AIDS: Priorities for Research into Aids and Migrant Labour

This article has been written by members of the Sociology of Work Programme based at the Sociology Department, University of the Witwatersrand. This project will be studying the spread of sexually transmitted diseases, including AIDS, amongst migrant workers.

The need for educational campaigns

The incidence of HIV positive carriers amongst Malawian miners has leapt from 4% to 10% in about 18 months. This emphasises the urgency for research and action to prevent Aids spreading amongst migrant workers.

Clearly there is an urgent need for information and educational campaigns about. AIDS. This presupposes a knowledge of sexual attitudes and practices in those to whom information and education needs to be directed. However, apart from a couple of historical studies of sexuality on the gold mines, little appears to have been published - certainly little about current sexual practices of migrant workers. The following issues are important to look into.

The nature of homosexual practices in compounds

Moodie found homosexual relationships on the gold mines were strictly controlled according to social position and tended to be monogamous rather than promiscuous. For example an older supervisory worker - who was thus in a more powerful position - would take a young recruit as his "wife". The motivation behind such relationships seemed to be an expression of power as well as pleasure. The subordinate partner was

not permitted to ejaculate. Moreover, sex involved thigh contact and not anal penetration.

This suggests that the risk of the HIV virus spreading through homosexual practices in the mine compounds is small.



The migrant labour system creates conditions for the virus to spread

Contact between migrants and women in nearby townships

Studies elsewhere indicate the greater the number of sexual contacts the greater the likelihood of contracting AIDS. On the mines the workforce has steadily stabilised since the mid-seventies. Workers are spending ever longer periods on the mines and establishing greater contact with women in the local townships. It is not known whether these liasons are casual or permanent, nor what the prevalence of prostitution is. Further questions concern the experience of women migrants living in single sex hostels, squatter camps and neighbouring farms. Some women may resort to prostitution owing to low paying jobs or unemployment. Also of critical consideration are attitudes to the use of condoms - certainly miners view them with great suspicion.

What happens to repatriated migrant workers infected with the HIV virus and/or suffering from AIDS?

The mines will be repatriating a growing number of mainly Malawian workers some of whom are terminally ill. The mines pay no compensation and little has been done to prevent the spread of the disease to workers' families and communities.

Research into the effects of the migrant labour system is needed urgently.

Underlying these questions is the fundamental issue of the migrant labour system itself. Efforts to prevent the spread of AIDS that merely concentrate on education and
counselling do not recognise the social and political factors that contribute to unsafe
sexual practices as these relate to the spread of the virus. The single sex migrant labour
system institutionalises many factors that facilitate the spread of AIDS: long absences
of men and women from their partners lead to migrants and those left at home seeking
new relationships; single sex hostels create a market for prostituion; regular travel between home and work communities contribute to the efficient spread of the virus from
infected communities to those free of infection. Thus research aimed at answering these
questions as well as those posed above is urgently required.

Since the early eighties, urban labour markets have assumed greater permanence and the migrant labour system has become a less significant source for industrial workers. But even if the migrant labour and hostel system are dismantled in the next couple of years, current forms of social and sexual relations may take longer to break down. A century of migrant labour has moulded norms and mores of relationships, shaping attitudes to sexuality and consequent behaviour which may be conducive to unsafe sexual practices.

Clearly research is imperative to answer questions about sexual attitudes and behaviour. Preventative action must empathise with, rather than moralise against, the people it aims to reach. But no matter how well conceived and executed such action may be, the prevention of AIDS amongst migrant workers and those they relate with will depend largely on the eradication of the migrant labour system and the social behaviour it encourages.

References

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