

BOOK REVIEW

Review of *AIDS and Masculinity in the African City: Privilege, Inequality, and Modern Manhood*, by Robert Wyrod. Oakland, CA: University of California Press, 2016

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Robert Wyrod's book, *AIDS and Masculinity in the African City: Privilege, Inequality, and Modern Manhood*, offers a unique approach to AIDS via the lens of sexuality and masculinity in Uganda. It examines how the AIDS epidemic has shaped gender and sexuality in Africa, especially conceptions of masculinity (p. 6). HIV/AIDS has debilitated many countries, so why Uganda for this research? Wyrod states that he decided to focus on the impact of AIDS in Africa for his research and Uganda in particular, due to the country's success in combatting the scourge:

I chose to do this study in Uganda because the country holds a special place in the history of the global AIDS pandemic. . . . Uganda was in fact the first country in the continent to document a drop in AIDS prevalence . . . a remarkable story that earned Uganda the label of Africa's great success story (p. 6).

The 299-page book, is a product of years of field work conducted between 2004 and 2009, in Bwaise, "a densely populated slum community" in Kampala City, Uganda, composed of a population of urban poor multicultural people who are exposed to modern social lifestyles (pg.1).

In the Introduction, Wyrod gives a background of the AIDS pandemic in Uganda and describes the efforts by the Uganda government and international agencies to curb it. He also describes how masculinity, sexuality, and the social economic relations affect

gender relations and culture in Uganda. In his literature review, Wyrod also explains the Western racist perceptions about Africans and their “hyped sexualized pan-African culture,” and why this hypersexualized culture is perceived to be the main cause of HIV/AIDS epidemic.

. . . this myopic attention to a purported African sexual exceptionalism has led to a fixation on strategies for modifying Africans’ sexual behavior and diverted attention from key co-factors in the spread of AIDS in Africa, including malnutrition, other diseases and inadequate healthcare . . . these factors are rooted in poverty and it’s this poverty that actually distinguishes life in Africa from the West (p. 16).

AIDS and Masculinity explains that the AIDS epidemic has had a great impact on masculinity and sexuality in Uganda and sub-Saharan Africa in general. This research, which was to establish if the AIDS epidemic altered or affected these male sexual privileges of Ugandan men, instead found that “while AIDS has complicated aspects of masculine sexual privilege, it has not fully challenged it” (p.206). Wyrod says that he found that men, as well as women, instead “reworked men’s sexuality in light of the persistent HIV, at times questioning but largely re-affirming it” (p. 206).

Wyrod further argues that AIDS escalation in Africa was mainly caused by poverty and insecurity due to civil wars, which disrupted the social economic structures of many African communities. This made women more dependent on men, and too poor to negotiate their sexual rights. Poverty equally made men emasculated, as many could not fit in the ‘home provider image’ that women expect them to fulfill. This led to broken homes, domestic violence, transactional sex or extramarital affairs leading to more AIDS infections especially among women. This intersectionality between poverty, sexual rights and AIDS is one of the main themes running across the book, and Wyrod refers to it as the biggest challenge in the struggle against AIDS in Africa. Accordingly,

Wyrod makes it clear that as long as social economic challenges are not addressed, HIV/AIDS infections will continue growing (pp. 225-232). The reader is, however, left wondering why a country like Botswana, which has a developed economy and good health infrastructure, has the second highest HIV/ADS prevalence rates in the world.

Wyrod attributes the cause of the high AIDS epidemic in Uganda to the Obote-Amin 1970s economic breakdown, which led to smuggling, where “illicit markets, secretive transport and human interaction . . . were a risk environment and background for the development of an epidemic of HIV/AIDS” (p. 66). Perhaps one aspect that is not accounted for by Wyrod in this book is the extent to which the political instability caused by Museveni’s NRA war of the 1980s contributed to the AIDS epidemic in Uganda, given that it disrupted the social economic structures of Uganda including health facilities. Uganda is one of the most highly affected countries by HIV/AIDS in the world, and Wyrod rightly acknowledges the extraordinary effort Museveni’s government has taken to control the AIDS epidemic after 1986. Another important aspect that *AIDS and Masculinity* covers in detail is Uganda’s women’s rights and their empowerment in the ‘90s. Wyrod explores why there was a pushback in the last two decades against women’s move to shift “the gender status quo, especially those shifts that are perceived to be threatening men’s power and privilege” (pp.10-11). Wyrod concludes that while Museveni’s government continues to claim to advocate for women’s rights, it neglects addressing the economic conditions that so fundamentally structure intimate relationships among the urban poor (p. 159).

Wyrod believes that the entire process to combat AIDS in Uganda promoted masculinity and male sexual privilege. This process took on the religious undertones of 1970s without aiming to “curtail the traditional male sexual privileges” (p.76). In other words, HIV/AIDS has reaffirmed and reproduced new forms of masculinities instead of controlling them (pp. 202-203). Even with the shift from religious approach of “zero grazing” to biomedical

use of anti-retroviral drugs leading to a successful reduction of HIV infections, new HIV infections among women remain overwhelmingly high compared to men (p.79). Masculinity and cultural perceptions are further highlighted as the cause of women's vulnerability and a hindrance to men's willingness to seek medical services including AIDS testing and counseling, which is a setback to HIV/AIDS control, as they continue infecting others (pp. 83-122). That is why, as a way forward, Wyrod underscores the need to address masculinity and its perceptions in the fights against AIDS. Wyrod recommends that, "addressing AIDS and gender inequality also requires attention to men's masculinity" (p. 225). *AIDS and Masculinity* is quite accessible and useful to students at all levels, social workers, activists, policy-makers, and researchers of social economic issues in Africa.