



AIDS and Anthropology Bulletin



NEWSLETTER OF THE AIDS AND ANTHROPOLOGY RESEARCH GROUP



107th AAA Annual Meeting | November 19-23, 2008 | San Francisco Hilton and Towers

Inclusion, Collaboration & Engagement

November 19-23 2008
107th AAA Annual Meetings
San Francisco, CA

Listing of all HIV/AIDS Panels and Individual Presentations

List compiled by Alex Rodlach
Layout: Dugeidy Ortiz

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Please join us at the
AARG Business Meeting!
 Thursday, November 20 from 12:15- 1:30 p.m
 In the Continental Parlor 8
 Hilton Hotel, San Francisco

AARG MEETING

Thursday, November 19: 12.15 pm to 1.30 pm

Chairs: Vinay R Kamat
Organizers: Delia E Easton

SESSIONS

Wednesday, November 19: 4.00 pm to 5.45 pm

Invited Session: HIV/AIDS: UNDERSCORING NEEDS FOR AND CHALLENGES TO

COLLABORATION (Sponsored by AfAA and NAPA)

Chair: David S Turkon

Organizers: Alexander Rodlach, David S Turkon

Participants: Fraser G McNeill, Roos A Willems, John Mazzeo, David S Turkon, Alexander Rodlach

Wednesday, November 19: 6.00 pm to 7.45 pm

AIDS AND IDENTITY: NEW ANALYSES, SHIFTING PARADIGMS

Chairs: Jill Owczarzak

Organizers: Anika Wilson, Carey E Scheerer

Participants: Jill Owczarzak, Robert Wyrod, Fanny FC Chabrol,

Anika Wilson, Carey E Scheerer, Celina E Kapoor

Discussant: James T Pfeiffer

Friday, November 19: 10.15 am to 12.00 pm

HIV/AIDS PREVENTION AND TREATMENT IN AFRICA

Chairs: Mark R Luborsky

Participants: Kaja Tretjak, Sophie S K Kotanyi, Daniel T Halperin, Jessica E Price, Mark R Luborsky, Toni J Copeland

Friday, November 21: 4.00 pm to 5.45 pm

Invited Session: INCLUSION, COLLABORATION AND ENGAGEMENT: THE CONTINUING ROLE FOR ANTHROPOLOGISTS IN THE WORLDWIDE HIV/AIDS CRISIS. (Sponsored by AAA Executive Program Committee)

Chairs/Organizers: David K Beine

Introduction: Merrill C Singer

Participants: Douglas A Feldman, Frederick Bloom, Edward C Green

Friday, November 21: 4.00 pm to 5.45 pm

A GLOBAL SOLUTION? ENGAGING THE REALITY OF THE INTERNATIONAL HIV/AIDS TREATMENT SCALE-UP IN DEVELOPING NATIONS

Chairs/Organizers: Marita Eibl, Joel C Reed

Participants: Marita Eibl, Joel C Reed, Kathryn A Rhine, Gaelle P Krikorian, Jonathan S Metcalfe, Maj-Lis A Foller

Discussant: Betsey B Brada

Saturday, November 22: 1.45 pm – 3.30 pm

HIV/AIDS PREVENTION AND TREATMENT

Chair: Arachu Castro

Participants: Fabian JB Cataldo, Arachu Castro, Lee M Kochems, Casey J Miller, Martha J Bojko, Jennifer L Fagan, Andrea P Sankar

INDIVIDUAL PAPERS

WEDNESDAY, NOVEMBER 19:

12.00 PM:

ODHA

Session Title: Figures of Indonesian Modernity

Start Date: 11/19/2008

Session Time: 12:00 PM - 03:45 PM

Author: Tom Boellstorff

The ODHA (Orang Dengan HIV/AIDS), or “Person Living with HIV/AIDS,” represents a figure whose largely absent presence speaks to characteristics of Indonesian modernity. The first person living with HIV/AIDS in Indonesia was identified in 1987. However, it is only in recent years, with the advent of antiretroviral therapies (ARV), that more Indonesians with HIV are living longer and healthier lives and self-identifying as ODHA. This requires ODHA make themselves known to a health system that brings together state agencies and NGOs in service of a pharmaceutical regime of care. While only a few ODHA have begun to speak publicly about their condition and the stigma they face, the growing number of Indonesians living with HIV/AIDS means that the figure of the ODHA is an emergent cultural category, one that resonates with broader societal anxieties over health, contagion, blame, risk, and vulnerability. Ultimately, as a figure associated with border-crossings between bodies, nations, and realms of propriety, the ODHA speaks to understandings of globalization, security, and integrity. By attending to both representations of “the ODHA” and the life experiences of actual ODHA in Indonesia, we can learn how cultural political economies of disease and selfhood shape dynamics of belonging in the archipelago.

4.00 PM:

Challenges, Rewards, and Potentials: International Collaborative Research on HIV/AIDS

Session Title: HIV/AIDS: Underscoring Needs for and Challenges to Collaboration

Start Date: 11/19/2008

Session Time: 04:00 PM - 05:45 PM

Author: David Turkon

Lesotho is characteristic of many African nations in that it has a weak public health sector that has been strained by HIV/AIDS. Numerous NGOs have stepped forward to combat HIV/AIDS and help mitigate its affects on the afflicted and their families. While such efforts are laudable, they commonly undermine a unified approach to public health as well as potentials to strengthen public health sectors. This paper describes collaborative research aimed at

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formulating and implementing a culturally specific HIV/AIDS intervention centered on nutrition and community capacity building in rural Lesotho. By centering activities on the School of Agriculture at the National University of Lesotho, researchers are working to bring local knowledge and expertise to the research priorities and intervention strategies. They are also working to build research and intervention capacity at the national level in Lesotho. The interdisciplinary nature of this research, which includes expertise in agriculture, public health, nutrition, maternal and infant care, medical anthropology, economic anthropology and community dynamics, raises challenges which are discussed in this paper. Among these challenges are finding ways to comprehend and respect contributions from colleagues who represent disciplines that at time seem foreign, and attract funding from agencies where research priorities seldom encompass such broad interdisciplinary approaches.

Accounting for the Experiences of Participants in the Evaluation of AIDS Programming

Session Title: HIV/AIDS: Underscoring Needs for and Challenges to Collaboration

Start Date: 11/19/2008

Session Time: 04:00 PM - 05:45 PM

Author: John Mazzeo

The difficulties of achieving a successful partnerships between foreign NGOs and local government can lead to uncoordinated and fragmented outcomes for HIV/AIDS programming that has real consequences on the immediate health and livelihood security of intended beneficiaries. This paper is based on field research in rural Zimbabwe and contributes to the larger discussion on how anthropologists can improve AIDS prevention and mitigation efforts. Our analysis draws on the experiences of people living with HIV/AIDS to offer a critique about the problematic ways in which services are delivered and the unrealistic expectations that are held by outside organizations. One important contribution of anthropologists working in international health has been our ability to represent the interests of affected populations in program and policy design. This approach is crucial in rural Zimbabwe where populations are less willing to voice their opinions for fear of being cut off from what little assistance is available if what they say will be viewed as being uncooperative or noncompliant with program objectives. Our paper will examine the experiences of several participants in a home based care program for people living with HIV/AIDS that combines health care, food security, and income generating initiatives. Participants will explain how they cope with inconsistencies in programming; the potential for increased stigma as a result of poorly conceived targeting; the need for greater program flexibility; and the unrealistic expectations placed on them, their households and the community.

“Condoms cause AIDS”: Poison, Prevention, and Denial in the Venda region of South Africa

Session Title: HIV/AIDS: Underscoring Needs for and Challenges to Collaboration

Start Date: 11/19/2008

Session Time: 04:00 PM - 05:45 PM

Author: Fraser McNeill

This paper presents a critique of the currently popular argument that Southern Africa is experiencing a macro-level AIDS denial. Based on fieldwork conducted in the Venda region of South Africa, I argue that the complex social processes that create and maintain the avoidance of open conversation around HIV and AIDS must be understood in the wider context of conventions through which causes of death are either spoken about or not. My research demonstrates, through two case studies, that by invoking silence, coded language and obfuscation, degrees of separation are constructed that create a social distance between an individual and the unnatural or suspicious causes of others' deaths. Policy making based on the inadequate understanding of this wider context has played directly into a patriarchal folk model that constructs female peer educators and the condom as their central symbol of prevention as vectors of the virus. Anthropological understandings of these folk models could be used to tailor culturally sensitive, micro-level education campaigns that would be much more effective than current approaches to HIV/AIDS education in the region.

De-stigmatizing HIV/AIDS in Rural Senegal: The Crucial Importance of Interdisciplinary Collaboration

Session Title: HIV/AIDS: Underscoring Needs for and Challenges to Collaboration

Start Date: 11/19/2008

Session Time: 04:00 PM - 05:45 PM

Author: Roos Willems

Senegal has an HIV/AIDS prevalence rate of less than 1%, a success generally attributed to the country's quick response to the epidemic in the early 1980s and continued efforts to curtail the spread of the epidemic. However, as the bulk of the healthcare infrastructure and support for HIV-positive individuals and AIDS patients are located in urban areas, there exists little accurate information on HIV/AIDS in rural areas. Focus group interviews with rural women held in 2006 in the regions of Kolda and Tambacounda revealed that the stigma of AIDS remains an enormous problem in rural Senegal. HIV/AIDS is generally equated with unavoidable death, divorce, and the economic collapse of the family despite the fact that most of the participants in these focus groups had already attended one or more local HIV/AIDS campaign. The ineffectiveness of HIV/AIDS awareness messages in rural areas is strongly related to their lack of cultural sensitivity, just following pre-prepared routines and patterns and overlooking the specific cultural particularities in multi-ethnic rural Senegal. There is an urgent need for interdisciplinary research and collaboration between anthropologists and HIV/AIDS experts from other disciplines, to provide culturally appropriate awareness education campaigns that will be meaningful for peer groups such as rural women, one of the groups in Senegal that are most vulnerable to become infected with HIV.

Home-based Care for AIDS Sufferers in Zimbabwe – An Example of Patient Dumping?

Session Title: HIV/AIDS: Underscoring Needs for and Challenges to Collaboration

Start Date: 11/19/2008

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Session Time: 04:00 PM - 05:45 PM

Author: Alexander Rodlach

About twenty percent of the adult population in Zimbabwe is estimated to be HIV-positive. Overwhelmed by the large amount of patients suffering from AIDS, the government was forced to collaborate with non-governmental organizations encouraging them to support the public health care sector by training volunteers to assist households into which AIDS-patients have been discharged. As a response, groups of volunteers were formed, who provided basic material, social, and nursing support to household members and individuals with full blown AIDS. My research in a residential area of Bulawayo shows, that over the years, these groups could not any more cope with the increasing number of patients. Voluntary caregivers became resentful of hospitals 'dumping' an ever increasing number of patients into their care. Unless the government seriously collaborates with these groups of voluntary home-based caregivers as equal partners in efforts to cope with HIV/AIDS and integrates them into a comprehensive national health care approach to the epidemic, many groups will collapse leaving particularly the poorest households without any support for caring for AIDS sufferers.

6.00 PM:

“Government loves its citizens so much that it gives medication”: reshaping national identity around access to free AIDS treatment in Botswana.

Session Title: AIDS and Identity: New Analyses, Shifting Paradigms

Start Date: 11/19/2008

Session Time: 06:00 PM - 07:45 PM

Author: Fanny Chabrol

Since the beginning of the AIDS epidemic, many anthropological works have shown how certain identities were blamed and stigmatised in relation with the disease and how in turn identities and subjectivities were reconfigured through these processes, for example, Gay identity and activism. More recently, anthropologists have analysed HIV/AIDS using a biopolitics approach around the idea of a “biological citizenship” (Biehl, Fassin, Nguyen). They have described the biopolitical nature of the AIDS epidemic and the processes in which projects and claims are made at a transnational level on the basis of one’s biomedical condition. Following these perspectives, I want to focus on the transformations of national and collective identity in Botswana around the policy of access to treatment. With a population of 1.6 million inhabitants and HIV prevalence rates of around 30% of adults, AIDS in Botswana has been problematised in terms of survival of the population and of the nation. Indeed, in 2002, the government has started to provide free access to antiretroviral therapy for all the citizens in need of medication, with the support of international private partners. Using ethnographic data gathered in the main public hospital of the capital city, I investigate the ways in which HIV/AIDS patients are constituted as biopolitical subjects in Botswana. Medical and biological condition of HIV patients and moral categories at stake in the doctor-patient interactions are particularly relevant to study the reconfiguration of national identity and the redefinition of a

collective sense of belonging.

From Denial to Assimilation: AIDS and the Contours of Masculinity in Urban Uganda

Session Title: AIDS and Identity: New Analyses, Shifting Paradigms

Start Date: 11/19/2008

Session Time: 06:00 PM - 07:45 PM

Author: Robert Wyrod

Uganda’s success in reducing HIV prevalence and combating AIDS stigma has been the focus of much research. Yet less attention has been paid to how the mature AIDS epidemic in Uganda is shaping gender identities—especially the identities of men. Drawing on ethnographic research with an unique support group for HIV-positive men in the Ugandan capital Kampala, this paper examines how the AIDS epidemic has become intertwined with local conceptions of masculinity. Based on my participation in this support group, I argue that there are significant generational shifts in the ways AIDS intersects with men’s identities. For older men, denial was central to their encounters with the disease, with AIDS stigma closely tied to anxieties these men felt about their social status. But for younger men, AIDS had been assimilated into their worldview and denial had been replaced by a sense of fatalism about the presence of AIDS in their lives. This fatalism was symptomatic of a more general malaise many young men felt about their futures. AIDS, therefore, has become intertwined with male identity in urban Uganda, but in complex ways. Local conceptions of masculinity are central to men’s responses to AIDS, but there is no homogenous, monolithic manner in which men contend with AIDS. Male identities in urban Uganda are multiple, and the prolonged AIDS epidemic is adding yet another degree of complexity to these gender identities.

Risk as Resource: Preventing HIV and Defining the Needs of the "Gay Community" in Postsocialist Poland

Session Title: AIDS and Identity: New Analyses, Shifting Paradigms

Start Date: 11/19/2008

Session Time: 06:00 PM - 07:45 PM

Author: Jill Owczarzak

In Poland and throughout postsocialist Eastern Europe, unlike places such as the United States and Western Europe, the gay rights movement did not exist before HIV/AIDS. Moreover, in Poland, there are few venues for addressing the social, economic, political, and health needs and interests of sexual minorities in general, and even fewer opportunities for men who have sex with men for money. Based on 15 months of ethnographic research on HIV prevention programs of nongovernmental organizations and the National AIDS Center, this paper explores the links between interpretations of HIV risk among men who have sex with men and identity within the gay rights movement in Poland. I argue that the model of risk practiced through organizations working with sexual minorities aims to expose relationships between homophobia, social marginalization, and HIV vulnerability. In particular, they enact a model of risk as a complex, socially determined quality in which behavior change, and therefore HIV risk reduction, is a long

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process due to myriad forms of vulnerability and disenfranchisement that clients face. This model of HIV risk counters risk discourses generated at the national level, infused with moral arguments and predicated on a notion of behavior change as instantaneous, that serve to exclude sexual minorities from the prevention landscape.

(Re)Configuring Identities in the AIDS Industry: Exploring Effects of the Global Fund to Fight AIDS, Tuberculosis, and Malaria

Session Title: AIDS and Identity: New Analyses, Shifting Paradigms

Start Date: 11/19/2008

Session Time: 06:00 PM - 07:45 PM

Author: Carey Scheerer

Many anthropological analyses of AIDS and identity focus on the identities and subjectivities of People Living with HIV/AIDS (PLWHA). Little work has been done to consider the identities of various actors and organizations involved in the multi-million dollar AIDS industry and the complex relationships emerging between such actors. In this paper, I explore the (re)configuration of identities of individuals and organizations as a result of Global Fund to Fight AIDS, Tuberculosis, and Malaria (GFATM). The Global Fund has materialized into one of the most powerful institutions in the industry today; as of 2007, the GFATM had pledged nearly US\$ 10 billion to projects in 136 countries. Although GFATM claims to be unique amongst international and multilateral organizations by "operat[ing] as a financial instrument not an implementing entity," its selection, monitoring, evaluation, and surveillance of projects in various countries demonstrate the power GFATM has over project implementation, design, and governance as well. As a result, the AIDS industry in recipient countries has been restructured in response to GFATM, and the identities of individuals, institutions, and organizations competing for GFATM funds have been reconstituted. Based on ethnographic research with representatives of GFATM in Geneva and "stakeholders" involved in the AIDS industry in Washington, DC, and Honduras, this paper analyses the politics and policies of GFATM and how potential recipients (i.e. individual actors, institutions, and the state) negotiate with this institution and strategically (re)configure their identity in order to access GFATM resources.

This Disease of Ours: Responsibility and Blame in Vernacular Names for AIDS in Malawi

Session Title: AIDS and Identity: New Analyses, Shifting Paradigms

Start Date: 11/19/2008

Session Time: 06:00 PM - 07:45 PM

Author: Anika Wilson

In Malawi, as in many places in sub-Saharan Africa, AIDS is called by many names, reflecting the multifarious experience of the disease. While some of these names posit an etiology, link AIDS to particular symptoms, describe the virus itself, or temporally place AIDS, I have found that particular AIDS-names relate to responsibility. Though scholars have often written of vernacular or euphemistic terms for AIDS as they relate to blame or understanding of

the disease these names have less frequently been examined with regards to being a popular expression of responsibility and ownership of disease. In this paper I hope to broaden the vocabulary typically used in describing how "finger pointing" in epidemics functions. To do this I analyze the use two names for AIDS that were popular during the time of my fieldwork in Malawi: "the government disease" and "this disease of ours." Though the term "government disease" might simplistically be interpreted as etiological and condemnatory, a closer examination of the discourse associating the Government of Malawi to AIDS in everyday conversations of rural Malawians indicates a more complex perception in which Malawians suspect culpability but demand healing. By contrast the name "this disease of ours" suggests that the people turn a reflexive gaze back onto their own communities finding culpability not only in institutions but in themselves and amongst kin and neighbors. When juxtaposed the names are emic expressions of the tension between the perception of structural and more individual or behaviorist determinants of AIDS prevalence.

Tolerating stigma?: The role of HIV/AIDS related stigma in the creation of biomedical subjects

Session Title: AIDS and Identity: New Analyses, Shifting Paradigms

Start Date: 11/19/2008

Session Time: 06:00 PM - 07:45 PM

Author: Celina Kapoor

Drawing on Wendy Brown's work on tolerance, in this paper I suggest that in the political climate of liberalism stigma is a reified object which functions to allow individuals and governments to "tolerate" people with HIV/AIDS while maintaining a cloak of liberal piety. Since Erving Goffman's 1963 work on stigma, social scientists have accepted stigma as a social fact and used it to understand individual experiences and behavior in the HIV/AIDS pandemic. Some social scientists contest its use and suggest expanded and reconfigured definitions that include highlighting stigma's role in structural violence and power relationships. In this paper I argue that stigma now functions in social science research and scholarship to create biomedical subjects, evident through immense federal funding and the quantification of stigma through the use of stigma scales. Therefore, I address stigma as a matter of concern, meaning that in order to add meaningful critique to such a ubiquitous concept, we must move past the constraints of a structural violence framework. To do this, I show the many forces that have come together to create the "thing" of stigma. First, I reconstruct the genealogy of stigma over the longue durée to demonstrate that it has been rooted in individual and societal relationships of dominance and exclusion since its use in the Roman Empire to refer to the hot-iron branding of runaway slaves. Second, I explore contemporary discourses of stigma as circulating, co-created texts by drawing on interviews with people living with HIV/AIDS and scholarly treatments of stigma.

Equal, Empowered, Entitled: Orphaned Youth, Identity and Social Change in Botswana

Session Title: Making Modernities in Youth Cultures

Start Date: 11/19/2008

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Session Time: 06:00 PM - 09:45 PM

Author: Bianca Dahl

In the wake of the HIV/AIDS pandemic in Botswana – where a third of adults are HIV-positive – orphaned children have become a flashpoint for dramatic demographic and social changes. For the last decade, non-governmental organizations have been pouring money into day care programs aiming to support these secondary victims of AIDS. However, a significant shift is taking place in public opinion about orphans. Exposed to NGO discourse promoting self-confidence, self-empowerment, and children's rights, many orphaned youth have publicly laid claim to a 'modern' identity as equal, empowered, and entitled members of society – a claim that strikes at the heart of Botswana's gerontocratic and family-focused social structure – a claim that is leading to condemnation of orphans' behavior. This paper illustrates the mechanisms by which many orphans acquire identities inimical with the values held by their kin and peers. Contrary to the assertions of foreign aid workers who promote these values, I argue that 'modern' identities are not simply intrinsically appealing to orphans. Rather, this research points toward two combined influences in these programs' structures: firstly, emotionally-laden socialization practices that encourage orphans to identify with affectionate aid workers; and secondly, material resources with which the most 'self-confident' youth are rewarded. Orphans appropriate behaviors that generate positive attention from resource-laden charities, yet which simultaneously draw censure from their kin and neighbors – with serious consequences for their community integration. In an ironic twist, orphan care institutions have launched the children once feared to be 'left behind' by HIV/AIDS into the vanguard of social change.

8.00 PM:

“Suddenly AIDS is the great craze” – how “partnerships” become donor mandates in a recipient Haitian women's NGO

Session Title: Myths of Collaboration: “partnerships” between international multilateral organizations and national governments

Start Date: 11/19/2008

Session Time: 08:00 PM - 09:45 PM

Author: Mark Schuller

Fanm Tèt Ansanm, a relatively grassroots and autonomous women's NGO in Haiti, has several long-term European NGO “partners.” Fanm Tèt Ansanm (Kreyòl for “Women United”) defends their politik (Kreyòl for “politics” and “policies”) against donor mandates, even turning down USAID funding because they imposed their politik that contradicted their Freirian, feminist empowerment mission. One reason this is possible is because they have several European NGO “partners” that have sustained long-term relationships instead of impose top-down, short-term project management models. The Global Fund to Combat AIDS, Tuberculosis and Malaria is an ambitious initiative to “go beyond business as usual,” generating several billion dollars to “public-private partnerships” through Country Coordinating Mechanisms. For many reasons, including Paul Farmer's tireless advocacy and Haiti's symbolic association with AIDS, Haiti was an early Global Fund recipient country. Because they were relatively successful, almost always

meeting or exceeding outcomes, Fanm Tèt Ansanm was a favored target for Global Fund funding. Almost overnight, NGOs such as Fanm Tèt Ansanm saw their capacities exponentially increased to combat the disease in this massive “scale up.” This paper, based on twenty-four months of fieldwork, lodges an ethnographically-based critique of the discourse of “partnership” and “collaboration.” Imperceptible to staff, since they had always worked on AIDS, Fanm Tèt Ansanm's priorities followed their donors into AIDS. To aid recipients – low-income women – this appeared an imposition, edging out other priorities they expressed. Like “Haiti,” Fanm Tèt Ansanm's symbolic association with AIDS was strengthened; now, alternative priorities are unable to be imagined and articulated.

Encountering Violence and Making Sense of It: Ethnography of Everyday AIDS in South Africa

Session Title: Violence as Experience and Violence as Hearsay: an Anthropological Discussion

Start Date: 11/19/2008

Session Time: 08:00 PM - 09:45 PM

Author: Frederic Le Marcis

Violence has become in many ways the new figure of the exotic, an obvious object of inquiries for anthropologists. Despite the multiple interpretations produced concerning its manifestations, violence remains a slippery notion. Building on my personal ethnography of the everyday experiences of AIDS in South African townships, individuals appear both subject to violence and actors of violence. The aim of this paper is to bypass the mere description of violence as well as the limited scope of the understanding of the phenomenon (in speaking of political or symbolic violence, for example) and to air to the experience of patients, to their words, pains and feelings linked to violence, in order to show how they shape the particular form of life and praxis, both characterized by the two Janus' faces of the South African present: uncertainty and hope.

THURSDAY, NOVEMBER 20:

8.00 AM:

Really Including Children: The Benefits of Participatory Research with African AIDS Orphans

Session Title: Theorizing Childhood: Including the Child's Perspective in the Anthropology of Childhood

Start Date: 11/20/2008

Session Time: 08:00 AM - 11:45 AM

Author: Kristen Cheney

This paper provides an account of the innovative research design on a current collaborative, participatory, child-centered ethnographic project to document the experiences and perspectives of African AIDS orphans and vulnerable children (OVC). Collaborating with local researchers, development practitioners, and childcare professionals, the research team headed by the author trained five former child research participants as youth social research assistants and

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paired them with focus groups of younger children as well as local families with OVC who are not attending school. I argue that this collaborative research design has yielded insights that could not be gained without the use of inclusion of children. Further, it has substantially empowered the children involved (both younger and older), decolonized the research, and created exciting synergies between the various stakeholders. This undoubtedly enhances the authenticity of the findings and ultimately yields more effective recommendations for OVC service delivery.

Effecting Power: Constructions of Risk by Sex-Worker-Centered NGOs and Policies

Session Title: Getting it Done: Ethnography of and in NGOs and Examinations of Power

Start Date: 11/20/2008

Session Time: 08:00 AM - 11:45 AM

Author: Anastasia Hudgins

Through an anthropology of risk, this paper addresses how NGOs position themselves as able to resolve complex problems. I focus on a group of debt-bonded sex workers in Cambodia, the rescue efforts of a US-based NGO, and the 100% Condom Use Policy promoted by the World Health Organization and the Cambodian Ministry of Health. My analysis of risk construction sees that powerful social institutions are afforded the power to define who or what is risky, without regard to inherent and ultimate dangers. To do this, the organization must draw on key symbolic language to shape perceptions of their efforts and of the sex worker. Among international health policy, sex workers are frequently blamed for spreading HIV by reducing the complex and global problem of AIDS to the individual behavior of the sex worker. The rescue organizations find that sex workers are at risk because laws are not enforced to prevent them from entering the commercial sex industry. NGOs seeking to improve the human rights of sex workers may subvert the women's human rights in order to attend to the NGO's agenda, and unintended consequences arise, in this case, decreased health-seeking activities. The consequences are visible to sex workers, but invisible to the NGO that positions itself as expert on the sex workers' lives by aligning risk construction with its own expertise. I conclude by drawing links between constructions of risk, expertise, and the relationship of the NGO to various forms of power that allow for the NGO's continuity.

Social Organization and Patterns of Child Socialization in a Tanzanian Orphanage

Session Title: Council on Anthropology and Education New Scholar Invited Poster Session

Start Date: 11/20/2008

Session Time: 08:00 AM - 09:45 AM

Author: Louise Beryl

Cross-culturally, the socialization of children occurs typically within a family, as it is defined locally by each culture. Who becomes responsible for the care of children, though, when their primary caregivers pass away? Cross-culturally, there are different models of fosterage, from informal absorption of children by extended family members to state run orphanages and foreign adoptions. What happens then when this informal system is over-

whelmed by a higher number of children being orphaned from epidemics, such as HIV/AIDS? In Tanzania, HIV/AIDS is the leading cause of death among adults, as determined by the government and foreign sponsored Adult Morbidity and Mortality Project in 2004. As a direct result, the number of orphaned children under 18 years of age has reached a critically high level at 1.1 million, according to UNAIDS. This study will examine the social organization of a non-government run orphanage, a variant of a "total institution", in northwestern Tanzania, as it fosters different patterns of child socialization emanating from the variety of backgrounds of their caregivers. It will analyze data generated from June-August 2008 from participant observation of 41 children with their caregivers, namely the American founder and director, 12 hired Tanzanian "Mamas", and a flux of American volunteers. The findings will contribute much-needed ethnographic research to the debates surrounding how to monitor, regulate, and/or recommend policies to create "effective" models of care. A socio-cultural evaluation of "efficacy" must be considered, and the findings from this study will speak from this perspective.

10.15 AM:

Struggling for Independence: Youth Unemployment and the Decline in Marriage in Rural South Africa

Session Title: Youth and the Struggle for Adulthood in 21st Century Africa

Start Date: 11/20/2008

Session Time: 10:15 AM - 12:00 PM

Author: Sarah Mathis

In the former rural reserves of South Africa, the transition from apartheid was accompanied by a sense of possibility for a transformation of the conditions of inequality that had marked people's lives for well over a century. However, deteriorating economic conditions and high levels of unemployment have taken a heavy toll on these impoverished regions. Rural youth have higher levels of education now than in previous generations, and yet the professional jobs that they aspire to are no longer available to them. This paper is based on two years of ethnographic research and will examine the ways in which the transition to adulthood is being shaped by economic changes such as unemployment, social welfare and the expansion of the informal economy. Changing dynamics within the household regarding agricultural labor, child care and the mobility of young men and women engaged in temporary or informal work has also led to disputes over household labor and income. These issues have also been underscored by the decline of marriage and the continued residence of adult children in the households of their parents while bearing and raising their own children. With the spread of HIV/AIDS, many of these children are also losing their mothers and being left under the care of their grandparents. This paper will examine the impact of these changes on how young people are redefining aspirations and goals and coping with the lack of economic opportunities that continues to characterize life in these former rural reserves.

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1.45 PM:

Relying on the Comfort of Strangers: HIV/AIDS NGOs in Latin America.

Session Title: Identity, Tradition and Change

Start Date: 11/20/2008

Session Time: 01:45 PM - 03:30 PM

Author: Mario Alfredo Gonzalez

One of the arguments of James Petras in his critique of NGOs is that they do not exist separate from the state but in relation with public contracting. This is particularly true in fully developed capitalism where governments can reduce expenditures by subcontracting NGOs to provide services hitherto in their realm of responsibilities. In the global south, states are less able to outsource duties they may lack the funds or the political will to provide. In the response to the HIV/AIDS epidemic, international organizations have supplied the financial, technological and cultural wherewithal to act in response to local needs. This state of affairs has produced a type of service agency that relies of globalizing forces to stay afloat. In this paper, I examine the role of foreign, international and global financing of HIV/AIDS service provision in Latin America. I interrogate the intended and unintended results of these global agencies as they engage local grassroots organizations working on HIV/AIDS advocacy and service provision. I describe the empowering and disempowering practices of these global entities and ask whether they obfuscate the interests of the budding identities of the populations affected and infected by HIV. I illustrate these dynamics with data obtained during more than a decade of participant observation in the transnational politics of the HIV/AIDS industry in Latin America.

From "Tan Bella" to "Nubes y Angeles": Divas, Citizenship, and Art

Session Title: Anthropology and Transgender: Rethinking Inclusion, Collaboration and Engagement

Start Date: 11/20/2008

Session Time: 01:45 PM - 05:30 PM

Author: Marcia Ochoa

This talk connects theoretical engagements with citizenship to the work of building participation, political subjectivity and "community." "Tan Bella" is an HIV prevention intervention (single session group) developed with transgender Latinas in San Francisco. The goal of the intervention is to increase participation and a sense of community among trans-Latinas in the context of HIV prevention services provided by the EL/LA Transgender Latina HIV Prevention Program of Mobilization Against AIDS International. The workshop consists of a group discussion of HIV prevention and self-esteem, a modeling coach, and a professional-quality photographic studio session, which produces portraits of the participants. Participants each get copies of their portraits, and those who choose may give EL/LA permission to use the photographs in HIV prevention and organizational materials. The intervention has resulted in drastically increased participation in HIV prevention programming, and an archive of almost 700 images of transgender Latinas who are associated with the program. As an

ethnographic researcher of media and representation, Marcia Ochoa collaborated with Health Educator/Program Coordinator Alexandra Byerly and the staff of the EL/LA program to develop this intervention. In this talk, Ochoa and Byerly will map out the conceptual development of the Tan Bella intervention and discuss the results of the work. Byerly will discuss her follow-up project to the Tan Bella series, which resulted in "Nubes y Angeles," a community theater piece that featured trans-Latinas and the relatives of trans-Latinas who have been murdered in the SF Bay Area.

4.00 PM:

Containing Social Transformation: community-led structural intervention as government through community

Session Title: Governing the "grassroots": Ethnographies of Development Politics

Start Date: 11/20/2008

Session Time: 04:00 PM - 05:45 PM

Author: Robert Lorway

In the South Indian State of Karnataka, tremendous financial, intellectual, and technological capital pours through Bill & Melinda Gates Foundation-sponsored HIV-prevention programs known as "community-led structural intervention". Although the rationalities disseminating through these programs champion sex workers rights, placing hope in the improvement of public health in their actions, protests, and commitment, they also tightly limit the horizon of possibilities in which to engage in community action. I explore the effects of the simultaneously inspired and constrained pathways for community mobilization as a complex and contradictory form of rule that exemplifies what Nickolas Rose has called "government through community". While communities of sex workers are considered to possess the true potential for bringing about social change, experts must continually intervene to ensure the "appropriate" moral course. I assert that this productive mode of regulation, which defines the ethical perimeters of community action, is undergirded by a problematic neoliberal-epidemiologic assemblage that moves to cultivate the identities and life trajectories of "vulnerable groups" as though they were isolatable from the general population.

The Role of Anthropology in Combating the Spread of HIV in Rural Papua New Guinea

Session Title: Anthropology, Advocacy, Agency, and Identity

Start Date: 11/20/2008

Session Time: 04:00 PM - 05:45 PM

Author: Nara Cox

Engaging the 2008 AAA theme of "Inclusion, Collaboration & Engagement" this poster draws attention to how anthropological training and insight can be collaboratively harnessed to assist local governments, missionary groups, and foreign aid workers in better serving rural populations. Focusing on local understandings of HIV/AIDS in rural areas of Papua New Guinea, this poster addresses (1) how kinship and gender norms affect the spread of infection, and (2) how Christian Missionary and Government messages regarding AIDS are interpreted by rural populations. Anthropology's potential for facilitating the translation of biomedical un-

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derstandings into more readily recognizable and comprehensible forms for such rural communities is tremendous. Likewise our viability as participants, “interpreters,” and analysts of: (a) current educational and preventative approaches being taken, and (b) the cross-cultural viability of various programs and measures. The 2008 AAA theme thus provides an ideal opportunity to highlight the applicability of anthropological knowledge across domains all too often underappreciated by non-anthropological publics. Years of occasionally dangerous, usually challenging, and often exhausting fieldwork is spent with people we typically come to love, respect, and, most importantly, understand. This understanding is the heart of our field, but it can—and often should—serve as an instigation to appropriate action: such as taking active roles in the formation and enactment of new educational plans to more fully inform, equip, and empower rural communities to protect themselves. Anthropologists have much to offer in the fight against HIV/AIDS in rural (and other) settings and it is time to offer it.

Hijras, ‘AIDS Cosmopolitanism’ and the Politics of Care in Hyderabad

Session Title: Global Queer Activisms and the Politics of Inclusion

Start Date: 11/20/2008

Session Time: 04:00 PM - 05:45 PM

Author: Gayatri Reddy

Interrogating the complex terrain of what he calls ‘AIDS cosmopolitanism’ in contemporary India - “an imagined formation of dislocated agents using the economically fortified enterprise of AIDS prevention to support its own covert agendas” (2006: 271) - Lawrence Cohen asks an important question: “What kind of ethics and what kind of care are possible and likely under contingent instances of particular global conjunctures?” In this paper, I pick up on this question/issue and address how it plays out in the lives of hijras or the so-called transgendered community in India, deeply implicated and simultaneously marginalized as they are in this terrain of AIDS cosmopolitanism. Drawing on fieldwork in the South Indian city of Hyderabad, I examine recent attempts to stabilize emergent collectivities such as the sexual health/MSM formations, under which category hijras are unproblematically subsumed. Using HIV-prevention efforts targeted at hijras as the lens through which to examine this landscape, I argue that the problematics and tensions of “inclusion” into this collectivity need to be understood through several dialectical tensions --between emerging definitions of hijras as rights-bearing sexual minorities and their continued representations as stigmatized asexual figures, between local moral economies of izzat (respect) and sarm (shame), between representations of self and other in terms of sexual and asexual difference. Mapping the tensions premised on such mobilizations of “difference” and “inclusion,” this paper highlights the multiple, shifting constructions of sexual and gender politics, economies of care, and mobilizations of ‘rights’ in the current terrain of AIDS cosmopolitanism in India.

FRIDAY, NOVEMBER 21:

8.00 AM:

On Silences and Dancing around the Truth in Msinga, KwaZulu-Natal, South Africa.

Session Title: Public Spaces, Public Sounds

Start Date: 11/21/2008

Session Time: 08:00 AM - 09:45 AM

Author: Louise Meintjes

This paper investigates instances of suppressed information that resound as silences in the acoustemology of a rural Zulu community in Msinga, KwaZulu-Natal, South Africa. Focusing on migrant young men’s ngoma song and dance in the context of the HIV/AIDS epidemic, I look at moments when young men dance around the truth of the ailing bodies of their team-mates and friends. Ngoma acoustics are loud, dense, and strident. What is to be made of moments of silence? The ngoma soundscape is collaboratively produced as a source of dramatic power to inspire and enable the dancers. What is to be made of its rupture in performance and of the significance of its repair? What is to be made of the dance of the weakened dancer? Migrant men sing and dance about loss at home, about a precarious sense of place. Why are they disinclined to speak? By framing performed moments with processes of stigmatization, and with the national dissemination of HIV/AIDS information as received at the local level, I argue that it is in spaces of silence in the ngoma soundscape that another politics of place resounds

Producing the Future in Botswana: Exploring the Temporality of AIDS Treatment

Session Title: Collaboration, Experiments, and Care: At the Frontiers of Science and Medicine

Start Date: 11/21/2008

Session Time: 08:00 AM - 11:45 AM

Author: Betsy Brada

How is the future of HIV/AIDS treatment in Botswana imagined? This paper focuses on Clinic B, a collaboration between the Ministry of Health and a private medical organization, supported by the philanthropic arm of a pharmaceutical manufacturer, that employs American pediatricians to provide care and train local physicians to treat paediatric HIV. Clinic B’s success, however, founders on the problem of ‘the future’ in two regards: the temporality of the treatments and of the children requiring them; and the temporality of the institution itself. Clinic B’s physicians must address the problem of resistance, which renders cheaper, more easily available drugs ineffective, forcing pediatricians to treat children with more expensive regimens. As these children grow, they require an ever-expanding array of pharmaceuticals, prompting questions about upon which institutions they can depend for their life-long treatment. Their uncertain treatment, however, is linked to the uncertainty of Clinic B. The American physicians staffing these institutions strive to ‘build capacity’ in such a manner that their presence is no longer necessary. They imagine their presence will be unne-

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essary after five years. Local medical personnel, however, often regard expatriate physicians as sources of much-needed, if temporary, medical labor. This tension between labor and training reflects larger concerns over the demands of the epidemic now, and conceptualizations of what the epidemic will require in the future. Drawing on eighteen months of research, this paper asks: How do contests over Clinic B and its activities reflect anxieties about Botswana's ability to produce a future for its citizens?

Framing Memorial's Movement: Mapplethorpe, Leibovitz, and the Affective Travels of Mourning

Session Title: The Movement of Queer Affect

Start Date: 11/21/2008

Session Time: 08:00 AM - 09:45 AM

Author: Michelle Baron

This paper engages the debate surrounding Robert Mapplethorpe's infamous *The Black Book* photographs. Kobena Mercer, Isaac Julien, and Jose Muñoz each have offered passionate scholarship on the cultural work that these photographs perform. Most famously, Mercer's original reaction was one of disgust - he found Mapplethorpe's images to be highly problematic: exploitative, colonial in nature, racist and further perpetuating stereotypes about black masculinity and sexuality. However, for each of these writers, placing these photos in the context of the deaths (due to AIDS complications) of both Mapplethorpe and his African-American models has catalyzed a radical (re-)reading made possible by viewing *The Black Book* as a memorial project of mourning. How is it that mourning, and/or the affects created by these photographs (disgust, titillation, sorrow) radicalize our ability to read and interpret, particularly queerly? Considering especially queer subjectivities, what is the role of affect and mourning in disidentification? How does photography facilitate the travel of queer affect, or conversely, how does the affect attached to these images travel? I also consider Annie Leibovitz's photographic retrospective *A Photographer's Life*, which alternates her professional portrait work with family snapshots of her partner, Susan Sontag, in the last year of her life fighting cancer. Through the photographs of both Mapplethorpe and Leibovitz, I discuss the mobilization of queer affect and its relationship to the emotions and increasingly peripatetic rituals of mourning and memorial.

Feeling Sexy, and Other Queer Utopian Longings

Session Title: The Movement of Queer Affect

Start Date: 11/21/2008

Session Time: 08:00 AM - 09:45 AM

Author: Juana Maria Rodriguez

Drawing on performance theory (Muñoz, Phelan) and recent scholarship on queer affect (Cvetkovich, Halberstam, Freeman), this work examines the relationship between the messy, complicated realities of the sexual practices of queer racialized subjects and the affective registers these performances produce and inspire. This paper emerges in the gap between two lines of scholarly inquiry that have long occupied queer theory. The first concerns a debate that is divided between scholars that see queers as the antithesis of sociality, the refusal of collectivity (Bersani, Edleman), versus those that remain invested in the affective potential and possibilities associated with queer utopian longings (Muñoz, Rodriguez, Halberstam). The second line of scholarly investigation reconsiders long-

standing questions regarding the proper place of sex in the landscape of sexuality studies and queer theory. My paper argues for the lingering relevance of sex to queer theory in a temporal moment after the feminist sex wars, after the political and medical "management" of AIDS in the United States, and after *Lawrence v. Texas*, the recent Supreme Court decision that protects the legal status of "intimate sexual relations" between consenting adults. In the process, I consider how sexual fantasies, practices and identities function as mobile sites of recognition for racialized queer subjects and the affective modalities associated with these psychic investments.

10.15 AM:

Contemporary Politics of HIV/AIDS: The Institutionalization of Traditional Medicine in South Africa

Session Title: HIV/AIDS Prevention and Treatment in Africa

Start Date: 11/21/2008

Session Time: 10:15 AM - 12:00 PM

Author: Kaja Tretjak, Esq.

As the segment of the South African population living with HIV/AIDS approaches 20 percent, fierce battles over the country's HIV/AIDS policy increasingly center on the role of traditional medicine. Campaigns for the rights of people living with HIV/AIDS have mobilized large constituencies in advancing the government antiretroviral (ARV) drug rollout, working to combat those who dispute the links between HIV and AIDS, those who believe that the risks of ARV drugs outweigh their benefits, and those who believe that African traditional remedies and nutritional products are the best option in fighting immune deficiency. Simultaneously, the South African government is working closely with groups that advocate African traditional medicine to treat immune deficiency, launching initiatives such as the Presidential Task Team on African Traditional Medicine, charged with developing recommendations on a broad national policy and legal framework for the institutionalization of traditional medicine in the country's healthcare system. While the issue has received significant attention in the popular press and academic work is increasingly focused on South African social movements struggling for access to ARVs, research on the contemporary politics of African traditional medicine with respect to HIV/AIDS remains sparse. Based on recent fieldwork in South Africa, this paper will examine the processes of traditional medicine institutionalization and related sites of contestation surrounding this crucial health, political and economic issue.

Cultural sensitive introduction of HIV-AIDS Prevention by initiation Ritual of rural girls in Mozambique

Session Title: HIV/AIDS Prevention and Treatment in Africa

Start Date: 11/21/2008

Session Time: 10:15 AM - 12:00 PM

Author: Sophie Kotanyi

HIV/ADS prevention in Mozambique has a low efficacy rate. The national strategic plan to control HIV/AIDS criticizes that prevention messages are not culturally adequate and cannot lead to a safer behaviour. Anthropologists question how can the positive aspects of tradition be used for HIV/AIDS prevention? Initiation rituals of girls are practiced in 7 from 11 provinces; they teach sexuality (without mutilation) and how to be a responsible human being.

Initiation rites represent culturally the best recognised context to speak about sexuality and moral (prevention) behaviour. To introduce bio security HIV/AIDS prevention counselling in initiation rites implies a dialogical communication between biomedical nurses and initiation godmothers, women healers, on verbal and on mostly non-verbal forms. Dances and songs are the main communication forms together with the verbal traditional counselling. Initiation rites is a process that teaches through diverse stages the girls since they reach 7-9 years old, through transition ritual, marriage and until the first baby. The complementary introduction of biosecurity counselling in the initiation imply the management of diverse contradictions; biomedical trainer nurses (with “splitting” problematic between modernity and tradition) should learn to be open and able to bridge between the traditional and the biosecurity paradigms. The initiation godmothers have to deal with contradictions between the biological contamination concept and the local paradigm of impurity, danger and prevention -, with their own neglecting of the promotion of the use of condoms. This approach does provoke an empowerment-process of women in their communities.

Current Transformations in Norms of Sexual Culture and Reproductive Health in Swaziland, Southern Africa

Session Title: HIV/AIDS Prevention and Treatment in Africa

Start Date: 11/21/2008

Session Time: 10:15 AM - 12:00 PM

Author: Daniel Halperin

The small southern African kingdom of Swaziland is battling the world's most severe HIV epidemic, with over a quarter of adults already infected. In 2006 the national AIDS program initiated an aggressive and immediately controversial behavior change campaign, focusing on the risk of having a concurrent sexual partner, or Makhwapheni (“secret lover”). Qualitative research and large national surveys suggest a high degree of approval of the campaign, with many reacting, “Finally, the government is talking about the real cause of AIDS!” Some 80% of interviewees reported the campaign would affect their own behavior, and the number of adults reporting multiple partners during the previous month was halved after a one-year period. Ethnographic fieldwork from the capital, Mbabane, in 2006-7 will be presented, which suggests the Makhwapheni campaign helped spark a society-wide conversation about the behavioral -- including gender related -- drivers of the epidemic. Meanwhile, emerging scientific evidence regarding the partially protective effect of circumcision against heterosexual HIV infection in men has contributed to a growing demand for male circumcision and reproductive health services in Swaziland. Wait lists at public hospitals extend to eight months or longer, and recently some men nearly rioted outside a health clinic offering free procedures because they were not attended to. Circumcision had been part of traditional Swazi initiate rites and it appears that this cultural – and now biomedical – practice is now once again becoming integrated into Swazi social norms, along with similarly recent notions about the public health risk of multiple concurrent sexual partnerships.

Poverty and HIV-Positive Women in Nairobi, Kenya: A Cultural Model Managing HIV/AIDS

Session Title: HIV/AIDS Prevention and Treatment in Africa

Start Date: 11/21/2008

Session Time: 10:15 AM - 12:00 PM

Author: Toni Copeland

This paper presents results from a project using cognitive anthropological methods to explore a shared cultural model of self-managing HIV/AIDS among extremely poor HIV-positive women who are not receiving biomedical treatment in Nairobi, Kenya. Women's knowledge of this model of managing their illness was compared to the length of time women have lived in Nairobi, their level of NGO involvement, reported perceived stress, depressive symptoms, locus of control, and recent illness symptoms, or overall health. Kenya is an ideal place to investigate social and cultural factors that affect the health of HIV-positive women because of the ethnic diversity, high rates of unemployment and poverty, HIV/AIDS prevalence, gender inequalities, and growth of urban areas due to rural to urban migration. Poor, HIV-positive women in Nairobi face many problems, especially in dealing with their illness in the absence of biomedical treatment. Many of these women have migrated to the city from rural areas. As they adjust to changes, they may be unable to access social resources that are culturally defined, resulting in increased difficulty in managing their illness and in poorer health outcomes. This paper focuses on understanding how women in sub-Saharan Africa manage their illness in these extremely marginal conditions from a biocultural perspective that considers political-economic factors and social change. It provides a description of a cultural model of managing HIV/AIDS and examines the effect of sociocultural change on women's knowledge of this model and their ability to access resources.

Personal Narratives and Prevention with HIV-Positives (PwP) Programming in Rwanda

Session Title: HIV/AIDS Prevention and Treatment in Africa

Start Date: 11/21/2008

Session Time: 10:15 AM - 12:00 PM

Author: Jessica Price

Reflecting the changing nature of risk for HIV in many African contexts, recent epidemiologic analyses from countries with mature HIV epidemics show the highest rate of new infections occurring in married, discordant couples. From a public health perspective, the scale up of HIV/AIDS care and treatment offers new opportunities for effective prevention programming. Identifying HIV-infected individuals through widely available testing enables the health system and community programs to target and intensify prevention interventions with these individuals and with HIV discordant couples. But rational and orderly public health interventions are too often inadequate in the context of real human lives and the high drama introduced into these lives as a result of an HIV diagnosis. Drawing on narratives from 72 HIV-infected Rwandans, this paper delineates wide and deep complexities in effecting PwP. Key PwP strategies of improving partner testing and partner communication, promoting condom use and family planning, etc., appear impractical and naïve next to narrations of household violence induced by an HIV diagnosis, extreme poverty that obstructs access to basic services, crises of self and personhood with a new HIV+ status, social isolation and deep psychological distress. Rather, however, than paralyzing PwP programming, we argue that these thick insights into people's lives can inform public health professionals' understanding of the issues and the task at hand. The stories provided by HIV-infected persons can inform much-needed multise-

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toral (beyond health) approaches to help individuals and families affected by HIV to cope with the disease and to avert further transmission to others.

1.45 PM:

Epidemics and Control Groups in “Exotic” Locations: Three Instances of Pharmaceutical Politics

Session Title: Medical Interventions: How Neoliberalism and Governmentality Structure Health Practice, Policy, and Research

Start Date: 11/21/2008

Session Time: 01:45 PM - 05:30 PM

Author: Donna Goldstein

Building on anthropology's current interest in analyzing the effects of contemporary economic neoliberalism on health, this essay will take on three separate historical but interrelated instances of “pharmaceutical politics” in global perspective in order to provide historical, bioethical, and political depth to this issue. This essay concerns the place and meaning of the “control group” in contemporary Phase 3 clinical trials of new pharmaceutical products (or combinations thereof) by pharmaceutical companies, especially in the context of epidemics. Specifically, I interrogate different bioethical aspects of the “control group” by examining three interrelated narratives that are simultaneously commentaries on medical science at a particular moment—narratives that together provide a window into an evolving sense of Western medical bioethics. First, I offer a contemporary re-reading of the scientist hero figure Martin Arrowsmith, the protagonist in Sinclair Lewis' 1925 novel titled *Arrowsmith*. Second, I revisit the debate over the professional and scientific conduct of a multidisciplinary research team working in Yanomami territory during the measles epidemic of 1968, a controversy which brought the ethical conduct of geneticist James Neel to the attention of the American Anthropological Association. Finally, I examine the contemporary bioethical construction of Phase 3 clinical trials of HIV/AIDS pharmaceutical products in Argentina and Mexico. The essay explores these three instances of pharmaceutical politics as examples of the ways in which the concept of the “control group” has evolved over time, using them to think through the myriad developments in pharmaceutical research to its contemporary manifestation under economic neoliberalism.

Engagement, research and social critique : Gender and AIDS in Southern Africa

Session Title: The Anthropologist as Social Critic: Towards an Engaged Anthropology

Start Date: 11/21/2008

Session Time: 01:45 PM - 05:30 PM

Author: Ida Susser

From early in the epidemic, AIDS has been an area where anthropologists have fought for an activist perspective. Here, I examine social justice and ethical issues which have been raised internationally with respect to AIDS research. I explore the political dilemmas and real, much discussed, crisis of legitimacy, for anthropologists in societies where they are not citizens and the extent to which they have the obligation or the right to voice criticism. Drawing on ethnographic research in southern Africa since 1992 I discuss the

interface of research with advocacy and developing links with feminist and human rights groups. Interpreting and helping to reinforce the demands of grassroots leadership informed by cutting edge progressive scientists is an emerging area where anthropologists may find a legitimate public voice for social criticism.

4.00 PM:

Scale-up and Roll-out: How Therapeutic Development is Changing ARV Distribution in Tanzania

Session Title: A Global Solution? Engaging the Reality of the International HIV/AIDS Treatment Scale-up in Developing Nations

Start Date: 11/21/2008

Session Time: 04:00 PM - 05:45 PM

Author: Marita Eibl

The growing demand for antiretrovirals (ARVs) to treat HIV/AIDS has accelerated the rate of global treatment program scale-ups, thereby creating more spaces where international initiatives, state sovereignties, and local realities meet. The President's Emergency Plan for AIDS Relief (PEPFAR), as the largest treatment initiative, has pledged to two million people on ARVs in its fifteen focus countries. Because of the emphasis PEPFAR places on reaching targets, success for each treatment partner is usually categorized and determined by its ability to “get numbers”, meaning the amount of individuals it can put on treatment. This paper examines the process of “getting numbers” in one of the focus countries, Tanzania, where PEPFAR supports the Tanzanian National AIDS Control Programme in ARV distribution. Drawing on my dissertation fieldwork, I consider some of the implications of speeding up the scale-up of ARV distribution. I also examine the regionalization plan put in place by the Tanzanian government to scale up access to ARVs. This process, which divided the country into treatment zones managed by the government and individual donors, resulted in the relocation of many existing treatment programs. While regionalization is considered by government and donor organization officials as an efficient way to scale-up, it produces “winners” and “losers”, changes in models of care, and increased pressure to meet treatment targets. I use the term “therapeutic development” to describe how treatment partners negotiate international pressure to “get numbers” and state control over where to work in order to provide ARV treatment.

Silence Speaks Volumes: Elites and AIDS research in Papua, Indonesia

Session Title: Governing public health research for developing countries: the anthropology of population sciences and the evidence-based policy-making movement

Start Date: 11/21/2008

Session Time: 04:00 PM - 05:45 PM

Author: Leslie Butt

Despite an HIV prevalence rate of 3-5% of the adult population, there is remarkably little research or activism surrounding HIV/AIDS in Papua, Indonesia's easternmost province. We find no “AIDS cosmopolitanism” pushing forward research agendas, no

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indigenous representation of HIV-positive persons at international fora, and almost no grassroots mobilization. This paper explores three interconnected reasons for this lacuna. First, there is an unreflective acceptance by Indonesia of the dominant global AIDS industry model with its research emphasis on behaviour assessments and behaviour modification. Second, a sustained silencing of indigenous voices and careful regulation of all research activities by Indonesia offers the means to sustain colonial rule in the politically volatile province. Third, indigenous elites silently accept dominant frameworks, even though in other arenas they readily encourage oppositional discourses and political activism. This paper describes an initiative in Highlands Papua that was silenced and reformulated into normative behaviour-based research and interventions. I show how the silencing of alternative ways of conceptualizing what HIV is and what constitutes effective research trickles from the top, all the way down.

"Going Private": Cultivating an Ethic of Positive Living in a Northern Nigerian Support Group

Session Title: A Global Solution? Engaging the Reality of the International HIV/AIDS Treatment Scale-up in Developing Nations

Start Date: 11/21/2008

Session Time: 04:00 PM - 05:45 PM

Author: Kathryn Rhine

HIV support groups are exemplary venues within which global assemblages of international, state, and local public health agencies fund both the promotion of adherence to the lifelong management of a complicated drug regimen and public participation in prevention and advocacy projects. In doing so, donors and their implementing partners attempt to cultivate empowered and "responsibilized" pharmaceutical citizens. In contrast to this individuated notion of citizenship and its expectations, I have observed among HIV-positive women a much different ethic. My interlocutors aim not to embody a disease, but rather to embody Hausa Muslim gendered ideals of virtue. This virtue centers upon (re) constituting families so that they might normalize their condition and give meaning to their social positions in Hausa society. Further, these women have appropriated a support group in pursuit of new and distinct ways to attain this virtue. Not only does the group assist them by serving as a place where they discuss their marriage and reproductive concerns, but, in fact, this group works like a marriage market for these women – with positive men the ideal. And through this group's collective recognition of women as sexual and reproductive beings – as opposed to diseased, abandoned individuals – women are able to, in turn, create the possibility for both security and privacy surrounding their discreditable status and their economic and health needs.

The politics of patents: Access to generic drugs against HIV/AIDS in Thailand

Session Title: A Global Solution? Engaging the Reality of the International HIV/AIDS Treatment Scale-up in Developing Nations

Start Date: 11/21/2008

Session Time: 04:00 PM - 05:45 PM

Author: Gaelle Krikorian

In Thailand, as in most developing countries, access to HIV/AIDS medications has been and will continue to be dependent on the country's ability to use generic drugs. Recently, the Thai Ministry of Health issued compulsory licenses (CLs) on two antiretrovirals in order to import and produce generic versions of patented drugs. The issuance of these CLs represented the first case of a developing country with significant pharmaceutical manufacturing capacities using this TRIPS flexibility since the 2001 adoption of the Doha Declaration of the World Trade Organization (WTO). It is also the first case of serious political showdown over the developing world's use of CLs. Exploring the background of the decision to issue CLs in Thailand, I will present an attempt to examine developing countries' capacities to take advantage of the TRIPS flexibilities. Putting this decision into historical perspective, I will consider how a variety of factors – including 30 years of evolution of civil society, 20 years of successive US-Thai conflicts over IP, recent negotiations of a US-Thai Free Trade Agreement, and the Thai military coup in 2006 – created the social and political conditions that made it possible. Thus, the Thai case provides an instructive example to (1) explore tensions between the law and politics, (2) discuss ways the practices of the actors shape the rules, sometimes more than national and international law itself, and (3) examine the social and political processes that determine the governance of intellectual property in the context of the fight against HIV/AIDS.

Neoliberalism Invades the Body: The Utopian Project of HIV/AIDS Treatment Scale-Up

Session Title: A Global Solution? Engaging the Reality of the International HIV/AIDS Treatment Scale-up in Developing Nations

Start Date: 11/21/2008

Session Time: 04:00 PM - 05:45 PM

Author: Joel Reed

An African example of neoliberal governmentality requires considering historical processes and relationships between civil society and the state that did not apply to the West. Elements are found in these processes, an assemblage of medical/development initiatives, subject to analysis in terms of differences between empirical/material reality and the utopian language used to describe the effects of medical/development initiatives. The struggle to extend HIV/AIDS treatment is not only considered a political and cultural process, but also situated in prior interpretations of the disease. Lack of African government involvement exacerbates Western ownership of HIV/AIDS projects, and the continuing evolution of prevention and treatment tactics always seem to necessitate more intervention. This paper analyzes elements of neoliberalism in the international effort to 'scale up' antiretroviral treatment for people living with HIV/AIDS (PWAs). Taking Mozambique as an ethnographic example progress is championed under a banner of equity by the state, but consent for participation is obtained only from a minority of HIV/AIDS patients. Characteristics of the state are analyzed through the lens of orchestrated processes of national forgetting from the top-down in order to maintain political power through the transformation from socialism to "savage capitalism." Characteristics of PWAs are analyzed through PWA associations as

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civil society actors, taking advantage of spaces opened up through activism and increasingly falling victim to the intended and unintended consequences of neoliberal subjugation. Neoliberalism is also challenged and tested by civil society in ways that reveal the non-totalizing nature of the state and the limits of neoliberalism as empire.

Good Intentions Only Get You So Far: The Realities and Consequences of HIV/AIDS Scale Up Programs in Zimbabwe

Session Title: A Global Solution? Engaging the Reality of the International HIV/AIDS Treatment Scale-up in Developing Nations

Start Date: 11/21/2008

Session Time: 04:00 PM - 05:45 PM

Author: Jonathan Metcalfe

In 2004 the World Health Organization (WHO) estimated that there were 100,000 people on antiretroviral therapy (ART) in Sub-Saharan Africa. This amounted to only 2% coverage of all individuals who were in actual need of ART. As of 2007, the WHO estimates that more than 1.3 million individuals are on ART, with coverage of 28%. Much of the success of increasing coverage can be attributed to both international and local scale up programs. Internationally the framework was provided by the WHO's "3 by 5" initiative, which attempted to provide three million individuals with ART by 2005, and the subsequent "Universal Access by 2010" initiative focusing on providing universal access to HIV/AIDS prevention, treatment, and care. In Zimbabwe the "National AIDS Policy" of 1999, the "National HIV/AIDS Strategic Framework" of 2000-2004, and the current "Zimbabwe National HIV/AIDS Strategic Plan" have provided a structure for the local response. However, in spite of these international and local efforts HIV prevalence is still over 20% and ART coverage is only 15%. With an estimated 350,000 individuals in need of ART, only South Africa and Nigeria have more people in need of medication. This paper discusses the challenges that HIV/AIDS scale up programs in Zimbabwe face due to political, social, and economic instability. Moreover, this paper also describes how the shortcomings of these programs and the lack of necessary ART can impact an individual's decision to seek HIV testing and treatment.

The spread of the Brazilian 'model' including donation of drugs: a solidarity-based globalization or an internationalization of the Brazilian pharmaceutical market?

Session Title: A Global Solution? Engaging the Reality of the International HIV/AIDS Treatment Scale-up in Developing Nations

Start Date: 11/21/2008

Session Time: 04:00 PM - 05:45 PM

Author: Maj-Lis Foller

The Brazilian AIDS program is reported as one of the foremost 'success stories' in the world. The internal dynamics of the Brazilian case is related to the process of globalization. The Brazilian AIDS politics emerged as a complex articulation of global politics, international funding and expertise, linked to national processes in connection with the emergence of new social movements and the

fall of the dictatorship. An important dimension of Brazil's AIDS politics is that it has resisted claims made by transnational pharmaceutical companies that the Brazilian domestic productions of medicines are violating international patent regulations. One crucial factor behind the governmental AIDS policy was the pressure of a broad AIDS-related social movement, which was part of a wider process of democratization. Bridge-building (with medical science, pharmaceutical corporations and policy makers) was also important aspects and the political vision of the movement and it did not stop at defining HIV/AIDS as a health issue or as a political issue in the narrow sense. Rather, it focused on broad social mobilization, popular participation and a concept of public health based on human rights. In this presentation I will undertake a critical analysis of the new transnational/global activities initiated by the National AIDS program. What is the intention with new tendencies of South – South cooperation and regional networking, e.g. by providing drugs to countries in the South? One example that will be examined is a donation of ART from Brazil to Khayelitsha, outside Cape Town with 40-50 % of the population infected with HIV.

SATURDAY, NOVEMBER 22:

8.00 AM:

Funerals in Lesotho: HIV/AIDS Affecting Attitudes and Ritual Function

Session Title: First Rites: Innovative Undergraduate Research III

Start Date: 11/22/2008

Session Time: 08:00 AM - 11:30 AM

Author: Brandon Sparks

The African country of Lesotho faces a severe HIV/AIDS crisis. With a large portion of the population dying, household structure, economic activity, and cultural rituals like funerals have all been impacted. This research focuses on funerals in rural Lesotho, which generally entail an expensive ordeal with the slaughter of cattle and a large feast. Given the enormous death toll from AIDS, funerals involve an increasingly large part of the domestic economy. Two hypotheses emerge from this shift: the burden of funeral costs take too many resources from needy households, yet funerals function as a form of food redistribution and social cohesion. Through interviews and participant-observation taken over two summers in the Mokhotlong and surrounding districts of Lesotho while helping the pediatric AIDS organization Touching Tiny Lives, these hypotheses were investigated to discover compelling results. Reasons given for expensive funerals include family competition and tradition, highlighting the social function of funerals. The increasing death rate caused many individuals to question the continued practice of expensive funerals. Action can be taken from the results, as understanding these cultural changes and responses could serve to better direct aid. Monetary and nutritional relief efforts work within cultural practices and patterns, and funerals organize and reveal these patterns. Hopefully, Touching Tiny Lives can use this information

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to improve their already immensely successful operation.

Orphan Capacity: A Dynamic Dilemma Faced by the Caretakers of Baphumelele

Session Title: First Rites: Innovative Undergraduate Research III

Start Date: 11/22/2008

Session Time: 08:00 AM - 11:30 AM

Author: Kristen Vliet

Baphumelele is a home in Khayelitsha, South Africa for unsupervised children, many of whom are affected by and/or infected with HIV/AIDS. In Xhosa, the word baphumelele means "progress."

The orphanage was started by a woman named Rosalia Mashale in 1989. Together with a small cadre of caregivers, Mashale and these caregivers have sustained Baphumelele in a context of increasing need and dwindling resources. There is a significant amount of research available on the consequences of HIV/AIDS to people and their families living in sub-Saharan Africa, but relatively little work has been done on those people who work to intervene the crisis.

The poster is based on research focusing on these caregivers. It concentrates on the narratives of the caregivers, exploring their experiences of negotiating how to provide services to the orphans of HIV/AIDS in a context of limited resources. There is a limited capacity to care for these children and they cannot all remain in the home. Thus, the caregivers are forced to put children out of the children's home who are minimally capable of surviving in order to take in infants and toddlers. The poster illustrates how these caregivers use narrative to cope with their situation caught between needy children and limited resources, and concludes with an analysis of some of the factors leading to resilience among these long-term caregivers.

The Intersection of Policy and HIV/AIDS Sexual Transmission Networks

Session Title: First Rites: Innovative Undergraduate Research IV

Start Date: 11/22/2008

Session Time: 08:00 AM - 11:30 AM

Author: Jennifer Zabel

This project focuses on the sexual networks that transmit HIV/AIDS. It is a comparative study of American and African policy, focusing specifically on Uganda and Kenya. This project will examine how ideas of sexual transmission networks, concurrent or sequential, and cultural ideologies are integral in forming and implementing policy. When developed from a Western viewpoint and transported to Africa in the form of HIV/AIDS prevention programs, this policy embodies a disconnection which only festers and increases with time. This disconnection is only heightened by differing medical explanations and white-black tensions dating back to colonial times. It is also heightened by African theories of blame, sorcery or conspiracy etc., and a lack of adequate healthcare infrastructure. All of these culminate in the collapse of Western made prevention/treatment programs. Uganda will be looked at as a deviation, a success story. Kenya, in contrast, is failing in HIV/AIDS prevention at alarming speeds. Information will be analyzed from media, such as newspapers, press conferences, and video clips, as well as books and will be analyzed for underlying HIV/AIDS ideologies. Conclusions will be drawn from a comparison

and synthesis of these underlying ideologies.

1.45 PM:

Understanding sexual risk in Cuban men prior to HIV diagnosis

Session Title: HIV/AIDS Prevention and Treatment

Start Date: 11/22/2008

Session Time: 01:45 PM - 03:30 PM

Author: Arachu Castro

Despite widespread HIV education in Cuba, the incidence of HIV is rising, particularly among men. The availability of free and universal ART in Cuba may have decreased the use of condoms among Cuban men. A randomized, statistically representative sample of 281 men was selected from the total population of 1,292 Cuban men on ART as of August 2004. Life histories were collected from each participant using semi-structured interviews, which were analyzed qualitatively to understand how these men perceived their risk for HIV prior to becoming infected and how they made decisions regarding condom use. Most participants report knowledge of HIV prior to their own infection. Many were aware that their sexual practices put them specifically at risk for infection; they report knowing that men who have sex with men were a risk group; some of them report unprotected sex with many partners or with a partner who they suspected or confirmed was HIV-positive. They offer many explanations for practicing unprotected sex: "nobody spoke of condoms," they had older partners, they were in love with their partners, or they "went crazy" or were taken away by the moment. Even knowing that their sexual practices had put them at risk, most did not expect to be diagnosed with HIV or to ever be a person living with AIDS. Knowledge about HIV was not enough to mitigate unprotected sex among Cuban men who participated in the study, most probably because HIV prevention education often assumes that human beings make rational decisions at all times. However, other priorities seem to take over rational decisions about sex. The decision not to use a condom was in some cases an impulsive choice made in the heat of the moment, and in other cases it was an expression of love or trust towards the partner. These results are part of a larger, collaborative research study between Harvard Medical School in Boston and the Institute of Tropical Medicine Pedro Kourí in Havana. Co-authors include: Kristin McPhillips, Carlos Aragonés, Jorge Campos, Yasmin Khawja, and Jorge Pérez.

The touristic body: sexual performance among Dominican male sex workers

Session Title: Engagement, Authenticity, and Tourism: Gender, Sexuality, Ethnicity/Race, and Space in the Americas

Start Date: 11/22/2008

Session Time: 01:45 PM - 05:30 PM

Author: Mark Padilla

While theories of "structure" and social inequality have increasingly informed global health efforts for HIV prevention-with growing recognition of the linkages between large-scale political and economic factors in the distribution and impact of the HIV/AIDS

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epidemic—there is still little theorization of precisely how structural factors shape the very bodies and sexualities of specific populations and groups. In order to extend the theoretical understanding of these macro-micro linkages, this article examines how the growth of the tourism industry in the Dominican Republic has produced sexual practices and identities that reflect both the influence of large-scale structural processes and the resistant responses of local individuals. Drawing on social science theories of political economy, embodiment, and authenticity, this article argues that an understanding of patterns of sexuality and HIV risk in the region requires analysis of how political-economic transformations related to tourism intersect with the individual experiences and practices of sexuality on the ground. The analysis draws on long-term ethnographic research with bisexually-behaving male sex workers in two cities in the Dominican Republic, including participant observation, in-depth interviews, focus groups, and surveys. By examining the global and local values placed on these men's bodies and the ways sex workers use their bodies to broker tourists' pleasure, we may better understand how the large-scale structures of the tourism industry are linked to the specific meanings and practices of gender and sexuality.

Love and Longing: Sexual Abstinence, Family Ties, and Moral Transgressions in Uganda

Session Title: The Politics of Kinship and Family in "Crisis"

Start Date: 11/22/2008

Session Time: 01:45 PM - 05:30 PM

Author: Lydia Boyd

In Kampala, Uganda, where nearly everyone has been affected by AIDS, newly prominent evangelical abstinence activists promote the family as a Christian refuge. At the same time, the spiritual entanglements of extended kinship obligations are viewed as possibly polluting, dangerous ties at odds with the nuclear Christian family and in deliverance rituals believers are encouraged to cast out them out. Participants are drawn to the family unit as a "modern" Christian ideal, yet are haunted by extended kinship ties emblematic of non-Christian pasts. Public debates concerning sexual morality comment on and construct an emergent Christian private sphere with the nuclear family at its center. Yet these debates only partly reveal the dilemmas of youth still beholden to traditional kinship obligations. Evangelical youth promote a view of a moral self separated from both what they consider to be the "heathen" influence of tradition and the corrupting lure of sex and money they associate with secular modernity. While abstinence activism provides new networks of belonging and symbolic, personal, and economic ties to a more cosmopolitan community of believers, the spiritual struggles of these youth uncover the difficulties of completely severing ties to traditional and ethnic selves. This paper examines how believers manage competing obligations to various forms of kinship. It will address the way that these strategies are framed by the transnational abstinence movement and how the interplay between U.S. evangelicals, U.S. foreign policy, and Ugandan ideas regarding sexuality and morality is informing young adults' debates about fundamental social categories.

Imagining Identities and Creating Community through

HIV/AIDS Activism in a Chinese Grassroots Gay Men's Group

Session Title: HIV/AIDS Prevention and Treatment

Start Date: 11/22/2008

Session Time: 01:45 PM - 03:30 PM

Author: Casey Miller

Over the past decade, increased governmental commitment to combating the spread of HIV/AIDS in China has opened up space for gay men to organize and offer peer-to-peer education about the disease. Grassroots gay men's groups have multiplied as sexual contact becomes the main route of HIV/AIDS transmission in China and both national and international support for such groups increases. Although they comprise a crucial component of China's HIV/AIDS response, no ethnographic research has yet been published on these new organizations. Using data gathered over two consecutive summers of preliminary dissertation fieldwork among a grassroots gay men's group located in Northwestern China, this paper examines how China's HIV/AIDS epidemic is enabling the formation of a budding social movement centered on issues of sexuality, health, and community building. Specifically, I argue that the group is an important site of cultural production and practice in which group "volunteers" create and perform new kinds of Chinese gay identities. Information gained from daily participant observation and interviews with group members reveals how China's HIV/AIDS epidemic is empowering individual gay men to imagine identities and create community. Becoming an official "volunteer" affords men important opportunities to fashion positive and engaged gay identities that give them status in the local community and impart meaning to other areas of their lives. As they educate their peers and raise awareness about HIV/AIDS in their community, participants in this social movement imagine and perform new ways of being gay in China today.

New Forms of Citizenship and Socio-Political Inclusion: Universal Access to Antiretroviral Treatment in the Shanty Towns of Rio de Janeiro

Session Title: HIV/AIDS Prevention and Treatment

Start Date: 11/22/2008

Session Time: 01:45 PM - 03:30 PM

Author: Fabian Cataldo

The Brazilian National AIDS Programme is often considered a model for countries that need to put in place effective infrastructures to produce antiretroviral treatment (ART) locally and/or provide access to newly available HIV therapies. Whilst the ethical stance of this programme has been widely applauded, there is a lack of data on how the commitment to equitable and 'universal' HIV prevention and treatment relates to the poorest population groups. This study was designed around 13 months' fieldwork to explore how 'universal access' to ART is being implemented within a favela (shantytown), and the consequences for people living with HIV (PLHIV). In these favelas, the 'universal' character of the AIDS programme is challenged by issues such as local definitions of illness, problems related to the understanding of and adherence to treatment, structural violence and political alienation. We also argue that such health interventions contribute to the promotion of novel perspectives on social justice and biosociality - a

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form of 'therapeutic citizenship' associated with new claims from favela inhabitants living with HIV. We explore how these claims are formed and articulated around the right to free access to ART and the sustainability of the AIDS programme, and how they contribute to shaping PLHIV's perception of socio-political inclusion and participation. This research contributes to a broader understanding of novel forms of biosociality, including 'therapeutic citizenship', which are emerging alongside the increasing widespread distribution of ART through public health systems and among low-income population groups as 'universal access' to ART becomes progressively available.

Not as easy as "ABC": Developing HIV prevention strategies for young women in Ukraine

Session Title: HIV/AIDS Prevention and Treatment

Start Date: 11/22/2008

Session Time: 01:45 PM - 03:30 PM

Author: Martha Bojko

Ukraine is experiencing a rapidly increasing HIV/AIDS epidemic with heterosexually transmitted infection accounting for nearly one-third of all new HIV cases being reported in Ukraine. One of the global strategies for preventing sexual transmission of HIV promoted by the United Nations Joint Program on AIDS (UNAIDS) is the "ABC" approach: Abstinence, Be Faithful, (Use) Condoms. This paper, based on ethnographic and survey research conducted with young women living in the border city of Uzhhorod, Ukraine, will assess young women's sexual risk behavior and examine current HIV prevention education in Uzhhorod. The paper will then discuss the cultural and structural barriers and challenges associated with implementing an "ABC" HIV prevention strategy in Uzhhorod and aim to identify ways to include young women in collaborative efforts to develop effective, culturally-based HIV prevention programs for women in Ukraine.

4.00 PM:

The Ethics and Politics of Comparative Research on "Black" Women and HIV/AIDS in Brazil and the United States

Session Title: Race, Gender and Engaged Research: Interrogating the Issues a Decade Later

Start Date: 11/22/2008

Session Time: 04:00 PM - 05:45 PM

Author: Kia Caldwell

This paper argues for the importance of engaging in critical reflection on how black feminist researchers are positioned in relation to HIV+ black women during fieldwork. I examine the ethical implications of conducting research with HIV+ women and the moral imperatives of such research. This paper also explores how the category "black" woman translates in U.S. and Brazilian contexts and its relevance to understand the impact of the HIV/AIDS pandemic on African-descendant women in both countries. Finally, I discuss the political importance of conducting comparative research as a means to inform policy development and prevention efforts focusing on black communities in the U.S. and Brazil.

Engaging People for Social Action with Website Images: A Comparison of People with HIV and AIDS in African Countries versus the United States

Session Title: Visualizing Engagement, Collaboration and Inclusion: Seven Research and Applied Projects from Western Washington University

Start Date: 11/22/2008

Session Time: 04:00 PM - 05:45 PM

Author: Stephanie Button

This poster presents research on the use of images on websites for AIDS and HIV charities, activist organizations, and NGOs in the call for social action. My research looks at the content of the photography and other forms of imagery used on the websites of such organizations and uses semiotics and discourse analysis to examine the potential of such images to elicit engagement from their audience to care and to act. This project focuses on African and American HIV/AIDS organizations' websites and how they address the topic of HIV/AIDS through images with a particular emphasis on the disparities between how Africans and Americans who are HIV positive or have AIDS are portrayed. This poster will address:

- How the issue of HIV/AIDS is treated in African countries versus the United States
- What the disparities are between how Africans and Americans with HIV/AIDS are portrayed
- How these differences and disparities call for different kinds of engagement from an individual who views such images

Praxeological Performativity and Mystical Revelation

Session Title: African Divination, Dialogue, and Moral Imagination

Start Date: 11/22/2008

Session Time: 04:00 PM - 05:45 PM

Author: Tonya Taylor

Zimbabwe is experiencing one of the most severe AIDS epidemics in the world, with an estimated one out of five people infected with HIV. For both palliative care and pragmatic treatment of HIV-related opportunistic infections, people turn to Un'anga (the traditional system of health and healing) not as a substitute for western therapeutics, but as an alternative explanatory model for the diagnosis and management of illness. Through the distinct cultural sensibilities of indigenous explanatory models, the afflicted holistically understand and give meaning to the embodied experience of HIV/AIDS. This paper examines how the purposeful enhancement of the therapeutic process with highly charged symbols and ritualized communication transforms the embodied experience of HIV infection and the cultural performance of dying. Using a "praxeological" analysis, I will explore how one diviner performatively manipulate divinatory symbols to create a sense of mystical revelation and understanding, facilitating therapeutic relief. Within the interpretive frame of performance, diviners engage in a meta-physical public sphere where rational and critical debate about the nature and cause of illness occurs between the existential and transcendental world. Given that traditional healers provide the majority of care and treatment for HIV infection in rural Zimbabwe, how they represent HIV within therapeutic consultations directly affects patients' personal meanings and interpretations of the embodied experience of HIV infection. It is important to consider

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how the socially and culturally constructed causality of disease alters the subjective meaning of illness.

The Limits of the World

Session Title: When Anthropologists Work Through Art; Technical Alternatives for Contemporary Ethnographic Research

Start Date: 11/22/2008

Session Time: 04:00 PM - 05:45 PM

Author: Andrew Irving

This paper explores the thinking and being of persons close to death and uses painting and photography to examine the necessary conditions that make possible an imagined 'mutuality of the world' (the sense of dwelling with other persons who are imagined to experience and understand the world in a similar fashion). The paper argues that images offer a material basis from which to critique social scientific approaches to knowledge and embodiment as well as to begin speaking about perceptions of time, space and colour. Embodied interaction is often seen as the practical means and theoretical basis for understanding the experiences of other persons and accordingly underpins many current theories concerning embodied knowledge and the environment. Often these presuppose certain shared cognitive and bodily capabilities that are not always realised in action and instead reveal incommensurable differences. Accordingly this paper explores the relationship between the exterior materiality of art and the interior experiences of pain and imagination, as mediated through the processes of artistic production while living with HIV/AIDS, and suggests that artworks always contains hidden shades that are wrapped up within personal biography and existential circumstances that exist beyond phylogeny and social context.

SUNDAY, NOVEMBER 23:

8.00 AM:

“When the bond is chipped”: Owambo women’s memories of child fosterage

Session Title: Disjunctive Childhoods: Children's Agency in Cultural Reproduction organized by the Anthropology of Children and Childhood Interest Group

Start Date: 11/23/2008

Session Time: 08:00 AM - 09:45 AM

Author: Jill Brown

In the anthropological literature much is known about child fosterage. Ethnographers began documenting fosterage using different terms as early as 1937 (Herskovitz, 1937). Influential work by Goody (1973) and Bledsoe (1990) in Africa began to shed light on the variations of fosterage in Africa. The rapid social change that the HIV epidemic has elicited presents an opportunity to reexamine this cultural child care practice as the primary avenue of care for over 20 million orphans. While high levels of HIV and the rising number of orphans place enormous stress on a society, this may be less true of Africa than on any other region of the world, due to the dominance of the extended family over the nuclear and the

African cultural complex of socially distributed childcare and specifically child fosterage (Caldwell, 1997; Weisner, 1997). Research has not addressed, however, the experience of these children as few studies have examined fosterage from the perspective of the child. The current study analyzes 13 life history interviews of Owambo women in Namibia who were fostered as children, remembering their childhoods with their biological parents and with their foster parents. Several themes emerged from the interviews that describe the complexity of fostering relationships and the relative powerlessness children experienced within them. Reasons and motivations to foster were revealed as were protective factors like preserving sibling groups and creating myths regarding the arrangement. These accounts are also contrasted with the current state of fostering children after a death from HIV/AIDS.

Tangible Movements: Spatializing the sexual in a virally divided city

Session Title: Geographies of Health and Affliction

Start Date: 11/23/2008

Session Time: 08:00 AM - 09:45 AM

Author: Hanspeter Reihling

It has been argued that sexuality links the government of the self and the government of populations thereby being an efficient entry point for public health interventions. In this context, sexual politics have a spatial dimension that has drawn less attention from public health and academia alike. From an ethnographic perspective sexuality can be seen as a spatial practice able to connect the embodied experience of corporeal and urban space. This paper aims at a comparison of the spatial practices of young men living in three socio-culturally divergent neighbourhoods of Cape Town, South Africa. It will particularly address the movements of young men struggling to pursue sex and love in a time of AIDS which demands a new constitutional sexuality. Bodily movements and by extension the movement of non-human actants are taken as material interfaces through which the embodied experience of sexuality and the public health discourse on gender and AIDS can be analysed. By following the physical movements of the divergent actors and actants through time and space we are able to discern male conceptualizations of HIV/AIDS in a democratic South Africa. The use and manipulation of space by young men within and beyond different bodies and neighbourhoods indicates a sexual politics of life not merely directed by national and international public health discourses. Movement seems to be rooted rather in racialized, ethnicized, and sexualized habits that stand for a reinvention of tradition in a virally divided Post-Apartheid city.

Integrating ethno-connections between HIV/AIDS and banana plants in Bahaya agricultural society for more effective development policies

Session Title: Ethno-connections of food, nutrition, health, and policy

Start Date: 11/23/2008

Session Time: 08:00 AM - 09:45 AM

Author: Valerie Foster

In Bahaya agricultural society of northwestern Tanzania, people make sense of the tragic HIV/AIDS epidemic as part of an ecologi-

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cal continuum that has affected their homeland, known as Buhaya, for several decades. Buhaya is characterized by high population density and rainfall, low soil fertility, and a declining access to land and consequent food and nutrition insecurity for the Bahaya agriculturalists. The onset of HIV/AIDS accelerated the deleterious ecological challenges and exacerbated overall poverty and disease, including HIV/AIDS. In Luhaya, the native language spoken by the Bahaya people, they use the word “ekiuka” to refer to the pathogen which destroys bananas, their historical, cultural and staple food, and which causes HIV/AIDS and destroys their people. In this paper, this ethno-cognitive connection and metaphor will be explored. In addition, this paper highlights cultural definitions of health, wealth, and food and nutrition insecurity. This paper argues that it is necessary to understand how the Bahaya people, who have been heavily impacted by food and nutrition insecurity, poverty, and HIV/AIDS, experience, perceive, and communicate about these issues in the context of their history, language and cultural livelihood. Furthermore, I stress that this understanding is essential for the design and implementation of sound and effective development policies that aim to improve people’s lives.

Applying Anthropology to the Cause of Solving Social Issues

Session Title: Giving More than We Take: Reciprocity in the Research Process

Start Date: 11/23/2008

Session Time: 08:00 AM - 09:45 AM

Author: Tiantian Zheng

In this paper, I will draw on my years of ethnographic experience to illustrate how I utilized anthropology to identify and address the social issues that confront the communities where I conducted my fieldwork. I will argue that doing interdisciplinary research, in my case, combining anthropology and public health, is crucial to helping solve these social issues. From 1999 to 2002, I conducted my fieldwork with karaoke bar hostesses in hostess bars in urban China. By working and living with these bar hostesses, I learned what it was like for these young women to struggle for respect, to improve their social standing, and to fashion themselves as modern women. During my research, I was deeply disrupted by the fact that many male clients abjured the use of condoms. As a result, many hostesses suffered from frequent abortions and STDs. This male power is amplified in the case of sex-money exchanges where the woman sex worker directly depends on the man for her economic livelihood. In my research, I observed that women sex workers that were informed about the dangers of HIV/STDs and the risk-reduction benefits of condom use were nonetheless unable to convince their clients to use condoms. This intractable social issue of the unequal economic relations that disempower women sex workers in relation to their clients spurred me to conduct research combining anthropology and public health. I embarked on a research concentrating on male sex consumers’ perception of condoms as the point of departure for STD/HIV research and policy intervention. My research departs from the dominant public health paradigm but at the same time, enriches it with ethnography to help advance the social policies on STDs and HIV/AIDS that can contribute to the health of women and men.

1015. AM:

Belita’s Story About Witchcraft and AIDS: Kunda Narrative Virtuosity Opening Doors to the Future

Session Title: Discourse-based Approaches to Narrative: Stance, Identity, Responsibility, Memory, Tradition

Start Date: 11/23/2008

Session Time: 10:15 AM - 12:00 PM

Author: Bradford Strickland

This paper examines a mundane local case of argumentation about HIV/AIDS as it first unfolded in a rural eastern Zambian District fifteen years ago, and has continued to be retold among local residents of the district. Examination of the case may help illustrate why many village residents with knowledge about HIV/AIDS continue to perceive advantages in accounting for AIDS-like suffering and death through explanations that pointedly reject HIV/AIDS as cause. Two local oral narratives will be recounted that competed to explain the illness and death of a man of high standing in Mambwe District in Eastern Province. One of those narratives was managed by the wife of the dead man, who claimed that her husband had been killed by witchcraft initiated by his jealous co-workers. The other narrative was managed by the wives of the co-workers, and claimed that the man died of AIDS, contracted in extramarital sexual relations. The knowledge claims in each of these narratives rely on evidence authorized by, and organized around local idioms and idiomatic practices to assert the interests of one family and its alliance against another group of allied families. This paper will use ethnographic and rhetorical analysis to explore how local narrative practices, as a primary way to display evidence and justify explanations of experience, inform the everyday experience of HIV/AIDS for many rural Africans.

Becoming HIV-positive: Shaping Selves in Freetown's HIV Support Associations

Session Title: Engaging Identities in the Clinic: conflicts, tensions, and critiques of self-concepts

Start Date: 11/23/2008

Session Time: 10:15 AM - 12:00 PM

Author: Adia Benton

In this paper, I draw upon seventeen months’ observation in HIV support group meetings and counseling sessions in Freetown, Sierra Leone, to examine the clinic as a site for subject-making projects, especially those which focus on regulating and shaping self-conduct, self-presentation and sexual subjectivities. Here, I conceive the clinic broadly - as the set of technique-events deployed in HIV care and support programs: individual counseling sessions before and after HIV tests, positive-living workshops, and support group meetings for HIV-positive persons. More specifically, I describe the support groups, their central techniques, and the ways members discuss, debate and maneuver in these spaces. These support groups produce social relations around biological markers – here, antibodies to HIV, and therefore, HIV status – and draw upon language and forms that arise from existing social networks of trust, obligation and solidarity, as well as those articulated in global

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health discourse and practice around HIV/AIDS treatment. Ultimately, I argue that the aggregate of these techniques give rise to new forms of social relations based on biological status unlike previous iterations of vertical programs, which focused less intently on holistic modification of the self/subjectivities. I also discuss the limits of citizenship as an analytic for understanding the different kinds of aspirations that emerge from participation in these HIV/AIDS organizations.

Tracking the Trafficking: molecules, humans, and security

Session Title: Experimental BioLogics of Capital

Start Date: 11/23/2008

Session Time: 10:15 AM - 12:00 PM

Author: Kristin Peterson

This paper examines the relationship between human trafficking into prostitution, HIV related clinical trials, and US security policy in Nigeria and the Bight of Benin. Ever since former President Bill Clinton declared HIV/AIDS a national security threat in the 1990s, there has been an increasing convergence of health and security policy that bring together geopolitical and biopolitical discourses and sensibilities in novel ways. The paper will discuss the various politics of the body where gendered floating populations get absorbed into the economy of trafficking and then, in an indirect way, get absorbed into a growing clinical trial industry in Africa – an industry ostensibly deployed to reconfigure the AIDS crisis via experimental technologies and rationales. Such policies are being hailed under the rubric of “health security” for which U.S. and African militaries are viewed as part of an AIDS crisis solution that is linked to oil security and anti-terrorist logics. The paper concludes by thinking about the ways in which new forms of capital and accumulation are being mobilized in these scenarios.

Party and Play? Identity Conflict among Gay Men with HIV in San Diego

Session Title: Engaging Identities in the Clinic: conflicts, tensions, and critiques of self-concepts

Start Date: 11/23/2008

Session Time: 10:15 AM - 12:00 PM

Author: Theodore Gideonse

Based on initial fieldwork in San Diego, in his paper Ted Gideonse will discuss the ways that HIV-positive gay men in San Diego negotiate conflicting discourses and subject positions inside and outside the (public) health establishment. While under pressure from multiple sources—the gay media, gay rights groups, gay San Diegans, the pro-gay neoliberal left, and the healthcare hegemon—to construct and communicate their self-concepts as an optimistic, strong, and healthy neoliberal subjects, these men also must deal with being regulated, emasculated, and stigmatized patients, not only because of HIV but also, often, substance abuse. And they must manage this in a gay culture founded on the liberation of sexuality, on partying and playing, but which now faces an a resurgent HIV epidemic caused by crystal meth-fueled sex—otherwise known as “party and play.” While some manage (and juggle) the various and contradictory discourses into integrated identities, others have greater difficulty, and they face ramifications for their

own interior mental health as well as potential peer group, family, and community conflict. Drawing on the ideas of the political ethos (Jenkins 1991), cognitive heteroglossia (Strauss 1990), and the neoliberal medical subject (Rose 2007), the paper will show just how problematic are both post-HAART American gay identity politics and the continuing public and private healthcare treatment of HIV and AIDS.

Environment, human health, and the worldwide health care workforce shortage

Session Title: Political Economy of Health and Health Care

Start Date: 11/23/2008

Session Time: 10:15 AM - 12:00 PM

Author: Barbara Anderson

Environmental impacts and erosion of human health result from inadequate health care workforce in low income nations. The World Health Organization identifies the critical shortage and migration of health care providers from low to high income nations as a top priority for global action. High income nations frequently address this issue from three perspectives: the ethics of aggressive recruitment by first world nations; concern over the collapse of health care facilities in poor nations subsequent to migration; and resulting dampening of salaries and educational opportunities for health care workers in first world nations. None of these three addresses adequately the degree to which globalization, deteriorating environments, and health crises all form a vicious circle. This in turn exacerbates workforce shortage. The United Nations' Millennium Development Goals include eradication of poverty and hunger, containment of HIV/AIDS, malaria, and tuberculosis, and the reduction of high maternal-child mortality rates. These are linked to environment, but inadequately linked to problems of workforce shortage. Yet, especially in poor nations, workforce shortage erodes human health and contributes to escalating environmental hazards in direct ways (lack of sanitation workers, engineers, etc.) and indirect ways, including 1) poorly staffed HIV/AIDS and malaria prevention programs; 2) inadequate workforce to stem rising levels of drug-resistant tuberculosis; and 3) declining availability of services for the poorest mothers and children.

Claiming and Rejecting Disease: Rethinking Biological Citizenship and Biosociality

Session Title: Biosociality Without Borders: Citizenship and Subjectivity in a Contemporary World

Start Date: 11/23/2008

Session Time: 10:15 AM - 12:00 PM

Author: Thurka Sangaramoorthy

The concepts of race and ethnicity are fundamentally entwined in the discourses and practices of HIV/AIDS prevention in the U.S. These concepts take on a heightened presence in Miami because of its past and present turbulent and complex ethnic landscape, where diverse populations of those hailing from Latin America and the Caribbean along with African-Americans and Whites compete for various economic, political and social resources. In local HIV/AIDS prevention and treatment, notions of individual responsibility in HIV risk management often become inseparable from notions of racial, ethnic and immigrant identity. Furthermore, racial

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and ethnic identity and subjectivity become highly entangled in the politics of official HIV/AIDS surveillance and as a result, particular groups of people, through the rubric of culture and biology, come to constitute pathology in public imaginaries. As those with HIV/AIDS live longer through antiretrovirals and better managed care, activists and providers seek to change people's notions of living with the disease, rather than dying from it through public and private sessions aimed at empowerment and life-affirming attitudes. This growing movement of "positive living" parallels the complex strategies employed by policy makers and health advocates in the construction and management of responsible, ethical, and enlightened citizens. However, as this presentation will demonstrate, such notions of personhood and citizenship based in biology are not always rendered viable or even sufficient for Haitians in Miami, for whom such projects of citizenship embody contentious historical injustices and current practices steeped in inequality and discrimination.

"All I Eat is ARVs": Living with AIDS in the Treatment Era

Session Title: Biosociality Without Borders: Citizenship and Subjectivity in a Contemporary World

Start Date: 11/23/2008

Session Time: 10:15 AM - 12:00 PM

Author: Ippolytos Kalofonos

New HIV/AIDS programs in Mozambique and the accompanying increases in funding and political will have raised hopes for people who identify as HIV positive. The widespread availability of antiretroviral medications (ARVs) and related interventions supporting those "living positively" has fostered the growth of Associations of people living with HIV/AIDS. While these Associations serve to promote a local form of biosociality, they mainly appeal to the poor as the chief motivation for joining is the possibility of garnering material benefits. The majority of those living with HIV/AIDS, however, experience the promise of benefits from the outside looking in, wondering where all the new resources are going. This paper offers a critique of emancipatory notions of biological citizenship circulating following the advent of ARV therapy in southern Africa. In addition to effecting miraculous recoveries, termed "the Lazarus effect" in the medical literature as well as the popular press, ARV treatment in Central Mozambique paradoxically intensifies a starving people's hunger. People living with HIV/AIDS insistently denounce the tragedy of a scenario in which pharmaceuticals are available, but nutritional sustenance is not and basic economic survival remains in question. This serves as a reminder that the technological magic bullet of ARVs alone is an insufficient intervention in the face of the increasing hunger and inequalities that continue unabated in contemporary Mozambique, and a critique of interventions that "make live" while perpetuating an embodied form of exclusion.