

Condom Semiotics: Meaning and Condom Use in Rural Malawi

Iddo Tavory

University of California-Los Angeles

Ann Swidler

University of California-Berkeley

This article examines the widespread resistance to condom use in sub-Saharan Africa by describing the major semiotic axes that organize how people talk about condoms and condom use. These axes include the “sweetness” of sex, trust and love between sexual partners, and assessments of risk and danger. Using data from rural Malawi, we show that framing the meaning of condoms as a simple choice between risky behavior and rational attempts to protect one’s health ignores the complex semiotic space that Malawians navigate. Based on data from more than 600 diaries that record rural Malawians’ everyday conversations, our analysis charts the semiotic axes related to condom use. Semiotic constraints operate most powerfully at the level of relationships. Condom use signifies a risky, less serious, and less intimate partner. Even when people believe that condom use is appropriate, wise, or even a matter of life and death, the statement that condom use makes about a relationship usually trumps all other meanings. We call for a more nuanced analysis of culture, one that is attentive to the ways agents navigate multiple, contested meanings, and that demonstrates how specific semiotic axes are brought to bear in particular interactional contexts.



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The introduction of condoms has successfully reduced AIDS prevalence in some high-risk communities around the globe (Dowsett 1999; Epstein 1996; Green 2003), but the situation in sub-Saharan Africa is far less encouraging (Hearst and Chen 2004; Shelton 2006). When used consistently, condoms are

about 80 to 90 percent effective in preventing heterosexual transmission of HIV (Hearst and Chen 2004; Weller and Davis 2003). As Hearst and Chen (2004) note, however, condom use in sub-Saharan Africa is low and inconsistent, especially in “regular” relationships.¹ Sociologists and anthropologists have tried to understand resistance to condom use in terms of beliefs and attitudes (Bledsoe 1990; Chimbiri 2007; Johnson-Hanks 2006; Kaler 2004; Kalipeni 1999; McPhail and Campbell 2001; Obbo 1995; Smith 2000, 2004a), and many situate choices about sexual behavior in a larger context of social meanings (Beisel 1990, 1997; Gagnon 2004; Laqueur 1990; Schalet 2000). This article contributes to the general sociolo-

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¹ Cost and availability may limit condom use, especially in very poor countries like Malawi. In our interviews and the diaries, however, cost was never mentioned as a reason for not using condoms. In Malawi, *Chisango* condoms are heavily subsidized and widely available (Kalipeni and Mbugua 2005), costing two *kwacha* each (about 1.4 cents), inexpensive even by Malawian standards.

gy of culture, as well as the broader issue of condom use for protection against HIV in sub-Saharan Africa.

Sociologists interested in culture have enhanced the richness and subtlety of their interpretive readings of cultural materials and their understanding of systems of culture production. But they have made less progress in developing models of how meanings influence action (Swidler 2001). Here we explore a problem of meaning that has very clear consequences for action—whether people use a condom in a particular sexual interaction. We examine the meanings of condom use from a semiotic perspective, showing how semiotic codes allow individuals to actively and creatively negotiate the ways their own behavior is understood by others (see Derné 1994). We also explore how semiotic codes determine the meanings of a particular action (in this case using a condom) and thus how they constrain behavior. Using data from more than 600 diaries that record rural Malawians' everyday conversations, we chart three semiotic axes that create possible meanings of condom use: the sensuality or “sweetness” of sex, the question of trust and love, and the assessment of AIDS risk as measured against the perceived dangers of condom use. These axes delineate the semiotic space in which people understand condom use in their sexual relations.

A semiotic perspective provides an explanation for an otherwise striking anomaly: even as awareness of HIV infection has become nearly universal in sub-Saharan Africa and attitudes toward condom use have changed (Thomsen et al. 2003), the use of condoms in “love” relationships—marriages, but also some short-term partnerships—remains miniscule (Chimbiri 2007; Varga 2000). Without a semiotic perspective on culture, this gap between attitudes and behavior with respect to condom use remains opaque. Cultural constraints on condom use are real. They do not derive from stubborn cultural beliefs that refuse to acknowledge the dangers of AIDS, rather, they derive from semiotic codes. These codes shape the meanings of condom use for actors' identities (Johnson-Hanks 2002; Smith 2000); they shape the signals that people send about themselves and their sexual partners, and most important, they shape what the use of a condom says about the character of a sexual relationship.

We define “semiotic axis” as a dimension that delineates one array of possible meanings—for example, from risky and dangerous to protective and safe—within which condom use is understood. A focus on the semiotic aspects of meaning implies a focus on signs “organized around key oppositions and equations” that are “aligned with a cluster of symbolic attributes” (Silverman 1983:36). Any cultural object, such as a condom, has multiple possible connections to other cultural meanings. The possible metaphors and meanings may be contradictory or competing, but this multiplicity of meanings allows creative interpretation and renegotiation of an object's significance (Sewell 1992).²

We use “semiotic” not as a synonym for “meaning,” but to convey three important ideas: First, particular terms, symbols, and objects have meaning only with reference to a wider code of relationally-defined possibilities (Saussure [1916] 1986) (e.g., what one wears conveys meaning along the formal–informal dimension). Second, the term “semiotic” conveys the idea that a shared social code constitutes the array of likely meanings of words and actions (Sewell 1999), independent of what an individual may actually intend to signify (e.g., wearing ragged jeans to a wedding may connote contempt for the proceedings, no matter a person's intentions) (Caplow 1984).³ Analyzing the multiple axes that define the semiotic space (Lotman 1990) of the condom shows how individuals can code and decode a gesture, object, or statement. Conceptualizing condom use with-

² The polysemy of language—and the wide range of metaphors for sexual organs and activities—creates special difficulties for this kind of article. Almost every metaphor about such matters, such as three-dimensional “semiotic space,” immediately suggests multiple double-entendres and makes writing a perilous, albeit entertaining, adventure.

³ Our approach differs from theories of “frames” and “framing.” Framing theories suggest that individuals consciously subordinate meanings to practical ends. That is, actors are consciously “mobilizing and countermobilizing ideas and meanings” (Benford and Snow 2000:613). We suggest that although agents can navigate within a semiotic space, semiotic codes constrain action by defining the meanings of our actions for others. A semiotic space thus constitutes the situated location of action and the expectations agents have of others' expectations.

in such a semiotic space recognizes that the condom does not have a fixed meaning, but rather serves as a gesture or statement within a larger system of signification—a system encompassing the self, the other, the nature of a relationship, and concerning danger, disease, and desire.⁴ Moreover, a semiotic space suggests that meanings can shift within that space, so the meaning of condom use can change registers or locations even within a particular interaction (Sewell 1992, 1996). Third, the image of meanings as enacted within a multidimensional semiotic space allows for discontinuities—discordant semiotic framings that create conflicting motives, identities, and experiences. These discontinuities also allow individuals to use openings between one register of significance and another to quite suddenly shift the meanings of an interaction.

The three-dimensional semiotic space we describe here does not map all the significations connoted by condom use. Much like Mauss's ([1923–24] 1990) “total social facts,” the condom's meanings are polysemically placed within multiple and intersecting structures of meaning, or semiotic axes (Sewell 1992), touching almost every aspect of Malawian social life. We focus on sensuality, love and trust, and risk because these are the central themes that emerge from our data. Although controversy in the United States and elsewhere revolves around moral and religious objections to condoms (Dietrich 2007; Gamson 1990), these are not the most common sources of resistance to condoms in rural Malawi.⁵

SETTING AND METHOD

Situated in southeast Africa, Malawi is a small, densely-populated country of 118,484 square

kilometers with a population of about 13 million (Government of Malawi 2007). The country is divided into three regions (northern, central, and southern) and 27 districts. It is home to many ethnic groups, the largest of which are the Chewa, Tumbuka, Lomwe, Tonga, and Yao. The AIDS rate is extremely high; approximately 12 percent (Government of Malawi 2004; UNAIDS 2006) of Malawi's adult population is HIV positive. AIDS is now the leading cause of death for people ages 15 to 49 (Doctor 2002).

This study was conducted as part of the Malawi Diffusion and Ideational Change Project (MDICP), the core of which is a longitudinal survey exploring the role of social networks in shaping AIDS and fertility-related attitudes and behavior. Semistructured interviews with subsamples of respondents supplement this project (Watkins et al. 2003). The survey began in 1998, with subsequent waves in 2001, 2004, and 2006. The MDICP study was conducted in three rural research sites: Mchinji in the central region, Rumphi in the north, and Balaka in the south. The initial 1998 sample consists of approximately 1,500 ever-married women and their husbands. This sample was interviewed again in 2001, 2004, and 2006, with the new husbands of widowed or divorced women added to the sample. In 2004, a younger sample of 1,500 men and women ages 15 to 24 (married and unmarried) was added to the survey.⁶

Our analysis is based on more than 600 journals written by local assistants. The MDICP researchers found it difficult to discover through surveys how people actually talk to one another about condoms and AIDS. They thus asked a few local assistants, who had worked as part-time interviewers for the survey project,⁷ to

⁴ In this sense, the interactional meanings that interest us are “second order” symbols (Barthes 1987).

⁵ We do not address religious prohibitions of condom use (Smith 2004a), political objections to condoms as products of malevolent government or white aid (Kaler 2003), or the “modern” identities slowly penetrating rural Malawi (Johnson-Hanks 2002). Although these axes appear sporadically in diaries and interviews, the three axes we describe were much more prevalent in everyday conversations and interviews.

⁶ Further details about the MDICP and the data from the surveys are available at: <http://www.malawi.pop.upenn.edu>.

⁷ MDICP recruited interviewers by posting notices in local trading centers near the rural survey sites, asking high school graduates to come the next morning to fill out an application. Often as many as 200 people applied for the 40 or so positions at each site. Successful candidates had to be fluent in the local language and proficient in English, which is required in Malawi's public schools. High school graduates (those with Form 4 diplomas in Malawi's British-style system) in rural Malawi can rarely find work in the formal economy, so most live in the villages, prac-



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keep journals of conversations about AIDS that they overheard or participated in during their daily lives.⁸ The project paid journalists \$30 for an 80-page school notebook, each about 7,500 words and typically covering several different conversations with multiple participants. The project hired 22 journalists (nine women, 13 men) between 1999 and 2006: three journalists (two men, one woman) contributed, on average, more than 30 journals a year (13 contributed more than five journals per year; the other six wrote less frequently). All journalists are high school graduates with no additional education, young (20s or early 30s), and rely on subsistence agriculture supplemented by casual labor or small-scale retail (as well as intermittent MDICP activities). The journalists were given no training except instructions to listen, to remember what was said as close to word-for-word as possible, and to write. Nor did the researchers define what they meant by “conversations about AIDS.” As a result, the content of the journals reflects the journalists’ assumptions about what is relevant to AIDS. The journalists recorded conversations in local languages but wrote the journals in English (entries were often hastily written, so the grammar is sometimes poor and words are omitted). We retain most of the idiosyncrasies in grammar and spelling, as well as locutions that reflect local adaptations of English⁹ (we insert words in brackets when necessary for clarity).

ting subsistence agriculture and small-scale trading. Some have the rare opportunity to work for one or two months with an NGO or a project like the MDICP. Interviewing for the MDICP lasted only about two months; it did not provide regular employment.

⁸ For a fuller discussion of the journals as a methodological tool and a form of social inquiry, see Watkins and Swidler (2008). Watkins recruited the journalists and developed the journal methodology. We spent a good deal of time in the field, so we know many of the journalists and are familiar with the context the journals describe. When we had questions about the meaning of a passage in the journals, the translation of a word, or other matters relevant to understanding the journals, we asked the journalist and conferred with other local informants.

⁹ Malawian public schools teach English from the early grades, with formal English starting in Standard 5 (equivalent to 5th grade in the United States). English is widespread and has become indigenized

These journals, collected between 1999 and 2006, produced more than 5,000 single-spaced pages, recording everything from public scandals in the marketplace and chief-court proceedings to casual conversations on local minibuses and at bars. Although there are few journalists, they capture a large population. Each journalist had a small number of friends, relatives, and neighbors who all knew each other and interacted fairly frequently. The journalists also interacted with or overheard a more heterogeneous group of strangers and acquaintances, providing a diversity of conversational settings and participants. We changed all names, and we cite journal excerpts using the journalist’s pseudonym and the date of the journal (following a month/day/year format).

We coded the diaries using NVivo7, which is designed to facilitate grounded theory coding and analysis. Although we let the concepts and categories emerge from the data (Strauss and Corbin 1990), we differ from grounded theory in starting with a focused question: What codes, metaphors, and meanings governed how people talked about condoms and condom use? This kind of analysis allows us to construct a polyphonic account of how people negotiate and reproduce culture in a given context (Bakhtin 1984). The journals are polyphonic in two senses. First, they capture a multiplicity of local voices and concerns that other methods tend to overlook.¹⁰ Second, diaries from 22 journalists over a period of seven years reflect a polyphony of local writing voices from different regions and periods.¹¹

in some ways. For example, to be sexually promiscuous is to be “movious,” and one who has multiple partners is said to be “moving around,” an Anglicization of a chiChewa expression, *woyen-dayenda*, derived from an association of multiple partners with migrant labor.

¹⁰ The journals are a delegated observational account (Milner 2004; Newman 1999). Such accounts have the advantage of allowing access to a much wider range of conversational settings and participants than a researcher might otherwise be able to enter.

¹¹ This analysis crystallizes the double polyphony of the diaries—multiple observers recording multiple voices. This is a step further than what many attempts at multivocality achieve (Clifford and Marcus 1986), and we have tried to conserve both levels of polyphony.

We first coded the diaries for sections pertaining to condom use. These sections include approximately 1,600 excerpts from 304 journals (650 single-spaced pages, more than 1,000 conversations), with many journals containing multiple conversational episodes that mention condoms and condom use. In the second phase, we employed a more fine-grained coding process, looking for recurring themes in the discussion of condom use. In this round, we coded only those excerpts in which conversations revolved around condom use and the problems associated with it. This second round of coding brought to the fore the semiotic axes that we present in this article, as well as residual themes that appear more rarely, including religious considerations and conspiracy theories.¹² These excerpts are typical of how Malawians use these three axes in interactions.

This methodology—like any other—has both advantages and drawbacks. One advantage is that the journals present ideas, concepts, and beliefs in the very process of circulation, away from the artificial structures of an interview situation. We learn not only what people may say when asked, but what they say in ordinary conversation. The journals are free from interview effects, including respondents' tendency to give answers they believe the interviewer wants to hear. Furthermore, because there are no set response categories, this method opens up new lines of inquiry. Indeed, the journalists recorded many conversations containing ideas and images that would never occur to an outside interviewer. In these conversational interactions, we also see how individuals deploy meanings in arguments and sexual negotiations—their pragmatic functioning rather than their status as abstract ideas.

On the other hand, one disadvantage is that the data's accuracy depends on the journalists' memories—what they retained as significant and what they thought might be of interest to us. We follow Watkins and Swidler (2008) in arguing that remembered conversations may provide better access to public culture than would a complete rendering of what people actually said to each other. There is also the possibility

that journalists fabricated incidents and conversations. We are confident, though, that the diaries are genuine, considering the variety of voices and incidents and our ability to triangulate when journalists lived in the same area and wrote about similar people and events. In the rare cases when diarists "cheated," they did so clumsily, often copying AIDS pamphlets from local health centers or religious tracts from their churches. While we did not discourage lengthy reports of village AIDS meetings or sermons about fidelity and AIDS, we did not use the diary of one journalist who tried passing off pamphlet materials as conversations overheard.

To supplement the diaries, we asked two local interviewers to conduct 20 interviews with men (N = 10) and women (N = 10) between the ages of 15 and 35. Interviewers selected a convenience sample fitting the age and gender criteria from people sitting in the market, washing clothes at the borehole, walking along the roads, and doing the other tedious and time-consuming chores that structure daily life in rural Malawi. Approximately 80 percent of those invited to participate agreed to an interview. The interviews were semistructured; the interviewer recorded and then translated and transcribed them. The interviewers asked both men and women whether they use condoms, and if not, why; whether their friends use condoms (and why or why not); and their general views on condom use. They also asked for examples of specific situations in which the respondents or their friends had accepted or rejected condom use. Male interviewers spoke to men; a woman interviewed women. Interviews were conducted in the southern district of Balaka, a mostly rural area, triangulated by the towns of Liwonde and Balaka and the Ulongwe trading center, where many of the conversations recorded in the journals took place. To get stories and opinions of both villagers and townspeople, interviewers conducted half of the interviews in the towns of Liwonde and Balaka and in the Ulongwe trading center; they conducted the other 10 interviews in villages. The interviews were conducted in chiYao or chiChewa, the two most commonly spoken languages in the district.

Finally, we use data from the 1998, 2001, and 2004 MDICP survey waves to assess the degree of condom acceptance in marriage and to trace changes in condom acceptability over time. The journals come from the same dis-

¹² Religious prohibitions on condom use, for example, usually appeared when diarists reported sermons they had attended, not in everyday conversations.



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tricts and many of the same villages covered by the survey. They thus represent roughly the same population. The journals provide important insights into the persistent resistance to condoms that was revealed in the survey data.

“ONE DOES NOT EAT SWEETS IN A WRAPPER”: THE AXIS OF SENSUALITY

Sensuality is the first semiotic axis that structures the meanings of condom use. The most common metaphor for the sexual act in Malawi, as well as in other parts of south and southeast Africa, is that of “sweetness” (for South Africa, see Hunter [2002]; for Kenya, see Dilger [2003], Thomsen et al. [2003], and Varga [1997a]; for Tanzania, see Emanatian [1995]; and for Zambia, see Bond and Dover [1997]). This metaphor refers to semen and the contact with sexual fluids during sex, as well as the pleasure of the sexual act more generally. It is mostly men that talk about the sweetness of sex, but some women use this metaphor too. These conversations vary from the occasional remark that sex is “very sweet,” to elaborate descriptions of how men and women feel sweetness while having intercourse. As the following excerpt shows, the sensation of sweetness is important in some people’s decisions not to use condoms:

Dili said, “I have said already, I believe, that I can’t and I don’t even think of using the condom when I am having sex because I don’t see the importance [the point] of using [a condom] because when having sex I mean to feel sweet. Her real sweetness, not that I should be having sex with a condom. It’s better to continue with masturbation than acting like you are having sex with a woman while you are sexing yourself and the rubber!” (Simon 6/13/2002)

This language of sweetness is closely tied to men’s, as well as some women’s, unwillingness to use a condom. Many diaries record people in both local languages saying, “It is the same as eating sweets in the wrappers” (see also Preston-Whyte 1999). In other words, they believe that one cannot experience sexual pleasure when using a condom.

Condom manufacturers in Malawi also use the sweetness metaphor. One new, popular local brand of condoms is actually called *Manyuchi* (honey). This name connotes sweetness, and the condoms are chocolate-scented and tinted, using local understandings of the sweetness of

sex to increase the condom’s appeal. This language sometimes becomes a resource for the negotiation of condom use. One journalist reported overhearing a story of a man using the name “Manyuchi” to trick a woman into having “sweet” sex, even though she had demanded he use a condom:

Then he was going to the lady after having made a hole in the tip of the condom when the lady was absent. They were having sex [as usual, with a condom] usually while the lady took it for granted that this is safe sex. So one of the days the lady got surprised. Then she asked the man, “I feel like you are releasing sperms and I am feeling sweet.” Then the man said that “oh! Don’t you know that these latest Manyuchi condoms are sweet, that is why they are called Manyuchi.” (Achea 7/01/2005)

The axis of sweetness describes not only sexual interactions, but also men and women who are conceived as sexually competent and desirable. This might seem deceptively similar to the English use of sweetness to refer to sexual partnership. However, while in English “sweetheart” refers to a loved partner, the language of sweetness in Malawi provides a criterion for evaluating sex itself. For example, in one diary, a wife finds out that her husband has another partner, instigating a fight between the wife and the lover in which the lover mocks the wife using the language of sweetness:

You are also a stupid woman. Your husband is fed up with you, you are no longer sweet. This is why he has come and proposed me. I did not propose to him but he was the one who came alone proposing to me and I am sure that he can’t leave me, he is satisfied of me. (Simon 6/25/2003)

The metaphors of sexuality and sensuality in Malawi seem similar to those used in American English to describe the trade-off between sensual pleasure and the benefits of condoms. There is an important structural difference between Malawian and Western semiotics of sensuality, however, that helps explain Malawians’ reluctance to use condoms. For rural Malawians, sweetness refers not only to the sexual act in general, but specifically to the release of semen.¹³ Contact with semen and vaginal fluids is the essence of sexual pleasure itself. So

¹³ In both chiChewa and chiYao, the same word (*umuna* and *ubenga*, respectively) refers to both sperm and semen.

the use of condoms does not just dull sexual sensation, it eliminates its essential element. A local physiological understanding lies behind the Malawian understanding of sexual pleasure.

Different cultures use metaphors of both heat and taste to describe sex, as Emanation (1995) shows in the case of the Chagga in Tanzania. Emanation claims that although there is cross-cultural similarity between the African and English metaphors for sexual pleasure, English speakers tend to use metaphors of heat, force, and friction, rather than taste. These metaphors can be traced back to Renaissance England, where Shakespeare's comedies played with the idea of friction generating "heat" to make sexual unions fruitful (Greenblatt 1986). In the African context, however, there seems to be a different ethno-physiology at play. Both men and women view the release of semen as the height of sexual sweetness. The sweetness of the semen is also related to fertility,¹⁴ as shown in the following diary excerpt:

Some people were laughing at her husband, saying that his wife has revealed that he is a useless man in terms of sex. He does not produce live sperm. He is not sweet. He is barren. He causes his wife to suffer from *chammimba* [abdominal pain caused by either a recent birth or a long time without bearing children] because of his dead sperm. (Alice 10/29/2004)

Although the husband can have sex with his wife, the act is flawed. Being barren, his semen lacks the sweetness of fertility; the sexual act is "not sweet." The idea of the sweetness of the semen itself is also seen in the following interview excerpt, in which a 22-year-old married man claims he wouldn't mind using condoms, but he thinks his partner feels the difference:

R: Aaah! Sleeping with a partner without a condom cannot be similar to having sex with a partner with a condom. It's different.

I: What is the difference?

R: The difference is that aaah! [slight laugh] It's different for her to be satisfied and believe that indeed I have slept with a man, because those things [sperms] have the stoppage block.

¹⁴ Swidler and Watkins (2007) note the ties of unequal interdependence that make fertility and "wealth in people" critically important in African societies.

In the West, where individuals focus on friction and movement leading to orgasm, the disadvantage of condoms is that they reduce sexual sensation (Crosby et al. 2005). In Malawi, the understanding of sweetness has very different implications. If sexual pleasure depends on the release of semen into the woman, condom use becomes much more problematic than in cultures where sensuality is tied to the friction and build-up leading to orgasm. While condoms only diminish the sensuality of friction in the Western context, they completely obliterate sensuality in the Malawian context by preventing both men and women from experiencing "the sweet."

CANCER, SORES, AND AIDS: RISK, DANGER, AND THE CONDOM

As elsewhere, Malawians see condoms as a way to protect against sexually transmitted infections and avoid unwanted pregnancies. Knowledge and fear of AIDS is nearly universal, with AIDS sometimes referred to in Malawi as *Mulili*, a plague of biblical proportions.¹⁵ The calculation of risk seems clear, particularly because both government and nongovernmental organizations promote condoms as an obvious way to avoid risk. In our journals, however, and in Africa more generally, many believe that condoms pose a health risk. Stories of the pernicious effects of condoms are frequent topics of conversation and circulate among neighbors and kin.¹⁶

Using the MDICP journals, Kaler (2004) shows how, in Malawi, condoms are sometimes thought to be part of a Western or government plot to reduce population numbers. She argues that condoms are seen as a malevolent threat coming from above and are resisted from below. In a similar vein, Varga (1997b) and Preston-Whyte (1999) describe a "condom conundrum" in South Africa: a weighing of the advantages

¹⁵ In the Malawi *Demographic and Health Survey* (Government of Malawi 2004), 99.5 percent of men and 98.6 percent of women sampled knew of AIDS.

¹⁶ For related phenomena in other parts of Africa, see Johnson-Hanks (2002, 2006); Rutenberg and Watkins (1997); Watkins, Rutenberg, and Green (1995); and Watkins, Rutenberg, and Wilkinson (1997).



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of condom use against the value of fertility (see also Smith [2004b] for Nigeria). Although Malawians discuss these issues too, the journals suggest that condoms' possible health risks are a more pressing concern. The following excerpt shows the worry over condoms' health risks as well as a grim assessment of the alternatives:

Robert said "No, it brings cancer, both you and a wife/woman because of the liquid oil found inside the *Chisango* (condom) so cancer is like AIDS has no medicine. So it's better to be doing plain [having sex without a condom]. I can't use. And Sarah always tells me that *Chisango* brings vaginal sores and she says when used most of the times [it] brings diseases and one becomes barren. . . . Yes, the government is so clever, after seeing that the population is so high that they have introduced condoms with the aim of lessening the population, for everyone using it catches cancer dying and those using plain [i.e., not using a condom] dying as well. No escape." (Simon 2/28/2001)

In this excerpt, the "cleverness" of the government is seen as an attempt to kill off the population using condoms. There is also a valiant attempt to balance risks and benefits, but with the bleak conclusion that there is "no escape" because condoms kill but "going plain" leads to AIDS, which kills as well.

In the past few years, people have spoken less about condoms as a population control "plot," but they still do not see condoms as safe. Malawians often use medical language to describe the dangers and risks of condom use. They discuss condoms leading to "sores" and "cancer," as well as the possibility of a condom tearing and "sticking to the womb," causing infertility or death. Malawians may disagree about the gravity of the diseases caused by condom use, but most take the perils of condom use for granted:

He said that the oil found in the condoms the way he heard, said are the oils which really destroys man's fertility and as the result he develops genital sores and these genital sores if not treated early one can die of them. A lot of people refused [rejected] this statement and said that the one who was saying that to him was completely cheating [misleading him]. He said that of course he heard that the oils found in the condoms causes the genital sores as well as vagina sores but not that one can die of that. We all agreed and concluded that oil found in the condoms really develops genital sores in the penis of the man and vaginal sores in the parts of women/girls. (Simon 1/04/2003)

Malawians must weigh the risk of AIDS against the perceived risks of condom use, including the idea that condom use can cause diseases that lead to AIDS:¹⁷

The condoms cause some disease especially to men who put them on. They cause some sores on the penis's skin and some wounds on the foreskin. She continued by saying that she doesn't see about the importance of using the condoms because they cause other diseases and it sometimes happens that one uses the condoms and she is safe from AIDS but she [is] found sick from another disease and goes to the hospital especially the private ones, where she is injected using the unsterilized needle which the Doctor had used for injecting someone who had AIDS. In so doing she also gets AIDS. (Alice 10/25/2002)

This excerpt shows that public health information disseminated about AIDS can itself discourage condom use. Learning that unsterilized needles and transfusions can transmit AIDS is an educational success from the point of view of AIDS programs. However, when Malawians combine this information with other stories they hear about condoms, such as condoms leading to diseases and "sores," some come to believe that condoms may indirectly increase their chances of contracting AIDS.¹⁸ On the other hand, sometimes such weighing of risks makes people more willing to use condoms:

She also said that the use of condoms are very good though they encourage people in doing sex unnecessary and no matter they are causing problems like the sores our father [respected speaker] Mr Njalale has said. It is better to suffer from sores than die of AIDS. If you use the condom and have sores, you can go to the hospital to explain and you can

¹⁷ The frequency with which Malawians mention "sores" associated with condom use may indicate a high prevalence of lesions from sexually transmitted infections (STIs). When the MDICP tested for STIs in 2004, however, prevalence was low. Gonorrhea prevalence was 5.4 percent for women and .3 percent for men; chlamydia was .5 percent for women and .1 percent for men; and trichomoniasis was 2.4 percent for women (N = 1,303 men and 1,497 women).

¹⁸ These findings raise another question about whether scientific information allows agents to master problems in their everyday world. Malawians are bombarded with scientific information about AIDS transmission, but this welter of different explanations and dangers might complicate and confuse their everyday actions (Houston and Hovorka 2007).

be helped by the Doctors while if you just have sex without any protection like condoms and be infected to AIDS, just know that the hospital can help you but you cannot get recovered until you die. (Alice 10/25/2002)

These conflicting assessments of condom risk mean that the semiotic coding of condom use is ambiguous. In the West, a refusal to use condoms invokes a distinction between those who are rational and responsible and those who are reckless and irresponsible. For Malawians, however, the semiotics of condom use with respect to risk and danger are much less straightforward. Even if individuals calculate that they personally would be safer using condoms, they cannot assume that a rational person with reasonable regard for his own health would insist on condom use. Despite the pervasive fear of AIDS, the ambiguity surrounding condoms' risks and benefits does not settle the semiotic status of condom use.

THE INVERSIONS OF TRUST AND LOVE

A complete mapping of the structure of Malawian intimate relationships is beyond the scope of this article (see Poulin 2006); nonetheless, condom use plays a major semiotic role in signifying whether a relationship is one of trust and love (Chimbiri 2007). Indeed, the role of the condom as a signifier of trust and intimacy is probably the central influence on decisions about whether and when to use a condom. Although trust and love are not the same, we analyze them together because they are inter-related. The data show an inverse relationship between the semiotic logic of trust and that of love, such that the logic of love overturns the differentiated semiotic categorization that the problem of trust requires.

The question of trust derives from a practical need to gauge the safety of potential partners (Chimbiri 2007; Donovan 2000). Almost all the interviewees and the people recorded by the journalists agreed that condoms are needed when a sexual partner cannot be fully trusted. For example, one might use a condom when a partner has additional sexual partners or leads a "promiscuous" lifestyle:

I: With whom do you use these condoms?

R: I use it to sexual partners. . . .

I: To which sexual partners?

R: To whom I don't know exactly how she moves.

(Interview with a 23-year-old married man)
Although some men say they would never use a condom, our data, as well as previous studies (e.g., Varga 2000), show that many men and women consider it reasonable to use condoms with untrustworthy partners. Indeed, many studies show that men are increasingly willing to use condoms with "non-regular partners," such as bar-girls and prostitutes (Preston-Whyte 1999). Women also believe that condoms may be appropriate with men who are "movious" (i.e., men who sleep with many women).

The problem confronting Malawians, however, is how to define the other side of this semiotic opposition. Outside of the suspect categories, who is trustworthy? One possibility is to rely on a partner's social characteristics to determine if the person is "safe." For example, if the partner is a member of one's religious congregation and does not leave the village, or is young and presumably sexually inexperienced, one might see condoms as unnecessary. Indeed, the journals record many discussions about safe sex that revolve around a folk sociology of who is a "safe partner." Many men consider young schoolgirls to be "ideal" safe partners due to their limited sexual experience. The safety of this social category, however, is open to debate:

One day I met a man in a minibus, and when we were passing Mwemba High School there was a group of girls on the roadway at this school. The man said to me, "You see those school girls, they are on the road to be entertaining men with sex, most of the people have sex with school girls plain (without using condoms) because they think that they are young and safe. In doing that these school girls can be a major cause of the rapid spread of AIDS, because they are used to unprotected sex." He concluded by saying that it is better to avoid them in order to be safe. (Diston 9/08/1999)

The categorization of groups according to this folk epidemiology is open to debate, with people using slightly different categories and contesting the common wisdom with their own analyses. Many journals report conversations in which schoolgirls are viewed as unsafe, and men voice a series of grievances, tinged perhaps with erotic fantasy, about schoolgirls' supposedly loose morals and sexual dangers.



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It is the association of condoms with unsafe partners, however, that operates semiotically to discourage condom use. The request to use a condom implies either that one does not trust one's partner, or that the requesting partner cannot be trusted (Sobo 1995):

Women who live in the villages don't like having sexual intercourse with a condom and if they discover that you have put on they push you backwards and they tell to leave doing sexual intercourse with them because they say that you suspect themselves of having maybe HIV/AIDS or any other sexually transmitted disease that's why you have put on a condom. (Chunga 4/04/2003)

Proposing to use a condom with a spouse or steady partner signals through action that one of the partners is unsafe. This does not mean that condom use necessarily signals mistrust, but if a partner wants to use one, issues of trust must be brought to the surface, rather than remaining comfortably unspoken. In the following interview excerpt, a single young man explains that he always uses condoms. When asked what his partners think about this, he said:

R: I do tell them openly of using condoms and some partners tend to wonder and ask, "The way I am you say that you want to use a condom? What have you suspected in my body or what have you suspected yourself?" My answer is just to say, according to how dangerous the world is nowadays, there is need to protect your life and mine too and if the girl or partner is understanding she understands and three quarters of the partners whom I have been sleeping with don't get surprised because they know that the world is dangerous.

So far, the implications of condom use seem straightforward: to use a condom is to place yourself or your partner in the unsafe category. However, questions of trust and risk do not capture the complexity Malawians face. Indeed, many Malawians are reluctant to use a condom with a loved partner or spouse even if they suspect the partner is HIV positive, a suspicion that surely relegates the partner to the unsafe category. Why, even when risk is great, do Malawians find the semiotics of intimate attachment in conflict with attempts to protect themselves against AIDS?

In surveys of attitudes, opposition to using condoms in marriage is still high, but it is declining fairly dramatically. MDICP survey respondents were asked about condom use with a spouse, first to protect against HIV/AIDS in

general, and then more specifically, if they suspect or know that their partner has HIV/AIDS. Figure 1 summarizes the results for the three survey waves of 1998, 2001, and 2004. The graph shows a striking change in attitudes. While majorities of men and women still consider condom use with a spouse unacceptable, from 1998 to 2004 the proportion of women who consider it unacceptable fell steadily (from 85 percent in 1998 to 58 percent in 2004). Similar changes also occurred among men, although they have been more modest. In 2004, the MDICP added a new cohort of young men and women ages 15 to 24. This new cohort shows a higher acceptance of condom use (42.8 percent for women and 29.3 percent for men) than do the original panel study participants. It is thus unlikely that the change in attitudes results from an aging effect; rather, it is a notable educational success (Kalipeni 1999).

Even more striking is the absence of changes in behavior. Another survey (Government of Malawi 1992, 2000, 2004) asked Malawian women whether they use a condom with their spouse. These numbers are miniscule, with 1.6 percent of women using condoms with their spouse in 1992 and 2000, and 1.8 percent in 2004 (a statistically insignificant change). This pattern of responses is interesting because in the 2004 and 2006 MDICP survey waves, 12.5 and 12.2 percent of married women, respectively, reported having a medium to strong suspicion that their spouse is currently HIV positive.¹⁹

Understanding the semiotic significance of condom use in defining a relationship provides a key to the discrepancies between changing attitudes about condom use within marriage, the stable rates of spouses' reported suspicions, and the tiny proportion of people who are actually willing to use condoms. This is not a matter of changing one's assessment of a partner's risk, but

¹⁹ The 2006 MDICP survey asked married women to use a number of beans (from 1 to 10) to assess the accuracy of different assertions presented by interviewers. Of the married women, 12.2 percent placed five or more beans in response to the assertion that "your spouse is infected with HIV/AIDS now." In the 2004 MDICP survey, 12.5 percent of married women answered "Medium" or "High" to the question: "In your opinion, what is the likelihood (chance) that your husband is infected with HIV/AIDS now?"

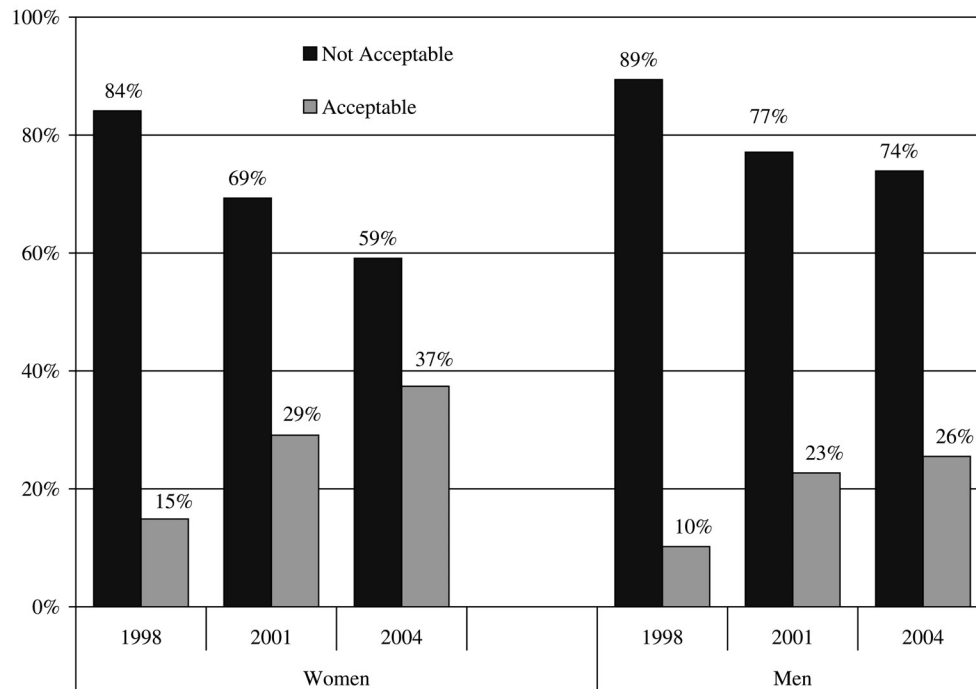


Figure 1. Percent of Malawian Respondents Who Say They Think it is Unacceptable or Acceptable to Use a Condom with a Spouse to Protect against HIV/AIDS

Source: MDICP Panel Surveys 1998, 2001, and 2004.

Note: N = 947 women and 568 men. Figure excludes “Don’t Know” responses.

of employing the condom as a semiotic vehicle for establishing or affirming the status of a relationship. This logic applies to marriages, the *chibwenzi* relationship of boyfriend and girlfriend (Poulin 2006), or indeed any relationship that the partners wish to signal as loving or intimate.

Condom use thus operates as a semiotic code, constituting the meaning of a relationship. Suggesting the use of a condom relegates a relationship to an inferior status. The use of condoms to signal that a relationship is not serious emerges in the following diary excerpt in which a journalist reports a local scandal. A woman discovered that her husband had a sexual relationship with a young relative (the “grand daughter”) and, enraged, confronted her husband:

His wife became very furious and she told him that she was going back to her home to stay with her parents. He should stay with his grand daughter and continue having sex with her. The case became very serious because Mr. Rashid reached the point

of accepting [acknowledging] that it was true that he was sleeping with the girl, but he was not having sex with her plain without the condom. He was always using the condom with the girl, therefore his wife should not get furious about that. He never had sex with her without the use of the condom. (Alice 4/07/2004)

The husband’s attempt to appease his wife employs the symbolic meaning of condom use to say that the affair “didn’t mean anything.” The use of a condom says that this relationship is not intimate and does not threaten the privileged relationship with the wife. In fact, many relationships described in the interviews go through phases: the partners use condoms at first, only to stop later (without taking an HIV test) when the relationship becomes more serious and involves love. The following diary entry shows this pattern:

Isaac was not short of words as he further elaborated that people have [a] poor mindset about condoms. He said if you are in love you at first use condoms but later you change to show your love.

This latter leads to spread of HIV/AIDS since you know not if one of you is HIV positive or negative. (Chihana 9/13/2005)

Malawians consider this shift—from condom use in the beginning of a relationship to “plain” sex when the relationship has solidified—not only in symbolic terms but also as a sensual reality.²⁰ As with the sweetness of sex, a set of bodily metaphors govern how Malawians show emotion and interpret physical experiences. Reporting a conversation in which he asked a friend about love, a journalist recorded that “love is blood.” Several journalists and interviewees used the metaphor of “flesh to flesh,” in which full physical contact, with co-mingling bodily fluids, embodies the status of a relationship. Using a condom not only connotes distrust or lack of love, but it actually feels like a loveless interaction (Holland et al. 1991; Ingham, Woodcock, and Stenner 1991). When asked if he would use a condom with his wife, one man said:

The aim is to have your bloods mix, showing each other that you love each other indeed. So if there is no mixture of blood between you two, then even the wife comes to know really that you don't love her. The way I see it, my partner can divorce me right away, the day I say I am using. (Diston 6/13/2002)

With respect to condom use, the semiotic logic of love operates as an inversion of the logic of trust. In the logic of trust, the decision to use a condom rests on an assessment of a potential partner's attributes. In contrast, in the semiotic logic of love, being in a love relationship precludes using a condom even if one knows or strongly suspects that a partner poses a high risk of HIV. In the progression from an initial

²⁰ The connection between perceived love in a sexual relationship and condom use is seen in the United States as well. Sobo (1995) shows how disadvantaged African American women in Cleveland avoid using condoms to signal that a relationship is serious; condom use, on the other hand, signifies promiscuity. In Africa, it is likely that condom promotion and education has generated some of the association between condom use and lack of trust. Promotion messages often differentiate between “regular” and “nonregular” partners and emphasize the role of condoms for protecting against dangerous, high risk, and unhealthy partners (Chimbiri 2007).

sexual relationship to a love relationship the logic of trust is inverted. In a love relationship, trust is not based on a partner's social or personal characteristics; rather, you express and enact love of a partner by trusting—for which discontinuing condom use is the semiotic code.²¹

These navigations of the semiotics of trust and love highlight the intricate ways in which condom use signals meanings about self, other, and the nature of a relationship. In the initial assessment of trust, the other is categorized on a dimension of safeness and risk, and the enacted self is the calculating and knowing agent. However, when a relationship becomes a love relation, the self is simultaneously transformed: any attempt to calculate and categorize the other must be suspended; the calculating self is no longer coded as rational and safe, but as heartless and nonloving. To sustain a relationship, one must overcome the caution dictating condom use.

NAVIGATING THE SEMIOTIC SPACE OF CONDOM USE

So far, we have focused on each semiotic dimension separately. Yet in action, these axes are

²¹ This leads to an alternative interpretation of Luke's (2005) finding that the monetary value of Kenyan men's gifts to their female sex partners is negatively correlated with condom use. Luke's findings hold for both commercial prostitution and noncommercial sexual relationships, where it is common for a man to give gifts to the woman. Luke posits that men always prefer not to use condoms, while women try to lower their risks, so men pay more to have women not use condoms. Luke hypothesizes that the poorer a woman is, the more willing she will be to accept this bargain (see also Poulin 2006). The semiotics of love and trust, however, suggest a different explanation. Condom use implies a less intimate relationship, one not based on love. But love relationships are also those in which men are likely to give more money and gifts to their partners. In commercial sexual encounters, women may negotiate HIV risks and men may pay more money to “go plain.” But the homology between commercial and noncommercial condom use is deceptive. Relationships of love and trust demand an intimacy incompatible with condom use. A man in a more intimate relationship has a responsibility to give the woman gifts commensurate with his love for her and they enact the intimacy of the relationship by forgoing condom use.

intertwined as people navigate the different dimensions. The simplest navigation among these dimensions is additive, with the different semiotic axes reinforcing each other. For example, the following diary excerpt shows how sweetness, calculations of risk, and issues of trust all play a part in the decision not to use a condom:

I had never used and those whom I had slept with I had never used them because I want to feel sweet when I need sex so using a condom I can't feel sweet. . . . And I also heard, Jauleni saying, I was told that the oil found in the condoms causes cancer disease so using the condom and get cancer and die or not using the condoms and get AIDS and eventually die, it's the same and some condoms are porous for many think you are protected by wearing them yet it gets leaked [so] you benefited nothing. It's better to use plain than getting cancer; or if you feel that the girl has AIDS its better not to propose her. (Diston 8/01/2000)

The different axes are not only additive. Rather, people can switch semiotic possibilities within one interaction. This switching is often strategic; for example, when one partner wants to persuade the other to use, or not use, a condom. Even then, the semiotic possibilities provide the materials out of which people construct an interaction and its meanings.

An extended vignette from a diary written by Simon on July 8th and 10th, 2001, illustrates how different semiotic axes are intertwined: the diary tells the story of the beginning of a relationship between the diarist's friend, Richard, and a new sexual partner, Grace. After buying fish for Grace, with money borrowed from the diarist, Richard brags that she agreed to meet him the following day. Richard boasts that he never uses a condom, but particularly in this case, it would be out of the question. "I can't even take condoms," he said, "then it will mean I wasn't serious for her. For I want her to be my real girlfriend." Even before the relationship begins, Richard is anticipating the relational meaning of condom use for Grace.

Two days later, the diarist asked Richard about his meeting with Grace. Boasting, Richard said, "that Grace kept the appointment and indeed he had sex with Grace and said Grace is a nice girl, not one who is so dry, she was totally willing to have sex." Not having a place of his own, and with Grace being in high school, they decided to go to the school, having sex in a classroom "without even laying a cloth." Before

they began, Richard said, "Grace, I am going to have sex with you with a condom." Grace refused to use a condom, saying "that she can't feel anything, and if it is so it could have been better if she could not come and meet with him."

Grace invoked sensuality to pressure Richard not to use a condom. Not giving up quite yet, Richard told her he proposed using a condom for her sake, so that she would not get pregnant and have to drop out of school. Shifting to a different discourse, that of the modern self (Johnson-Hanks 2002, 2006), Grace told him that "she had just finished her monthly period yesterday, so how can she become pregnant?" She also said that "she knows biology and said that she is sure she can't be impregnated. And she said it's better if I didn't use a condom." In the face of such opposition, Richard changed his tone. "I was just cheating you," he said, "I can't have sex with you using a condom, you are so beautiful and I need to feel real sweetness, you can't eat a sweet while it's wrapped in its plastic paper, you can't feel sweet." Bantering after intercourse, and perhaps trying to scare him a little, Grace "stood up and said 'You have made me pregnant.' And I said 'How? You said you can't?!' and she said 'I was cheating you, I just wanted you to impregnate me and marry me.' And I said, 'I will, since you are beautiful.'"

This seemingly frivolous exchange did not preclude broaching the subject of AIDS. Yet Richard and Grace strategically used the risk of AIDS as part of their flirtatious banter. Richard said, "I even told the girl [Grace], saying that 'Look, if it is AIDS, even the radio says one can only get it through what we have done and the result is dying. So if you have AIDS you have given it to me and if I have it I have also given it to you. So it's better that our love should not end.' And we promised that if everything goes well we are meeting today as well."

Richard admitted that "indeed, friend, if Grace has AIDS, she has given it to me, I couldn't resist her attractions." As a good friend, the diarist then offered Richard reassurance in the form of his own folk sociology, saying, "She doesn't have [AIDS], she is so young for that." Richard agreed because of her age and "moreover, her body is fat and healthy. Had it been she had AIDS I would have noticed that her body had become thin, but she is fat. So we are meeting any day, even tomorrow . . . for I feel married."



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This vignette exemplifies the ways in which the semiotic space of condom use both constrains and enables moments of humor and romance. The symbolism of sexual sweetness, fertility, AIDS, and, above all, condom use semiotically define the anticipation, the actual encounter, and the retrospective understanding of the new relationship. Even before the first encounter, Richard offered his unwillingness to use a condom as a sign both of his masculinity and his desire to have Grace as a “real girlfriend.” Within the interaction (or at least in describing it after the fact), shifting among the different semiotic axes of condom use allowed the couple to playfully heighten the seriousness of the relationship. By invoking the risk of AIDS, Richard enhanced the intimacy signaled by not using a condom, cementing his connection to Grace, with whom he “feel[s] married.” As Richard described it, the semiotics of condom use constituted the meanings and meaningfulness of the encounter.

DISCUSSION

Three different axes of meaning frame rural Malawians’ willingness or reluctance to use condoms. First, local understandings of sensual pleasure as dependent on the “sweetness” of bodily fluids shape sexual experience differently than do Western sexual metaphors. For Malawians, condom use is a more radical obstacle to sensual pleasure than it is in cultures where sexual metaphors focus primarily on friction and heat (Emanatian 1995). Second, taken-for-granted knowledge of the dangers of condom use (e.g., sores or cancer) confounds the contrast between rational self-protection and irrational self-indulgence. Malawians must weigh the risks of contracting AIDS against the risks associated with condom use. Finally, questions of trust invoke two intertwined and potentially opposed meanings. On the one hand, people may seek partners believed to be safe and either avoid or use condoms with those considered unsafe (Watkins 2004). However, if a relationship becomes defined as love, the connection between condom use and trust is inverted, as condom use signifies the absence of love, trust, and intimacy. The practical semiotics of the transition from a casual relationship to a love relationship make the assessment of risk and the

use of condoms inappropriate, a sign of a loveless relationship.

These three semiotic axes compose the primary space of meaning in which rural Malawians, and many other Africans, navigate condom use, the risk of AIDS, and the meanings of the social-sexual world in which they live. Within this semiotic space, rural Malawians are far from passive agents, locked in a static world of “traditional” meanings. Rather, these semiotic axes serve as pragmatic tools of knowledge and deliberation “ready to hand” that Malawians use to perform the social navigation of everyday life. Sweetness, risk, trust, and love are all modes of signification that shape subjects’ decisions and interactions. To understand variations in Malawians’ willingness to use condoms, one must first understand how these social semiotics frame everyday decisions.

Current understandings of condoms are not natural or immutable. Over the course of the AIDS epidemic, different meanings have gained prominence in different places and times. Issues such as masculinity, religious prohibitions, and distrust of government were central to the understanding of condoms in the late 1990s but are less important today. Our interviews suggest that for some younger Malawians, using condoms even with regular partners is becoming acceptable, perhaps as a marker of rational modernity (Johnson-Hanks 2002). A new semiotic strategy seems to be emerging in which using a condom every time with every partner avoids the association of condoms with particular sorts of partners or relationships. The semiotic mapping we offer here is synchronic, but semiotic structures are ever-changing. The idea of “structure” should be understood more as a point of reference for establishing meaning within a dynamic and diachronic process, rather than as a fixed framework of meaning (Bourdieu 1977; Garfinkel 2002; Sewell 1999).

Mapping these semiotic axes has implications for both AIDS studies in Africa and policy deliberations. More general sociological implications also emerge from our findings. While there is a growing sophistication in talk of discourses and practices—rather than simply “culture,” “beliefs,” and “norms”—when confronted with a phenomenon like the continuing resistance to condom use in Africa, culture analysts tend either to assume that Africans hold a set of “irrational” beliefs that, once corrected,

will produce different behavior or, in an all too similar inversion, to explain this resistance simplistically as part of local “culture.” We argue that semiotic framings define the meanings of particular actions (Swidler 2001). By paying attention to these different semiotic axes, we can see why people do not necessarily act differently in light of new information, and why changes, when they do come, may take unexpected directions.

Our approach to the study of culture has implications beyond the case of condom use in Malawi. Since the “cultural turn,” sociologists have tended to view culture as a broad, overarching sphere of semiotically coded meanings (Alexander 1988; Alexander and Smith 1993; Geertz 1973). Cultural sociologists have paid little attention to specific interactional contexts (with some notable exceptions, e.g., Eliasoph and Lichterman 2003; Emirbayer and Goodwin 1994). On the other hand, studies that explore interactional contexts most thoroughly often treat the very notion of “culture” as an analytic category with deep suspicion (Garfinkel 2002). Our approach attempts to bridge this gap, viewing interaction as a key arena where semiotically charged objects and actions have powerful effects. Expanding upon Caplow (1984), we show that culture constrains and shapes action not simply because all actors, institutions, and actions instantiate cultural codes. Rather, within situational contexts, individuals find actions to be semiotically charged a priori; these a priori meanings shape all future actions.

Viewed semiotically, most cultural expressions and actions are pragmatic, not because they are directed toward material ends, but because they enact definitions of self, others, and relationships. We join scholars like Jennifer Johnson-Hanks, Steve Derné, and Elise Sobo in emphasizing how semiotic codes constrain people by making certain practices markers of valued identities. At the risk of contracting AIDS, a man may reject condoms to assert a claim to masculinity, or to communicate and enact bodily that a relationship is serious. Semiotic codes are powerful because they shape the ways we read the behavior of others (and, reciprocally, the ways we know others will read our own behavior). A woman who knows that condoms are appropriate for bar-girls and sex workers may refuse condoms, even if she fears AIDS and

wishes to protect her health. She enacts unsafe sex to signal that she is not associated with an unsafe social category or to assert the primacy of her claim on her partner.

Semiotic constraint operates most powerfully at the level of relationships. Even when people believe that condom use is appropriate, or even a matter of life and death, the statement it makes about the relationship frequently trumps all other meanings. As long as condoms signal mistrust, fear, and a relationship that is not serious and will not lead to marriage, then using a condom will threaten or destroy a relationship. Data on married women’s attitudes suggest that even as women find it more acceptable, in the abstract, for married people to use condoms if they suspect their spouses might be HIV positive, almost none are willing to make that statement in their own relationships, despite the very real dangers they face.

In exploring the semiotics of the condom, we have suggested a three-dimensional space of action. Social navigation within this space is complex: the number of placement options is almost infinite and social agents can creatively shift among semiotic axes. Yet positions on each semiotic axis are relatively independent of those on other axes. In other words, although one can move from seeing condoms’ health risks as paramount to seeing them as almost nonexistent, movement on the axis of risk does not necessarily imply a change in understandings of the “sweetness” of “plain” sex, nor the meanings that might be signaled by using a condom with a loved one. Each semiotic axis has its own distinctive logic that interacts with, but does not automatically transform, the other dimensions.

A close connection also exists between these semiotic aspects and the pragmatics of interaction, as individuals use semiotic tools in deliberation and action (Derné 1994). In the process of social navigation, the use of a tool changes the tool itself (Laclau and Mouffe 1985; Sewell 1996; Swidler 2001). As with the man who used a play on words to trick his partner into believing that the “sweetness” she felt during sex was from the “sweetness” of the *Manyuchi* condom, metaphors and meanings can be stretched to fit pragmatic interests. Each semiotic axis we chart refers not only to condom use, but also to other realms of social life. One way in which agents have power to use and change the semiotics of condom use is by transposing metaphors



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from one social realm to another (Sewell 1992), creating moments of humor and possibilities for change.

Our focus on how culture is brought to bear in specific interactional contexts highlights the importance of methods. The journals capture conversations and actions in a variety of settings. While interviews with individuals, or even the analysis of public texts such as newspaper articles or sermons, might capture some of the ideas we find, these would be cast as general cultural “beliefs” or individual “opinions,” to be changed by assiduous education efforts. The conversational journals, on the other hand, capture how individuals deploy meanings in interactions (Watkins and Swidler 2008). In this regard, the journals’ strengths are similar to those of ethnography, which captures many moments of semiotically coded interaction (e.g., the gift exchanges Bourdieu [1977] analyzes). Ethnography, however, is less likely to capture the intimate exchanges and settings where some of the meanings are deployed. The conversational journals are currently a unique resource, but such methods have the potential to make more specific links between culture and action than most current methods of cultural analysis allow.

Although sociologists usually do not make policy recommendations, our semiotic approach suggests some new directions. Public health interventions in general should consider both accurate health information and semiotic framing. In Malawi, promoting condoms to prevent HIV and associating condoms with untrustworthy partners may backfire. Alternative strategies might frame condom use as a way to show love to a trusted partner; education campaigns might tackle local concerns about the dangers of condom use; and, as local entrepreneurs did with the *Manyuchi* condom, publicity might locate condom use squarely within the domain of “the sweet.” Rethinking condom promotion would allow Malawians to position condom use in interactionally permissible ways—where the decision to use a condom could denote care rather than frivolity, love rather than promiscuity.

Iddo Tavory is a graduate student at UCLA and is currently conducting an ethnographic project on religiosity in the modern city.

Ann Swidler is Professor of Sociology at Berkeley and author of, among other works, *Talk of Love: How Culture Matters* (Chicago 2001).

REFERENCES

- Alexander, Jeffrey C. 1988. *Action and Its Environments: Toward a New Synthesis*. New York: Columbia University Press.
- Alexander, Jeffrey C. and Philip Smith. 1993. “The Discourse of American Civil Society: A New Proposal for Cultural Studies.” *Theory and Society* 22:151–207.
- Bakhtin, Mikhail M. 1984. *Problems of Dostoevsky’s Poetics*. Minneapolis, MN: University of Minnesota Press.
- Barthes, Roland. 1987. *Mythologies*. New York: Hill & Wang.
- Beisel, Nicola. 1990. “Class, Culture, and Campaigns against Vice in Three American Cities, 1872–1892.” *American Sociological Review* 55(1):44–62.
- . 1997. *Imperiled Innocents: Anthony Comstock and Family Reproduction in Victorian America*. Princeton, NJ: Princeton University Press.
- Benford, Robert D. and David A. Snow. 2000. “Framing Processes and Social Movements: An Overview and Assessment.” *Annual Review of Sociology* 26:611–39.
- Bledsoe, Caroline. 1990. “The Politics of AIDS, Condoms, and Heterosexual Relations in Africa: Recent Evidence from the Local Print Media.” Pp. 197–223 in *Births and Power: Social Change and the Politics of Reproduction*, edited by W. P. Handwerker. Boulder, CO: Westview Press.
- Bond, Virginia and Paul Dover. 1997. “Men, Women and the Trouble with Condoms: Problems Associated with Condom Use by Migrant Workers in Rural Zambia.” *Health Transition Review* 7(Suppl):377–91.
- Bourdieu, Pierre. 1977. *Outline of a Theory of Practice*. Cambridge, UK: Cambridge University Press.
- Caplow, Theodore. 1984. “Rule Enforcement without Visible Means: Christmas Gift Giving in Middletown.” *American Journal of Sociology* 89(6):1306–23.
- Chimbiri, Agnes. 2007. “The Condom is an ‘Intruder’ in Marriage: Evidence from Rural Malawi.” *Social Science and Medicine* 64(5):1102–15.
- Clifford, James and George E. Marcus. 1986. *Writing Culture: The Poetics and Politics of Ethnography*. Berkeley, CA: University of California Press.
- Crosby, Richard, William L. Yarber, Stephanie A. Sanders, and Cynthia A. Graham. 2005. “Condom Discomfort and Associated Problems with Their Use among University Students.” *Journal of American College Health* 54(3):143–47.

- Derné, Steve. 1994. "Cultural Conceptions of Human Motivation and Their Significance for Culture Theory." Pp. 267–87 in *The Sociology of Culture*, edited by D. Crane. Cambridge, MA: Blackwell.
- Dietrich, John W. 2007. "The Politics of PEPFAR: The President's Emergency Plan for AIDS Relief." *Ethics and International Affairs* 21(3):277–92.
- Dilger, Hansjörg. 2003. "Sexuality, AIDS and the Lures of Modernity: Reflexivity and Morality among Young People in Rural Tanzania." *Medical Anthropology* 22:23–52.
- Doctor, Henry V. 2002. "Effects of HIV/AIDS on Children in Sub-Saharan Africa: Evidence from Malawi." Paper presented at the 4th Annual Conference on HIV/AIDS and the African Child: Health Challenges, Educational Possibilities. April, Athens, OH.
- Donovan, Basil. 2000. "The Repertoire of Human Efforts to Avoid Sexually Transmissible Diseases: Past and Present. Part I: Strategies Used Before or Instead of Sex." *Sexually Transmitted Infections* 76:7–12.
- Dowsett, Gary W. 1999. "Understanding Cultures of Sexuality: Lessons Learned from HIV/AIDS Education and Behaviour Change among Gay Men in Australia." Pp. 223–31 in *Resistances to Behavioural Change to Reduce HIV/AIDS Infection in Predominantly Heterosexual Epidemics in Third World Countries*, edited by J. C. Caldwell, P. Caldwell, J. Anarfi, K. Awusabo-Asare, J. Ntozi, I. O. Orubuloye, J. Marck, W. Cosford, R. Colombo, and E. Hollings. Canberra, Australia: Australian National University.
- Eliasoph, Nina and Paul Lichterman. 2003. "Culture in Interaction." *American Journal of Sociology* 108(4):735–94.
- Emanatian, Michele. 1995. "Metaphor and the Expression of Emotion: The Value of Cross Cultural Perspectives." *Metaphor and Symbolic Activity* 10(3):163–82.
- Emirbayer, Mustafa and Jeff Goodwin. 1994. "Network Analysis, Culture and the Problem of Agency." *American Journal of Sociology* 99(6):1411–54.
- Epstein, Steven. 1996. *Impure Science: AIDS, Activism, and the Politics of Knowledge*. Berkeley, CA: University of California Press
- Gagnon, John H. 2004. *An Interpretation of Desire: Essays in the Study of Sexuality*. Chicago, IL: The University of Chicago Press.
- Gamson, Joshua. 1990. "Rubber Wars: Struggles over the Condom in the United States." *Journal of the History of Sexuality* 1(2):262–82.
- Garfinkel, Harold. 2002. *Ethnomethodology's Program: Working Out Durkheim's Aphorism*. Edited by A. Rawls. Lanham, MD: Rowman & Littlefield
- Geertz, Clifford. 1973. *The Interpretation of Cultures*. New York: Basic Books.
- Government of Malawi. 1992. *Malawi Demographic and Health Survey*. Zomba, Malawi: Government Printer.
- . 2000. *Malawi Demographic and Health Survey*. Zomba, Malawi: Government Printer.
- . 2004. *Malawi Demographic and Health Survey*. Zomba, Malawi: Government Printer.
- . 2007. Government of Malawi Web Page (<http://www.malawi.gov.mw/>).
- Green, Edward C. 2003. *Rethinking AIDS Prevention: Learning from Successes in Developing Countries*. Westport, CT: Praeger.
- Greenblatt, Stephen. 1986. "Fiction and Friction: Reconstructing Individualism, Autonomy, Individuality, and the Self." Pp. 30–52 in *Reconstructing Individualism: Autonomy, Individuality, and the Self in Western Thought*, edited by T. C. Heller, M. Sosna, and D. E. Wellbery. Stanford, CA: Stanford University Press.
- Hearst, Norman and Sanny Chen. 2004. "Condoms for AIDS Prevention in the Developing World: Is It Working?" *Studies in Family Planning* 35(1):39–47.
- Holland, Janet, Caroline Ramazanoglu, Sue Scott, Sue Sharpe, and Rachel Thomson. 1991. "Between Embarrassment and Trust: Young Women and the Diversity of Condom Use." Pp. 127–48 in *AIDS: Responses, Interventions and Care*, edited by P. Aggelton, P. Davies, and G. Hart. London, UK: Falmer Press.
- Houston, Vanessa and Alice Hovorka. 2007. "HIV/AIDS Messages in Malawi and their Implications for Effective Responses." *African Journal of AIDS Research* 6(3):205–14.
- Hunter, Mark. 2002. "The Materiality of Everyday Sex: Thinking Beyond 'Prostitution.'" *African Studies* 61(1):99–120.
- Ingham, Roger, Alison Woodcock, and Karen Stenner. 1991. "Getting to Know You . . . Young People's Knowledge of their Partners at First Intercourse." *Journal of Community and Applied Social Psychology* 1:117–32.
- Johnson-Hanks, Jennifer. 2002. "On the Modernity of Traditional Contraception: Time and the Social Context of Fertility." *Population and Development Review* 28(2):229–49.
- . 2006. *Uncertain Honor: Modern Motherhood in an African Crisis*. Chicago, IL: University of Chicago Press.
- Kaler, Amy. 2003. "'My Girlfriends Could Fill a Yanu-Yanu Bus': Rural Malawian Men's Claims about their own Serostatus." *Demographic Research*, Special Collection 1:349–72.
- . 2004. "The Moral Lens of Population Control: Condoms and Controversies in Southern Malawi." *Studies in Family Planning* 35(2):105–15.
- Kalipeni, Ezekiel. 1999. "AIDS and Condom



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- Promotion in Malawi: A Critical Review." *African Rural and Urban Studies* 3(2):61–90.
- Kalipeni, Ezekiel and Njeri Mbugua. 2005. "A Review of Preventative Efforts in the Fight against HIV and AIDS in Africa." *Norwegian Journal of Geography* 59:26–36.
- Laclau, Ernesto and Chantal Mouffe. 1985. *Hegemony and State Socialism: Towards a Radical Democratic Politics*. London, UK: Verso.
- Laqueur, Thomas W. 1990. *Making Sex: Body and Gender from the Greeks to Freud*. Cambridge, MA: Harvard University Press
- Lotman, Yuri M. 1990. *Universe of the Mind: A Semiotic Theory of Culture*. Bloomington, IN: Indiana University Press
- Luke, Nancy. 2005. "Exchange and Condom Use in Informal Sexual Relationships in Urban Kenya." *Economic Development and Cultural Change* 54:319–48.
- Mauss, Marcel. [1923–24] 1990. *The Gift: The Form and Reason for Exchange in Archaic Societies*. London, UK: Routledge.
- McPhail, Catherine and Catherine Campbell. 2001. "I Think Condoms Are Good but, Aai, I Hate Those Things': Condom Use among Adolescents and Young People in Southern African Township." *Social Science and Medicine* 52:1613–27.
- Milner, Murray, Jr. 2004. *Freaks, Geeks, and Cool Kids: American Teenagers, Schools, and the Culture of Consumption*. New York: Routledge.
- Newman, Katherine S. 1999. *No Shame in My Game*. New York: Vintage Books and Russell Sage Foundation Books.
- Obbo, Christine. 1995. "Gender, Age, and Class: Discourses on HIV Transmission and Control in Uganda." Pp. 79–95 in *Culture and Sexual Risk: Anthropological Perspectives on AIDS*, edited by H. ten Brummelhuis and G. Herdt. Amsterdam: Gordon and Breach Publishers.
- Poulin, Michelle J. 2006. "The Sexual and Social Relations of Youth in Rural Malawi: Strategies for AIDS Prevention." PhD dissertation, Department of Sociology, Boston University, Boston, MA.
- Preston-Whyte, Eleanor. 1999. "Reproductive Health and the Condom Dilemma: Identifying Situational Barriers to HIV Protection in South Africa." Pp. 139–55 in *Resistances to Behavioural Change to Reduce HIV/AIDS Infection in Predominantly Heterosexual Epidemics in Third World Countries*, edited by J. C. Caldwell, P. Caldwell, J. Anarfi, K. Awusabo-Asare, J. Ntozi, I. O. Orubuloye, J. Marck, W. Cosford, R. Colombo, and E. Hollings. Canberra, Australia: The Australian National University.
- Rutenberg, Naomi and Susan C. Watkins. 1997. "The Buzz Outside the Clinics: Conversations and Contraception in Nyanza Province, Kenya." *Studies in Family Planning* 28(4):290–307.
- Saussure de, Ferdinand. [1916] 1986. *Course in General Linguistics*. New York: Open Court.
- Schalet, Amy T. 2000. "Raging Hormones, Regulated Love: Adolescent Sexuality and the Constitution of the Modern Individual in the United States of America and the Netherlands." *Body and Society* 6(1):75–105.
- Sewell, William H., Jr. 1992. "A Theory of Structure: Duality, Agency, and Transformation." *American Journal of Sociology* 98(1):1–29.
- . 1996. "Historical Events as Transformations of Structures: Inventing Revolution at the Bastille." *Theory and Society* 25:841–81.
- . 1999. "The Concept(s) of Culture." Pp. 35–61 in *Beyond the Cultural Turn: New Directions in the Study of Society and Culture*, edited by V. E. Bonnell and L. Hunt. Berkeley, CA: University of California Press.
- Shelton, James D. 2006. "Confessions of a Condom Lover." *Lancet* 368:1947–49.
- Silverman, Kaja. 1983. *The Subject of Semiotics*. New York: Oxford University Press.
- Smith, Daniel J. 2000. "'These Girls Today Na War-O': Premarital Sexuality and Modern Identity in Southeastern Nigeria." *Africa Today* 37(3–4): 98–120.
- . 2004a. "Youth, Sin and Sex in Nigeria: Christianity and HIV/AIDS-Related Beliefs and Behaviour among Rural–Urban Migrants." *Culture, Health & Sexuality* 6(5):425–37.
- . 2004b. "Premarital Sex, Procreation, and HIV Risk in Nigeria." *Studies in Family Planning* 35(4):223–35.
- Sobo, Elisa J. 1995. *Choosing Unsafe Sex: AIDS-Risk Denial among Disadvantaged Women*. Philadelphia, PA: University of Pennsylvania Press.
- Strauss, Anselm and Juliet M. Corbin. 1990. *Basics of Qualitative Research*. Newbury Park, CA: Sage Publications.
- Swidler, Ann. 2001. *Talk of Love: How Culture Matters*. Chicago, IL: University of Chicago Press.
- Swidler, Ann and Susan C. Watkins. 2007. "Ties of Dependence: AIDS and Transactional Sex in Rural Malawi." *Studies in Family Planning* 38(3):147–62.
- Thomsen, Sarah C., Michael Stalker, Cathy Toroitich-Ruto, Baker Magwa Ndugga, and Peter Mwarogo. 2003. "Fifty Ways to Leave Your Rubber: How Men in Mombasa Rationalize Unsafe Sex." Presented at the Population Association of America meeting, May 1–3, Minneapolis, MN.
- UNAIDS (Joint United Nations Programme on HIV/AIDS). 2007. *AIDS Epidemic Update: December 2007*.
- Varga, Christine A. 1997a. "Sexual Decision-Making and Negotiation in the Midst of AIDS: Youth in KwaZulu-Natal, South Africa." *Health Transition Review* 7(supp. 3):45–67.
- . 1997b. "The Condom Conundrum:

- Barriers to Condom Use among Commercial Sex Workers in Durban, South Africa." *African Journal of Reproductive Health* 1(1):74–88.
- . 2000. "Condom Dilemmas: Dynamics of Protected Sex in High Risk Groups in South Africa." Pp. 39-62 in *Towards the Containment of the AIDS Epidemic: Social and Behavioural Research*, edited by J. C. Caldwell, P. Caldwell, I. O. Orubuloye, J. P.M. Ntozi, K. Awusabo-Asare, J. Anarfi, B. Caldwell, C. Varga, J. Malungo, B. Missingham, W. Cosford, and E. Hollings. Health Transition Centre, National Centre for Epidemiology and Population Health, The Australian National University, Canberra.
- Watkins, Susan C. 2004. "Navigating the AIDS Epidemic in Rural Malawi." *Population and Development Review* 30(4):673–705.
- Watkins, Susan C., Naomi Rutenberg, and Steven Green. 1995. "Diffusion and Debate: Reproductive Change in Nyanza Province, Kenya." Presented at the Annual Meeting of the Population Association of America, April 6–8, San Francisco, CA.
- Watkins, Susan C., Naomi Rutenberg, and David Wilkinson. 1997. "Orderly Theories, Disorderly Women." Pp. 213–45 in *The Continuing Demographic Transition*, edited by G. W. Jones, R. M. Douglas, J. C. Caldwell, and R. M. D'Souza. Oxford, UK: Clarendon Press.
- Watkins, Susan C. and Ann Swidler. 2008. "Conversational Journals as a Method for Studying Culture in Action." CCPR Working Paper CCPR-030-06. *California Center for Population Research On-Line Working Paper Series*. University of California, Los Angeles (<http://www.ccpr.ucla.edu>).
- Watkins, Susan C., Eliya M. Zulu, Hans-Peter Kohler, and Jere R. Behrman. 2003. "Introduction To: Social Interactions and HIV/AIDS in Rural Africa." *Demographic Research*, Special Collection 1:2–30.
- Weller, Susan C. and Karen R. Davis. 2002. "Condom Effectiveness in Reducing Heterosexual HIV Transmission." *Cochrane Database System Review* 1:CD003255.



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