D-Day 3/6

**On “’We Are All Going to Die’: Kinship, Belonging, and the Morality of HIV/AIDS-Related Illnesses and Deaths in Rural Tanzania,” by Hansjorg Dilger**

1. In what various ways do the Luo culture account for the HIV/AIDS epidemic in the face of repid change and modernization according to their traditional ways of life and the underlying values of their community?
2. In his article “We Are All Going to Die”: Kinship, Belonging, and Morality of HIV/AIDS-Related Illnesses and Deaths in Rural Tanzania, author Hansjorg Dilger argues that the disease comes with certain connotations that have caused some cultural contradictions within Tanzania. In what way are these connotations and contradictions illustrated and how can identifying them contribute to the total understanding of the AIDS epidemic in the country?

**On *The Invisible Cure: Africa, the West, and the Fight Against AIDS*, by Helen Epstein**

1. Though she faced many challenges, biochemist and author of the book The Invisible Cure, Helen Epstein, firmly believed that it was in the best interest of her AIDS vaccine research to be conducted in Africa, more specifically Uganda.  Do you agree with her decision?   Why or Why not?  [Gracie]
2. In her preface, Helen Epstein proposes that, “when it comes to fighting AIDS, our greatest mistake may have been to overlook the fact that, in spite of everything, African people often know b est how to solve their own problems.” What is your initial reaction to the idea that African people know best how to solve their own problems? How can we relate this notion to the readings we have read, the films we have watched, or the discussions we have had thus far in class? [Meghan]
3. In light of our discussion in the beginning of the semester, what are the stereotypes of HIV/AIDS as discussed by Epstein? How does the international community formulate misconceptions? How do those in the affected area (Uganda) view those trying to help? What does this do to the progress in AIDS research? [Claire]
4. Is there truly a considerable difference between sexual relationships in the United States and in many countries and cultures in Sub-Saharan Africa? In what ways does HIV/AIDS appear to spread more through these sexual relationships? [Christine]
5. Helen Epstein presents the case of AIDS dissidents as fundamentally incorrect and harmful. What exactly constitutes the theories of AIDS dissidents and to what degree have their ideas been accepted or rejected? What does Mbeki’s acceptance of AIDS denialism mean for South Africa, and what does it mean in the grander scheme of the African struggle with AIDS? [Peter]
6. Was the AIDS epidemic affected in any way because certain countries under-exaggerated the number of people in them that suffered from AIDS when the epidemic first became public? Why might particularly African countries feel pressure to fake these statistics? [Nikki]
7. Why do you think that many women in Southern Africa (yet also in other parts of the world) engage in ‘transactional relationships’? How does doing so benefit yet also hurt people of both sexes? Lastly, how do these concepts connect to similar practices that exist in other places in the world? [Angela]
8. If the practice of ‘concurrency’ plays a major part in the spread of HIV in places like Uganda, why not try to eradicate it? [Rachael]
9. How could HIV/AIDS be controlled in concurrency and transactional sex societies? [Hadiatou]
10. Why might have President Thabo Mbeki of South Africa been a proponent of the much less prevalent view on AIDS circulated by the AIDS dissidents? [Nikki]
11. To What degree does the level of dialogue regarding HIV/AIDS improve its ability to be controlled? What factors does Epstein attribute to the dialogue? In what ways in this similar or dissimilar to the effect that open dialogue can have on issues in the West? Is Epstein’s view echoed by other organizations combating HIV/AIDS? [Peter]