

37. Livelihood mobility and AIDS prevention in West Africa. Challenges and opportunities for social scientists

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Introduction

The relationship between population mobility and the spread of diseases has been noted numerous times by social scientists, historians and medical epidemiologists (Gellert 1993). Since the 1980s increased attention has been given to the links between various forms of population mobility and the spread of HIV/AIDS in sub-Saharan Africa and other world areas (Quinn 1994). To date however, the contribution of the social sciences to clarifying the dynamics of the relationship between forms of livelihood mobility and the spread of HIV/AIDS in sub-Saharan Africa has been limited (Amat-Roze 1993; Amat-Roze *et al.* 1990; Hunt 1989). More important, the contribution of the social sciences to HIV/AIDS prevention interventions for persons engaged in mobile livelihoods has been even more limited. This paper argues for change in this situation and suggests possible approaches for increasing the engagement by the social sciences with HIV/AIDS prevention initiatives among people on the move and their sexual partners.

¹ The views expressed in this paper are the author's views alone and do not necessarily reflect the views of the Centers for Disease Control and Prevention, the U.S. Public Health Service or the U.S. Department of Health and Human Services.

² These notes are from an ongoing project to examine aspects of uneven development in sub-saharan Africa and their impacts on the livelihood strategies used by members of African households to gain access to, exercise a degree of control over, and benefit from the utilization of resources which they define as critical for their well-being. Earlier elaborations of the concepts used herein have been presented elsewhere (Painter 1985, 1987, 1994b, 1994c, Painter *et al.* 1992, Painter *et al.* 1994). To a significant degree, this conceptual development builds on perspectives earlier developed by Berry (1989, 1993), but also by others who have addressed issues of opportunity structures, uneven development and regional dynamics.

Uneven socioeconomic development and livelihood mobility in West Africa

Uneven development, human actions, mobility and the creation of action spaces

Markedly uneven development is a defining characteristic of societies and economies in West Africa. This is the result of several factors, two of which we will consider here.

First, natural resource endowments vary considerably in West Africa. Soil quality and fertility vary although it is fair to poor overall. The region is subject to pronounced variations and seasonality of rainfall alternating with long dry periods, sometimes combined with longer-term processes of desertification. Proximity to ground water tables and access to other sources of water varies. Historically, diseases such as onchocerciasis have infested large river valley areas, thereby limiting human access to more desirable habitats. Deposits of valuable minerals such as gold, diamonds, bauxite, are distributed unevenly within the region, etc. This uneven natural resource endowment affects the possibilities throughout West Africa for agricultural and non-agricultural production for domestic consumption and/or sale and profit. It shapes opportunities and constraints associated with livelihoods in important ways.

The second factor is the cumulative impact over time and across geographic space in West Africa of uneven development. This results from choices made by individuals, groups, communities, by private capital, governments, international development assistance organizations, and finally, the impact of market forces within a global economy, on features of social reproduction, production, investment and profitability (Painter *et al.* 1994). We find examples of this in the uneven distribution of investment in on-farm and off-farm production and marketing and the uneven development of transport and communications infrastructure education, health and other social services throughout sub-saharan Africa.

Uneven and inequitable socioeconomic development affects the *livelihood opportunities and constraints* of millions of people in West Africa — an estimated 197 million people in 1993 (World Bank 1995), both urban and rural dwellers, across an immense region of the continent. The opportunities and constraints that result from uneven development influence in turn, the kinds of *livelihood strategies* that are possible for individuals as they pursue the resources they need for their well-being (Painter 1985, 1987; Painter *et al.* 1994; Berry 1989).

By virtue of the multiple linkages that humans have produced and reproduced through their enterprises over time and across geographic space, they have created a coherent regional entity that may be accurately described as a *regional economy* or a *regional action space* (Painter 1985; 1987; Painter *et al.* 1994). This regional economy includes the societies and economies of a dozen countries¹ in relation

¹ These countries include Senegal, The Gambia, Guinea Bissau, Guinea, Côte-d'Ivoire, Ghana, Togo, Benin, Nigeria, Mali, Burkina Faso, Niger, and to a lesser extent,

to which rural and urban household members organize their livelihoods year in and year out, elaborating distinctive livelihood strategies.

Patterns of livelihood mobility in West Africa

Historically, rural and urban dwellers in West Africa have exploited this dynamic regional action space through mobility. Livelihood mobility of West African populations has been remarkable and has been given considerable attention by social scientists, historians, economists and planners. Forms of livelihood mobility among people on the move in West Africa often involve trans-national or trans-border travel, affecting individuals many times over the course of their lifetimes and affecting households, families and communities over the course of several generations of lives and livelihoods. Another feature of this widespread mobility is its cyclical or 'seasonal' character. As seasons change during the year, so do the livelihood constraints and opportunities within the West Africa region. Seasonality thus promotes and helps sustain intra-regional mobility ... massive intra-regional mobility.

What produces such remarkable movement? Individual and collective decisions repeated many thousands of times over by West Africans to:

- seek extra-local opportunities for obtaining needed income;
- flee or mitigate constraints, be they permanent or related to seasonality, on local income-generating opportunities;
- 'manage,' that is, *spread* recurrent risks to individual / family well-being by looking for opportunities for securing multiple sources of real income, often at multiple locations and during different times of the year.

Coerced population movements have also contributed importantly to mobility in West Africa and other areas of sub-saharan Africa and deserve more attention, particularly in relation to the current and changing geography of HIV/AIDS in Africa. Notable examples of coerced displacement prior to the advent of HIV/AIDS include the

Mauritania. While Sierra Leone and Liberia are very much a part of West Africa, their economic linkages with other countries in the region, in the form of major highway systems and flows of people and commodities, are less developed. Within this large region, several subclusters of countries can be identified in terms of significant socioeconomic linkages, as reflected in large cyclical population movements or migrations and commodity flows. Thus Senegal draws large numbers of temporary workers from nearby Guinea Bissau, The Gambia and Mali. In addition, Senegal also has important transcontinental linkages. The northern areas of Senegal are an important source of male migrants who travel for extended periods of time to cities in European countries (particularly in France, where they work as laborers in industry, but also to other cities where they are often engaged in trade) and in North America (particularly New York, where they have been actively engaged in urban petty trade and export to West Africa). Côte-d'Ivoire and Ghana historically have drawn large numbers of migrants from Mali, Burkina Faso, Niger, Benin, Togo and Guinea. Nigeria draws migrants from Togo, Benin and Niger as well as from countries such as Chad and Cameroon.

Atlantic slave trade during the pre-colonial period and the widespread practice of forced labor recruitment and displacement during the colonial period, particularly in French territories and colonies (Cordell and Gregory 1994; Cordell *et al.* 1996). Civil war and strife are major factors contributing to current forms of coerced population mobility that are associated with increased risk of infection by HIV.

The persistence of livelihood mobility on West Africa

Widespread livelihood mobility has been sustained as households throughout the West Africa region construct their livelihoods in relation to changing structures of opportunity and constraint that affect their access to resources they need for their well-being. Mobility has been a hallmark of livelihood strategies among members of West African societies for nearly a century. Some students of society and economy in West Africa have gone so far as to describe this mobility as an 'immemorial' or 'natural' feature of West African societies. While we strongly disagree with the 'timeless' image of African mobility, this is not the place to critique these interpretations (*cf* Amin 1974; Cordell *et al.* 1994; Painter 1985; 1987; 1990; 1994a). Suffice it to say that if opportunities and constraints vary significantly through space and time and if livelihood mobility is useful as a means of coping with these situational features, many members of many West African households *can and do move*.

Patterns of population movement in West Africa often consist of cyclical mobility —recurrent travel— between areas having limited and greater opportunities respectively for obtaining needed income. The most noteworthy patterns of cyclical or two-way migrations in West Africa occur *between* the land-locked Sahelian countries of Mali, Niger, Burkina Faso after the rainy season and harvests, and the coastal countries of Côte-d'Ivoire, Ghana, Togo, Benin and Nigeria (Amin 1974; Gervais 1994; Painter 1985; 1994a; Painter *et al.* 1992; Rouch 1956; 1957). Cyclical migrations also occur over shorter distances between less advantaged northern areas and more developed southern areas *within* coastal West African countries. In all cases these movements are oriented toward areas where livelihood opportunities are greater. Figure 1¹ shows the directions and relative importance of major, largely cyclical migration flows in West Africa.

HIV/AIDS in West Africa

The first cases of AIDS were reported in West Africa in 1985. Shortly thereafter small numbers of AIDS cases were reported in other countries scattered throughout the West Africa region (Painter, forthcoming). Coastal urban and periurban areas have had higher HIV

¹ I wish to thank Jean Smith of the Visual Information Unit, Division of HIV/AIDS Prevention, CDC, for preparing the maps for the original presentation on which this paper is based. I accept full responsibility for any inaccuracies depicted therein.

seroprevalence levels and more reported cases of AIDS than the sahelian area in West Africa's interior (De Cock *et al.* 1990). While indicators point to higher HIV risk and greater impact of AIDS in coastal urban areas, the number of AIDS cases has continued to increase in rural areas of Côte-d'Ivoire and nearby countries —Ghana, Burkina Faso and Togo (De Cock *et al.* 1989; 1990).

Figure 2 depicts the uneven impact of HIV/AIDS in West Africa. The data presented are based on the numbers of AIDS cases reported by National AIDS programs in West Africa to the Global Programme on AIDS of the World Health Organization, now UNAIDS, through the end of 1995 (WHO 1995; 1996a; 1996b). The figure shows the total number of reported AIDS cases for each country and the AIDS case rate calculated by UNAIDS as the number of known cases per 100,000 population. The UNAIDS data may be subject to some criticism and debate. For example, the number of actual AIDS cases is probably several times greater than the reported number of cases in each country; national AIDS rates do not reflect differences in seroprevalence or the impacts of AIDS related to the geographical distribution of populations that face higher risk of HIV infection.

Despite their limitations, these data are useful in showing the relative magnitude of intraregional differences in the impacts of AIDS in West Africa. These include increased morbidity and mortality, reduced life expectancy and changes in the structure of affected households, families and communities. More specifically, these translate into increasing numbers of AIDS orphans (Preble and Foubi 1991), potential losses of generations of productive person-power and declining agricultural and off-farm production and economic productivity. Additional socioeconomic impacts of AIDS include negative effects on health services and community coping capacities and on the ability of African governments to respond to HIV/AIDS during a time when external development and investment resources are increasingly scarce.

Studies to date of the localized impacts of AIDS are very few in number and have been done in Eastern Africa (Barnett and Blaikie 1992; FAO 1995). No social science research has been done on the socio-economic impacts of AIDS in West Africa or on the coping strategies of individuals, households and communities that are affected by HIV/AIDS.

Livelihood mobility and the spread of HIV/AIDS in West Africa

A mortal threat to health is juxtaposed on a longstanding and widespread pattern of livelihood strategy

Mobility has assumed a new and problematic significance due to the juxtaposition of increasing risks of HIV/AIDS since the mid-1980s on well-established and fairly effective livelihood strategies in West Africa. Population mobility continues between areas having lower and higher opportunities within the region, but with the advent of AIDS,

destination areas having greater earning opportunities have become areas of high risk of HIV infection.

A comparison of figures 1 and 2 provides a better idea of the relationship between patterns of livelihood mobility and the geography of HIV/AIDS in West Africa (*cf* Amat-Roze *et al.* 1990; Amat-Roze 1993). The impact of AIDS, hence the risk of HIV infection, is much greater in destination areas than in the countries of origin of persons engaged in migrations and other forms of livelihood mobility in West Africa. Data on the number of reported AIDS cases and AIDS rates per 100,000 population (Figure 2), strongly suggest that the impact of AIDS in destination areas of people on the move is three to fifteen times greater than in areas of origin. Currently Côte-d'Ivoire has the highest seroprevalence levels and the largest number of declared AIDS cases in West Africa (U.S. Bureau of the Census 1995; WHO 1995). It is important to appreciate, therefore, that we are dealing not only with a national-level problem but also with multiple national-level problems as well as a larger regional problem of spreading HIV/AIDS.

While this pattern of disease spread, linked as it is to livelihood mobility, is relatively new to West Africa, it has been recorded earlier in central and eastern Africa (Hunt 1989) and in southern Africa (Jochelson *et al.* 1991) and in other parts of the world. This is particularly true of areas having markedly different levels of socio-economic development and linked through human mobility.

Social mechanisms of HIV transmission

What are the social mechanisms of HIV risk and infection? Studies indicate that high-risk sexual networking is common in the urban and periurban areas of coastal West Africa (Caldwell *et al.* 1993; Orubuloye *et al.* 1994; Painter *et al.* 1992). Studies also indicate that HIV seroprevalence and the frequency of reported AIDS cases are greater among persons in a variety of social categories that are frequently labeled 'high risk' by epidemiologists and AIDS-prevention specialists. Individuals and groups in these categories are known to frequently engage in sexual networking that places themselves and their partners at risk of HIV infection.

The issue is not simply one of identifying and targeting 'high risk' groups or categories, although we do need to know what kinds of livelihood patterns are most conducive to high risk sexual networking (Painter 1995b; Seidel 1996; Taverne 1995). In addition, we need to focus on high-risk behavior *and* the contexts (settings) in which risky sexual networking typically occurs. We also need to recognize that this risky sexual networking is directly linked to the processes and contexts of mobility that have become necessary for livelihoods in West Africa.

Examples of livelihood patterns that are often combined with mobility and high-risk sexual networking include prostitution (commercial sex work) and also a multitude of more casual encounters where women, particularly younger women and girls, engage in sexual contacts in exchange for some form of material or monetary gesture

Figure 1 : Major Migration Flows in West Africa

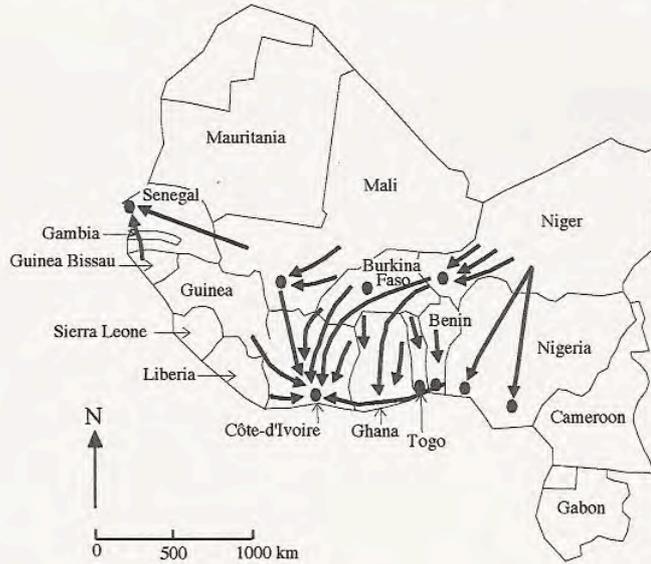
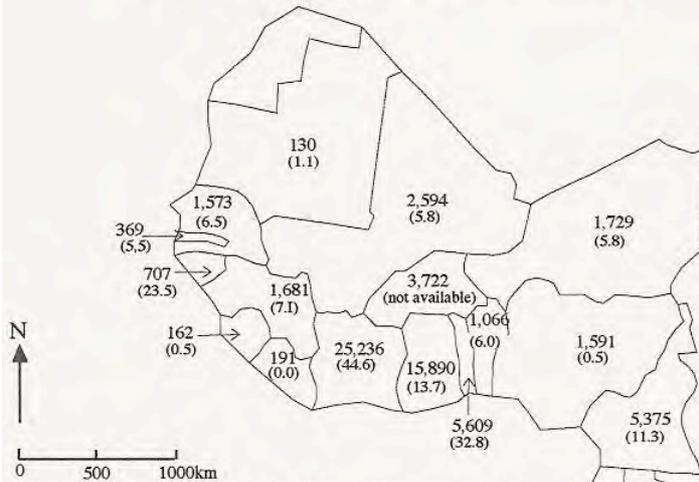


Figure 2 : AIDS Cases in West African Countries



130 = Cumulative number of AIDS Cases (15 December, 1995)

(1.1) = Rate of Number of AIDS Cases for 100,000 population (1994)

Source : WHO / GPA. AIDS Cases Reported to WHO by Country / Area through 15 December, 1995
The Current Global Situation of the HIV / AIDS Pandemic, Geneva, 15 December, 1995

from their sexual partners. Other examples include working as waiters, barmaids and waitresses; driving trucks and buses over long-distances, often internationally; and ambulant petty trading, involving sales of everything from drinking water in plastic bags to fruit, cola nuts and cooked food to clothing and electrical gadgets. Finally, migrating is included here insofar as it is linked to income-generating activities and social conditions that are conducive to high-risk sexual networking.

The changing geography of HIV/AIDS in West Africa

A review of data from annual reports by WHO/GPA and UNAIDS for the years prior to and including 1995 (WHO 1995, 1996a, 1996b) suggests that:

– The marked differences between lower seroprevalence levels in Sahelian countries and higher seroprevalence levels in coastal/urban areas of West Africa are gradually decreasing as time passes. For example, AIDS rates in Mali and Niger continue to increase, albeit slowly, when compared with higher rates in Ghana or Côte-d'Ivoire. In other words, differential seroprevalence levels, unlike the diverging trends we observe in socio-economic development in West Africa, seem gradually to be converging. This is due to intra-regional spread of HIV and the dynamics of HIV transmission within individual countries and communities.

– The overall HIV/AIDS 'numbers' are increasing throughout the region. The West Africa region as a whole is increasingly affected by HIV/AIDS.

What more can be said about the social categories that are associated with high risk sexual networking, particularly in higher HIV seroprevalence areas of West Africa? Certainly there is considerable diversity, but these categories include:

- Individuals who are more or less long-term residents (its all quite relative, in fact) of coastal destination areas of West Africa (Togo, Ghana and Côte-d'Ivoire) where the risks of HIV infection are considerably greater.

- Individuals who are not longer-term residents and who travel periodically between lower opportunity/lower HIV risk hinterland areas of West Africa and coastal urban and periurban areas where the opportunities for earning needed income *and* for becoming infected with HIV are greater. Typically, these persons are from:

- * less advantaged Sahelian countries to the north of the West African coastal zone (as we see in the instances of long-distance truckers, commercial sex workers and migrant laborers and traders from Mali, Niger and Burkina Faso) or

- * less advantaged northern areas of the coastal countries themselves, eg northern Côte-d'Ivoire, Ghana, Togo.

Typically these individuals are men, often married, who spend 3-9 months each year in coastal areas having higher risks of HIV infection (CERPOD 1991; Painter 1987). They spend this time unaccompanied by female partners from their home communities and frequently engage in unprotected sexual networking in their destination areas. As

a result, increasing numbers of these men are returning home with HIV infections. Once home, some men infect their spouses and other sexual partners, contributing thereby both to heterosexual HIV transmission and to eventual mother-to-child HIV transmission.

- Individuals who are not necessarily permanent residents of higher HIV/AIDS risk coastal destination areas, who originate from nearby countries. Examples include women from southeastern Ghana who have long accounted for most of the commercial sex workers in Abidjan, and have thus played an important role in sexual networking, in being infected with HIV and in infecting their sexual partners with HIV in turn (Anarfi 1990; 1993). What is perhaps less well-known about these women from Ghana, who have been blamed in the past as a major source of HIV infection in southern Côte-d'Ivoire, is the extent to which they have been affected by HIV/AIDS themselves. Increasing numbers of these women have been returning to their home communities in Ghana, sick and dying of AIDS (Anarfi 1990). Of particular interest and concern in this regard are recent observations that younger women from Côte-d'Ivoire are moving in to fill the gap left by departing and dying women from Ghana.

A new and deadly dimension has been added to the widespread practice of intra-regional livelihood mobility in West Africa

- Cyclical ('seasonal') migrations involving hundreds of thousands of men (and, therefore, hundreds of thousands of household members in their home communities) and increasing numbers of women (David 1995) occur every year in West Africa.
- This widespread mobility occurs between lower opportunity/lower HIV-risk areas and greater opportunity/higher HIV-risk coastal urban and periurban areas of West Africa.
- Combined with high levels of sexual networking in high HIV risk destination areas, widespread livelihood mobility has become a significant contributing factor to the spread of HIV/AIDS between coastal and interior areas of West Africa (Amat-Roze 1993; Amat-Roze *et al.* 1990; Lalou and Piché 1994; Painter 1995a; Painter *et al.* 1992; Pison *et al.* 1993; Kim Vanden Hengel, SIM Projet SIDA/AIDS Project, Niger, personal communication; World Bank 1994a; 1994b; Yéo-Ouattara and Sawadogo 1994; Hunt 1989).

For social scientists who are concerned with the spread of HIV/AIDS, the challenges and opportunities created by this situation are multiple and significant.

Challenges and opportunities for social scientists in relation to livelihood mobility and the spread of HIV/AIDS in West Africa

Ensuring that the right messages are delivered effectively to appropriate persons, groups and communities

A great deal of HIV/AIDS prevention communication has been generated in West Africa following the creation of national AIDS

programs in the mid-1980s. These HIV/AIDS prevention communications have been disseminated in three major ways: electronic media, printed media, and direct and interactive approaches.

Electronic media (radio and to a lesser degree, TV) are widely used. While fairly affective in terms of increasing public awareness about AIDS, this approach suffers from several limitations:

- Access to the electronic media, particularly TV, is limited outside urban and periurban areas.

- The impact of national-level programs using post-colonial ‘administrative’ languages such as English or French is limited due to poor understanding among persons who never mastered these languages. Worse still, persons coming from a different post-colonial background (e.g., Anglophone Ghanaians in Francophone Côte-d’Ivoire) may be largely excluded from access to media-based information of this kind.

- The impact can be even more limited when ‘maternal’ or national ethnic languages are used for these communications in a particular country, excluding foreigners from the benefits of HIV/AIDS prevention messages (Painter *et al.* 1992; Painter 1994b).

- The one-way flow of information provided by the electronic media limits their impact by precluding the possibility of dialogue and clarification, both of which are needed and desired by recipients of HIV/AIDS communications. The persistence of widespread erroneous understandings about how HIV infection occurs and can be prevented is particularly striking, given the considerable investments that have been made to date in HIV/AIDS communications in Western and sub-Saharan Africa (Cohen and Trussel 1996; Painter *et al.* 1992; Rosensvard and Campbell 1996).

Printed media such as newspapers, magazines, brochures, posters, billboards, are also used for HIV/AIDS prevention communications. The effectiveness of printed media is constrained due to widespread illiteracy, particularly among poorer segments of mobile populations, effectively excluding large numbers of people from printed information (Painter *et al.* 1992; World Bank 1994b). Low literacy levels affect persons in urban as well as rural areas.

Some HIV/AIDS communications strategies involve *direct and interactive approaches* for disseminating information. We find examples in some social marketing campaigns. In many cases messages are undifferentiated in terms of the life situations or the particular concerns of would-be target populations.

Messages may be tailored to particular audiences, however, and disseminated by individuals (‘peer educators’) recruited from the target audience population who are specially trained to deliver HIV/AIDS prevention messages to their peers.¹ The following target

¹ In West Africa, Population Services International (PSI) has been particularly innovative in its approach to communications strategies for social marketing campaigns. In Burkina Faso, PSI has initiated several interventions that work through long-established community-based organizational forms. In Côte-d’Ivoire PSI has produced a televised film series *Sida dans la cité* which has become extremely popular in Côte-

groups in sub-saharan Africa have benefited from HIV/AIDS prevention messages delivered by peer educators: taxi, truck and bus drivers; migrants (of various kinds); commercial sex workers; bar and hotel staff; sorghum beer brewers; religious leaders; traditional medical practitioners; soccer players; military personnel.

Despite the accomplishments of HIV/AIDS communications in increasing AIDS awareness, there is a pressing need to improve AIDS prevention messages in terms of form, content and targeting. A large part of the challenge consists of ensuring prevention messages are adapted to the socioeconomic and cultural contexts, the concerns and priorities of message recipients. Typically, however, insufficient attention is given to these issues in the preparation and dissemination of HIV/AIDS prevention messages (Cohen and Trussel 1996).

Better communications strategies are needed to effectively reach persons and groups that engage in and provide collective (normative) support for high-risk sexual networking among people on the move in Africa. HIV/AIDS prevention messages must also create opportunities for dialogue and questions involving deliverers and recipients of messages.

In summary, social science has an important opportunity to help ensure that the content and form of HIV/AIDS prevention communications fit with the everyday realities, concerns and contexts of target groups, particularly those involved in mobile livelihood strategies and who are also prone to participation in high-risk sexual networking. Finally, it is important to realize that target groups have their own stories to tell. Once again, social scientists have an important role to play in ensuring that these voices are heard and integrated as appropriate within HIV/AIDS communications.

Building stronger linkages between research and action

General considerations

The link between social science research and HIV/AIDS prevention actions in sub-saharan Africa needs to be strengthened. This is particularly true for interventions designed for persons and groups that practice mobile livelihoods. The linkage between social science research and HIV/AIDS prevention actions must ensure a two-way, not simply a one-way flow of information. While prevention actions need to be informed by pertinent social science perspectives and knowledge, research needs to be informed by action and action-based learning. In other words, HIV/AIDS prevention actions must generate as well as apply relevant social science knowledge and concepts.

Occasionally we hear terms such as 'action research' being used in connection with the elaboration and implementation of AIDS-prevention programs in West Africa but not often enough (CCIP 1995; World Bank 1994a; 1994b; Schoepf 1993; 1995; Painter 1994b;

d'Ivoire and in nearby francophone countries. The film series captures very nicely the dynamics of sexual networking and everyday life within couples that lead to opportunities for high-risk or safe sex contacts.

Painter *et al.* 1992). Approaches are urgently needed where selected information is obtained on specific issues and problems and where there is a strong and rapid *feedback link* to prevention interventions. A stronger link between information gathering and action in the form of *pilot initiatives* is also needed.

The complex and changing socio-economic contexts where people carry out their mobile livelihood strategies including sexual networking require approaches to data collection and analysis that are more flexible and process-oriented than the cross-sectional survey approaches that have been widely used for social-behavioral issues related to HIV risk and spread (Painter 1994b; Painter *et al.* 1992).

*Innovative HIV/AIDS prevention initiatives
with people on the move*

Despite the importance of livelihood mobility to life throughout West Africa and an increasing recognition of a linkage between livelihood mobility and the spread of HIV/AIDS, the number and scope of HIV/AIDS prevention interventions for people on the move have been limited. National and regional-level responses to these challenges and opportunities for HIV/AIDS prevention have developed very slowly.

In the meantime, non-governmental organizations (NGOs) have stepped in to help fill the gap. Of interest are several projects undertaken by CARE-International in conjunction with national AIDS programs in West Africa. This NGO was among the first to develop approaches for working with mobile populations. The AIDS and migration project, implemented by CARE in Niger, is the only intervention to date that targets people on the move (male migrants) in more than one country. It includes prevention activities in the migrant's home communities in Niger, at points of departure and border areas, and in the migrant's destination areas in Abidjan, Côte-d'Ivoire (CARE International/Niger 1995; Painter 1994b; Painter *et al.* 1992; Purves 1994).

The CARE International project offers valuable lessons concerning the strengths and weaknesses of 'trans-border' AIDS prevention interventions. Strengths include a range of innovative approaches to contacting and working with migrants, including peer education and audio and video techniques. Weaknesses include a lack of follow-up of migrants in their destination areas where the men are commonly involved in high-risk sexual networking. Ensuring high quality follow-up at multiple sites, particularly in distant destination areas, is a major challenge to all HIV/AIDS interventions with people on the move in sub-Saharan Africa.

In addition to the project in Niger and Côte-d'Ivoire, CARE International is implementing AIDS prevention projects with people on the move in Cameroon (initially youth; now long-distance truckers), Ghana (commercial sex workers and laborers in gold mines) and Togo (taxi drivers, truckers and commercial sex workers) (Purves 1994).

Burkina Faso provides a final example of an NGO country-level intervention in West Africa. The 'Union des Routiers Burkinabè de

Lutte contre le SIDA' (URBLS) and the 'Association Française des Volontaires du Progrès' (AFVP) have supported peer education activities for several years among long-distance truckers who ply the international highway between Burkina Faso and Côte-d'Ivoire (AFVP 1995; Naigeon and Pourrat 1994; URBLS 1995). Following an interruption of activities during 1995/96, the project has started again, this time as part of a trans-border component of a regional health project for Western and Central Africa funded by USAID.

It is critical that lessons be learned from experiences and evaluations of HIV/AIDS initiatives such as these. Social scientists have a potentially important role to play in facilitating the assessment and analysis of these experiences and ensuring that lessons learned are disseminated in a form that is easily accessible to program staff and donor agencies.

Adding a new dimension? Recent efforts to introduce a regional approach to HIV/AIDS interventions in West Africa

A recent UNAIDS/World Bank sponsored initiative, the 'West Africa HIV/AIDS Initiative,' is another promising approach to HIV/AIDS prevention. This regional initiative endeavors to work with individuals and groups that practice mobile livelihoods (migrants and commercial sex workers). The approach focuses on social settings near major commercial and crossroads areas along international highways where people on the move carry out their livelihoods and engage in high-risk sexual networking. The initiative also aims to strengthen the links between problem-focused social science research and HIV/AIDS prevention actions.

Country-based teams trained in action research will implement HIV/AIDS prevention activities at selected crossroads sites along highways that link Senegal, Mali, Guinea, Niger and Burkina Faso with Abidjan, Côte-d'Ivoire. Recall that Abidjan is (a) a major West African terminus for people on the move, (b) the area of highest HIV infection risk in the West Africa region and (c) provides numerous settings for sexual networking that places people on the move and their sexual partners at risk of HIV infection (CCIP 1995; Painter and Bagassa 1995; Schoepf 1995; World Bank 1994b; 1996).

The innovative feature of this initiative consists of its aim to introduce a regional dimension to HIV/AIDS organizational and action capacity in West Africa by linking and coordinating several country-based activities in relation to the same target groups and similar settings of sexual networking and HIV risk. Despite the real need for a regional intervention, implementation of the West Africa HIV/AIDS initiative has been slow. Delays appear to be the result of the slow pace at which existing organizational structures can adapt or new structures be developed to implement a novel intervention strategy.

This is an important initiative worthy of support and careful assessment as it implements prevention activities. It deserves particular attention to ensure that, perhaps for the first time in the West Africa region, the potential for developing pertinent social science input is integrated from the very beginning of prevention interventions. Of

additional interest is the initiative's potential for maintaining a strong link between research and action throughout the life of the program.

In summary, social scientists have an important opportunity to assist with:

- generating pertinent knowledge relative to HIV-risk and risk management among persons and groups involved in mobile livelihood strategies in West Africa;
- ensuring that this knowledge is accessible to non-social scientists who work in HIV/AIDS prevention and, insofar as feasible, is translated into action either in the form of policy or concrete interventions;
- encouraging, cajoling or doing whatever else is needed to ensure that commitments by NGOs, national, bilateral and multilateral organizations for support of innovative AIDS prevention interventions are maintained and that important actions such as those we have described here move ahead, learn from their own practice (and the practice of others), and are able to improve the quality of interventions on the basis of practice.

Identifying existing community-based organizations for mutual assistance among groups involved in livelihood mobility for their potential contribution to HIV/AIDS prevention

Local organizational forms that embody a concern for the well-being of community members are as ubiquitous in Western and other areas of sub-saharan Africa as they are poorly understood. These community-based organizations among persons with mobile livelihoods may lend themselves as locally accepted, legitimized local structures for the incorporation of AIDS-related actions. These could range from dissemination of prevention information to follow-up and support of prevention efforts, to assistance with community-based care and social reintegration of persons living with HIV/AIDS within their home communities.

Examples of these local organizations were identified by a 1992 study of migrants from Mali and Niger in Abidjan, Côte-d'Ivoire (Painter *et al.* 1992). The description of these community-based organizations echoed earlier reports by observers of social organization among communities of migrants living and working far from their home communities in West Africa (Painter 1985; Rouch 1956; 1957; Schildkrout 1978). To date, however, national and international organizations involved in HIV/AIDS prevention efforts in West Africa appear not to have explored the potential for incorporating these local social structures in HIV/AIDS actions among migrants and their sexual partners.

In summary, social scientists have an opportunity to contribute to the elaboration of sustainable HIV/AIDS prevention and support actions by:

- identifying existing community-based (sometimes termed 'traditional') forms of organization for mutual assistance among persons on the move;

- assessing and initiating pilot activities for incorporating these organizations in AIDS-prevention actions (information dissemination, support and follow-up; even training);
- playing a more proactive role in calling the attention of HIV/AIDS prevention initiatives with people on the move to opportunities of this kind, and badgering them if need be to ensure that appropriate actions are taken.

Considering possibilities for modifying contexts of high-risk sexual networking by persons engaged in livelihood mobility

The final challenge and opportunity for social scientists appears to be so formidable that it is rarely mentioned within the context of HIV/AIDS prevention initiatives among people on the move. This entails the engagement of social scientists in efforts to modify the structures of opportunity and constraint that contribute in important ways to widespread livelihood mobility in West Africa, to high-HIV risk sexual networking in destination areas, and to the spread of HIV/AIDS. Greater attention needs to be given to the possibilities for modifying socioeconomic factors which reinforce high-risk sexual comportment. These factors shape the situations within which large numbers of people in West Africa organize their livelihoods and deal with risks of HIV infection (Lurie *et al.* 1995; Tawil *et al.* 1995; *cf.* Painter 1994b; Painter *et al.* 1992).

What should be done?

Social scientists need to give attention to issues having salience of a broader structural nature in addition to issues that are relevant for specific situations or levels such as individual/small group/community-level structures, contexts and processes. It is necessary to deal with multiple 'levels' in description, analysis, translation of research into action and finally, in prevention efforts. Focusing attention on the possibilities for changing individual behavior without an equally serious effort to focus on, and possibly modify the socio-economic settings of choices and decision-making, including decisions relative to HIV risk management in everyday life, is a luxury that we cannot afford.

If we are to believe the results of the many knowledge, attitudes, beliefs and practice (KABP) surveys that are published and presented at international AIDS conferences, there are too many people in sub-Saharan Africa who are aware of AIDS but who continue to engage in high risk sexual networking. This persistent and dangerous gap between awareness, attitudes, knowledge and human action is very probably sustained by contextual factors that influence individual actions. We need to address these issues. This will require greater commitment by the international community to identifying opportunities for modifying contextual or structural features that are linked —often causally— to high risk sexual networking and the spread of HIV/AIDS.

What is to be done if we cannot change these socioeconomic structures? The challenge here is for social scientists to identify and propose options that will potentially assist individuals and groups in identifying and practicing livelihood strategies that are less vulnerable to the deadly risks of infection by HIV.

In summary, social scientists have an opportunity to critically examine and explicate the relationships between mobile livelihood strategies, high-risk sexual networking and the socio-economic contexts in which these occur in West Africa. Furthermore, social scientists need to engage themselves at the level of structural modification and transformation of these contexts and processes on the basis of their analysis, their critical reflections and through contributions to policy development. If, finally, structural transformation does not appear to be a feasible option, social scientists then need to assist with the identification of strategies for better equipping people on the move and their sexual partners to pursue their livelihoods without placing their lives at risk due to HIV infection.

From analysis to action

The aim of this paper has been to identify areas where challenges and opportunities exist for social scientists to become more engaged with efforts to slow the spread of HIV/AIDS in relation to livelihood mobility in West Africa and sub-Saharan Africa more generally. For each challenge and opportunity presented, there is a need for social scientists to produce sound scientific knowledge but also to move beyond the production of social science knowledge. Stronger linkages are needed between social science research and HIV/AIDS prevention actions. Finally, social scientists need to examine the possibilities for modifying or transforming existing conditions that are conducive to high-risk sexual networking and the spread of HIV/AIDS, linked as these are to widespread livelihood mobility in sub-saharan Africa.

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Thomas M. PAINTER, *Livelihood mobility and AIDS prevention in West Africa. Challenges and opportunities for social scientists*

Summary — This paper reviews patterns and causes of widespread livelihood mobility in West Africa, describes the relationship between livelihood mobility and the spread of HIV/AIDS, and identifies several areas where social scientists can —and should— play an active role in current efforts to slow the spread of HIV/AIDS in relation to livelihood mobility. While social scientists have been involved in HIV/AIDS prevention in West Africa and other areas of sub-saharan Africa, the challenges and opportunities are such that social scientists must increase their levels of engagement and contribution. We make several recommendations concerning opportunities for social scientists to contribute to HIV/AIDS prevention in relation to widespread livelihood mobility in sub-saharan Africa.

Keywords: HIV/AIDS prevention • livelihood mobility • migrations • socio-economic development • West Africa.

Thomas M. PAINTER, *Déplacement des populations et prévention du sida en Afrique de l'ouest. Défis et opportunités pour les sciences sociales*

Résumé — Cette étude examine les modèles et les causes des intenses mobilités migratoires développées partout en Afrique de l'ouest et décrit la relation entre cette mobilité et la propagation du VIH/sida. Elle identifie différents domaines où les sciences sociales peuvent et doivent jouer un rôle actif dans les efforts actuels en vue de ralentir la propagation du VIH/sida liée aux mobilités migratoires. Pendant que les sciences sociales s'impliquent dans la prévention du VIH/sida en Afrique de l'ouest et dans d'autres zones de l'Afrique subsaharienne, les défis et les opportunités sont tels que les chercheurs en sciences sociales doivent augmenter leur niveau d'engagement et de contribution. En conclusion, plusieurs recommandations sont faites à propos des opportunités offertes aux sciences sociales pour contribuer à la prévention du VIH/sida en liaison avec les fortes mobilités migratoires en Afrique subsaharienne.

Mots-clés : prévention du VIH/sida • déplacement des populations • migrations • développement socio-économique • Afrique de l'ouest.