



## SPECIAL REVIEW

### The Moral Economy of AIDS in South Africa

Bridget Farham

The moral economy of AIDS in South Africa. By Nicoli Nattrass. Pp. 222. Cambridge: Cambridge University Press. 2004. ISBN 0 521 54864 0. (Available from SAMA-HMPG. Price R130.00, members R120,00.)

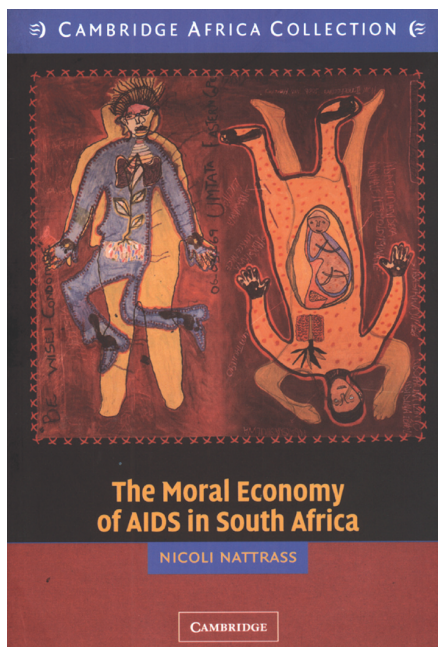
In 1729 Jonathan Swift, the author of *Gulliver's Travels*, wrote a satire arguing that children should be sold on the market for food. His aim? To shock the English and Irish aristocracy out of their complacency about poverty in Ireland. His argument was that selling children for food would overcome the problem of poverty and overpopulation in one. Nicoli Nattrass cites Swift, arguing that some of the present South African government's approaches to the AIDS epidemic have not stopped far short of this approach.

Nattrass points out that very few people in South Africa have access to antiretroviral treatment, and, while the government has now, somewhat reluctantly, pledged universal treatment, the argument is still one of unaffordability. But in what way is treatment unaffordable? Is it a question of triage, where only those who look as though they will make it are offered care? Or would it be better in many ways to let people die, hastening deaths and leaving those remaining with a larger slice of the pie? And what are the economic costs of HIV to the country? Nattrass expertly takes us through the various models of the economic effects of HIV on the South African economy and points out that none are particularly robust or useful, although there are some useful pointers to micro-economic effects on specific sectors of society.

What is 'moral economy'? The term was first coined by E P Thomson in a discussion of the bread and food riots in 18th-century England. A 'moral economy' is one that argues for certain rights against the economy of the free market, and has characterised working-class resistance struggles around the world. It is this 'moral economy' that Nattrass harnesses in her discussion of the case for universal HIV treatment in South Africa. Clearly, most people in South Africa see HIV treatment as a necessity, as long as there are no resource constraints. But the argument becomes markedly more complex when the issues are looked at in detail. Poverty characterises our society, and even more so, the growing gulf between those who have work and those who do not. This gulf, argues Nattrass, not only feeds inequality in our society, but leads to the horrific proposition that having a job means the difference between life and death for those who are HIV-positive if antiretroviral treatment is available only to those in employment, currently very much the case.

Assuming that the government will eventually make good its promise to expand access to antiretrovirals, Nattrass asks how this should be funded and, more importantly, whether people are prepared to pay and how much? Her conclusions are thought provoking.

There are those who argue that government should not make social choices for society. But, as Nattrass points out, this is precisely the role of a democratically elected government. She ends by saying that 'AIDS policy is too important to be left in the hands of technocrats.' Only open debate will shape a genuine social response to this challenge.



350

Dr Bridget Farham (Editor, CME) is a full-time medical and scientific editor and writer, with a particular interest in HIV and AIDS.

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