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### New Taboos

To Help Fight AIDS, Tanzanian Villages Ban Risky Traditions

Bawdy Dances, Night Trysts, Even Flirting Outlawed; A Model for Prevention?

'It's Survival of the Smartest'

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MWALINHA, Tanzania—Asha Saidi's tryst was supposed to go like this: At dusk, she would meet the man at an abandoned hut on the edge of the village. He'd bring four cans of Safari Lager. They'd have sex. Then he'd give her 10,000 Tanzanian shillings—roughly \$13—to help feed her five children.

Instead, she says, the pair was just polishing off the beer when club-wielding militiamen swept in and arrested them for violating a new rule banning nocturnal visits to abandoned huts.

"If I do it again, the whole village will think I'm mentally retarded," Ms. Saidi

Here on the shores of Lake Victoria, hundreds of communities have discovered a potential key to curbing the African AIDS epidemic: Laws can sometimes make progress where doctors and health workers alone have failed. In the past few years, governments and village councils have cracked down on a wide variety of traditional social and sexual practices that had made this area quite literally a breeding ground for HIV.



Asha Saidi

Mwalinha, population 2,650, a dusty scattering of mud-brick huts and cassava fields, has outlawed dancing after dark, and women can't be served alcohol after 6 p.m. The village of Itumbili, a few miles down rutted roads, recently banned a particularly hazardous harvest rite called chagulaga, meaning "choose," which involves men chasing unmarried women into the bush and coupling for the night. Another village, Nyakaboja, even made it a crime to flirt, punishable with the payment of a chicken.

For the most part, the new laws arose from an innovative research project funded by the Dutch government. Originally, the project's goal was simply to draw up maps of 900 villages and neighborhoods in Magu district, which covers 1,850 square miles, pinpointing dance clubs, abandoned huts and other likely hotspots for HIV transmission. Gradually, however, village leaders began using the maps to create legislation aimed at nothing less than a grass-roots transformation of their culture.

Now, Magu has become something of a Mecca for health professionals scrambling to stop the spread of a disease that has already claimed 17 million lives south of



the Sahara—nearly 80% of the global AIDS death toll. More than 200 AIDS experts from all over the world have descended on the area in recent months, and other districts in Tanzania are attempting to replicate the program.

"It's survival of the smartest, not survival of the fittest," says Reuben Ole-Kuney, commissioner of Magu district.

So far, it's not clear whether the patchwork of village rules has actually reduced the HIV infection rate, which measures 12% among blood donors at the Magu District Hospital. Health workers consider that sample group typical of the adult population in larger towns. And it's hard to say whether Magu's experience could be successfully duplicated elsewhere—particularly in urban areas where people don't know each other well and may be less susceptible to peer pressure.

What is more, AIDS experts say, helping overhaul a scattered system of social codes can be enormously labor-intensive and time-consuming.

Still, some early evidence is encouraging. A survey by the Dutch group indicates that 38% of Magu district residents see safer behavior in their villages. Teachers report a decrease in pregnancies among schoolgirls, a sign that youths are having less sex or using more condoms.

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## Peccadilloes and Penalties in Tanzanian Towns

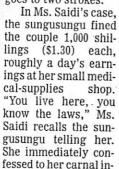
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"A while back, we caught people all the time returning from the well or the mill at night," says 48-year-old Mohamed Athuman, chief of the village militia in Mwalinha. "Nowadays, people are trying to be more careful."

#### Harsh Punishment

Such caution is often enforced at the end of a stick. In Tanzania, punishment for social violations is meted out by militia—called *sungusungu*, after the region's aggressive army ants—equipped with bows, spears and clubs. Though endorsed by the national government and overseen by village councils, militiamen wear no uniforms and receive no pay, and usually take a cut of the fines they impose on village scofflaws. "Sometimes we beat them with a club, if they're rude," says Boniface Sengerema, a 39-year-old commander of the Mwalinha militia. "If they repeat the same

offense, the penalty goes up. If it was one stroke with a club, it goes to two strokes."





Mary Kagimba Makungu

tent—thus avoiding the beatings delivered to the unrepentant—and promised not to repeat the offense.

Ms. Saidi, who is 34 years old and divorced, says her partner paid both shares of the fine, but fled without giving her the 10,000 shillings he had promised. Even worse, her family was embarrassed and angry with her. "I thought there wouldn't be any patrols out," she says, averting her gaze and covering her mouth with the collar of her tattered shirt.

#### Focus on Magu

The Dutch-funded research group, the Tanzania Netherlands Support Program on AIDS, got its start in 1990 as a joint effort by the two countries to study the spread of the virus. The group decided to focus on Magu because it has particularly poor health-care services, even for Tanzania. Magu District Hospital has just one doctor and no X-ray machine. Many people here never know or won't admit they have AIDS. Some who do know don't bother seeking treatment or use traditional healers. And the average resident earns just \$70 a year, meaning that few can afford standard medical care, much less the expensive drug cocktail that has been extending lives in rich countries. Even under the terms of a price-reduction pact now being negotiated among the United Nations, African governments and several major pharmaceuticals companies, a year's worth of a three-drug cocktail would likely be sold for at least \$950.

Also, the district's demographics seem particularly ripe for AIDS transmission. Magu is home to hordes of itinerant fishermen who catch Nile perch in Lake Victoria and HIV in lakeside brothels. Overall, in this rural district of 415,000 people, more than 2,000 are believed to contract the virus each year—a rate comparable to the rest of sub-Saharan Africa. In the greater Mwanza region, which includes Magu district, one in three deaths is caused by AIDS.

The researchers, who included mostly Tanzanians and some Europeans, started their project by asking villagers—in separate groups of men and women—to draw maps identifying the most likely places for HIV transmission. The men usually marked the local bar, the guest house and the dance club. The women often added the school, the church, the well, and the forest, suggesting the prevalence of rape in isolated places and sexual abuse of schoolgirls by teachers.

Once the maps were completed, men and women sat down together and compared notes. These gatherings of roughly 10 to 15 people often led to unprecedented public discussions of sexual practices and the dangers of AIDS. Then, guided by a village leader or a health worker trained by the researchers, the groups began suggesting ways of bringing local statutes to bear on the HIV plague. Sometimes, the groups proposed laws to existing village organizations, such as the social-services committee. The villages also formed school AIDS committees to draft rules relating to students. A sample: Schoolchildren are barred from visiting pornographic video shows. In Magu, these shows are commonly put on by traveling entrepreneurs who charge admission.

Ultimately, the proposals went to the village council for consensus approval. In some cases, the laws were written down—usually on hastily crafted signs—but often they were just passed on by word of mouth.

#### Hotspots Marked in Orange

In Nyakaboja village, just an hour from Tanzania's famed Serengeti plains, the villagers drew their map on curled and soiled poster board, marking hotspots in orange felt-tip pen. One of the places identified was the shoreline—a tacit admission that people knew full well what happened when they sent their daughters to buy fish without giving them money to pay for it. One law in the village now prohibits sending children to purchase dinner without adequate funds.

The new AIDS laws in Nyakaboja come with a graduated set of penalties. The lowest-level offense is seductive flirting. Sitting in the village square watching women perform an anti-AIDS dance in which they wave condoms, John Lusesa, secretary of the village social-services committee, takes a stab at describing what constitutes illegal flirting. "Suddenly smiling," Mr. Lusesa says. A normally taciturn man, he contorts his face into a grin to illustrate the point. Under the new law, a convicted flirter must pay one chicken. By comparison, the fine for excessive drunkenness is one goat.

Another spot marked on Nyakaboja's AIDS map is the hut of the village's traditional healer. In the past, healers would reuse blades after making incisions. Now, Ny-

akaboja's healer must follow a strict one-patient, one-blade regimen, or risk being fined a cow. A repeat violation at this level is grounds for expulsion from the village, an extraordinary measure in Tanzanian society. So far, that hasn't been necessary.

"We're penalizing people less often because almost everyone is behaving better," says James Daudi, 60, chairman of the Nyakaboja village AIDS committee.

Similarly, in Itumbili, the decision to ban the bawdy chagulaga festival also sprang from the villagers' growing awareness that their traditions were killing them. Until a few years ago, Itumbili held post-harvest circle dances after which unmarried adolescent girls would run into the bush, each pursued by several young men. When they caught up with her, she would select one as her partner for the night. Sometimes chagulaga led to marriage. More often than not, it was just a socially acceptable form of casual sex. Now, however, it's neither socially acceptable nor legal.

In village after village, efforts to com-

bat AIDS have caused shifts in the relationships between men and women, parents and children, and students and teachers. For example, one major ethnic group here, the polygamous Sukuma people, traditionally mandated that a dead man's wife, children and property passed to his younger brother. The original idea was to protect the widow and her children from want. But if a husband dies of AIDS, the widow may put the younger brother and his other wives at risk. These days, more widows are taking advantage of a 1998 national law that allows them to keep the family land and property, and very few are marrying their brothers-in-law.

Mary Kagimba Makungu, a 49-year-old pharmaceuticals technician in Magu town, watched her husband die of AIDS two years ago. The couple sold their belongings—except a bed, mattress and two chairs—'to pay for his care. Desperately poor and beginning to show symptoms herself, Ms. Makungu nonetheless says she is relieved she won't be forced to marry her

brother-in-law. "They're afraid of me," she says of her deceased husband's family.

Women are also becoming more assertive about demanding that their husbands provide enough money for food—eliminating a common motivation for prostitution. And it's no longer uncommon to see men endorsing the use of birth control. On a recent day, scores of rugged fishermen gathered in Nyamikoma village to demand that health workers pantomime the use of a female condom.

Even once-unspoken taboos are now being plainly stated. In Itumbili village, the school rules are posted in the headmaster's metal-roofed office. In addition to all the classic admonitions against tardiness and leaving school grounds are new ones such as this: "Love-making is absolutely prohibited for boys and girls during the school year."

At least one village has even gone so far as to help teenagers reprimand their

parents. Sundi, a 17-year-old from Mwamabanza village, who asked that her family name not be published, says her father used to get drunk, force himself on her mother, and cavort with other women. When Sundi warned him that he was putting himself and her mother at risk, he threatened to beat her, she says.

Sundi then turned to her school's "guardian teacher," a female staffer assigned to help students deal with sexual molestation and other tough AIDS-related issues. The guardian, one of more than 100 appointed in Magu as part of the Dutchfunded research project, encouraged Sundi to keep trying. The threats stopped, but Sundi's father was furious. So the school AIDS committee weighed in with a lecture to the father, and Sundi's situation gradually improved, she says.

Ten years ago, this never would have happened. "In Africa, you can't just tell your mother what to do," says Zaida Mgalla, the Dutch-funded group's specialist on youth programs.

But Sundi, a shy, slender girl, says she had no choice but to act. "I knew it was dangerous: Mother could die, father could die," she says. "I'd be left without parents."

#### American Homestar Corp.

#### Creditor Protection Sought Under the Bankruptcy/Code

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American Homestar Corp. filed for protection from creditors under Chapter 11 of the federal Bankruptcy Code, citing a sharp downturn in the manufacturedhome business. The Houston mobile-home maker, saying that sales industrywide dropped 24% in 2000 from 1999, has had a string of consecutive quarterly losses. For the fiscal first quarter ended Sept. 30, American Homestar posted a net loss of \$9.3 million, or 50 cents a share, including special charges for severance agreements and a plant closing in Alabama. Revenue dropped 27% to \$120.3 million from \$165.8 million in 1999. The company previously shut down some operations and consolidated others. In the past year, American Homestar has cut its number of plants to nine from 14. Under Chapter 11. a company continues to operate while it works out a plan to pay its debt. American Homestar said it plans to file a plan of reorganization by April 30. As of Sept. 30 American Homestar had assets of \$363 million and liabilities of \$279 million.