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**'Letting Them Die': Why HIV/AIDS Prevention Programmes Fail. Catherine Campbell. Bloomington: Indiana University Press, 2003. 214pp.**

The HIV/AIDS epidemic continues to spread. Daily, the epidemic's toll is felt by families, communities, businesses and nations. For twenty-five years, within each of these levels, a variety of programs have been designed and implemented to strengthen prevention efforts. It has proven especially difficult to develop programs that incorporate a range of activities that will reach multiple audiences and address the multiple factors that place people at risk of HIV/AIDS.

Catherine Campbell's book is the most comprehensive review to date of one multi-faceted prevention program. I read the book shortly after talking with people in Namibia about their experiences with a workplace-based HIV/AIDS prevention program. The views of participants in that Namibia project closely echo the observations of Campbell about a community-based HIV/AIDS project in South Africa, the focus of this book. Her analysis of the many elements that determine the effectiveness of an HIV/AIDS project is applicable to many projects across Africa. Unfortunately, too, her conclusions that even well-resourced projects often fail to achieve their goals—and fail to stem the epidemic—are widely applicable. The question, then, is why, after a quarter of a century, have national and international responses to the epidemic achieved so little? Campbell's study goes a long-way toward answering this question.

Campbell moves her analysis beyond what has been the center of most HIV/AIDS projects: the focus on changing individual sexual behaviors. She looks at the mix of social, economic and policy determinants of sexual behavior within the context of one community-based HIV/AIDS prevention project. She seeks to show how the initial conceptual framework that informs project design and implementation leads to success or failure at subsequent stages of the project. She argues that HIV/AIDS projects need to be formulated with an understanding of the economic and social pressures that exist at and on local communities. At the same time, those projects must recognize that gender, class and social power relationships will shape how a project is perceived and manipulated by members of communities.

One of most insightful sections deals with the project's efforts to involve in the project women who sell sex. The women were recruited to be peer educators. They were expected to interact with other sex workers, with clients and community members to raise awareness about HIV/AIDS and promote prevention. All of the women were poor, had little control over their work and had no experience as facilitators for change. A lengthy process of recruitment and training occurred. The process was hindered by the power of a community "Chief" who sought to gain financially from the project. Eventually, the obstructionist "Chief" was killed and replaced by a younger man who promoted greater democratic involvement in community affairs. Over time, the role of women—and the project's peer educators—was enhanced by this turn of events.

Campbell argues at that both community and national levels, project participants must feel they have a voice in decision-making processes. The peer educators gained a level of that confidence through the respect they achieved. But, the channels for participation were relatively narrow. As with the peer educators I observed in Namibia, the efforts of those described by Campbell were limited by the gaps that occurred early in the project's conceptual and design stages.

Creating and implementing multi-dimensional projects are not easy tasks, particularly given the implosion of many public health systems, the skepticism of communities toward promises of improvements in living conditions, and the options available to both women and men to make a living in contemporary Africa. Unlike many of the international and national agencies focused on HIV/AIDS issues, Campbell does not argue that more money is the initial requisite for improved projects. In essence, her analysis argues for design teams with broader perspectives than has been the case to date. In turn, improved design of HIV/AIDS programs will take into account a wider range of disciplines and the lessons they have learned. Indeed, one is struck in Campbell's assessment and in reviewing other HIV/AIDS programs how little has been learned and applied from the experiences of fifty years of community development work.

The book offers many valuable insights for HIV/AIDS planners and practitioners. One would ask of Campbell to distill her analysis into a shorter, more concise format that will be read and used by the people who now shape HIV/AIDS programs.

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