Time for my monthly editorial musing again and my thoughts have turned to gender-related violence, or in more old-fashioned parlance, violence against women. South Africa is a violent society. The reasons for this are many and complex, but because violence is often seen as an acceptable way to resolve conflict, violence against vulnerable groups such as women probably doesn’t get quite the attention it deserves from some sectors of society. And where there is violence against women, it is often associated with sex. And in Africa, sex means HIV.

Recently I have noticed quite a lot of questioning of the reasons for the fast and all-embracing spread of HIV across southern Africa in particular. There may be some inherent physiological reasons for this, to do with different genetic susceptibility to the HI virus, but, that aside, to become infected you have to be exposed. Why the extraordinarily high levels of exposure? The answer certainly does seem to lie in behaviour. Some studies I have seen recently definitely suggest that women are particularly vulnerable to exposure to HIV because of the behaviour of those who dictate their sexual activity – usually men. This brings me to microbicides. Although there is so far little to suggest that microbicides will be the ‘magic bullet’ that people once thought they might be against HIV infection in women, there is still an enormous amount of time, money and effort being put into finding microbicides that are safe, effective and acceptable. But acceptable to who? Reading between the lines in the literature and conference reports, it appears that the main effort is to ensure that microbicides are either acceptable to men, or invisible to men. Is this a tacit agreement that there is nothing that can be done about the system of patriarchy that is thought to characterise African society and which ensures women’s continued subservience? Perhaps President Mbeki is correct. Those of us of Caucasian origin really do think that all African men are sex fiends, incapable of changing their behaviour, and that African women will never have any choices about safe sex. By concentrating on the invisible nature of microbicides are we perhaps neglecting to recognise that one of the ways in which women can start to have some say in their destiny is to negotiate the terms of sexual intercourse? Much of the research on microbicides suggests that they will not be as invisible as many think. And perhaps, more importantly, the emphasis on something that is invisible to men has led to the neglect of another, extremely effective protective device – the female condom. What is happening now is that research is focusing on one potential prevention strategy at the expense of another.

The female condom exists. It is here, in full manufacture, right now. We do not need to wait years for further clinical trials for a possible solution. By effectively ignoring the female condom we are also failing to see that microbicides should in fact be regarded as simply another ‘choice’ for women in unequal relationships. We also need to look carefully at our attitude to men. Stephen Lewis, UN Special Envoy on AIDS, said at a recent conference on microbicides that it will take generations ‘to change the predatory sexual nature of men…’. But should we accept that? Are we not in danger of simply accepting women’s subservient role because we can’t expect men to change? Some groundbreaking research into changing men’s attitudes is taking place in KwaZulu-Natal and the results so far are promising. Changing behaviour will always take time and effort. But the time and effort first has to be put in before any change can be effected. Let’s not condemn men as ‘sexual predators’ without finding out if that is really how they want to be.

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