



Gowri Vijayakumar. *At Risk: Indian Sexual Politics and the Global AIDS Crisis.* Stanford: Stanford University Press, 2021. xv + 258 pp. \$26.00, paper, ISBN 978-1-5036-2805-2.

Reviewed by Arnav Bhattacharya (University of Pennsylvania)

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Commissioned by Penelope K. Hardy (University of Wisconsin-La Crosse)

Scholars and activists have extensively critiqued HIV prevention programs in India for depoliticizing and biomedicalizing sexuality while reinforcing caste and class boundaries. However, scholarship has also noted how AIDS programs have offered opportunities for political and social mobilization for the sexually marginalized. Gowri Vijayakumar's recent book *At Risk* is a noteworthy addition to other outstanding ethnographic accounts, such as Cecilia Van Hollen's *Birth in the Age of AIDS: Women, Reproduction, and HIV/AIDS in India* (2013) and Chaitanya Lakkimsetti's *Legalizing Sex: Sexual Minorities, AIDS, and Citizenship in India* (2020), focusing on the social and political implications of AIDS in India. The book argues that the AIDS program in India brought about "political reconfigurations" as it "temporarily transformed the terrain on which sex workers, sexual minorities, and transgender people engaged the state, both individually and collectively" (p. 2). The book shows that sites of HIV prevention not only reproduced notions of gendered respectability, reinforcing caste and class hierarchies, but they also emerged as sites of contestation wherein some of the most marginalized communities comprising sex workers, sexual minorities, and trans-

gender persons demanded sociopolitical visibility and made citizenship claims on the state.

The book situates itself in the "global AIDS field," which captures the complex network of global institutions, donors, nation-states, and activist alliances that undergirded the AIDS program in India (p. 2). The book employs a diverse methodological toolkit and is based on "153 in-depth interviews, eighteen months of participant observation, and analysis of policy documents and newspaper articles," with Vijayakumar conducting fieldwork in Bangalore, India, and Nairobi and Mombasa, Kenya (p. 10). Vijayakumar clarifies that in order to narrow the ethnographic scope of the work and its argument, she has chosen to focus on the AIDS response and the politics of sex work rather than queer politics or HIV prevalence among IV drug users.

The book is divided into eight chapters, with the introduction and conclusion making up the first and last chapters. The second and third chapters provide historical context to the AIDS response in India. The second chapter shows that the initial responses to the AIDS crisis were drawn from the colonial legacy of the Contagious Disease Acts, which focused on surveillance of sex workers, and couched in the postcolonial nationalist

politics of sexuality combined with racism, which viewed AIDS as resulting from a culture of “Western sexual permissiveness” and targeted the bodies of foreigners, particularly Africans (p. 20). The third chapter elaborates on the central argument of the book and focuses on the reconfiguration of the Indian state as it responded to the AIDS crisis. Once AIDS was recognized as a crisis, the Indian state, in order to overcome the limited reach of its public health infrastructure, created “hybrid autonomous spaces within the state bureaucracy,” such as the National AIDS Control Organization (NACO), with the assistance of nongovernmental organizations (NGOs), activists and community-based organizations (CBOs), and global donors (p. 41). These hybrid spaces were leveraged by the sexually marginalized to make “direct demands on the state” and “experiment with new ways of articulating sexual identity” (pp. 41, 3).

Chapters 4 and 5 present granular details about the everyday experiences of sex workers and activist groups in Bangalore as they engaged with the state, donors, and social movements in the context of the AIDS crisis. Chapter 4 focuses on a variety of NGOs/CBOs and activist groups at the organizational level and analyzes how these groups built diverse alliances “with a broad set of movements of marginalized people ... that addressed social marginalization, criminalization, and economic exclusion” (p. 67). Such organizational work was not only able to achieve the collective demands of marginalized populations, but as chapter 5 shows it also brought about personal transformations in their individual lives. Chapters 6 and 7 concentrate on how the AIDS program formulated in India was scaled up, repackaged, and replicated in Kenya. Chapter 6 reveals how quantification of the AIDS program contributed to the mobility of the Indian AIDS model while simultaneously obscuring the sexual politics and social activism that defined it. Chapter 7 argues that despite the apparent replicability of the HIV model across India and Kenya, questions about the differences and similarities between the sexual and political

cultures of the two nations influenced how AIDS experts approached the exchange.

While existing scholarship on AIDS as well as sexuality in India has acknowledged that HIV prevention programs brought visibility to issues such as the criminalization of sexual minorities, the originality of Vijayakumar’s work lies in its ability to reveal how the creation of multivalent hybrid sites to prevent HIV created an infrastructure of resistance within the state itself. The strength of this argument is reinforced by the author’s depiction of the emergence of this rights-based approach to AIDS as an uneven process marked by collaboration, negotiation, and confrontation. Vijayakumar also deserves credit for historicizing the Indian AIDS response and connecting it with the sexual politics of colonialism as well as postcolonial nationalism. By situating the ethnographic account against the wider background of the global AIDS field and studying the connections between the AIDS programs in India and Kenya, the work emerges as methodologically innovative.

Though Vijayakumar depicts how participation in activities related to HIV prevention programs transformed the individual lives of sex workers and sexual minorities, the book could have benefited from providing a further in-depth account of what such work entailed as well as the income generated through such activities. The author’s description of the evolution of AIDS policies in India could have also accounted for political changes, especially at the national level. The author does acknowledge the influence of politics at the local, state level, but one wonders whether the shift of power from the Hindu nationalist party, BJP, to the liberal Indian National Congress in 2004 provided an impetus to HIV prevention programs. It also should be noted that despite studying the connections between AIDS response programs in Kenya and India, the primary focus of the work remains on the Indian AIDS response. The ethnographic account of the AIDS program in Kenya is focused on analyzing the adoption of the Indian

model rather than an independent exploration of the Kenyan experience.

Overall, the work provides an excellent overview of not only the AIDS epidemic in India but also its intersections with sexual politics at home as well as its linkages to the global AIDS field. The work will prove to be useful for anthropologists,

sociologists, historians, and any scholar interested in the sexual politics of AIDS in India.

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