

**Annexure D**

**Example of translated interview in English**

1.Q. Please tell me how old are you?

A. About sixty-one years old

2. (The informant is) Female

3.Q. Are you married?

A. I was married, but now my husband is dead.

4.Q. Do you have children?

A. I have six children.

5.Q. How long have you lived in town?

A. I was born in the village, went to school up to class 8, and then I went to a boarding school. When I finished I started working in towns, but not in big cities like Dar es Salaam. I have lived in Shinyanga, Musoma, Mwanza, Maswa, Tabora, Mpanda, Tanga and now I am in Moshi town.

6.Q. What about your religion?

A. I am Lutheran.

7.1a.Q. What do the Pare understand about health?

A. Nowadays or in the past?

Q. In the past.

A. Long ago people used to take traditional medicine a lot, but now there are plenty of hospitals and health centres and whenever people get sick they run to the hospital for treatment. They use hospital medicine and follow the doctor's instructions.

7.1b.Q. When we say health, what does this word mean to the Pare?

A. The Pare understand the word health as the condition in which someone protects himself by eating foods which protect the body, foods such as green vegetables, fruit, milk, body building foods such as stiff maize porridge, potatoes and bananas. The thing is that now they eat food that is good for their bodies. They use a wide variety of food because at home (in the mountains) foods are different from what we have in town. Most of the time people there prefer beans, milk, fish, vegetables, and so on. All these are more easily obtained there; they grow tomatoes, onions, cabbages, carrots, and so on. All these are available at the market and so they buy and eat.

7.1c.Q. To consider the difference between health and illness; when I say I am healthy, what do I mean?

A. You cannot say you are healthy if you have not been to a doctor to check your health. The problem we have with our people at home is that they don't have the tendency to say, "Let me go to see a doctor to check up on my health even though I am not sick". That we don't do; they look at the physical appearance of a person, for example when I go there they look at me, and say Mama M is healthy, because I am fat, but they don't have any proof that I am healthy or sick. They see I am fat; I look good and they decide that I am healthy. There is no going to a hospital to check, as long as you are not sick. Someone may wake up one morning and say, "Today I am not feeling well," but they don't go to hospital to check what is wrong, they go to hospital when they find they cannot go to work; that is when they go to see a doctor. That is why I say we don't have the tendency to check up on our health as you [Europeans] do. We look and if we see that we are still able to do work such as to cut grass for the animals, fetch firewood, and so on, we are fine. We don't go to check unless we cannot work any longer. For example when I go home and I have lost some weight they say "Mama has lost weight and therefore she is not healthy". But they don't know whether the loss of weight is intentional or not. What they see is that I am not fat and therefore my health is not good.

7.1d.Q. So from your comments I understand that the Pare take the word healthy to mean not being sick, to have the ability to do work and not to lose weight. Have I understood you properly?

A. Yes, that's what I said.

7.2a.Q. How do you personally understand health?

A. It means your body doesn't have any problems like sickness; you eat well; you sleep well; you get all the important things you need without difficulty; you get preventive measures to prevent illness; and sometimes if you get an illness like malaria, to go to hospital for a medical check and to get the necessary treatment. I think this is what health amounts to.

7.3a.Q. Now, please tell me what the Pare do to maintain good health. You have mentioned food, is there anything else the Pare do to maintain good health?

A. To maintain good health, a lot depends on the financial condition of the individual; sometimes someone would like to eat things like eggs and so on, but they cannot afford them. We fall into two groups, the rich and poor. The rich can buy the requirements such as proper food to maintain good health, but the health of the poor is not very good.

7.3b.Q. So do you think that the state of health of a person does not depend so much on culture but more on the financial status?

A. If we are to follow traditions and customs, no tradition says we should not eat, unless you are deceived by people of old times who used to say that we should not eat some kinds of foods such as eggs, milk, and so forth. They claimed that if you ate these you would get some health problems; we still have a few old people who believe this. These days the financial condition of an individual determines the state of health of that person. Even in the village children differ health wise; you find children with bad health because they don't get a balanced diet. Some are just fat but not healthy. They don't get things like fruits, vegetables and so on. They eat only one type of food; those who get a balanced diet, even their skin shows that they are healthy.

7.3c.Q. Mama, what about things like physical exercise, do the Pare do such things to maintain good health?

A. They don't do exercises such as running or sports, but the kind of activities they are engaged in daily are enough to help their bodies, for example they wake up in the morning and walk for about six kilometres to fetch animal feed; when they get back they pick up a hoe and go to the field and work for hours. At home they have to do the other household chores; of the twenty-four hours of the day, if they rest it is for a very short time. Even unemployed men, when they get up they perhaps get soft porridge in the morning, then they take a hoe and work in the field until evening, so this is enough exercise. Another thing is that, where I come from there are hills and so you are either climbing up or down; that is enough physical exercise. The activities that a person does help to keep the body healthy.

7.3d.Q. What kind of food is recommended during pregnancy?

A. Vegetables, beans, eggs, milk, fruits and starch but it shouldn't be too much. Often women in rural areas die because of a lack of these things. Most women in rural areas believe that if a pregnant mother eats eggs the baby will not have hair. There are different beliefs. We advise pregnant mothers not to do a lot of heavy work and to rest enough.

7.3e.Q Is there any food that is recommended for the mother who has delivered a baby?

A. First she is not allowed to go outside, she is on 'complete bed rest' for two or three months. In the morning she gets milky porridge, at ten she gets soup, at twelve she gets food, which is special like banana and meat soup, banana with sour milk, bananas mixed with beans and lots of fat. In the evening around four pm she gets soup, also at night she eats; it will be five times a day. She will also eat fruit, vegetables, and things that will help her to regain her strength. The milk that she drinks is mixed with honey. By doing so she regains the blood that she lost at the time of delivery. Because she rests for a long period, by the time she comes out her body will be good and strong; the baby gets plenty of milk. All this depends on the economic status of the family. The Pares and Chaggas don't differ a lot in the care of the mothers.

7.3f.Q. Do you think people are still doing this or is it a thing of the past?

A. No, these days, if a mother delivers in the village, many are doing just like that, but the majority of those in town, like our children, they don't want things like this. They want, perhaps, for the first week to get soup, you make *mtori* [banana soup with meat in] for her, then she says, "I don't want to put on weight, I'm afraid of getting fat", but there in the village they do just like that up to this day.

8.1a.Q. Let's continue by discussing a little about illness. What do the Pare understand by the word illness? To a Pare who is a sick person? What do they see in order to say that a person is sick?

A. According to them, there are two types of sick people, those who are admitted in hospital, this one is not allowed to do any work because he is sick. The other type is the one who is not well but is at home not lying down; he is taking medicine but going

on with his activities. Therefore to the Pare a sick person is one who is in bed and cannot work.

8.1b.Q. Therefore illness brings problems?

A. If you are sick, obviously you have some deficiency in your body, and this causes a lack of something or other in your family. For example, when the father is sick and he is the breadwinner of the household, his dependents suffer.

8.3c.Q. To the patient himself is it only a physical problem or ...?

A. They will have a physical problem depending on what they are suffering from, for example, a chest problem, malaria, pneumonia or a stomach problem. Now because they are lying down, they have another problem, the problem of worrying. They think, "Here I am lying down here and I don't know what is happening at home or work". This worry affects their recovery. If it is a wealthy man whose absence does not affect the family income he has more confidence.

7.1e. / 8.1b.Q. Looking generally at these words, health and illness, because you have lived in many areas, do you think the Pare have a different attitude towards these words from the other tribes?

A. There is a big difference because most of the places I have been people have beliefs that are different from the Pares. For example in Tanga, when someone becomes sick, even before they go to a hospital doctor to diagnose the problem, they rush to a traditional doctor. They say, "Perhaps Mr Massawe is responsible for my illness" [meaning he may have bewitched me]. They go to a witch doctor to find out why they got the problem. They don't go to the hospital until the problem is very big. Another example in Mwanza when someone gets sick they don't take them to hospital at first, they give them herbal medicines without even knowing whether the medicine is appropriate for the illness. For us in Pare district there is no such thing; may be in the past but not now. They like to go to hospital whenever they have a health problem, they don't trust traditional medicines because they are not sure of their safety.

8.4a.Q. How do Pares care for the sick? Please can you tell me of any particular Pare traditions?

A. These are two types of things that I saw about Pares. If the sick person is a woman and she is at home, all the women from the neighbourhood come to assist with the household activities, such as feeding the animals, cooking, and so on. If the woman is admitted to the hospital, the women also take turns in helping both at home and also caring for the patient.

8.4b.Q. This is a very good thing. Do you think the Pare do these things more than other tribes?

A. The other tribes also do this, but we Pares take it very seriously, and even today it is happening.

8.4c.Q. Why do you think this pattern of behaviour exists? For myself, as a European, when I am sick it is the sole responsibility of my husband to care for me; the neighbours are not responsible.

A. That is what happens in Pare district. If the sick person is a man, and he needs personal attention the men from the neighbourhood take the responsibility to wash him, dress him and so on, but the food is the responsibility of the wife. This is the case whether the sick man is at home or at the hospital; they take turns.

8.4d.Q. So, do you think there is co-operation?

A. There is a lot of co-operation when someone is sick and even when a woman has just had a baby. In the past, because I had two of my children in the village, the women used to come, the old women washed the baby, my aunts and others. When you have just had a baby, they treat you like a patient.

8.4e.Q. Do you think this system was the result of a human need or ...?

A. The system began in the times of our ancestors, I don't know how it started, but they are things we found already existing.

8.4f.Q. Maybe it originated from the fact that people thought, "If your friend has a problem you help him so that they help you when you get your problem"?

A. I think so, yes.

8.4g.Q. You have said that the Pare like to help one another when they are sick, what about visiting? Do they visit their sick?

A. In the visiting hours, morning, afternoon and evening, people come - family, relatives and friends - from many different parts, far and near; more than ten people come to visit at one time.

8.4h.Q. Why do you think this is happens, Mama? Europeans don't do this.

A. This is our custom from our ancestors, which we follow because we think it is a good thing to help each other, especially when some of us are sick.

8.4i.Q. What foods do the Pare use when someone is sick?

A. It all depends on the preferences of the patient. When they bring tea to the patient in the morning they ask the patient what they should bring in the afternoon. For those who are at home, they just ask him what he would like for lunch or dinner and so on, and they can say it, such as milk, bananas, stiff maize porridge, rice, meat. A patient is not given just any food, but food that is helpful for his condition.

8.4j.Q. When a child is suffering from measles the Chagga give them spleen. They crush it and give the pulp to the sick. Do you have anything like this?

A. When children have measles we give them the leaves of a plant called *mkwaju*. They squeeze the leaves, and the juice is give to the patient to drink; some of it is put into the bath water. They slaughter a young chicken and make soup, and they give this to the sick child. They say the soup is good, and it helps to bring the illness out. The leaves of the *mnavu* plant are also a remedy for stomach problems.

8.4k.Q. When there is a patient at home, let's say a child and the mother asks, "What would you like for lunch?" and the child says he doesn't know, what is the mother supposed to give?

A. The mother gives him the food that they used to like before becoming sick. If he fails to eat, she tries some other foods and sees which one the child likes most.

8.4l.Q. Food like soup?

A. She can prepare *mtori* (soup mixture of bananas with a little meat) or *kiburu* (soup mixture of beans and bananas). Sometimes she mixes milk with bean leaves or



pumpkin leaves, crushed and mixed with the milk. So, when you eat it, you get milk plus the vegetable in it. When I was small I used to like this food a lot.

8.4m.Q. Do the Pare have anything they use as a home remedy?

A. There are many medicines that my children and I like a lot; one is called *mvoro*. It is very similar to quinine, it is boiled - the leaves - and the water is given to the patient. There is another medicine called *mrumbavasi*, it is a very effective medicine to treat diabetes, this is also prepared the same way as *mvoro*. The patient is given two spoons of the medicine in the morning only. This is also used to treat cows. Another one is *ikongwe ibada*. For the treatment of wounds, you grind it and apply to the wound, leaving it there until the wound is healed. There is a variety of *ikongwe* that has a slender stem. This is used in the treatment of stomach parasites such as tapeworms, roundworms and so on. There are many plants that are used to cure illnesses.

8.4n.Q. Do you think the Pare still use these medicines?

A. Even today! Pares, from the old days, at the time we were growing up - although we were born in the colonial era [and western medicines were available] - often the hospital medicines were not much liked. My grandmother and grandfather used to know lots of herbal medicines.

Honey, even if the child is burnt just now, don't put anything else on it, take honey and put it there. Or egg, raw egg; take it, beat it, spread it on the place where the child is burnt and there won't be a wound any more. Or the hair of a hare, if a child is burnt take the hair of a hare, clean the wound, don't remove the skin (of the patient); you wash the wound, you take that hair of the hare and you apply it there. Then he will stay with that hair until the day the hair separates, and the wound is healed. Today, the young girl who passed by just now wearing a red jacket is my granddaughter, the daughter of my child. She got burnt on her hand here. Her grandfather took the hair of a hare and put it here; she didn't go to hospital, nor did she get a temperature, nor did we give her any other treatment. Up to today, the hand healed and there is no sign to show that she was burnt.

So there are a lot of things that we must look into and put them down in writing that this, this and this help this, this and this, but we are not taking care. And those who were explaining are no longer there. That means we run to hospital. But if we had

people who could put these things down in writing there are many plants that provide medicine.

God has given us many plants that are medicinal but we don't know them. But I'm surprised that these days our European friends leave their places, they come here and take ... they take these herbal medicines, they go back home and make it into medicine and bring it to us and we buy it ... really, they take plants, the bark of trees, they go and prepare it and bring us pills from our own trees here.

8.4o.Q. Using traditional medicines, is this practised up in Pare district or here in Moshi town?

A. A Pare is a Pare, whenever we get problems we go, for example the *mvoro*, even my sister in law, whom you saw just now is going home and I have asked her to bring back some *mvoro* because I have noticed some malaria signs in the house. Many people use *ikongwe*, *mrumbavasi* and *mvoro* a lot, even today.

8.5a.Q. What do the Pare think about the cause of illnesses?

A. They claim that the cooking oil we use nowadays causes high blood pressure. They also claim that the foods sold in shops have things that cause illnesses. I don't believe that the claims are true; they even claim that spices used in cooking pilau can cause high blood pressure. I don't see any reasonable truth in these claims; the illnesses and weaknesses in our bodies are a result of lacking the proper nutrition we need to keep us healthy. Some claim that their hearts beat fast when they drink tea with powdered milk. The fact is that the Pare become weak because they don't eat well.

8.5b.Q. What do they understand about the relationship between dirty surroundings and diseases?

A. They know that being dirty can bring diseases, they are very careful about that. Most houses in Pare district have toilets, and they consider any house that has no toilet as a big source of diseases. They work very hard to maintain cleanliness. Sometimes they are better than us who live in towns in the question of cleanliness. People are afraid of diseases because, among other things, they prevent them from working. If they discover a neighbour who has no toilet and her children are defecating anywhere, they talk about it a lot. Therefore even if the mother does not care much about the safety of her children, she feels bad because people tell her off.

Another thing is that they know that although the drinking water is clean, it can still cause diseases, so they boil their drinking water; this is because the water comes from streams.

8.5c.Q. You have told me about food, and cleanliness; do you think there is something else that causes diseases? What do Pare think?

A. Another big thing that I see is overworking themselves without resting; this is bad for the body. In Pare they plant three times a year, and most farms are far away from the house. After hard work on the farm, they have to do all the hard household chores; the body does not get any rest. The food itself is not sufficient.

8.5d.Q. Can ancestral displeasure cause illness?

A. Oh! As for me personally I don't know because we don't have that tradition in our family, but I have seen that other people maintain traditional practises, they say that because today this one is very ill the ancestor is angry, he hasn't been taken anything, and so they take him a goat, they take milk and meat, this and that, they take it to the ancestor's grave to pacify him so that he stops being angry and people don't get ill.

8.5e. Q .Do you think it is something that is more common with Chaggas or Pares?

A. No, even the Pares are doing it. For us up there at home there are those people who are called chiefs, they have their areas, for example if you go up there to Usangi and you ask, "Where is the chief's wood?" they will tell you "It's over there". If you ask, "Where is the Wasangis' wood?" they will tell you "It's over there". It's a wooded area and if you go there, there are many traditional things.

Now they go there, and every day it must be clean, and they say that the wood makes a loud noise, it makes a big sound, but I have personally never heard that wood making a noise, but they say that they (the ancestors) want something, and so, they will take meat, milk and lots of other things. Ladies don't go there, it's just the men. What it is they go to do we don't know.

So these things are still there; they say that the ancestor is angry; they say that that child is very sick so the ancestor is angry; they take the child right to the grave of his ancestor; they will pour out milk there, I don't know if it's with blood, and whatever else. They come back with the belief that that child will get better, because they have already taken those things which the ancestor was needing, but I'm not personally

sure that they work, that if the child is sick with pneumonia and is not taken to hospital, that he will get better by taking those things to the ancestral grave. I really don't know; I've not done anything like that. I have seen that people are doing it.

8.5f.Q. What about witchcraft? Between this and ancestral worship, which one is practiced more, in the Pare tribe? For example the Chagga, when someone gets sick, it might be assumed that some woman bewitched them. What about the Pare? Which is more practiced, witchcraft or ancestral worship in the Pares?

A. This thing of the ancestors becoming angry, nowadays, it is not much believed in, but witchcraft is very common. They say so and so quarrelled with so and so, that is why they are sick. Some people are known for threatening other people's lives.

8.5g.Q. You think that witchcraft is still practised in the village. Has it finished in the town?

A. Yes, witchcraft is still here in the town. No one should cheat you that they don't practise witchcraft; in town they practise witchcraft a lot. Witchcraft is here and especially those Swahili friends of ours, [the town dwellers who only speak Swahili and don't have a tribal language] especially the Muslims. In Pare district long ago people really thought that Pares are doing these things, because of the way they increasingly went to the coast. We were afraid; we say that people who live near the coast know a lot about demons, spirits, and things to do with witchcraft. At home, if you see there is someone of this type, then its those Muslim people, and particularly those who make themselves into sheiks or trainee sheiks, they are people who do amazing things of this sort, but witchcraft is still here and our Muslim friends are doing these things. With Christians it's just a few; there are those whose Christianity is 'half-half', but witchcraft is still here; its hasn't finished at all.

8.5h.Q. Do you think witchcraft was practised in Pare in the old days or is it a result of mingling with other tribes?

A. After mingling with other tribes. When we were alone, only Pares, there was no such thing, now there are more than ten tribes who moved to the Pare district.

8.5i.Q. Do you think the town living Pare have links with their people in Pare district? Or have they separated from them completely?

A. No, they have not separated themselves; any Pare living in town has links with his people in Usangi, Same, Ugweno and so forth. Very few have completely moved out; those who have moved out but still have relatives there have strong connections with them. The best example of this is during Christmas or Eid holidays; wherever a Pare may be, however far, he still comes to Pare district to celebrate with relatives. Also when there is a funeral, many leave instructions that when they die they would like to be buried in Pare district.

8.6a.Q. What disease do you think the Pare fear most?

A. High blood pressure, cholera, AIDS, diarrhoea, but other diseases such as coughing and so on, they fear them, but not as much as the other ones.

8.6b.Q. Do they fear things like mental illnesses?

A. Not a lot, first, because not many suffer from this, they know that there are certain families with this problem running in it. You find them laughing, listening to and joking with such people; they only run away if they are aggressive.

8.6c.Q. What about barrenness or inability to bear children, do they fear this condition?

A. They don't fear but they become very sad, they ask, "Why has so and so been married for so long but she has not been able to have children?" My father's family is an example; two of my cousins have never had children of their own; another one of them is already dead. Traditionally, we Pare give children to the childless; we say, "Since you are not getting children of your own, may I give you one so that you will not be so sad?" If she agrees the child is treated as her own in all ways, schooling, feeding, marriage and everything. My cousins were given three children each; we do this when more than ten years have passed without children. One of the adopted children has finished university.

8.6d.Q. You told me that the Pare fear high blood pressure, cholera and AIDS. Why do you think they fear them?

A. They fear them because they don't know much about them or what causes them. First, the act of seeing someone fall down with blood coming from the nose and rushed to hospital scares them a lot. Long ago we believed that high blood pressure

was caused by obesity, but nowadays even thin people get it. They used to say that fatty food or even too much meat caused this, but the other diseases, AIDS and cholera, they see people losing their lives very easily from these. They fear AIDS because they know once someone catches it they never recover. They know malaria is curable, because there is a remedy; also a cough; but cholera is different because you may get it when you are far away, for example in Usangi, and before they can bring the remedy from Moshi, you are dead. There is a remedy for high blood pressure, but it is not easy to use it, since we don't have the tendency to check our health, you may have a problem without knowing.

8.7a.Q. What disease is most common in Pare?

A. Malaria, in general, but children suffer more from coughing; may be it is due to the cold. Also, while chatting, I discovered that many people are suffering from diarrhoea and vomiting, but not cholera. I don't know, but maybe they have forgotten to boil the drinking water or they are eating dirty food.

8.7b.Q. Do they use mosquito nets?

A. To tell the truth I didn't see them there; mosquitoes are not many. In the old days there were no mosquitoes; those who can afford to, buy mosquito spray.

9.3a.Q. Do you think the Pare use hospital doctors or traditional doctors more?

A. Nowadays, when most Pare get sick they rush to hospital. So, long ago, when people got sick they would go straight to a traditional doctor, mind you, a traditional doctor is not necessarily associated with divination or witchcraft; there are those who use traditional methods and herbs.

9.3b.Q. Can you please tell me about these traditional healers that Pares use?

A. I'm not sure, but there are those traditional birth attendants for those ladies; that I know is there. And there in the villages and even here in town I think that many ladies are still using them to deliver their babies. But if you go to a traditional healer, it means there are traditional birth attendants and there is the traditional healer. There are two sorts. There are those traditional healers, for example, we have those that call themselves "ngetwa" and there are "ngoka eleven"; the ngoka and ngetwa are those traditional healers who treat patients with traditional herbs from the bush; they don't cut people. There are those who cut and those who give medicine. Now the ngetwa

and those *ngoka* give medicines to treat; perhaps you have rashes, perhaps you have a headache, perhaps you have high blood pressure, I don't know what is wrong with you. Those traditional healers are treating people.

This is something which is not lost, we still have traditional doctors who are practising, and personally I reckon they are practising because they know how to treat people, and there are still people who go to the traditional doctors when they think that if they go to that traditional doctor, he will treat them and they will get better. And many of those who use this method of going to the traditional doctors, however they treat, it's this that people demand when they are ill.

If I have a headache because I am bewitched, perhaps Mr Massawe is bewitching me, let me go to the traditional healer so that he can treat me, and now because that doctor wants money, he will tell you that it's true Mr Massawe has bewitched you. But it's not true that Massawe has bewitched you; perhaps you have a problem with malaria, or you have a problem of blood pressure, or you have your neuroses, there, there is no one who knows, and because that doctor is looking for money, he will tell you that Mr Massawe has badly bewitched your child there; he is sick because the neighbour passed there and gave him an evil eye.

There are people who go there even like us Pares who live in town there are those who follow these ways instead of seeing that the child is sick or he is sick. Or his relative who is sick and needs taking to the hospital to be examined properly, but they will take him and send him to the traditional doctor.

There he will be cheated by the results and that sick person will die before going to hospital, or many times when they see that now he has got worse, and that the medicine he is being given by that traditional doctor is not helping, they take him to hospital, but by the time they reach the hospital, they will already have delayed and so they have lost time there with the traditional doctor. So these things are still there, it takes a long time, I think, to lose these things.

You know I have often been in the villages with my activities. I work in the village, and so I know more than those who live in town. For example, if you go there in the villages, you will find that people's life there in the villages is still very hard, and there are people there up to today, who don't know the thing which is called education which is here in Kilimanjaro. There are many people, if you go up there in the villages ... you will meet children with kwashiorkor, and marasmus, and as you keep looking you feel like you want to cry; I don't know what to do. Here in Kilimanjaro there are

people if you go with a car like this they will be very surprised, right here in Kilimanjaro we are still far behind, we are still far behind.

But there are good things to be done with people, for example medicine from various trees; if we can learn the good things and leave the bad it would be progress.

And you can't believe that even this disease of AIDS, people are still taking their patients to the traditional doctors, that they go to be treated because they were bewitched. What do they do ... I mean a lot of people are dying there in the villages from AIDS without being recognised because when they start to get ill, they will say, "A certain person has bewitched him", and they will take him to different traditional healers. He will be taken to one traditional healer and he will be cut with a razor blade, and if another patient comes he will be cut with the same razor blade and they will spread that disease to each other.

10.2a. / 10.1a.Q. One objective of this study was to improve the service given by nurses. What do you think we should do?

A. Do you mean the services?

Q. Yes. I mean at the hospital, the same services are given to all. Do you think we should consider tribal differences? For example the Pare and Masai are different in the way they look at things.

A. Whenever people from various tribes are admitted together in hospital, the nurse passes and says, "Excuse me, the food is ready"; they never force them to eat any foods. If you don't eat a certain food you are given something different, and because there is a system of taking food to our patients we ask them what they would like to eat. We bring them what they like to eat, because patients have the idea that they can't digest hard foods, because they are not working.

10.2b.Q. If we could get some soft food, do you think it would help?

A. To tell the truth, it is not good to give a patient who is in bed stiff maize porridge and beans. I think it is better to give them soft foods; we give them foods that we think are cheap to buy, and that is why they don't like our government hospitals, for example KCMC [Kilimanjaro Christian Medical Centre, a mission hospital] they have started to give them a variety of foods, but in Mawenzi [the district government hospital] they give them stiff maize porridge every day. Now a patient who is



admitted for months finds this difficult, it would be good to ask our patients what they like to eat.

Fortunately the one time I was admitted into KCMC I was in the private ward and I got the private ward food. And the private ward food is very good. I'm not sure about the food on the other side, but I have seen that they give out stiff maize porridge and beans; I don't know if they vary it sometimes and bring rice; I don't know. People are paying. It's good if people get a variety of food. They can get *mchicha* [local green vegetable like spinach] fish, or meat sometimes.

10.2c.Q. Do the Pare like fish?

A. They eat it a lot. We eat all foods, we eat stiff maize porridge, we eat the local green vegetables, we eat beans, we eat sweet potatoes, yams, Irish potatoes, *makande* [mixture of maize and beans], rice, fish, meat, we eat chicken, even pork. So it is the person who chooses, today what will I eat. But really these days and even there (in the mountains) in the old days when we were small, we were eating different food than what we are eating these days. Also cassava porridge and banana flour porridge; there is this particular thing from bananas; it is dried and then it's pounded and it becomes flour and it's made into porridge. It's very nice. It's very good. Even soft porridge. If a mother has just delivered, the soft porridge she'll eat is this banana flour porridge. These bananas are dried, pounded, and made into flour, and it's this that the mother mixes into soft porridge, and she eats; it's very good. Then also there is milk. They are using a lot of milk, especially sour milk. They drink a lot of milk

10.1b.Q. What about greeting patients according to cultural traditions?

A. When you go to help a patient it depends on many things; some nurses when you go to see your relative at the hospital, they wear gloomy faces that make you think that you are bothering them; some though have happy faces and even greet you. They tell you how your patient is doing; some are good and others even when you greet them, they don't answer you.

10.2d.Q. Do you think that there is anything else that we can do to improve nursing services?

A. Yes, because in the old days I remember when I was not little, I was a big girl, if you went to see your mother who had just delivered in the hospital in the morning, as

you arrive you find that already the nurses have boiled water, they have already washed the mother and the baby is already bathed, and if there is milk or tea you will find that the mother has already been given tea, in the old days, but the way that we are now going means that this behaviour is no longer there. These days, even if a lady is going to hospital to deliver there is no service except for that of the theatre or labour ward for delivery. There is not even a pad, there are no blankets to wrap the baby in, and there is no provision of anything that is required. As a pregnant mother you are told to go with all of your requirements; it has become a hospital for helping you to deliver, but it isn't a hospital to help you with anything else.

I remember in 1973/1974 there was a sister of ours who delivered at KCMC. When we arrived we found that the baby had been given everything including clothes and baby blankets, baby sheets, she had been bathed, she had been prepared by the nurses, they were doing their activities as they should, and when they left hospital to go home the baby was given a baby blanket, nappies, I don't know what, here at KCMC, but these days I personally think you see in the maternity ward, as I've already told you, the service .... there is nothing ... the lady will go with her cloth to wrap up the baby, the soap, everything, now you begin to ask yourself "How was it like in the old days?" You will find many people don't have the money; they are delivering at home; they get problems, some even to the extent of losing their baby. It's because of the resources needed to go there to deliver; it requires money.

10.2e.Q. Do you think that private hospitals are better?

A. I haven't visited those hospitals, as far as the maternity care goes, so I don't know about the services that they provide. But if private hospitals are as we see them, I say that the old system of nursing is different from the current one. They are not interested in saying "I am serving the patient"; there is a way of serving the patient and loving him, and knowing that this one has problems; staying with him and quietening him or advising him not to do this, so that he sees himself as being in the hands of people who are helping me. These days these things are not there; it has to be said that this attitude is not there now; it's not there with our nurses.

These days, the language they use to the patients is bad. When the patient arrives at hospital he thinks "I will recover with the words that I will meet from the doctor and nurses". But when the patient arrives and meets with bad language that makes him feel uncomfortable; he won't recover because he's already been shown that there is

no-one to serve him or comfort him, but if you arrive there and you start to feel hurt, you wait in casualty for more than five hours. You don't get any service; I mean many people arrive there, they open a file, they see that they are not seeing the doctor, they leave and go to the private hospital.

But it is different from our friends abroad. Fortunately, I have travelled a lot, to England, I've been to Holland, and I've been to America. Our friends who are looking after the patients, really, you can get better without even being given any medicine, because the way you are received there in the reception area, you personally feel that you are happy, and now, I have arrived in hospital, and I am someone special in this hospital; then going in to the doctor he will try to understand your problem until he discovers what is the problem, and even if sometimes you are ill because of stress; but I don't think there is anything like that in our hospitals.

I personally don't know if there are doctors of that sort like here, there are a few, and nurses like that are very few. When I went there to Manchester, unfortunately I caught a cold, it was a very cold period; I was taken to hospital, and I was very surprised, the way that I was being looked after with only a cold, and when I went home, I discussed with my child, and I said to him, "If we were getting services like this in Tanzania, people wouldn't die. They would die, but there will be very few of them".

I also went to America, and I had a problem with my hand, it swelled up, a lipoma, and when I went there I was examined to the extent that I found that I couldn't be ill any more, I had recovered! I was looked after extremely well. When I went they examined me for any problems of the heart, kidneys, everything. I found I had recovered, without any problem. Now if you compare with here, I don't know, our hospitals really, for service, especially for pregnant mothers, it's a problem. It's a big problem, but it wouldn't be a problem if our nurses were carrying out their nursing responsibilities.

There are ways nurses should behave. And ways that doctors should behave. And nursing ethics. And medical ethics. But today's nurses don't practice these ethics. Nursing is a call. Even medicine is a call. I have finished form four or form six, you plan for me that I should go and study to be a nurse but I have no calling to be a nurse; I can't serve people. I go there in order to work, to get money. But I will not go there to serve people or care for people. And that's why you see the way that bad language has become commonplace, because those that are there are there for the wages, but they have no call to be a nurse.

I personally think - I don't know about you teachers - I think you should sit and discuss something and advise the ministry about the selection of students.

Finishing remarks:

Respondent: I don't know if I have helped.

Interviewer: Thank you very much. Ah, I'm sorry that we have troubled you.

Respondent: No, it's been no trouble.