The Mistranslation of the ABCs: An American AIDS Education Campaign in Botswana

Liana Casbarro and Jemlys Jäger
Florida International University, USA

Abstract: The majority of Botswana citizens have access to national HIV/AIDS education, but the messages ignore native cultural practices. The purpose of this paper is to critique the influence of American humanism and individualism on the ABC model of HIV/AIDS prevention used to stem the AIDS epidemic in Botswana.

In 2005, the Joint United Nations Programme on AIDS (UNAIDS) estimated that 36.3 million adults and children in the world are living with HIV. Adults 15 to 49 living in Sub-Saharan Africa make up 67% of the world’s HIV positive population. In one Sub-Saharan country, Botswana, 270,000 adults are estimated to be living with HIV (UNAIDS, 2006).

The Botswana AIDS Impact Survey conducted by the National AIDS Coordinating Agency, Botswana government agency, found that 92% of men and 94% of women in urban areas knew that AIDS can be avoided. Even in rural areas, 84% of men and 85% of women had knowledge of how to avoid AIDS (Mogomotsi, 2004). These surveys indicate that the majority of Batswana, or Botswana citizens, have access to national HIV/AIDS education. Unfortunately, national education messages have ignored native health and sex education as well as norms of sexual behavior (Ntseane & Preece, 2005).

Government sponsored AIDS education has relied predominantly on the ABC (Abstain, Be Faithful, Condomise) campaign, to stem the AIDS epidemic in Botswana. The ideals of sexual behavior that the ABC campaign promotes have been borrowed heavily from American programs and endorse American values. The purpose of this paper is to critique the influence of American individualism and humanism, which are contrary to the norms of Botswana’s collectivist society, on the ABC model of HIV/AIDS prevention used throughout Sub-Saharan Africa.

The ABC Campaign

The first AIDS case in Botswana was reported in 1985. By 1987, AIDS had spread to enough of the population that Botswana’s government acknowledged AIDS as a potential health crisis and set up the National AIDS Control Program (Heald, 2002). Throughout the late 80s and 90s, the World Health Organization, USAID, and various INGOs worked with Botswana’s Ministry of Health in setting up programs for HIV/AIDS surveillance and control. “In 1988, the first national AIDS prevention campaign used radio messages, car bumper stickers, and T-shirts to convey behavior modification messages” (Allen & Heald, 2004, p. 1144).

The vigor of the government’s initial response died quickly as the messages failed to change behavior. Lack of awareness of the severity of the AIDS epidemic was pervasive throughout the country, and AIDS was (is) shrouded in a strong social stigma. Part of the campaigns’ ineffectiveness may have been the promotional messages themselves, which were not responsive to the sensitivities of the target group (Allen & Heald, 2004). By the mid-90s all that was left in Gaborone, the country’s capital, “were white vans with Lover’s Plus condoms emblazoned on the side and a large billboard that proclaimed: ‘Avoiding AIDS is as easy as ABC – Abstain, Be Faithful, and Condomise’” (Allen & Heald, 2004, p. 1144). The number of

people infected with HIV in Botswana rose exponentially between 1992 and 1997 when the country became known as “the AIDS capital of the world” (Heald, 2002, p. 2).

Today, the ABC message is ever-present in Botswana HIV/AIDS education programs (AVERT, 2006), which are funded by the United States President’s Emergency Plan for AIDS Relief. In 2005 alone, the United States donated $1,455,000 specifically for ABC materials and $24,884,871 for projects containing an abstinence, be faithful, and/or condom component (U.S. Department of State, 2006).

Condom promotion as a central AIDS education component is prevalent in many African countries, including Botswana. However, “the condom message was initially developed for a community that practiced recreational and not procreational sex” (Heald, 2002, p. 6). The U.S. gay and lesbian community had been fighting the spread of HIV for three years when the first AIDS case was reported in Botswana. Their response to the emerging epidemic was to develop the “safe/safer sex model of prevention” (Heald, 2002, p. 2). Messages directed at gay men were distributed in the form of leaflets and brochures and “recommended three main types of behavior modification: reducing the number of different sexual partners; eliminating the exchange of body fluids during sex; and ‘knowing your partners’ by avoiding places characterized by sexual anonymity” (King, 1993, p. 47).

No attempt was made to directly export the gay American safe/safer sex campaign to Botswana. However, in 1987 when American organizations began to sponsor Botswana AIDS education, AIDS in the U.S. was still considered a ‘gay disease’. No model of prevention for heterosexuals existed (King, 1993). The B and C in the ABC campaign have direct connections to the safe/safer sex model, and the A was likely an addition by the American mainstream (Christian heterosexuals). Despite the target population, both the safe/safer sex and ABC model of prevention encourage self-directed behavior modification based the on the humanist belief that people are free to act. Both models assume human behavior can (and probably should) be dictated by the individual, not his or her community.

**Humanism and Individualism**

The philosophy of humanism evolved from humanistic psychology, which was developed in the United States by Maslow and Rogers during the first half of the 1900s (Merriam & Brockett, 1997). The central themes of humanism are that behavior is not predestined by either environment or subconscious, and therefore, people are free to act of their own will. Humanism also asserts that “people are inherently good” and “possess unlimited potential for growth and development” (Merriam & Caffarella, 1999, p. 256). These beliefs mesh particularly well with the American values of independence, individualism, and self-fulfillment (Merriam & Brockett, 1997), and may in fact be the product of such values.

Dominant themes in individualist societies are “self-definition as an entity that is distinct and separate from group(s), emphasis on personal goals even if pursuit of such goals inconveniences the in-group, and less concern and emotional attachment to in-groups” (Triandis, Bontempo, & Villareal, 1988, p. 335). “Self-reliance for individualistic cultures implies freedom to do one’s own thing” (Triandis et al., 1988, p. 335), which is similar to the humanist belief that people are free to act (Merriam & Caffarella, 1999).

Humanism may have grown out of the individualistic social norm of the West, but in the last half century it has emerged as an American cultural force in its own right. Together, individualism and humanism interact in Western thought to form an ideal human purpose: control of one’s future success regardless of the opposition.
An Individualist Strategy in a Collectivist Society

The African communal view of self contrasts sharply with the dominant view of self in Western thought. Social development in the African context is not an individual journey; it is a process whereby “a person realizes his or her place and responsibilities within a community of other people” (Mkhize, 2006, p. 187). The Batswana philosophy states that “the individual is meaningful only as a part of the whole society, since to be is to participate” (Otunga, 2005, p. 50) illustrating a belief inherent in collectivist societies where the concept of self is interdependent (Gudykunst et al., 1996). Due to the collectivist nature of Botswana, “participatory methods of planning and delivery of prevention activities” should be used (Ntseane, 2004, p. 20).

In reference to the current state of HIV/AIDS education in Botswana, Preece and Ntseane (2004) found that “an education strategy that privileges the individual sits uneasily within a culture that responds more willingly to collective pressure to conform and take responsibility for others” (p. 18). The ABC message privileges the individual’s right to change his or her behavior from the established social norms without the permission or agreement of the community (Heald, 2002). For example, for a man to decide to be faithful to one wife in a polygamist community, he would have to reject the norm of having multiple sexual partners.

In collectivist societies such as those in Botswana, cultural norms are accepted and not challenged by community members (Triandis et al., 1988). It is against their nature to disregard the needs of the community or “do their own thing” (Triandis et al., 1988, p. 325). The cultural norms of the Batswana are such that individuals feel pressure to conform to behaviors that are strictly opposite those purposed by the ABC campaign. For instance, women are told to oblige partners to wear condoms when traditionally men have total control over sexual situations.

In addition, the campaign makes no attempt to appeal to the Batswana’s shared sense of responsibility by placing emphasis on changing behavior for the benefit of the group (Preece & Ntseane, 2004). While the rationale and delivery of the ABC campaign conflict with the cultural norms of Botswana’s collectivist society, each component of the campaign also conflicts with Batswana sex norms.

Social and Sexual Norms of Behavior

The production of children is expected, making abstinence a dissenting act, and marriage is primarily a union for producing children (Ntseane, 2004). If a husband believes he is impotent, he may “place his wife at the disposal of an intimate friend or relative to have a child” (Ntseane, 2004, p. 11). “Similarly, if the problem lies with her, she may procure another woman from the family to bare him children, thus saving the marriage” (Ntseane, 2004, p. 11). In Botswana, although sex has many other purposes, such as for pleasure or exchange, procreation is a sexual priority (Ntseane, 2004). Condoms, which act not only as a barrier for sexually transmitted diseases, but also for procreation, have been “actively opposed by church groups, parents, and elders” for being seen as promoting immorality and promiscuity (Allen & Heald, 2004, p. 1144).

The social norms governing sex acts with cousins, uncles, stepfathers, and boyfriends have a direct bearing on the be faithful to one partner component of the ABC campaign (Ntseane & Preece, 2005). For example, the polygamous ideal still prevails in many ethnic groups in Botswana as evidenced by sexual practices like Nkazana, which is sex between husband and the wife’s younger sister, and Seantlo, which is a marriage between a widow or widower and a sibling of the deceased husband or wife (Ntseane, 2004). The social functions of sex within these groups are likely to engage individuals in sex with multiple partners, thus negating the possibility of being faithful to one partner (Ntseane, 2004).
Replace American Philosophies with African Ethnophilosophy

Humanism and individualism make assumptions about human existence that do not accurately describe the realities of life for Batswana. These American philosophies should be replaced with African ethnophilosophy in order to change the foundation of inaccurate assumptions and culturally inapplicable values on which Botswana AIDS education is based. African ethnophilosophy, which “considers folktales, communal worldviews and traditions of African communities as well as the philosophies of a group of people” (Otunga, 2005, p. 49), should be substituted for humanism and individualism when designing educational strategies for HIV/AIDS prevention in Botswana. “[African philosophy] centers on people in their social context” and “teachers working within this philosophy of education use a mixture of teaching methods with the emphasis on participatory approaches that encourage and enhance socialization” (Otunga, 2005, p. 49).

National and international policies governing Botswana’s AIDS education should support culturally relevant programs, which emphasize behavioral changes that do not depend on the denial of cultural norms, such as polygamy. An educational strategy that appeals to Botswana communities’ desire for consensus should have much more success than the current strategies, which ask individuals to reject cultural norms of behavior. In addition, the United States and other nations should cease funding programs that intentionally or unintentionally favor the adoption of American values by Africans. This practice is disrespectful of Batswana culture and may even be counterproductive in preventing the spread of the AIDS virus.

References


