

primary or even the major determinants of high HIV prevalence". We're not sure that social scientists would agree (the line from poverty and gender inequality to high-risk commercial sex work seems fairly direct), but here again, it's hard to avoid the logic in the numbers.

There's much in Chin's book that Helen Epstein, author of *The Invisible Cure: AIDS in Africa*, would find palatable. Like Chin, she holds the bold view that the virus spreads beyond high-risk groups to the general population only through web-like networks of concurrent sex partners.

With elegant prose, a scientific background and a journalist's searching anecdotal eye, Epstein combines personal research and corroborative evidence from others to posit the view that where Africa's AIDS rates are highest, the key difference is not the numbers of sexual partners, but the timing. She then applies her theory to Uganda, the one country in Africa where a culture of concurrent sex partners was well entrenched and yet the prevalence rate of HIV/AIDS has been reduced dramatically since 1990.

Epstein describes how President Yoweri Museveni rallied his country in the 1980s with the mantra 'Zero Grazing' that cautioned Ugandans not to have more than one partner at a time. She acknowledges the application of 'ABC' — abstain, be faithful and use condoms — but asserts that an abrupt end to the practice of concurrent relationships was the decisive factor in reducing prevalence.

How was it brought about? Here we see Epstein at her best, explaining why Uganda succeeded where others failed. Above and beyond the messages from government bureaucrats, and a world away from donor-driven aid 'packages', the "personalized, informal, intimate, contingent, reciprocal nature of

African society" led Ugandans to draw their own conclusions and fashion their own grassroots defence. Concludes Epstein, "the open discussions led by government field-workers in small groups of women and churchgoers, the compassionate work of the home-based care volunteers, the courage and strength of the women's-rights activists helped people see AIDS not as a disease spread by 'others' but as a shared calamity, and this made discussion of sexual behavior possible without seeming preachy, condescending or out of touch".

Wealthier countries, such as South Africa and Botswana, looked to imported commodities and slick advertising campaigns, but in Uganda, the shocking pervasiveness of death was mellowed by the traditional African principle of *ubuntu*, or shared humanity, resulting in an indigenous response that stirred the collective conscience. Epstein speaks of the neighbourly exchange of caregiving as though it was a social movement, and in the mind's eye, the reader is convinced.

And then, like Chin, Epstein goes after UNAIDS. Mind you, her criticism is almost Victorian in its gentility, albeit unmistakable in its target. Where Chin uses a hatchet, Epstein wields the scalpel. She argues persuasively that the UN has long known that reduction in the number of sexual partners has been a factor wherever rates have fallen, from Uganda to San Francisco, and yet it refuses to act on it. Is it lack of respect for indigenous cultural awareness and survival instincts? She recounts how in 1993, a statistician now in the top ranks of UNAIDS misrepresented (mistakenly, it seems) findings about Uganda's success, erroneously claiming that researchers had noted an uptake in condom use and delay in sexual initiation, but no significant reduction in concurrent partners. The distortion prevailed. "It was only

in 2006 that UNAIDS officials began to stress that the reduction of multiple sexual partnerships should be a key goal for AIDS prevention programmes in southern Africa," she reports. When the organization's executive director Peter Piot was asked about the omission in a list of questions Epstein sent him in 2004, he answered every question but that one.

The issue that lurks at the back of the mind of the reader in the case of both Chin's and Epstein's arguments is, what next? If UNAIDS has been locked in a rut of culturally questionable and epidemiologically flawed approaches, can it be rehabilitated? Chin would have us look harder at the scientific facts, and then start afresh with a new set of assumptions and projections; he would eliminate conflicts of interest by segregating epidemiologists from the officials concerned with advocacy and fundraising. Epstein would add to that the plea that programme planners rediscover the indigenous wisdom of African culture, which has successfully withstood threats since the dawn of humankind. Both books are guaranteed to spark animated discussion. Together, they pose the first open challenge to the UN's role in the most eviscerating plague in human history. ■ Stephen Lewis is former UN special envoy for AIDS in Africa, and Paula Donovan is an international HIV/AIDS consultant. They are in the process of setting up an international AIDS advocacy organization, AIDS-Free World.

#### More on AIDS in Africa

#### When Bodies Remember: Experiences and Politics of AIDS in South Africa

by Didier Fassin (University of California Press, 2007).

#### 28: Stories of AIDS in Africa

by Stephanie Nolan (Portobello Books, 2007).

## Winged beauty

Moths, generally active at night, are often less colourful than butterflies. But there are exceptions. The brilliant colours of the *Pseudodirphia menander* (pictured) are not ones that attract attention from afar in its natural habitat — in the forest undercanopy many leaves have pink and red hues. Closer up, the red colour might act as a warning. *100 Butterflies and Moths* (Belknap Press) presents portraits of some of the 10,000 species estimated to inhabit the Guanacaste conservation area in northwestern Costa Rica. The photographs, taken by Jeffery Miller, and the accompanying, informative descriptions could serve as a field guide for a visit to the Costa Rican forest or be equally appealing to the armchair naturalist.



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