

# **Field Journals: An Introduction**

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This introduces a set of observational field journals. The observational field journal project was motivated by the interest of the MDICP in the content of informal conversations in social networks. The central aim of the MDICP was to learn about informal conversations, yet each of the other sources of data (household surveys, semi-structured interviews) is limited. The household surveys provide, for a large sample representative of the rural population in the southern region of Malawi, a great deal of information on the characteristics of those with whom the respondent reported talking about family planning or AIDS. The surveys, however, provide little information about the content of the conversations. To complement the survey, in 1999 we conducted semi-structured interviews with a randomly selected sub-sample of those in the household survey. Respondents were asked about conversations about family planning or AIDS that they had had with friends, and with their spouse. These provided some information about the content of the conversations, but only as these were recollected. In addition, the reports were usually so laconic that they sound like a summary rather than a conversation. Finally, both in the surveys and in the semi-structured interviews the respondents were always aware that interviewers were working for outsiders, which is likely to influence their reports (Watkins, Zulu, Kohler and Behrman 2003).

We thus turned to observational field journals, which we thought might better reflect informal conversations as they occurred. We asked several residents of villages in one of the MDICP sites, Balaka, to recall and write down conversations about AIDS (and later on, religion) which they heard or took part in during in the course of their daily lives. These people, henceforth known as journalists, were among the thirty-odd interviewers who

worked with the MDICP on the 1998 household survey. Because they were so good at following the instructions for the survey, demonstrating independent initiative and problem-solving in the field, and showing a good grasp of the issues that concerned MDICP, we selected them again in 1999 to do semi-structured interviews. Subsequently, several of them also worked as interviewers for individual members of the project on sub-projects. They were thus very familiar with the aims of the project.

The following table provides basic information on the journalists.

<b>Name</b>	<b>Sex</b>	<b>Age</b>	<b>Marital status</b>	<b>Occupation</b>	<b>Economic status</b>	<b>Other</b>
“Alice”	F	Mid-30s	Divorced, 3 children	Farmer	Low-middle	Mainstay of extended family, sole support of 10
“Sophie”	F	Late 20s	Married during course of project	Housewife	High	From local landowning family, married soldier and moved to army base in town
“Simon”	M	Late 20s	Married, 2 children	Peasant farmer/fish trader	Low-middle	Although married, socializes extensively with young single men
“Derek”	M	Late 30s	Married, 1 child	Village health assistant	High-middle	Runs educational programs in villages promoting preventive health
“Diston”	M	Late 20s	Married, 1 child	Peasant farmer/day laborer in town	Low-middle	Divides time between town and village, travels to Zimbabwe for work
“Michael”	M	Late 20s	Single	Student in large town	High-middle	Dresses well, socializes with local elite

All of the journalists have completed secondary school; one began further training over the course of the MDICP. Although those with secondary education typically try to benefit it by

getting a job in the city, most of the journalists are still living in a village, either because they were not successful in getting a job in a city, or out of personal preference. Four of the journalists were particularly active (Alice, Simon, Derek and Diston), the others contributed only a few journals

Because we did not want the journalists to edit mentally the conversations they overheard, they were not trained but rather simply asked to recall and write down anything they heard about AIDS. Some incidents are conversations they overheard on a bus, walking around the community, shopping in the village centre, at a bar, etc. Others are conversations they participated in, for example when a group of men that include the journalist are drinking at a bar, or at a funeral. Some journals present a sermon the journalist heard at his or her church or mosque, some a radio program on AIDS. One journalist, who is the only one who is employed, attends health meetings in conjunction with his job, and writes about what was said about AIDS at these meetings; another journalist is active in several community groups, and writes about their meetings. Some conversations are written as if recalled verbatim, with each speaker identified and exact words attributed; others are written as summaries or condensed versions of longer conversations.

We paid \$30US for a journal. The journals were written in school notebooks, in English, and typed in the U.S. One notebook is equivalent to 10-15 pages of single –spaced typewritten text (depending on the handwriting of the journalist). Not many journals were written between 1999 and 2001. After the fieldwork June-August 2001, however, the production of journals increased. The following year was quite difficult because grain prices soared, due

both to famine and, it was reported, government corruption. To increase the pages that they could fill, the journalists appear to have sometimes used, and perhaps sought, “filler.” For example, one journalist was considering joining the Jehovah’s Witnesses, and wrote at great length about the speeches of those trying to convert her; she may have even asked them to visit her more than she otherwise would have done had she not been seeking journal material. If she was given a copy of the journal *Awake*, she sometimes copied long, and boring, articles.

There were also some changes in topic. In 2001, we became curious about why so many Malawians were not infected with HIV (the proportion of adults estimated to be infected at that time was approximately 16%, based on anonymous testing at antenatal surveillance sites). One possibility was that many are faithful to their spouses, despite the impression of widespread sexual activity. Thus, we asked journalists to pay attention to conversations about faithfulness and to religion, which we hypothesized might be related to faithfulness. We also asked the journalists to pay attention to conversations about sexually transmitted infections other than HIV, e.g. gonorrhea.

Reliability: We deliberately did not specify questions, since we did not want the journalists to either steer the conversations nor to mentally edit their recollections. The importance of the pay for the journals made us alert to the possibility that journalists would instigate a conversation, or simply make up conversations in order to fill a journal.

Some forgetting almost surely took place, and some editing of the recollections as they were written probably occurred: both of these are also problems with more formal procedures of data collection. It is difficult to tell whether a journalist steers the conversation to topics that would provide material for a journal or whether the conversation would have turned in that direction if the journalist weren't keeping a journal. For example, one journalist often asks his friends what a married person should do if the person thinks he or she is infected but the spouse is not. This is not a question we asked the journalists to pay attention to, but one that we think is very salient for the journalist. On occasion he tells his conversational partners that he has had extramarital partners, which, in that context, means that he is likely to be worried about being infected and infecting his wife. . Although it may be that he is showing that he is "one of the boys", it is clear that he is concerned about sero-discordant marriages. (He is evident that he is fond of his wife. For example, when he came home late from a trip to the market because he talked a long time with the tomato seller, his wife is irritated and says it's too late for lunch, he'll have to wait for dinner. He responds jauntily, "But any time is lunch time!", and that anyway he was late because he was doing his research. His wife says "That's what you always say when you're late, how do I know you don't have another wife some where?" But they both then laugh, and she goes to make lunch).

Overall, however, the topic of AIDS is typically broached not by the journalists, but by other participants in the conversation. In the journals kept by the males, it is often a setting in which several young men are chatting, the topic of girls or women comes up, they talk about sex and then about AIDS. The overall impression of spontaneously occurring

conversations is strong in the journals. This does not mean, however, that participants are not managing their presentation of self. Even though the journalists are no longer carrying the visual signs of being a research assistant, they still may engage in identity management and self-presentation in their other social identities, such as being “one of the boys”, a loyal husband, etc.

Most of the incidents in the journals provide a strong sense of overhearing actual conversations. Below is an incident from one journal (the names have been changed).

Situation: It was around 3pm when I set off on my journey to [the] Trading Centre. Upon arrival in the trading centre, I met Moses, my certain friend who went to Blantyre to live with his parents and attended his primary education there. He had just dropped in today from Blantyre to see his parents. So we just happened to meet inside the market. We had ever attended school from at primary school at D. School, and since then we've been together.

When I saw him I went to greet him. And he was happy to meet me and he reminded me that we had missed each other for quite some long years, probably six years without meeting and I agree with him. He took my hand and I followed without saying anything. He directed me to a certain shop where cold drinks are sold and he ordered two soft drinks. I took Coke and he took Cheribum. When we were taking the drinks, he asked me whether I am married now. <Since last saw each other, when we were both at Primary level, is probably now ten years not as he said 6yrs, but 10yrs since 1992 to 03.> Then I answered him that I am now married with two children as well and currently we are living together.

He laughed and said ‘up to currently living together,’ I did not ask you my friend? And he was laughing, friendly I hope. Then my friend bought a cigarette from this shop. And then I answered that I am trying to make you understand that I am not even shy to say that I am married. My friend said that, “You did a good thing.” <He offered me a cigarette, but I refused saying that I didn’t take cigars.> and he went on saying that marrying nowadays is a very good thing to be practical. The owner of the shop also recommended this and said that it is very important for a human being to be married or get married nowadays because the world is not good. There are a lot of diseases around like *Chindoko*, *Ntayo* and *Maboma*, so that one who is healthy can be affected and die of that <he did not say AIDS here to be precise>. My friend also said that, “You are saying that the truth father, nowadays, the world is not ours compared with that of the old times in your days. < We were talking softly, drinking here softly>. The owner <I believed that he was 60 years, but he was energetic>.

The owner began talking [portions omitted].

He said later on that the only problem which I observe nowadays, the change which I can distinguish the world of today and that of the past, is that in those days even though life was poor, but living standards were good because there was total respect for the future and this is not happening nowadays, that you find that they are likely to beat their parents. He went on saying that you may find that a friend of yours is going around with your wife <he said lastly *Kukudelera* in Chichewa – means disrespecting>. Moses and I agreed that the old man was telling the truth; it is happening. He went on saying you're living in a happy and enjoyable world full of riches, but you're living in the world of regrets and desperation, because there are a lot of life scavengers that clings and destroys lives of people.

He continued saying alone that nowadays the dangerous thing which we all get afraid of is this incurable disease which has come nowadays from the Europeans here in Malawi, known as AIDS. He said even the word of this disease is written in English and pronounced in English as well. <We laughed and he could only smile>. This time he mentioned AIDS himself. Alli said, "You are saying the truth old man, that's why I say marriage nowadays, to my side is that it becomes unsatisfactory because of this AIDS problem. The old man (the owner of the shop) asked my friend Moses said, "Are you not married?" Moses answered, "NO! I am not married because I am afraid I'll get AIDS because I can come to marry an unfaithful woman/girl who will be proving herself to be unfaithful, while living with me and she will bring AIDS to me and I die faster than her and I will leave her happy, enjoying the world."

The old man said, "Yes, you are thinking well because of this AIDS people should be thinking properly about good things to be doing – instead of going with sexual partners. These are the days of protecting oneself, to prevent oneself from catching it. <Meaning AIDS> He continued that in those days, the dangerous diseases were *Ntayo* and *Kanyela*, which killed people when the victims were too shy to reveal their problems fast to old people or parents; thus when one had this problem, say suffering from *Ntayo* and found that it was *Ntayo Wozizila* <Chichewa meaning – the young man slept with a woman who has given birth 3 to 3 1/2 or 4 months ago> he said but if the man is not shy enough [not too shy] to reveal this, then parents or other older people can give him a traditional medicine which makes him heal faster by vomiting the bad odor he has sucked from the woman who has just given birth.

He also said that when this medicine is working, the man also experiences frequent urinations and they are yellow in color, but first of all urination the white bubble urine, like the solution of soap. <This time I had finished drinking my Coca-Cola – cooke- soft drink> I was waiting for my friend to finish his drink. He had delayed drinking because he stopped drinking and dedicated himself to smoking first, and this time he stopped smoking and dedicated himself to drinking his soft drink and finished it. Moses said that nowadays that's why I will not marry. Probably I will marry. But unless I will see that the wife is a faithful wife, and not as other people are, especially we the black people.

The old man said that the problem of the disease AIDS for example it has affected the whole world and you will be late to marry because you will not differentiate because people are for example, still dying of AIDS and are still contracting it and are spreading it at the same time as well. He continued saying that and at the time you decide to get married now you will find that all are infected and you will not see or know that the girl you are choosing is the infected one. Moses said that nowadays there you have the liberty of going to have your blood tested at the hospital and know about your body and blood status. <He said your body *Zamthumpi mwako* – Chichewa and your blood status

*Za momwe ma gati ako alili –Chichewa>*. The old man said, "You will not find one who is free from it." Moses said, "There will be some who will be free from AIDS." He said that there are even now thousands and thousands of people who are free from AIDS and that in time there will be some as well.

The old man said, "Having AIDS young brothers, understand, does not necessarily mean you are faithful or you are unfaithful, but it will come if the time has come for it to come to you, because everyone has his own way of death, very different to another and may be similar to another one as well. I agreed with this old man. He went on saying that there is no way to escape AIDS. I believe for anyone, no matter whether they are married or not, if AIDS is really a crisis, I believe it will affect every mankind, as the Bible wrote that it will have no medicine as well as indicating, or rather, fulfilling what the holy bible manifested already. We agreed with him.

So the old man said, "Care should be taken -never to try to prove it deliberately, but stay quiet always, like you are the stupid person and resist and endure the mocking and teasing, which they may be doing to you – mocking you like, 'why are you not going with other sexual partners ever since you married?' for instance." He went on saying, "If you have met this difficult situation, first you have to accept what they are saying and agree with them and accept that you are the a fool that they may be thinking of – never contest them, but just wait. You will see that God will contest with them, then they will come to contract this disease AIDS that we are currently talking about and their shoulders will come up out of position and they will be coughing a lot. The only bad thing which we normally have a lot of concern for, is that when such a person reaches this stage, with his/her shoulders coming up, just know she/he had spread it to some partners and these partners spread the disease to others as well. And that's why I am saying if one wants to marry, it's only this time to chose to marry, because the spreading of this disease is increasingly spreading rapidly nowadays, unlike in our old days. In times today there is high prostitution and it is taken more as a business thing for obtaining money, than in the past.

He went on saying that if today one is not married and is thinking of marrying tomorrow <meaning in the future sometime> he is just cheating him/herself because in the future the spread of AIDS will be higher and almost everyone will have it. Moses said excluding me, I will remain alive to be the seedling of tomorrow's generation. <We laughed> Moses went on saying he is eager enough, saying that he is eagerly looking forward to being the seedlings of tomorrow because ever since condoms started being manufactured in the 1990's he had never slept with any sexual partners without using a condom and he added that he doesn't believe that there are some people somewhere who really does sex plain. He said a lot of people used and use condoms and that's why I am saying there are some, not all of them, but some people who are free from AIDS. The old man said that he was telling the truth, but there is no evidence of this because Lucius Banda sings a song saying; *malume edei ndi voti ya wekha* <meaning AIDS its ones' vote Uncle – Malume>.

The old man continued saying that condoms are what really promoted or continued increasing sexuality as well as prostitution because people think that they will use condoms and will think that they are safe while they are not. He went on saying that condoms are manmade and wanting to contest with the disease that God proclaimed that there was no medicine to heal, and if there is no way form of treatment how far can a preventative measure go on? He said that there's a certain singer who sang *makondomu saphila kanthu ambiri anaziyesa loma onsweo anaamwalira* <meaning

Condoms are not working - a lot have tried but all of them have died>

We chatted and chatted and the old man criticized the use of condoms greatly and said according to his faith of Islam, this critically is not allowed since it's a sin using one. Moses said but the condoms were tested and it was found that they are 100% perfect and he doesn't believe that condoms are porous as other people think and he said that he believes in using condoms not only for prostitutes, but to any partner he may wish to have sex with. The old man didn't answer anything here. Then my friend bought another cigarette and said to me that I had to escort him a bit. Then we came out of this shop and I began escorting him and we were talking now about our past school days encounters and experiences. I escorted him a bit and then I returned back and said if possible we were to meet here again tomorrow afternoon.  
The End.

It is of course possible that the journalist made up the conversation, although we think this would be more work than recalling one. In addition, there are details that give an impression of verisimilitude. In this as in other incidents, there is often great circumstantial detail: how the conversation started, where it took place. Often a conversation will draw in others, like the shopkeeper in this incident. The conversational group is usually quite unstructured. The journalist sees a friend and joins him, then other friends passing by might join. Similarly, a participant may leave the group to share a cigarette with someone he sees passing, or to catch a bus. The conversations often do not seem very private, and those within earshot may join in. In other incidents, the journalist is in a shoe-repair shop waiting for his sandals to be mended (he says "waiting for my slippers to be punctured"), and the shoe-maker joins in; in another, the journalist is buying tomatoes at the market, a conversation with the tomato-seller begins with his friendship with the journalist's late grandfather and moves on to women and AIDS, and another tomato-seller is listening and makes a comment. Adding to the impression of verisimilitude, in the conversations, participants may disagree or correct a speaker, or refer to something that was said earlier in the conversation, or even in a previous conversation.

The journals are particularly valuable, we think, in showing the diversity of views to which individuals in these communities are exposed. A journalist will one day talk with a friend who says 'we are all infected by now, it would be a waste to give up sex or to use condoms, it wouldn't help'. On the next day, or even on the same day, the journalist will talk with another friend who has decided to change his ways in order to avoid getting AIDS. Within the same conversation, participants may debate whether divorce is an appropriate response to the suspicion that one's spouse might have AIDS: one may say divorce is the best thing to do, another counters that divorce doesn't make sense because if one is infected the other will be also.

The journals also give insight into the social institutions that constrain and enable different forms of behaviour in Balaka. Through these journals, we are able to glimpse the workings of churches, homosocial friendship groups, extended families, clinics, schools and small businesses in ways which are not possible with survey methods.

Content: It is difficult to also difficult to know how representative the journals are in terms of content. The journalists who reported conversations they overheard or participated in (primarily the latter) have complete freedom to write down a conversation or not. Their choice is probably influenced both by what they think we would find interesting and by what they themselves find interesting. The journals written before 2001 tend to emphasize the lurid, i.e. tales of extreme sexual exploits or instances of complete disregard for the reality of the AIDS epidemic. The later ones still report such conversations, but there are more in

which participants say they have changed their behavior because of AIDS. It is not clear whether this represents a change or whether it is a reaction to the interest in faithfulness that we expressed during fieldwork in 2001. It is often clear that the journalist is intensely interested in AIDS, which is surely a reflection of their living in the midst of an epidemic of a disease they know to be fatal. Several of the journalists believe they may have been infected already. In one case, the journalist was worried about her second husband (her first one had died), and finally divorced him.

Representativeness: We have no way of knowing how representative these conversations are. It is likely that many of the participants in the conversations reported in the journals were among people similar to the journalists √ they take the same buses, shop at the same village centres, go to the same local clinics, etc. When the journalist is a participant in the conversation, the others are typically described as friends or acquaintances, i.e. members of the same broad social network. Homophily is an important criterion for selecting those with whom to talk, both here and elsewhere, so we assume that homophily also guides the selection of those with whom the journalists chatted. The journalists are more educated than the majority of the rural population in Balaka: all of them completed secondary school, whereas only about 16% of men and 10% of women in the 2001 household survey completed secondary school. Thus, it is likely that their friends also have at least some secondary education. While homophily may structure conversations in which the journalists took part, it plays a lesser role in conversations which the journalists were exposed to, while riding the bus, shopping in markets or waiting in a clinic. Thus, the conversations reported are a mix of homosocial and heterosocial contexts.

Bias: Our expectation was that the journalists would provide access into ordinary conversations because they would no longer be perceived as working for our project. This was somewhat naive. The journalists have a source of income that is probably evident at least to some. In addition, the members of their family must know what they are doing. In the case of one of the journalists, his wife certainly knows: on an occasion when he and his wife were listening to the radio, the wife tells him to write that in his journal for the Professor. Nonetheless, the conversations give the sense of being uninfluenced by any perception that the journalists are still working for the project. There is no direct mention of this, and certainly some of the conversations - e.g. one about rape in which a participant talked about raping a school girl and the others laughed ¥ suggest complete frankness among a group of friends.

Just after the 2001 fieldwork, two of the journalists decided that we would prefer interviews of the type conducted in the 2001 household survey, i.e. following a structured questionnaire. Since they had tape recorders left from the project, they taped and transcribed the interviews. These are less valuable, for they replicate the formal setting of an interview—and without a random sample, these interviewers simply chose someone to interview. They do have some value, however, for they show what we had suspected, that respondents do not answer a question calling for a short answer (e.g. “Yes” or “no” or a date) with a short answer, but rather often explain, sometimes at considerable length. This helps us to see the diversity of meaning behind the short answers that are all we have on the household surveys.

Transcription: The journals are handwritten. They were then typed to make them readable. Initially, the typist did some editing to make the journals more readable. Subsequently, however, we decided that retaining the poor grammar and poor spelling might be valuable at some point, and only made very minor changes when the grammar or spelling were so poor that a reader would have difficulty. In some cases, these changes are indicated by brackets. The journalists are all intelligent and all speak and write English (all are high school graduates, and high school is in English). Presumably, however, their English—and especially their written English—is not as good as their Chichewa or Yao. In addition, the journals often appear to have been written rapidly. For example, the journalist notes that he wrote the conversation down either later in the day or the next day, and he seems to be rushing to get everything down, there's a breathlessness about them. Sentences are strung together with “And then...And he...”, and or pronouns are omitted. We have retained unusual constructions that might be meaningful. For example, the journals describe someone as “having AIDS positive”; we have kept this rather than replacing it with ‘being HIV positive’ to capture the notion that the virus is something one has. In addition, we did not want to edit the journals into a facsimile of middle-class Malawian English. Several journals in Kenya and one in Malawi were written by men who had more education and wrote in a more elaborate style, one that they presumably felt demonstrated their command of the jargon of research projects and that did not, I think, adequately capture the rhythms of rural speech. These Kenyan journals also focused more on local cultural traditions, the exotica that foreign researchers are indeed often interested in but we were not.

Initially, we did some minor editing of the journals, in some cases for clarity and in some cases because we did not want it to appear as if the journalist was not in good command of the language of the conversations (in contrast to the English in which the journals are written). We subsequently decided that neither of these were as great problems as we initially thought, and now make very few corrections, and note these in brackets).

All of the names in the journals have been changed, including that of the journalist and the names of villages.

Summary: The journals vary in quality and in interest. The entries in any particular journal also vary. Some of the entries have a rather routine flavor, as if the journalist was trying hard to find something to fill up pages. Others have an immediacy that is compelling. Although it is not possible to claim that either the journalists themselves are representative of any community or that the conversations recollected and reported are representative of all the conversations on AIDS in the places where they occurred, the journals are valuable in showing the diversity of opinions circulating in the rural villages of Balaka. We thus think the journals are useful additions to information collected through more formal procedures.

