THE STORY OF AN IMMUNE DEFICIENCY DISEASE AND ITS REPRESENTATION IN THE SOUTH AFRICAN PRINT MEDIA (1981–2000)

by

LUCKY MOTSOMI MATHEBE

submitted in accordance with the requirements for the degree of

DOCTOR OF LITERATURE AND PHILOSOPHY

in the subject

SOCIOLOGY

at the

UNIVERSITY OF SOUTH AFRICA

PROMOTER: DR. K NAIDOO

JOINT PROMOTER: PROF. M MAKHANYA

JULY 2005

	Student number: 709 - 158 -3
I declare that,	
The story of an immune deficiency disease print media (1981 – 2000)	and its representation in the South African
is my own work and that all the sources that I	I have used or quoted have been indicated and
acknowledged by means of complete references.	
SIGNATURE	DATE
(MR L M MATHEBE)	

TABLE OF CONTENTS

PRI	EFACE	viii
SUMMARY		xxiii
ACI	ACKNOWLEDGEMENTS	
LIS	Γ OF TABLES	xxvi
CH.	APTER 1	
STR	RUCTURE, AGENCY AND 'APOSTROPHE' IN THE	
AID	S STORY	1
1.1	Background: the lure of AIDS and the impact of modernity	1
1.2	AIDS and the macro factor in sociology	3
1.3	Towards the integration of structure and agency	10
1.4	Of the "narrative of moral protest" and other 'authentic voices'	22
1.5	Making the claim for authenticity	27
1.6	Modernity revisited: the surveillance function of the AIDS story	31
СП	APTER 2	
	ERATURE REVIEW	35
2.1	Background: news and ideology	35
2.2	AIDS and the sociological perspective	37
2.3	The "genealogical" account of AIDS	41
2.4	The rationale for the thesis – from science 'from below' to science	
	'from above'	49

CHA	APT	ER	3

METHODOLOGY		60
3.1	Background: written sources and their symbolic messages	60
3.2	Written sources and their advantages	61
3.3	Steps in the research process	62
3.4	Other sources: non-fiction books, articles and journals	81
3.5	Newspaper reports: some of the difficulties encountered	82
3.6	Conclusion: authenticity, reliability and credibility	84
СНА	PTER 4	
THE	BURDENS OF THE HISTORICAL PAST	87
4.1	Background: fundamental antagonisms in the AIDS story	87
4.2	The "narrative of moral protest" and apartheid orthodoxy	89
4.3	The health bureaucracy: a brief historical overview	91
4.4	Health policy and the reformation of apartheid	94
4.5	Bearing the economic costs of an "immunodeficiency disease"	101
4.6	The social environment of AIDS	114
4.7	Conclusion: apartheid orthodoxy and a 'pro-social' ideology	117

CHAPTER 5

SEL	LING THE NEGATIVE IMAGE OF HOMOSEXUALITY	121
5.1	Background: the media's construction of a 'lifestyle disease'	121
5.2	Building relationships of 'social exchange'	128
5.3	Stepping into 'otherness'	134
5.4	Conclusion: deromanticizing homosexual lifestyle	150
CHA	APTER 6	_
THE	E PROGRESSIVE AND CORROSIVE IMAGES OF SCIENCE	158
6.1	Background: if history has taught us anything	158
6.2	The virtues of the Industrial Revolution	159
6.3	Premier contributions of Jenner et al	163
6.4	Enter the 20th century: the 'star quality' in science	170
6.5	The causative agents of cancer and AIDS	177
6.6	Representing the 'dark continent' through the prism of 'African AIDS'	182
6.7	Conclusion: AIDS and our collective experience	189
·		
CHA	APTER 7	
'AFI	RICAN AIDS' AND THE METAPHOR OF THE 'BLACK DEAT	TH' 191
7.1	Background: the diminution of history	191
7.2	Representing a 'fast-growing epidemic': apocalypse now!	193
7.3	Coverage of heterosexual AIDS: the uses of surveillance methods	197
7.4	The natural history of the classical Black Death and AIDS	208
7.5	Representing a deadly disease caused by 'divine judgement'	213

7.6	Conclusion: revisiting the 'Black Death' metaphor	218
СНА	PTER 8	
THE	MEDIA'S CHRONICLING OF THE 'NO 1 KILLER DISEASE'	223
8.1	Background: the blood-borne character of AIDS	223
8.2	Rendering the blood-borne character of AIDS invisible	227
8.3	The revisionist tendency in newspaper reporting	238
8.4	Mainstreaming 'heterosexual AIDS'	242
8.5	Explaining the rise of HIV infections: Rushing and his associates	254
8.6	Conclusion: rethinking the rational choice model of AIDS	262
СНА	PTER 9	
THE	QUIET REVOLUTION OF AIDS	266
9.1	Background: learning about the 'paradox' of AIDS	266
9.2	Society as a metaphor for a 'lowered immune system'	271
9.3	The invisible germ	283
9.4	'AIDS babies' and 'families in jeopardy'	292
9.5	Representing the threat of social deviance	300
9.6	Conclusion: creating the equalities of condition	309
СНА	PTER 10	
CON	ICLUSION: AIDS AS AN INSTRUMENT FOR MOBILIZATION	
AND	AS NARRATIVE	315
10.1	Background: the pursuits of the rational mind	315

10.2	Of 'pure science' and the origins of the AIDS movement in	
	South Africa	319
10.3	AIDS and the 'foibles of the sinful' - from the early 1980s to the	
	mid-1990s	336
10.4	Rendering an 'authentic ethnic-type – from the mid-1980s to the	
	late 1990s	338
10.5	The 'Black Death' as metaphor – from the mid -1980s to the	
	mid-1990s	341
10.6	Rendering the theme of redemption - from the mid-1990s to the	
	year 2000	342
10.7	The last word: modernity and the shifting movements in the AIDS	
	story	345
LIST	T OF SOURCES	351
A.	Secondary sources	351
В	Primary sources: newspaper reports	365
C	Miscellaneous reports/documents	374
D	Miscellaneous reports (international magazines, newspapers	
	and popular journals)	376
Е	Scientific reports/sources	377

PREFACE

1.1 Of the 'media,' 'authentic voices,' and the 'story of AIDS'

In great measure, my attraction to Acquired Immune Deficiency Syndrome (AIDS) stems from the much broader issues. In my rendering, AIDS illuminates a larger sociological area, it encompasses such 'global' issues as social representation and the critical linkage between power, knowledge, disease, morality, and identity. What became of AIDS, how it was represented in the media, and how it was lodged in the popular imagination are of paramount importance to me. AIDS offer us the opportunity to look at a range of cultural assumptions, cultural assumptions that accompany public learning about the disease. To provide a background necessary for subsequent discussion, I would like to mention two important points regarding this study. The first concerns my countless reference to the 'media.' I make these references with the full knowledge that the 'media' in South Africa is a loose conglomeration of social institutions; it is by no means a monolithic bloc united by tightly knit beliefs and ideologies. I understand that fragmentation and change have been the main features of South African journalism and that a mix of historical, economic and political factors have combined to produce this fragmentation.
Journalism in South Africa is highly differentiated; there is a wide variety of patterns of professional

¹ F Barton 1979, *The Press of Africa, Persecution and perseverance* (London: Macmillan); see also L Mathebe 2001, *Bound by tradition: the world of Thabo Mbeki.* Pretoria: Unisa Press.

behaviour.² Against this background can be understood the emergence of two mutually incompatible journalistic practices, namely, the 'black press' and the 'white press.'

Before the turn of the century, there were a few African language publications, the most important of which was the *IMVO Zabantsundu*, established by J T Jabavu in 1884.³ After World War II, several publications came into being, targeting most exclusively the black readership, for example *Drum*, *Post* and *The World*.⁴ These publications, especially *Drum*, opened up many opportunities for the majority of black journalists. Since white reporters were restricted from entering the black townships by the apartheid state's policy of separate development, ⁵ black journalists played a significant part in covering 'breaking' news in these areas. What is also important to note is that many black journalists faced problems of considerable magnitude under apartheid rule. Barton cites as a remarkable example that a black reporter sent from Johannesburg to report the news elsewhere could be prosecuted if he or she were away for more than two days.⁶ According to Barton, state repression also caused a lot of black journalists to choose macabre ways of acting: Bloke Modisane flung himself into exile, Can Themba drank himself to death, and Nat Nakasa flung himself from the window of his fourteen-storey hotel in New York.⁷

In the 1970s and 1980s black journalists not only developed their expertise and a sense of professional responsibility, but also became intensely vocal in critiquing the editorial policies followed by their newspapers; they became increasingly concerned that the news was being distorted by controls from above (management).⁸ This critical stance urged them towards what Janowitz⁹ would call 'advocacy

_

² Mathebe, *Bound by tradition*.

³ Barton, *The press of Africa*.

⁴ Ibid, 196.

⁵ Ibid, 196–200.

⁶ Ibid, 197.

⁷ Ibid, 200.

⁸ M Whitehead 1978, 'The black gatekeeper', Honours dissertation, Grahamstown: Rhodes University, 9.

⁹ M Janowitz 1967, 'Professional models in journalism: the gatekeeper and the advocate', *Journalism quarterly*, 5.

journalism'. In other words, they suspended all of the assumptions that all too often accompany the view that objectivity and neutrality are the essence of journalistic inquiry; they called for the active participation of the media in changing the nature of society in which they were embedded. They pointed out the power imbalance under apartheid rule and supported the demand for liberation from apartheid. They also moulded social thought processes. For example, in the mid-1980s Aggrey Klaaste mooted the concept of 'nation building' to exhort the oppressed people to pick up the pieces and "rebuild structures that have collapsed in our communities". For Klaaste these structures are "structures of consciousness, those that remind us of our heritage and those that give us a spiritual and religious foundation or those that decolonise us psychologically". 12

From this perspective, the community setting in South Africa did not allow for the emergence of what Lockwood would call a "privatised worker", whose materialism and home-centred aspirations all too often caused him or her to frown upon community-wide concerns.¹³ Lockwood's privatized worker is also known for his or her instrumentalist manner; the privatized worker shies away from participation in solidarity relations.¹⁴ Therefore, he or she lacks the kind of radical consciousness that the black journalist had acquired through his or her involvement in collective actions. Inspired by Existentialist thought – and the Black Consciousness philosophy – black journalists prioritized existence over essence. As the reader knows, Existentialism exhorts us to reveal the world in which we live by connecting ourselves with our own experience and life.¹⁵ Existentialism makes the full responsibility of existence rest on people themselves.¹⁶ It poses such perennial questions as 'Who am I?' and 'What sort

_

¹⁰ Mathebe, *Bound by tradition*.

¹¹ Sowetan, 21 March 1987.

¹² Ibid.

¹³ See A Giddens and D Held 1982, *Class, power and conflict: classical and contemporary debates* (London: University of California Press), 353–372.

¹⁴ Ibid, 353–372.

¹⁵ P Roubiczek 1964. *Existentialism* (London: Cambridge University Press), 126.

¹⁶ H Harper 1948, Existentialism: a theory of man (Massachusetts: Harvard University Press), 16.

of being am I?,' to get them to develop the feeling for the people they are.¹⁷ In keeping with the traditional patterns of Existentialism, black journalists urged the black underclasses to ensure a correct definition and fullest representation of their political interests by asking themselves who they are and what sort of beings they are too.

And within the 'white press', the English-speaking press was the most hegemonic or influential vehicle of communication. According to Jackson, this was because the English-speaking press symbolized liberalism in its traditions and values, in its style, in its choice of content, and because it retained its links with the Western Press. White journalists working for English-language newspapers such as *The Rand Daily Mail* and *Sunday Times* had a vision of a 'good' society based on a belief in the rule of law and the free market economy. Paper Equally important to point out is that at the time the 'white press' won many black readers. By 1968 more than 50 per cent of readers of *The Cape Argus*, the third largest daily newspaper in South Africa at the time, were nonwhite. Partly, this can be ascribed to the fact that the English language press, although it never encouraged African strike action, did propagate the inclusion of blacks into the political system. However, it must be said that the English press only sought the modification of all of the political structures; it promoted black participation in the political process, but desired to control the parameters or form of that participation.

The divisions within the South African society were therefore reflected in the media, which was divided along racial lines. Black and white journalisms grew out of a pressing desire by their readers for vehicles of communication. Black and white newshounds believed in what Schudson would call the "subjectivity

¹⁷ Ibid, 16.

¹⁸ G S Jackson 1993, *Breaking story* (United Kingdom: Westview), 170.

¹⁹ Ibid,170.

²⁰ Ibid,170.

²¹ Ibid, 208

²² Ibid.165.

of perception".²³ They engaged in the process of meaning-making. Importantly, although the majority of South African journalists produced and sustained different definitions of reality, although they endeavored to influence how their readers could think and the extent to which they were able to think, they were intensely captivated or fascinated by the story of apartheid. For one thing, apartheid was the story of history, politics, violence, and lost liberties. South African journalism became caught up in the lure of drama and spectacle embedded in the connotations of apartheid orthodoxy.

But once the liberalization of the political process had been accomplished in the early 1990s, apartheid (the story of lost liberties) ceased to enthrall the media. As a consequence, Acquired Immune Deficiency Syndrome (AIDS) was thrown into the foreground. Like the apartheid saga, AIDS filtered through the prism of the media on a grand scale. AIDS delighted in part because the disease appealed to the baser instincts of human nature; it encompassed such sensational markers as sex, promiscuity, betrayal, infidelity, love etc. The media's manic passion for drama and spectacle caused AIDS to enter into everyday language, always reminding us of what counted as either right or wrong within the organism of society we live in. In addition, AIDS became interesting for the media owing to its macabre character. *Undoubtedly, AIDS is a deadly disease killing real people*. AIDS became a major object of news because it was a disease that collected around some very dark issues: the AIDS disorder bequeathed pain, suffering and ultimately, death. Cultural theorist Paula Treichler explains why a disease that conjures up untold suffering and death all too frequently yields alluring qualities: "If it bleeds," she writes, "it leads." ²⁴

In this context, the media became what Bruno Latour and Steven Woolgar would call "obligatory passage points", ²⁵ that is, a post or station that all readers must pass through in order to enrich or

-

²³M Schudson 1967, Discovering the news. A social history of American newspapers (New York: Basic), 5–6.

²⁴ P Treichler 1996, *How to have theory in an epidemic* (London: Duke University Press), 34.

²⁵ B Latour and S Woolgar 1987, *Laboratory life: the construction of scientific facts* (New Jersey: Princeton University Press).

deepen their insights into the nature and cause (etiology) of the disease. The media engaged in storytelling exercises; they produced emotions in people and also strove to create what John Tosh would call an "illusion of direct experience". AIDS became the main characteristic of news. Those who select the news or make critical decisions regarding the content of news – according to Wilson and Gutierrez, these are the "gatekeepers" – considered AIDS a major object of representation and description. AIDS also fascinated the media because it brought to the surface what Fiske would call a "site of maximum visibility and maximum turbulence". ²⁸

Another issue that I think deserves mentioning concerns my endless allusions to 'authentic voices' and the 'story of AIDS' in the succeeding chapters of this study. When I refer to AIDS as a constructed phenomenon, I have in mind the idea that the disease not only conjures up a bundle of biomedical rules and principles; the disease has also been produced and reproduced through various acts of individual voluntarism. Examining AIDS as a story means looking at the different ways in which the disease has been made and remade through a large assortment of representational mirrors.

Like apartheid, AIDS was deemed 'important' (here the reader is reminded of Wilson's and Gutierrez'²⁹ view that "importance" is the main attribute or hallmark of news) not only because it was visible, interesting, and informative ('coverage of AIDS saves people's lives'), but also because of its terrifying nature or turbulent connotations. The ordering of news reports reflected the general feeling of both black and white journalists that AIDS was the greatest story ever, especially after the opening up of the political landscape in the early 1990s and the subsequent fall of apartheid in the mid-1990s. The story of AIDS can essentially be described as an authoritative voice, an 'authentic voice', so to speak,

²⁶ J Tosh 1991, *The pursuit of history: aims, methods and new directions in the study of modern history* (New York: Longman), 24.

²⁷ C C Wilson and F Gutierrez 1985, *Minorities and diversity* (London: Sage), 34.

²⁸ J Fiske 1994, *Media matters: everyday culture and political change* (Minneapolis: University of Minnesota Press), 8.

²⁹ Wilson and Gutierrez, *Minorities and diversity*, 34.

that figured in the media. The story of AIDS provided the means of verbalization with the social world that surrounded working journalists; it bespoke, by way of description, illustration, or depiction, not only the biomedical characteristics or microbial determinants of AIDS. It also illuminated social life in the age of AIDS. Its overarching goal was not only to terrify, but also to inform, to heighten or to sustain public consciousness about the disease, to get the readers (audience) to modify their sexual lifestyle. And like all manner of news, the news reports on AIDS had a beginning and an end. They should remind the reader of a 'moving picture', an ongoing image or panorama imbued with the capacity to leap across many years: from 'moral protest' to 'redemption' (see 1.2 below).

From this rendering, AIDS is a story because our knowledges or understandings of the disease are bound up with the sort of representational mirrors (authentic voices) constructed by the media over time and space. The attractiveness of these authentic voices as objects of study hinges on the fact that they offer us the opportunity to understand the disease through the much broader sociological issues of sexuality, morality, identity, and marginality, etc. Speaking of marginality, the story of AIDS is also accompanied by the characteristics of the people it speaks to. It speaks with profound ease about the marginality of some groups of people and it evokes negative feelings by placing them in the peripheral area, in their 'otherness'. In another context, Stuart Hall underlines this reading when he states the following:

AIDS is indeed a more complex and displaced question than just people dying out there. The question of AIDS is an extremely important terrain of struggle and contestation. In addition to the people we know who are dying, or have died, or will die, there are the many people dying who are never spoken of. How could we say that the question of AIDS is not a question of who gets represented and who does not? [italics mine]. AIDS is a site at which the advance of sexual politics is being rolled back. It's a site at which not only people will die, but desire and pleasure will also die if certain metaphors do not survive, or survive in the

Therefore, this thesis by no means crystallizes around the contentiousness of AIDS. It is not an inquiry into the complex dynamics of the science of AIDS, a rendering of the politics of causation. This put differently, my study *does not render any judgements* regarding the cause and nature of the disease. From the very beginning, I understood that AIDS is a deadly disease. Also, I understood that whether or not we know for certain the cause of the disease, it must be treated as seriously as any deadly disease required. My study is a weave, a blend, so to speak, between the sociological perspective and media studies. My study looks at how "human social life" (see Anthony Giddens³¹) in the age of AIDS is represented in the media, at the profound ways in which AIDS reflects the context of the societies we live in. For working journalists, 'What does it mean to have AIDS?' 'What does it mean to be ill with AIDS?' And more significantly, 'How is the AIDS victim represented in the media?' These sociological questions are the most important incentives for this research. They have weighed too heavily in my imagination and have also germinated my interest in AIDS as well as any other.

1.2 The basic structure of the thesis

Lying on his deathbed in 1895, the distinguished scientific pioneer, Louis Pasteur, proffered this very last piece of advice to his contemporaries: "The terrain is more important than the germ." Pasteur continued: "I am convinced that when a wound becomes infected and festers, the course that wound takes depends upon the patient's general condition and even his mental condition." Before he was struck by an illness, Pasteur formulated what is today commonly known as the germ theory of disease, ³⁴

_

³⁰ See S Hall 1992, Representation: cultural representation and its signifying practices (London: Sage), 277–294.

³¹ Giddens, Sociology, 2.

³² M H Witte, C Witte and L Minnich1989 'AIDS in 1968', Journal of American Medical Association 251:1657.

³³ R Dubos and J P Escande 1979, *Quest: reflections on medicine, science and humanity* (New York: Harcourt Brace Jovanovitch), 45.

³⁴ P Duesberg 1999, *Inventing the AIDS virus* (New York: Regnery), 1–66; see also Giddens, *Sociology*.

according to which disease has a single cause rather than multifactorial causes. Pasteur wrenched human disease free of its historical origins. Disease can produce pathological conditions only to the degree that a germ (fungi, bacterium, or virus) can act upon (infect) the life of its hosts. At the time Pasteur was by no means interested in specifying the social conditions under which human diseases flourish. The watermark of his germ theory was that "a core of timeless objective and factual knowledge ... is a true reflection of nature".³⁵

From this perspective, the intellectual origins of the germ theory of disease are classical; the germ theory of disease dates back to the 19th century. Rooted in the climate of the time was a group of germs called bacteria, discovered by Edward Jenner, Robert Koch, Joseph Lister, Alexander Fleming, and of course, Louis Pasteur himself.³⁶ Jenner and his colleagues are the predecessors of the so-called virus hunters (for a more detailed discussion, see Chapter 6) who, in the 20th century, mapped out the genetic structure and etiology of AIDS.³⁷ Our virus hunters figured out that if bacteria could cause disease, so could viruses. In their rendering, AIDS was by no means linked to the failure of the organism to develop properly (as in haemophiliacs). Neither was the AIDS condition attributable to a lack of essential nutrients (as was seen with pellagra) nor the accumulation of toxins (as with lung cancer).³⁸ On the contrary, AIDS was traceable to an infectious agent discoverable in nature through the application of stringent scientific precepts, namely the human immunodeficiency virus (HIV).

From the reading above, it hardly needs saying that the etiology of AIDS has its origins in the classical milieu too; the biomedical model of AIDS derives from Pasteur's monocausal concept of disease.

Because AIDS was understood in biomedical terms, as a disease uncontaminated by what Gabbay

-

³⁵ J Gabbay 1982, 'Asthma attacked? Tactics for the reconstruction of a disease concept'. In *The problem of medical knowledge: examining the social construction of medicine*, edited by P Wright and P Treichler (Edinburgh: Edinburgh University Press), 23.

³⁶ Ibid, 1–66.

³⁷ Ibid, 1–66.

³⁸ Ibid. 1–66.

would call "subjective colourations and value judgements deriving from our cultural and social experience", 39 laboratory principles became the very stuff of which the scientific knowledge about the disease was produced. Laboratory research offered the necessary grounding. In what follows, I offer some precursory map of all of the Chapters of this thesis. From a hasty reading of the contents or summaries of the Chapters, the central theme running throughout my thesis should be apparent to the reader. I argue as follows: When AIDS filters through the prism of the media and other written records, not only does it point to a biological likelihood, it also points to a historical and sociological likelihood. AIDS is also an index of the much broader forces that play themselves out in our contemporary societies.

Chapter 1 provides the theoretical framework for discussing AIDS in the media and sets the context of discussion about its dominant conceptual apparatus: its biomedical characteristics. Chapter 2 is a brief overview of the existing literature on AIDS. This literature provides the concepts and terms according to which AIDS was understood in some of our secondary sources. It sheds light on current works in sociology that look at the cultural underpinnings of AIDS and suggests new approaches to the disease - alternative ways of looking at the 'story of AIDS'. Chapter 3 specifies a great variety of methodological tools that were employed in this study. These methodological practices can also be seen as important sources of knowledge about AIDS.

Chapter 4 suggests a clear linkage between the biomedical model and health policy under apartheid orthodoxy. The reader is reminded that under apartheid rule many among the state's ideologues construed social problems in economistic terms. The apartheid state considered the key question, 'What is wrong within South Africa's complex social formation?' And then it figured out that the free market ideology (or monetarism) would provide the necessary grounding, that it would resolve a vast set of contradictions and crises that were emblematic of the South African society at the time. I argue that the

³⁹ Ibid, 23.

apartheid state's supportive stance towards the free market ideology found an expression in the individualization of health care. Health care was seen as a personal responsibility rather social responsibility. AIDS was blamed on the personal limitations of the individual, whose foibles were 'sinful'. And because health care became an individual responsibility, the historical underpinnings of AIDS were excised or erased. This Chapter shows that in the political imagination of the apartheid state, AIDS hardly signified the larger issues acting upon the lives of its victims.

Chapters 5, 6, 7 and 8 dissect this idea of personal limitation (the idea that AIDS is traceable to the foibles of the sinful individual) in more detail. These Chapters look at how, from the very beginning, AIDS was located within an understanding of a particular configuration of cultural assumptions and stereotypical beliefs about already constituted groups of people distinguished by a certain lifestyle. The AIDS story created the sense of good and evil. Being both a particular kind of person and doing particular things were considered major risk factors for AIDS. For example, the AIDS story indicted the so-called villains, namely homosexual men in the West as well as heterosexuals in Africa. The consequence was the sexualization of lifestyle; a causal connection between AIDS and social identity was established. Chapter 5 inspects how AIDS was linked by the media to a specific group of people (homosexual men) distinguished by a range of sensational markers, namely intravenous drug use and anal intercourse. These patterns of human behaviour, so the media evinced, rendered gay men highly vulnerable to multiple or concurrent infections, which concurrent infections engendered the so-called immune overload. 40 Homosexual men were reportedly at risk of immune overload if only because they allegedly had multiple partners. Apparently, their vulnerability to multiple infections justified their representation in the media as a 'risk group'; it justified their caricaturing as being medically problematic. That gay identity 'correlated' with AIDS also justified the labelling of the disease as Gay Related Immune Deficiency (GRID). Hence, at this point the AIDS story not only took the narrative form of the biomedical model, but also what I call the "narrative of moral protest" – the narrative of moral revolt

٠

⁴⁰ Epstein, *Impure science*, 45–78.

against the foibles of the 'sinful' homosexual men. At the time many media reports on AIDS tended to support the dominant conception of gay lifestyle as intrinsically immoral or sinful.

Chapter 6 situates the scientific enterprise historically. To start, I argue that the representation of AIDS as a "homosexual disease" linked to the 'foibles of the sinful' pervaded the minds of many researchers from as early as the 1980s. However, from the mid-1980s this representation was excised in favour of a more inclusive form of representation. Here AIDS was labelled a "heterosexual disease", affecting mainly or predominantly the peoples of Africa. Consequently, such negative constants as promiscuity and racial identity moved centre stage, producing what I call the narrative of "African AIDS". A disaster of immense import was reportedly looming in Africa, because HIV infections were on a compounded growth or exponential rise. The idea I am developing in Chapter 6 is that this particular depiction of "African AIDS" was widely accepted as a profound truth, if only because it fitted into the pre-existing frame, that is, the dominant historical conception of Africa as a continent diseased to its very foundation by a great variety of infectious diseases. AIDS, so the argument ran, embodied some aspects of African cultural life.

In Chapter 7, I scrutinize how, from the mid-1980s, this critical linkage between heterosexual disease and identity, between disease and geographical origin, was replicated in the sphere of the media. At the time the AIDS story also became embedded in the negative constants of scapegoating and stereotyping. Not only was AIDS depicted as a disease saturated in mortality, but also as a disease satiated with evil and social deviance among African heterosexuals. Chapter 7 explores another dominant conception of AIDS in the media, one that hinged on the idea that AIDS signified a plague exterminating virgin human populations in its wake. The idea of a plague reminisced the primordial plague of the 14th century, namely the Black Death. AIDS symbolised, in a very real sense, the 'modern-day Black Death.'

Chapter 8 explores the 'egalitarianism' or indiscriminate nature of AIDS in more detail. Not only did AIDS amplify the fear of infection through sexual contact (the sexual transmission of bodily fluids such

as semen is widely regarded as a major risk factor for AIDS); AIDS also heightened the fear of infection through a blood transfusion. (According to some scientific sources, HIV is also transmissible through blood and blood products.⁴¹) By my account, this particular depiction of the disease, this idea that AIDS is a blood-borne disease, created the sense of 'equality' of condition, it conveyed the sense that we are all at risk of AIDS, that AIDS is an 'equal opportunity disease'. However, although a large number of media reports argued on behalf of the view that AIDS is a disease that attacks indiscriminately, regardless of gender, sexual orientation, or social background, they effaced the bloodborne characteristics of the disease. The media rendered the blood-borne connotations of AIDS invisible and mainstreamed its sexual connotations; the media enjoined their readers to see mainly its sexual characteristics. The AIDS story in the media proved key to an understanding of the multiple ways in which the media talk to their readers not only about disease, but also about the 'negative' constants of sexuality, promiscuity, loose morals, sin and identity.

Another necessary disclosure here concerns what I designate as the 'redeeming qualities' of the story of AIDS in the media. To begin, throughout this thesis I advance the idea that the AIDS story moved from what one might call a humanist perspective towards a more historical centre. As we have seen, from the early 1980s to the mid-1990s the media explicated the AIDS tragedy in terms of the personal limitations of the victim. AIDS was wrenched free of its historical understandings; what emerged quite clearly during this period was the curious historical displacement of AIDS in many media reports. And individualist or behaviourist forms of representation tended to loom large. Media reports on AIDS served as an index of the much narrow issues in social life rather than the much broader changes in social relations. At this point the AIDS story can be seen as relating mainly to patterns of *individual* behaviour; it deemed evidence of subjectivity worthy of representation. Nonetheless, this particular form of representation, although it shaped, structured and constituted the AIDS story from the very beginning, it failed to hold on for much longer. From the mid-1990s it was displaced by a narrative form that was

-

⁴¹ See Duesberg, *Inventing the AIDS virus*, 284–288.

more attentive to historical proportions. Although the media continued to replicate the story of AIDS and identity, they ceased to think of the AIDS victim in liberal terms, as a free-thinking and an autonomous being who gets contaminated by AIDS by reason of the foibles of his or her sinfulness. Media reports on AIDS became saturated by a historically inflected language.

What is more, the AIDS story was wrenched free of its moral protestations. The "narrative of moral protest" (see above) was suspended. The media ceased to make a causal connection between sin and death. Crucially, individual responsibility for health care was substituted for social responsibility. The emphasis was on building reciprocal relationships and social partnerships against AIDS. The battle against AIDS was propelled by a strong sense of commitment towards building a 'caring society', towards increasing the institutional capacities of local communities ravaged by AIDS. The AIDS story was wrenched free of its casual stereotyping to ensure that the victims of the disease are perceived in an entirely sympathetic light. The AIDS story provided a social documentation of the deeper problems and challenges that stemmed from the invasion of invisible germs and offered to resolve them by establishing and restoring the virtue and innocence of the victims themselves. This is what I call the 'redemptive quality' in the AIDS story.

Chapter 9 indicates how, from the middle of the last decade, the victims of AIDS (namely "AIDS babies" and "AIDS orphans") were constructed around the overarching goal of the theme of redemption. Not only does the theme of redemption remind us of the humanistic moments of the AIDS story (the emphasis on social responsibility for health care), but also of its historical moments. Moral commitment to local communities represented a central aspect of the story of AIDS in the media; the story of AIDS invested the victims of the disease with some patina of respectability or propriety. The media delighted in the construction of AIDS as a disease that could ultimately be accounted for by the structural characteristics of apartheid and post-apartheid history.

The last Chapter, Chapter 10, carves out the major findings of this study. This Chapter is more a summation of the major arguments, recurrent themes, or dominant motifs running throughout this thesis. Much of what I argue in this Chapter collects around the idea that AIDS, and the manner of its representation by working journalists, can be very useful in thinking about the media as a social movement of a specific kind. I make an attempt to treat the media as a 'movement' of a special type - a 'movement' engaged in the process of mobilization against a social problem (AIDS) that lies at the very heart of a society confronted by a deep historical crisis. I argue not only that the 'media movement' articulates a specific set of beliefs about the disease and also operates to optimize its collective interests and resources – resources needed for action – but also that the 'media movement' is a movement which is deeply motivated to reflect on such critical issues as authenticity and believability. Although the approach I follow is not a comprehensive analysis of the general run of theories on social movements, although my study does not make an exhaustive attempt at analysing the media as a social movement, I argue that it can be very useful in thinking about the following: how AIDS in the media conforms to popular morality. The tendency to descend into popular morality is what the story of AIDS does well enough. I indicate how the 'media movement' dramatizes the moral fragmentation of society not only to try to make a difference in a heartless world bequeathed by AIDS, but also to authorize or legitimize itself. By making morality its explicit norm, it becomes possible for society at large to accept the 'media movement' as being genuinely authentic, as selling a believable narrative. Chapter 10 also offers more insight into another distinctive trait of the AIDS story, that is, its protean capacity to leap across many years (from the "narrative of moral protest", the story of a "gay disease" or GRID, the story of a "heterosexual disease", the story of a "modern-day Black Death", to the story of "redemption"). As stated before, these narrative forms also claimed to be peak of the real nature of AIDS.

SUMMARY

This study explores the multiple ways in which Acquired Immune Deficiency Syndrome (AIDS) functioned through concrete biomedical institutions, namely, the Centres for Disease Control (CDC), the National Institutes of Health (NIH), and the World Health Organization (WHO). AIDS is viewed as a product of the full range of institutional practices in which it became embedded and in which it was set within the boundaries of Louis Pasteur's germ theory of disease (see the Preface section). This biomedical model of disease was materialized through journalistic practices and sold as news. Within these operative terms can be understood another analytical strategy that also designates the main domain of my study of this contemporary social form: I argue in this thesis that knowledge about AIDS was by no means dependent solely on the objective, scientifically determined, "received narrative" of biomedicine; what is today known as AIDS is also a product of a wide range of social practices produced and reproduced over time and space. AIDS is also an outcome of the resolutions, judgements and decisions that working journalists made over time in terms of what they generated or covered as news; the disease is also product of a large assortment of representational mirrors that I call 'authentic voices', to take as good examples, the "narrative of moral protest", the narrative of a "homosexual disease", the narrative of a "heterosexual disease," and the narrative of a "modern-day Black Death" (plague). The story of AIDS in the media can also be seen to be defined by the proliferation of these

authentic voices.

From this reading, the distinctive trait of AIDS in the media lies in the fact that it is a constructed object, a disease framed through a specific structure of meanings. When we look at these structure of meanings we find that their moral and cultural assumptions and stereotypical connotations embody certain aspects of the organism of the society within which they were created and nourished over a much longer history.

Title of the thesis: THE STORY OF AN IMMUNE DEFICIENCY DISEASE AND ITS REPRESENTATION IN THE SOUTH AFRICAN PRINT MEDIA (1981-2000)

Key terms: Media representations; homosexuality; narratives; morality; stereotyping; redemption; resource mobilization; biomedical model; 'AIDS in Africa', Black Death; HIV/AIDS; 'AIDS Babies'; 'AIDS Orphans'.

ACKNOWLEDGEMENTS

I was going through the anatomy of contemporary knowledge about AIDS one morning – trying very hard to familiarize myself with the highpoints of the history of this immune deficiency disease. Then one news report, which filtered through the prism of the weekly publication *Sunday Times*, indulged my curiosity. "AIDS is not a freedom of speech issue," the newspaper reported. That statement left a lasting impression on me for many years. For one thing, the *Sunday Times* implied that although our lives revolve around AIDS, we can talk about the disease, think about the disease, and even write about the disease, without suggesting or contemplating its complexity, without alluding to its great paradoxes, ambiguities or ironies, without noticing a series of contradictions that it stages, all too frequently, on a grand scale. Many working journalists have rendered that our increasing awareness of AIDS and the horrific visages that we see in people afflicted by the disease, should make us feel a touch of fear of the terrible pain, suffering and death it bequeaths. AIDS should cause us to become apprehensive over the threats it poses to all our lives; it should cause us to start thinking about modifying our social lifestyle; to start changing our sexual manner, to loathe our proclivity toward amorality. Life's present condition

of decadence and degeneration was largely accounted for by our moral recklessness, our grotesque existence, our domination by sexual passion (lust!).

Having said that I feel greatly indebted to all of the working journalists who generated this wide variety of newspaper reports – spanning a period of roughly twenty (20) years. Although I never contemplated approaching the subject matter of AIDS from their perspective, although, as the reader will notice, the fit between our points of view is slightly adversarial, I used a great deal of their reports for my study. Their manner of coverage of AIDS assisted me in formulating my own cogent questions and approach to the study of the disease. I gained a familiarity with AIDS, not only through reading a series of scientific journals and secondary sources I obtained from the library, but also from the media's records. Newspaper reports are the primary sources of this study. So I feel I should also express my sincere thanks to the *Institute of Contemporary History* at the University of the Free State, who helped me greatly in generating a large assortment of these reports. Furthermore, I would like to emphasize that the sociological discussion I present in this thesis is based on my own observations, formulations, and research findings. The thesis reflects my fundamental interest in AIDS; it is a contribution of my own direct study of the subject matter of AIDS in the media. I therefore bear full responsibility for any 'bad questions' that I might have raised in this research, or any sociological inaccuracies the reader might think are permeating my own judgements.

In addition, it gives me great pleasure to acknowledge my indebtedness to my promoter, Dr Kammila Naidoo, for her valuable advice and incisive ponderings on the subject, and for helping me to produce a readable final version of the thesis. I also thank Professor Mandla Makhanya (joint promoter) for his evaluations, reviews and worthwhile comments. For words of encouragement and support of the research that partly led to this thesis, I especially thank Professor Louis Molamu. And finally I am grateful to my editor, Liz Stewart, whose judicious editing and fastidious reading of the thesis helped improve the final version of the thesis, and my history teacher at high school (whose name will forever

remain anonymous) for getting me to think outside the box!

LIST OF TABLES

Age-adjusted mortality rates among black and white Americans.	
United States: Department of Health and Human Sciences Data	
1980.	186
HIV-positivity in women attending antenatal clinics by age (between	
1994 and 1995). Pretoria: Department of Health (Directorate: Health	•00
Systems Research), 1998.	280
HIV-positivity per province among women attending antenatal clinics	
(between 1994 and 1995). Pretoria: Department of Health (Directorate:	
Health Systems Research), 1998.	279
Malawi, Mozambique and Southern Rhodesia: number of reported	
cases of and deaths from smallpox and case-fatality rates (1959-1972).	
Geneva: World Health Organisation, 2001.	169
Zambia: number of reported cases and deaths from smallpox and case-	
fatality rates (1956 – 1973) and number of vaccinations performed (1964-	
1973). Geneva. World Health Organisation, 2001.	168
A sample of 302 news reports indicating the critical linkage between	
group identity and risk of exposure to HIV/AIDS over time, 2002.	70
Patterns of representation in reference to 1908 media reports on AIDS.	
(1981–2000),2002.	75
Table indicating the interrelationship between AIDS and sex over time	
(1981–2000), 2002.	80
\\\\\\\\\	00