The changing political economy of sex in South Africa: The significance of unemployment and inequalities to the scale of the AIDS pandemic

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Abstract

Between 1990 and 2005, HIV prevalence rates in South Africa jumped from less than 1% to around 29%. Important scholarship has demonstrated how racialized structures entrenched by colonialism and apartheid set the scene for the rapid unfolding of the AIDS pandemic, like other causes of ill-health before it. Of particular relevance is the legacy of circular male-migration, an institution that for much of the 20th century helped to propel the transmission of sexually transmitted infections among black South Africans denied permanent urban residence. But while the deep-rooted antecedents of AIDS have been noted, less attention has been given to more recent changes in the political economy of sex, including those resulting from the post-apartheid government’s adoption of broadly neo-liberal policies. As an unintentional consequence, male migration and apartheid can be seen as almost inevitably resulting in AIDS, a view that can disconnect the pandemic from contemporary social and economic debates.

Combining ethnographic, historical, and demographic approaches, and focusing on sexuality in the late apartheid and early post-apartheid periods, this article outlines three interlinked dynamics critical to understanding the scale of the AIDS pandemic: (1) rising unemployment and social inequalities that leave some groups, especially poor women, extremely vulnerable; (2) greatly reduced marital rates and the subsequent increase of one person households; and (3) rising levels of women’s migration, especially through circular movements between rural areas and informal settlements/urban areas. As a window into these changes, the article gives primary attention to the country’s burgeoning informal settlements—spaces in which HIV rates are reported to be twice the national average—and to connections between poverty and money/sex exchanges.

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Introduction and the argument

Between 1990 and 2005, HIV prevalence rates in South Africa jumped from less than 1% to around 29%.¹ Combining ethnographic, demographic and historical insights, this article addresses the important question posed nearly 5 years ago by prominent South Africanist scholars: Was AIDS in South
Africa ‘an epidemic waiting to happen’?2 Approaches that forefront the legacy of apartheid to address this question have succeeded in providing important historical context and thereby in decisively challenging models that reify an ‘African system of sexuality’ supposedly characterized by sexual permissiveness (for instance as contained in Caldwell, Caldwell, & Quiggin, 1989; for a direct critique see Heald, 1995). In particular, scholars have brought to attention the ways in which racial segregation and male migration fuelled an earlier epidemic of syphilis only partially quelled by the introduction of penicillin in the 1950s; moreover, they note how the forces of urbanization, industrialization, and Christianization have long been argued to have destabilized African family structures (for instance Delius & Glaser, 2002; Horwitz, 2001; Jochelson, Mthibeli, & Leger, 1991; Marks, 2002; Phillips, 2004). These accounts of the social origins of AIDS built on earlier groundbreaking work on the political economy of health in South Africa (for instance Andersson & Marks, 1988; Packard, 1989).

But while political economy approaches destabilize the ‘culture’ thesis in vital ways, there is a danger that they too may be interpreted as evidence that the severity of the AIDS pandemic was almost inevitable—this time not because of culture but apartheid and industrialization. In this article I do not question the inextricable link between apartheid and AIDS. I do, however, draw attention to recent changes in South Africa’s political economy of sex that can help to explain the scale of the pandemic. This leads us beyond the well-studied political economy and geography of male-migrancy which, since the 1940s, has become something of a cliché in explaining sexually transmitted diseases and in framing scholars’ understandings of the political economy of sex—albeit with much merit. Instead, this article gives attention to a series of relatively recent interconnected trends, namely rising unemployment and social inequalities, dramatically reduced marital rates, and the extensive geographical movement of women as well as men in contemporary South Africa. These social forces are perhaps materialized most vividly in the country’s burgeoning informal settlements where HIV rates are reported to be almost twice as high as they are in rural and urban areas, attracting surprising little comment (HSRC, 2002, 2005; Pettifor et al., 2004). Characterized by the presence of one roomed imijondolos (roughly ‘shacks’) and a population that is typically young, unmarried, and without secure work, informal settlements are testimony not only to the failure of the state to create viable jobs and build adequate housing, but to a set of dynamics that have been largely neglected in the study of the AIDS pandemic.3

A few caveats are necessary before approaching such an exploratory discussion. First, the complex interplay between race, class, and geography belie a single political economy of sex. It is important to state up front therefore that this article mainly considers poor South Africans and specifically those classified as ‘African’ under apartheid—the primary occupants of informal settlements.4 Second, the paper considers in greatest detail the spatial movements and livelihoods of women and not men (on related changes in masculinities as a consequence of unemployment and inequalities see Hunter, 2005b). Third, although these arguments evolve out of extensive ethnography in an informal settlement, the article draws mostly from secondary data and is aimed at a broader level of analysis.5 Fourth, this article considers only one side of the political

2The title of a keynote speech given by Shula Marks at the 2001 ‘AIDS in Context’ conference in Johannesburg (subsequently published in African Studies in 2002) and also the title of a book (Waiting To Happen) based on the same conference (Reid, Walker, & Cornell, 2004). This article is indebted to these and other analyses that emphasize the connection between apartheid and AIDS; the purpose of this piece is to take the political economy approach they represent forward.

3In the last year, informal settlements have emerged as major areas of social protest, especially in Durban with the founding of the organization abahlali basemjondolo (shack dwellers movement). See Patel & Pithouse (2005).

4Although the term ‘African’ is problematic, without recourse to statistics that use the category it is very difficult to make arguments about social change. That AIDS is not an essential African disease but rooted in socio-economic forces—although in more complex ways than has been previously accepted—is the main thrust of this article. It is possible that growing class divisions are making AIDS less concentrated in one ‘race’, and much more work needs to be done in this area, but the recent HSRC (2005) study finds infection rates of 13% for ‘Africans’, 1.9% for ‘Coloureds’, 1.6% for ‘Indians’, and 0.5% for ‘Whites’. If this is broadly correct, what requires explaining is not only the historical reasons for this discrepancy but the socio-spatial dynamics that underpin it today. For a particularly important argument linking race, ‘premature death’, and geography at a more general level see Gilmore (2002).

5Ethnographic research was conducted in Mandeni, KwaZulu-Natal, where I lived extensively with a family in Isithebe Informal Settlement between 2000 and 2004. I have refrained from giving extensive background to the study because of space limitations, but see Hunter (2005a).
economy of sex, namely sexual relationships between men and women; it does not look at the connection between political economy, same-sex relationships and AIDS or, indeed, sexual violence and AIDS. But a final important caveat must be made—sex and AIDS should not be too easily equated. Starting with Packard and Epstein’s (1991) important piece, it has long been argued that racist assumptions exaggerate the importance of sex to the spread of AIDS and exoticize sexuality in problematic ways (see also Vaughan, 1991), and McClintock (1995), on racial tropes surrounding African sexuality, and Stillwaggon (2006), for a recent reassertion of the significance of nutrition, parasites and other co-factors to the spread of AIDS in Africa). Yawning divides in health care provisions, for instance, can certainly go a long way to explain the uneven unfolding of AIDS in South Africa; 15 percent of the population has access to private health care facilities while the remainder, most of whom are black, depend on an overburdened public health service (Health Systems Trust, 2004). The social context of AIDS is, without doubt, much broader than the political economy of male/female sex, the central focus of this article.

Nevertheless, there is strong evidence for a changing political economy of sex relevant to the way we conceive of the social dynamics linking sex to HIV transmission. It is clear that most African women today are no longer waiting in rural areas to be infected by their migrant partners, the pattern of infection described convincingly in the 1940s for syphilis and often evoked uncritically in the contemporary period (for the classic enunciation of this view see Kark, 1949). If President Mbeki’s questioning of sex as a mechanism for the transmission of the disease has to be seen in part as a reaction to longstanding racialized representations of Africans as inherently diseased and promiscuous, it has not yet been challenged by scholarship that adequately explores the social context of sex in post-apartheid South Africa (on state ‘denialism’ and the way this has hindered post-apartheid AIDS interventions see Robins, 2004). This article argues that recognizing the shifting intersections and spatiality of race, class, gender and sexuality might go some way towards reconfiguring debates on AIDS in South Africa around a more politically enabling agenda—one that conceives of AIDS as a symptom of ‘structural violence’ but does not foreclose sex as a mechanism for the transfer of HIV (for a broader overview of structural violence and health in sub-Saharan Africa see Schoepf, Schoepf, & Millen, 2000).

Over the last several decades, social scientists, especially within anthropology, have given increased attention to the connection between political economy, the body, and health (for instance Bourgois, 2003; Scheper-Hughes, 1992; for a review of new approaches to the body see Lock, 1993). One branch of this work examines the changing social roots of sexually transmitted infections. Recent ethnographies from the ‘Third World’, for instance, demonstrate how global trade and the informalization of work can propel women into the sexual economy, a scenario ultimately driven in some instances by World Bank/IMF sponsored structural adjustment programmes (Brennan, 2004; Kempadoo & Doezema, 1998; Schoepf et al., 2000). Ethnographic research in South Africa also shows how unemployment, poverty and sex/money exchanges can fuel multiple-sexual-partners, sometimes across large age gaps (Hunter, 2002; LeClerc-Madala, 2003; Selikow, Zulu, & Cedras, 2002; for a review of the broader sub-Saharan literature see Luke, 2003). Moreover, quantitative data seem to support ethnographic evidence of younger women having sexual relationships with older, often richer, men: one recent study in South Africa found that nearly four times as many women as men aged 20–24 were HIV positive (23.9% compared to 6%), and that a significant number of young women had older partners (HSRC, 2005).8


7Indeed, in addition to the movement of women, to which I point, studies show that in many cases rural-based women infect their husbands, and not the other way around. One study of discordant couples (where only one partner is infected) in rural KwaZulu-Natal showed that in four out of 10 cases it was actually women and not their partners who were HIV positive (Lurie et al., 2000).

8Some caution should be exercised, however, in interpreting age/prevalence figures in this way since it is likely that biological factors may play a significant part in the susceptibility of young women to HIV infection (see Glynn et al., 2001). On links between ‘transactional sex’ and AIDS see Dunkle, Jewkes, Brown, Gray, McIntyre et al. (2004). For the argument that the same number of overall partners within concurrent rather than serial relationships leads to a considerably more rapid advance of STIs see Morris and Kretzschmar (1997) and Halperin and Epstein (2004). More generally, I am well aware
What are the historical origins of the ‘sexual economy’? Especially over the last century, colonialism and apartheid molded the contours of sexual relations in South Africa in distinctive ways. Migrant labor, an institution entrenched in the 19th century following the discovery of gold and diamonds, restricted Africans from settling in urban areas and forced men into long absences from their rural homes. Men’s relationships with urban ‘prostitutes’ helped to fuel the syphilis epidemic that peaked in the first half of the century (Kark, 1949). During the course of the 20th century, however, several major shifts took place that reworked connections between wage labor, the rural household, and the sexual economy (I look elsewhere at urban areas, see Hunter, 2005a). First, land dispossession meant that the countryside shifted from a position where it subsidized low urban wages to a scenario where it depended on migrant men’s remittances (Wolpe, 1972). But a second change was the dramatic rise in unemployment from the mid-1970s that undermined the ability of men to act as reliable providers. One noted consequence for the sexual economy was the redistribution of the wages of male migrants still in employment (now an elite) through liaisons with rural-based women (Spiegel, 1981). But it is to the greater movement of women, especially to informal settlements, that I give attention; in these spaces some women find access to employment, and yet the sexual economy can play an important role in everyday subsistence. Instead of a geography characterized by circular male migration and the building of a rural home, therefore, I give consideration to how many rural born women today are engaged in circular movements to informal settlements, spaces dominated by densely packed imijondolos.

Informal settlements have long been part of South Africa’s divided landscape but they are given attention here because of the way they provide a window into important recent economic and demographic changes. These areas have very high HIV prevalence rates (the proportion of people who are HIV positive) and, furthermore, new data on HIV incidence (the rate of new infections) finds that a disproportionate amount of HIV infection takes place within these spaces (HSRC, 2005). Researchers estimate annual incidence rates in urban informal areas of 7% as compared to 1.8% in urban formal areas, 2.7% in rural formal areas, and 2.7% in rural informal areas. This recent study, in addition to an earlier one from the same institution (HSRC, 2002), also found that urban informal areas contained the highest reported rates of multiple-partnered-relationships. Of course, even if these figures are accurate (and we must maintain some scepticism) sex can only partly explain such large geographical variations in HIV prevalence; higher infection rates in informal settlements compared to richer areas are in part a consequence of inadequate water, nutrition, and sanitation and the general poor state of health in the former. Yet by developing a better understanding of the changing political economy of sex scholars and policy makers can untangle important new connections between poverty, gender, migration, and AIDS.

Beyond the male migrant: towards a new political economy of sex

The archetypal infection route for syphilis in the 1940s, outlined famously by Sydney Kark (1949), involved a male miner becoming infected by an urban prostitute and then passing on the disease to his rural wife. I relay below very briefly the case of Fikile (a pseudonym) that captures a quite different political economy of sex outlined in this paper. Fikile was 26 years old when she was interviewed in 2003. She grew up in Northern KwaZulu–Natal and mothered two children from two different men. At the time of the interview, one of these children had died while the other stayed with her grandmother in Fikile’s rural home. Throughout the 20th century a growing number of women gave birth out of wedlock. But Fikile, like most young women today, had a very low prospect of marrying the biological

(footnote continued)
of arguments that sex has either been always easily tradable in Africa or thrown into exchange relations as a consequence of the forces of modernity. I believe, however, that sex has become material in distinctive new ways over roughly the last three decades. See Hunter (2005a) for a further discussion. For an excellent review of the often inappropriate use of ‘prostitution’ in Africa see Standing (1992).

9Although the accuracy of the test used to measure HIV incidence has been recently disputed. See <http://www.unAIDS.org/en/HIV_data/Epidemiology/default.asp> accessed 20 March 2006. Thanks to Hein Marais for this reference.

10Suggestive of the greater risk attached to women’s migrancy, one of the few studies on women migrants to urban areas found a positive correlation between migrancy and HIV status (Zuma, Gouws, Williams, & Lurie, 2003).
father of a child. Fikile had not therefore moved into a husband’s umuzi (homestead) as most women of her parents’ generation would have done. Instead, like many rural women, Fikile migrated to an informal settlement, in her case to Isithebe in KwaZulu–Natal. When interviewed, she said that she had two boyfriends who both gave her money and were working. Her main boyfriend supported her with food and money, some of which she sent home. She was thus reversing the longstanding pattern of men acting as ‘providers’ for rural households. The other, an umakhwapeni (secret lover, literally ‘under the armpit’), gave her 50 or 100 Rands irregularly (US$8–$16). Her main boyfriend did not want to use condoms, and she says that she trusted him but she uses condoms with the other. Typical of the way that sexual relationships can be stretched from rural to urban areas by women’s as well as men’s movement, Fikile said that she also slept with a boyfriend from home and did not use condoms in part because he claimed to be her ‘indoda yami ngempela ngempela’ (my man, for real, for real) although he was not working and could not support her. She did washing and ironing 1 day a week, earning R50. Under apartheid, many women moved to towns and survived through the informal sector and sometimes the sexual economy; but today what Fikile’s case illustrates is the sheer scale of women’s movement, the absence of marriage as a rural alternative, and the very poor opportunities for income generation in the informal sector.

Table 1 draws out distinctions between social dynamics that can fuel AIDS and those that fuelled STIs in the 1940s/1950s.

The following section tentatively sketches out the contemporary political economy of sex, giving attention to significant changes that occurred since roughly the 1970s. Despite the election of the first non-racial government in 1994, the adoption of neo-liberal economic policies that favor market forces over state interventions has accentuated, and not diminished, the thrust of these trends. Three dimensions of the contemporary political economy of sex are important to understand: (1) rising unemployment and the marginalization of women; (2) rapidly declining marital rates; (3) the growth in women’s movement, often in circular migration patterns that pivot around a rural ‘home’.

Unemployment, new social inequalities and the marginalization of poor women

Under apartheid, work for African men and women was typically dangerous, humiliating, and insecure; what’s more, oppressive state policies such as ‘forced removals’ and the hated pass laws made even the most basic decisions, such as where to live, highly charged. Nevertheless, because of high economic growth in the apartheid era (with steady growth after 1948 and accelerated growth in the 1960s) the labor of young African men and, to a lesser extent women, was in heavy demand. All of this changed decisively from the mid-1970s as...
economic and political crisis shook the country. From this time, positive per capita growth drifted into negative growth and unemployment increased rapidly. The first casualties of economic crisis were African men; a new class of men who had never been formally employed quickly came into existence. But not all men lost out. Migrant men who were lucky enough to hold secure work after the 1970s benefited from unionization and the stabilization of mining employment and returned to rural areas to become a rural elite (Sharp, 1994; Spiegel, 1981). Nearly two decades ago, Andersson & Marks (1988) pointed to the implications of rising social inequalities for health.

Many argue that market-led economic policy in the post-apartheid period has accentuated social inequalities. A recent UNDP (2003) study concluded that ‘Income distribution remains highly unequal and has deteriorated in recent years’.11 Seemingly shell-shocked by the perceived power of ‘globalisation’, the government retreated from an interventionist economic and social strategy to one that stressed growth through the market. Rapid trade liberalization, one element of this broadly neoliberal program, dramatically increased wage competition and placed sectors such as clothing under great pressure, helping to nudge unemployment up to over 40% (Kenny & Webster, 1998; Nattrass, 2003). In the 1980s, women were drawn into factory work in increasing numbers, but by the 1990s they were joining men in the ranks of the unemployed. Between 1995 and 1999, the number of economically active women (searching for or securing informal or formal work within the labor market) increased by two million, twice the increase in the female population of working age (Casale & Posel, 2002). As rural areas continued their decline, therefore, women were pushed into poorly remunerated and highly unstable informal work; consequently, women’s median income fell sharply in the post-apartheid period (Casale, 2004). Added to these labor market changes was the AIDS pandemic itself, which accentuated social inequalities, including gendered inequalities (Marais, 2003). These forces drove a wedge between rich and poor and have not been adequately countered by state interventions. It is true that the state has substantially increased the value of the old age pension and introduced a child support grant aimed at assisting children up to the age of 14.12 As we shall see, some houses have been built and, importantly, a large number have been allocated to single women (this group is able to benefit from rules stating that household heads who are single must have dependents). But seen against the collapse of formal employment in the last three decades these interventions are inadequate.

An unprecedented decline in marriage

African marriage has tended to be painted with broad brush strokes. Going back to the 1930s a number of ethnographic studies noted the negative effects of ‘cultural contact’ on the African family (e.g. Hellman, 1948; Krige, 1936; Longmore, 1959). Rich in their detail, and undoubtedly capturing a sense of change, they fed perceptions that African families were in slow but steady decline. Yet more recently, scholars have questioned teleological narratives of ‘family breakdown’ in Africa (Moore & Vaughan, 1994; Thomas, 2003); certainly, in many respects, apartheid was a system that contained forces that both undermined and strengthened the patriarchal home (Hunter, 2005a). Studies in urban and rural areas attest to the continued centrality of the institution of marriage as late as the early 1980s (De Haas, 1984; Mayer, 1980). A recognition that there was no straightforward causal link between apartheid and family breakdown focuses our attention instead on the seismic changes heralded by the deterioration of formal employment. What is significant about the present generation of young South Africans is that they are experiencing a simultaneous collapse of agrarian and wage livelihoods with very important consequences for marriage, household formation and sexuality.

Ethnographic studies today reveal extremely low marital rates among Africans, especially from the 1980s.13 Statistics on African marriage are more

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12Pensions were raised in February 2006 to R820 a month (dollar;130). Their importance to rural homes, even at much lower rate, was noted by Ardington and Lund (1995). Child support grant is currently R 190 (dollar;30) a month. Both are vital to survival in rural areas, especially for women and, indeed, for the continued support of the African National Congress (ANC) among the poor.

13See Denis and Ntsimane (2004) and Hunter (2005a).
difficult to interpret: African marriage is a process and not an event, different systems of civil and customary marriage co-existed (with different regional administrations), and apartheid statistics are notoriously unreliable. Nevertheless, census data support the claim that there has been a quite dramatic decline over the last four decades. The factors behind this decline are complex; they include (until recently) women’s increased work prospects and thus their growing economic independence from men. But particularly from the mid-1970s, when unemployment rose sharply, men’s inability to secure ilobolo (bridewealth) or act as dependable ‘providers’ became additional brakes on marriage.

Among the poor, wedlock is being exposed as a decidedly inflexible institution through which to organize social alliances and the flow of resources (cf. Niehaus, 1994). Marriage today is, in many respects, a middle-class institution (Fig. 1).

Women’s increased movement: from migrating men to moving women?

Male migrant labor is so dominant an institution in South Africa that it overwhelms almost all discussions on migration. Yet for over a century Southern African women have moved to towns, informal settlements, and white owned farms (Bonner, 1990; Walker, 1990). The ending of influx controls (that sought to restrict Africans from entering towns) in 1986 has typically been noted as the main driving force behind women’s recent movement. But I want to suggest that this interacts with a relatively new set of dynamics: the reorganization of rural households into more geographically flexible institutions with an expectation that women

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14The simplest way to track changes to marriage would be to scrutinise marital rates. But such figures were collected only for Whites, Indians and Coloured groups, leaving marital status, available from population census data, as the most reliable proxy when considering African marriage. For a discussion of South African data regarding marriage see Budlender, Chobokoane, and Simelane (2004). The above figures include civil and customary marriages.

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Fig. 1. Marital status for Africans over 15 years of age, 1936–2001. Source: various census statistics. For more details see Hunter (2005a).
as well as men will migrate in circular patterns to urban/informal areas. The extent of these new patterns of movement has not been captured by national statistics (although represented for some time in micro-level accounts by anthropologists (James, 1999; Spiegel, 1995)) in part because of a male bias in migration data, outlined below.

The most common source of data on women’s migration comes from census or household surveys. Together these studies show a rise in women’s migration from the seventies but indicate that men still migrate more than women (see Kok, O’Donovan, Bouare, & Van Zyl, 2003; Posel & Casale, 2003). The limitation of this data is that it defines migration as either ‘absence’ from a home or a long distance/long term change in residence. In contrast, data collected by the Africa Centre for Population and Health Studies in rural KwaZulu-Natal appears to show that rural women move more than men.15 The Africa Centre visits each household in a geographical area that it calls the Demographic Surveillance Areas (DSA) every 4 months and counts migration as a change of residence for longer than 3 months. Within the DSA’s roughly 90,000 population, the Africa Centre is therefore able to capture shorter-term ‘movement’ to and from a place, a pattern more followed by women, especially those who leave children in rural areas. Initial data shows that, at the peak age—when men and women are in their early 20s—slightly more women than men change residency or ‘move’. We can see immediately that the emphasis on ‘movement’ rather than ‘migration’ forces us to challenge quite radically the way that we think about the gendered nature of migration/movement. Longstanding methods of measuring migration therefore tend to capture very well the movement of men for most of a year into an urban area; they describe less well, however, women’s more frequent movements backwards and forwards from rural areas.

Informal settlements, the informal economy, and the sexual economy

There are many types of informal settlements in contemporary South Africa, from squatter camps resulting mainly from population movement within urban areas to settlements resulting largely from population migration from rural areas. The most common housing type in informal settlements, however, is *imijondolo*, one roomed accommodation sometimes translated into English as ‘shacks.’ These structures are also widespread in formal townships, where they are sometimes called ‘backyard shacks.’ Informal settlements have a long history in South Africa. Rooted in the uneven provision of formal housing for Africans under colonialism and apartheid, they mushroomed around urban areas from the mid-1980s following the relaxation of influx controls and rising unemployment (on the variety in informal settlements across national and local geographies see Harrison, 1992, and Crankshaw, 1993). Since the early 20th century informal settlements have been known as spaces of poverty and sex exchanges but also as places that allowed women a certain independence (for instance Bonner, 1990). The most lucrative informal activity associated with women is probably the brewing of traditional beer. But today the mass production of beer and other consumer items undermines many informal opportunities; what’s more the sheer number of women eking out a living in the informal sector drives down earnings opportunities (see Rogerson, 1997).

The provision of housing, perhaps more than any other policy, was heralded by the newly elected ANC in 1994 as having the ability to jump start radical economic and social redistribution. Some scholars blame shortcomings in housing policy on the weakness of the chosen mechanism for delivery, namely a market-driven one-off capital subsidy system (see Huchzermeyer, 2004). But others have argued that the ANC’s failure to meet its housing targets was partly due to significant increases in the overall number of households—the government was thus dealing with a moving target (Hempson & O’Donovan, 2005). Evidence of the proliferation of smaller, single, households is strong: from 1995 to 2002 average household size was reduced from 4.3 to 3.8, driven by a rising share of single households from 12.6% to 21% of all households (Pirouz, 2004). From 1996 to 2003 the number of informal dwellings rose by 688,000 in South Africa, despite the existence of house building projects funded by the state (Mail Guardian, 2005). Informal settlements today therefore are not only testimony to high unemployment rates and an inadequate government housing strategy but to significant

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15This section draws from my interaction with Africa Centre linked scholars, particularly Carol Camlin, Caterina Hill, Kobus Herbst, Vicky Hosegood, & Thembeka Mngomezulu. For further details see Africa Centre Population Studies Group (2003) and Hosegood and Timaeus (2005).
demographic trends, namely the rise of smaller households not formed around a marital bond.

The author’s ethnographic research was mostly conducted at or nearby to Isithebe Informal Settlement on the North Coast of the province of KwaZulu-Natal. At the beginning of the 20th century, the area was designated as ‘tribal’ land where only Africans could reside. In 1971, the apartheid state established Isithebe Industrial Park in the area as part of its strategy to reduce migration to large urban ‘white’ towns. It was on tribal land surrounding Isithebe’s factories that Isithebe informal settlement grew (this is where the author stayed). In the 1990s, many scholars felt that the collapse of apartheid would herald a return to ‘normal’ migration patterns—settlement patterns would be concentrated around (rising) employment opportunities and migrants would not be forced to maintain such strong links with rural areas. But in the 1990s Isithebe informal settlement, like many others, continued to mushroom despite a decline in employment, in the Isithebe from around 23 000 in 1990 to roughly 15 000 by the end of the decade. What’s more movement rates continued to be high, with migrants generally keeping a foothold in rural KwaZulu-Natal. Put simply many people who migrated to Isithebe in the 1990s did not find work and did not consider themselves permanent residents (see Hunter, 2005a). Women in Isithebe depend on a myriad of informal sector activities, from selling dagga (marijuana) to petty trading. But the sexual economy is also an increasingly important mechanism for the redistribution of formal and informal earnings and the provision of shelter for migrant women.

Fikile’s case shows quite clearly a set of dynamics that can fuel AIDS. Yet ethnographic data from Isithebe Informal Settlement suggests that informal settlements are not places of inherent HIV risk. Women with reasonably well-paid work can sometimes secure housing independent of men and enter relationships on their own terms. New female migrants can look up to them as role models, seeing independent women as successfully challenging patriarchal models of marriage. Moreover, not all men are able to take part in the sexual economy. Many men are desperately poor and complain bitterly about richer men who are able to secure multiple girlfriends; in Isithebe, men with disposable income are typically those who still work in unionized factories or have invested redundancy payments in lucrative ‘male’ informal activities such as running taxis. It is important, however, to distinguish the sex/money exchanges described here from ‘prostitution’—an activity that most residents say is rare in Isithebe. These sexual networks serve to widen women’s ability to make claims on resources and are not simply instrumental exchanges of sex for money: some partners can co-habit, gifts are often enacted in terms of men’s ‘provider’ role, claims can be made through evoking ‘love’, and participants frequently discuss sexual pleasure and physical attraction. It is common to hear stories of women having material relationships—one for money, one for food, and one for clothes—but also common to hear about love letters and signs of affection. A final important point to recognize is that these sexual networks operate alongside—and not in opposition to—social networks based on kinship, friendship groups, churches, and neighbors.

In many cases therefore, sex exchanges do not cause family breakdown, a fact that questions the very long association between ‘prostitution’ and ‘social degeneration’. On the contrary, remittances from sexual networks can help to foster kinship ties. There is an expectation that women will furnish money to a rural home, especially if a woman’s child is looked after by other family members. Earlier scholarship showed how men’s urban wages were distributed through sexual networks in rural Lesotho (Spiegel, 1981) and how rigid conjugal bonds in South Africa were being superseded by more flexible sibling bonds characterized by reciprocity (Niehaus, 1994). What is different today is the ways in which women’s migration further reflects and affects this changing household structure. In a situation where marital bonds are no longer common, rural women tend to pivot multiple movements around their rural home (sometimes where a child is left), a fairly flexible arrangement allowing for women’s frequent movement, the

16I draw inspiration from economic anthropologists’ work on ‘the Gift’ that stems from Marcel Mauss’s (1925 [1989]) famous ethnography of Melanesia of the same title. For an excellent discussion of gift exchanges and intimacy in Brazil see Rebhun (1999). The nature of these relationships is important: while policy makers tend to see low condom use in narrow terms of ‘male power’, it is often in affairs between ‘boyfriends’ and ‘girlfriends’—positioned as being about love—where men and women are least likely to use condoms and in the most commodified relationships, prostitution, where condoms are used the most (for example Smith, 2004).

17One study found that 60% of temporary migrants had communicated with the rural home in the 2 weeks prior to one study (Collinson, Tollman, Kahn, & Clark, 2003).
transfer of resources through sexual liaisons, and the redistribution of state benefits, especially pensions, often through the presence of a rural grandparent, usually a gogo (granny). As unemployment bites deeper into society, sexual exchanges and the household have been interwoven in new ways. Indeed, without sexual exchanges, many of the women-headed imijondolo households would simply not exist.

Conclusions

In the last decade political economists have rightly stressed the deep social roots of AIDS. Yet in the main, old models, typically male-migration, have been projected forwarded to explain the scale of the pandemic and shed light on contemporary sexual practices. Stillwaggon’s (2006) powerful argument that the social context of AIDS must extend beyond sex is undoubtedly true. But so too must scholars re-assess what is meant by the social context of sex. To illustrate important trends, the article has given attention to women’s movement, especially into informal settlements, and to the role of sex-money exchanges in fuelling AIDS; these are meant to stimulate discussion and not be taken as all-encompassing alternative explanations. What the paper does insist, however, is that the roots of AIDS can no longer be simply conflated with apartheid. This oversimplistic view sits rather neatly with many in government and policy circles and is rarely challenged by epidemiological research that gives priority to statistical analysis over historical and ethnographic perspectives.

In a democratic South Africa social equity is important not only to create a more just society but to stem a shattering health crisis. The remarkable success of the Treatment Action Campaign in forcing the state to introduce antiretrovirals has not been matched by a campaign that links housing, employment, and social equality to AIDS—one that considers the pandemic as a symptom of ‘structural violence’ with longstanding but also contemporary roots. Of course, the links between economic policy and AIDS are complex. The article has touched on how employment, housing and state benefits can help to lift women out of the sexual economy. But these connections and others must be more fully teased out and emphasized if prevention campaigns are to resonate with the social conditions in which many South Africans live. So too must scholars more vigorously investigate links between poverty, the presence of co-factors, and high HIV rates. Key features of the post-apartheid landscape such as the rise of overcrowded informal settlements must be closely examined for both what they reveal about the geography of co-factors as well as what they say about the political economic context of sexual relations. Although AIDS is sourced in colonialism and apartheid, the scale of the impact of South Africa’s AIDS pandemic was not inevitable; arguably its trajectory has been worsened by continued social and geographical divisions in the post-apartheid period.

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