

CHAPTER 10

CONCLUSION

AIDS AS AN INSTRUMENT FOR MOBILIZATION AND AS NARRATIVE

10.1 Background: the pursuits of the rational mind

Today we add another miracle to the long honour roll of American medicine and science. Today's discovery represents the triumph of science over a dreaded disease. Those who have disparaged this scientific research – those who have said we were not doing enough – have not understood how sound, solid and significant medical research precedes ... a test for the virus “would be available within six months and a vaccine within two years.”¹

These sentiments were echoed by Margaret Heckler, former US Secretary of Health and Human Sciences. The year was 1984 (April). The occasion was the official announcement, at a press conference, of the discovery of the human immunodeficiency virus (HIV). Heckler's extraordinarily powerful message provided the sort of clarity that was roundly needed at the time: ‘HIV is the agent of transformation’, the cause of Acquired Immune Deficiency Syndrome (AIDS). Heckler's speech was significant on another level. To start with, Heckler wrote that medical knowledge is “sound”, “solid” and “significant.” For one thing, scientific

¹ Root-Bernstein, *Rethinking AIDS*, 22.

knowledge proceeds in a logical fashion. Science is uncontaminated by the vagaries of human prejudice, scapegoating, and social stereotyping.

Quite evidently, the former Secretary of Health and Human Sciences maintained the sense in which scientific knowledge has a determining power over human life. In other words, Heckler deified the scientific enterprise. The individual scientist was caricatured as a prototype of an ‘authorized knower’, a ‘high priest’, so to speak, who is unequivocally devoted to the search for the sort of truth that is knowable in an objective sense. The scientist’s vocation was seen as an ennobling human activity; the scientist participates in the natural world to find solutions to the seemingly complex problems that face the human world. Heckler viewed the scientific enterprise as an “organized and trained common sense”, if only because she deemed all of scientific truths to be amenable to discovery – by following the objective laws of nature or the so-called scientific method. From this account, scientists are men and women involved in rational pursuits, men and women endowed with superior knowledge and wisdom.

Heckler’s enthusiasm and untrammelled confidence in science should remind the reader of what one might call a ‘positivist attitude’. Positivism, says Noble, is a philosophy of progress.² In the 18th and 19th centuries, positivists predicted the progressive growth of science and the application of scientific rules and principles to the study of human affairs.³ By my account, Heckler’s rendering in 1984 is a classic example of positivist idealism. Following the positivist’s train of thought, Heckler deemed it appropriate to extol the virtues of science, to romanticise science, so to

² T Noble 2000, *Social theory and social change* (London: Macmillan), 43–48.

speak. With an air of assurance, she announced that science will improve the human condition, that science will blunt or ameliorate the pain and suffering caused by AIDS. Enraptured by the lofty ideals and grandeur of the scientific enterprise, Heckler joined in the optimism that the discovery of law-like principles of biomedicine would offer us the necessary grounding, that these principles would offer us plausible explanations regarding the etiology of AIDS.

Out of Heckler's biochemical narrative, as we have seen, was born the view that the problem of AIDS is the problem of the individual – the problem of the human mind. From this perspective, the cure for AIDS, as well as the prevention and treatment of the full range of clinical symptoms that underlie the disease, was dependent on rational methods of reasoning; it was dependent on the general laws of nature. Science, Heckler seemed to suggest, was simply a process of rationalization. In sociology we are taught that rationalization is a method by which human beings demystify life and gain mastery over their social world – of course by using reason.⁴ Here scientific reason simply becomes a substitute for sentiment and tradition. Science becomes the major source of intellectual authority.⁵ For Heckler, we could not have a more rational method of investigation for our cause (the quest for a cure for AIDS) than the “received narrative” of biomedicine.

This unbridled faith in science reflected a striking convergence of two events that are somewhat related. The first concerns the major scientific breakthroughs of the 19th century – the scientific triumphs over infectious diseases. In Chapter 6, we shed light

³ Ibid, 43–48.

⁴ Ritzer, *Sociological theory*, 131–146.

⁵ Ibid, 131–146.

on Edward Jenner's monumental discovery, namely the vaccine for smallpox, and Louis Pasteur's discovery of a cure for cholera, anthrax and rabies. We also offered some important insights into how the German pioneer Robert Koch went about discovering the cause of tuberculosis, and how Alexander Fleming's mould was developed into the antibiotic penicillin. The main significance of the bacteriological revolution of the 19th century also hinges on its idealization and romanticization of science. The major scientific discoveries of Jenner, Pasteur, Koch and Fleming distinguished science as an enriching human activity, a rational pursuit. Unbounded faith in science was also made manifest by the economic benefits wrought by the great socio-economic transformations of the 19th century. As you know, modern methods of vaccination and sanitation, which heralded major improvements in health care and nutritional status, had their origins in the Industrial Revolution.⁶ From my viewpoint, these improvements underscored the status of the scientist as a person of goodwill, invested with great character and enormous wisdom. Here was developed and transformed into some profound truth the notion of science as a 'public good', a virtuous enterprise.

Nonetheless, Margaret Heckler's prediction that a vaccine for AIDS would be available "within two years" did not come true. Heckler was wrong; her prediction remains unfulfilled. After more than two decades of research, the cure for AIDS remains elusive. Reportedly, millions and millions of people have died of AIDS and many more are expected to die in the near future. By no means are future prospects reassuring, if media statistics are trustworthy. In Latin America, 1,3 million people were reportedly infected in 2000; 360 000 in the Caribbean; 900 000 in the United

⁶ J R Weeks 1999, *Population: an introduction to concepts and issues* (Belmont: Wadsworth), 132–136.

States; 220 000 in North Africa and the Middle East; and 420 000 in Eastern Europe and Central Asia.⁷ In the same year, 24 million people were reportedly dying of HIV in the sub-Saharan region.⁸ And according to the WHO (World Health Organisation) estimates, 9,4 million people were infected worldwide and this number was fated to double each year.⁹ In 1996 it was estimated that of the 9,4 million people infected with TB/HIV, 6,58 million lived in sub-Saharan Africa.¹⁰ In South Africa alone, 40 per cent of TB cases were attributed to HIV infection in the same period (2000).¹¹

10.2 Of ‘pure science’ and the origins of the ‘AIDS movement’ in South Africa

My study on AIDS was greatly inspired by Steven Epstein’s masterpiece, *Impure science: AIDS, activism and the politics of knowledge* (see also Chapter 2). Epstein’s *Impure science* “challenges approaches to the social study of science that tend to assume that knowledge-making is the province of a narrow circle of credentialed experts.”¹² *Impure science* is a comprehensive look at the role of the so-called treatment activists in the production of biomedical knowledge (see below), the politics of expertise and the role of science within the larger culture of society. It is a historical and institutional approach to the study of controversies about knowledge and is “concerned with the minute details of the construction of facts” which become apparent “only through a more thoroughgoing examination of power, meaning and social organization”.¹³ Briefly, Epstein’s study examines the critical linkage between

⁷ ‘HIV/AIDS’, UNAIDS Joint United Nations Programmes on HIV/AIDS, United Nations, 15 June 2000.

⁸ Department of Health 2000, discussion paper, *Statistical Notes* 2(18)(July 2000):2.

⁹ Ibid, 4.

¹⁰ Ibid, 4.

¹¹ Ibid, 2.

¹² Epstein, *Impure science*, 4.

¹³ Ibid, 5.

power and knowledge within the context of AIDS research and activism in the United States from the beginning of the 1980s.

While acknowledging the difficulties involved in democratizing “biomedical-knowledge-making” or in displacing “hierarchies founded on knowledge-possession”, Epstein’s book chronicles the politics of AIDS activists who intervened in the institutions of biomedicine to demand scientific investigation of potentially useful treatments.¹⁴ Aply led by such organizations as ACT UP (short for AIDS Coalition to Unleash Power), AIDS activists established a grassroots base of knowledge about treatments, conducted their own underground drug trials, and regularly maintained a stance against methodologies employed in AIDS clinical research.¹⁵ According to Epstein, this points out the “distinctive character of the AIDS movement”¹⁶ in the US. Institutions of biomedicine (notable among these is the National Cancer Institute) have their particular features and interests, says Epstein. They are, however, constrained and constituted by their relations with other institutions (such as movements of treatment activists).¹⁷ Regarding these movements of activism, Epstein comments that,

They have established their credibility as people who might legitimately speak in the language of medical science, in particular, with regard to the design, conduct, and interpretation of clinical trials used to test the safety and efficacy of AIDS drugs.¹⁸

¹⁴ Ibid, 5.

¹⁵ Ibid, 9.

¹⁶ Ibid, 5.

¹⁷ Ibid, 5.

¹⁸ Ibid, 9.

Herein lies the ‘exceptionalism’ of Epstein’s ‘activist movement’: its repudiation of ‘splendid isolation’ – its active participation in the construction of biomedical-knowledge. In fact, Epstein adds, this is what distinguishes it from other social movements of protest and action in the Western world. For “neither self-help groups nor cancer activists nor even the feminist health movements “have had much success in extending the critique of medical practice into an engagement with the methodologies of biomedical research”.¹⁹

Unlike *Impure science*, however, my study is not an inquiry into the “complex dynamics of the field of AIDS research”. Nor is it a look at the contentiousness of AIDS, at how AIDS was constructed through “controversy and claims-making”. Rather, my study launches an inquiry into the deepest ways in which another distinct group of laypeople, namely working journalists, engaged in various acts of representation by framing the disease through a series of narratives. As I have mentioned in this study, the distinctive character of this ‘media movement’ was by no means its rendering of a critique against scientific knowledge. Rather than construe AIDS as a disease constructed through controversy and claims-making, rather than evince a harsh look at AIDS research and the larger politics in which it is embedded, this particular sort of lay intervention took for granted its Enlightenment claims; it celebrated science as a progressive, pure, rational, and virtuous enterprise.

Accordingly, the media in South Africa, like Margaret Heckler, cast the scientific expert in the role of an ‘authorized knower’, an authoritative voice invested with the power to elucidate, on behalf of its frightened audience (readership), the clinical

¹⁹ Ibid, 10.

relevance of the disease. Unlike Epstein's activist movement, the media movement in South Africa refused to undergo the process of "expertification". Even though it spoke in the language of science, it refused to become a sort of expert itself, to maintain an adversarial stance towards some of the methodological practices employed in the process of AIDS research. Thus, from the very beginning, the "received narrative" of the disease was kept going over time in a predictable sequence. From the early 1980s to the late 1990s there was an element of continuity in the way the media covered the biochemical underpinnings of AIDS; put simply, there were regularities rather than debates, quarrels, disputes, or controversies in the way the South African print media represented the science of AIDS. AIDS was never conceived of independently of the institutions of biomedicine – the Centres for Disease Control (CDC), National Institutes of Health (NIH) and the World Health Organization (WHO). These institutions became what one might call "obligatory passage points". As we mentioned in the Preface of the thesis, Bruno Latour and Steven Woolgar describe an "obligatory passage point" as someone (for instance the scientific expert) or something (to take as examples an institution, an article(s) or even a system of technology) that all must employ to accomplish their research tasks.²⁰ Other experts, patrons, or members of society, including working journalists, must simply pass through these "stations" in order to satisfy their interests or to attain their goals.²¹

The story of AIDS in the media is also intriguing because it illuminates the framework of social movements as much as it illuminates the framework of classical and contemporary sociological theory (see Chapter 1). The story of AIDS in the media

²⁰ B Latour and S Woolgar 1986, *Laboratory life: the construction of scientific facts* (New Jersey: Princeton University Press). See also Epstein, *Impure science*, 16.

²¹ *Ibid*, 16.

also offers a model for an understanding of how groups of people (in this context working journalists) participate in the social world that surrounds them to accomplish their collective interests – or to optimize their claims on the available resources. I argue that Wilkinson’s and Tilly’s models of resource mobilization proffer a useful way of understanding some of the social practices of the print media in South Africa. Wilkinson’s and Tilly’s conception of a social movement should afford the reader an opportunity to see just how frequently the media movement, given historical variabilities over time and space, participated in the process of mobilization to acquire the resources necessary for collective action. According to Tilly, resource mobilization is the *sine qua non* of the study of social movements. Tilly states that mobilization identifies the process in terms of which a social movement changes from being a passive conglomeration of people to being an active vehicle in making collective claims.²² Etzioni’s manner of thinking coincides with this dominant conception:

We refer to the process by which a unit gains significantly in the control of assets it previously did not control as mobilization ... A mere increase in the assets of members, of subunits, or even of the unit itself, does not mean that mobilization has occurred, though it increases the mobilization potential. The change in the capacity to control and to use assets is what is significant.²³

Paul Wilkinson depicts a social movement thus:

²² C Tilly 1978, *From mobilization to revolution* (London: McGraw-Hill), 69.

²³ A Etzioni 1968, *The active society* (New York: Free Press), 368–369.

... a deliberate collective endeavour to promote change in any direction by any means
... A social movement must evince a minimal degree of organization, though this may range from a loose, informal or partial level of organization to the highly institutionalized and bureaucratized movement and the corporate group ... A social movement's commitment to change and the *raison d'être* of its organization are founded upon the conscious volition, normative commitment to the movement's aims or beliefs, and active participation on the part of the followers or members.²⁴

Tilly concurs with Wilkinson's characterization of a social movement. A social movement consists of a group of people who "somehow orient themselves to the same belief system and act together to promote change on the basis of the common orientation,"²⁵ he argues. And the movement's basis for collective action, Tilly continues, can be understood in terms of five components, namely interest, organization, mobilization, opportunity, and collective action itself.²⁶ The movement's interests are the benefits and losses that arise out of its interrelationship with other social movements of protest and action in society; organization embodies its structure which occasionally impacts on its ability to realise its interests; mobilization is the process by which it assumes control over the resources necessary for collective action; opportunity consists of its relationship with the outside world (opportunity affords a social movement a chance to act upon its interests); and collective action entails a group of people within a social movement acting together in pursuance of their common interests.²⁷

²⁴ P Wilkinson 1971 *Social movement*. London: Pall Mall, 39.

²⁵ Tilly, *From mobilization to revolution*, 40.

²⁶ *Ibid*, 7.

²⁷ *Ibid*, 7.

My study applies this particular framework of a social movement to try to formulate cogent sociological questions regarding media coverage of AIDS in South Africa, to provide important background information regarding the courses and trajectories of the media's mobilization against AIDS, to get the reader to think about the nature of the 'war' (see below) against the disease. However, as I will demonstrate later, Wilkinson's and Tilly's analyses are limited by their narrow application; their analytical framework does not have a wider bearing. For resource mobilization is the primary domain of their study; their profounder concern is the deepest ways in which different groups of people engage in the process of mobilization to maximise their interests. As a result, my framework of a social movement will be accompanied by certain modifications. To start with, the reader is reminded that what I describe here as a media movement is a movement of a special type; it is not embedded by some of the physical characteristics of an archetypical social movement, to take as a good example structural differentiation (see Tilly²⁸). The media movement is by no means a bureaucratic organization, a giant or an institutionalized structure invested with a distinct core of leadership.

The distinctive trait of our media movement is that human actors, who form a complex system of social relationships within it, share a common identity, that is, the identity of being professional journalists. Accordingly, these social agents by no means incorporate a plurality of beliefs. They are historically linked by common beliefs, sentiments and ideals. As we have seen, the news reports they generated over time and space were founded on a particular configuration of beliefs about the object of their interest, namely AIDS. The media movement elaborates its own conception of

²⁸ Ibid, 64.

AIDS, mobilizes its audience (readers) behind this conception, and then reports it as meaning. The beliefs of the media movement collect around the ideas that AIDS is a “biomedical disease”, a “homosexual disease”, a “heterosexual disease”, and a “modern-day Black Death”. The media movement is very deeply rooted in this framework of beliefs. And to the extent that working journalists share and identify with these beliefs, they have a basis for collective action.

Common professional identity not only establishes the connective tissue linking working journalists to particular beliefs, but also affords them the opportunity to mobilize their key resource or asset. I argue that the media’s literary power embodied its key resource. To the extent that the media was able to gain control over this asset, it constituted a ‘movement’ of some kind. The media movement is not simply made up of a *passive* collection of people who “receive” the biomedical narratives of AIDS from credentialized experts, it is also constituted by *active* human agents; these human agents participate daily in the process of mobilization to produce a certain kind of rhetoric or style of discourse. Sensational moments (drama and spectacle) are much in evidence in the media rhetoric on AIDS (see 1.3 below). This dramatic form of representation is the key to an understanding of how the media gained control over the everyday language of AIDS. By virtue of its persuasiveness and overpowering nature, the media’s rhetoric aroused the fear of contagion and death. The following headlines speak directly to these thrilling and melodramatic qualities of the disease:

“AIDS in SA is spreading fast”²⁹

“UK Govt acts to stop AIDS plague”³⁰

²⁹ *The Citizen*, 15 January 1986.

“Africa turns a blind eye to the AIDS time bomb”³¹

“Ticking time bomb”³²

“AIDS heading for SA’s No 1 killer spot”³³

“AIDS rocks insurance business”³⁴

“AIDS virus at gallop”³⁵

“AIDS ready to explode in SA”³⁶

“Survey shows shock AIDS increase”³⁷

“Virus promises huge disaster”³⁸

The media’s mobilization against AIDS was also made possible by their framework of collective interests. Mobilization against AIDS was a process by which the media accomplished what Tilly would call “utilitarian” interests.³⁹ By mainstreaming AIDS, and by revealing some of its dramatic connotations, the media succeeded in accomplishing its narrow interests, in boosting circulation. The extent of the media’s collective action against AIDS can also be understood against the backdrop of the key component of opportunity. The liberalization of the political process in the early 1990s is vital to an understanding of the relationship between the media movement and its external environment. Following the decline of the system of racial domination the nature of the relationship between the media and its readers altered: the media’s

³⁰ *The Argus*, 4 November 1986.

³¹ *The Star*, 2 June 1987.

³² *City Press*, 19 July 1987.

³³ *Business Day*, 15 September 1988.

³⁴ *Sowetan*, 20 July 1988.

³⁵ *The Star*, 14 November 1988.

³⁶ *City Press*, 14 August 1988.

³⁷ *The Citizen*, 14 November 1988.

³⁸ *Business Day*, 24 April 1989.

³⁹ Tilly, *From mobilization to revolution*, 69.

story of lost liberties (apartheid) was shunted to the edges of the frame; it was substituted for the story of invisible germs, the story of HIV/AIDS.

This historical situation (the dramatic fall of apartheid) is also vital for grasping the media movement's coverage of AIDS; it set the conditions for the media's mobilization against the disease. AIDS featured in the media on a grand scale because of the liberalization of the political process and the beginning of the transition in the early 1990s. In addition, AIDS featured in the media on a grand scale because of its appeal to our baser instincts of human nature; it encompassed many sensational moments. Furthermore, AIDS became interesting for the media owing to its macabre character. The disease collected around some very dark issues: the AIDS disorder bequeathed pain, suffering and ultimately death. AIDS became the main characteristic of news because it brought to the surface what Fiske would call a "site of maximum turbulence",⁴⁰ hence its depiction in some of the written sources as a social disorder, a social problem of immense import.

However, a social movement is much more than the sum of its beliefs and interests. A social movement illuminates groups of people united by common or tightly knit beliefs and interests – groups of people participating in a wide range of activities to maximise their competitive advantages. Just the same, the idea of a social movement is much more convoluted than that; the idea of a social movement lends itself to many analytical complexities. From my perspective, Wilkinson and Tilly's framework of a social movement is greatly weakened by its complete ignoring of the different ways in which a social movement legitimizes, validates, justifies or sanctions itself. Wilkinson

and Tilly do not help us in thinking about how a social movement authorizes itself, so to speak, as a ‘proper’ voice speaking in the language depicting the true nature of things. Wilkinson and Tilly do not give any consideration on how a social movement goes about creating the sense of *right* in order to win the trust and confidence of its audience and thus to render itself unimpeachable. I argue that an analysis of a social movement should take into account the manner in which it creates what one might call a ‘believable’ narrative, a feeling or an aura of authenticity. Media representation of AIDS and their collective action against the disease depended not only on what Tilly would call the “changing combinations”⁴¹ of beliefs, interests, mobilization, and opportunity, but also on praxis (practical actions), a beachhead of believability, and a system of morality (as the reader knows, the story of AIDS sought a return to a supposedly ethical past).

At this point, Treichler’s use of the metaphor of a ‘war’ is particularly illustrative. Treichler uses the “war ‘metaphor’” to describe the sustained campaign against AIDS. Treichler depicts the activities of those who are at the ‘forefront’ of the battle against AIDS; our AIDS activists are the people confronted daily with the enormity and astounding practical demands of the disease.⁴² Significantly, in this war, there is the pressure of time, the pressure to act swiftly, immediately, and decisively. Against the urgency to deal with the disease on a compounded growth, the pressure to see only the relevance for “practice”, the “real-life experience”, becomes overwhelming. Against the urgency to ‘save people’s lives’, against the urgency to tell the story of people confronted daily by the threat of contagion and death, belief in the efficacy of the

⁴⁰ J Fiske 1994, *Media matters: everyday culture and political change* (Minneapolis: University of Minnesota Press), 8.

⁴¹ Tilly, *From mobilization to revolution*, 7.

moral scheme assumes some special relevance. ‘AIDS is about people’s lives – not theory,’ the media have argued. In May 2000 the *Sunday Times* underlined this reading when it declared: AIDS is “not a freedom of speech issue”.⁴³ AIDS is about “scientifically verifiable facts”.⁴⁴ In a word, AIDS is a war.

In this war context, the pressure to move towards empirical knowledge also becomes overwhelming. As a result, interpretation, analysis and explanation were effaced, and description and empiricism became the essence of the media’s mobilization against AIDS. The media argued that circumstances do not permit them an opportunity for thoughtful reflection, for an analysis and interpretation of their findings. Practical actions were performed under the pressure of time, the pressure to do something. In this light one can understand why statistical data, rather than qualitative or analytical data (the sort of data that lend itself to reflectiveness and explanation), exercised more influence on the professional dispositions of many working journalists.

By my reasoning, practical actions became urgent largely because the media movement wanted to confront the threat of the amoral (sexual promiscuity), to single out morality as a strong countercurrent. Like the *Godfather* films (see Jameson’s take on these epic films⁴⁵), the media movement sought to reawaken the ideal of the moral past; to accomplish a defence of the moral reality of the past. From this understanding, the sustained determination to mainstream AIDS, to foreground the disease, stems from the fact that the media claimed to function within the bounds of moral credibility and authenticity. The media’s story on AIDS became co-extensive with morality

⁴² Treichler, *How to have theory in an epidemic*, 2–3.

⁴³ *Sunday Times*, 7 May 2000.

⁴⁴ *Ibid.*

because many working journalists claimed to owe a substantive moral duty to society; the media positioned themselves as credible voices of the diseased, as their source of inspiration and hope in a heartless world. Consequently, our strong feelings were enlisted on the side of media as they engaged in the process of mobilization, as they regulated our sexual lifestyles, as they guarded against our loose morals. I argue that the media's descension into a moral compass, their protean tendency to descend into an ethical point of view, offers a reading of how they succeeded in establishing an aura of authenticity – of how the media movement came to be accepted as being genuinely right, genuinely authentic.

Another key determinant of collective action against AIDS was the absence of alternative voices (between 1981 to 2000). The extent of the media's coverage of AIDS was also a function of the fact that knowledge about AIDS in South Africa was by no means a site of struggle, a terrain of conflict and contestation. What also powerfully shaped the media movement was that in the 'war' against AIDS, there had been no competing claims, no varying interests. Actually, the media movement itself accomplished the marginalization of contending interests, of opposing voices. The phenomenon of AIDS was not by any means subjected to a critical rendering – even though, as Stuart Hall rightly puts it, "AIDS is indeed a more complex and displaced question than just people dying out there".⁴⁶ The media's descension into a moral point of view, the marginality of critical voices, and the centrality of the media movement in the war against AIDS, brings me in a roundabout manner to one of the major findings of this study: the story of AIDS in South Africa is a perfect microcosm

⁴⁵ See Dika, 'The representation of ethnicity in *The Godfather*', 76–108.

⁴⁶ S Hall 1992, 'Cultural studies and its theoretical legacies', in L Grossberg, C Nelson and P Treichler: *Cultural studies* (New York: Routledge), 285.

of ‘pure science’ rather than ‘impure science.’ AIDS in South Africa is a case in which the normal flow of trust and confidence between the credentialized expert and laypeople became entrenched or fortified. (As you know, Epstein’s *Impure science*, in sharp contrast, is a comprehensive look at how this normal flow of trust and credibility became disrupted.) From the very beginning, the media was shaped a great deal by its relationship with the scientific experts and their myriad institutions (the CDC, NIH, and the WHO). By no means did the media feel constricted or inhibited in their coverage of the epidemiology and the science of the disease. From the start, the relationship between the media and scientific experts centred on what Blumler and Gurevitch would call the “exchange model”⁴⁷ of communication. On the one hand, the credentialized expert honoured or acknowledged the status of the media as important vehicles of communication and on the other hand, the media, as a *quid pro quo*, accepted the epidemiological and scientific claims of the credentialized expert.

From the above reading, one of the major premises of my thesis is that a social problem (for example AIDS) that becomes entangled in the developing contradictions of society, or that lies at the very heart of a deep historical crisis (such as the crisis bequeathed by apartheid history) offers great potential to generate a strong countercurrent, in this context a moral countercurrent. Such a social problem might also provide the right conditions for the emergence of a social movement, not only when some collectivities within the organism of society succeed in turning it into an arena for intensified mobilization and collective action (to gain control of the available resources). A social problem of that kind might provide the staging ground for the emergence of a social movement, when such collectivities also get intermingled with

⁴⁷ J G Blumler and M Gurevitch 1981, ‘An essay on role relationships’, in D D Nimmo and K R Sanders:

the larger politics of representation (see 10.3, 10.4, 10.5 and 10.6 below as well as Chapters 4, 5, 7, 8 and 9) and also become deeply motivated to produce a beachhead of believability, to speak in the language that conjures up some form of authenticity. The media movement sets forth not only the horrific images of people suffering and dying, but also the much broader issues of marginality, representation, authenticity, and the moral fantasies of a society coming to grips with a deepening social and political crisis of the past.

By this logic, Wilkinson and Tilly's utilitarian approach to mobilization and collective action offers an inadequate level of understanding. For example, it imagines that collective interests are the *sine qua non* of the study of a social movement; Wilkinson and Tilly take for granted the commonality of interests among people. I argue that resource mobilization is by no means the *sine qua non* of the study of a social movement. Nor can grievance expression alone provide the impetus for the emergence of a social movement. By my rendering, how a social movement attaches itself to popular morality, how it participates in a wide range of practical actions under the pressures of time and space, and how it engages in particular forms of representation (as we have mentioned, statistical data exercised great influence on the professional activities of working journalists) weigh more heavily than its collective interests, resources or assets.

Having said that, I should like to reiterate the point of view made earlier: my attempt in this Chapter to look at AIDS and the media from the framework of a social movement is bedevilled by a few shortcomings. First, what I call the media movement

is hardly a 'movement' in an ideal sense; the media movement does not fit into a conventional frame because it is not embedded with some of the irreducible characteristics of a social movement. One of these is a core of full-time or part-time leadership. Far from being a closely knit organization, the media movement is essentially a loose or informal conglomeration of human agents united by tightly knit interests and beliefs about a contemporary social form, namely AIDS. Second, and very important, my study of AIDS and the media from the social movement perspective does not engage comprehensively, intensely or exhaustively with the entirety of the literature on social movements, to have the reader think about some of the influential formulations in the field. Such an exhaustive attempt might prove very useful in describing the complex dynamics of a social movement, in analysing its relationship with the external world that surrounds it, and in speculating on how and why it participates in the making of certain critical choices. I suggest this should provide the reader a great opportunity for further research and study.

However, the approach I follow should be very useful in helping the reader to think about working journalists as a group of professionals who participate in exercises of story-making. The media denote or define, by way of description, a social problem (AIDS) of catastrophic proportions. The story of AIDS is founded upon what Wilkinson would characterize as "the conscious volition and normative commitment".⁴⁸ My approach is also useful for the understanding of how the producers of the AIDS story, through their day-to-day practical actions, bear significantly upon the larger issues of marginality and morality. The moralistic connotations of the AIDS story should provide much more sociological grounding;

⁴⁸ Wilkinson, *Social movement*, 39.

they should be worthwhile for grasping how a social movement goes about producing for itself a language of legitimation and authenticity.

The AIDS story in the South African media is very significant on another front. AIDS in the South African media matters also because it is a story constructed and reconstructed, created and recreated – it is a story shrouded in deep human passions and emotions. Without a doubt, the media's coverage of AIDS had been influenced a great deal by the institutional characteristics of the CDC, NIH, and the WHO. The story of AIDS in the media was constituted in the first place by the biomedical model established by the institutions of biomedicine. Even so, AIDS is also a disease produced and reproduced through the professional actions of working journalists themselves. AIDS in the South African media was created and recreated through a constellation of what I have called 'authentic voices'. (This is another major finding of this study.) The media's authentic voices can be summarized under four dominant motifs. First, the AIDS story took the form of dramatic representation, where the AIDS victim was represented not only as a guarantor of meaning (see below), but also as an individual urged towards the 'foibles of the sinful'. Second, the media created and recreated AIDS by rendering what I choose to designate an 'authentic ethnic type' (about which more later). Third, AIDS was created and recreated through certain analogues, through the rendering of the metaphor of a plague. And lastly, the AIDS disorder filtered through the theme of redemption.

10.3 AIDS and the ‘foibles of the sinful’ – from the early 1980s to the mid-1990s

The instantaneous consequence of Heckler’s press address was the framing of the parameters of social and scientific discussion about AIDS. That HIV is the AIDS virus set the context of discussion about the disease, about the received narrative of the syndrome. Heckler sent an exceedingly powerful message that centred on the biomedical model of AIDS. AIDS was viewed as a disease caused by a germ. Importantly, in the sphere of the media, this sort of understanding was extended even further. The media argued that contamination by this germ is attributable to the moral failings of the individual. The individual, so the argument ran, contracts AIDS because he or she is free to exercise his or her free will. The actions of individuals were a projection of their own personality characteristics. The individual became what Dinshaw calls in another context “the originating subject,” or the “creator and guarantor of meaning.”⁴⁹ His or her actions were consequences of a certain subjective consciousness. The individual was not a rebel seeking to remake the world, for example by fighting the reign of injustice. Rather, the individual was a rebel who exercised free will by seeking some form of sexual fulfilment. Free will propelled him or her towards a tragic fate: contamination by HIV. Death is not instantaneous, though. The individual suffers a great deal. Slowly, his or her body frame gets ravaged or deeply despoiled by AIDS. And this was said to be the ultimate punishment for their sins!

During this period therefore, the recurrent themes of AIDS in the media took the form of dramatic and moral representation – AIDS was represented as both a personal

⁴⁹ C Dinshaw 1998, *Chaucer and the text: two views of the author* (New York: Garland), 9.

tragedy and death. Media representations of AIDS revived the tragic genre. As we have shown, the geometrical rise in the incidents of HIV was explained in terms of the 'promiscuity', 'infidelity' and 'immorality' of the individual. Originally, the 'individual' was embodied by the homosexual male. AIDS was depicted as a 'gay disease'; in fact, the AIDS syndrome was called gay-related immunodeficiency (GRID). Gay lifestyle was singled out as the main risk factor for AIDS, the prerequisite for moral decadence. Seen in this light, AIDS was a disease that imitated mass culture! It entered into contemporary works of mass culture, not only because of its terminal or deadly nature, but also because of its arousal of deeply rooted human passions and emotions. Because AIDS was also designated a 'lifestyle disease' it ceased to be a story propelled by a plethora of scientific experts alone. AIDS caught the attention of the media too. The AIDS disease became the major object of news because it aroused fear of contagion and death. Sex, promiscuity, infidelity, love and beauty became the most important ingredients of the AIDS story. These elements of mass culture captured popular imagination because they aroused a sense of sensationalism or melodrama. Hence, the underlying impulse of media reports at this point was that AIDS represented society's deepest moral failings. The AIDS story evoked a primordial experience, the moral communion of the past. And by centring on the individual, the 'originating subject', the 'guarantor of meaning', the AIDS story denied evidence of history. The media effaced the much larger issues; it rendered them invisible. By no means was AIDS situated historically.

10.4 Rendering an authentic ethnic-type – from the mid-1980s to the late 1990s

From the mid-1980s the AIDS story in the media captured a sense of nostalgia, a collective wish for something that has been lost. But not only did the AIDS story celebrate the romantic past or bespeak of morality, what was also distinctive about it was its evocation of what one might call the ‘authentic ethnic-type’. In another context, American cultural theorist Vera Dika states that authentic ethnic-types are ethnic inflections such as images and gestures associated with a particular ethnic group.⁵⁰ In the US, the ultimate effect of these inflections was the construction of what was believed to be the true ethnic voice, that is, the Italian-American voice.⁵¹ Dika says that certain art forms (such as the *Godfather* films) bring to us the true Italian-American voice by constructing some particular notions of authenticity, by constructing an authentic ethnic-type.⁵² Therefore, Dika has in mind an ‘insider’s view’ of what is authentic about a particular ethnic group. In my rendering, the story of AIDS in the media evoked Dika’s idea of an authentic ethnic-type. From the mid-1980s the media cast themselves in the role of an authentic voice for the life of a particular ethnic-type. For the media filtered through the prism of their news reports the view that disease and identity are somewhat connected. Rather than contest the existing stereotype of a virile individual, or the caricaturing of Africa as a ‘dark continent’ (see Chapter 6), the media accepted these claims or debatable points of view as profound truths.

⁵⁰ Dika, ‘The representation of ethnicity in *The Godfather*’, 79.

⁵¹ *Ibid*, 79.

⁵² *Ibid*, 79.

These stereotypes endured because the majority of blacks tested positive for the AIDS virus that is HIV. For example, in 1996 the Medical Research Council (MRC) estimated that 2 500 HIV positive blacks died of TB; it was also estimated that 40 per cent of TB patients (mostly blacks) were infected with HIV.⁵³ (For further reading on HIV rates in the black areas, see Chapters 7 and 8). In addition, the lowly socio-economic status of Africans assisted a great deal in forging these ethnic stereotypes. As we have seen in Chapter 9, many black areas are plagued by land hunger. Between 1960 and 1992 an estimated 3,5 million blacks were forcibly removed from their land and dumped in the middle of nowhere.⁵⁴ The majority of Africans have no fixed place of abode; the majority of Africans live in shacks. In fact, the large number of shacks has been one of the defining features of the black townships, particularly around the metropolitans and major towns and cities.⁵⁵ For example, in the early 1990s it was estimated that 32 per cent of blacks in the metropolitan centres were living in shacks, as opposed to 42 per cent in formal housing in the townships and 13 per cent in backyard shacks, garages and outbuildings.⁵⁶

Furthermore, the growing levels of unemployment constituted a major crisis of consumption facing the majority of blacks, more so because it correlated with rampant poverty. Note that in the past the rate of unemployment tended to be very high among blacks because the labour market was racially fragmented; though many blacks formed part of the formal economy, they were unable to secure a living wage.⁵⁷ The negative consequence was that poverty and unemployment became structurally

⁵³ Department of Health 2000, *Statistical Notes* 2(18)(July 2000).

⁵⁴ *The Star*, 16 December 1999.

⁵⁵ McKenzie, 'The contradictions of apartheid', 1–5.

⁵⁶ *Ibid*, 1–5.

⁵⁷ *Ibid*, 1–5.

entrenched in the black areas. This crisis of consumption affected the ability of blacks in the urban areas to pay for their services.⁵⁸ Political turbulence in the black areas also caused major social dislocations. Rampant violence and crime continued to blemish many urban townships where most blacks lived. We have seen that one of the consequences of the liberalization of the political process in the early 1990s was rampant violence in some parts of the country, for example in KwaZulu-Natal and the country's industrial heartland of the former PWV (Pretoria-Witwatersrand-Vereeniging).⁵⁹ Rapid industrialization, which occurred in the context of an urban decline, spawned class, ethnic and other divisions within local communities.⁶⁰

The story of AIDS in the media also collected around this dark centre of black life in South Africa. The lowly socio-economic status of blacks not only made them susceptible to poverty, it also reduced them in health status: it rendered them vulnerable to disease. Henceforth, the victim of AIDS should remind us of a post-modern notion of the self that is decentred rather than fixed. More importantly, during this period the media established a connective tissue linking people's exposure to and contamination by HIV to social background. Media depictions of AIDS involved some aspects of 'abnormality': profligate or promiscuous sexual behaviour. Media representations of heterosexual AIDS consisted of some aspects of stereotyping or labelling.

⁵⁸ Ibid, 1–5.

⁵⁹ M Morris and D Hindson 1992, 'The disintegration of apartheid: from violence to reconstruction', *South African Review* 6:152–170.

10.5 The Black Death as metaphor – from the mid-1980s to the mid-1990s

At this point, the AIDS story in the media became one in which the metaphor of a plague was played out. Running parallel with the notion of an authentic ethnic-type was an apocalyptic representation of AIDS, in which AIDS was depicted as a ‘Black Death.’ In my rendering, the doomsday depictions of the disease can also be understood against the backdrop of the liberalization of the political process and the dawn of the ‘rainbow nation’ in the mid-1990s. For one thing, political liberation, like apartheid history, provided the proper context for the compounded growth of HIV infections. AIDS was represented as a truly dreadful disease wiping out communities and causing massive social upheavals in its wake.

AIDS was depicted as an archetypical viral epidemic that rises suddenly and sweeps through the general population. In keeping with the traditional patterns of Farr’s law (discussed in Chapter 7), the media argued that AIDS followed the seasonal rise and fall of all infectious diseases.⁶¹ By this logic, AIDS fitted into the frame of a viral epidemic (or a plague) if only because it had the following characteristics (common to all viral epidemics): it spread randomly between the sexes; it caused primary disease because it multiplied exponentially until it was stopped by immunity; it coincided with a common, active and abundant microbe in all cases of the same disease; it also coincided with a microbe that renders hosts’ cells dysfunctional; and finally, it generated a predictable pattern of clinical symptoms.⁶²

⁶⁰ Ibid, 34.

⁶¹ *Pharmac & Ther* 55(1992): 201–277.

⁶² Ibid.

This brings me to one of the paradoxes of AIDS (highlighted previously in this study). On the one hand, its causative agent (HIV) was described in the scientific literature as a slow virus (a member of the lentivirus subfamily). It lies dormant for a number of years until it bursts into some a frenzy of excitement or activity (see Chapter 9). On the other hand, the disease was associated with viral epidemics of the classical milieu, which viral epidemics rise exponentially until they are stopped by immunity – recall Farr’s reasoning that all viral epidemics follow a bell-shaped curve.⁶³ Thus, to the image of an authentic ethnic-type was added the metaphor of the viral epidemic that terrifies. The media replicated the idea that AIDS is reminiscent of a plague. This Black Death metaphor became another authentic voice that filtered through the prism of many media reports at the time.

10.6 Rendering the theme of redemption – from the mid-1990s to the year 2000

Before the mid-1990s the media sought to create a sense of good and evil by blaming the ‘promiscuous’ or ‘libidinous’ *individual* for AIDS. Contamination by HIV was seen as a personal tragedy. The individual, many in the media argued, contracted HIV because he or she was free to exercise his or her own will, to shape his or her own social world, or to bend things to his or her own designs. The individual was blamed for AIDS because he or she contained evil. The real sinning of the individual lay in the fact that he or she was dominated by sexual passion. Contamination by AIDS was thought to be a consequence of the individual’s violation of the moral order of society. The media’s tendency to blame the individual – to rest moral responsibility on the individual – represented a classic form of behaviourism. AIDS was depicted through

⁶³ Ibid.

what one might call a liberal-humanist perspective, which denied any evidence of historical factors. In addition, the media depicted AIDS through the canons of drama and spectacle. It refused to take explicit account of the historical specificity of AIDS, the distinctive social context within which the disease occurred. From the mid-1990s, however, this narrative was displaced by a narrative that depicted the AIDS victim as a person plagued by his or her inability to shape his or her destiny; this destiny being determined by the larger social forces acting upon his or her life. The resultant tragedy was seen as a direct consequence of the vices of the age, the irreducible characteristics of society. The historical situation violated human character and turned it into a case of tragedy. History was, so to speak, indicted.

This I shall refer to as the 'historical limitation' of the AIDS victim. AIDS was explained in terms of the failure to improve the human condition. Like the Roman Empire, which was morally diseased to its foundation, AIDS was seen as a consequence of the structural faults embedded in our society. AIDS was seen as a disease that lies at the heart not only of society's moral crisis, but also of the political crisis of apartheid history. The crisis of consumption and the compounded growth of HIV reminded the media of what one might call the Hobbesian 'state of nature'. Crime, unemployment, substance abuse, prostitution and poverty, etc, turned their society into a 'state of war against all.' As a result, the AIDS victims were depicted as tragic characters. History served as a major limitation to their character. Their tragedy became an expression of the social fragmentation of their times. Against this background, society was reified. Society was given a status of pre-eminence, an existence of its own, a source of a framework of common values that serve as a basis for social integration.

The idea of “collective values” should remind us of Durkheim’s concept of the “collective conscience”.⁶⁴ In keeping with Durkheim’s⁶⁵ functionalist practices of interpretation, the media announced that for any group of people to live collectively, they must have common agreements on how they should arrange their social relationships. Durkheim proposed that men should stop the ‘war of all against all’ by organizing their “collective self-preservation”.⁶⁶ In short, Durkheim taught that men – and women – are bound together by common values, based on shared experiences; and all parts of the social system are a microcosm of the wider society.⁶⁷ Evidently, this structural account echoes the underlying themes of traditional sociology or macro sociology discussed in Chapter 1.

I argue that from the mid-1990s to 2000 the print media in South Africa set their news reports within this traditionalist framework in sociology. The media made a call for a type of society structured around collective values and moral sentiments (see Chapter 9). Media reports on AIDS ceased to blame the individual for AIDS. Working journalists cast themselves as the legitimate integrative forces in society, as catalysts for nation building, as the repositories of the all-encompassing values of a ‘caring society,’ that is, the ‘rainbow nation’. Because AIDS became bound up with the world in which people lived, the news reports that conveyed the sense of a virile and libidinous ethnic type were effaced. The idea of an authentic ethnic-type was seen as a corrosive image. In addition, stereotyping and scapegoating (the tendency to blame

⁶⁴ E Durkheim 1964, *The division of labour* (New York: Free Press); see also E Durkheim 1982, *The rules of sociological method* (London: Macmillan).

⁶⁵ See Cuff *et al*, *Perspectives in sociology*, 23.

⁶⁶ *Ibid*, 26.

⁶⁷ *Ibid*, 26.

some groups of people for something) ceased to propel media coverage of AIDS. Instead, redemption became the dominant impulse of media reports. The media called for the redemption of the AIDS victims themselves, including ‘AIDS babies’ and ‘AIDS orphans’, from the heartless world bequeathed by Acquired Immune Deficiency Syndrome. Through their evocation of the theme of redemption, working journalists sought for legitimacy and forgiveness for their ‘sins’ of the past: for their denial of history, for their denigration of homosexuals, and for their stereotypical representation of some groups as virile and libidinous.

10.7 The last word: modernity and the shifting movements of the AIDS story

From the reading above, I argue that the AIDS story in the media genuinely exemplifies the contours of what Graff has called in another context ‘modernist literature’⁶⁸ (also see George Lukacs’⁶⁹ perspective on modernity and its antecedents). For it expresses boundless faith and confidence in the power of the human imagination (boundless faith and confidence in the imagination of the credentialized expert), and also unlimited faith and confidence in our ability to impose our version of moral order. As we have seen above, moral reasoning defined its essence, its *sine qua non*. Like some contemporary works of film,⁷⁰ it can be argued that the AIDS story represented a criticism of the immorality of our modern life. In other words, like modernist forms of literature, AIDS in the media conveyed some sense of the normal (good) and the abnormal (evil). It centred on heroes and victims/villains. For instance, it accomplished a critique of African heterosexual lifestyle and elevated Western

⁶⁸ For further reading on modernist literature, see text by G Lukacs 1963, *The meaning of contemporary realism* (London: Merlin), 33.

⁶⁹ Ibid, 33.

heterosexuality to a status of high culture. It sought to accentuate or to bring into the foreground landscape what one might call the panorama of immorality and anomie embedded in our modern world.

Furthermore, by appealing to the remotest past, the AIDS story revealed its romanticism or conservatism. Because of its tendency to invoke the supposedly moral past, the AIDS story became embedded in nostalgia. Contamination by AIDS became both a moral issue (as the reader knows, the narrative of moral protest takes on a collective normative position, it links AIDS to the moral failings of the individual) and a historical issue. Whereas from the early 1980s to the mid-1990s the panorama of immorality and anomie in society was blamed on the individual, from the mid-1990s the society's panorama of immorality and anomie was seen as the product of great historical forces.

Another dominant impulse of the AIDS story, apart from its modernist elements, concerns its shifting movements. The received narrative of AIDS and the media's authentic voices (see Chapter 1) embody systems of representation, which epitomize what Foucault would call "conceptual maps" or "discourses".⁷¹ They embody some kinds of meaningful statement in point of AIDS in the media. We have seen that the received narrative (biomedical model) of AIDS is the only narrative that 'kept going' over time. The biomedical model conveyed a sense of historical continuity rather than rupture or change, because the scientific language of the disease was validated through various structures of social relations.

⁷⁰ Ibid, 33.

Even so, the story of AIDS manifested some shifting movements, because the AIDS story was embedded by a series of authentic voices, for example, the narratives of moral protest ('nostalgia') and redemption. We have argued that these narrative conventions were produced and reproduced through individual voluntarism. They were constructed and reconstructed through the activities of working journalists themselves. What is more important, our authentic voices are historically determined – they are historical constructs, responding to shifting historical moments. Unlike the received narrative, they were conceived within highly different historical contexts. Thus, they convey a sense of historical rupture or historical change. Seen from this understanding, AIDS in the media provides important information for the understanding of structure, human agency (the subjective components of human action) and social change. The story of AIDS offers us some important insights into the role of the media in invoking a specific set of meanings (authentic voices) over time and space. From my viewpoint, the movement of the AIDS story from a gay disease to redemption represents another overwhelming character of the disease in South Africa.

Therefore, to the question that the reader might ask, 'What is Acquired Immune Deficiency Syndrome?' one might be prompted to respond in this manner: AIDS is a constellation of the received narrative of the biomedical model and the entire range of authentic voices that filtered through the prism of news reports over time and space. The received narrative of AIDS was derived from the objective characteristics of a large assortment of biomedical institutions. On the other hand, our authentic voices were derived mostly from the activities of working journalists themselves. Knowledge

⁷¹ M Foucault 1991, *The Foucault reader* (Harmondsworth: Penguin).

about AIDS was not only mediated through the biomedical model, which was constructed by institutions for disease control (*structure*), but also through a large assortment of symbolic objects constructed through human consciousness (*agency*). Like the biomedical model of AIDS, these constructed objects determined the form in which the disease was constructed as narrative. AIDS is not simply a bundle of scientific principles constructed in the sphere of the laboratory, AIDS is also a story played out in the public domain, a story made and remade.

Hence, the story of AIDS in the media is essentially a ‘hybridized’ text, a fusion between the biomedical model and a series of authentic voices. The AIDS story in the media is far more than a scientific story. For example, the story of AIDS is a microcosm of morality and identity. AIDS in the media is an outcome of human agency, of the media’s active participation or involvement in the creation of a specific set of meanings. AIDS is a product of human consciousness, of a range of professional practices guided by human thought. The media’s authentic voices are by no means counter-hegemonic, though. Our authentic voices by no means represent narrative resistance, since they do not embody a great cry against the authenticity, validity and credibility of the biomedical model of AIDS. The media’s authentic voices and the narrative of biomedicine embody a sort of hybridization within the literary representation of AIDS. They are an outcome of some sort of a dialogical encounter between working journalists and the ‘credentialized experts’. As I have argued, the narratives of biomedicine and authentic voices have evolved through relationships based on mutual dependence, normative integration, and shared understanding between the working journalist and the scientific expert. On the one hand, our ‘credentialized experts’ made ‘nature behave in the laboratory’. Their expert

knowledge imbued them with the capacity to expound on how the immune system becomes impaired with the onset of opportunistic infections and how to treat the pathological conditions that underlie these infections. Accordingly, they were highly instrumental in creating the scientific story of AIDS (received narrative). On the other hand, our working journalists became instrumental not only in commodifying the received narrative of the disease through the prism of news reports, but also in producing a large assortment of authentic voices. Working journalists provided their readers with “sufficient” knowledge on where outbreaks of the disease will occur and who is highly at risk of contamination – the media also identified behavioural patterns that rendered people at risk of death from the modern-day Black Death.

Towards this end, media depictions of AIDS should remind the reader of the power of working journalists in shaping the collective imagination, in framing the parameters of discussion about social phenomena. Once the media’s authentic voices had percolated into popular consciousness, once they became established as profound truths, they set the context of discussion about the disease. As a result, any countercurrents to these authentic voices, any alternative voices seeking to go beyond the frames and boundaries set by the media’s narratives, were rendered invisible. Our authentic voices, like the narrative of the biomedical model, revealed to us the ‘real nature’ of AIDS. Henceforth, I argue that AIDS is narrative if only because its history not only reminds us of what happened medically and scientifically since the early 1980s in Los Angeles, United States, but also because its history affords us an opportunity to see the different ways in which it was understood and depicted by the media over time and space. Undoubtedly, Acquired Immune Deficiency Syndrome was far more than a major biomedical story, it was also an amalgam of tragedy, melodrama, spectacle,

morality, and identity. These larger factors played themselves out within the context of apartheid and post-apartheid history, within the context of the contradictions and crises bequeathed by the primordial past and contemporary history. I argue that this dramatic or symbolic form of representation also embodies the overwhelming character of the story of AIDS in South Africa.