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**Book Review of, The Politics and History of AIDS Treatment in Brazil in Latin American Politics and Society**

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In the 1990s, conventional wisdom held that treatment for HIV/AIDS was too expensive for governments in developing countries to provide; these countries needed to ignore the needs of people living with the virus, to focus instead on prevention efforts. This approach was challenged by the Brazilian government, which made the decision to provide medications for free to all people living with the virus within reach of federal clinics. The result was a conflict that pitted the Brazilian government against both multinational pharmaceutical companies and the United States government, in a struggle about the meaning of intellectual property, the character of the World Trade Organization, and the limits of human rights. The result not only dramatically changed the experience of the epidemic in Brazil, but also how public health experts advocated fighting the pandemic globally. Amy Nunn’s work focuses on the elite politics and social movements out of which the Brazilian program emerged.

Brazil was an unexpected place for a paradigm-challenging approach to HIV and AIDS to appear, given that the early history of the epidemic in the country was marred by the same discrimination and hysteria found in other nations. It is also surprising that this successful approach emerged at a time when Brazil suffered from serious economic challenges, a newly democratic government, and an inefficient and under-funded civil service. Nunn’s work helps us to understand how an imperfect state was able not only to achieve its goal, but also to reshape the global debate about HIV/AIDS treatment, by showing that treatment could save both lives and expense.

Nunn’s work focuses on the critical moments when decisions were made, which locked subsequent leaders into particular paths. Much of this history is based on detailed interviews with eighty-seven people, including such key players as Paulo Teixeira, who led São Paulo’s first AIDS program. Nunn’s ability to describe the experience and thoughts of these key figures allow her to create a detailed description of the Brazilian political process from the perspective of the actors themselves. For example, these key people explain why NGOs decided to focus on the courts rather than legislation to implement change, because the legislature was historically a slow and ineffective means to bring about reforms. They also explain how leaders were able to draw on their experience, such as Teixeira’s history fighting another stigmatized disease, leprosy, to create health policy that dealt with social issues.

With this context, Nunn also explains how non-governmental organizations managed to form an alliance with the state, which was at the core of the their success. She begins by explaining how health reformers (*sanitaristas*), many of whom were Communists, moved into the health bureaucracy with the end of military rule. These individuals used their extensive ties with civil society to conduct HIV/AIDS prevention and treatment campaigns. These individuals had emerged from social movements, and as such were unthreatened by them. Nunn’s work correctly emphasizes both the contingency of key events, and the central role that the *sanitaristas* played in implementing Brazil’s policy. Indeed, at points it was the sheer will and dedication of the latter of the *sanitaristas* that
explains the success of some policies, such as ensuring the delivery of medications to people living with HIV/AIDS. By carefully describing the sanitaristas’ role in the government, Nunn is able to build a picture of how the Brazilian model emerged not by careful design, but rather as a result of a political alliance between individuals within the government, and nongovernmental organizations outside of it.

Of particular importance is Nunn’s description of how AIDS activists helped to write Brazil’s application for a World Bank loan. Nunn correctly depicts this as a turning point in Brazil’s efforts to fight HIV. Although the World Bank opposed the government provision of treatment to people living with HIV and AIDS, this loan provided the infrastructure that enabled the Brazilian government to so. It also provided massive funding to HIV/AIDS NGOs, which substantially raised the political costs of not providing treatment. The Brazilian government, however, soon faced a financial challenge, because of the high costs of providing new drugs. It met this danger by threatening to issue compulsory licenses to produce generic medications if pharmaceutical companies did not lower their prices. This tactic forced Brazil into a political contest with both multinational pharmaceutical companies and the U.S. government. Nunn’s work is invaluable in describing the political interplay between domestic politics and international affairs during this contest, in order to explain why Brazil held to this course in the face of intense opposition, and ultimately won. In this section, Nunn draws on interviews with pharmaceutical executives, to create a balanced account of this struggle (p. 127). As a result of this victory, access to HIV/AIDS medications has come to be defined as a human right internationally, and more people now have access to these drugs now than would have been imaginable a decade ago. In part, this has been because the Brazilian policy proved that it was less expensive to keep HIV positive people from falling ill, than to provide end of life care in public hospitals. This policy also created an incentive for people to know their status, which was critical to prevention efforts.

The book does have some minor weaknesses. For example, there are few voices of people with living with HIV/AIDS, to talk about how the changes in government policy affected them. Nunn’s work would also have benefited from a deeper discussion of the epidemic’s course, to provide a context for the political debates that her work describes. How did the varied manifestations of the epidemic in different regions shape perceptions of the virus and those it infected? For example, the early history of the epidemic largely played out in the urban core of Brazil’s south-east, the center of Brazil’s political and economic establishment. This shaped the government’s response to the epidemic, in a way that a rural epidemic in Brazil’s north-east would not have. Similarly, a greater discussion of the gay movement, and of the social lives of HIV positive people, might also have enriched her discussion of non-governmental organizations. Still, her focus was on the high-level politics surrounding HIV/AIDS treatment, and in this area her work excels.

In some respects, the central question of the HIV pandemic in Latin America is why HIV’s prevalence has not generally reached levels comparable to that of some states in Southern Africa and Asia, despite social inequalities, patriarchal structures, drug usage, and homophobia. Nunn’s work implicitly suggests one reason that this may be the case.
may be the region’s democratization. Throughout the region, HIV appeared at the same time that military governments were collapsing. In Brazil, it is clear that the social movements and political pressures that underpinned the nation’s successful program to address HIV/AIDS would not have been effective under an authoritarian regime. For example, the media pressure that compelled Brazil’s Minister of Health to purchase drugs for HIV in 1996, would not have worked during military rule. This raises the question of whether democratization itself can be a variable that fosters successful public health interventions against HIV. Of course, there are counter-examples such as Cuba, an authoritarian state that implemented an effective program to control HIV, and South Africa, where a newly democratic government fell under the sway of AIDS denialists, with tragic results. Nunn’s work, however, shows how political struggles in a democratic system can challenge received economic wisdom, and lead to an effective and innovative HIV/AIDS program. With its impressive research and clear argument, Nunn’s work will be a long represent a key resource for people interested in how Brazil fought the greatest pandemic of our time.