

BOOK REVIEWS

Vincanne Adams and Stacy Leigh Pigg,
editors

*Sex in Development: Science, Sexuality, and
Morality in Global Perspective*

Durham, North Carolina: Duke University Press, 2005.
Cloth, 360 pages, \$84.95, ISBN 0-82233-479-8; Paper, 360
pages, \$23.95, ISBN 0-82233-491-7.

This is an excellent book for those engaged in designing and implementing programs that promote family planning and safe sex. Its central assumption is that sex is morally meaningful in all societies: there are moral and immoral sexual behaviors. In contrast, development projects—such as population management, human rights, disease prevention, risk reduction, child survival, and maternal health—export and promote the distinction between healthy and unhealthy, or risky, sexual behavior. The book's central concern is, therefore, about the attempts to replace moral evaluations with ones that family planners and others consider to be more objective.

The book's most valuable contribution is to show, through ethnographic research, just how different local understandings of sex are from the understandings of those designing and implementing programs to create a universal "normal" sexuality defined in terms of health rather than morality. As an exercise of imagination, consider what the response of Westerners would be if the World Health Organization announced that we would all live longer and healthier lives if we were polygamous rather than monogamous, and cited life-table analyses that proved this point. Then suppose donors funded governments and nongovernmental organizations (NGOs) to educate those of us in the West about the distinctions we should make between "facts" and "misconceptions," and to persuade us to discard the values we place on monogamy and to recognize the advantages of having many wives rather than just one. Workshops might be conducted on how to reorient our domestic and family structures to be consistent with this brave new world. Yet would an attempt to encourage polygamy in monogamous societies be so different from the attempts of experts, donors, governments, and NGOs to persuade

Nepali and Ugandan husbands and wives to communicate about sexual and reproductive decisions or to space their births?

A second valuable contribution of this volume is to demonstrate just how various local moralities concerning sex are, with far more distinctions than having one wife or many. The chapters cover Nepal (Stacy Leigh Pigg), Tibet (Vincanne Adams), Russia (Michele Rivkin-Fish), Uganda (Shanti Parikh), Indonesia (Leslie Butt), India (Heather Dell and Lawrence Cohen), and Côte d'Ivoire (Vinh-Kim Nguyen). I expect even those who read only one or two chapters will be persuaded, as I am, that trying to change any group's understanding of sex is difficult without also understanding where they start from. In light of the variety of local understandings of sex, designing interventions that can be scaled up effectively will seem impossible.

Readers may find it troublesome, as I did, to struggle with the postmodern language of the book, which was surely written for sociologists and anthropologists in academia who are likely to exalt the local cultures they study and who are, at best, skeptical of development projects. For example, Part 1 of the volume includes essays on "The Production of New Subjectivities." Despite this heading, the essays are well worth reading, for they illustrate "the concrete technological, political, and medical instruments that are used in creating new sexual behaviors and sexual identities associated with sex education, family planning, fertility control, and AIDS prevention efforts" (page 67). Other readers will take umbrage at the viewpoints of the contributors, which range from skeptical to dismissive of agencies claiming that Western notions of healthy sex are objective and should be universal. For many, the detailed description of local sexual moralities in Part 2, forbiddingly titled "The Creation of Normativities as a Biopolitical Project," will seem heavy going.

Yet, I certainly learned a lot about varieties of sexual rules, about what counts as pleasure, and about what counts as moral sex in a range of cultures. And I think it would be important for those attempting to replace these rules and understandings with the simple distinction be-

tween healthy and unhealthy sexual behavior to have the sort of deep ethnographic knowledge that this volume provides. An obvious practical implication is that intervention projects should include sophisticated ethnographers such as the contributors to this volume—although the intervention community is unlikely to want to spend the money and time that this approach would require. Simply having a local partner to provide a gloss of “cultural sensitivity” is not enough, however. In my experience, urban elites either do not know enough or are unwilling to say, preferring rather to adopt the “healthy-unhealthy sex” rhetoric of the donors and NGOs.

Ultimately, the cumulation of chapters in this volume make overwhelmingly clear that we need to pay more attention to our own cultural constructions of sexual behavior as well as the cultural ground on which our attempts to export them fall.

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Ruth Levine and the What Works Working Group of the Center for Global Development *Millions Saved: Proven Successes in Global Health*

Washington, DC: Center for Global Development, 2004.
Paper, 167 pages, \$26.95, ISBN 0-88132-372-1.

The volume *Millions Saved: Proven Successes in Global Health* presents 17 case studies of program success in the areas of reproductive, adult, and child health in developing countries. An introductory overview extracts useful lessons from these past successes for developing country and global health policy. Convened by the Center for Global Development’s Global Health Policy Research Network as the “What Works Working Group,” the task force for this project was comprised of a distinguished international team of 15 scientists, policymakers, and health innovators who are acknowledged experts in international health development.

The review includes successful global campaigns, such as the global program to eradicate smallpox; successful regional initiatives, such as the eradication of polio and the control of Chagas disease in Latin America, and measles vaccination, guinea worm reduction, and onchocerciasis (river blindness) control in Southern Af-

rica; and successful national campaigns, such as the promotion of diarrheal management in Egypt and tuberculosis control in China. National success stories in chronic disease prevention are also reviewed—case studies of tobacco-consumption reduction in Poland, iodine-deficiency reduction in China, and the prevention of dental caries in Jamaica. Three cases concern reproductive health: the role of the national family planning program in the Bangladesh fertility transition, the promotion of safe motherhood in Sri Lanka, and the successful national campaign to prevent the spread of HIV infection in Thailand. The volume contains one comparative review, a discussion of successful meningitis-vaccination campaigns in Chile and The Gambia. Thus, 16 of the cases review specific health-service interventions. One review discusses elements of a successful approach to reaching Mexico’s poor with a package of basic health services.

Perhaps as a consequence of its emphasis on specific campaigns and illnesses, the volume demonstrates the value of charismatic leadership, organizational focus, political commitment, and special resources for achieving impact. For example, the chapter on smallpox eradication outlines the feasibility of responding to the complex organizational challenge of canvassing the rural and remote populations in impoverished settings. Sound leadership combined with the effective use of evidence-based planning produced dramatic results. Although eradication campaigns are sometimes criticized as a costly distraction for poor countries, cost analyses discussed in the chapter establish the potential long-term economic benefits of eradication efforts, lending support to contemporary investment in the global polio-eradication campaign. The smallpox chapter and chapters on successful vaccination campaigns against polio and measles provide useful historical grounding for the investments that have recently been directed to the Global Alliance for Vaccines and Immunization.

Despite these important contributions, one significant limitation of the book is its focus on successful campaigns rather than successful strategies for developing health-care systems. Although the need for effective delivery systems is acknowledged in the summary chapter, these studies emphasize the elements of successful vertical program success rather than examples of how integrated health-service systems can be developed and sustained successfully. The volume will be of limited value to developing-country health planners charged with the task of developing health-sector reform. Case studies of health-sector reform would demonstrate ways to develop integrated systems of care, feasible means of scaling up pilot projects, examples of sector-wide health-care financial planning, strategies for developing serv-

ice quality, means of decentralizing management and of building community involvement, and other themes of national health-sector reform.

The review is, nonetheless, a valuable resource for the international health-policy community. Conclusions emerge from the case studies that are directly relevant to building consensus for actions that solve the health problems affecting the world's poor. All case studies in the review demonstrate that success is possible, even in challenging circumstances. Several case studies demonstrate that a major impact can be achieved at low cost. All case studies are based on solid evidence, demonstrating the policy value of research. The reviews document examples of successful public effort, addressing the common misperception that public-sector programs cannot work. Principles of international partnership are documented, demonstrating that local initiative and investment can succeed even in constrained resource settings, particularly if action is supported by catalytic investment from the international community. The volume provides solid evidence that millions of lives have been saved by the introduction of curative and preventive health services. Its conclusions suggest that millions more could be saved if the report's recommendations for consensus and investment were adopted by the global development community.

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*Arab Political Demography, Volume One:
Population Growth and Natalist Policies*

Brighton, UK: Sussex Academic Press, 2005. 272 pages. Cloth, \$75, ISBN 1-902210-70-0; paper, \$40, ISBN 1-902210-71-9.

Arab Political Demography, Volume One examines the evolution of population policies in the Arab World in light of demographic developments in the past half-century. It focuses on political influences, on demographic policies, and in particular, on the evolution from pronatalist policies in effect during the 1950s, '60s, and '70s to antinatalist or neutral policies adopted in the decades following the end of the October 1973 oil boom.

Chapter 1 provides a brief review of the quantity and quality of demographic data available for several Arab countries. It points out the paucity of demographic data available for many of the countries covered and highlights

the particular dearth of data concerning ethnoreligious composition. The author attempts to provide estimates of the sizes of the ethnic populations of various Arab countries, but these estimates appear to be highly speculative. In addition, the discussion of sources of employment and unemployment data is outdated. Considerably more data are now available on these topics than are presented in this chapter.

Chapter 2 provides a primer on demographic transition theory and its application to the Arab world. It lays out a long list of reasons for traditionally high fertility rates in Arab countries, most of which are generic and apply to any part of the developing world. Little specific information is provided to explain how these factors operate differently in Arab countries compared with the rest of the world, and the author makes no attempt to determine their relative contribution to high fertility in Arab societies. The list of factors accounting for fertility declines since 1980 is equally generic and backed up, for the most part, by sketchy or anecdotal information about the specific situation of Arab countries. Incidentally, the author states that child labor is increasing in countries such as Egypt, Jordan, Lebanon, Morocco, Syria, Tunisia, and Yemen on the basis of doubtful information drawn from a popular magazine. This information is refuted by findings from a number of other studies of child labor conducted in these countries.

Chapter 3 presents an analysis of the emergence of the employment problem in the Arab world as a preamble to a discussion of changes in population policies in these countries. The author argues that pronatalist policies in the 1960s and '70s were driven in part by a perception of labor shortages in many countries of the region, including both the sparsely populated oil states and the nonoil states such as Jordan and Syria. By implication, the emergence of a structural unemployment problem in these countries after the oil boom led to the adoption of policies more favorable to limiting population growth. Although this argument appears plausible at face value, it is too simple. The inability of the oil-rich states to absorb the growing number of young nationals into their labor markets has less to do with overpopulation than with institutional factors that have rendered these countries' labor markets dependent upon cheap foreign labor. By using public-sector employment as the chief mechanism for redistributing their oil-wealth to nationals, the Gulf states have raised wage expectations of nationals far higher than what employers in the private sector are willing to pay. This change has put intense pressure on these countries' governments to maintain the flow of foreign workers. Thus, the problem being described in the first instance is institutional rather than

demographic. In the populous nonoil states, recognition of growing demographic pressures on the labor market predates the oil boom, although, as the author notes, the intensity of the governments' efforts to do something about this situation may have diminished during the boom years.

Chapter 4, the core of the book, tackles explicitly the issue of population policies of the Arab countries. The author documents the pronatalist policies of the 1950s and '60s while noting early experimentation with family planning in Egypt in the 1950s and the adoption of national family planning programs in Egypt, Morocco, and Tunisia in the mid-1960s. Although attitudes about the danger to national development posed by rapid population growth were beginning to change in the 1970s, Arab governments generally preferred an indirect approach to fertility decline to direct governmental antinatalist measures. They promoted socioeconomic development by means of uncontroversial measures such as women's education and employment, with the hope that such measures would lead to fertility decline. Only in the mid-1980s did most of the countries in the region begin to adopt explicit antinatalist measures by implementing national family planning programs.

Although this volume makes a valuable contribution to the Arab population policy literature by tracing the evolution of population policies in the Arab countries and by describing the factors that led to changes in

these policies, the book suffers from a number of shortcomings. The introduction begins with a discussion of the growing gap between rich and poor Arab states and the reasons for this gap. Unfortunately, this analysis of growing differentiation and heterogeneity is not elaborated upon effectively in the rest of the book. Subsequent chapters intermittently distinguish between the overpopulated Arab countries and the rich Arab oil states of the Gulf Cooperation Council, but this distinction fails to capture the extent of heterogeneity of population policies in the Arab World. The book includes little discussion of the situation of impoverished countries such as Sudan and Yemen, where demographic trajectories differ greatly from those of more populous Arab countries. Much of the analysis in Chapters 1, 2, and 3 relies on substandard evidence that includes numerous references to popular journalism. Throughout the book, the author tends to list many factors in an attempt to account for a particular phenomenon, such as high fertility or the adoption of antinatalist population policies in the mid-1980s, while omitting an explanation of the relative importance of each factor and its specific role in the outcome being described.

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