

Churchill Madikida interviewed by Paul Sendziuk

Johannesburg, South Africa, 15 July 2006

This is a verbatim transcript of a recorded interview. It should be noted that when engaging in spoken conversation, people do not phrase their thoughts in grammatically correct sentences. These imperfections have been retained in this transcript.

Paul Sendziuk: This is an interview with Churchill Madikida – is that how you pronounce your name?

Churchill Madikida: Madikida, yeah, that's right.

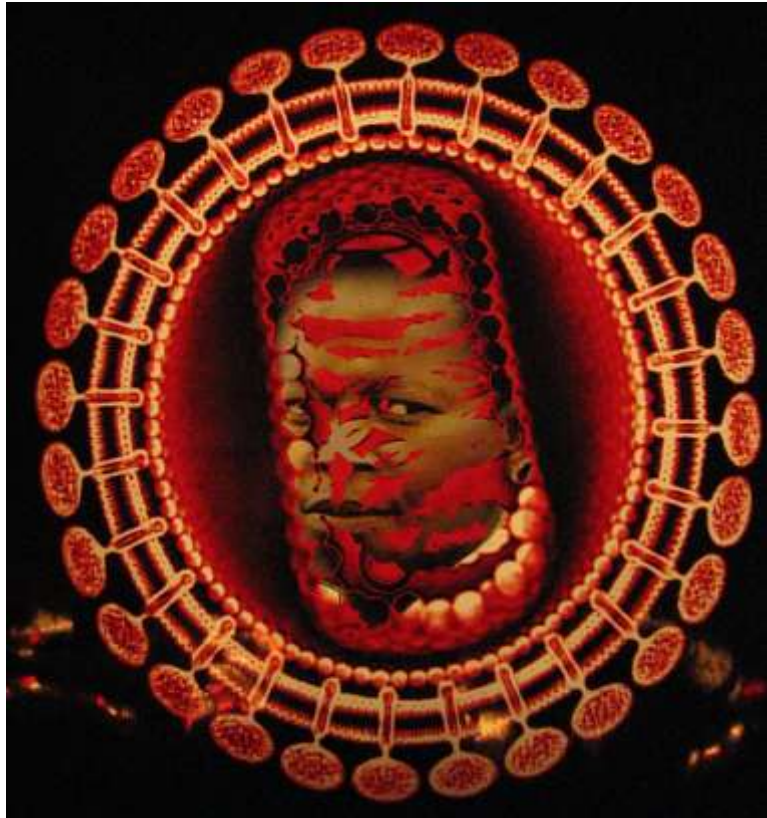
Ma-di-ki-da. We're in his home in his studio in Germiston in Johannesburg in South Africa and the date is the 15th of July. Churchill is going to talk me through some of the work that he's got available on the web at the moment.

[Paul and Churchill look at some images of Churchill's artwork, which is available at: <http://stevenson.info/exhibitions/churchill/status.htm>.] OK, this is an exhibition titled *Status* which I did around the 26th of October up to the 3rd of December 2005. These are just some of the images from the exhibition. The exhibition was inspired by my sister who died in April 2005. She was HIV positive and she had been living with HIV for about 9 years before she finally succumbed to the virus. [Pause] We were quite close – you know, she's my relative, she's my sister – so when she disclosed her status to me – I think it was in 2001 and she'd been living with it for quite some time before that – I was very angry for obvious reasons, you know, like I knew at some point the disease was going to take her away from me. And as a visual artist, I then wanted to know what HIV is and so I started doing research around HIV. I wanted to *see* the enemy because I work with visual images, so I started doing research and trying to find images of the virus, and [pointing at an image] that's an image that caught my attention, you know, if you don't look at the face [superimposed on the image of the virus - see image overleaf] - that's just something I did to 'own' the image, but also to talk about the experience. And I just found this image very beautiful, this image of the virus, it is like a microscopic image of this thing. And then I looked at how it actually mirrors – the beauty of the virus mirrors – how most people actually catch or get infected by the virus: it's through romance, it's through love-making, all those are beautiful things. But also, all beautiful things have some amount of danger or, you know, hazard-ness within [pause]. I then also I looked at how the virus multiplies within a body and how that mirrors how it multiplies within a community or a society.

So then I played around with these images, and made video works – stills – and eventually [pointing at images - see overleaf] installation of video works, stills and, you know, coffins I had made, which I don't call coffins, I call them shrines, it's like an altar-piece of some kind.

On the coffin here, is this...?

That's my sister's face.



Churchill Madikida, still image from the video *Virus* (2005).



Churchill Madikida, installation of *Status*.

Yeah. [Pause] Is this [death mask] on top of the coffin or is it inside?

It's inside, it's inside.

And that's a mask that's made of her actual face?

Yeah, that's her face mask. So how that came about was when she was getting very sick we had to take her to a place of care, you know, like a hospice, where they understand how to take care of a person of her status, so we would visit and I could see that really she was just – her life was fading away, you know. We still had hopes and wishes for her wellness and getting better and whatever but then she asked me to make something that would, you know, keep her [pause] I don't know what to call spirit, but her, [pause] her image, that would also include her spirit, her visions, her dreams, alive, you know. And I looked at her and there was something about her face ... when you remember someone you don't remember her hand, her foot – what stays in your memory is usually the person's face, so I then made a mask of her face – I mean she was in a hospice and there were other people around her; other patients, and then we started interacting, like we've been chatting about everything else and then we started talking with the other people about what I'm doing there, ask questions about why I'm doing what I'm doing to my sister's face, you know, and then that led to people asking me to take their faces, which became that installation. And my sister travelled; I mean, she didn't stay long in any one hospice, just moved from one to the next, and I was getting very frustrated because she was getting further away from home; and she was getting very difficult to visit because she was moving further and further away. And then when I asked, "Why do you need to move? You know, why can't you just stay in one place?" First it was reasons like, "In that hospice, they don't allow us to watch TV" and "Oh, that's not important", and in some other places the reasons would be, "They make us read the Bible 24/7, you know, they don't allow us to read anything else – watch TV or..." Other places it was about the diet and whatever, but eventually she told me her major reason was because, you know, you meet people, you make friends with other patients in the hospice but they slowly die, you know. So for her it was like [pause] waiting for her own death if she stays on very long at any one place, so she preferred to move and make other friends and then move before all of those friends passed on.

So we sat down and talked about all these things and then, I told you about the exhibition that I was going to make through my interaction – my experience – with her and everything, so when she passed on I then really focussed on that. She was ultimately a member of the TAC [Treatment Action Campaign], so she was very vocal, you know, about her status and people-living-with-HIV's rights and everything, so I wanted to further her voice, her mission, her vision and the best way I could do that was through what I'm able to do best which is communicating with art, so that's where the exhibition came from. [Pause] And yeah, [pause] it received a lot of reviews.

So that's where the idea for the exhibition, and for the piece, came from: are they also the ideas that you're trying to communicate through the piece? I mean, you're trying to demonstrate the duality of beauty and threat as we looked in those - the virus image; but are you able to communicate your sister's dread of seeing people die and that's why she had to move on or that's just something that you talked about?

I think it's all inherent in the sense that whether you're infected or affected you get to live this experience and her fears were my fears but in a very different way, you know. She was part of this process of seeing these people and she was infected, she was scared and, you know, also hated the fact of waiting for her own death; I was scared, as well, of losing her; I could see the people that were dying around her and for me, although it was different, I was waiting to be separated from my sister, I was also waiting for her death, you know. So what that compensation, or that working, is about, although we lived separate lives in the sense that she's much more intimate with the experience because it's her experience, but it's my experience as well; and I refer to my work as autobiographical in the sense that I tell my stories, you know, as much as this is my sister's story. It's my story, it's something that I lived but on a different level. So, I guess, the work then becomes something that is in the borderline – is it her story or is it my story? And if it's mine, how much claim do I have because I'm telling someone's story as well? But if it's hers, how did she get it out there, you know? So it's just a borderline case and it then comes to reflect on the stigma – if I can say – because people tend to look at people infected as separate from them because they're not infected; what they don't understand is that even that is an experience; that people that are negative are living a life that, you know, determines not only the discrimination against the others but the [pause] discrimination in the sense that it's their separation from the rest. So the work is something that is trying to link experiences in a sense that your story is my story. Your infection affects me, you know. And also the shrines – I made three coffins: one – which is that one – is solely dedicated to the memory of my sister; and then I have the small one which is in memory of all the young kids that have died through the virus, or because of the virus and that will still die because of the virus. And what hit me the most with the kids is they really didn't have a choice, you know. Others, on the other hand, might have had choices – although you don't plan to have HIV, you don't really make a choice that it's my choice that I have HIV – but somewhere there in the nitty-gritty there is a choice that one makes; either sleeping with someone without protection or having multiple partners and some people are just raped, you know, that's not a choice. So it's not really defining how people get infected and you know, then [pause] saying that people have made those choices, but I'm saying kids – babies born with HIV – were just never given an opportunity to make choices in life, you know, so that is in memory to those kids. And then I have the huge one which is [pause] a shrine dedicated then to everyone infected or affected by HIV AIDS, you know, so...

So that's a coffin which is much larger than the one that your sister was represented...

[Pause] And I set up the space – the installation piece so that people can... [phone rings] Sorry.

[The interview is momentarily suspended.]

So the installation piece was set up in such a way so that people are able to interact with the piece so they were allowed to...

So is it in separate rooms? Or was it one big room and you walked around it?

This installation is in one big room – this specific one – so as you can see now it's just demarcated by those curtains, you know, otherwise this is a huge room, and then there

were crosses in the background and the faces on the other side. But people were asked to – were allowed to – bring flowers and candles – to light candles – you know, to really interact with the piece. And through my research, you know, if you remember I found that image and then I had to look at how this thing, this virus, spreads in one's body and how that then reflects or mirrors the effect that it has within the community; how it spreads within one's body within a community, society and nation. So this is the video piece that I came up with.

[Plays video – sound of solo African woman singing]

Is that your sister singing?

Mmm, that's her.

[Churchill and Paul watch the video.]

So the images that you've got on the actual website are just the stills taken from the video?

Stills, yeah, from the video piece.

And that was behind – that was behind the curtains?

That was in a separate room. I had three rooms; there was one with the installation: the coffins, the faces and the crosses and everything else then there were two rooms where light was controlled that played videos. I'm going to play you the second video and talk about it later.

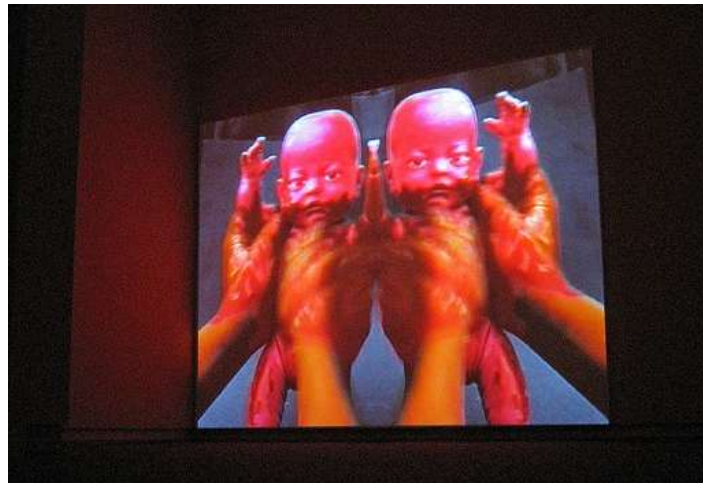
[Second video plays – sound of African men singing. Paul and Churchill wait for it to finish.]

Ok, this video piece came out, you know, like South Africa is famous, for what is [pause] the notoriety of rape, but specifically child rape, and, you know, I tried to imagine – I'm a father, I have one year, eight months old baby girl and at the time she was still like, six months or so – and I tried to imagine what is it that goes through someone's mind in order to do these horrible things to babies. As much as I tried, I just couldn't; I couldn't ever come to a conclusion, you know, how one does these things but I had assumptions of how one would get to a point of doing these things. And my first assumption was [pause] oh, first I thought I was looking at the wrong place, because I was trying to enter someone's mind but what I didn't do was to look at my mind: what is it that I do to present a platform where another person would do something to a baby, you know? And it all came down to me to stigma, in a sense that if our society alienates people living with HIV/AIDS and they then – I'm not saying all these crimes are committed only by people living with HIV/AIDS; that would be a bad assumption, but generally it's people that have HIV/AIDS that, you know, commit some of these crimes.

And this is because – the notion that if you have sex with a virgin, you can be cured?

Yeah, I'm getting there. You know, if our society alienates and you still want to belong and there is a cure – you're promised a cure by myth or something – wouldn't you go to every length to get that cure, so that you can belong, you can become part of this society? And

also if you're alienated and you're sick – you become sick – you become desperate and you become sick in the mind; so much that [pause] you're trying so hard to rid yourself of this virus that it doesn't matter what you do. But getting back to me, then it's me and my society that really commits these crimes by alienating all these people. If we could present them with an atmosphere of being included, being part of this society, if they could be accepted, they won't have a need to rid themselves – or try and rid – they will always try and find ways to rid – but it doesn't have to be as violent and as horrible as that, you know. So this video was inspired by that kind of realisation.



Churchill Madikida, still image from the video *Nemesis* (2005), installed at Documenta 12, 2007.

Just for the purposes of the tape, the video shows a man covered in red paint with a doll in his hands, a very realistic looking doll of a baby girl and with the paint on his hands he's, sort of, covering the doll all over: over her head, her hands and through her body and covers her with the paint which is symbolic of him infecting her, I suppose, and also, you know, trying to use her to heal himself. In looking at that, though, all I see is the crime and the despair of that situation; was there another component which showed that the reason that this is happening is because of the alienation and that we, then, as a general community, have a responsibility to help stop this?

I think the video has two components in it: the hands are supposed to care for this baby and in the beginning you can see...

He's cradling the baby in his arms.

Yeah, you know. And then that caressing becomes a violation, you know, as the video goes on, so it then looks back to taking care and then the violation, so those two components are played so that the audience or the person that's looking then has to question him or herself, you know, do I really take care of my babies, or myself or my community or other people? So I'm not putting up answers or solutions, I'm just presenting a case and people have to then make their own judgements or, you know, interact and come up with their own conclusions.

In speaking with Diane [Victor] yesterday; she's working on her most current, sort of, work at the moment is looking at pictures of religious icons and she draws them and then uses water to create stains on them. It's her, sort of, way of saying that our religious based society, our Christian society or our spiritual society and the Church itself, is stained, it's failed us, it hasn't provided the moral guidance, it hasn't been able to institute a morality that stops rape or that stops - that allows people to care and have compassion for people with AIDS. This installation has the cross, it's got the crucifix in it, it's using religious iconography, it's got the coffins, as if the memorial service is taking place within a religious institution. In your work were you in any way trying to comment on the role of religion and the Church or were you more - that wasn't the point of this exhibition?

Ok, I think the crosses, the coffin and the installation, like, the whole installation, is more about a ritual, a rite of passage, you know. [Pause] I believe that people go through rituals or rites of passage to attain something; if you're a child, you get to be an adolescent and, in my culture, you go to the bush, you get circumcised and you come back and you're then acknowledged to be a man. And, you know, there are other rituals that other cultures go through to get through that stage, but then if someone dies, there's the mourning ritual as well, you know, which is another rite of passage to come to terms with the loss. So the installation plays around that ritual: there's a funeral, and there's mourning, then you're supposed to rid yourself of the pain of the loss and whatever. And our funerals have become something else; they are both a celebration and [pause] a moment of pain, but what I've found so weird about them, people spend so much money on the funeral, you know, the casket could cost something like 30,000 rand, the service itself would be something like 20,000 rand, you know, with the tents and food and whatever. Then there's something called 'after tears' afterwards, where people drink themselves into a stupor. But my comment was then first in making these coffins - I made those coffins myself in my studio, you know - and one casket, the public shrine, you know, would have been the one that would cost 30,000 or was made with such care; but, I mean, it only cost me something like 1,000 rand...

The materials...

The materials. And then the baby one which cost me something like 50 rand and my sister's one cost me like 300 rand so the whole thing was less than one coffin, so it's a take on the ritual, which is the funeral, the expense, you know. [Pause] I think my intention was why don't people use that money, that 50,000 rand that they spend on the funeral, to make sure that the person's passing is comfortable and be able to express the emotions and whatever while the person is still alive, you know, instead of waiting until the person is dead. Some people go and make loans to do those funerals... so the mourning period becomes longer in the sense that this person still owes the bank or whatever, they're trying to pay back the money that they used for the funeral. It's just a long process which never really closes. And in our society, within a family, one would pass, you know, would die and then you bury that person, then you've got this loan in the bank and before you're able to pay it off - 50,000 rand is a lot of money - before you can pay that off someone else dies within the family and you start spending again and you owe 100,000 because, you know, your loan has interest and everything. So I think that whole thing was about people making, you know - not making the coffins but not spending so much on the coffins but spending, if you need to

spend, spend on the person, you know. So it doesn't really have something to do with the Church necessarily, but the Church is part of the ritual of the funeral and everything.

What kind of responses did you get then from the people who have viewed the installation, not just from critics but also people who moved through it and maybe your own family members?

I think it was mixed, in a sense that people tend not to like to talk about death, generally, you know, people don't like to talk about death. They like to talk about parties and everything that's really nice, you know, but what they fear, you know, most people fear death. So some people felt that this was too confrontational and others felt that this is what the community needs to acknowledge and talk about; these are issues that really need to be out in the open and, you know, debated. And with my family, I mean, they were very supportive during the whole process and they are at a stage now that they understand my issues and why I do the things that I do, so they just support me. Actually she's my – I call her my sister but she's my niece, she's my sister's child so I adopted her, you know, because she would've been an orphan if – I couldn't, you know – so we lived together and, you know, like it's those family structures that support each other that really matters to me. If you can lend a hand in one way or the other, and if you can raise issues, in one way or the other, for not only your family now, but also for the larger community...I also feel that art had played a major role in the fight against apartheid, you know, and I still feel that it has to play a major role in the fight against HIV/AIDS; we can't just sit back and let the virus do what it's doing to our societies.

I imagine your niece, your sister's daughter, was aware of this installation when you were constructing it and she went to view it. How did she respond?

At the time she was still going through a lot of emotions, you know. She had just lost her mother and [pause] she, God, she didn't really say much about the work itself but when it came out, she, kind of, accepted that the work is there and she also recommended that her mother's voice is being furthered; you know, her vision is being furthered.

How old was she when she died?

This was when – a year ago – so she was 14.

Fourteen. And what was the critical response to this work, apart from people saying that maybe it's too hard-hitting and too confrontational?

I think one stance was: is this art? Which was a question that, you know, I thought had long been dealt with. Some people didn't really understand putting that up and that it could be considered as art. [Pause] I mean, there was some mixed [responses] but one party I think could get that on Artthrob was [pause] the work was really what is, what our community needs still, you know, it's so critical to have this kind of work in a public space because our society is dealing with these issues. You can consider aesthetics and everything, but art [should be] a tool that deals with issues that determine a society. People have tended to shift from those kinds of works; they prefer to deal with, you know, less confrontational issues.

Well, in the end, I mean, this piece is difficult to sell; you're not going to get an institutional investor saying, "Yes, I want to put this in the foyer of my bank".

It sold!

Well, it sold...[Laughs]

It sold. [Laughs]

Well, there you go, my faith is restored in the art market.

Well, if you look, it's like sold, sold...

Ok, as in separate pieces.

Yeah, I mean...

Were they going to galleries or to investors?

This was bought by the National Gallery in Durban – that piece – and this piece, which are the faces, was bought by the National Gallery in Cape Town and one of the 'virus' videos – [pointing] that one – and I think three prints was bought by the Johannesburg Art Gallery, you know.

Ok, well I can understand galleries purchasing it but in terms of, you know, private investors or private collections, AIDS doesn't sell, particularly a piece like this, which is very personal, which is dealing so explicitly with death. I can understand why artists who are trying to make a living shy away from that and do, I suppose, sort of softer pieces.

But I also feel that [pause] artists that make this kind of work don't really consider the financial or the commercial component or aspect of the work. They want to get a message across and if it's sold then it's a bonus, you know, if someone, a buyer buys it, it's ok, but the main intention is to deal with a certain issue that one wants to get across.

You might be aware of a debate that took place in America – at the start of the 1990s – which was sparked by a dance critic, Arlene Croce, who was viewing a dance work by Bill T. Jones, whose partner had just died of AIDS. Bill T. Jones invited some people with AIDS to join the company and some of his company were men who had HIV as well, and he constructed a dance performance around this, and it played it in a major venue in New York, and he's a major choreographer. Arlene, as the reviewer for the *New York Times*, had to go along to the show and review it. And she refused. In the end, she said, "I can't do – I can't review this", partly due to concerns about "Is this really art?" or "Is this propaganda or activism?" but also, "How do I tell someone who is doing a dance piece about his partner who has died that, technically, I didn't like the way they danced?" You know, how can a critic come and look at this show and say, "I didn't think the coffins were very good", you know or I didn't like the AIDS...

But people did say that!

Really?

Yeah, people did say that.

Well, yeah. But I think they are put in a difficult position – critics – when they have to come and review...

I think...

...from a formal level something so personal.

I think from a level it's OK, you know, you can review the pieces as "I did not like the prints because the quality or the aesthetical component of it didn't come across as very strong", which is ok, I accept that, you know. And the content then becomes something else. You cannot, [pause] I mean, be judgemental about the thing in itself; many people are dealing with...

[A knock at the door]

Let me just open that. [Brief pause] Many people are dealing with those issues and each artist chooses what he feels or they feel, you know, what they want to talk about it. I don't mind people criticising the work in terms of its formal whatever.

Components.

Yeah.

One of the real challenges in making work about AIDS is to not leave people completely devastated or not completely despairing when they see it, I think, because research has showed...

It is hard.

...yeah, and medical studies have showed people who feel despair are the ones most likely to become infected because if they don't experience hope, they don't see the reason for practicing safe sex or whatever, they become fatalistic. Is there a possibility that someone viewing this exhibition could've just seen it as a despairing, sad exhibition that was focussing on loss?

I think it has that component but it's also about closure, you know, when people came in and interacted by lighting candles and throwing flowers and all that, it's about an acknowledgment of, you know, this disease exists, it's an acceptance that it exists and people have come up and disclosed their status and people are continuing to raise issues about people infected by HIV rights, and the closure component is about a celebration of life, you know, it's like we've lost them but we should not allow this thing to do what it's doing to our society. So when people went out, I imagined that they would have that kind of feeling and some people came up and they, you know, talked about how they felt about the exhibition and most were really comfortable with how the journey of the exhibition led

them; because the first room was about there are such process meeting HIV and the second one was about how it infects one and the third one was about loss, so...

[Phone rings]

I'll shut this off.

[The interview was suspended for a short period.]

Do you know if – this is at the Michael Stevenson Gallery – do you know if there was a visitor's comments book that was kept?

Yeah, there was.

So there might be some sort of audience responses that could be interesting. I'll try to get in contact with him [Michael Stevenson]. We were just talking about the way that audiences respond – about whether they feel despair or whether they find it hopeful or whether they find it an endpoint – and there is something about walking into a space with lots of other people who are doing exactly the same thing as you – whether you're all lighting candles together or you're all contemplating the same things – and how you can derive a lot of hope and energy from seeing that other people are feeling the way you are. We know that that's happened during other AIDS-art exhibitions where people – and they've recorded this in the comments book – have noted, "This is the first time that I haven't felt alone" or that, "I've felt like other people are with me" and "This is the first time I've grieved; this work and being with these other people has, you know, helped that grieving process". Do you think that might've been happening with this exhibition as well? Or did anyone even mention, "Well, this is the first time I've been able to..."?

I think verbally people spoke to me because I did walkabouts. So after the walkabout people would comment and pose questions, you know. And people really [pause] engaged with the works and they had hope and they, you know, they mourned and some people mourned not because they had lost someone, but because they know that they're losing people all around; they understood that even if you were not infected you are affected; I mean, business people are affected, our work force is really affected, schools, every component of our society is affected by HIV. So people then – I think this exhibition presented a platform where people could really acknowledged that HIV is a problem.

Moving away from your own work, I want to ask you about your responses to other artists and South African artists who have done AIDS-related work such as Diane Victor or Clive [van den Berg] or Penny [Siopis]. What is your opinion of that work?

What I would say about that is we need more artists to engage with the issue. I appreciate the fact that Clive, Penny and Diane are doing what they do – we just need more artists to engage with the issue so that more people are reached, you know, like they encounter different voices and pose different questions and presentations to the people so that they engage with HIV on all levels.

Can you think of a South African artist's work which has had an effect on you: on the way that maybe it's changed your feelings about the epidemic or helped you deal with your frustrations or sense of loss?

I mean, I wouldn't point out one particular artist but I engage with most works in different levels but there are works that, you know – there was an exhibition in Durban that specifically focussed on HIV/AIDS so artists just submitted a piece of their work that dealt with the endemic, you know. And seeing the community of artists presenting or dealing with the issue really inspired me, so it's more of the communal response to the pandemic that, you know, touched me. I mean, individual artists deal with specific things, or experiences or whatever, but then when they all put together they then reflect what our society as a whole should be doing.

What about other artists in other countries? Have you encountered, say, some of the AIDS related artwork coming out of America, and did that interest you and inspire you in any way?

Before I made this work I looked at artists all over the world that deal with AIDS and, yeah, I was impressed. I think it's one thing or it's one theme that people should look at. This virus has killed more than both World Wars, you know, and I just feel that more people should engage with it.

Moving outside of the visual arts into other artistic mediums – so film or writing or music, dance or anything like that – can you cite any examples that...

Yeah, there was a film called [pause] *Yesterday* which really touched me. And the – a dance [pause] companies that, you know, like there's Hlengiwe Lushaba, she's one of the Young Standard Bank winners this year [for dance] and she did a piece on HIV that was really inspiring.

Do you know where she's based?

She's in Jo'burg; I have her number [pause] so she's around here. And she's done something recently, actually, using some of my projections, *Virus* and *Nemesis* in the Grahamstown Art Festival which, you know, no one has stopped talking about that performance, it was just so effective.

[Phone rings. Churchill needs to take the call and the interview is concluded.]

[End of interview]

If citing this interview please use the following:

Churchill Madikida interviewed by Paul Sendziuk, Johannesburg, 15 July 2006, *The Art of AIDS Prevention*, <http://www.aidsart.org>; accessed <insert date>