

The Impact of the Notions of Personhood in Approaching HIV/AIDS Issues in Sub-Saharan Africa

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In most sub-Saharan African countries, the usually applied western understanding of personhood has currently a problematic impact on the efficacy of HIV/AIDS approaches: practices of HIV-prevention show limited results and ARV treatments are often interrupted.

The argumentations of HIV/AIDS activists are based on models of personhood with an independent understanding of the person through messages addressed to individuals and couples. These approaches neglect the interdependent notion of the person, described by Geerts (1975), Harris (1989) or Markus and Kitayama (1991). The interdependent character of personhood becomes visible by e.g. the interruption of ARV treatment, often through social pressure whilst participating in traditional family ceremonies for achieving the ancestors' support for health recovering or against presumed witchcraft/sorcery.

Investigating the lack of efficiency in HIV/AIDS prevention campaigns in Sub-Saharan countries (like Mozambique, Congo DR), shows that one of the main failure originates from a personhood-notion that does not respond to the peoples' practices. Theories from Triandis, H.C. (1989) help analysing practices which differentiate between private-, public- and collective selves, avoiding essentialist interpretations.

In order to reach a more appropriate approach of HIV/AIDS, addressing the interdependent structures of the self is more likely to reach efficiency in Sub-Saharan Africa. This is valid for the urban- as much as the rural population. People in sub-Saharan Africa are as much globalized as elsewhere, but health issues and sexual behaviour are driven by deeply rooted notions of the interdependent personhood. In such a cultural context, people have few spaces to act as independent persons: in health issues the social pressures restrains the opportunities for an individually oriented practice as independent persons.

Key words:

Interdependence, personhood, social affectivity by health behaviour, HIV/AIDS prevention, sub-Saharan Africa, local concepts of disease, complementarities, cultural approach of HIV.