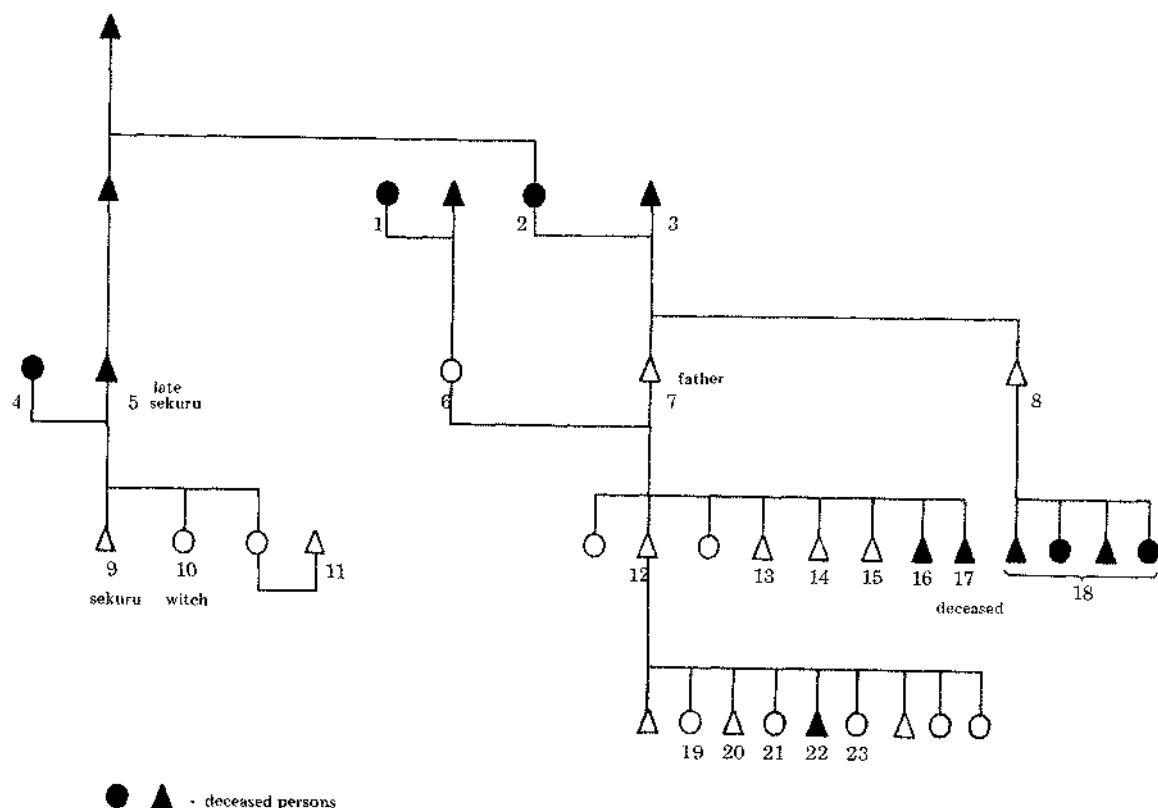
We conclude this section with a brief remark about spirits. At the death of a person, his influence continues to be felt among his associates and relatives, particularly among his descendants. The deceased maintains his position in the kinship structure of the society he has left. Because they remain part of the social structure, the dead continue to be a principle of explanation of physical events, particularly among their descendants who are most closely linked to them in the social structure. The angry spirit of one who has been wronged is dangerous, while the spirit of one who is remembered with affection is considered good and helpful. The foreign *shave* spirits are sometimes considered helpful and sometimes simply a nuisance.

CONCLUSION

My conclusion is a confirmation of Horton's observation that for traditional African peoples society is the paradigm of order and regularity. Further, the current relations between members of society are believed directly to affect, and hence to explain, physical events of significance to members of that society. This is not to say that in traditional African society, physical causes are unknown or ignored; rather these are considered trivial and often irrelevant in comparison with social relations between members of a close-knit community who are interdependent for all that is necessary in life, from economic survival to relaxing entertainment.

*Cf. also Holleman (1953, 21-26). It should be pointed out that rituals of the Eastern Korekore differ in detail from those described by Holleman. Also the role of the *vakuwasha* in the funerary rites of the Eastern Korekore is based on their status as providers of bride-price cattle rather than on the fact that affines are in less danger of being infected by death.

GENEALOGY CONNECTING PERSONS MENTIONED IN THE CASE HISTORY.



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