

ARTICLE

African Studies, Forging Common Grounds: Languages, Scripts and Translation

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Abstract

In this presidential address I offer a critical examination of how Africa was misrepresented in the Global North's imaginations and media reporting during the COVID-19 pandemic. Such biased imaginings of Africa as a site of inevitable catastrophe account for the racialized under-accounting of the history of African scientists' pioneering success in biomedical research and with epidemics. The global archives of COVID-19 pandemics must acknowledge these scientists, as well as the humanistic contributions of African artists who collaborated with health experts and produced poetic/musical performances in local and world languages to tackle biomedical and social pandemics.

Résumé

Dans ce discours présidentiel, j'examine de manière critique la façon dont l'Afrique a été mal représentée dans l'imaginaire des pays du Nord et dans les reportages des médias pendant la pandémie de COVID-19. De telles imaginations biaisées de l'Afrique comme site d'une catastrophe inévitable expliquent la sous-estimation raciale de l'histoire des succès pionniers des scientifiques africains en matière de recherche biomédicale et d'épidémies. Les archives internationales des pandémies de COVID-19 doivent reconnaître les contributions scientifiques et humanistes des artistes africains qui ont collaboré avec des experts de la santé et créé des spectacles poétiques et musicaux dans les langues locales et mondiales pour lutter contre les pandémies biomédicales et sociales.

Resumo

Nesta comunicação de abertura, proponho uma análise crítica do modo como o continente africano foi erradamente representado nos imaginários do Norte Global e nas notícias dos

media ao longo da pandemia de COVID-19. Esses imaginários enviesados de África enquanto lugar de catástrofe inevitável prendem-se com a subestimação dos sucessos pioneiros de cientistas africanos na investigação biomédica e no combate às pandemias. Os arquivos mundiais das pandemias de COVID-19 têm de reconhecer estes cientistas, bem como os contributos humanistas dos artistas africanos que colaboraram com especialistas em saúde e produziram performances poéticas/musicais em línguas locais e do mundo para lidar com as pandemias biomédicas e sociais.

Keywords: Africa's contributions to global knowledge production; African women's contributions to knowledge production; Africa's linguistic diversity and Covid 19 research; multilingual literacies and health literacy; migration; biomedical pandemics and social pandemics; Global North and racialization of scientific knowledge; Covid 19 pandemic archives; Documenting the contributions of African scientists and artists to global problem-solving

Introduction

I would like to begin by meditating on the significance of being a Black African woman born in a non-English-speaking African country and serving as the first Black African woman president of the African Studies Association—an organization founded in 1957, five years before my birth in the independent Republic of Niger. This speech is loaded with the responsibility entrusted to me, of leading the organization as we gather in Philadelphia following the traumatic experiences of the COVID-19 pandemic era: human losses, global lockdown, Russia's war against Ukraine, Europe's refusal of asylum to African medical students studying in Ukraine who were trying to escape the war. It is unfortunate that Europe, even in the face of the atrocities of war, could not see a common humanity with African people. Europe's resorting to racist discourses of civilizational difference in its determination to deny asylum to African (and Asian) students seeking to escape war in Ukraine is indefensible, especially at a time that has witnessed global racial solidarity in support of Black Lives Matter, the civil rights protests emerging out of the racist murder of George Floyd by police in America. These crises reinforce the need for us to renew our commitment to racial solidarity as members of the African Studies Association.

I thank all my teachers in Africa, Europe, and the USA for their commitment to racial solidarity and their generous investment in educating my twin sister and me as well as countless students from Sahel Niger. Like our parents, my teachers believed in girls' and women's rights to education and fulfilling careers grounded in ethical values. I am particularly grateful to the Africa-America Institute (AAI) for awarding my late twin sister (Professor Hassana Alidou, Niger's former Ambassador to the United States and Canada) and me the AFGRAD doctoral fellowship to study in the USA in 1988. My deepest gratitude to all our professors at Abdou Moumouni University in Niger who stood by us and promoted decolonial knowledge production across linguistic borders. It is thanks to their unwavering advocacy that students like me, who did not emerge from the Department of English, were given the opportunity to

compete for the AAI scholarship to study in the USA. This is exemplary in the history of commitment to Global North and Global South solidarity and gender and social justice, whose important ingredients are diversity, equity, and inclusion. It further exemplifies a commitment to ethically “forging common grounds” in the study of Africa, attending to how systems of discrimination manifest themselves in diverse geographies and how one can contribute to eradicating injustice by embracing justice and ethics regardless of national/racial/ethnic difference. I thank everyone who contributed to my becoming, and I hope my scholarly and social actions reflect these foundational ethical values of social justice.

In 1988, I competed for the AAI doctoral fellowship without speaking English. I spoke several African languages and French, and read/wrote non-Latin scripts like Arabic and Ajami. Today, these plural linguistic and script/alphabet literacies have been my humble contributions to the dialogues on what it means to do African studies from diverse oral and written traditions in mainstream US academia. I extend my gratitude to all my past professors, mentors, and students, as well as scholarly publishing outlets and public humanities platforms that have supported the struggle to center African literacy traditions and epistemologies in non-European languages and non-Latin scripts, which have been kept for too long at the periphery of scholastic and civic engagement in postcolonial African education and in the Global North (Boyd 1989; Boyd and Mack 1997; Mack and Boyd 2000; Alidou 2005; Ngom 2016; Kane 2003; Moumouni 2017; Omar 2013; Umar 2000; Philips 2000; Elghamis 2011; Belcher and Kleiner 2015; White Oyler 2005 and others). Besides Arabic and Ajami, these include indigenous literacies such as Tifinagh, N’ko, Vai, Amharic, and Tigrinyan alphabets, all of which encompass epistemologies that define and are attached to significant populations in African societies and their diasporas—epistemologies to which African women who are not exposed to Western forms of literacy contribute artistically and intellectually. These gendered organic intellectuals within African societies unfortunately continue to be ignored and/or marginalized in mainstream educational systems despite their complex interweaving of oral, visual, and written textual discourses in local languages and script/alphabet, some of which (like *Tifinagh*, an Amazigh/Tuareg indigenous script) predate the Arabic script and Latin Alphabet in the West African Sahel (Elghamis 2011). What then does it mean to do African studies, global African humanities, and social sciences while excluding and/or marginalizing indigenous knowledge systems articulated in African languages and indigenous scripts/alphabet? It means that, as scholars, we are writing with gaps in our archival exploration.

Let me further clarify the figurative semiotic signifying of script/alphabet as a mode of representing and/or mis/representing and/or under/representing Africa in hegemonic racialized scientific fields, which value competition over human solidarity in the pursuit of knowledge for social and ecological well-being.

My dialogue invites readers to scripts and actions connoting solidarity in African studies. I wish to explore, therefore, how to address diversity, inclusion, and equity by giving equal opportunity to African scientists working inside/outside academia and artists operating outside the Global North’s paradigms and

epistemological approaches. In so doing, African studies in the Global North and especially in the USA will broaden its geography and methods in the service of inclusive scientific commitments. For example, the inclusive process of hearing marginalized African communities in their own languages and health-related vernacular will promote restorative justice, and the consideration of indigenous African epistemologies in public health fields might reveal strategies and methods of healing that are not considered in scholarly meditations from mainly Eurocentric and Global North perspectives.

An African studies committed to diversity, inclusion, and equity will value subjectivities and epistemologies kept at the margins and will advance interdisciplinary and transdisciplinary modes of scientific inquiry. It will also be open to horizontal practices of partnership with Africa-based scholars and give credit and visibility to their scientific achievements. It is the desire for such practices of ethical solidarity that shaped my address as the 65th President of the African Studies Association. In later sections of this paper, I will illustrate my argument by exploring how African scientists and other knowledge producers were marginalized in the Global North's record of the COVID-19 pandemic as the world struggled to search for solutions to stop the spread of the coronavirus.

The representation of Africa in US and Global North media during the COVID-19 pandemic

When the World Health Organization (WHO) announced the outbreak of the COVID-19 pandemic in January 2020, panelists from scientific communities commenting on mainstream television and radio programs in the USA and the rest of the Global North began to prophesy its imminent catastrophic impacts on the African continent, the continent marked for morbidity. The speakers hardly acknowledged Africa's scientific communities or its social actors' investment in preventing the spread of the virus on the continent. They drew no attention to medical and public health knowledge production in Africa about pandemics. Africa was a doomed place.

This failure to acknowledge African scientists and humanists—especially those based on the continent—and their contributions to global knowledge systems exemplifies the unequal power relation between Africa and the Global North. And yet, we cannot erase the scientific discoveries of African scientists with regard to viruses such as the Human Immunodeficiency Virus (HIV) and the Ebola virus, which spread across West Africa in 2014. We must remember the scientific triumphs of Dr. Jean-Jacques Muyembe-Tamfun, the Congolese microbiologist who leads the DRC's Institut National pour la Recherche Biomédicale in Kinshasa and the first microbiologist to discover the Ebola virus in 1976. Featured in the prestigious *Lancet* journal as “Africa's Ebola hunter” in 2015 for his work on Ebola, Dr. Muyembe-Tamfun's achievements further include his leadership of Congo's response team against COVID-19 and an honorary doctorate awarded by Harvard University in 2022. Mark Honigsbaum (2015) has observed that the human cost inflicted by the Ebola outbreak in West

Africa could have been mitigated had the international scientific community valued the discoveries and preventive approaches from Dr. Muyembe, developed through his pioneering work in the field. Honigsbaum comments on Dr. Muyembe's integration of cultural competency in designing an effective public health intervention:

Muyembe's approach applies particularly to traditional burial practices. Outside interventions can be seen as an attack on community traditions, he explains. "By seizing their cadavers, we hurt their spirit." Instead, he and his community relay teams facilitate dignified but safe burials by distributing gloves and protective equipment to family members participating in funerary rites. Indeed, ... while the world was focused on the Ebola outbreak in West Africa last summer, in August 2014, Muyembe and his team stopped yet another Ebola outbreak in the DRC in less than 3 months. One can only wonder what would have transpired in West Africa had Muyembe's methods been adopted there with similar urgency. (Honigsbaum 2015:2455)

Another African scientific achievement worth highlighting is the discovery of the B. 1351 COVID variant by South African researchers (Hanekom and de Olivera 2021).

I wish to note the exemplary few cases of Global North and Global South scientific collaboration with the hope of promoting the practice. These include the groundbreaking transdisciplinary work of medical anthropologists, social and medical historians, and medical humanists such as Tamara Giles-Vernick, Didier Gondola, Gillaume Lachenal, and William H. Schneider, who are involved in transdisciplinary research with virologists to debunk the racist myths constructed around the African origin of HIV and its global transmission out of Africa (Giles-Vernick et al. 2013). Gondola and Amandine Lauro's brilliant historical account calls for a serious reexamination of European colonial archives on the emergence of HIV in colonial Africa, especially in Congo and Haiti (Gondola and Lauro 2021). Their research is timely in shifting the focus from accounts of biomedical origin to the significance of the HIV pandemic by reexamining the preexisting archival literature as well as oral sources to offer more robust historical context on the emergence of the virus and its transmission in Africa and Haiti.

Regarding Nigeria's success in containing the transmission of the Ebola virus, the following observation from the World Health Organization (2015) is worth quoting at length:

When confirmation of Ebola virus as the causative agent was announced on 23 July, the news rocked public health communities all around the world. No one believed that effective contact tracing could be undertaken in a chaotic and densely populated city like Lagos, with many poor people living in crowded slums and a population that swelled and ebbed every day as people came to the city looking for work or returned home when

unsuccessful. Many envisioned an urban apocalypse, with Nigeria seeding outbreaks in several other countries, as had happened in the past with the polio virus.... In both cities [Lagos and Port Harcourt], all the ingredients for an explosion of new cases were in place. That explosion never happened, thanks to the country's strong leadership and effective coordination of an immediate and aggressive response.

The report further elaborates on this “spectacular success story”:

As in Senegal, an emergency operations center was established, supported by the WHO country office. Also, like Senegal, Nigeria had a first-rate virology laboratory, affiliated with the Lagos University Teaching Hospital, that was staffed and equipped to promptly diagnose a case of Ebola virus disease. The government generously allocated funds and dispersed them quickly. Isolation facilities were built in both cities, as were designated Ebola treatment facilities. House-to-house information campaigns and messages on local radio stations, in local dialects, were used to ease public fears. Infrastructures and cutting-edge technologies in place for polio eradication were repurposed to support the Ebola response, putting GPS systems to work for real-time contact tracing and daily mapping of transmission chains. Contact tracing reached 100% in Lagos and 99.8% in Port Harcourt. In what WHO described as a “spectacular success story,” the country held the number of cases to 19, with 7 deaths. World-class epidemiological detective work eventually linked all cases back to either direct or indirect contact with the air traveler from Liberia. WHO declared Nigeria free of Ebola virus transmission on 20 October.

Fortunately, the Global North's predictions of Africa as a site of mass death from COVID-19 did not materialize either. The predictions which filled the mediascape had underestimated the continent's intellectual agency and the competence of its public health interventions. Such hegemonic yet impoverished predictions were due to recurrent stereotypical representations of the African continent as a site of human misery and death, a place of no science or imaginative agency (Ngũgĩ 2013). Yet, as the world was confronted by the horrific scale of death in China, the USA, and Europe with comparatively less fatality in African countries (except South Africa, which experiences more transcontinental population mobility), foreign medical/public health experts and policymakers continued their spectacular apocalyptic predictions about African deaths—predications without any basis in factual scientific assessment. This idea of Africa lodged in Global North imaginaries translates to an injustice, given its rootedness in the refusal to recognize African scientists as contributors to medical and scientific breakthroughs including, as highlighted above, their remarkable interventions with regard to the Ebola virus and HIV virus. I urge scholars of African studies operating in the Global North to stand against the reproduction of such subjective ways of seeing Africa and its scientific capabilities by giving appropriate

credit in research publications and by including Africa-based colleagues as equal co-producers of knowledge in research teams. Through ethical solidarity, we can collectively undo the imbalance in recording and archiving Africa's knowledge contributions across fields. African studies communities worldwide must work to disengage from enduring forms of cultural and scientific misrepresentation and the erasure of Africa.

With the discovery of the COVID-19 vaccine, the US and wealthy European countries showed no solidarity to low-income countries (mostly in Africa and Asia), hoarding excess vaccine doses. Tracey Makhoulouf and MFS (2021) writes:

More than 60 percent of people in HICs have received at least one dose of a COVID-19 vaccine while less than 3 percent of people in low-income countries (LICs) have. While many people in LICs—including health care workers and high-risk populations go without—HICs are holding millions of excess doses that could expire if not urgently redistributed. It's estimated that G7 and European Union countries alone could waste 241 million doses by the end of 2021, even after boosters for high-risk groups and donations pledged to be distributed by HICs by the end of 2021 are fulfilled. While many world leaders have made commitments to redistribute doses by the end of 2021 or into 2022, the world needs immediate action to ensure global access to COVID-19 vaccines.

Dr. Carrie Teicher, Director of Programs at Doctors Without Borders USA, further makes the following poignant observation:

Despite its claim to be a global leader on COVID-19, the US is hoarding nearly 500 million excess COVID-19 vaccine doses—more than any other country. ... It's reckless and dangerous for the US and other high-income countries to be sitting on excessive stocks of COVID-19 vaccines while others—including in many places where MSF is battling surges of COVID-19—are desperate to provide their most vulnerable people with even their first dose. The longer people everywhere remain unprotected, the more lives will be lost and the more likely it is that new and potentially deadlier variants will take hold. The US must immediately make public and concrete commitments to redistribute excess COVID-19 vaccines globally if it truly wants to end this pandemic. (MSF [Tracey Makhoulouf] 2021)

African heads of state and the African Center for Disease Control (CDC) and medical doctors denounced vaccine apartheid manifested in European and US vaccine nationalism, the “denial of access to purchase due to unfair agreements between rich countries and vaccine manufacturers” (Soulé 2022). These restrictions were especially disappointing given the active contributions of Africans on the continent and in the diaspora to the scientific and artistic innovations aimed at combatting COVID-19. The rest of my paper turns to these transdisciplinary innovative collaborations between African and African diaspora experts and artists in the fight against the coronavirus.



SOAS President Ms. Zeinab Badawi delivered a keynote in Malta on: “How the Media covers the world’s biggest issues: from wars and revolutions to globalization and financial crisis” on Monday, April 28, 2014, at an event with the Tumas Fenech Foundation for Education in Journalism.

Decolonizing knowledge in the time of COVID-19: Africa and African diaspora global solidarity

Dr. Ngozi Ezike and Zeinab Badawi are two notable agents in the struggle to eradicate the coronavirus. Both are African women living and working abroad, in the USA and England respectively. Dr. Ezike is a highly accomplished medical doctor and Zeinab Badawi (pictured above) is a world-renowned BBC journalist, currently the president of the School of Oriental and African Studies, University of London. The Nigerian-born medical doctor Dr. Ezike’s stellar leadership of the Illinois Department of Public Health during the pandemic led to her appointment as the president and CEO of Sinai Chicago hospital network in March 2022. The Sudanese BBC journalist Zeinab Badawi was a pioneer in highlighting the work of Britain-based African doctors and nurses serving during the pandemic. Her article (Badawi 2020) is a brilliant tribute to the positive impact made by African doctors in Britain’s medical system. She documents how several African doctors who worked to save British lives—including her own cousin—lost their own lives in the process. SOAS President Badawi also memorializes African doctors lost to COVID and gives tribute to the survivors who continue to save British lives post-pandemic.

As with the Ebola epidemic, African doctors both on the continent and in the diaspora have turned to medical humanities in tackling the COVID-19 pandemic. These doctors take into consideration indigenous cultural approaches to health and well-being, rituals for honoring the living and the deceased, and vernacular/popular communication strategies and technologies of public health messaging

that can shape health behavior. In his foreword to *Entertainment-Education for Health Behavior Change*, Arvind Singhal (2015) incisively observes:

For millennia the *griot* and their countless counterparts on the African continent have purposely utilized the crowd engaging process of storytelling, music, and drama, for instruction, agitation, devotion and reformation. In recent years, more mass-mediated forms of entertainment-education have emerged on the continent that utilize popular genres in radio, television, popular music, films, and interactive digital media. These new platforms, combined with the old traditional forms, reach tens of millions of audiences of members with lifesaving and life-changing information daily.

Indeed, African artists and health professionals mobilize creative non-hegemonic epistemological reasonings to shape a poetics of care with musical performances disseminated through mass communication platforms including radio, television, and social media. Vernacular health-messaging songs and dramatic performances about the danger of COVID-19 spoke effectively to marginalized and underprivileged populations in both rural and urban spaces using local languages—populations which often live in precarious economic conditions resulting from the imposition by African political elites of harmful neoliberal economic policies that dismantle functioning public health infrastructure (Loewenson 1993; Turshen 1999). Artists' collaborations with medical doctors, public health agents, and religious and traditional healers produce poetic compositions and musical performances that are framed within a poetics of life affirmation (African Vibes 2024; Kantengwa 2020). Significantly, such health messaging centers lifesaving that brings into dialogue the biomedical, the cosmological, and the affective. By appropriating the digital and media broadcasting spaces and utilizing dialogism and inclusive multilingualism, African local and global artists have contributed to the struggle to eradicate COVID-19 as they did with HIV and Ebola (Salaudeen 2020; Kantengwa, 2020). Important to underscore is that such songs also thematically address non-biomedical pandemics including pandemics of dispossession, racial, ethnic, religious, and class discrimination, and gender-based violence. Through artistic performances built on intercultural translation, African artists and media practitioners in dialogue with medical doctors are contributing to decolonizing the fields and media practices of medicine and public health, interpreting and accounting for Africa's epistemic contributions to the epidemiological challenges faced by humanity in the twenty-first century.

Using case studies from popular culture and youth artistic performances from diverse African countries and worldwide, including the USA and China, I examine multi-generic and multilingual poetic compositions and performances, and the discursive alternatives that these compositions and performances offer to neoliberal solutions geared toward both biomedical and social pandemics. I advocate that global humanities archives on COVID-19 ought to include African biomedical and public health contributions including the work of African youth artists, which form a significant part of the narrative of our common losses and struggles for present and future survival.

In Africa, like in other parts of the Global South, pandemics cannot be managed through Western biomedical approaches alone. A successful public health strategy must include an awareness of African vernacular understandings of diseases, the afflicted social body, healing, and well-being, as well as vernacular communicative strategies in local languages that resonate with the target communities. This is crucial given that most African societies manage illness and healing through pluralistic medicinal approaches, often including both herbal medicine and cosmological beliefs. Furthermore, in African contexts where populations are not literate in European languages, it becomes imperative to seek out those vernacular communicators who are most effective in promoting critical life-saving health information in local languages. In this regard, African traditional and modern storytellers—griots/griottes, poets, singers, visual and performing artists—are effective for assisting public health workers in combating epidemics and pandemics. The ethnomusicologist Ruth Stone (2014) rightly observed that “song was a pivotal part of the Ebola response in Liberia, and it should be examined more closely for future epidemics” (94). The efficacy of interdisciplinary collaboration between arts and medicine is further exemplified by the groundbreaking work conducted at the Center for Arts in Medicine at the University of Florida, the Johns Hopkins Center for Communication Programs, and the Harvard University Medical School, which have collaborated with other programs around the world, including at Witwatersrand University in South Africa and Makerere University in Uganda. These international collaborative programs on health communication focus on the critical role of artists, storytellers, and performers in fostering health literacy, promoting behavioral change in millions of people (especially their young audiences), and helping to prevent the spread of viruses that cause Polio, HIV, Ebola, and now COVID-19. The Arts in Medicines curricular training of medical students and public and global health students at institutions in the United States and Africa includes medical humanities courses focused on storytelling, spirituality, drama, visual arts, and music and dance performances for health awareness and healing purposes. In fact, the University of Florida in collaboration with the University of Nairobi and Makerere University offers both an online Graduate Certificate and a Master of Arts in Medicine for both artists and health professionals.

The inspiring and innovative incorporation of African American youth hip-hop culture by Dr. Olajide Williams, a neuroscientist from Columbia University, is also worth mentioning for its success in advancing public health in New York’s underprivileged minority communities affected by healthcare disparities. In fact, the success of Dr. Williams’s Hip Hop Public Health Foundation in promoting health literacy and healthy behavioral changes and the digital accessibility of its programs have led to its national and global replicability (Hip Hop Public Health 2020). Williams’s philosophical vision of integrating vernacular communication strategies in advancing public health to promote minority health in the United States is endorsed by other African diasporic scientists who are members of his foundation, including Professor Gbenga Ogedegbe—Chief of the Division of Health & Behavior, Director of the Center for Healthful Behavior Change in the Department of Population Health at the NYU School of Medicine and an appointed member of the US Preventive Services Task Force. Both Dr. Williams

and Dr. Ogedegbe are physicians, clinical researchers, and world-renowned public health experts who are members of the Association of Nigerian Physicians in the Americas (ANPA). They are both working with African and African diaspora artists and other vernacular communication specialists to promote a public health and global health agenda in Nigeria, within the African continent, and among African diasporic communities beyond the United States.

The disproportionate scale of death inflicted on Black and Brown communities in the USA led Dr. Williams to collaborate with Hip Hop pioneers.¹ These artists aimed to educate youth about the importance of hand washing as a preventive measure against contracting coronavirus infection. Their medical humanities health literacy communication strategy, which uses a Hip Hop music video, is highly innovative. Dr. Williams underscored the critical importance of using the language spoken by his patients for effective dissemination of lifesaving messages. He notes:

You have to speak the language that people understand. If I have a patient that speaks Spanish, I need to speak Spanish to that patient. If my Spanish is bad or it's not on point, then it's likely that the information that that patient gets is going to be filled with holes and sometimes those holes can be dangerous. Communication is critical. And making sure that we embrace mediums that speak to people and that we embrace platforms that connect with people is a key ingredient for successful public health messaging. And unfortunately, that has been missing in a lot of our public health campaigns over the last few decades. That's one of the reasons why we created Hip Hop Public Health. I've been really blessed to have started it with Doug. And, you can tell by speaking to him where his heart is. We did [created] this [PSA] for COVID-19, but I think this is how public health needs to be done when it comes to messaging campaigns within the black community. We must speak the language that they can relate to, especially when you're dealing with the youth. People have said that when white America catches a cold, black America catches pneumonia. That's what we're seeing with COVID-19. We're seeing the problem ravage black and Hispanic communities. (Blanco 2020)

Fresh was inspired to collaborate with Dr. Williams, who made him aware of the devastating impact of the COVID-19 pandemic in Black and Brown communities. Fresh comments:

I didn't know the magnitude of it [Coronavirus] and every time I talked to the doctor [Dr. Williams], he tells me more and more about how many people are suffering. People need to know that this one simple thing you do, washing your hands, for 20 seconds or more can change or save a life. ...We wanted to create the "We Are the World" of washing hands to show that a basic thing that you do [washing your hands] can have impact on the world. To do that, like Dr. Williams was saying—and he said it very well with the example he gave about the language barrier. In the same way is there's a barrier sometimes with different age demographics. So, it was important to

create this is a big rainbow of people from all over different walks of life to hit everybody. You gotta go hard for something bigger than you. And that is what makes me go hard. This is a world pandemic. This thing is crazy and especially the Latino and black communities. Everybody is connected whether you want to be connected or not. (Blanco 2020)

Given the global flows of people and diseases, public health awareness messaging through art will be an important strategy for reaching out to millions of African communities across the world. As the COVID-19 pandemic began to engender social tensions, African composers, singers, and musicians adopted both local and Afropolitan anti-racist ethics (Mbembe and Balakrishna 2016; Skinner 2015; Gehrman 2016) in their double role as local and world citizens by showing solidarity with global communities, especially with China (where the virus allegedly started) and with Asian people who began to face racism and violent assaults in some countries. Dr. Akuetteh David Papa Percy, a student from Ghana studying medicine at Wenzhou University, was among the first African artists based in China to compose a solidarity rap song that was made available on YouTube and dedicated to all Chinese people: “阿达战“疫” (literal meaning: “Percy fights against the epidemic” rap). Another song worth mentioning and available on YouTube is “Strong Together, We Defeat Corona,”² composed by another Ghanaian artist named DJ Titanium. He performed the song with Jores, a Francophone Gabonese rapper, and a Nigerian Hausa rapper, Abdullahi Jega. All three were studying at Liaocheng University, Shandong, China. This song also went viral within seconds of being posted on YouTube by *China Global Television Network* (CGNT), with 92,960 viewers as of February 26, 2020.³ The political stance of African students studying in China was an anti-racist mobilization for a world solution against the COVID-19 pandemic as they resisted nationalism and racism. Their songs underscore global interconnectivity, mobility, and diasporic hospitality, as some of their lyrics remind listeners:

Song is performed in West African English Variety⁴

Ohh Yaeeeeh
 We are strong together.
 We fight together.
 Defeat Corona
 To the end
 Ohh yeah

We are one but different nations.
 Coming together no separation
 Showing love to face the situation now

[Chinese]
 我们是一个但不同的国家
 汇聚无间
 表现出爱去面对
 Wǒmen shì yīgè dàn bùtóng de guójiā
 huìjù wújiàn
 biǎoxiàn chū ài qù miàn duì

Song is performed in West African English Variety⁴

Ohhhoooo
 We have each other
 Corona is the foe
 You and I are bros
 No discriminations
 I am not virus
 Wash your hand and be precautious
 When you are out there

Corona is the foe
 You and I are Bros
 No discriminations
 I am not tvirus
 Wash your hand and be precautious
 When you are out there

Ohooooo
 We are strong together
 We fight together
 Defeat Corona
 Till the end

[With Chorus (in background)]
 Oh! yeaeeeeh
 We are strong together
 We fight together
 Defeat Corona
 Till the end

Oh yeaeheeee

[Code-switch in Chinese]
 我们在一起很坚强
 我们一起战斗
 打败电晕
 直到结束
 Wǒmen zài yìqǐ hěn jiānqiáng
 wǒmen yìqǐ zhàndòu
 dǎbài diàn yūn
 zhídào jiéshù

Together we conquer
 We prosper
 We make it to the top
 Nobody can stop us
 Cuz China is my second home
 Corona is liar
 People no dey tire
 Everyday they say this
 They say that
 Causing panicking
 People are vanishing
 Never spread rumors
 To just make yourself famous

Song is performed in West African English Variety⁴

Wear you mask
 Wash your hands
 This thing shall be over
 Very soon I tell you

Oh! Yeahhhhh
 Corona is the foe

Asked about “the motivation behind their song,” Abdullahi responded:

Actually, the motivation behind the song is that a lot of people are scared. You see a lot of people discriminating like they are running from other people who are Asian looking. So this is what motivated us to write the song about the coronavirus to show people that the coronavirus is the common enemy. The coronavirus is the enemy so let fight that enemy. That is the motivation behind the song. Everything is getting better here, especially in the city where I live, Lioacheng. According to the student leader there are no new confirmed cases. (<https://www.youtube.com/watch?v=iXt9yWR5yAQ>)

The above quote underscores how West African students in China took the ethical stand of identifying the coronavirus as an enemy that transcends racial, class, geographical, and national differences. Their Afropolitan ethics led them to assert their solidarity with the people of China and underscore China as their “second home,” notwithstanding the racial discrimination that Africans and Black people are reported to face in China (Pai 2020; Robertson 2020; Sautman 1994). This ethical recognition of China as their second home in their role as global migrant students and traders is discursively conveyed through the use of linguistic code-switching in their songs to express solidarity (Hall and Nilep 2015; Blommaert 2000; Bucholtz and Hall 2005; Hall 2015). The songs express solidarity directly with the Chinese masses while also reverting to West African standard English and West African pidgin to inscribe their ethics in similar fashion to Fela Kuti, the late iconic Nigerian musician, who distanced himself from the standard English used by the political elite in his Afrobeat music. (Fasan 2015; Saleh-Hanna 2008; Olaniyan 2001). Their use of language also marks them as Global South English speakers—Nigerians and Ghanaians living, studying, and earning a living in China (Pennycook and Makoni 2019; Jenkins 2015; Kachru and Kachru 2006). In sum, their use of language reveals Afropolitan youth breaking away from hegemonic monolingualism and singular thinking as pertains to the global coronavirus pandemic and racism (Croucher, Thao, and Diyako 2020; for COVID-19 anti-Asian racism, see Ruiz, Horowitz, and Tamir 2020).

Rather than focusing only on the issue of racism Africans face in China as a retaliatory approach, African students and artists opt to use their creative

agency to highlight the good in their diasporic African experience in China and urge their audience to show compassion in the face of the COVID-19 pandemic while also imparting the life-saving public health advice of washing hands and not spreading rumors and misinformation.⁵ The Ebola outbreak in 2014 provoked racist verbal and physical attacks and discrimination against Africans in many parts of the world (Jones 2014). Jerrell Jones commented in the *Intercept* on what he called the “new virus of hysteria,” experienced by Africans and other immigrants in the United States during the 1994 outbreak of Ebola in West Africa:

Thus far, there have been just eight confirmed cases of Ebola in the United States following an outbreak in West Africa. Far more contagious here has been a new virus of hysteria—and of the sort of ignorant discrimination that immigrants in general and Africans specifically have endured for decades. People are being shunned and mocked for having visited, or even for simply having been born in, Africa—and anywhere in Africa will do, afflicted with Ebola or not. Others face discrimination simply for living in the same neighborhood where a single Ebola patient once lived. Politicians and pundits have seriously discussed closing borders to entire nations. Panic is dividing the country at a time when the U.S. and indeed the whole world needs to pull together to solve a viral health crisis. (Jones 2014)

In a similar fashion, Asians experienced prejudice in the context of COVID-19 pandemic. African artists used their songs to cultivate empathy and compassion while also stressing the importance of embracing preventive health measures.

On the African continent, poets and musicians contributed to global mobilization against the coronavirus pandemic with health messages that reached not only millions within their nations on the continent but also their fans located around the world, who could access their works through digital platforms (see Music in Africa 2020; Savoye 2020). Besides their effectiveness in health messaging, the songs, often in vernacular and incorporating political discourses, articulate the intersections of culture, beliefs around health, health disparities, and politics and economics. African COVID-19 songs are thus “literary public culture” that expand democratic political spheres by bringing forward oppositional and/or marginal political discourses that challenge the political elite’s monopoly of power and economic resources (Habermas 2006; Hermes and Hill 2020, 2029; Benhabib 1996). Many studies have provided critical textual analysis of these songs’ role in public health education and in expanding democratic politics (Alidou 2024; Titlestad, van Wyk, and Musila 2023; Ndiaye and Rowley 2021). In some cases, the songs embed social commentary in the form of satire and/or innuendo, denouncing the political elite responsible for the implementation of socially harmful neoliberal policies that have resulted in the dismantling of African public health systems, a reality unveiled by the COVID-19 pandemic. Other African COVID-19 songs incorporate spiritual and cosmological beliefs (Idler 2021).⁶ For example, Dr. Michael Igwe (2020), a US-based physician, used Igbo worship songs in his care for COVID-19

patients. In an interview with *AfricaRise* magazine,⁷ he explained how his spirituality, rooted in his family's Christian faith, intersects with his medical practice:

I have been singing song since I was a small child. My mother is a singer too. When I was in Nigeria, I used to lead songs at the church I attended. That was how I embarked on singing even as a medical doctor. Our experience at the hospital with this COVID-19 pandemic is that it mostly instills fear into people and sometimes, the fear will be too much for us. During a period like this, your training at school is not enough to keep you going. That is when I call unto the Holy Spirit and my spirit will just be okay.

This practice of medicine which integrates spirituality and music,⁸ embraced by Dr. Igwe in helping his patients cope with COVID-19 and other chronic illness, is part of a renewed trend called “alternative and complementary medicine” (Stoltzfus, Green and Schumm, eds. 2013; Bernardi et al. 2001).

I turn now to another example of a multilingual COVID-19 song, this one from a coalition of artists from the Republic of Niger and entitled “Stop Corona Virus.” The song features Hausa, Songhai-Zarma, Tamajaq, and French popular male and female singers and rappers.⁹ Given the level of anxiety and fear triggered by the coronavirus pandemic, the artists begin with a spiritual framing of their message as they warn their interlocutors of the new global pandemic for which there is as yet no medical cure. Aware of communities' strong attachment to religion as a source of comfort, the song opens with a stanza from a Sufi Islamic spiritual perspective, invoking a Hadith commonly used by devout Muslims in times of distress, in which the Prophet Muhammad states, “God has not made a disease without conceiving a remedy for it, with the exception of one disease—old age.” This is a call to believers within the cultural Islamic framework not to despair. Subsequently, each singer advises the audience in their local language to follow the public health precautions recommended by health workers. They also thank health workers for their life-saving services and beseech the Divine to protect their own lives. In short, the lyrics of their song include the following vernacular references: spiritual consolation in the face of calamity, gratitude to health workers, and health messaging that promotes behavioral changes in the fight against the COVID-19 pandemic. In addition, their message calls for behavioral changes in Muslim rituals of greeting and communal gathering.

[Aichatou Female Rapper (Hausa)]

Corona Virus

Sabon ciwo ne

ya zo ya ratsa duniya

Amma in Allah ya so

Ai sai mun gani k'arshenshi

Saboda hadisi ya fad'i

Corona virus^a

It is a new disease

that spreads throughout the world

But God willing

We will see its demise

The *Hadith* has predicted

Whatever disease appears

There is its cure

*Ai kowane ciwo ya shigo
Ya zo shi da maganinshi*

*To masana gare ku
Ku je ku nemo magani
Likitocin namu Allah shi yi albarka
Kuma Allah ya taimake ku
domin kare al'uma*

To you the scientists,
Keep searching for the cure
May Allah bless our medical experts
May Allah protect you because of all your devotion

A ka ce akwai riga kahi

They said there are preventive measures

[Fati Sogha Female Popular Singer (Hausa)]
*Lalle akwai riga kahi
Kowane lokaci a zanki wanke hannu da ruwa
da sabili don sabta ita ce lafiya
Ko za'a gai da juna a dena bada hannu
Zai iya kare mu da wanga ciwon*

Indeed, there are preventive measures
Keep washing hands constantly.
With soap because hygiene is health
No shaking hands when greeting.
That will help us from catching the disease

[Aichatou da Fati Sogha]
*Wurin attisha a sa hannu a d'an tare
Wannan shi ne alheri*

Cover with arm when coughing to block infection
That is the right thing to do

[Nana Ayouba Nya]
*A rage taro da sisi domin kare al'umma
Malamman na mu Allah ya biya ku
Ku yi ta rok'on Allah ya raba mu da
wannan ciwo da ya zo ya razana duniya*

Stop big gathering of people
May Allah bless our religious leaders
Please keep seeking Allah's mercy on our behalf
Implore Allah to eradicate this disease that spreads
all over the world

[Rapper (Zarma)]
*Corona Virus nina fonda bobo zalum
To ni ma lakwalay kulu go ga dabu
Hiri da fonda bobay kulu go ga dabu
Hehe wa tun ir ma ir bon salu
Ni ma goy da hanki nir fahamandi
Ir ma Corona doro tambandi
Kamba nyunyan ir ma babandi
Dir ma alamar ir ma kabarandi*

Corona virus you have afflicted in many ways
You close all the schools
You close all the roads and borders
Let us stand up to acquire the knowledge that will
help us eradicate the Corona disease
Let us intensify the washing of our hands
Let us educate the masses

[Tayan-(Chorus) (Zarma)]
*Corona virus
Dori tajo no kan ka
A na andunya kulu tunandi
Hala irkoy yarda kala dai ir di a banda
Hadisay no ci dori kul kan bangay
A zombu dinga safari*

Corona virus
It is the new disease that hits us
It has spread all over the world
With God blessings we will see its end
The Hadith have predicted that all diseases have a
cure

[Idi Sarki Rapper (French)]
*Maladie mortelle
Corona, Corona
Danger universel
Corona, Corona*

Planetary disease
Corona, Corona
Planetary danger
Corona, Corona
Yay, Yay, Hee!

<i>Way, Way, Ehen!</i>	Vigilance and prevention
<i>Vigilance et prévention</i>	Washing hands with soap
<i>Lavage des mains au savon</i>	Indeed!
<i>Haka!</i>	Or using alcohol solution
<i>Ou à? l'alcohol une solution</i>	To avoid being infected
<i>Pour éviter l'infection</i>	Let us use to limit the risks
<i>Utilisons pour limiter les risques</i>	Disposable tissues
<i>Les mouchoirs à usage unique</i>	Let us avoid certain practices
<i>Évitons certaines pratiques</i>	Like public gatherings
<i>Les rassemblements publiques</i>	

[YASB (Songhay)]	Corona virus is the new disease Corona virus is troubling the entire world
<i>Corona Virus</i>	
<i>Dori tajo no kan ka</i>	It has caused damage to stronger countries
<i>Corona virus go ga andunya kul tunandi</i>	Corona virus has no cure
<i>A go ga hasaraw te andunya labu beeray ra</i>	
<i>A sinda safari corona virus doro</i>	

[Mali Yaro (Songhay)]	How can we master corona virus
<i>Mate no ir ga wani corona</i>	Let us intensify the washing of hands at all times
<i>Ir ma gabu kambe yun ga alwate kul</i>	Let us not shake hands when we greet
<i>Dir ga cer fo ir si no cer kambe</i>	Let us block our sneeze with our arm
<i>Dir ga ciso ir ma ir kambe kinday ga kwasaray</i>	Let us avoid big gatherings
<i>Ma ir ma muru marganay beeray</i>	For the sake of our health/well-being
<i>Ir banay se</i>	

[Bibli Ahmed (Tamajaq/Berber Language) / REVOIR TRANSCRIPTION]	How can we master corona virus
<i>Corona virus</i>	Let us intensify the washing of hands at all time
<i>Argazet doga net</i>	Let us not shake hands when we greet
<i>Edne teket</i>	Let us block our sneeze with our arm
<i>Ayak ma net</i>	Let us avoid big gatherings
<i>Winkele nijar</i>	For the sake of our health/well-being
<i>Annane mosa net</i>	
<i>Wan nidinit</i>	
<i>Corona virus</i>	
<i>Tugut zidi nit</i>	
<i>Annan kidit</i>	

^aIt is important to underscore that the coronavirus are a family of viruses and COVID-19 is the name of the disease that appeared in Wuhan, China.

Conclusion

To conclude, I wish to invite our scholarly communities to seriously consider the importance of comparative epistemologies in various languages and scripts/alphabets through which knowledge is produced and disseminated. There are bodies of knowledge produced by Africans working in different languages and epistemic frameworks that remain unaccounted for in formal Western-centered universities. These bodies of knowledge must be recognized and incorporated into our attempts to understand local and global problems.

Documenting the contributions of African scientists and artists worldwide in eradicating the COVID-19 virus is a humble attempt at resisting the marginalization of Africa's agency in knowledge production and its contributions to solving global problems.

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Notes

1. Doug E. Fresh, Artie Green, and Gerry Gunn. 2020. "20 Seconds or More (Wash Your Hands)." The artists created a throwback Hip Hop gem to discuss COVID-19 health practices. <https://www.youtube.com/watch?v=IDIFxquhnlk>; Doug E. Fresh, Artie Green, and Gerry Gunn. 2021. "Wash Your Hands Song: 20 Seconds or More Feat." <https://www.youtube.com/watch?v=mxrLqnrV04>.
2. Percy Akuette. 2020. "Together we Defeat Corona." <https://www.youtube.com/watch?v=BZMGg3dZCzc>.

3. For the solidarity song against the coronavirus by Nigerian and Ghanaian students and rappers studying in China, see CGNT 2020. <https://www.youtube.com/watch?v=iXt9yWR5yAQ>
4. The African students/hip hop singers/rappers in China deliberately performed their “Corona” song using West African English Vernacular, which is different from Standard British English and Standard American English. <https://www.youtube.com/watch?v=iXt9yWR5yAQ>
5. To learn about rumors versus facts, see Maragakis and Kelen (2020).
6. For coverage on African artists mobilizing against the coronavirus pandemic, see Pajon (2020). For religious leaders in the fight against COVID-19, see WHO Africa (2020). See also Harvard Public Health (2016).
7. <https://www.bbc.com/pidgin/institutional-52694763>.
8. “Music as Medicine” at Johns Hopkins University, <https://www.hopkinsmedicine.org/center-for-music-and-medicine/music-as-medicine>.
9. See the 2020 Niger multilingual song “Stop Corona Virus.” <https://www.youtube.com/watch?v=-tSE1NUqXOY>

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