

**Book Review: The political life of an epidemic: Cholera, crisis and citizenship in Zimbabwe –Simukai Chigudu, New York: Cambridge University Press, 2020, pp.346.**

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**ABSTRACT**

Zooming in on the cholera outbreak of 2008-09, Simukai Chigudu explores the social and political origins of the epidemic which, arguably, was historically and politically manufactured. Chigudu reasons that the cholera epidemic was not an isolated, ‘shocking’ moment; instead, it was the final stage of drawn-out, contingent processes rooted in questions of political economy such as the inadequate delivery of public goods, failing livelihood strategies and profound social inequalities. Drawing from the fields of the sociology of disasters, critical medical anthropology and the anthropology of citizenship, Chigudu uses cholera to show how the epidemic unfolded in the urban centres, its social impact, official and communal responses to it, and the epidemic’s afterlives in civic and public life. By examining, and studying the cholera epidemic, Chigudu sheds light on the politics of urban health, notions of citizenship in postcolonial Zimbabwe, social and political humanitarian aid.

**KEYWORDS:**

Cholera, Disease, Zimbabwe, History of Medicine, Public Health

## 1. About the book

Title:	The political life of an epidemic: Cholera, crisis and citizenship in Zimbabwe
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## 2. Review:

Despite cholera being prevalent in Africa, and Zimbabwe in particular, the epidemic has received scant coverage among historians and social scientists. The Oxford University Professor of African Politics, Simukai Chigudu with degrees in Medicine, Public Health, International Development, and African Politics, tackles the cholera epidemic –bringing his rich and eclectic academic training, argues, in a cogent manner that the 2008-09 cholera epidemic in Zimbabwe ‘was a man-made disaster’ (p.191). The argument is premised on the claim that the disaster was rooted in the political decay, neglect of urban, public health infrastructure, and ineptitude by the ruling ZANU-PF party. The monograph links the cholera epidemic with the broader Zimbabwean crisis, a crisis of government, and the collapse of public health infrastructure in the country.

In a daedal manner, infrastructure recurs as a theme and method thus providing a link between dilapidated infrastructure and the cholera epidemic –a link between inadequate infrastructure and perpetuating social inequality that in turn exposes the lower classes to vulnerabilities and susceptibility to cholera. Thus, one gleans an infrastructure-patient assemblage that illustrates the state’s failed policies as well as the inability to provide services and amenities for its citizens. Employing the ‘one disease, many crises’ framework, Chigudu shows how cholera ‘was produced by, and in turn reproduced, a multiplicity of socio-political crises about such concerns as the character of the Zimbabwean state, the nature of structural inequalities in Zimbabwean society, the global humanitarian response to epidemics, and ideational formations in everyday life’ (p.187). His thesis is supported by an impressive array of sources such as the Zimbabwean print and online media that covered the cholera outbreak; interviews with ordinary citizens, the country’s elites such as journalists, and politicians. Secondary sources enable him to paint a picture of the political life of the cholera outbreak.

Chigudu demonstrates how the study of disease and epidemics provide fecund ground to explore, explain, and understand African politics, history, economy, and society. In this laudable monograph, Chigudu shows how epidemics transform society and reveals a lot about issues of biological, therapeutic, and hydraulic citizenship. In this vein, the monograph discusses a multiplicity of issues such as state institutions, citizenship, belonging, hydropolitics and necropolitics; the corporeal and epidemics where the body becomes a site of struggle; political aetiologies, interactions between the state and economy; state, society as well as the political economy of health, well-being, disease, and access or lack of access to healthcare.

Further, public health, citizenship, the political economy of health and disease, social and urban history, international co-operation and disease; political etiologies, political economy, public health, illness and how state failure produces social inequality; urban ‘order and disorder’, reflect the political life of an epidemic. The result is the politics of urban governance where the tensions and competing agendas of the state, and urban municipalities, converged to a devastating effect as cholera became a political ‘football’ which was used to score political points. Therefore, ‘cholera then was not only a public health crisis: it also signalled a new dimension to the country’s deepening political and economic crisis in 2008, which brought into question the

capacity and legitimacy of the state' (p.1).

Lucidly written and in an accessible style, the monograph demonstrates how the ruling party's neglect of health infrastructure and misplaced priorities created a fecund ground for the epidemic. The cholera outbreak was devastating as it 'infected over 98,000 people' and 'claimed over 4,000 lives' (p.86), yet, the Zimbabwean government buried its head in the sand insisting that there was no crisis. Using the cholera epidemic 'as a prism through which to view multiple debates in politics, history and social structures...' (pp.186-87), one gleans an insight into the fissures, tensions, class struggles, and struggles over political legitimacy.

Using a single site, Harare's high-density suburbs as the spatial analysis to conduct urban ethnography, Chigudu's exquisite monograph demonstrates how the cholera epidemic was a result of crisis and poverty in health infrastructure (p.63). However, in some cases, a multi-site and multi-scalar exploration of cholera is visible as the narrative shifts from Harare to Bindura, Masvingo, Beitbridge spilling into neighbouring South Africa (pp.128, 130) as well as to scaling down to treatment centres (p.132). Furthermore, Chigudu scales down to individuals and the corporeal. Using the body as a method, one sees the 'disturbing bodily experiences of faecal incontinence and unrestrained vomiting and horrific images of dead bodies piled on top of each other in makeshift mortuaries...' (p.125). The effects of government neglect of hydraulic infrastructure, public health infrastructure, and the decaying water pipes in Harare is presented as having culminated in patients being admitted to makeshift infrastructure that was '...a cesspool of diarrhoea and vomitus' (p.127). Thus, the diseased body becomes a mirror and reflection of the economic and political affairs in Zimbabwe.

In terms of timeframe and periodisation, the monograph focuses on 2008-09, a period often referred to as the Zimbabwean crisis. The brilliance of the monograph, however, lies in its ability to go back into history, for instance, to the 'municipal revolution' of the 1800s (p.187). By going back to the early colonial period, in the then colonial and independent Harare, one gleans how the origins of the city, its spatial planning and hydropolitics laid the foundation for the 2008-09 crisis, and perhaps future crises to come, suggesting that the post-colonial Zimbabwean state did not transform public health in Harare and did little to provide amenities thus setting the scene for the cholera epidemic. Viewed this way, the political life of cholera in Zimbabwe can thus be understood over a long period, and over both space and time.

The monograph is based on fieldwork carried out between July 2015 and January 2016 in Harare where 75 interviews were conducted with 125 people. Chigudu uses oral histories, formal and informal interviews; a combination of structured and unstructured interviews, informal conversations, and focus group discussions to produce an archive that is rich, thick, and detailed thereby producing fecund ground to study and understand cholera and the Zimbabwean state's response to epidemics.

Interviews were conducted with medical experts, public health practitioners, religious leaders, human rights advocates, medical workers, developmental practitioners, epidemiologists, elites/gatekeepers (politicians from across the political divide), civil servants from the Ministry of Health, Local Government, and Finance; journalists working for the state-run media houses who were critical in framing and reporting on the epidemic, civil society representatives, ordinary citizens affected by the epidemic and lived through it as well as officials from international organisations.

Interviews enabled the author to shift the scale of focus away from the state, the municipality, international institutions, and civil society organisations to individuals who were directly affected by the cholera epidemic in Zimbabwe thus avoiding any elitism, and in the process, engaging in history from below. Thus, one gets invaluable insights and personal perspectives from people who were affected by the epidemic.

Interviews and oral histories are complemented by archival material such as newspaper archives of the state-run *The Herald* –the official mouthpiece of the ruling party in Zimbabwe; speeches by government officials, and other online newspapers ranging from western press to independent Zimbabwean newspapers, that covered the cholera outbreak; minutes of meetings from international organisations such as the United Nations (UN), World Health Organisation (WHO), as well as the International Organisation of Migration (IOM). These were complemented by policy documents, technical reports, and minutes from civil society organisations, think tanks and advocacy groups.

The monograph has five chapters, excluding the introduction and conclusion.

Chapter one locates and situates the study in a historical perspective showing how the 'the making of the 2008 cholera outbreak is bound up with the history of Harare's infrastructure and the politics of creating urban order' (p.37). From its inception as a frontier colonial city, Harare was susceptible to cholera and faced water and sanitation challenges. The situation did not improve with the country's attainment of independence in 1980 as the ruling party neglected service provision in the face of a growing urban population. This presented a perfect storm and conditions for outbreaks.

Chapter two analyses how the cholera outbreak occurred, paying attention to dilapidated health infrastructure and the political infrastructure and architecture that led to a full-blown crisis. The chapter shows state ineptitude to deliver public services thereby endangering and imperilling the lives of citizens who had to face the cholera threat. It also delves into the competing narratives around cholera where the Zimbabwean government refused to declare an emergency as this would be an admission of failure, thus cholera became a political issue framed as a national security concern.

I find chapter three to be the most interesting as it extends politics beyond the local, hence one gleans how the outbreak was framed in light of hostile diplomatic relations between Zimbabwe and the West. Cholera played itself out in language, discourse, and narratives; the ruling party through state-owned media sought to control the narrative by employing the sovereignty and national security card framing the epidemic around the health-national security framework. This was in contrast to international humanitarian organisations that adopted an emergency and 'in the name of humanity' approach (p.101).

The government's initial response was to underplay the outbreak but later shifted towards the narrative that this was a Western plot to destabilise Zimbabwe through a disease, in this case cholera. The chapter provides an interesting insight into the machinations of the government as journalists from the state media were crucial in reporting and framing the outbreak as a plot by the West to destabilise Zimbabwe claiming that Washington '...deliberately created a humanitarian catastrophe to achieve its goal of regime change' (p.111). Therefore, beyond the internal politics, one catches a glimpse into how epidemics become an issue in international relations, and how each party seeks to gain the moral ground and upper hand from them. The government chose to play politics and blamed the outbreak on regime change agents from the West such as Britain and the United States of America (USA) pointing to Iraq where the 'United States had deliberately bombed Iraq's drinking water and sanitation facilities, and recognising that sanctions would prevent Iraq from rebuilding its water infrastructure and that epidemic of otherwise preventable diseases, cholera among them, would ensure' (p.111).

However, beyond state actors were international humanitarian organisations whose understanding of the epidemic differed from that of the government as their view was salvific, their understanding was informed by rights discourses. The Zimbabwean government was in a catch-22 situation where, if it accepted help from these organisations, acceptance politically would mean admitting failure and that there was a crisis of governance. Therefore, beyond local politics, the political life of cholera also assumed an international element as the Zimbabwean government used the epidemic to sell its narrative that this was another form of warfare used by regime change agents in a quest to overthrow the ruling party.

Chapter four deals with the 'salvation agenda' and looks at the politics of cooperation and competition among the UN Humanitarian 'Cluster' system. Chapter five tells the stories as well as lived experiences of township residents revealing the social life of cholera. In this history from below and oral histories, cholera is understood as inducing helplessness, hopelessness, violence, causing relentless suffering, and dispossession (p.156). Cholera had a human face, its impact was devastating and felt across society.

In a field that has been dominated by themes such as labour history, environmental history, the liberation war, and agrarian issues, Chigudu's monograph is a timely addition to the historiography of medicine, disease and epidemics in Zimbabwe.

The study of pathogens, disease, and epidemics is important in the study and understanding of Zimbabwean history and politics, has often been ignored. Recommendation is made for this monograph to anyone interested in African medical history and the political economy of disease in Africa. The monograph is an excellent

resource for both undergraduate and graduate classes on Medical Anthropology, Social Anthropology, social and urban history, history of medicine, medical humanities, African History, and African Studies.

### **REFERENCES**

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