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Book Review: Gender and HIV/AIDS: Critical Perspectives from the Developing World

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Reviewed by Cassandra R. Warren1

The 2008 report by the Joint United Nations Programme on HIV/AIDS stated that globally 30.6 million adults and children are living with HIV/AIDS (3), and when one isolates the statistics by region and gender, they show considerable variation, with a higher percentage of women infected, especially in Sub-Saharan Africa. The recognition of this inequality lead to the development of the term, ‘feminization of AIDS,’ which points to the social and biological features of women that place them in a vulnerable position. The scholarship and literature on this topic caused many organizations to focus funding on creating programs targeted at women. Although this was a positive feminist movement in regard to an awareness of sexual health, it was not without a backlash that reinforced the stigma of HIV/AIDS, put the blame on women, and portrayed women as victims. This epidemic involves many layers and sources of influence, which encompass more than just a focus on the spread of HIV/AIDS. In Gender and HIV/AIDS: Critical Perspectives from the Developing World, Jelke Boesten and Nana Poku explain women’s vulnerability to HIV/AIDS in terms of structured gender inequalities and discuss the effects of this on people’s access to health services and their capacity to protect themselves. Poku and Boesten address why and how these structured equalities support a system in which women remain vulnerable to HIV/AIDS. In addressing this situation, they focus on how policies and organizations of aid have attempted to ameliorate this vulnerability at the individual and community level. At the same time, however, Poku and Boesten examine how programs and legislation have weakened, though unintentionally, the position of the these organizations to provide successful assistance in some situations. The goal of this book is to explore structural inequalities and demonstrate their relationship to the AIDS crisis and to policies of effective change.

The book is divided into three parts: Gender Vulnerabilities, Targeted Interventions, and HIV/AIDS and Changing Gender Relations. Part One discusses the multiple layers and influences that effect women and present challenges to HIV prevention. This is done through exploring the different levels of marginalization among sex workers, exploring how multiple sources of power and discrimination—race, age, gender, sexuality, and class—work in combination to create people’s identities and more importantly, their experiences of everyday life. For example, in chapter two, Ximena Salazar, Clara S. Figueroa, J. Maziel Giron, and Carlos F. Caceres discuss how sexual scripts place women in a vulnerable position, in which they often make destructive decisions. In Peru, women cannot consciously express sexual desire, and some young women use alcohol to blame a bad decision, such as sleeping with a boyfriend (47). Additionally, using a condom with a stable partner indicates that you are not to be trusted or that you do not trust your partner; either way, women are limited in their decision to negotiate the use of condoms. In chapter three Boesten, based on his fieldwork in

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Tanzania, addresses how women’s gender and economic positions affect individual
notions of risk and trust once they know that they are HIV positive (67). Because the
labor market in Tanzania is not open to many women and causes men to travel, having
multiply partners is legitimized for men and tolerated for women. Additionally, these
circumstances cause women to have many boyfriends while their husbands are away in
order to receive monetary or economic goods/resources. This situation presents a problem
in Tanzania because town officials do not recognize that the main vector of HIV/AIDS is
maintained through these different and long-term relationships, and instead focus their
attention and resources on the sex industry on the outskirts of villages. This theme of
problematic focus is highlighted in many of the chapters in Gender and HIV/AIDS, and
provides insight into programs that focus on target groups, such as sex workers,
homosexuals, and drug users.

Part Two looks at interventions in Cambodia and India, discusses their successes
and failures, and examines how political and policy changes have affected programs that
provide aid and support. This section is beneficial for social activists and policy makers,
as it provides an understanding of prevention among sex workers and looks at top-down
and bottom-up approaches through three particular policy contexts. In chapter five,
Joanna Busza discusses how images of prostitutes as victims or vectors generalize their
situation to the point that implementing effective methods of risk reduction are difficult
and inefficient. Busza discusses these binary images of sex workers and the polarized
debate among feminists in providing aid to sex workers by tracing the developments and
changes in HIV prevention approaches to sex workers in India and Cambodia (103).
Busza analyzes the success of the Sonagachi program in India to demonstrate how
fostering solidarity and empowering women contribute to valuing community
development as a legitimate HIV prevention strategy (104). Busza also discusses projects
in Cambodia and Svay Pak to highlight two main points. First, she highlights the
approaches that were successful in reducing vulnerability to HIV, such as creating social
networks, developing trust between groups of prostitutes to build solidarity, and creating
social supports. Second, she highlights how changes in policy and ideologies/values
undermined the resources for these types of programs. During the Bush administration
recipients of USAID grants could only support programs that formally opposed
prostitution, thus programs whose focus was on empowering prostitutes or handing out
condoms were financially restricted. In chapter six, Flora Cornish reinforces Busza’s
point by focusing on empowerment techniques used in HIV prevention programs with
sex workers in India. Cornish states that programs need to tackle social issues instead of
individual change if they want to maintain a successful approach (121). In India, men and
women have different roles within sexuality and sexual behavior, which are created in a
sociocultural context, and these differing roles affect their vulnerability to HIV/AIDS
collectively more than individually.

Part Three focuses on HIV and changing gender relations, and how these changes
can have a positive effect on not only decreasing and hopefully stopping the spread of
HIV, but also on the relationship between men and women in general; namely, the
socioeconomic differences that create inequality between men and women and are
typically associated with power differences in these relationships, such as work/pay and
political status, and rates of violent crimes against women. The order of these three parts
provides a clear progression in which the reader will not only understand why women are
more vulnerable to HIV/AIDS, but also how the sociocultural structures of gender and sexuality are entangled within the structural framework that contributes to these vulnerabilities. The argument made in *Gender and HIV/AIDS* is that if there is to be a significant decline in the number of HIV/AIDS infections, the sociocultural structures and norms in a society that place women at risk must be addressed.

*Gender and HIV/AIDS* carries the voices of both scholars and social activists. Typically, literature that is heavily inundated with political and feminist tones can be read as one-sided or become a source of controversy, but Boesten and Poku, as well as the other contributors, take a pragmatic perspective on how gender inequality and sexuality affects both women and men and how regional, political, and economic differences affect how women and men protect themselves, access health services and education, and survive with HIV/AIDS. I think *Gender and HIV/AIDS* could be useful in the classroom and for scholars with interest in this subject area. The book is not bogged down with theoretical or philosophical jargon and all authors successfully explain the complexities of structured inequalities in a manner that can be understood by both students and scholars from all academic backgrounds. *Gender and HIV/AIDS* provides a sobering outline of the multi-layered and entangled structures that place women in vulnerable positions in their communities and highlights the struggle we face as scholars, politicians, policy writers, and AIDS/HIV program leaders to improve the sexual health of women, men, and children worldwide.