The year 2004 marked a decisive turning point in the Chinese authorities’ response to the risk of an HIV epidemic. Following the crisis caused by the SARS (Severe Acute Respiratory Syndrome) outbreak in 2003, the government seems to have become fully aware of urgent public health issues and of the potential impact of epidemic outbreaks on economic development. (1) In 2004, the State Council adopted a national intervention plan for the prevention and control of AIDS. This plan called for a more comprehensive grasp of the dynamics of the epidemic. In particular, it encouraged an expansion of care provided to the sick, thanks to developments in the local production of anti-retroviral drugs, and the provision of free treatment through the public health system in accordance with international standards. The priority given to support for research into treatments for HIV/AIDS, both in modern medical biology and in traditional medicine, is also a sign of the state’s increased commitment to innovative policies in treatment and care. One of the most remarkable consequences for health policies, brought about by the progressive implementation of this national intervention plan, has been the process of reformulating the overall social response to the risk of an HIV epidemic. As we understand it, this social response includes all the various civic and official responses on the part of the many social agencies as they interact with each other. This interactivity can be pinpointed and assessed at the different levels of their intervention (local, national, and international).

Each of the articles brought together in this issue illuminates, in its own way and from a particular angle, a specific aspect of intervention (local, national, and international). The contributors include anthropologists (Yuvany Gnep, Evelyne Micollier, Rachel Yunqiu Zhou, and Zheng Tiantian), a sociologist (Pierre Miège), and a political scientist (Vincent Rollet). (3) Finally, Meng Lin, whose contribution is the first in this issue, is an active member of civil society engaged in the fight against AIDS as a founder member of the research team. It was also carried out with financial support from the Centre d’Études Français sur la Chine Contemporaine (CEFC).
transmissions in new cases of infection stood at 56.9 percent, of which 44.7 percent were through heterosexual and 12.2 percent through homosexual contact. These questions are examined in the articles by Pierre Miège and Zheng Tian Tian. Two articles, by Pierre Miège and Rachel Yunqiu Zhou respectively, also broach the issue of sexual orientation and identity, along with the daily life experience of people infected with HIV or affected by it. These writers view the issues from the angle of various situations or institutions such as family obligations, marriage, and the family structure, which remains the cornerstone of Chinese society. Academic research in sociology and anthropology has left relatively untouched the socio-cultural aspects of homosexuality and HIV/AIDS in the context of family relationships. Pierre Miège clearly shows the existence of a double cleavage, the first of which is cognitive, owing to the specific modes of socialisation prevalent in China, and the second is ontological, owing to social pressures and family obligations. These tend to obstruct the understanding of homosexuality in terms of an identity, and to reinforce a distinction between sexual and social identity. For her part, Zheng Tian Tian tackles the problem of sexuality and AIDS prevention by examining the policies and public pronouncements over the last decade for socially promulgating and commercially promoting the use of condoms. She provides a critical interpretation of this targeted intervention in the field of public health, and questions the effectiveness of public policies for the prevention of AIDS. In addition, she shows that the correct and widespread use of condoms lies at the heart of all the preventive measures following the emergence of the epidemic.

Finally, Evelyne Micollier’s article suggests a new way of connecting the social and medical responses towards AIDS by focusing on the practices of “integrated” medicine in both therapy and research in China and placing them within an international context. The article describes how the idea of integrating the different approaches to medicine, drawing on their distinct and somewhat dissonant systems of meaning and bodies of knowledge, is beginning to make headway. Indeed, the National Plan launched in 2004 reserves a special place for developments in modern biomedical research as well as in traditional Chinese medicine (TCM). The article also emphasises that protocols covering innovative treatments, as well as the clinical adaptation of existing treatments, are being steadily developed within the provisions of the 2004 National Plan.

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