are also thought to cause similar symptoms. While for others the sufferers had no one to blame but themselves and their inappropriately permissive sexual conduct, where sorcery accusations are a cover-up to prevent the shame associated with immoral sex, Rödlach argues that ‘magical’ beliefs may have an important role in preventing extra-marital sex, and therefore, potentially at-risk behaviour.

In Zimbabwe, conspiracy theories on HIV/AIDS stem in great part from a general lack of knowledge or consensus regarding its origins, a fact which was, according to Rödlach, an overwhelming source of concern among his informants. To most, the importance of finding the ‘evil doer’ was imperative, for only then could a cure be obtained. The emphasis is more on healing, here, than on prevention. Rödlach says that conspiracy theories tend to be prevalent among groups who have traditionally experienced outside aggression, or diminished agency. In Zimbabwe these seem to fall predominantly on racial lines, with no small help from the media and government officials, who often incite such suspicions. The late vice-president of Zimbabwe, Rödlach tells us, publicly suggested that the country’s white population were conspiring to wipe out the blacks using HIV/AIDS, in order to take their land. The United States is one other such potential mastermind, and it is perhaps not surprising, given the high prices of the ARV drugs. From HIV as Western-experiment-gone-wrong to HIV as purposeful-intent-to-destroy, these theories of blame both reflect and shape the country’s experience of the disease. Moreover, that science and medicine are often linked in popular imagination to precisely such purposes, makes prevention campaigns all the more difficult to conduct successfully.

Rödlach’s contribution, in this volume, is to point out that a complex set of constructs and expectations inform people’s sexual behaviour and attitude to HIV/AIDS in Zimbabwe. Agencies, healthcare providers and awareness initiatives must address these concerns and values if they want to develop an efficient HIV/AIDS prevention strategy.

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AIDS has taken an extraordinary toll on sub-Saharan Africa, where the epidemic has already claimed millions of lives. At the same time, an estimated 25 million people are still living with the virus in this region – a faceless mass of people, written off as ‘Africa’s lost generation’. Dilger, in his sensitive study of life with AIDS, gives these people a face and a voice. In five chapters, he analyses how AIDS ruptures family ties and threatens socio-cultural continuity and how social and cultural relationships are renegotiated in the context of this stigmatising disease. He shows that in the face of constant suffering and death, biomedical categories and messages of AIDS awareness campaigns subside in importance, and individual and communal approaches to dealing with AIDS take the form of a moral practice.
This moral practice often contributes to stigmatisation and increased suffering in the attempt of locating the blame for the infection. At the same time, however, it is the central force in people's pursuit of continuity, as questions of relatedness, solidarity, and belonging are renegotiated. Taking an actor-centred approach, Dilger asserts that life with AIDS is not entirely determined by structural forces. Instead of focusing on the limits of individual agency, he highlights the possibilities for agency within the existing structural constraints, exposing the dialectical relationships between actor and society.

In the introduction, the author provides a short overview of the epidemiological situation and demographic impact of AIDS in Africa, followed by a critical analysis of the Tanzanian political response to the pandemic. Then follows a detailed introduction into the research's theoretical framework and methodology. Dilger's main research question is how people living with HIV/AIDS in rural and urban Tanzania have integrated their illness experience into their daily lives, and how they succeed — or fail — to cope with the social, economic, and emotional problems they face in the course of the progressing illness.

The quest for meaning, for making sense of the suffering, Dilger argues, is vital in individuals' and communities' attempts of coping with the epidemic. AIDS, as a social crisis, poses questions about the quality of social and sexual relationships, and the quest for meaning largely takes place in the form of moral discourse and practice. In Tanzania these are based on Christian discourses that associate HIV infection with sinful, immoral behaviour, and on discourses of ritual pollution (chira) resulting from the breach of taboos.

The central role of the extended family in dealing with AIDS is emphasised in the second chapter. Focusing on the Luo in rural north-western Tanzania, Dilger shows how the epidemic is putting additional pressure on already stretched social networks and contributes to the destabilisation of extended families. He juxtaposes the persisting ideology of familial solidarity and mutual responsibility with the realities of disintegrating relationships and the neglect of responsibilities. Analysing the tensions and conflicts arising from the practice of caring for the sick, but also from the questions of widows' social status and right to inheritance, and their ritual cleansing in the course of the funeral rites, the author emphasises that despite the difficulties the different actors ultimately strive to reconcile relationships and ensure the continuity of the extended family.

Funeral rites, in particular, serve as an affirmation of the deceased's belonging, even if kinship ties had been suspended during his lifetime. This chapter skillfully elicits how social and kinship relations are negotiated and redefined in everyday practice in the face of the often overwhelming demands HIV/AIDS poses to families and communities. The following two chapters focus on institutions outside the kinship network that have assumed a vital role in the support and care for HIV positive people in urban centres in particular. Chapter three analyses the role of NGOs in the provision of social security, and takes a closer look at the concept of 'positive living' which dominates the NGOs' approach. Dilger shows how the participation in support groups helps the members to rebuild a positive self-perception, in addition to providing material support. At the same time, a strong donor dependency stifles attempts to redefine programme contents according to local views and agendas and often leads to a tokenistic adoption of foreign concepts, with little aspiration to instigate political change. The social security provided by NGOs is limited by fear of stigmatisation, which hinders the development of stable social relationships.

The relationships forged in the context of a Pentecostal church in Dar es Salaam, analysed in chapter four, are more permanent than those in the NGOs, and offer social
security and support particularly for women. In a detailed analysis of the church’s concept of sin and its practice of spiritual healing, the author describes the transformative capacity of Pentecostal salvation, which not only provides a meaningful explanation of the suffering caused by AIDS and promises the possibility of a cure, but also integrates the believer in a close-knit community of solidarity that often replaces the role of kinship relations in the provision of social security. At the same time, however, believers distance themselves from their families of origin, resulting in considerable tension and conflict within their kinship groups.

The last chapter of the book reflects on previously analysed processes of disintegration and the rebuilding of relationships of solidarity by focusing on the issue of stigmatisation. Examining the contexts in which people talk – or choose not to talk – about AIDS, Dilger highlights the complex interwoven nature of local discourses and rumours that draw on biomedical, witchcraft, and pollution concepts in the explanation of sickness and create a high amount of uncertainty about individuals’ HIV status. By avoiding final statements about the cause of a person’s suffering, hopes and possibilities are actively kept open and his dignity is protected. At the same time, the rumours serve as social control mechanisms, geared at channelling the available information and directing people’s behaviour into locally acceptable forms. The author emphasises the processual nature of illness, demonstrating how individual actors can take different positions in the course of the illness, thus re-constituting the relationships between the sick person and his social environment.

In the conclusion Dilger revisits the various ways in which Tanzanians endeavour to mend the ruptures and discontinuities resulting from processes of globalisation and social transformation, thus counteracting the collapse of social and cultural cohesion and shaping the forms of a distinctive Tanzanian modernity in the context of AIDS. He rightly calls for more sophisticated, long-term comparative studies of how these processes of social break-up are experienced by the people themselves and what responses they develop in trying to cope with the transformations in a meaningful way.

Leben mit AIDS is an excellent study of life with the HIV-virus in Tanzania, embedding people’s individual practice both in their personal history, and in their social, cultural, political, and economic contexts. The focus on personal, familial, and communal experiences of living with AIDS and the rural–urban comparison make this book a unique contribution to the growing body of thorough anthropological studies on the pandemic’s impact on people’s lives. Dilger’s open and honest way of talking about his personal emotions during fieldwork, about his fears and agitation when confronted with dying people perceived as ‘contaminated’ by AIDS, can only add to the authenticity of this book and is no doubt shared by many researchers on this topic. I fully recommend this book to anybody who is interested in the study of AIDS; it should certainly be standard reading for medical anthropology students, as well as people working in the development and implementation of HIV/AIDS policy.

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