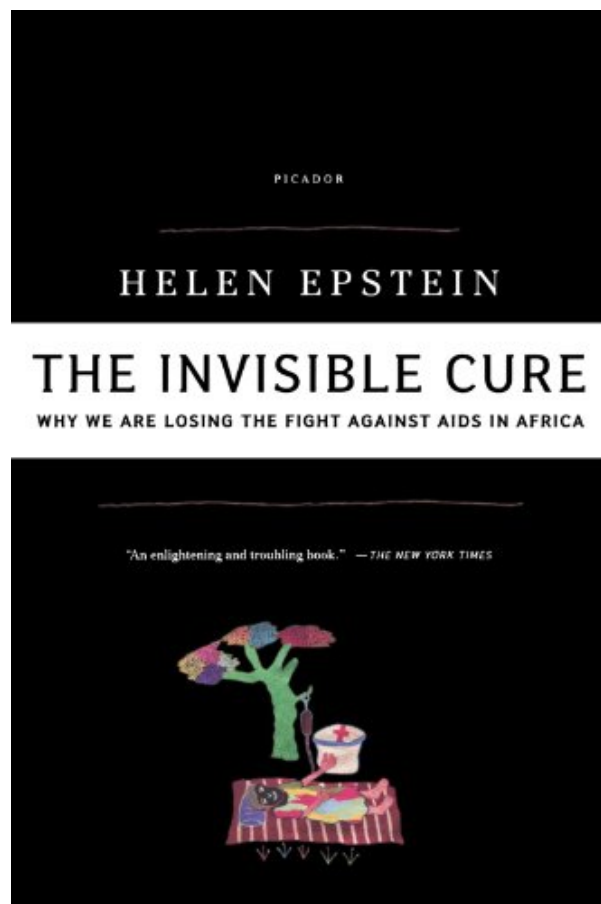
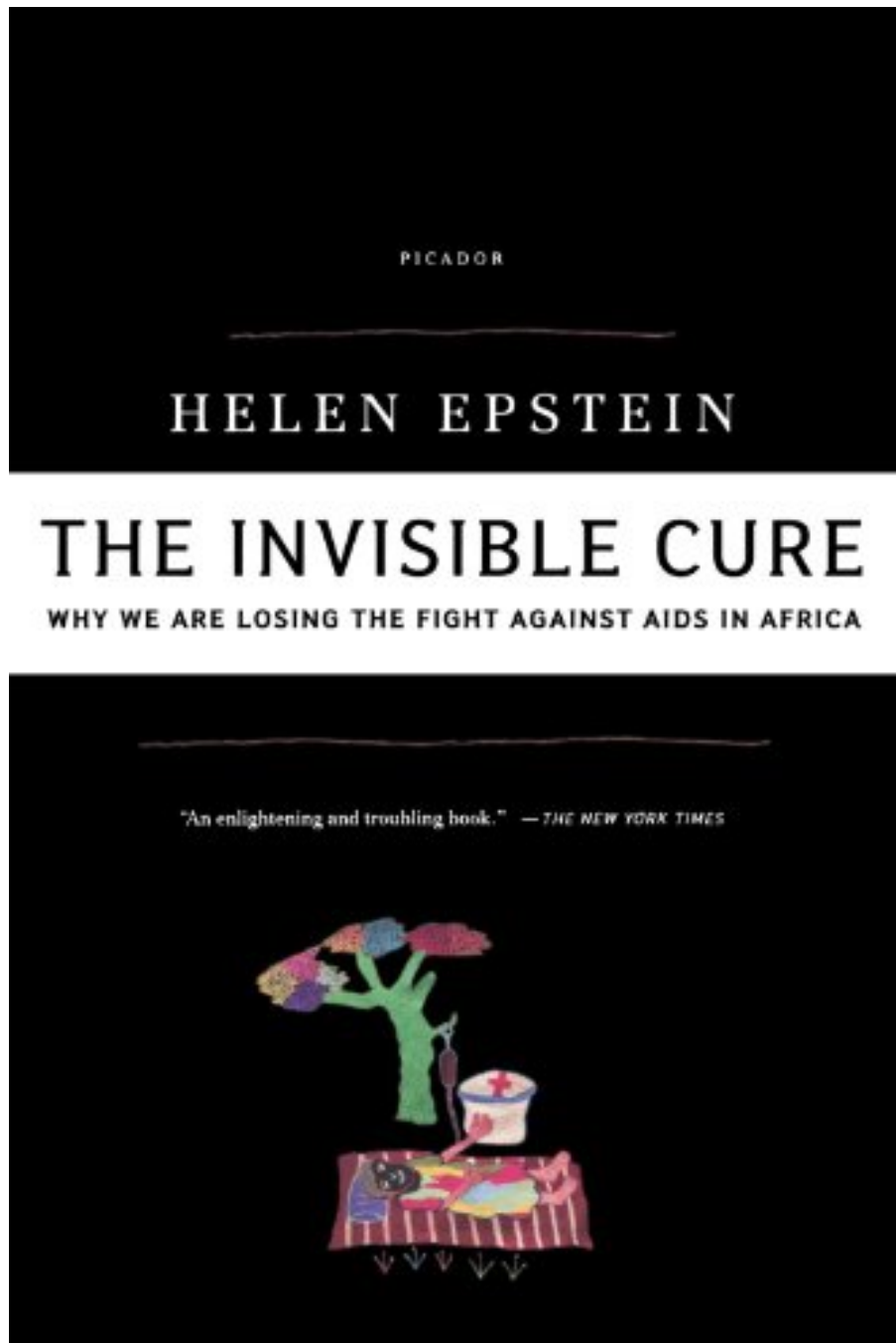


THE INVISIBLE CURE: WHY WE ARE LOSING THE FIGHT AGAINST AIDS IN AFRICA BY HELEN EPSTEIN



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From Publishers Weekly

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A New York Times Notable Book of 2007

The Invisible Cure is an account of Africa's AIDS epidemic from the inside--a revelatory dispatch from the intersection of village life, government intervention, and international aid. Helen Epstein left her job in the US in 1993 to move to Uganda, where she began work on a test vaccine for HIV. Once there, she met patients, doctors, politicians, and aid workers, and began exploring the problem of AIDS in Africa through the lenses of medicine, politics, economics, and sociology. Amid the catastrophic failure to reverse the epidemic, she discovered a village-based solution that could prove more effective than any network of government intervention and international aid, an intuitive response that calls into question many of the fundamental assumptions about the AIDS in Africa.

Written with conviction, knowledge, and insight, The Invisible Cure will change how we think about the worst health crisis of the past century--and indeed about every issue of global public health.

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An important contribution to addressing this ongoing tragedy

By John Bergren

I'm an American doctor working in rural KwaZulu-Natal, South Africa. I can attest to the substance of much of the material presented in this book and the importance of its message, specifically that norms of sexual behavior in this culture need to be discussed and changed for prevention efforts to begin to be effective. As the author aptly discusses, numerous aid organizations, flush with good intentions and funds, seem to operate on the periphery of this central issue. One of the most disturbing lessons of my time in the midst of this horrible tragedy is the realization that the stigma attached to this disease in many parts of sub-Saharan Africa remains so severe that many people prefer to die than to find out that they have AIDS, a point the author seems to get across through with many informative anecdotes. The fundamental thesis is that we need to begin to engage the leaders within these societies at a fundamental cultural level regarding relationships and sexual behavior. No small task. I would highly recommend this book as the first read for someone trying to understand why AIDS is so unbelievably prevalent in Sub-Saharan Africa. As of today, for every person we enroll in antiretroviral treatment in rural KwaZulu-Natal, five will be newly infected. It's very depressing to see so many people dying from a preventable disease--1,000 people die of it every day in South Africa alone.

17 of 19 people found the following review helpful.

hiv prevention: now and how

By Daniel B. Clendenin

"As a woman living with HIV," says Beatrice Were of Uganda, "I am often asked whether there will ever be a cure for HIV/AIDS, and my answer is that there is already a cure. It lies in the strength of women, families and communities who support and empower each other to break the silence around AIDS and take control of their sexual lives." With a vaccine against HIV far off in the distant future (if at all), and with treatment of AIDS in the two-thirds world difficult, expensive, and limited in effect, the name of the game in HIV-AIDS is prevention. But in places like Africa, which is the focus of Helen Epstein's book, prevention is not as simple as it sounds. As she notes in her appendix, measles, syphilis, tuberculosis, and other entirely preventable diseases still kill millions of people even though they can be treated for pennies.

Why has HIV-AIDS ravaged eastern and southern Africa like no place on earth? "In 2005," she writes, "roughly 40 percent of all those infected with HIV lived in just eleven countries in this region-- home to less than 3 percent of the world's population." In some of these countries the infection rates have hit 30 percent, decimating the general population, while in the west, for example, rates hover at about 1% and are generally limited to specific demographics like gay men, intravenous drug users, and commercial sex workers." Theories abound about this discrepancy, but Epstein argues a narrow point, that Africa's problem is not profound promiscuity, or even the normal culprits of high risk groups like prostitutes or truck drivers, but instead a social phenomenon of "concurrent partners." That is, Africans do not have more sexual partners than in other places in the world, and nowhere near as many as gay men among whom infection rates are exponentially lower; but they do have a small number of sexual partners concurrently, at the same time, rather than one at a time or sequentially. This has set the virus loose among the general population like a runaway train.

And why has prevention been so elusive? Epstein appeals to what she calls the comprehensive "social ecology" of denial, silence, shame, adverse gender roles, and stigma about HIV-AIDS. Western-initiated and donor-funded programs will always be less successful than listening to Africans themselves and their own suggestions about how to address the problem. Uganda, of course, has been the amazing success story in this regard, and the subject of bitter debates about why. In 1989 Uganda had one of the highest infection rates in the world, but from about 1992-2002 the infection rate dropped by two-thirds. The key to the success, argues Epstein, was not in the billions of dollars from the west, but from the "collective efficacy" of a "shared calamity," by people helping each other and talking openly about the scourge. In particular, "partner reduction," she says, and not the much vaunted condom use, helped Ugandans to address the cultural phenomenon of concurrent partners. Partner reduction, as one worker described it, is thus the "neglected middle child of the ABC approach" of abstinence, fidelity ("be faithful"), and condoms. Zero Grazing, as Uganda's president Yoweri Museveni called for, is thus the silent cure already available, however valuable other prescriptions.

Epstein, a molecular biologist who has written widely on public health issues, combines rigorous science and the anecdotal evidence of substantial field research. She's clearly as comfortable with and interested in meeting with a dozen African widows under a mango tree as she is in the latest results of a demographic study. Her book has received strong reviews in the New York Times and the New York Review of Books (where her mother was a co-editor before she died), and also a rebuttal of sorts on the home page of UNAIDS that was provoked by her somewhat conspiratorial stance toward research that she argues they ignored because it didn't fit their partisan ideology.

15 of 19 people found the following review helpful.

A CLASSIC WORK

By Big Wind

The most important book published on AIDS in a long time, and one of the most important books of the year. If you liked Rachel Carson's *Silent Spring* or *And The Band Played On*, you will love this book. It is readable, impassioned and brilliant, and despite its savage denunciation of the failures of the West to deal with the AIDS crisis, it is an essentially optimistic work. Publishers Weekly in a starred review said it will save lives, and that is not hyperbole. I urge anyone who is interested in the greatest medical crisis of our time; anyone who is interested in Africa; anyone who is outraged by the failure of the UN, the WHO and the Bush administration to deal with this tragedy, to buy this book and give it to your friends. It is the kind of book that will change peoples' minds and will move continents. It will be read for years to come...

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