Balancing men, morals and money: Women's agency between HIV and security in a Malawi village
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Introduction:  
The transactional sex paradigm

Aim and argument

The aim of this book is to test, through a Malawian case study, the hypothesis that improved livelihood security for women will lead them to make safer sexual choices. This hypothesis arises from the widespread assumption, especially prevalent in public health and development literature, that poverty and gender inequality push women to take sexual risks. Perceived as poor and marginalized, African women are often assumed to have few other means to survive than to exchange sexual favours for material support from men. This dependence on male support, the assertion goes, puts women in a disadvantaged position when it comes to negotiating safe sexual practices, while also pushing them to seek multiple sex partners – hence significantly increasing the risk of HIV transmission. To reverse the downward spiral of poverty and AIDS, many reports\(^1\) conclude, it is imperative to economically empower women so as to reduce their need to resort to risky ‘survival sex’. As this line of argument has become so commonplace, and goes uncontested in so much of the literature, I refer to it here as the ‘transactional sex paradigm’.

Based on the insights gained through anthropological research I argue that this transactional sex paradigm, which is increasingly used to explain the continued spread of HIV throughout sub-Saharan Africa and to consequently inform policy, overlooks certain important cultural and socio-economic aspects of women’s sexual choices. While confirming the widespread assumption that the need for support plays a role in poor women’s decisions to readily accept sexual proposals from men, my data demonstrate that the interrelations between livelihood insecurity and risky sexual behaviour are more complex and less straightforward than usually presumed.

Rationale

Ever since HIV and AIDS were first discovered in the 1980s, their prevalence has been disproportionally high in sub-Saharan Africa. Although this region is inhabited by only 10 percent of the world population, over two-thirds of all HIV-infected people live here (UNAIDS 2010). Not only the scale of the pandemic in sub-Saharan Africa seems exceptional, so too do the key groups that are affected. On other continents, HIV was (and still is) largely transmitted through unprotected sex between men and the sharing of needles among intravenous drug users – thus mainly affecting particular minority groups of the population. In sub-Saharan Africa, HIV has spread and continues to spread predominantly through unprotected heterosexual intercourse, affecting both men and women in the general population. Furthermore, sub-Saharan Africa is the only continent where more women than men are infected with HIV.

Medical scientists initially sought out biological causes for these striking deviations (Hunt 1996), but have found no conclusive explanation. Social scientists then began their search for distinctive cultural traits that might be held responsible for the apparently divergent pattern of the African pandemic. Caldwell et al. (1989) in particular made a strong case for the uniqueness of “the African system” of marriage and sexuality, which they characterized as geared towards high levels of (lineage) reproduction. This, they argued, resulted in weak conjugal bonds, a general lack of moral boundaries regarding sexual permissiveness, and encouragement of sexual networking, thus greatly facilitating the spread of HIV on the continent. The recognition that sexual behaviour is not merely the result of individual decision making, but is to a large extent conditioned by one’s social environment, has been valuable and lauded (e.g. in Hunt 1996, Parker 2001). However, the Caldwells’ thesis, and consequently anything that reeks of it, has become discredited. The main critiques are directed at its perceived racism, sweeping generalizations, and the erroneous conclusion that a lack of a ‘Eurasian’ morality (emphasizing female chastity and monogamous conjugal bonds) implies that African cultural systems would have no sexual restrictions or guidelines at
This last point is refuted by our own data too, as I describe in Chapter 6. Our data confirm, however, some essential points of the Caldwell's argument, which I will elaborate upon in the Conclusion.

Meanwhile, national and international HIV-prevention strategies have focused particularly on informing the public about the existence of a new fatal virus and about ways to avoid infection. This focus on changing individual behaviour reveals the general perception that protection against HIV was first and foremost people's personal responsibility. The efforts had an impressive impact on the levels of AIDS awareness among all strata of the African population. This, however, did not lead to the expected behaviour change at any significant scale – which added to the puzzlement about the African AIDS pandemic.

Some scholars grew increasingly uncomfortable with the emphasis on individual responsibility for prevention, and on cultural factors as determinants of involvement in high-risk sex and as obstructions to safer sexual conduct. When AIDS epidemics in other ‘underdeveloped’ settings began to evolve towards a socio-epidemiological pattern similar to that of sub-Saharan Africa, which until then had been considered unique, discussions of structural vulnerabilities to HIV infection gained prominence. In these settings, as in sub-Saharan Africa, HIV prevalence rose particularly fast among women, even leading UNAIDS and others to speak of a “feminization of AIDS” (e.g. Akukwe 2005, Corby et al. 2007: 11, CHGA 2004: 11, Kaplan 1995, Rodrigo & Rajapakse 2010: 9). This rise could not sufficiently be explained by the fact that women are biologically more susceptible to HIV infection than men, as this goes for all women worldwide while the pandemic was feminizing only in certain – impoverished – settings. As a result of these dynamics, the combination of poverty and gender inequality entered the stage as the new main culprit of the AIDS pandemic in sub-Saharan Africa.

Medical anthropologist and physician Paul Farmer (1992, 1998, 1999, Farmer et al. 1993) in particular has been credited for drawing attention to the role of social inequalities in facilitating the spread of HIV, based on his observations in Haiti. He

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3 Including poor inner-city neighbourhoods in the United States (e.g. Kaplan 1995, Sobo 1005)
4 Currently, roughly 60 percent of all people living with HIV in sub-Saharan Africa are women. In the Caribbean this is estimated at 45 to 50 percent, in Asia and Latin America 30 to 40 percent, and in Central Asia and Eastern Europe about 30 percent (Rodrigo & Rajapakse 2010: 9).
5 Biologically, women are more susceptible to HIV infection as the female genital tissue is more easily damaged than that of male genitals, semen contains higher concentrates of the virus, and semen comes in larger quantities than vaginal secretions (Farmer et al. 1993: 387). Nicolosi et al. (1994) found that the risk of infection of male-to-female transmission was 2.3 times greater than that of female-to-male transmission.
6 But see also Bassett & Mhloyi (1991), Schoepf (1988, 1991), and Packard & Epstein (1991) for other early accounts of structural vulnerability to HIV.
pointed out the material obstructions to health faced by many marginalized people, and unravelled the historical economic and political processes that helped to shape these. He urged anthropologists to shift their focus from cultural particularities to the “mechanisms by which poverty puts young adults, and especially young women, at risk of HIV infection” (Farmer 1995: 13). Brooke Schoepf (1998: 230), based on research in what was then called Zaire (now Democratic Republic of Congo), formulated the following answer to this call:

Most women, including faithful wives, are unable to negotiate safer sexual practices with partners whom they know or suspect have multiple partners. When men refuse condoms, women without independent incomes cannot refuse risky sex. Powerlessness in the face of a dreaded disease leads many women to deny their risk. In the presence of HIV, what was once a survival strategy for poor women [maintaining sexual relationships with men for support] leads to AIDS and death.

Amidst the continued biomedical focus on personal responsibility, and social scientists’ search for cultural vindications, linking exposure to HIV infection (and other diseases) with low socio-economic status was ground breaking. Many scholars and policy makers adopted these pioneers’ line of argument, and continue to subscribe to it.

The vulnerability (or ‘structural violence’8) perspective seemingly solved the puzzlement about the consistently reported gap between increased HIV awareness and the lack of behaviour change throughout the African continent, and offered a welcome new entry point for addressing this problem. In this view, women do not demand or even suggest safer sexual practices. Indeed, women’s lack of control over their sexual lives, if not their entire lives, is central to most accounts of female vulnerability to the risk of HIV infection. Addressing this powerlessness, then, is held to be the pivotal means to reduce the incidence of HIV transmission and contain the pandemic. As Conroy & Whiteside (2006: 56-7) argued specifically for the case of Malawi:

Gender inequality is arguably the most significant driver of the AIDS pandemic in Malawi. It is inextricably linked to poverty. Women have less access to education, employment and

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8 Farmer et al. (2006: 1686) defines structural violence as: “[O]ne way of describing social arrangements that puts individuals and populations in harm’s way. … The arrangements are structural because they are embedded in the political and economic organization of our social world; they are violent because they cause injury to people. … [N]either culture nor pure individual will is at fault; rather, historically given (and often economically driven) processes and forces conspire to constrain individual agency.”
credit and are extremely vulnerable when their husbands die or if their marriages split up. Until women are given more opportunities to live independently of men (if this is their choice) or the power to negotiate their sexual relationships as equal partners with men, the spread of HIV in Malawi will not be halted.

Similar calls for women’s economic empowerment as key to halting the African AIDS pandemic gained strength throughout the international community.9

The ‘transactional sex paradigm’

Poverty drives the [AIDS] pandemic as poor women and children are forced into transactional sex in order to get money to survive. They are often fully aware of the risks but have no choice. The imperative for short-term survival in a desperately poor environment forces people into behaviours that place them at direct risk of infection (Conroy & Whiteside 2006: 66).

The link between HIV/AIDS and poverty … has a clearly gendered dimension. Many of the poorest in Africa are women who often head the poorest of households. Inevitably such women will often engage in commercial sexual transactions, sometimes as commercial sex workers, but more often on an occasional basis, as survival strategies for themselves and their dependents. The effects of these behaviours on HIV infection in women are only too evident, and in part account for the much higher infection rates in young women who are increasingly unable to sustain themselves by other work in either the formal or informal sectors (Freedman & Poku 2005: 679).

Women, in particular, often find themselves in situations where they are subject to greater HIV susceptibility, as a result of sexual violence, or economic hardship which forces them to trade sex for food (FAO 2003: 2).

Without adequate schooling, with limited skills, deprived of a social network and feeling isolated, adolescents in these situations risk growing into young women with no economic assets. Their bodies become their main asset and their only source of bargaining power or income (Urdang 2007: 7).

If the choice is between HIV/AIDS or starvation, HIV/AIDS or losing the farm, HIV/AIDS or no schooling for your children, many, if not most [poor African women], who no longer have assets to sell, sell sex (Bie 2007: 29).

The combination of poverty and gender inequality has come to be considered by many analysts a main driver of the AIDS pandemic in sub-Saharan Africa.10 As the above assembly of quotes illustrates, advocates of the vulnerability approach often point particularly to poor women’s involvement in sexual exchange relationships to

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typify how the forces of poverty and gender inequality combine to drive the spread of HIV (see also Figure 1.1). As noted, I refer to this widespread explanatory model for Africa’s high – and African women’s disproportionately high – HIV rates as the ‘transactional sex paradigm’. In an earlier publication on this topic (Verheijen 2011), I have called it the ‘transactional sex model’. I believe, however, that the word ‘paradigm’ is better suited than the more neutral term ‘model’ because it conveys the taken-for-granted, matter-of-fact nature of this particular explanatory model.

Figure 1.1: “The HIV/AIDS-food insecurity syndemic” from Himmelgreen et al. 2009: 402. Note that transactional sex is depicted as a significant link in the ‘syndemic’.

The taken-for-granted nature of the concept of ‘transactional sex’ appears not only from the fact that no attempt is made to formulate a universally agreed-upon definition, but, worse, that often no definition is formulated at all. In many reports, both scholarly and policy-oriented, the term (or similar denotations like ‘survival sex’) tends to be mentioned as a matter of fact. Only in some cases can the authors’ interpretations be discerned by reading between the lines. Doing so reveals that these interpretations actually vary widely, ranging from explicit commercial exchange of one specific sex act for an agreed-upon quantified reward (e.g. Robinson & Yeh 2011) to something that may in fact entail nothing more than the cultural custom of young men paying their date’s drink (e.g. Conroy & Whiteside 2006: 60). The concept of ‘transactional sex’ is thus used to cover a

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11 Notable exceptions are De Zalduondo 1991, Luke 2005b, and Nobelius et al. 2010 in which criteria for different types of sexual exchange are theorized upon.
range of sexual-economic exchanges, and many authors seem either unaware of this possible variation, uncertain where on the spectrum to locate what they see, or uncomfortable with calling it prostitution yet unable to conceptualize it otherwise. Most commonly, the terms do not refer to women who self-identify as sex workers, but to ordinary women receiving money, gifts, or favours in return for sexual relations (e.g. GoM 2011a: 181). Generally, such exchanges are straightforwardly interpreted as men’s exploitation of women’s sexuality. The grand scale at which material transactions in sexual relationships are found to occur in sub-Saharan Africa is taken as indication of the profundity of African women’s dependence on men, and the severity of their socio-cultural and consequently economic subordination.

Numerous studies have attempted to find evidence for the commonly assumed link between women’s low socio-economic status, transactional sex, and HIV risk. Notably, the findings of these studies vary widely. Scholars have found that material motivation for involvement in sexual relationships is mentioned by women all over the continent. Receipt of money or gifts within a relationship is furthermore often found to be associated with reduced negotiating power for women regarding the conditions of sex, and so with increased HIV risk.12 But the extent to which women’s involvement in such relationships is driven by social powerlessness and economic destitution is highly disputed. Of the – certainly not comprehensive – list of studies under review here (see Appendix 1 for overview), almost as many found (or assumed to find) a direct correlation between women’s low socio-economic position and their engagement in transactional sex13 as not.14 The methods of inquiry, research setting (specific country; urban or rural), age, and gender of informants vary more-or-less equally between the two groups of studies and can thus not help to explain their contradictory findings. I believe that the divergence indicates more than anything else the difficulties in studying, and, particularly, interpreting the topic of ‘transactional sex’.


Difficulties arise from the intimate and sensitive nature of sex in general, which inhibits participant observation\(^{15}\) while providing motivation and opportunity for misrepresentation by informants in their self-reports. By far most studies on transactional sex in sub-Saharan Africa necessarily base their conclusions on such self-reports, be it through survey questionnaires, focus group discussions, in-depth interviews, life histories, or diaries. As a result, these studies’ findings are likely to represent dominant discourses or socially desirable responses rather than actual practice.\(^{16}\) Moore et al. (2007: 45) furthermore found that respondents’ answers to enquiries about transactional sex are highly sensitive to the exact formulation of the questions posed. One can imagine the miscommunication, and resultant misrepresentation and misinterpretation, when researcher and researched have different understandings of exactly where on the ‘spectrum’ the relationships at stake are positioned, as often seems to be the case (see Luke 2005b, and Tawfik & Watkins 2007 for elaboration).

Another characteristic of the body of literature on transactional sex in sub-Saharan Africa is the bias towards youngsters as the research population.\(^{17}\) This is not surprising, considering the fact that the disparity between numbers of male and female HIV infections has long been most significant among the younger sexually active age groups. In 2008, UNAIDS reported that in sub-Saharan Africa about 75 percent of all HIV infections in the age group 15 to 24 fell among women (UNAIDS 2008c: 1). Two additional factors may help to explain the widespread focus on youth in studies on transactional sex. Firstly, some researchers seem to assume that sexual-economic exchange relations are only engaged in prior to marriage, hence by premarital boys and girls (e.g. Moore et al. 2007: 48). Certain risk factors related to transactional sex – multiple sexual partners and high rates of partner change – also seem to be considered as primarily practiced by women before they properly settle down and marry. Secondly, an explicit or implicit association of transactional sex with the rise of capitalism, consumerism, and thus modernity seems to often underlie the choice of youth as research group, and, related to this, an urban setting as research location. Possibly, older age groups are considered more conservative and less induced to engage in such a presumably modern phenomenon as sexual-economic exchange. This corresponds to a theme that has


been common throughout the history of anthropology, namely the (presumed or anticipated) breakdown of traditional norms due to modern influences, particularly the introduction of money (Moore & Vaughan 1994: 156-62, Parry & Bloch 1989). In this view, sexual-economic exchange is essentially a new phenomenon, triggered by the destruction of age-old societal guidelines and a replacement by novel constructions of identity, desire, and success (e.g. in Adomako Ampofo 1997: 178, Barnett & Whiteside 2006: 91, De la Torre 2009: ix, Luke 2003: 77). Some scholars maintain that this social and economic upheaval has intensified women’s need for support and reduced their access to traditional safety nets such as a stable marriage, thus pushing them into informal prostitution. Many of the urban youth studies (and others) emphasize, however, that luxury commodities rather than basic resources for survival are the substance of exchange, and that women – rather than being victims – are often active agents in pursuit of material gain. Most studies point out that gifting is actually part and parcel of all (premarital) sexual relationships, and not related to a woman’s level of destitution. A number of authors see this as resonant with precapitalist partnering practices and argue that sexual-economic exchange is rather a continuation of age-old customs than (solely) the result of recent disruptions (e.g. Cornwall 2002, Helle-Valle 1999: 379-80, Leclerc-Madlala 2003: 32, Nobelius et al. 2010: 499, Van den Borne 2005a).

Recent quantitative and qualitative studies suggest that condom use among African youth is on the increase and HIV incidence on the decline (Hargreaves et al. 2007, Leclerc-Madlala 2002: 25, Pettifor et al. 2008: 1, UNAIDS 2008c: 3). In Malawi, HIV prevalence among young women aged 20 to 24 has even halved, from 13 percent to six percent between 2004 and 2010 (GoM 2012: 2). Prevalence continues to rise, however, among women aged 30 to 39. With rates already over 20 percent, by far most women living with the virus fall within this age group. Relatively little is known, however, about the sexual (exchange) choices of this group of prime-age women – presumably because many researchers consider them ‘off the hook’ once ‘properly’ married. The high level of HIV among these women tends to be explained as resulting from promiscuous husbands who transmit the virus to them. The transactional sex paradigm comes in to clarify why these women passively accept the risk posed by their husband despite their awareness of HIV and AIDS: they need his support for the survival of themselves and their children. No further inquiry seems needed.

Despite the substantial call for female economic empowerment in order to halt the AIDS pandemic, very few efforts have actually been made to realize this (Kim et al. 2008: 66, Piot et al. 2008: 845). The few that have entail microcredit schemes directed at vulnerable women (e.g. SHAZ in Zimbabwe, IMAGE in South Africa, TRY in Kenya; see Ashburn & Warner 2010, Kim et al. 2008, Lukas 2008, Wojcicki 2005, and Urdang 2007 for reviews), cash transfer programs (e.g. RESPECT in Tanzania, Zomba Cash Transfer Program in Malawi, and the Malawi
Incentives Project), and food aid targeted at “at-risk women and girls to help avoid survival sex” (C-SAFE). Some of these projects have managed to reduce poverty levels, food insecurity, and gender-based violence; improve women’s vocational capacities and overall nutritional levels; and increase school attendance and (self-reported) safer sexual behaviours. Notably, however, none of these projects seems to have led to actual, statistically significant reductions in HIV incidence among the women involved (Kohler & Thornton 2011: 12, Pronyk et al. 2006, Rodrigo & Rajapakse 2010: 9, Wojcicki 2005: 4, Lukas 2008: 7), although two of the cash transfer programs had at least a partial impact on reducing teenage pregnancies among school dropouts (Baird et al. 2010) and STIs (De Walque et al. 2012).

The field study

In this book I critically assess the transactional sex paradigm. Instead of merely trying to establish whether or not poverty promotes sexual risk taking, I turn the question around and assess whether the oft-made policy recommendation that economic empowerment will lead women to make safer sexual choices is justified. This reversal allows for a broader understanding of the multiple co-factors that encourage high-risk sex and inhibit behaviour change.

I build my argument on ethnographic data that I collected with the invaluable help of my research assistant Gertrude Finyiza, during a nearly one-year field study, lasting from August 2008 to July 2009. Obviously the study of one particular locality, as thorough as it may be, cannot be the basis on which to refute or confirm a global paradigm. Moreover, the specific site in which this study was conducted has some extraordinary features which make it unsuitable to even pretend to be representative, as we shall see further on. Instead of vainly attempting to find a research site that could, with some goodwill, be considered an ‘average’ village, be it Malawian or even African, I selected a site that is extreme in various ways, so hoping to amplify the dynamics under study. By assessing these amplified dynamics with an in-depth, up-close-and-personal focus, this study is intended to function as a magnifying glass. The details that are so revealed help to nuance and enrich our understanding of what at first sight tends to be called ‘transactional sex’.

Malawi is one of the least developed countries worldwide. Of all 187 countries on the Human Development Index, only 16 are calculated to be less developed than Malawi, and of these many are, unlike Malawi, involved in or recovering from conflict. Two-thirds of all Malawian households cannot produce nor purchase the minimum level of 2200 kilocalories per person per day (Sahley et al. 2005). Almost half of all children under age five in Malawi are stunted and 20 percent are severely stunted (GoM 2010a: 130), statistics which are considered clear indications of chronic malnutrition (Devereux et al. 2006b). Within Malawi, poverty and malnutrition are most severe in the rural areas (GoM 2010a: 22, 130, 148) and in the Southern Region (GoM/WB 2006: 4).
Ever since HIV prevalence became monitored, Malawi has been among the top ten countries with the highest infection rates. It is currently estimated that 11 per cent of the population between the ages 15 and 49 lives with the virus. As is the case throughout sub-Saharan Africa, infection rates are higher among women (13%) than among men (8%) (GoM 2012: 12). As in most of the world, prevalence is currently higher in the urban areas (17%) than in the rural areas (9%), but is increasing in rural areas while diminishing in urban areas (UNAIDS 2010: 18). HIV rates have always been substantially higher in the Southern Region (15%) than in the Central (8%) and Northern (7%) Regions (GoM 2012: 13). Although national HIV prevalence has slowly declined,18 HIV incidence19 remains highest in the Southern Region (ibid: 19).

Because, as noted, both poverty and HIV prevalence are extraordinarily high in Malawi, peaking in the Southern Region and on the rise in the rural areas, I estimated that a possible link between the two may be most pronounced and best discernible here. A village community in one of Malawi’s southern districts was therefore selected as research site for this study. To protect the privacy of my informants I do not disclose the village’s real name, but call it ‘Mudzi’. All adult Mudzi women were included in the research, but we focused particularly on those of prime-age: women who had a household to run and children to care for – hence those supposedly most in need of support.

Matrilineality

Intriguingly, most village communities in Malawi’s south are matrilineally and matrilocally20 organized. Descent and inheritance are traced through the female

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18 Estimates of HIV prevalence in Malawi peaked in 1999, when it was calculated to be 16.4 percent, after which it began to decline (GoM 2010b: 2). The downward adjustment of the prevalence estimates may, however, at least partly be attributable to more accurate calculation methods rather than an actual reduction of HIV transmission (UNAIDS 2006: 10).

19 While ‘HIV prevalence’ refers to the total number of people living with the virus, ‘HIV incidence’ refers to the number of new infections that occur within a certain period, in this case the year 2010. Incidence is generally considered a better epidemiological indicator, because prevalence also depends on mortality rates. Especially when effective treatment becomes available and accessible, as it has in Malawi, prevalence statistics may distort a good impression of the evolution of a local epidemic. Even if no new infections occur, the total number of people living with HIV will increase simply because the medication prolongs the lives of those who would otherwise have died. Incidence is, however, more difficult to measure, and often we need to depend on prevalence rates as an indicator.

20 Matrilocality refers to the marital residence pattern in which a man moves in with his wife’s family. In the literature on southern Malawi, usually this term is used, although some speak of ‘uxorilocality’. Uxorilocality refers to the cultural rule that a man after marriage moves to his wife’s residence. Both terms have some truth in them: in the matrilineally organized communities of southern Malawi, men live in their wife’s house, which is commonly next to the houses of her matrikin (mother, grandmother, sisters). In this study I will predominantly use the term ‘matrilocality’ to emphasize that women generally continue to live amongst their close relatives.
bloodline. It is the women who hold the rights\textsuperscript{21} to land and who remain resident near their (maternal) kin. Upon marriage a woman is joined by her husband, who is supposed to help cultivate her field and build a house that is hers to keep in case of divorce. Various studies found that, as a result, these women’s livelihoods are relatively secure compared to that of other rural Malawian women (Chimbuto 2011: 39-40, Davison 1997: 121, Mwambene 2005, Peters et al. 2007, Rensen 2007, Shah et al. 2002).

In other words, the very site that was selected because of its extremely high levels of both food insecurity and HIV prevalence – which, following the transactional sex paradigm, would suggest a low socio-economic status of women vis-à-vis men – seems a quite favourable one for women. Whereas women’s increased vulnerability to HIV has been associated with the “lack of ownership over land and other important resources, leading them to have scarce opportunities for an independent life” (Haram 1995: 34), this does not apply to my research population. Moreover, statistics on HIV prevalence among the different ethnic groups in Malawi reveal that the highest rates are found among matrilineal groups\textsuperscript{22} while the lowest rates are among patrilineal groups\textsuperscript{23} (GoM 2011: 198). Hence, when comparing women who hold the right over land and ownership of their house with women who do not, it is the former who are most likely to be or become infected with HIV. This seems to contradict the general assumption that it is disempowerment and destitution that put women at increased risk of HIV infection, thus testing the widespread belief that economic empowerment for women will reduce HIV transmission. Although the correlation between matrilineality and higher HIV risk need not be a causal relationship, matrilineal women’s comparatively good socio-economic position makes them interesting to study, as an analysis of their sexual choices may shed light on the hypothetical impact that female economic empowerment might have on HIV transmission.

Christine Saidi (2010) has recently argued, as George Murdock (1959) did earlier, that originally all Bantu people were organized matrilineally. Many of these groups have over time developed into patrilineal societies, as further described in Chapter 2. Nonetheless, a so-called ‘matrilineal Bantu belt’ continues to run from Namibia, Angola, and Congo, through Zambia, Tanzania, and Malawi to Mozambique. Within Malawi approximately 57 percent of the population adheres predominantly to matrilineal organizing principles (MHRC 2005: 31).

\textsuperscript{21} This right is formally called ‘usufruct’ and refers to a right to decide about the use of a specific plot of land. Actual ownership of all land is perceived to be in the hands of a community’s paramount leader: historically the chief, later the national president. Nonetheless, these days at least, the usufruct right to land can be (informally) sold or rented out.

\textsuperscript{22} Lomwe at 17 percent, followed by the Nyanja and Mang’anja at 15 percent, and the Yao at 13 percent (GoM 2011: 198).

\textsuperscript{23} According to the 2010 national population census Chewa, Ndali, Nkhonde, and Tumbuka have the lowest prevalence compared with other ethnic groups, at 7 percent each (GoM 2011: 198).
Early anthropologists emphasized that women’s power and autonomy within a matrilineal system should not be overestimated. Instead of obeying their father and, later in life, their husband, these anthropologists claimed, women were expected to obey their mother’s brother and later their own brother(s) (Lawson 1949: 181, Mitchell 1962: 33, Richards 1950). The notion that men hold power over their sisters’ children rather than their own puzzled the famous anthropologist Audrey Richards and her followers (e.g. Douglas 1969, Lévi-Strauss 1949, Schneider & Gough 1961), who foresaw a “conflict between the legal duty to the maternal nephew, and a man’s natural desire to benefit his own sons” (in Peters 1997a: 128). Furthermore, men’s authority over their sisters and sisters’ children seemed difficult to reconcile with their residence in their wife’s village, which completed the so-called ‘matrilineal puzzle’. However, according to several authors, this puzzle is at least in the case of Malawi largely based on patriarchal misconceptions of matriliney (Mandala 1984, Morris 1998: 23, Peters 1997a). Regarding male dominance and female subordination as naturally given, early ethnographers tended to observe their study populations through a strongly male-focused lens. Their misperception may not only be attributable to these patriarchal presumptions, but also to the local men who were consulted, some of whom seem to have invented certain ‘age-old customs’ which served their personal ambitions rather than represented usual practice24 (Chanock 1985 in Kaler 2001: 545, Rogers 1980: 125-8, Moore & Vaughan 1994 in Saidi 2010: 17).

Since the 1970s, studies became more gender sensitive due to feminist influences, and indeed contradicted the earlier studies of matriliney. They showed that matrilineal women held considerable power, and that the matrilineal kinship system did not collapse under pressure as previously predicted (Brantley 1997, Davison 1997, Mandala 1984, Moore & Vaughan 1987, Phiri 1983, Peters 1997a, 1997b, Saidi 2010, Vaughan 1987). Although these studies do not deny that certain principles, norms, and practices of matriliny have been and still are changing in various ways among different groups, they indicate that overall matriliney has remained remarkably resilient to external patriarchal influences. The classic misconception of matrilineal societies as essentially patriarchal continues to prevail among some contemporary scholars of Malawi, however, leading to incorrect assumptions that land and power positions are inherited by men from their male matrikin (e.g.

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24 For example, in a colonial attempt to document the inheritance law of the matrilineal Yao of southern Malawi, Ibik (1970) recorded that: “If, as is usual, land is allocated to a man in his wife’s village, all rights in respect of such land are exercisable only with the consent of the wife’s kholo [the oldest living ancestress of matrilineal relatives]" (Ibik 1970: 18, italics added). Although Ibik correctly noted the final authority of the wife’s matrikin over land, he seems ignorant of the fact that, as a rule, land among the Yao is inherited from mother to daughter.

Despite persistent erroneous presumptions by some, the ‘matrilineal puzzle’ has proven largely groundless as it was based on a misunderstanding of inheritance rules, an overestimation of male authority, and an ethnocentric interpretation of the sentiments felt for different categories of kin. From my data, however, something else emerges that does seem puzzling: the insistence of Mudzi women on their need for male support to survive – even though, as women, they have entitlement to land and thus primary access to food. In principle, men can only obtain a roof to sleep under and a field to eat from through marriage, which would theoretically put them at a disadvantaged position. Many of my informants explicitly subscribed to the transactional sex paradigm, emphasizing their dependence on men and the fact that poverty pushed them into sexual relationships in order to access support – despite cultural constructions suggesting otherwise. A quick-fix study based on these women’s self-reports, then, would confirm their general depiction as marginalized and in need of empowerment – which is, however, a far from complete representation of their daily life realities. Throughout this book I assess and combine bits and pieces of our field findings so as to eventually ‘solve’ this new ‘matrilineal puzzle’.

Research question and operationalization
Underlying most studies of transactional sex lingers the basic question of people’s motives for engaging in sexual practices that they know are risky in a context of high HIV prevalence. This study is no exception. During our fieldwork, I wanted to assess the actual riskiness of women’s relationship choices, to what extent these were spurred by a dependency on men, and what leeway women had to act otherwise. As noted, I wanted to find out in particular whether increased economic independence for women would lead them to make safer sexual choices; in other words, whether it is primarily the dependence on male support which keeps women from adopting safer sexual practices.

Several concepts need to be defined here in order to become applicable. In the previous paragraph the terms that call for further specification are ‘risky’ and ‘safer sex’. In the public health literature, HIV risk basically refers to “an observed characteristic which raises the odds of being infected” (Barnett & Whiteside 2006: 85). More specifically, these characteristics generally are related to the timing of sexual debut, the consistency of correct condom use, and the number and types of sexual partners (e.g. GoM 2010b: 37-39). In the context of Mudzi, as we shall see in further chapters, risky behaviours entail low condom use, frequent partner change, partner concurrency, remaining with a promiscuous partner, and low levels of inquiry into the marital and health history of a new partner – or, more generally, any sexual or relationship practice that increases exposure to HIV infection. The
term ‘safe sex’ would then be the opposite of ‘risky sex’, hence any sexual or relationship practice that limits exposure to HIV. In Chapter 6 on sex, HIV, and AIDS I delve deeper into these concepts.

The somewhat vague concept of ‘livelihood’ has already been mentioned and will resurface throughout this book; it requires clarification as well. Livelihood has been described as a combination of the resources used and the activities undertaken in order to make a living (DFID 2001). These resources may consist of individual skills and abilities (human capital), land, savings and equipment (natural, financial, and physical capital, respectively), and formal support groups or informal networks that assist in the activities being undertaken (social capital). This last term, ‘social capital’, will be discussed and described in depth in Chapter 7. When the resources and activities to make a living are sufficiently ensured, we can speak of ‘livelihood security’ – and, if this is not the case, of ‘livelihood insecurity’. I will sometimes use these terms more-or-less interchangeably with food (in)security, even though the term of livelihood (in)security has been deliberately introduced to acknowledge that there is more to a ‘good living’ than merely sufficient food (Baro & Deubel 2006: 528). Nonetheless, in a setting like Mudzi, livelihood security to a great extent coincides with and depends on food security. The common definition of ‘food security’ is having at all times physical and economic access to enough food for a healthy and active life (FAO 2006: 1). It has been pointed out, and will become clear throughout this book too, that food security is not only about food availability, but very much about safeguarding the entitlements required to access food (FAO 2006: 1, Mtika 2000: 346, Sen 1981: 2).

The term ‘household’, inconspicuous as it may seem, is another term that has received considerable theoretical attention. Use of the term has been criticized for its insinuation that members of a household form a homogenous entity committed to a common goal, hence obscuring competing intra-household interests, unequal power structures, and negotiation processes (Chant 2003: 18, Doss 1999, Manuh 1998, Mayoux 2006, Niehof 2010, Quisumbing & McClafferty 2006). I most certainly do not subscribe to the ‘homogenous entity’ thesis, as will become clear throughout this book. I furthermore do not consider Mudzi households to be static entities, but as changing in composition, especially since husbands frequently move in and out. The exact composition may be hard to define even at one specific moment because the status of an (ex-)husband may remain vague for periods of time. When I use the term ‘household’, I intend it to refer to the group of people who share a house, kitchen, bathing place, toilet, and granary (or whichever of these structures are at place). At the very least, a household in Mudzi contains one woman. She may share her household with a husband, (classificatory) children, (classificatory) grandchildren, and her (classificatory) brother and mother.

Related to the often indeterminate nature of households is the – probably surprising – need, at least in the context of Mudzi, to specify the use of the terms ‘husband’,
‘wife’, ‘married’, and ‘unmarried’. I will not do so here but in Chapter 5 on sexual relationships. For now I merely want to make a case against the presumption, common among many social researchers, policy makers, and development practitioners, that these concepts can be unproblematically transported to and from research populations. In particular, the assumption that such terms refer to a fixed and indisputable characteristic, rather than a dynamic, transitory, subjective, and value-loaded status proves misleading in the case of Mudzi.

In contrast, the specific understandings of the concept of ‘gender’ usually are reflected upon in research and policy publications. It is commonly pointed out that gender refers to socially and culturally constructed identities, rather than a biologically determined one – an understanding with which I concur. Gender norms prescribe what behaviours, beliefs, and attitudes are appropriate for and expected from men and women. A ‘gender contract’ refers to “the understood but invisible agreements which regulate relations between men and women” (Kimane & Ntima-Makara 1998: 124); this proves a fruitful notion in the analysis of sexual-economic exchanges in Mudzi. Although the term ‘contract’ may suggest that a process of overt negotiation and conscious approval from all parties preceded the establishing of clearly determined, static rules, this meaning is not intended here. Instead, gender norms and contracts tend to be tacit, and may differ by time and place – also within a particular cultural setting. They are processual in nature, as they are constantly reproduced and reconstructed by the people subject to them, although seldom in a discursive way. This interaction between human action and societal structures that both shape action and result from it leads us to one of the most fundamental theoretical debates in the social sciences and one that is central to this book, too: the structure-agency debate.

The theoretical concept ‘agency’ forms an important theme throughout this book. The concept refers to the human capacity to act and make choices, the capacity to accomplish desired goals. Niehof (2007: 189) has described agency as “conscious action aimed at achieving certain outcomes, with the actors concerned considering the efficacy and appropriateness of their behaviour in a given context that comprises the institutional and normative environment within which daily life is enacted.” These institutional and normative environments, both of which result from complex historical, cultural, and material interactions, may be described as the ‘structures’ that guide and restrict an actor’s agency. Poor African women are often compassionately depicted as lacking the opportunities to get a grip on their lives – to exert agency – because this is impeded by disempowering cultural norms and socio-economic marginalization (Higgins et al. 2010), hence by debilitating structural forces. The women I encountered in Mudzi seemed far removed from this stereotype. This is not to suggest that these women are the opposite – free agents who can and do act as they please. Within the social sciences, debates on agency versus structure, as related debates on empowerment versus disempowerment, have
often revolved around the question of which one prevails over the other, which one best represents reality. The ‘old’ wave of HIV-prevention efforts, still widely practiced, builds on the assumption that human behaviour results primarily from individual agency, and can thus be changed by merely informing individuals about risk and protection. In reaction, the now widely called-for ‘new’ wave stresses that external structural forces – particularly gender inequality and economic deprivation – constrain human agency beyond individual will and thus must be removed before behaviour change can occur.

Women’s use of their sexuality to reach certain goals is a particularly interesting theme for the structure-agency debate. The topic of sex exchange has long triggered discussions on whether it is a sign of women’s empowerment or disempowerment – in other words, whether women involved in such exchanges should be considered potent agents taking advantage of men’s sexual drives, or involuntary victims forced to risk their lives. Advocates of the transactional sex paradigm have a strong tendency to embrace the latter view. Moving away from applied science, policy making, and development practice into the theoretical realms of the social sciences, a more dual or interactive understanding of and approach to structure and agency prevails. Here, it has become increasingly recognized that structure and agency should not be considered mutually exclusive dichotomies, with one separate from and taking precedence over the other (Nguyen & Stovel 2004: 10). Giddens’ structuration theory (1984) has been principally influential by pointing out that human action and structural constraints are in fact inextricably interdependent, each one shaping the other. Structures guide action, but at the same exist only by virtue of human actions that produce and reproduce them.

The question to ask, then, is not which conceptualization is most ‘true’, but rather how agency and constraining structures interact (Dolfsma & Verburg 2005: 6), and how this interaction creates certain outcomes. The notion of ‘relational autonomy’ has been suggested to capture the social embeddedness of agency; employing this concept allows one to “explore the space between women’s victimization and oppression and women’s active response to these conditions, and in so doing helps to dislodge the victim/agent dichotomy” (Schneider 1993: 84). This is exactly what I try to do throughout this book. In the concluding chapter, I will return to the structure-agency debate and touch upon the bridging theoretical idea of ‘structural change’, as this may help us to think of new policy directions for addressing women’s sexual risk of HIV infection.

In his book *The practice of everyday life* (1984), Michel de Certeau pointed out that social scientists should – rather than studying a society’s institutions or ‘structures’ (e.g. traditions, language, discourse) – examine the ways in which

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these are practiced and reappropriated in everyday situations. What this theoretical framework adds to the structure-agency debate is the distinction he makes within the concept of agency between strategies and tactics. He restricts the concept ‘strategy’ to powerful agents in the position to develop and endorse society’s structures. Ordinary people, De Certeau argues, can only resort to ‘tactics’. Tactics merely entail a dealing with and responding to the existing structures. They pertain to the everyday practices in which society’s rules and products are recombined and subverted in ways that are influenced, but rarely pre-determined, by those very rules and products. Populations are thus not passive subjects of their culture’s structures, but may adjust these – within socially acceptable limits – to their wishes and needs through tactics. These tactics never overtly challenge a society’s structures, but rather function to create room for manoeuvre behind an appearance of conformity. Tactics allow actors to seize opportunities when they arise, but not structurally create them. Such tactical manoeuvring is at play in many of Mudzi’s women’s actions. I believe it may be too static, however, to assume that ordinary people’s tactics can never contribute to shifts in their culture’s structures. I return to this in the concluding chapter.

Although I use ‘agency’ to mean the capacity to make choices and act towards a certain outcome, this is not to suggest that Mudzi women make coherent choices within a clear and consistent vision about long-term goals they aim to achieve. Far from it. As just noted, their actions tend to be reactive rather than strategically planned. The outcomes they act towards at any one point in time tend to be multiple, often divergent, and at times contradictory. Under different circumstances they may well combine the various considerations at play in an alternative order, leading to other outcomes. These outcomes must then somehow be incorporated in their ‘walk of life’ as they go along, so that their actions often become justified at hindsight rather than beforehand. The concept of ‘judicious opportunism’ will prove enlightening for unravelling and understanding Mudzi women’s often pragmatically ad hoc livelihood strategies. This notion derives from the work of Jennifer Johnson-Hanks (2005) on the marital and reproductive choices of young Cameroonian women, which challenges the common theorization of action as fulfilling a prior intention by discussing how her informants tend to move back and forth between multiple strategies in a fairly ad hoc manner and without a clear trajectory in mind. Recognizing the unpredictable nature of their fragile livelihoods, the women try to keep open as many alternatives as long as possible, to allow the seizing of a promising opportunity whenever and wherever it may arise.

Strongly related to the dual approach to structure and agency, and helpful for further understanding of how Mudzi women navigate sexual relationships, is the theory of social exchange (Blau 1964, Emerson 1962 in Hyden 2008). This theory asserts that power (commonly defined as the capacity to achieve impact, e.g.
Nyanzi et al. 2005: 14) is not absolute, but arises from mutual dependence. Each person in any type of relationship holds some degree of power over the other, and whoever is most dependent on the relationship at any particular moment is at that time the least powerful. As we shall see in the following chapters, this is highly applicable to sexual relationships in Mudzi.

Outline of book

In this first chapter I have laid out the research focus and the reasoning behind it. I have noted some of the theoretical debates for which my data may be of interest; these are interwoven throughout the analysis of my data rather than elaborated upon in one designated ‘theoretical’ chapter. The next chapter offers a historical background to the study, with a particular focus on the topics relevant for the overall research question: the evolution of gender relations, the underlying causes of today’s poverty, and the development of the AIDS epidemic in Malawi. This is not simply a pro forma background chapter, as the historical analysis reveals some important first hints towards answering the research question. In Chapter 3 I zoom in on Mudzi village and introduce its inhabitants. This chapter includes a ‘visual’ tour through the village, and a description of women’s daily lives and the high but varying degrees of livelihood insecurity that they face. Here I begin to assess how the historical processes described in Chapter 2 materialize in the lives of men and women today. I thus portray the research site prior to presenting the research methodology, because the community’s characteristics to a great extent conditioned the methods used for data collection. The efforts of my research assistant Gertrude and me to collect relevant data are described in Chapter 4. These are largely classical anthropological methods, but with an unconventional and perhaps controversial twist.

The second half of this book contains the main ethnographic chapters. Each addresses a different aspect of the overall research question: Is an independent income for poor women likely to affect their sexual choices? The first two ethnographic chapters revolve around these sexual choices, and the second two around money flows and income generation. In Chapter 5, I delve into the relationships choices of Mudzi villagers. My focus is on women’s considerations concerning their sexual relationships with men as culturally appointed providers of support, and as prerequisite for but also potential threat to their social status. I furthermore dissect women’s widespread resort to a discourse of poverty used to justify their involvement in (multiple) sexual relationships. The men’s side of the story is touched upon where relevant. In Chapter 6 the focus shifts towards women’s choices concerning actual sex acts. I assess how sexual ideologies shape sexual practice and vice versa. I also describe how HIV and AIDS are perceived and dealt with (or not). Chapter 7 turns to village economics, as I assess how
money comes into the community and subsequently flows through it. This analysis reveals the high value that villagers attach to social capital – the social relations that they can fall back upon in times of need. Sexual relationships are assessed from these insights into the need for social capital. Finally, in Chapter 8, I describe women’s options and their limitations in generating an independent income, the ambivalence with which this is surrounded, and the repercussions it may have on their access to other resources.

Combining the data presented in the preceding chapters, Chapter 9 aims to formulate an answer to the overall research question on the viability of reducing risky sexual behaviour by increasing women’s independent income. I discuss the implications that my analysis has for further research in this issue as well as for policy making.

Access to ‘raw’ data

‘Raw’ ethnographic data commonly consist of an abundance of qualitative fieldnotes. Throughout most of anthropology’s history, the generally bulky size of such data inhibited making them accessible for a wider public. Ethnographic output was necessarily limited to the arguments and conclusions deduced from the raw data, at best supported with carefully selected fragments of fieldnotes. Obviously, this has always curbed the extent to which fellow scientists and other interested parties could verify the claims, or make further use of the data. Nowadays, however, advancing digital technologies have opened up ways to make accessible large quantities of data, which allows us to enhance the transparency of ethnographic analyses. In this dissertation I experiment with some of these new possibilities.

Alongside many of the claims that I make throughout this book numerical references can be found within square brackets \([P_\text{x xxxx}]\). These codes refer to the specific paragraphs within our fieldnotes on which I built a particular claim. This allows interested readers to look up the sections concerned in our ‘raw’ data set and so gain a more thorough and more vivid sense of the real-life experiences that informed my thoughts and led to this study’s final conclusions. I am pleased that the many details that seemed lost in the synthesis are in this way not really lost. They still form part of the analyses, can be retrieved, returned to, and reassessed. Linking my claims to their origin serves as a means to ‘materialize’ and so validate my arguments. At the same time, however, it is also meant to offer readers the opportunity to form alternative interpretations.

*Please note that a digital version of this dissertation will be made available in which the codes are hyperlinked to our fieldnotes, so that interested readers only have to click on a code to see the related paragraph of our fieldnotes pop up.*