

Aulette-Root, Anna, Floretta Boonzaier, and Judy Aulette. *South African Women Living with HIV: Global Lessons from Local Voices*. Bloomington: Indiana University Press, 2014. viii + 166 pages. Paperback. \$25.00.

South African Women Living with HIV extends the research on the social construction of illness, adding the voices of South African women living with the disease. The emphasis on gender inequality and gender injustice offers a fuller understanding of people living with HIV and makes the book a wonderful addition to research in medical sociology. Psychologists Anna Aulette-Root and Floretta Boonzaier, and sociologist Judy Aulette utilize critical postcolonial feminist theory and qualitative methodology to explore the “political, economic, and social barriers that prevent people from obtaining access to the medicines science has created” (p. 5). The authors are unapologetically feminist in their pursuit of gender equity and gender justice for women living with a disease previously defined by research on males. They highlight women’s historical lack of power and control over their own sex lives and even less over the sexual decision-making of men.

One of the goals of the book is to “ensure the findings are useful to women who wish to successfully participate in programs that help them to more effectively maintain their own physical health, decrease the development of resistant strains of HIV, and preserve human rights” (p. 8). Qualitative research allows the authors to present the voices of marginalized women in ways that are helpful to researchers and to other women living with HIV. The book includes discussions of how South African women living with HIV construct a sense of self while living with a stigmatized identity. The authors realize that it is essential to learn from women living with the disease who reside in “so-called Third World nations” (p.8), in order to comprehend the global inequities relating to the types of treatments available and which groups have access to often culturally-specific treatments.

Although Aulette-Root, Boonzaier, and Aulette state that the work is situated in psychological research, the book is solidly sociological in its emphasis on the influence of culture, history, and politics on the lives of the respondents, and in the interplay between various levels of the social world, including family, community, nation, and global society. Adding the history of what the authors call the South African “Colored” community highlights the importance of C. Wright Mills’ *The Sociological Imagination*, which examines the interaction between history and biographies, on fully comprehending the social lives of the subjects of the research. Such an application of interdisciplinary elements is one of the strengths of the book.

A second strength is the addition of research on stigmatization on already marginalized groups. The authors include an extended lesson on the many aspects of stigma that can affect the decision-making processes of Colored women living with HIV. They provide research on stigma and blame, stigmatizing and social distancing, gendered HIV stigma, women’s experiences of stigma, the psychological impact of stigma on women living with HIV, and stigma on disclosure of HIV-positive status. This inclusion greatly assists readers’ abilities to understand the findings of the book.

A third set of welcome additions are the many long quotes that allow the voices of respondents to be heard, rather than filtering them through the researchers’ voices. The quotes emphasize the difficulties of the women’s lives and give the readers a sense that the respondents are speaking directly to them. The findings on the role of stigmatization on decisions regarding disclosure of HIV status and the normalization of self through work and relationships with men extend the research by sociologists Betsy Fife and Eric Wright on the effects of the various

dimensionalities of stigma on individuals, including self-perception, internalized shame, and social isolation.

Findings regarding care work, violence, and women's bodies widen the research by sociologist Peter Conrad on the social construction of disease by adding the gendered nature of the social construction of illness. The women's voices lend credence to prior research, and the findings help to bolster the authors' belief that South African Colored women living with HIV have a viable contribution to make for understanding the disease. Their explanations underscore the need to hear from various social groups, as not all women and men experience the disease in the same ways.

One of the weaknesses of the book is that it relies on a small sample size of fifteen women which were part of a community support group. Although the respondents ranged in age from 34 to 50 and had several different occupations, there is very little diversity among them. Also, the respondents were limited to women living with HIV who were "comfortable with conducting the interview in English" (p. 32), which begs the question of how might women who spoke in Afrikaans differ from the respondents fluent in English.

Regardless of the shortcomings, the book is a much-needed contribution to research on the social construction of illness, gendered inequality and global gender injustice, and the lives of people living with HIV. It would be a welcome addition to undergraduate and graduate classes in psychology, sociology, women's studies, and cultural anthropology, with its emphases on the impact of culture and history on understanding people's lives and decision-making processes. The findings would allow for much discussion on issues of social class, gender, and race and ethnicity, particularly in regards to sexual decision-making and negotiations.

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