REPORTING AIDS: REPRESENTATION, RHETORIC AND THE CONSTRUCTION OF
GLOBAL GEOGRAPHIES OF AIDS

by

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Reporting AIDS: Representation, Rhetoric and the Construction of Global Geographies of AIDS

Abstract

I aim to examine some of the complex personal, political and popular geographies generative of, encoded in and legitimated by the 'epidemic of signification': the construction of AIDS through discourse and language. Peter Gould's popularly-oriented book The Slow Plague is, arguably, Geography's most significant entry to date into this discourse and Slim: A Reporter's Own Story of AIDS in East Africa forms a key part of the same 'epidemic'. It was written by Ed Hooper, a journalist and photographer for the BBC and Guardian, who produced several of the early 'AIDS in Africa' Western media representations.

Both men write 'authoritatively' about AIDS, aim to serve the 'public', and rely upon the rhetorics of science, objective journalism and empire for the powerful conveyance of their stories and respective geographical knowledges. The signifying practices and rhetoric they use encode and legitimate a wide variety of aspirations, meanings, beliefs, attitudes, ideas and actions. I am attempting to unravel their complex narratives: focussing initially on a critique of Gould's concept of science; then interrogating the explicitly visual and scientific geography Gould aims to situate within the AIDS research paradigm. I use Slim to examine the mechanics of construction of the 'AIDS in Africa' Western media discourse, focussing both on the formative and intense discursive moment of the late 1980s and on more recent media representations of 'AIDS in Africa'. This allows these representations to be situated within a specific and revealing personal and political diseconomy of capital, access, perception and production. By unravelling these respective narratives I aim to map part of the complex political and critical terrain that a Human and humane Geography must negotiate if it is to respond to the complex AIDS geographies revealed.
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Introduction

Aside from its harsh physicality, AIDS is a nexus of meaning and discourse. Particular notions of sex, race, gender, religion, medicine, science, the social, nature and culture are called upon and reinforced or re-negotiated whenever AIDS is talked about. When one writes authoritatively about AIDS, a deep responsibility is shouldered. Meanings, beliefs, attitudes, ideas and actions flow from the text-writing within this nexus can have a very real, material effect on bodies. The sweep of a powerful pen may lead directly to mental and physical pain, or it may offer succour, hope or an easing of suffering. Hall was not overstating his case when he declared "textuality as site of life or death" since the manner in which one talks, writes, and represents in relation to AIDS can be exactly this.¹

Here I examine three sets of popular and potentially very powerful representations constructed within this frighteningly significant discursive nexus. Peter Gould's popularly-oriented book The Slow Plague is, arguably, Geography's most significant entry to date into the discourse on AIDS and I analyse his work in detail in Chapter One, focussing initially on a critique of Gould's concept of science; then interrogating the explicitly spatial, visual and scientific geography that Gould aims to situate within the AIDS research paradigm.

I then turn from an analysis of Geography's dominant response to AIDS to a specific and monolithic popular geography worked out within this nexus, 'AIDS in Africa', as chronicled by the media, specifically the 'quality press', in Britain and North America. Slim: A Reporter's Own Story of AIDS in East Africa forms a key part of this popular discourse. It was written by Ed Hooper, a journalist and photographer for the BBC and The Guardian, who produced several of the early 'AIDS in Africa' Western media stories and also several photographs of Ugandan people with AIDS which were syndicated widely in Britain and North America. Slim is a literary journalistic account of Hooper's time in Uganda reporting AIDS. It therefore both describes the

mechanics of construction of the 'AIDS in Africa' media discourse and feeds into this self-same discourse as a piece of popular representation itself. So, in Chapter Two I aim to examine, first, the literary construction of representations of 'AIDS in Africa'- attempting to unravel the intertwining rhetorics of objectivity and empire within which the story is predominantly couched. And, secondly, I examine the literal construction of this discourse, since Slim reveals for analysis the asymmetries of power and disproportionate economies of capital, access, sight and production that underpin and enable the 'AIDS in Africa' media narrative. These asymmetries and diseconomies normally lie hidden behind the journalistic rhetoric of objectivity and passivity but they form a crucial part of the actuality of the situation from which these representations emerge. A considerable amount of meaning is added to the media representations when considered within the context revealed by Slim. Therefore, having examined this context, in Chapter Three I turn to the media representations themselves, considering, initially, the frantic and frightening discursive moment in the late 1980s to which Slim provides the backdrop. This period of time saw 'AIDS in Africa' first reported in the Western press and, I believe, established a dominant tone and framework within which the story was relayed and understood, a framework of understanding still in use today. This framework both encodes and legitimates a series of polymorphous collusions between racism and sexism and draws upon and reinforces a particularly distinctive geographical imaginary: the story seems to take place in an aestheticised and isolated essentially colonial, chaotic, woeful and disease-ridden 'Africa', and this, of course, has many detrimental repercussions for those so represented.

I conclude, by way of a postscript, by examining the first signs of fracture in this monolithic 'AIDS in Africa' media discourse described above. In 1993, while other news outlets continued to relay the 'AIDS in Africa' story within the framework of understanding established in the late 1980s, The Sunday Times of London broke ranks and began to run a series of articles suggesting that 'AIDS in Africa' was actually "a myth." This new twist in the discourse obviously has equally serious implications for the represented. An analysis of this second, more recent discursive media moment also begins to reveal the alarming complexity of the political and critical representational terrain that Geography must negotiate if it is to contribute - as it can and should - to the fight
against AIDS. This concluding postscript does not attempt to then re-package or summarise this terrain. It is, instead, a deliberately open ending to the analysis of a discourse containing a sickening degree of gross and dangerous oversimplification and closure.

My three chapters and postscript are each intended to stand alone, as separate and distinct 'cuts' at the Geography and geographies of AIDS. But they are bound together by a number of common themes and areas of investigation, and, as such, therefore represent separate cuts into the same anatomy of power, knowledge and spatiality surrounding 'AIDS in Africa'. I attempt to approach this varied collection of popular representations of AIDS and 'AIDS in Africa' from a critical but pragmatic position. The producers of these representations write 'authoritatively' about AIDS, aim to serve the 'public', and rely upon the rhetorics of science, objective journalism and empire for the powerful conveyance of their stories and respective geographical knowledges. The signifying practices and rhetoric they use encode, enable and legitimate a wide variety of aspirations, meanings, beliefs, attitudes, ideas and actions. Power and political possibilities therefore both embrace and emanate from the representations constructed. I attempt to unravel and assess these aims and signifying practices and speculate as to the likely political and practical effects of the representations constructed within this geographical and Geographical discursive nexus. In undertaking this analysis, I am necessarily critical of much that has been written by Geographers on AIDS and by the media on 'AIDS in Africa'. Many offensive and potentially dangerous, perhaps even deadly, images and representations form this discourse. But my aim is not to point an accusing finger at Gould, Hooper or others examined. Instead, I hope to subject these staggeringly important representations to intense and critical scrutiny and to begin tentatively to map the political terrain which future, hopefully more sensitive, representations must negotiate. The representations produced by Geography and journalism are vital tools in the fight against AIDS, offering radical potential and the potential for succour precisely because of the discursive power they evidence here.

But before turning to Gould's work, a brief coda is necessary. I have moved rapidly from talk of pain to talk of representations. These two sit uneasily together; after all "what is the point of the
study of representations, if there is no response to the question of what you say to someone who wants to know if they should take a drug and if that means they'll die two days later or a few months earlier?"2 AIDS may be a nexus of discourse to some, and, as such, ultimately a very real site of life or death. But it is certainly not to others, and those of us who are able, at times, to treat AIDS as a nexus of discourse are, indeed, very fortunate. As Hall argues, AIDS rivets us to the necessary modesty of the intellectual and critical project: a modesty stemming from a feeling of ephemerality and insubstantiality in the work one is doing while still forcing acknowledgment of the fact that, on one level, AIDS is very much a question of who gets represented, who does not, where and how. Critique and theory can indeed bring irreducible insights to political practice, insights which cannot be arrived at in any other way. But this approach to AIDS then places one in a necessary and irresolvable tension between intellectual 'mastery' and modesty. This necessary tension spans and links all four essays here.3

2 Ibid., p.285.

3 This is a tension Peter Gould is also well aware of. In a paper entitled "Spaces of Misrepresentation", Gould addresses the construction/deconstruction dichotomy directly. He states "I can see only three choices . . . The first is to set one's feet firmly on the path of the avant-garde, to be at the mocking, and often self-mocking edge for its own sake. Perhaps even with an awareness that one is caught up in the production-line-to-redundancy way of commenting about the world . . . Perhaps it is a choice made even while acknowledging that deconstruction itself is a tempating, a particular way chosen to be in the world of texts, and therefore, despite all the shrill denials, a method, one of those abhorred methods, nevertheless. It is, to scramble the metaphor thoroughly, the white toga approach, sitting in the margined seats of the colosseum called Discourse, raising or lowering one's thumb in properly modulated, yet still gleeful, disdain at the efforts of those down there in the textual arena. Ribald suggestions of cowardness [sic], calls from the arena to join in the fray, are met with a properly cynical condescension only the truly vulgar deserve. After all, the last vestiges of blood and sand might never wash off, and, anyway, the cleaning bill for one's togas would be quite unbearable". This is skilful and lucid writing, but I feel he overstates his case somewhat. He is aware of the tension between the two intellectual positions, between critique and construction, with the latter being the hardest task of all I feel. However, he presents the situation as an oppositional and antagonistic either/or "choice" when surely the two positions should be existing in symbiosis. Construction of representation then proceeds on the sound basis of critique, of learning from previous mistakes and errors. As Hall eloquently shows, critique of representation is not a detached activity restricted to an idealized realm, especially when the subject of the representations is AIDS. It may be the easier task, but it is just as vital. Individuals on both sides of the dichotomy described by Gould need to avoid the oppositional thinking he demonstrates. This entails neither positioning critique as an activity carried out by toga-wearing aesthetes nor the construction of representation as an activity carried out by vulgar, nasty scientists and journalists. Gould, P., 1994: 'Spaces of Misrepresentation' in Farinelli, F. et al (eds.), Limits of Representation, Studies of Action and Organisation Vol.5, (New York: The Institute of Mind and Behavior). Gould also uses this same "arena" metaphor in Gould, P. 1982: "Is it necessary to choose? Some technical, hermeneutic and emancipatory thoughts on inquiry" in Gould P and Olsson G (eds.), A Search for Common Ground (London: Pion Ltd), p.78.
Chapter One - Spatial Science and Savage Pictures: The Geographer Reports on AIDS

Introduction

Peter Gould's book, *The Slow Plague*, is geography's most significant entry to date into what Treichler has called the epidemic of signification, the construction of AIDS through discourse and language.¹ He is attempting to situate geography within the AIDS research paradigm to rectify what he sees as problems stemming from its neglect of space and place; specifically in relation to planning issues, education and epidemiological prediction. The brand of geography that Gould proffers to AIDS research is both a typification of, and development upon, the dominant approach of the discipline to the AIDS epidemic. For all its range, geography has drawn nearly exclusively on the specialism of medical geography and, even more specifically, spatial science in order to describe the AIDS pandemic. Gould's work, heavily reliant upon mathematical modelling and cartography, is also centrally rooted within this tradition. To date, the two key geographical texts on AIDS are, arguably, *The Geography of AIDS* and the *London International Atlas of AIDS*.²

The title of the first, *The Geography of AIDS*, hints at the largely monological treatment AIDS is given by the discipline. The books are founded upon a positivist epistemology and concentrate on the global mapping and modelling of the origins and diffusion of HIV for the purposes of prediction, control, planning and education.³ Gould broadly shares this epistemological

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foundation, method and aim and I will discuss the problems that arise from it later. But The Slow Plague also represents a significant departure from the 'traditional' manner in which the discipline has handled the pandemic too. Gould's geography may be scientific, but it is both deliberately accessible, popularly-oriented and intended to have intense practical import, following in the footsteps of his earlier work: Spatial Organization, with Abler and Adams, The Geographer at Work and, more directly, his analysis of the democratic consequences of Chernobyl, Fire in the Rain. He is also aiming to speak and act outside the discipline - the explicitly 'popular' nature of the text and its publication by the prestigious Blackwells mean it will therefore have, potentially, a very significant ambassadorial impact. Fire in the Rain and The Slow Plague are the first two books in a geographical trilogy, with the third yet to appear, and they are connected by a very specific notion of geographical inquiry. The trilogy is prefaced by the Latin "liber geographicus pro bono publico" which hints at their content, philosophy and aim. Gould expands on this rather noble aim as follows, "I have a very strong feeling that from time to time people in universities should climb down that circular staircase in the ivory tower, and try to reach out beyond its academic walls to let other people know what has been seen from its vantage point. Perhaps it is worth reflecting upon the fact that 'specula,' the root of 'speculation' is a watchtower. That is why

diffusion patterns of a global epidemic and a research agenda for geographers" in Professional Geographer 40 pp.266-279. See also Watts, S. J. and Okello, R., 1990: "Medical geography and AIDS" in Annals of the Association of American Geographers 80, pp.301-303, for a critical reply to the earlier Shannon article in the same journal, and one of the very few widely-circulated statements on AIDS not to emanate from the discipline's spatial science specialism. 4 Abler, R., Adams, J. S. and Gould, P. 1971: Spatial Organization: The Geographer's View of the World (New Jersey: Prentice Hall); Gould, P. 1985: The Geographer at Work, (London: Routledge); Gould, P. 1990: Fire in the Rain: The Democratic Consequences of Chernobyl (Cambridge, England: Polity Press). 5 The initial signs are that this ambassadorial effect is not entirely a positive one. Erik Eckholm, "a project editor for The New York Times", reviewed The Slow Plague for that newspaper. I will discuss Eckholm's own representations of 'AIDS in Africa' in Chapter 3, but in his largely negative review he takes particular exception to Gould's prose, which he states is, "often patronizing, arrogant or bitter." He also argues that some of the officials and doctors that Gould "castigates" for spatial blindness early in the epidemic did, in fact, notice and react to the spatial patterns of AIDS diffusion "whether or not they used Mr. Gould's precise language and techniques." Eckholm, E. 1993: "The Where of AIDS" - Review of The Slow Plague in The New York Times Book Review, 18/7/93, p.10. Jonathon M. Mann, the Professor of Health and Human Rights, Professor of Epidemiology and International Health, and Director of the International AIDS Center at Harvard reviewed The Slow Plague for Nature. His review was more balanced than Eckholm's, but still negative overall. He declares, "The book is indeed initially stimulating, with sharp and pungent writing. The author's wide-ranging observations and speculations are full of energy and passion. He shines when criticizing others, which, at least at the beginning of the book, heightens our expectations." I agree. But, ultimately, he concludes, "let us come to the central point. Having promised and failed to demonstrate how geography will make a critical difference, the author's real agenda emerges. He informs us that there has apparently been a conspiracy against geographers; every time they have tried to clear up the confusion about AIDS, they have been rebuffed . . . Regrettably, in the end, this is just an angry book, with familiar targets for the general reader: bureaucrats, governments and doctors" Mann, J. 1993: "Spreading Information" - Review of The Slow Plague in Nature 366, 25/11/93, pp.377-378.

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this book is one of a series labeled *liber geographicus pro bono publico* - a geographical book for the public good."\(^6\) So Gould's brand of geography is thus not just popularly-oriented and directed beyond the discipline at the "busy but still curious public" for its own sake.\(^7\) It is intended to serve the "public good" through a communicative intervention in the tacit public sphere.\(^8\) I shall discuss this notion in more detail later.

In *Fire in the Rain* and *The Slow Plague*, Gould is aiming to establish a "truth" which, if accepted, may shape attitudes or be acted upon and for this reason I wish to subject the latter book to the form of critique suggested by Treichler below.

"If we relinquish the compulsion to separate true representations of AIDS from false ones and concentrate instead on the processes and consequences of representation and discursive production, we can begin to sort out how particular versions of truth are produced and sustained, and what cultural work they do in given contexts. Such an approach illuminates the construction of AIDS as a complex narrative and raises questions not so much about truth as about power and representation. To understand the ways AIDS comes to be articulated within particular cultural contexts, the major problem is not determining whether a given account is true or false but identifying the underlying rules and conventions that determine whether that account is received as true or false, by whom, and with what material consequences."\(^9\)

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\(^7\) Ibid., p.xiii.

\(^8\) This notion of "liber geographicus pro bono publico" has become honed and explicit in *Fire in the Rain* and *The Slow Plague*, but the drive to use science to solve real human problems and, at the same time, to make this science understandable and explainable to the general public, has been a central concern threading itself through much of Gould's work, even his early operations research and spatial science. See Gould, P. 1985: *The Geographer at Work* (London: Routledge) for a useful summary of this concern and my later comments on Gould, P. 1982: "Is it necessary to choose? Some technical, hermeneutic and emancipatory thoughts on inquiry" in Gould P and Olsson G (eds.), *A Search for Common Ground* (London: Pion Ltd), pp.71-104, for a more detailed exposition. There is a remarkable continuity in Gould's work.

At a primary level Gould is telling stories about AIDS, simultaneously telling wider stories about race, sex, nature, culture, science and so on, and constructing representations capable of very real effects. What premises do these stories and representations rest on, and what effects might they have? And on a secondary level Gould writes for and about "the geographer" and rhetorically implicates me, as another geographer, in his argument. Am I happy with what he says for me and the specific notion of geography in which he would position - even implicate - me? This chapter is thus a two-pronged investigation of his work; focussing primarily on his representations of AIDS, but also examining the geography in which he is situated. This latter focus speaks to broader issues since "the applied character of geography - whether in imperial enterprises or planning programmes - makes it a prime candidate for teasing out the relationships between, say, political structures and intellectual puzzles, social forces and theoretical problems."10

Gould's Critique of AIDS Science

The Slow Plague is a complex and contradictory piece of work: it is grounded in mathematical spatial science and advanced cartographic techniques and yet it is also presented through and literally made present by simple literary metaphor, making it easy to read and understand; Gould is highly critical of much scientific AIDS research and yet calls upon a geographic science of his own to rectify the problems he identifies; and finally he delivers a stunning personal indictment of the worldwide bureaucratic and political structures charged with managing the AIDS epidemic and yet can still envisage a science, geography, struggling free from these corrupting social and political influences in order to work towards the truth about the epidemic. Rather than simply summarising Gould's narrative flow, I want to examine his emotive critique of existing AIDS science. Many of the flaws he identifies are to be filled, and are able to be filled, by a geographical science. From examining his critique of AIDS research science I will therefore move on to a discussion of the geography that Gould places in this breach - what it can do, its methods and assumptions, and the help he believes it can offer in the fight against AIDS.

The first evidence Gould supplies to indicate that science can be something other than an apolitical and objective quest for the truth in the name of public good comes early in the book when he describes the "discovery" of the HIV virus. "The story of research is deeply blemished by overwhelming arrogance, false claims, catastrophically dysfunctional rivalries, false published evidence, greed for scientific recognition, avaricious claims for huge amounts of money, and governmental interference that had everything to do with national convenience and nothing to do with the truth. It forms a superb, if extreme, example of the fact that science is always a socially negotiated and socially interpreted endeavor."11 Further evidence of this apparent social distortion of the scientific field follows when Gould argues that AIDS thinking and policy is trapped in the dimension of time, leaving us asking the essentially useless question "when"12, with this temporal/differential approach proving to be an utter failure in "illuminating the epidemic in any scientific sense, or providing any insight that might be of the slightest practical value in planning or education."13 He vehemently attacks the epidemiologists and mathematical modellers who research in this area and couch simple ideas in esoteric notation. They are presented as the epitome of "pseudo-science", hawking simple ideas deliberately "jazzed up" in "computerized sandboxes"14 to get bigger research grants but producing ultimately useless information because no one can do anything with the banal and hypothetical numbers they generate.15 Gould argues that this paradigm holds a vice-like grip both on the scientific imagination and on public research money, and he feels an extreme and vehement indignation on the taxpayers' behalf.16

11 The Slow Plague, p.4.
12 Ibid., p.124.
13 Ibid., p.140.
14 Ibid., p.156.
15 Gould's argument against the temporal/differential approach is powerful, but he may be overplaying the degree of 'spatial blindness' of the AIDS research paradigm. There are epidemiologists, "geographers" among them, who are engaged in spatial modelling of HIV and AIDS: see Casetti, E. and Fan, C. 1991: "The Spatial Spread of the AIDS epidemic in Ohio: empirical analyses using the expansion method" in Environment and Planning A 23, pp.1589-608; Smallman-Raynor, M., Cliff, A. D. and Haggett, P. 1992: London International Atlas of AIDS (Oxford: Blackwell Publishers); and various publications from the research work of Drs R and D Wallace on the diffusion of AIDS and HIV in the Bronx.
16 The Slow Plague, p.163.
Gould's aim is to add the question "where?" to the broad scientific agenda in order to remedy what he sees as "spatial blindness" within the temporal paradigm and offer a vital new perspective in the fight against AIDS. He wants to lift scientific vision from the purely temporal horizon. His frustration with the existing order of AIDS thinking and policy is palpable and his criticisms of existing research approaches are powerfully and emotively advanced and read convincingly. He offers many reasons why "we" have been let down by supposedly objective, truth-seeking science, but all seem to stem from an apparent belief that rational science can be muddied, contaminated, constrained or distorted by social and political influences, in particular, money and power.

For example, bureaucracy imposes layer after layer of deadening and distorting constraint on science - "bureaucratic power, combined with a deadly combination of Establishment ignorance and arrogance, suppressed any consideration of the spatial dimensions of the epidemic."\(^{17}\) Gould argues that bureaucracies are "huge, ponderous, faceless institutions with the capacity and power to bring the enormous resources of a society to bear on problems, but with an equal capacity and power to avoid action and bury responsibility in pillow-like procedures . . . When a crisis like the AIDS pandemic builds slowly, like the slow virus that is its cause, the possibilities for exercising and misusing power, while avoiding any responsibility for a decision are enormous."\(^{18}\) In the case of AIDS, he seems to suggest that science has been suffocated by procedures and committees, preventing it from responding flexibly and freely to the epidemic. As a result, "scholars' increasingly resemble marionettes jerking on the end of strings held by government funding agencies. Too frequently these are administered by people who were incapable of imaginative and illuminating scholarly work themselves and so opted for bureaucratic administration instead."\(^{19}\) Gould also believes that dogmatically held political convictions are choking the reasonable and rational scientific quest. He notes, "strident and often sickening statements of moral judgement on the right, and shrill posturing and babbling from the left, both sides exemplifying the certitude of rigidly held moral positions [leaving] reasoned discussion with no place to go."\(^{20}\) And, finally, he

\(^{17}\) Ibid., p.137.
\(^{18}\) Ibid., p.137.
\(^{19}\) Ibid., p.138.
\(^{20}\) Ibid., p.108.
argues that personal weakness in the form of greed, insecurity or need for recognition can also lead science astray. As evidence for this claim he describes the manipulation of a broad-based scientific conference which he himself attended, observing "a display of individual agendas within group agendas within conference agendas that really had little to do with solving genuinely important scientific problems that by any stretch of the imagination were relevant to the AIDS epidemic." These agendas were instead, Gould argues, rooted in greed: "When a human crisis appears, and relatively large sums of money become available to investigate it, all sorts of people come out of hiding like hogs sniffing towards the trough at feeding time. Psychologists investigate the possibility that AIDS might be stressful; sociologists want to test rigorously the idea that the HIV might spread faster... among poor people; ... economists tot up the cost of the epidemic... Anthropologists appear as if by magic, each of them insisting that the place to study sexual behavior and HIV transmission is among 'their people.'" Geographers?

Geography into the Breach

Despite this damning and apparently much needed critique of AIDS science, policy and thought, Gould can still envisage the possibility of a science able to work for the public good. He reserves the name "science" "for an honorable endeavor that seeks to illuminate some aspect of the world." This honorable endeavor is typified by his geography, which he situates beyond the well-established ways of working, a "left-field" renegade outside the dominant AIDS research

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21 Ibid., p.143.
22 Ibid., p.153.
23 Ibid., p.162. A fuller picture of the notion of science that drives Gould's *The Slow Plague* can be found by turning to his earlier work. In *Spatial Organization*, with Abler and Adams, Gould expresses a belief that human geography is a social and behavioural science explicitly concerned with human spatial organization, but also that the discipline must remain practically grounded, the site for applied problem-solving. Abler, R., Adams, J. S. and Gould, P. 1971: *Spatial Organization: The Geographer's View of the World* (New York: Prentice Hall).

He later professes a strong desire for "open philosophical reflection" coupled with an academic involvement "in real problems that [demand] that you get the mud of facts and observations upon your shiny intellectual boots." The desire for openness is underpinned by a belief that "we can use, must use, all perspectives, all traditions of inquiry simultaneously" and constantly strive to lift our thinking from ideological and epistemological ruts and channels that act to constrain our thought. Here, his continued and stated commitment to the solving of real problems and his openness to new philosophies is admirable. *The Slow Plague* acts as a testing ground for this personal aim and method. Can he practice what he preaches? Gould, P. 1982: "Is it necessary to choose? Some technical, hermeneutic and emancipatory thoughts on inquiry" in Gould P and Olsson G (eds.), *A Search for Common Ground* (London: Pion Ltd), pp.71-104.
paradigm, as yet unable to access adequate funding or influence policy, but battling against the odds to make a vital contribution, with the interests of the 'person in the street' at heart.  

As stated above, this contribution is an opening of scientific, political and bureaucratic eyes to space and place in AIDS research, education, planning and policy. Gould's geography promises, he argues, a liberatory way of seeing and visualising the AIDS epidemic, with a series of diffusion maps as most generative of the key "why" and "how" questions surrounding the spread of AIDS. He believes that such geographical awareness, if given due attention and brought to bear earlier in the epidemic, would have shaken lethargy and helped in delivery of education, acted as an AIDS early-warning system, and raised awareness that AIDS is close to all, not a distant threat.

Geography thus offers sight to the AIDS research paradigm: a gaze down onto and across space and place, and a free and enabling way of seeing beyond the dimension of time. Gould describes being called, quasi-religiously, to this specific geographic way of seeing the world and his use of the fictive-we as his main mode of address for the reader in The Slow Plague means that throughout the course of the work "we" too see like Gould and, apparently, therefore like all "geographers". Gould's emphasis on geography as an intrinsically and essentially visual science gives rise to an incredibly scopophilic piece of work. Computer mapping and visual metaphors construct an AIDS-scape out of traditional Cartesian geographic space, which "we" are then able to view, move around and survey as an eye on high. Reading this book is an aesthetic, kinesthetic, almost a cinematic, experience. While the experience may be aesthetic on one level, Gould would argue that this way of seeing is also intensely practical. He presents himself very much as a "doer." In contrast to much of the AIDS "science" he criticises, geography is thus, it seems, both clear-sighted and useful - a near ideal science.

24 The Slow Plague, p.138.
25 Ibid., p61. This positioning of geography as an intrinsically visual science with a distinct and useful way of looking, quite literally, at the world is a common strand through much of Gould's work, though hardly peculiar solely to him. See also, for example, Abler, R., Adams, J. S. and Gould, P. 1971: Spatial Organization: The Geographer's View of the World (New York: Prentice Hall).
26 Gould exhibits the same mode of seeing in Gould, P. and White, R. 1974: Mental Maps (London: Penguin). He shapes, sculpts and scapes Cartesian space and then graphically describes the mental map surfaces so constructed, observing them as a mobile eye on high.
Having engaged in a powerful and emotional critique of much existing AIDS research and placed a visual and scientific geography in the breach subsequently identified, Gould moves to demonstrate exactly what this geography can do. He draws on spatial science in order to model, mathematically, the diffusion of AIDS through space. The popular orientation of his work means that he does not reveal the exact details of the mathematics and models used, but he does provide a verbal outline of his methodological framework.²⁷ He envisages people as members of distinct sets, connected by relations (in this case primarily sexual, but presumably also needle-sharing, blood transfusions and so on) forming structures called backcloths. "It is on a human backcloth that a virus exists as a traffic, and it needs the backcloth of connective tissue to move from person to person as traffic transmission. As we shall see, to stop the HIV traffic transmission you have to break the connections and so fragment the backcloth.²⁸ He provides several graphical examples of such a "backcloth" - one is reproduced overleaf.

²⁷ The language used to describe his mathematical method, together with the nature of Gould's work elsewhere suggests that he is using Atkin's Q-analysis (or polyhedral dynamics), which he describes as an emancipatory mathematics that lets the data set speak for itself by exploring and interrogating structure rather than imposing particular pre-determined orders or classificatory structures upon that data. Gould, P. 1982: "Is it necessary to choose? Some technical, hermeneutic and emancipatory thoughts on inquiry" in Gould P and Olsson G (eds.), A Search for Common Ground (London: Pion Ltd), pp.71-104. A critique of this form of mathematics is beyond the scope of this essay, and as Gould presents his work here as a 'black-box', I aim to judge his method by its results and conclusions.
²⁸ The Slow Plague, p.33.
Figure 1: Gould's "Backcloth", captioned "A set of people structured by multiple sexual relations, including a male and female prostitute, both infected by the HIV. The structure of this backcloth allows for rapid transmission of the HIV unless structure-breaking condoms are used."

The Slow Plague, p.37.

This notion of backcloth and traffic is, in essence, his spatial structure of understanding, upon which he builds his diffusion maps and bases his conclusions and proposed preventive measures. Gould's spatial modelling is based on two forms of diffusion of the HIV virus across this backcloth: spatially contagious diffusion, which he describes as an oozing, like a "wine stain" spreading across a tablecloth; and hierarchical diffusion, which he describes as a jumping across space, and, most notably, through the urban hierarchy.\textsuperscript{29} I will return to a discussion of cloth, traffic, oozings and jumpings later, but Gould is aware of the most obvious criticism that could be levelled at this spatial scientific modelling - that it objectifies the person with AIDS or sero-positive individual and reduces them to a node in a geometric network. He dramatically identifies

\textsuperscript{29} Ibid., pp.62-63.
objectification and abstraction of the human as the root cause of death camps, psycho-killers, gulags and Amin's prisons and worries that the reader will ask "who is this guy?" as he discusses geometries and structures in the face of a humanly devastating pandemic. He does believe however that this discussion and method can serve a practical and helpful purpose and he insists that, though he abstracts, he is well aware that people form the structures he is dealing with. And yet: can rhetoric soften a method that is founded upon an initial setting apart and objectification of the HIV-positive individual or is the method irrevocably flawed?

Via this spatial modelling Gould generates a series of HIV infection maps at a variety of scales, focussing, literally, on the US, the Bronx, Thailand and Africa in his examination of the spread of HIV. "We" are able to look down and across these spaces and see "where" and "how" (spatially) HIV is spreading. Figure 2 is a reproduction of one such view, taken from Gould's case study of the Bronx. In order to explain, in simple terms, the spatial and temporal patterns of infection displayed on his maps, Gould draws on some remarkable visual and geographical metaphors. I have also reproduced the textual visualisation that accompanies the Bronx map, together with, in Figure 3, other examples of the extraordinary metaphors and similes used to describe and explain the diffusion of HIV and AIDS.
Gould describes the above map as, "a geographical portrait of human catastrophe" in which "the rising Western Ridge has now become a north-south wall of death overlooking Burnout Valley, across which you can see inselbergs (isolated mountains) of dead people piling up to the north, east and south."

The Slow Plague, p.133.
Figure 3: Gould's Textual Visualisation of HIV and AIDS

- HIV "works its way through society, like a floodtide working its way along the channels, creeks and tributary filaments of a salt marsh" (p. 28.)

- "Imagine yourself now in the center of AIDS space blowing a big soap bubble around Cleveland . . . Perhaps the HIV spreads in this way, slowly capturing the counties in AIDS space until the multiple bubbles reach those on the periphery and the infection is everywhere" (p. 67.)

- "the highly infected regional epicenters driving the seepage of the virus into the surrounding umlands" (p. 83.)

- "the advancing waves of spatial contagion from San Francisco, Portland and Eugene are throwing out pools of infection ahead of them, pools that will grow and coalesce" (p. 122.)

- "a forest fire advancing steadily, but throwing out sparks ahead of the main burning to start local conflagrations" (p. 122.)

- "the soaring peaks of the urban epicenters driving the geographic diffusion of the virus coalesce in many places to form mountain ranges of human infection and death" (p. 125.)

- The AIDS epidemic is also presented as "a great, slow, global tidal wave" (p. 18.)

- "AIDS tornadoes" touching down in communities. (p. 26.)

- He also constructs a global condom-scape, mapping condom usage before and after the advent of HIV, with "HIV diffusing on a worldwide scale, changing the condom surface like a cold front rippling across a weather map." (p. 48.)
Gould's spatial science - his geographical 'way of seeing' - gives rise to this cartographical representation and its intensely visual, and intensely geographical metaphors. These visualisations, like all representations, will impact on the reader, triggering particular meanings, beliefs, attitudes, ideas and possibly actions, and as such cannot be considered as innocuous superficial description or as unproblematic reflections of reality. Literary metaphors, and, more specifically, metaphors drawn from the natural and physical sciences, are an integral part of Gould's attempt to spatialise and visualise the spread of AIDS, and will have as 'real' an effect as his diffusion maps. I will return to comment in more detail on Gould's cartographical and literary visualisations of HIV and AIDS, and their possible implications, later.

To further explain these wider scale spatial and temporal patterns of HIV infection, Gould advocates an increased attention to the specificity of place. By this he means that "we" should change our "geographic lens"30 and focus in on particular areas in order to counter the gross statistical generalisations produced by those working within the temporal paradigm discussed earlier, and increase our understanding of the diffusion of HIV at the small scale. For each of his four study areas, he demonstrates how this emphasis on place may work in practice as he zooms in to draw on local social, cultural and political factors to explain the patterns of infection observed at the wider scale. This results in an oscillation between nationwide geographies and local anecdotal accounts of infection trends. Both sets of information emanate from the same viewing platform, the position from where "we" look at, but they are each produced, as Gould suggests, by a different power of lens.

This information obtained from 'place' does serve to explain his grand scale spatialisations and visualisations to some extent, and it is in these accounts that much of the work's explicit political bite can be found. As was shown earlier in his critique of much existing AIDS research, Gould is not afraid to move from his science and enter the political fray. In the chapter on the geography of

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30 Ibid., p.88.
the condom he attempts to describe reasons for global condom usage, firing off many 'explanatory' anecdotes, some of which draw on rather dubious cultural generalisations - I will discuss these later - and some of which are extremely welcome. He discusses issues of male pride and machismo, exploitation of women and prostitutes, the role of patriarchy in the Thai sex industry, and elsewhere he berates the Catholic church for preaching a prescription of death. He is undoubtedly frustrated with the political situation in Africa, believing that, as it stands, it offers little real hope of any concerted action to halt the spread of HIV. He sides with the African productive poor and the taxpayers who must pay for the "coordinating activities of the elite," and rails against African government corruption. Finally Gould turns to the U.S. He reserves his hardest hitting for home. He provides a committed indictment of the political betrayal of the Bronx and laments "the languid neglect of self-righteous leadership" in the U.S. together with "the lethargy and benign neglect of presidents and cabinet members," of all political persuasions. The Slow Plague is thus a highly politicized work, but it is difficult to situate Gould within the traditional political spectrum. Many of his comments are radical, but his attacks hit equally at left and right. His political stance seems to be an extension of the renegade "left-field" position he took in his critique of AIDS science. The social and the political, represented by politicians, religion, bureaucracy, patriarchy . . . frustratingly stands in his way as he attempts, as a geographer and scientist, to have a practical impact on the AIDS epidemic. His position, therefore, is essentially and admirably moralistic, as evidenced by his declaration: "Research proposals cannot be hitched to the tumbrils carrying the dead to convert them into bandwagons fort the living. This is not a scientific question, but a moral one."

The Paradox of Critique

I have provided a fairly detailed summary of Gould's arguments: from his vehement social critique of AIDS science, through his conception of a scientific and specifically visionary geography, to his

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31 Ibid., p.83.
32 Ibid., p.108.
33 Ibid., p.203.
spatialisation and visualisation of the spread of HIV, which he sees as the key practical contribution of geography to the fight against the AIDS epidemic. As noted earlier, *The Slow Plague* is a complex piece of work couched in a simple and popular tone. It combines the scientific and the popular; an intense critique of AIDS science with an ultimate adherence to the possibility of clear-eyed research; and the intensely personal and political with a belief that an objective platform can be found from which to view, and enunciate upon, the AIDS epidemic.

A central fissure therefore cuts through *The Slow Plague*. Gould acknowledges that science in general is an intrinsically social endeavor and, more specifically, is also heavily critical of much existing AIDS science, suggesting it is distorted and tainted by money and power. And yet he then moves to advance his own findings on the AIDS epidemic from an explicitly scientific platform. He has here run into the unavoidable paradox encountered by all who attempt to engage in a social critique of science. As this form of critique bites, it also eats away the epistemological foundations upon which its own authority and the immutability of its own knowledge claims are based, since it will itself be affected by pretensions to science and judged by many of these scientific standards - and this includes, of course, my own accounts here!

Such critique therefore needs to find a way of negotiating this paradox. So Gould, in particular, must subsequently be able to demonstrate that his own science is, though intrinsically social, still able to produce objective and truthful 'visions' of the AIDS epidemic, and also free from the social and political distortions he observes in other branches of AIDS science. I wish to follow two possible but very different readings of Gould's attempted negotiations of this paradox. The first reading relies purely on the evidence Gould lays before the reader in *The Slow Plague* itself, and the second draws on work Gould has published elsewhere, and, as will be demonstrated, throws a much better light on the nature of his project here.

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34 Ibid., p.4.
In *The Slow Plague*, Gould acknowledges that science is both "always a socially negotiated and socially interpreted endeavor,"35 and that "science is a socially contested enterprise."36 He never explicitly reflects upon these assertions and, as a result, they are left hanging in the text reading as bland meta-level admissions of common critical knowledge. He does not appear to pursue the implications of these comments through his own geographical science and the visions that it produces. He is, however, more explicit in dealing with the manifestations of this acknowledged sociality of science with reference to the AIDS science he so vehemently criticises. In describing how these branches of science are, apparently, distorted by money and power, he appears to be suggesting that there are, in fact, two levels of sociality - a pure and harmless level which, of course, "we" all know about, and a dirtier level which can taint, corrupt and distort. And, again, he provides no explicit reasons why his own geographical science should, in contrast, be free from this latter distorting influence and prove more reliable to the public. He may be blandly stating that all science is social, but his social scientific practices are still presented as 'better' than others with a more privileged access to truth. And despite the evidence that he himself observes - of distorted AIDS science all around - he can still envisage a free scientific space or platform from which to objectively view the spread of HIV and AIDS. Why and how? The reader is not told.

Instead, it is necessary to turn to the work of others in order to examine, for Gould's work, the implications of this admission that science is ineluctably a social practice. Science is widely seen as an attempt to procure knowledge untainted by personal beliefs, social attitudes or political aspirations and therefore it has come to denote a privileged realm of knowledge production - reliable, removed and sharply differentiated from other intellectual domains. The 'received' view of science assumes that scientific knowledge is determined by the actual nature of the physical world and that the social origins of this knowledge are irrelevant to its content. The social constructionist line of reasoning dismisses this view as carefully cultivated myth. In contrast to the above 'received' view, Woolgar examines science as social activity, seeing science as inseparable from its social practice. So where Gould provides a socially critical reading of some of the AIDS

35 Ibid., p.4.
36 Ibid., p.190.
science he encounters and suggests that he sees bad or tainted science, presented with the same evidence, Woolgar would take a harder line than this: "it is not that science has its 'social aspects', thus implying that a residual (hard core) kernel of science proceeds untainted by extraneous non-scientific (ie. 'social') factors, but that science is itself constitutively social."37 His view of science finds little to demarcate it from other social activities save the (largely successful!) efforts of its practitioners to create and service such a demarcation. This stance represents a progression of thought through from the work of Kuhn, who developed an explicit notion of relativism within the philosophy of science and argued that a mature science is conducted within a social and conceptual framework that sets standards for relevance, initiates students and so on.38

Building on this notion of relativism, one arrives at the thoroughly relativist stance of Latour, Woolgar and the Edinburgh School of the sociology of scientific knowledge (David Bloor, Barry Barnes, Donald Mackenzie and Steven Shapin). The latter argue that scientific knowledge is merely the expression of social interests because social relationships insinuate their way in to scientific pursuits at every single level.39 For example, scientists acquire technical skills which represent vested interests to be valued and defended in their work, and one could perhaps argue that Gould's geographical and cartographic skills are pushed, behind a rhetoric of objectivity, for these reasons, in which case, these interests and craft competences are seen to directly influence scientific knowledge content. Similarly, practices of careerism, like the passion for novelty to advance one's own prospects, also affect scientific research, as do social relationships between practitioners, communication networks, reward systems, the influence of patronage and sponsorship. Even the rigour of scientific method is revealed, in the work of Latour and Woolgar, to be nothing more than an unobtainable ideal since "the tidy, ordered image which percolates through idealized accounts of scientific procedure has little place in the cut and thrust of daily

39 Of necessity here, I merely summarise a series of complex critiques of science in order to add to the evidence Gould collects - of science as socially embedded - and to undermine his own idealised notion of science. The work I cite here has itself been criticised for failing to take serious note of the fact that science has been largely produced by white middle class men, and evolved under the formative influence of patriarchy. See, for example, Keller, E. F., 1985: Reflections on Gender and Science (New Haven: Yale University Press).
laboratory practice . . . scientists actions are highly indeterminate."\(^{40}\) Wider discourses of race, sex, gender and class also feed in to fundamentally determine the most intimate details of scientific knowledge and practice, and, at the same time, are reproduced and re-articulated through the discourse of science. Thus, science never does and never could produce an untainted portrait of reality since it is not independent of wider social and political discourse.

Gould seems to move intriguingly towards many of these conclusions in connection to the AIDS science he discusses, without ever explicitly reflecting back on to his own scientific stance. He even conducts his own anthropology of science at a research conference, observing "all too human relationships and petty power plays."\(^{41}\) Does he expect the impossible: for scientists to be above the human? Similarly, observing political manoeuvres at another AIDS research conference he laments "the widespread acceptance of such machinations within communities claiming to be 'scientific' and putting forward a public image of openness to free inquiry and new ideas. Too frequently the image is just that - a facade behind which the deliberations bear not the slightest trace of open scientific discussion, but resemble the smoke-filled rooms of a political machine worked by the power of a small caucus."\(^{42}\) He seems both disappointed and surprised, but the social constructionists would argue that he is simply observing all science, including his own, at work. If, as they argue, science is intensely social and thoroughly relativist, any independent means for discerning truth or falsity disappear since they are socially perceived rather than inherent to the argument. Science is reduced, in essence, to a series of literary practices: inscription, representation, rhetoric and persuasion. Representation - power-charged, negotiated, embodied, contested and partial - is seen to make up the scientific world, as other worlds, with science as the production of, and rhetorical battle over, these representations. It becomes the practice of world-changing persuasions of the relevant social actors, and Gould saw this process in action at his conferences.

\(^{40}\) *The Slow Plague*, p.87.
Woolgar describes many of the techniques used by science to invoke authority and persuade "us" of the truth. For example, the notion of community is invoked by the use of the royal and fictive "we" in scientific literature. The reader is insidiously invited to become part of the existing state of knowledge, and the author's role in knowledge production is downgraded. They are not seen to have any special epistemological vantage point and therefore the statements are not seen as the idiosyncratic production of particular individuals, but a widely recognised state of affairs. "The discourse of science is organised in such a way as to sustain and reinforce the objectivity of its objects, and systematically to diminish the contrary (constitutive) view."43 There is thus a wide dissonance between the ideological or mythical received view of science, and science as practiced, with the actual practice of science essential in the propagation of this myth - "social constructionists make clear that official ideologies about objectivity and scientific method are particularly bad guides to how scientific knowledge is actually made."44 Gould himself can be seen as firmly implicated in methods of rhetorical persuasion. When discussing the possible origins of HIV he acknowledges that science is a rhetorical, though not dishonest, practice, that truth is temporally relative and yet can then declare that "all the fingers of evidence point to African origins, and they are scientific fingers not accusing fingers."45 He is here relaying and reinforcing the mythic view of science, all be it in a rather muddled and unreflexive way, when, in fact, evidence suggests that scientific fingers are quite capable of accusing. More specifically, Gould's use of the fictive or royal "we" serves several ideological purposes. It enables him to build a community of readers around the notion of and view from his supposedly objective geographical and scientific position, disguising his own involvement in the construction of that vision. His agency in the construction of his viewing platform and the 'knowledge' that emanates from that space is downgraded and disguised. This rhetorical manoeuvre is of particular importance and necessity in Gould's account since he heavily criticises AIDS science, but still attempts to hold to a notion of socially undistorted science and scientific progress towards truth. In acknowledging the social 'distortion' of 'other' science he offers no explicit epistemological basis to claim purity for his own, hence the need to

45 The Slow Plague, pp.10-11.
resort to the despised "other" and inclusive "we". Unable to distance himself epistemologically from distorted AIDS science, Gould must establish and sustain a difference both through rhetoric, and the telling and re-telling of the story of distortion-free science, thereby giving his own vision and own geographical story about AIDS its transcendental power.

Rhetoric thus serves a particular purpose for Gould. His "we" is a collective subject united by a shared vision. "We" are his public, the ones who are meant to benefit from his geography, and during the book "we" are all enabled to see like "a geographer." But this "we" of course entails a "them", the ones "we" look at and berate, with Gould, as geographers. So who are "they", the ones variously excluded from being a "we" by the geographer's gaze and Gould's rhetoric? Bad scientists and bureaucrats have already been mentioned, they are firmly the 'other', observed by "us" engaging in scientific distortion. To these can be added people living in the Bronx, Africans, Thais and people with AIDS or HIV - the other individuals "we" look at during the course of the book. Gould's "public" constituency, which he never explicitly delimits, thus takes shape by a process of literary elimination and reveals his notion of "liber geographicus pro bono publico" to be exceedingly problematic. His public constitute a very specific and limited segment of society. In The Slow Plague, "we" uncomfortably gaze at and objectify "them". Returning to the Treichler quotation which launched this chapter, the social constructionist critique therefore helps me (us?) uncover some of the underlying rules and conventions that determine whether an account such as Gould's is held as true or false and examine the ideological effects of these conventions and truth claims. And, of course, it too runs into the same paradox as Gould.

In this very literal reading of The Slow Plague, Gould therefore does not seem to negotiate this paradox at all. Instead, it seems as if he stumbles blindly through it, since, at one and the same time, he acknowledges science as social, heavily criticises existing AIDS science and then never explicitly reflects upon the implications of these assertions and criticisms for his own scientific visions. He thus appears unreflexive in the extreme. And, if the conclusions of the above social constructionist critique are accepted, Gould is seen to have no grounds on which to discriminate or distance his own science from the AIDS science he observes anyway, and to be unavoidably
implicated in many of the same practices - some of which seem rather dubious - which are carried out in order to sustain the scientific power of his visions.

**Enlightenment Inheritors: Gould and Habermas**

Gould's failure to explicitly confront this paradox in his text is perhaps the central flaw in *The Slow Plague*. But it is possible to give his negotiations another, distinctly different reading by drawing on work he has published elsewhere and by assembling the glimpses of a grander project from the subtext of *The Slow Plague* itself. In this new light, *The Slow Plague* reveals itself to be a particularly noble piece of work - still deeply flawed, as I shall discuss later - but a piece of work that does, in its own way, attempt to negotiate this paradox implicitly. Elsewhere, Gould recognises the philosophical influence that the work of Habermas has had on him and this influence seems to manifest itself forcefully, though never explicitly, within *The Slow Plague*.46

Habermas' work is centrally grounded in the anticipation and justification of a better world society - one that affords happiness, peace and community - and he shares this aim with Gould who, in "Spaces of Misrepresentation", describes himself as an "old-fashioned Enlightenment inheritor".47 *The Slow Plague* is itself a manifestation of this urge to make things better - a geographical book for the intended general public good. Habermas believes that the better society is a more rational one and he therefore wishes to put reason and rationality back into the knowing subject. In seeking a renewal and regeneration of the Enlightenment project, he is endeavouring to release, enable and utilise suppressed traces of Reason to provide a grounding for a more democratic and equitable society.48

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So Habermas is seeking a philosophical and societal pathway back to reason, but not through the explicit route of science. Instead, his is a postindustrial theory of communication that seeks to address the problems of social relations through language. His central presupposition is that we are all born with universal communication skills and with the potential to use them to create a better society. With these universal communication skills, he believes, comes a universal interest - mutual understanding - and this urge or tendency lies latent in language and, more specifically, in interactive communication. By this schema, we are all bound together by a drive towards mutual comprehension and an urge to distinguish between power and truth. He states, "No matter how the intersubjectivity of mutual understanding may be deformed, the design of an ideal speech situation is necessarily implied in the structure of potential speech, since all speech, even of intentional deception, is oriented towards the idea of truth." Habermas therefore believes that rationality and irrationality are manifest in ordinary social interaction and it is to this interaction he turns in an attempt to enable the regeneration of the former, arguing that the ultimate limits of political contestation and change in advanced capitalist societies are to be found in what has too prematurely been given up as the formless morass of ordinary social interaction.

However, though this tendency towards truth and rationality lies within communication, Habermas feels that it is yet to be fully realised. Modernisation, development, education and social mobility have not brought rationality and emancipation, instead they have brought, to Habermas' eye, a deepening irrationality evidenced by the manipulation of public opinion through the mass media, the forced articulation of social needs through large organisations, and the management of politics by the bureaucratic and technocratic 'system'. In essence, power and capital block the potential for communicatively achieved agreement at the social-structural level and act to repress communication that is free of domination. Communication has, he argues, been systematically distorted and this distortion in turn points back to the existence of systematically distorted social structures. Hence, the rise of mass democracy and increased affluence have, ironically, coincided with the concomitant degradation of the public sphere. The above distortionary tendencies of money and

power are seen to be dissolving the residues of the public sphere and yet it is in this sphere that Habermas sees a key possibility for renewed emancipatory rationalization and democratization.

A revitalized public sphere is the vessel through which the emancipatory and rational potential of speech and communication can be liberated and realised since it forms a realm of our social life in which something approaching public opinion can be formed, allowing individuals to learn and confer in relatively unrestricted fashion. According to Habermas, this sphere can therefore enable the progressive institutionalisation of the claims of reason against arbitrary power since within this realm, speech is seen as remaining unconditionally free from domination. Habermas' ultimate aim is, therefore, a utopia through communicative action, reconstituting political and social life on this basis rather than upon economic production. He is thus seeking the formal ideal of a situation in which disagreements and conflicts are rationally resolved through a mode of communication which is completely free of compulsion and in which only the force of the better argument may prevail. A regenerated public sphere would build emancipatory potential and be a progressive step towards this ideal. Within this schema, science itself becomes a marginal but extremely useful activity. It would assume, according to Habermas, its proper subordinate place as one of the accomplishments of reason, a tool simply generative of reliable knowledge, rather than a dangerously powerful sign of the conflation of knowledge and truth itself.

This is, admittedly but necessarily, a gross oversimplification of Habermas' work. Nevertheless, the implications for Gould's efforts in The Slow Plague are striking. His project is granted an explicitly moralistic foundation and seems to represent a deliberate, methodical and remarkably well-intentioned effort to intervene in the communicative reproduction of society, focussing particularly on the discursive nexus of AIDS. This intervention is his liber geographicus pro bono publico, which he proffers to the public sphere, perhaps in the hope that, in a small way, it will enable the partial reinstatement of rational and reasoned discussion on this topic. He is attempting to make a claim of and for reason.
This claim of reason is made against the systematically distorted communications and underlying social structures that, he believes, constitute much existing AIDS science. Therefore, it is not that this science is merely social - Gould would perhaps recognise this - it is that it is systematically socially distorted by money and power. So, for example, Gould argues that "bureaucratic power, combined with a deadly combination of Establishment ignorance and arrogance, suppressed any consideration of the spatial dimensions of the epidemic." And, "To place this problem in a larger context, what we have is a particular instance of a much more general problem at the boundary between the scientific community and the general public, a public much more astute and well-educated than many believe, but nevertheless one often cowed by the mathematizing mystique of technical claims. In our modern world of almost unbearable technical complexity we seem obliged to leave more and more decisions to 'them' - the experts and consultants." He believes that these "experts and consultants" are all too often greedy and self-seeking, driven purely by the desire for money and power, serving on committees, attending conferences and producing reports to pretend that something is being done about the epidemic but actually building "networks of power", the power to allocate money.

Gould's comments, combined with the others on the same topic quoted earlier, form a starkly Habermasian reading of the ills surrounding and enveloping the societal response to the AIDS pandemic. Gould's positioning of AIDS science is therefore both typification and emblematic of the apparent wider degradation of the public sphere through the rise of a technocratic consciousness and the subsequent systematic distortion of public communications. This systematic structural and communicative distortion has, he believes, left "reasoned discussion with no place to go." Not quite "no place" though, since he seeks to reinstate this form of communication in his own text and therefore combat this observed distortion in a resolutely

50 The Slow Plague, p.137.
51 Ibid., p.140.
52 Ibid., p.138.
53 Gould provides a very similarly Habermasian reading of the social in Fire in the Rain. He is highly dismissive of the bureaucratic and governmental management of the Chernobyl disaster and laments the numbing effect that bureaucracy has on individual initiative and the deceit, dissimulation, contempt for the public and outright lying that, he argues, frequently characterizes supposedly democratic government.
54 The Slow Plague, p.108.
Habermasian manner. Gould's supposedly 'rational' communication - *The Slow Plague* - is perhaps proffered to the residue of the public sphere with the intention of allowing the reader to affirm a larger rational control over the complexes of 'systematically distorted' perceptions Gould himself documents, allowing critical reflection upon them and enabling open, rational and reasoned discussion. He would perhaps see his text as free from compulsion and he is, instead, merely trying to assemble a sound and reasonable argument for "us" to reflect upon. These motivations are evidenced by his statement at the end of the text: "I happen to like that word 'communication.' and often reflect upon its roots in *com munus* - 'with offering.' At the etymological heart of communication lies a sharing of gifts."

This "sharing" marks Gould's project as particularly noble. He is driven by a strong conviction that the situation can and must be made better and he also shows a welcome and firm faith in the abilities of ordinary people, the public, to decide and act reasonably and rationally for themselves once they are allowed space for coercion-free communication and understanding. Like Habermas his work is therefore rooted in the possibilities of mutual understanding through language in general, and, more specifically, communicative action in the public sphere. His belief in the popular discursive responsibilities of the academic within this sphere, which he backs up with action - witness *The Slow Plague* and *Fire in the Rain* - is also to be commended. But the ultimate proof of his project still remains the degree to which it can negotiate the paradox described earlier. In one sense, this paradox is negated by a Habermasian reading of Gould's work, since it shifts the emphasis from Gould's science to his communication and therefore admits the previous social constructionist critique [although this is, of course, hardly evident to the lay reader of the text, which still seems to be fractured by the stark contrast, not reflected upon by Gould, between distorted AIDS science and his 'better' geographical science.] As Gould himself concedes elsewhere, "what we would perhaps call science today is essentially telling a good story." But Gould must then still demonstrate that his own scientific story sidesteps the negative effects of the

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55 Ibid., p.206.
distorted science he documents. Is the 'rational' geographical science he proffers a 'better' narrative?

Rouse, drawing on Foucault, would perhaps suggest not, since Gould posits a situation where people face each other free of force and engage in interaction and rational exchange of knowledge. Rouse's work points to the sheer impossibility of this situation. He examines the seemingly inextricable link between knowledge, power and rationality and therefore highlights the apparently inconceivable notion of a scientific knowledge innocent of power. If accepted, this linkage entails that what counts as knowledge in society is unavoidably entwined with domination, exposing 'emancipation through deepened rationality' as a contradiction in terms. As described, the social constructionists focus on science as social construction. Rouse also examines the social and political construction carried out by this socially constructed science. He observes that "the world is increasingly a made world" as a result of the systematic extension of technical capacities, the equipment they employ and the phenomena they manifest. He argues that the scientific laboratory, populated as it may be by Latour and Woolgar's intrinsically messy social beings, outs from within - practices, equipment and capacities swarm out from these centres or disciplinary blocks into the social body politic and transform our hold on the world, materially and conceptually, by extending calculative control. These scientific activities, again perhaps intrinsically messy, are nevertheless of immense political and social significance. Rouse's project is thus to understand science in terms of its capillary power effects and to integrate power and knowledge in a reinterpretation of the political significance of the social practices that constitute the modern natural sciences. His work adds a useful new dimension to the social constructionist reading of science and also has implications for Habermas', and, therefore, Gould's argument: if power does not merely impinge on 'rational' science from without, but permeates it and traverses its very practices, it cannot then be expelled, by sound method, reasoned and open discussion and will-power, as Gould envisages. As a "scientist" Gould is also centrally implicated in the

58 Ibid., p.211.
swarming of power outwards into the social body, through his books, papers and cartographic modelling. His maps of spatial distribution, in particular, can be seen as functioning as power relations, both physically and conceptually - they act to group, enclose, separate and partition, enabling surveillance. The representations, classifications and distributions he produces thus provide ways for people to understand themselves and to act. His science is therefore not just political through its attempted intervention in the AIDS discourse, it is political to its capillaries.

Gould displays a marked reluctance to accept both this intrinsically political nature of scientific knowledge and its interlinked corollary, the apparently ineluctable nature of political and other difference. So, when discussing the possible origins of HIV in Africa he remarks that "the story may anger and embarrass some because they find it politically unacceptable."59 The simple fact is that to some, the story is politically unacceptable because it is, as I shall discuss, an intrinsically and unavoidably politicised narrative. Similarly, when discussing the possibility of establishing a HIV pilot study in Washington D.C., he reports on the outrage among "local, predominantly black politicians" who claimed that the city had been picked out in a "gross act of racial discrimination." Gould declares, "The fact that the charges were nonsense from any reasonable and scientific view was not of the slightest importance compared to the political heat and capital to be made out of them."60 Again, this "reasonable and scientific view" is one that is also intrinsically political and soaked in power to its capillaries. If this reading is accepted, Gould's own scientific and geographical knowledge is not merely potentially distorted by power, it is power, and therefore political, to its very roots. To further my analysis of Gould's scientific narrative, it is therefore necessary to examine how, and with what possible effects, these implications are manifest in the supposedly "reasonable and scientific view" Gould proffers from the platform of his explicitly visual geographical science.

**Vision and Geography: Telling Necessary Fictions**

59 *The Slow Plague*, p.133.
60 Ibid., p.142.
Gregory states that "geography (like cartography) has always been a thoroughly practical and deeply politicized discourse, and it continues to be marked by its origins." Geography is not, and never has been, the production site for untainted visual knowledge of the social. Neither is there, as Gould seems to suggest, a singular perspective within geography. To argue this is to conflate significant academic difference and efface much work in a discipline coming to gradual terms with the situated nature of knowledge and vision. Gould argues that his particularly visual geography offers AIDS research the gift of sight and an opening of eyes to space and place. But if science and the social are one and the same and scientific knowledge is itself seen as embroiled in, and generative of, specific political relations and constellations of power, this vision, though presented as objective, becomes intrinsically socially, politically, culturally and personally situated.

Gould's viewing platform is revealed as exactly that - his platform - and not as scientific geography's unproblematic, apolitical and undistorted view down onto the social.

Gould's geography is positively pock-marked by its origins, placing him firmly within, not without, a deeply politicised discourse relying on a visual method similarly marked. Gregory describes geography's "ocularcentrism: its characteristically visual appropriation of the world" and Gould's work represents a continuation, perhaps almost an hypostatisation, of this trend. One of geography's roots is as distinctly European and Eurocentric science, thoroughly entwined with the colonial project. Just as Gould offers vision to AIDS science, this earlier geography offered vision to assist in processes of acquisition, subjugation and surveillance of space. Gould too looks across Africa, surveying an AIDS-scape rather than a landscape, but offering "us" a vision and a constructed space, a fictional picture of the social disguised as "reality" which draws on and may give rise to a dangerous profusion of attitudes, beliefs, meanings and actions. The parallel may not be exact, but the lesson to be learnt is that vision is not and never has been either neutral or transparent. It is intensely political. Another of Gould's antecedents, spatial science, saw the geographer as again "constituted as spectator-scientist." He is thus working within a discursive

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62 Ibid., p.16.
63 Ibid., p.203.
space flooded by politics and power and his attempt to distance and dislocate his own knowledge from this politicised context is merely a "scientific" rhetorical manoeuvre. The vision he privileges and proffers from this position is therefore also deeply political, deeply rooted within, and deeply implicated in particular constellations of power, despite its pretence to objectivity and neutrality. The eye is never neutral, not a privileged medium of knowledge nor an innocent instrument. More than any other sense the eye objectifies and masters. Gould's preferred way of seeing establishes a binary opposition between subject and object, renders the subject transcendental, the object inert, and so underpins an entire regime of knowledge as mastery - he assumes the ultimate visibility and knowability of an autonomous reality. This way of seeing and knowing is far from harmless, as Gould himself recognises in his brief discussion of objectification. Uncritically deployed, it results in people as silent and mastered objects of knowledge. "The granting of autonomous existences to objects of knowledge by setting aside any consideration of subject-object or discourse-object relations establishes the illusory basis of the subject's coherence, authority, and uniqueness." 64 Thus, "the detached eye of objective science is an ideological fiction, and a powerful one. But it is a fiction that hides - and is designed to hide - how the powerful discourses of the natural sciences work." 65 As Gregory notes, Haraway challenges this "modern decorporealization of vision, which she describes in resonantly Foucauldian terms as the gaze that 'mythically inscribes all the marked bodies, that makes the unmarked claim the power to see and not be seen, to represent while escaping representation.' " 66

Gould's geographical and scientific knowledge is produced through vision by supposedly withdrawing from society and claiming an exterior position, where the world will become intelligible. In his text, Gould constructs a fictive-we (an imaginary community - who do not have AIDS or live in the places he talks about), binding "us" all into seeing from a specific social position that is fictively construed as objective and universal, a privileged and protected vantage

point or viewing platform for "us" to observe his cartographies and imaginary geographies, produced by an eye enhanced by visualizing technology. As a result, in his maps of the US "we can see the tragedy unfold . . . we can see the effects of hierarchical and spatially contagious diffusions right before our eyes."\(^{67}\) Truth in this system depends on the establishment of a fictive distance between observer and observed, where space and the social offers itself up as order and pattern to be dis-covered and re-presented, hiding the intricate processes of construction that have generated these patterns and disguising the political implications emanating from this way of looking.

Truth here thus depends on the ideological deployment of "a rhetoric of concealment."\(^{68}\) It rests on the telling and re-telling of a series of stories: about geography as the epitome of disinterested science despite evidence of a deeply politicised discipline; about a viewing platform purporting to provide a free gaze down upon the social that is actually a specific, situated, constructed and power-laden view from a social 'somewhere', allowing one to see and not be seen, to represent and not be represented; about a neutral and unproblematic visual method that is central to a masterful and dangerous system of knowing through silencing and objectification; and finally about patterns and order innocently revealed to the eye that can only emerge as such once all the above stories have been told.

The above are all necessary fictions in Gould's work and they perhaps indicate why he reads the AIDS science he sees as socially distorted rather than irrevocably politicised and power-laden. To follow the latter course would be to deconstruct his own geographical and scientific stance and impugn the specific spatialisations and visualisations of HIV and AIDS advanced from this position, revealing them to be intricate social constructions, situated within a distinct set of social and cultural relations inextricably linked to power and possible domination, but cloaked or disguised by an interlinked "scientific" ideology and rhetoric.

\(^{67}\) The Slow Plague, p. 110.
Gould's Spatialisation of HIV and AIDS: Cutting the Cloth

Gregory describes spatialisation as the way that social life literally, materially and physically "takes place." In The Slow Plague AIDS "takes place" as traffic across a backcloth. However, this metaphor and the mathematical modelling that give rise to it detract attention from the manner in which AIDS actually "takes place" - as, literally, fluid process. The backcloth metaphor and model spatialise a disease that is not transmitted through space per se. It is only the 'downstream' effects of the spread of HIV and AIDS that are manifest spatially - the momentary location of bodies carrying the virus within Cartesian space. The backcloth model turns attention from questions of process, safe and unsafe sex, sexual ideology and pressure, and acts of fluid transfer to the virus as agent and focus of attention, travelling on cloth! No metaphor can provide total, unmediated vision of the social. Rather, metaphors are enframing devices that make the world knowable in a particular way, thus precluding other ways of knowing that world. Gould's spatial metaphor enables (all research is done from some point of view), but it also constrains (some questions are necessarily bracketed out by the metaphor in order to answer others), controls his vision and patterns his way of knowing.

Eyam is a small village in the Derbyshire Peak District in England. In 1665, George Viccars the village tailor ordered several rolls of cloth from his supplier in London, where the plague was raging. The cloth arrived damp and was spread out to dry, releasing plague-infested fleas in the village. Within days Viccars fell ill and died, others quickly followed. The Rector, fearing that the infection would spread widely through the county asked the villagers to quarantine themselves. They agreed to do so. People from the surrounding area left food and supplies at specified points around the village boundary, allowing the village to go into voluntary isolation. The plague lasted 14 months and 259 out of 350 people in the village died, but a wider bubonic outbreak was

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69 Ibid., p.104.
This plague spread on cloth. AIDS does not. Gould's spatialisation of HIV and AIDS is intensely misleading and, though perhaps of use for resource planning and education delivery where broad information about individual location is required, carries many more dangerous connotations that Gould neglects to consider.

Firstly, despite attempting to circumvent the dangers of objectification with rhetoric, Gould moves on to objectify those individuals with HIV and AIDS, masters and silences people as part of a backcloth, and unproblematically offers up social space for visual consumption, revealing a constructed meaning and neglecting those 'on the ground' who might wish to contest that meaning or their role in his patterns and order. He cannot avoid these dangers of objectification - they are intrinsic to his spatial scientific method and conception of visual and scientific geography. His work depends heavily on "the abstract coldness of the perspectival gaze" and thus a "withdrawal of emotional entanglement with the objects" he is dealing with. He carves those who have died of AIDS in the Bronx into "a geographical portrait of human catastrophe... the rising Western Ridge has now become a north-south wall of death overlooking Burnout Valley, across which you can see inselbergs (isolated mountains) of dead people piling up to the north, east and south." This AIDS-scape is presumably constructed to shock, but the mastery implicit in the scaping and scoping is disconcerting in other ways. There is no challenge to "our" gaze in this book, no voices arise from the objects "we" look at. Rhetoric, where Gould describes the dangers of becoming numb at these figures, rates and maps and reminds us that they represent dying people, cannot put people back in the 'picture' when they have been excluded by his method for 130 pages. To open his visions to real contestation would be to downgrade their supposedly "scientific" worth.

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72 The quotation is taken from Jay, M. 1988: "Scopic regimes of modernity", in Vision and Visuality, Dia Art Foundation Discussions in Contemporary Culture 2, (Seattle: Bay Press), p.8. This particular criticism of Gould's work in The Slow Plague echoes almost exactly the humanistic critique of spatial science that took place in geography in the 1970s, a critique that, incidentally, also drew upon an interest in the social construction of knowledge. It appears that Gould has not absorbed the lessons that can be garnered from this debate.
73 The Slow Plague, p.133.
74 Ibid., p.134.
Secondly, Gould's spatialisation of AIDS, rather than dramatically increasing understanding of the epidemic as he argues, actually confuses. This is because Gould's choice of metaphor or model turns AIDS into a primarily spatial phenomenon. It is not; some of its effects are simply manifest that way. To represent AIDS as spatial, through surrogates like Gould's backcloth model, is to deflect attention from person-to-person processes of virus transmission, and to mislead the reader. To return to Gould's two modes of diffusion, one does not get AIDS through proximity. It is not spatially contagious. And one does not get AIDS from occupying a certain position in a hierarchy. Gould states that "two, rather isolated rural counties far apart on the conventional map would interact very little, which translates into an extremely small probability that the HIV would be transmitted this way on our Ohio county backcloth."\(^{75}\) Here distance is substituted for fluid transfer and rural counties become sexual partners. This expressed spatialisation seems both spurious and distracting. Elsewhere Gould writes "imagine yourself now in the center of AIDS space blowing a big soap bubble around Cleveland . . . Perhaps the HIV spreads in this way, slowly capturing the counties in AIDS space until the multiple bubbles reach those on the periphery and the infection is everywhere."\(^{76}\) Having read this I would keep my windows shut if I lived in the Cleveland suburbs! The point is glibly made but underlines the fact that AIDS is not about where you live or who you are, it is solely about your specific actions. Gould's spatial model detracts from this fundamental point and misleads.

Thirdly, if AIDS is misleadingly understood as primarily spatial, one is insidiously pointed in the direction of spatial solutions to the spread of the epidemic: by Gould's theorisation of the epidemic one has to fragment the backcloth to stop disease, and this leads to him talking rather ominously of "disconnecting" people.\(^{77}\) His use of the fictive-we, when linked to this spatialisation, now takes on rather sinister undertones. When discussing the Bronx he states that "whether the politicians liked the truth or not, HIV was shotgunned over the city as a result of pulling the rug of fire and police services out from under the very people who needed them most"[my italics].\(^{78}\) This is a

\(^{75}\) Ibid., p.65.
\(^{76}\) Ibid., p.67.
\(^{77}\) Ibid., p.189.
\(^{78}\) Ibid., p.132.
truly amazing statement - he rightly attacks political neglect of the area, but at the same time seems to advocate spatial concentration or confinement as a solution to the spread of the AIDS epidemic, like the villagers of Eyam, thus preventing the 'disease' breaching the barricades and sneaking in to 'normal' society - "us". This view is given rather sinister weight by the violence implicit in the term "shotgunned". Here, people who are HIV-positive become dangerous gunshot! But, to reiterate, it is not spatial location that causes the spread of HIV. An emphasis on individual people, processes, attitudes and beliefs disappears in this particular view down upon the social. Solutions thus become something decided upon at the grand scale too, as ways of fragmenting the backcloth. Structure breakers are discussed on a state, country or continent-wide scale, rather than as needing to be culturally embedded and socially contextualised. I do not wish to infer that Peter Gould intends his work to contribute to authoritarian grand-scale spatial 'solutions' to the AIDS epidemic - he seems thoroughly committed and well-meaning. But the implications of the spatialisations he proffers do not simply lie with better education, they are potentially far more serious than this and possibly injurious to personal freedom.

Fourthly and finally, Gould neglects to consider the geography of blame. He is siting AIDS within some areas and not others, and yet the only time he discusses the issue of possible stigmatisation is when he weakly declares that "no one should blame someone else for the arrival of a new disease."79 He seems to believe that he can dislocate his work from the social and political as and when he chooses, slipping out from under a great weight of historical evidence which suggests that blame will be attached to his spatialisations. This urge to blame others for AIDS, and locate its origin within the body or land of another, is a response to disease that dates back to the Middle Ages. "We need to locate the origin of a disease, since its source, always distant from ourselves in the fantasy land of our fears, gives us assurance that we are not at fault, that we have been invaded from without, that we have been polluted by some external agents."80 Given these almost endemic

79 Ibid., p.12.
80 Gilman, S. 1988: Disease and Representation: Images of Illness from Madness to AIDS (Cornell: Cornell University Press), p.262. Gilman argues that geographies of blame serve an essential psychological function since 'othering the disease distances it and assures 'us' that 'we' are not at fault and have been invaded from without, polluted by an external agent.
mechanisms of blaming, what effect will Gould's statements about the Bronx have on attitudes to the area and its people? Early epidemiological classification of HIV risk groups led to massive stigmatisation and stereotyping, particularly of Haitians in the US, so why should an areal treatment, of what are, in essence, risk areas, produce different, more positive results? Gould may believe that because he is producing his work within a supposedly rational, reasonable and neutral scientific space it will not be used for popular stigmatisations and speculations, but he cannot choose to dislocate from the socially messy and morally reprehensible geography of blame. His spatial approach and the popular nature of his book may actually fuel the stigmatisation process.

Gould does not seem to have considered the many negatives that arise from his spatialisation of the AIDS epidemic - his geography and the knowledge produced therein does not link solely and consciously to the public good. This almost naive lack of consideration of the downstream political implications of his work perhaps accounts for his curious chapter on the geography of confidentiality. He seems vaguely surprised by the fact that "as soon as you start asking questions about the geography of the epidemic, the "where" questions, then great anxiety is felt by the powerful guardians of medical trust . . . the answer to high anxiety and a lack of experience is always "better safe than sorry" - always the response of the timid bureaucrat."\(^{81}\) In this case, thank goodness for timid bureaucrats, aware that answering the "where" question does not simply result in better informed inputs to both health planning and education, as Gould requires, but may also lead to extreme levels of surveillance, and subsequent stigmatisation and victimisation. It is also not simply a question of protecting individual identities as Gould seems to suggest, since stigmatisation and victimisation can feed on much coarser areal data than this. One can be identified by association with a space and persecuted accordingly whether one is sero-positive or not.

\(^{81}\) The Slow Plague, p.169.
Gould's Visualisation of HIV and AIDS: Metaphors and Maps Before Our Very Eyes

Having spatialised HIV and AIDS in the above manner, Gould uses visualisation methods to present his constructed visions before us. He draws particularly on cartography and visual metaphor to describe what can be seen from the viewing platform offered by his geographical science.

A deconstruction of Gould's cartography in *The Slow Plague* is beyond the scope of this essay. However, broadly the same critique can be levelled at cartography as at Gould's mythic geographical science. Both involve a similar mode of seeing and knowing, and both are, despite the telling of stories that suggest otherwise, irrevocably situated in the social, and entwined in a politics of power/knowledge. Neither produces value nor ideology-free information, but they operate behind a mask of seemingly neutral science and gain much of their power this way. Gould states that his maps put "facts before our eyes" but his representations are not innocent reflections of reality. "It has become apparent that mapping is necessarily situated, embodied, partial: like all other practices of representation." Gould's maps, like his view from the platform of geographical science, are socially situated and thus socially and culturally emblematic, relying on and drawing on a whole host of social presuppositions. Harley makes the point therefore that "cartographic facts are only facts within a specific cultural context." But Gould's maps are potentially formative too - they can act as "rhetorical devices of persuasion." They possess the inherent ability to define and re-define social relationships, alter and shape attitudes, meanings and beliefs, and perhaps ultimately give rise to actions. Power thus both comes from the map and embraces its making. Gould's presentation of cartography as facts before our eyes neglects the above critique and the socially formative power he wields with his maps. He hopes that his automated cartographic diffusion programs will act as powerful awareness-raising and educational

82 Ibid., p.114.
tools. They demonstrate the slow, steady progression of the epidemic across space, showing its gradual encroachment upon the individual's daily life. Gould contends that "something has to be done to make the epidemic concrete, real, and personal, not simply something 'out there,' distant and remote from an individual's daily life" in order to force people to reflect upon the possibility of their own personal danger. However, what Gould's cartography cannot do alone is overcome the social distance within the places he maps and within his maps of these places. Thus, they may reinforce existing geographies of blame and give rise to hostility to those stereotypically assumed to be carrying the HIV, who are then seen as encroaching upon or moving upon the boundaries of AIDS-free space. This 'citadel' effect is further compounded by the epistemological distancing, objectifying and viral 'othering' upon which Gould's cartography is founded. The viewer is placed outside the space where the virus moves. "We" never enter the spaces or places where AIDS diffuses and moves. We merely look at them from above and outside. This epistemological tendency therefore runs counter to Gould's personalising intentions. For example, using black to represent the highest spatial rates of HIV infection leads him to clumsily open his chapter on the Bronx with the following: "In the United States the HIV is everywhere, oozing from the high peaks of infection in the urban epicenters into the surrounding commuter fields and rural umlands, closing up the last empty pockets of white, infection-free areas on the map" [my italics]. What are readers meant to think and do after reading this sentence? How will it affect their attitudes and beliefs, in relation to specific spaces and places, other people and their own sexual behaviour? This one sentence seems to me to be a crystallisation of the flaws inherent in Gould's unreflexive geographical and scientific interpretation of AIDS. It includes: an objectifying and silencing view down across space; a grossly misleading spatialisation and visualisation of HIV and its spread; and an insensitive neglect of both the socially and politically situated nature and possible impact of such modes of seeing, knowing and representation.

87 The Slow Plague, p.124.
The above example illustrates Gould's use of visual metaphor to describe the diffusion patterns he sees from his viewing platform. Metaphors, like maps, are far from innocent representations or mimetic reflections of a reality. They are instrumental to knowledge creation, and can actively construct or shape a world view. I have already examined Gould's fundamental metaphor, his backcloth model, demonstrating how it leads to a surrogate understanding of the spread of HIV and AIDS as primarily spatial, detracting attention from 'fluid' social process and behaviour. This misunderstanding is further compounded and intensified by the use of many other explicitly spatial, natural and physical geographical metaphors and similes to describe the spread of HIV and AIDS. These include [my italics]: disease spreading "like a wine stain on a tablecloth"; "highly infected regional epicenters driving the seepage of the virus into the surrounding umlands"; "soaring peaks driving . . . geographic diffusion"; "advancing waves of spatial contagion . . . throwing out pools of infection ahead of them, pools that will grow and coalesce"; and "a forest fire advancing steadily, but throwing out sparks ahead of the main burning to start local conflagrations." There is nothing universal or neutral about these visualisations, despite Gould's claims to see otherwise. These visualisations are situated, emanating from the mind of a traditional geographer who can only make sense of AIDS using the models and metaphors he has to hand. In all these examples Gould naturalises the spread of HIV, placing agency within the virus - as infected urban area driving, and wave or fire throwing - and removing agency from people. By this metaphorical schema political processes and human events become natural processes - human relations are thus naturalised. A dangerous slippage has occurred here: from space as extrinsic manifestation of AIDS to space as driving determinant of the epidemic. There is a crushing inevitability to his visions; how can one possibly turn back a disease represented as tide or fire, so why bother? I do not wish to deny the seriousness of the challenge offered by AIDS, but the

88 "Metaphors are not mere ornamentation or decoration . . . but are central in formulating the problem and finding a solution." Barnes, T. J. 1992: "Reading the Texts of Theoretical Economic Geography: The role of physical and biological metaphors" in Barnes, T. J. and Duncan, J. S. (eds), Writing Worlds: discourse, text and metaphor in the representation of landscape (London: Routledge), p.121.
89 The Slow Plague, p.62.
90 Ibid., p.83.
91 Ibid., p.125.
92 Ibid., p.122.
93 Ibid., p.122.
challenge is a social and embodied one. I feel that Gould's spatialisation of AIDS and HIV, when combined with the above visualisations, configures and conceptualises AIDS as a primarily and determinedly large-scale geographical phenomenon/problem which distorts and detracts from an understanding of AIDS as an intensely personal and social issue, demanding adjustment, negotiation and solutions on this level.⁹⁴

**Seeing Place Through a Zoom Lens**

Gould does attempt to introduce a small-scale conceptualisation of the social into his work through the notion of place, but the manner in which he develops the notion fails to redress the above imbalance. He calls for a greater attention to the specificity of place in response to the spatial blindness of those working in the temporal AIDS research paradigm, and uses this notion as a means for contextualising his large-scale spatialisations of HIV infection. He switches geographical lenses and zooms in to focus on specific social, cultural or political factors that will, he believes, account for trends in the larger patterns of infection. However, in undertaking this manoeuvre he never leaves the epistemological viewing platform and his treatment of place is therefore a continuation of his earlier looking at and objectification, with similar unfortunate results. He may be focussing on specific areas and cultures but he is still seizing and transforming "others" by the very act of conceptualising, inscribing and interacting with them on terms not of their choosing: in making them into pliant objects and silent subjects of his scripts and scenarios; in

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⁹⁴ Gould's extraordinary use of numerical, literary and geographical metaphors to frame the spread of HIV and AIDS could generate a whole critical paper in itself. Of necessity I confine myself to broad criticisms of his approach here. It is interesting to briefly compare Gould's metaphorical system - of HIV as spatialised and naturalised wave or fire - to the dominant scientific metaphorical system - HIV as virus. The former places agency within space rather than people and presents the spread of HIV as inexorable. It also points the way to solutions imposed at a grand scale. The latter system does act to impersonalise the illness, but at least frames prevention as an individual and behavioural issue. I believe Gould's metaphorical systems are thus very limited, and potentially dangerous, models. There is, however, a further set of problems with his choice of metaphor. He relies upon powerful images drawn from the natural and physical sciences. As I argued above, this framing acts to naturalise human relation. It also triggers an immense amount of negative and sinister associations and carries a similar weight of dangerous connotations. Metaphors are not innocent and they can easily escape their author. Gould therefore cannot simply wipe his metaphors clean of old associations and lay them before the reader. The reader is likely to feel hopeless after confronting the crushing inevitability of Gould's visions. Theweileit argues that it is therefore a reactionary impulse to describe political processes and human events as natural processes, and he goes on to examine metaphors of floods, tides and fires and their immensely political function within the personal writings of the Freikorps. When this reactionary naturalisation is combined with Gould's rhetorical "we" it becomes clear that "we" do not have AIDS, "we" are not HIV positive and "we" are positioned with Gould on his viewing platform observing these crashing waves and engulfing fires slowly moving towards "us". "We" are not yet part of them though, but our boundaries are close to being transgressed, "we" are close to being engulfed, close to dissolution. What solutions are indicated by these metaphors? What emotions are triggered? Biblical images spring horribly to mind, of floods ridding the world of the bad. Gould cannot escape these associations. Theweleit, K., 1987: *Male Fantasies*, Volume I (Cambridge: Polity Press).
assuming the capacity to 'represent' them and not be represented. Gould's geographical viewing platform thus gives rise to both his spatialisation of AIDS and a series of anecdotal 'otherings', drawing on an inconsistent, and sometimes dubious, mishmash of political, cultural and social factors, which are meant to be explanatory of the former spatialisations. From this viewing platform, and for all his earlier qualifications, he objectifies and reduces people to nodes in the weave of a cloth across which HIV moves, and talks authoritatively about other cultures and societies without questioning the position from which he speaks. Haraway describes this manoeuvre as pulling the "god-trick." She uses this term to refer to the assumption of transcendent, disinterested, disembodied vision - a god's eye view. She argues that it is a vision only available to those with social power, like scientists, with all other vision considered to be polluted, particular, embodied and biased.95 As already stated, some of these anecdotes seem to hit valid targets and are driven by keen political commitment, but many could be interpreted as culturally insensitive. But just as pulling the "god-trick" at the large-scale allowed Gould to advance a situated and personal vision as the common "facts" before "our eyes", at the small-scale, a series of situated and personal cultural and social assumptions and representations can be unproblematically presented as the factual reasons for the larger-scale picture. But "the process of representation is constructive not mimetic" and behind the epistemological "god-trick" Gould is still implicated in a discursive construction of the world for the reader, a display of partial truth claiming to be much, much more.96 As I shall illustrate, the stories he tells and the anecdotes he relates to explain patterns of HIV infection and condom use draw on a mixture of colonial representations, Western 'common knowledges' and interlinked cultural attitudes, and, in their telling, act to reinforce and reiterate the self-same set of ideas, attitudes, beliefs and representations. Action is taken, opinions are formed and policy is made on the flawed basis of these supposedly "true", "transparent" and "objective" representations. The signifying practices Gould uses thus encode and legitimate a wide variety of often dangerous or derogatory aspirations, attitudes and beliefs.

Below I provide a brief selection of Gould's representations of 'others.' His notion of place and specificity is revealed to be the site for an often offensive anecdotal 'othering.' Gould's explanations for variations in global condom use form a series of gross and insensitive generalisations as he rushes through a massive amount of cultural complexity without reference or context. He declares, citing no evidence, that "most Frenchmen express great distaste for using condoms on sensual and aesthetic grounds"\(^{97}\) and then turns his gaze to Eire where there is apparently "rapid seepage" of HIV into the heterosexual community, constituting the gay community as a leaky reservoir of infection with a single sweep of the pen.\(^{98}\) Later, in Jamaica "men sometimes try to "score" their half-century in children, as though procreation were a cricket match. [And] in a squatter area there is nothing much else to do except make love without a condom you cannot afford."\(^{99}\) If this really is the case, some reference to economic and political issues would provide necessary context for the representation. Next stop on the anecdotal express is Thailand, where Gould relates a dated 1973 story, again with no evidence or contextualisation, of large shipments of US condoms proving "less than satisfactory" because most of the men had to attach strings round their waist to stop them falling off. Gould's conclusion is that "we have to be sensitive not only to cultural variables but to physiological ones too."\(^{100}\) "We" do, but I do not believe that relaying the story in this manner serves any purpose other than entertainment and stereotyping. In Kenya "education and condom availability are again a matter of too little too late."\(^{101}\) Again no wider political, colonial, economical or historical context is provided with this sweeping and crass judgment. The West's involvement and possible complicity in the existing situation is effaced as the country is dealt with in isolation. The situation there is presented as hopeless, so should Kenya therefore be abandoned to AIDS? Moving on, Gould presents two stories from Zimbabwe. In the north "one truck driver noted that he had overcome his dislike of condoms by cutting the tips off"\(^{102}\) and, elsewhere, a health worker apparently demonstrated

\(^{97}\) *The Slow Plague*, p.51.  
\(^{98}\) Ibid., p.51.  
\(^{99}\) Ibid., p.54.  
\(^{100}\) Ibid., p.56.  
\(^{101}\) Ibid., p.56.  
\(^{102}\) Ibid., p.57.
condom usage on her thumb and subsequently received a letter from an outraged man whose partner had got pregnant despite the fact that he wore a condom on each thumb during intercourse. 103 What effect does Gould hope to achieve by telling these stories, and how are the individuals in question represented? "We" are uncomfortably positioned observing a series of representations of 'quaint', 'illogical', 'childlike' Africans; and discourses of colonialism echo in Gould's work.

In the central core of *The Slow Plague* Gould presents four case studies of spatialised HIV and AIDS. In the first of these Gould focuses on Africa, and he is clearly, and justifiably, frustrated with the political situation he observes there, since it prevents concerted action to combat the spread of HIV. But, again, he neglects to examine the historical and colonial context for this corruption and thus tends to both naturalise political corruption and mismanagement as essence of Africa and efface Western complicity in past and present systems of power. 104 He states "we are talking about a continent where the former and self-crowned emperor Bokassa put away $2 billion." 105 Firstly, "we" are clearly not of this continent and the "talking about", rather than "engaging with" or "listening to" is a silencing product of the "god-trick" position. Secondly, Africa, a massive continent containing many different cultures, is presented as socially homogeneous. Thirdly, no further context for the corruption is given. And fourthly, Bokassa is taken to represent a whole continent. In the conclusion to this particular case study Gould attempts, insensitively, to enter the mind of 'the African' - "People, either from your own government or foreigners, can throw money at you, and you will gladly, even bemusedly, take it - but not seriously, not believing it will really

103 Ibid., p.57.
104 Gould is aware of the dangers of over-simple causality and determinism in work on the 'Third World'. He describes the common academic process of ascribing every ill in sight to colonialism and capitalism as "templating the Third World". Templating is, he argues, a process of looking for what one wants to find, and, of course, finding it. However, I believe that Gould swings too far in the opposite direction in order to avoid this error. He presents an oversimplified and constrained picture of 'Africa' too. Of course there is corruption and wickedness in Africa, as in every country. But there is also a colonial legacy and an inequitable world economic system. To concentrate on the former 'fact' without even mentioning the latter is to naturalise corruption, cruelty and chaos as essence of Africa when, in fact, this has a wide and intricate context that needs to be considered. Once again, I feel that Gould sets his argument up in an overly oppositional tone in 'Spaces of Misrepresentation' - his anti-dogma call is against oversimplification in explanation, but he greatly simplifies the major arguments too. Gould, P., 1994: 'Spaces of Misrepresentation' in Farinelli, F. et all (eds.), *Limits of Representation*, Studies of Action and Organisation Vol.5, (New York: The Institute of Mind and Behavior), pp.123-153.
105 *The Slow Plague*, p.72.
do anything. You are certainly not going to put aside the exquisite and natural pleasures of making love, with an average of 20 partners (a value computed by one of those Western children of the Enlightenment) before you convert to AIDS.\textsuperscript{106} There seems little that can be done for 'the African' in this representation. They are, inevitably, going to convert to AIDS. Gould thus gives the AIDS situation in Africa a very pessimistic reading. The situation may indeed be serious, but a pessimistic representation of Africa without adequate consideration of "our" involvement in the situation is to lead the Western reader to the view that the continent is too far gone to save and should be cut adrift or "disconnected." Gould is not, as he seems to believe, working within a neutral scientific space where representations have no effect. His work will be formative of opinion, attitude and belief, and upon these foundations action is taken.

Gould is right to argue that place does matter. There is a need for a sensitive understanding of place-specific sexual ideologies, attitudes and behaviours in order to provide reliable input to HIV education programmes, in order that the ideological power of "unsafe" sex can be negotiated and resisted. Geographers are well-equipped to provide this information. But the epistemological site to generate such information is not the geographical scientist's viewing platform fitted with a higher powered lens in order to look at and subsequently talk about. This mode of seeing and knowing can only result in objectification and the type of culturally insensitive, and possibly formative, anecdotes described above.

Geographers' Savage-Pictures: AIDS Out of Africa?

A similar mode of seeing and knowing 'Africa' manifests itself earlier in the book when Gould attempts to locate the origins of HIV on that continent in a chapter entitled 'The Origins of HIV: closing an open question?' Gould commences by announcing that "scientists are trained to be conservative and patient. If you do not know, if you are not sure, you try to find out by marshaling evidence so convincing that even the most doubting Thomas among your critics has to

\textsuperscript{106} Ibid., p.86.
concede the truth of the story you tell."\(^{107}\) This statement, of diligence, patience and objective research, does not tie in either with the AIDS science Gould sees or the science described and analysed by Woolgar, Haraway, Rouse et al. Gould is here relaying the myth of science, the 'received view', in order to give his own conclusions their "scientific" power. His argument then takes a strange turn. He goes on to describe the way that truth for science can often be temporally relative, with Newton's "rhetoric" being replaced by Einstein's, but then adds, as stated, that "all the fingers of evidence point to African origins, and they are scientific fingers not accusing fingers."\(^{108}\) These scientific fingers are pointing to the origin of HIV in African primates and its subsequent 'jump' into humans. This is a particularly unreflexive piece of writing. Firstly, the evidence he himself collects, together with the critiques of science examined here, indicates that scientific fingers are no different to anyone else's. They are quite capable of accusing. Secondly, he has just stated that truth in science can be temporally relative and rhetorically established, so how can he then be so sure that AIDS is from Africa and that it is not just another temporally relative truth, perhaps serving certain political, psychological and capitalistic purposes? Gould would presumably reply "by marshalling evidence." I am in no position to dispute the facticity of this evidence, but it should be noted that other workers have analysed similar information and come up with very different results, founded on the possibility that science itself articulates discourses of race and accusation, irrevocably tainting this evidence of AIDS in 'Africa'. I will discuss their work in a moment. Gould's comments on Newton and Einstein also indicate that no matter how much evidence he marshalls, the facticity of his evidence will never be assured. Old evidence will be disproved and new evidence will come to light. The finality and conclusiveness with which he points his finger at Africa are therefore misplaced, and he fails to consider the social implications of such a siting in his popular geographical work.

Science - including geography, biology and medicine - has a long history of articulating and reinforcing discourses of race and colonialism. Only by neglecting this deeply politicised history, his own evidence of socially distorted science and his own earlier view that scientific truth is

\(^{107}\) Ibid., p.10.
\(^{108}\) Ibid., p.11.
rhetorical and relative is Gould able to advance his own conclusions about origins. Si(gh)ting the origins of HIV in Africa sits very uncomfortably, but then very neatly, along side earlier "scientific" but racist notions that Africans are evolutionarily closer to sub-human primates and with the profusion of social and cultural images of Africans as unreliable, primitive jungle dwellers living in close proximity to monkeys. "Africans are once again positioned as the "link" between man and beast."109 "Africa, it seems, has been created as a unique space, as a repository of death, disease, and degeneration" and the HIV origin story, whether "true" or "false" reinforces the degenerate uniqueness of African space.110 If science is intrinsically social it cannot be assumed to be free from racist assumptions or undertones.111 Prior models and myths of disease, sexuality and race may both pattern new narratives and reinforce old ones. This African origin story is loaded with dangerous connotations and possibly underpinned by the same social discourses it triggers and feeds into.

The Chirimuutas rely on much the same type of reading of science as Gould, as messy, social and self-interested, to draw the opposite conclusion about the origin of HIV in Africa. They argue that "racism, not science, motivated the search for AIDS."112 They say there has been no serious investigation of the possibility that AIDS was introduced to Africa even though there is evidence

111 For a detailed examination of how discourses of race play themselves out in science, see Harding S. G., (ed) 1993: The "Racial" Economy of Science: Toward a Democratic Future (Blomington: Indiana University Press).
112 Chirimuuta, R. and Chirimuuta, R. 1989: AIDS, Africa and Racism (London: Free Association Books), p.128. They are echoed in this view by Patton who also argues that "blatant racism" undergirds the search for a "source" of AIDS in Africa and that this search "stems from the wish to discover that AIDS is an "old" disease which was confined somewhere else until technological change created contact with "isolated" peoples. Constructing AIDS as "old" (if not primordial) and situating the virus in "Africa" naturalized the disease, reinforcing the view that science solves the problems thrown up by nature and society, and is therefore separate form both." By this reading, even the notion of a "source" is seen as a social construction, a rhetorical manoeuvre by science to maintain its community standing and authority. Patton, C. 1990: Inventing AIDS (New York: Routledge), p.69.
suggesting this as feasible. "If the scientists only look for the origin of AIDS in Africa, they will certainly not find it anywhere else."\(^{113}\) "If there is any truth in the hypothesis that the AIDS virus originated in monkeys (and African monkeys are not the only candidates) it would seem more appropriate to investigate modern medical research rather than speculate widely in such an offensive and ignorant fashion about the customs and behaviour of Africans."\(^{114}\) Patton's work similarly acts to undermine the conclusiveness with which Gould expresses his African origin theory and, in particular, call into question the 'reliability' of the evidence collected by Western medical science in Africa as well as the moral and ethical transgressions involved in obtaining data from the region. In particular, she highlights the problems of using a test for HIV developed in the West in the very different medical conditions offered by Africa and argues that the results then produced are extremely unreliable, with this 'unreliability' frequently used as an excuse to move straight to worst-possible-case scenarios.\(^{115}\) Similarly, Farmer, in a powerful piece of work, describes how science and medicine use speculative and racist beliefs to frame discussion of AIDS in Haiti, with ill-informed ideas and assumptions about voodoo practice and cannibalism constantly drawn upon to underpin supposedly scientific research. He describes how North American scientists repeatedly speculated that AIDS might be transmitted between Haitians by voodoo rites, the ingestion of sacrificial animal blood, the eating of cats, ritualized homosexuality and so on through a panoply of further exotica. Not one of these speculative assertions was bolstered by research but all were aired in the nation's most prestigious medical journals.\(^{116}\) With science as persuasion or a "good story" however, these refutations of Gould's siting are perhaps less likely to stick than a narrative that is perhaps both underpinned by and a re-confirmation of what "we" already knew, deep down, about Africa.

\(^{113}\) Ibid., p.136.
\(^{114}\) Ibid., p.73.
\(^{115}\) Patton also makes the valid point here, however, that the problematic of "African AIDS", from the standpoint of current science, is believed to be the unreliability of epidemiology and diagnosis in Africa. By scientific definitions, the data is, unarguably, unreliable - more so than Gould suggests in his work. He thus builds his conclusions on these 'unreliable' foundations. But this 'unreliability' is, she argues, not a problem of Africa, it is a problem of Western ethnocentrism since the epidemiology of HIV in Africa relies on tests and clinical definitions developed in the West, for social and pathogenic conditions there. There is thus a risk, which must be avoided, of perpetuating stereotypes of unreliable Africa when necessarily questioning Gould's evidence. Patton, C. 1990: 'Inventing "African AIDS"' in Inventing AIDS (New York: Routledge), pp.77-97.

Gould believes that locating the region from which the virus came will allow "us" to learn more about the virus and perhaps develop a vaccine. This may be nominally "true", I am in no position to judge. But how will Gould's popular geographical work help in the development of this vaccine? Virus sourcing by a popular geographer and a virologist have very different social effects. In the former case, I see no social gains coming from this chapter and no succour offered anywhere. Instead I see a debatable siting of the origin of HIV pushed as true in direct contradiction to the rest of Gould's discussion of AIDS science and his own statements about relative and rhetorical scientific truth. Such a siting here serves no purpose other than to inscribe HIV on the African body. From this inscription stigmatisation, blame and dangerous international AIDS policy all too readily follow.

Patton argues that such representations of AIDS in Africa - as indigenous and apocalyptic - serve a useful purpose for European and North American drug companies, since they allow "us" "to see such things as the placebo trials for vaccines planned for African nations as noble, not genocidal." 117 "Proposals to run HIV vaccine trials in Africa which would never pass ethical muster in the West are justified by invoking precisely this image of a dark continent perpetually on the brink of natural disaster." Gould's work and the meanings he gives to AIDS in Africa thus cannot be dislocated or divorced from a wider social context or these possible constellations of dominatory power. They will impact on attitudes, beliefs and possibly actions.

Gould saves the worst until last in this chapter. He argues that "it appears fairly sure now that both varieties of HIV were a result of cross transmission from animal populations in Africa." 118 "Fairly sure" seems enough for him to launch into "plausible speculation" about modes of transmission from the primates of Africa into humans, and several of these modes carry the further connotation of 'African' self-infliction of the disease. Scientific positivism once again enters into a clumsy encounter with 'culture'. He declares that "wild animals, including monkeys and apes, are an

118 The Slow Plague, p.17.
important food source for many African and other [although, of course, not "us", the "we" reading about these others] people, and in preparing the meat it seems likely that an open sore, or a cut like a surgical stick was the route for cross-species transmission. Perhaps a knife used for preparing infected meat was used later in a scarification ceremony" . . . "A more likely explanation comes from an anthropologist [a call to "scientific" authority] who recorded a custom of some of the people living near the lakes of the Great Rift Valley of Central and East Africa. In order to increase the sensations of sexual intercourse, the blood of male and female monkeys was inoculated into the pubic, back and thigh areas of men and women, presumably in an act of sympathetic magic."119

Returning to the essay's visual theme, "we" are here constituted as voyeur. This "plausible speculation" reinforces racist and colonial constructions of distinctly 'strange' African sexuality. It rests on extremely dubious 'armchair anthropology' dredged up to try and explain what has already been revealed as a highly contested and problematic presumption: that HIV originated in Africa. His earlier citation of Jonathan Swift from On Poetry makes ironic re-reading in the light of the above: "So geographers, in Africs maps, With savage-pictures fill their gaps."120 Plus ça change?

Conclusion

"ways of life are at stake in the culture of science."


Gould establishes a stark dualism in The Slow Plague: between the socially distorted AIDS science he so vehemently, and apparently justifiably, criticises; and the supposedly untainted, clear-eyed and practical geographical science that he then advances and uses to examine the spread of AIDS and HIV. Here, his work runs into the paradox encountered by all who engage in an explicitly

119 Ibid., p.17.
120 Ibid., p.10.
social critique of science and, as I hope I have demonstrated, his subsequent steps to negotiate this paradox prove somewhat faltering. When one reads the book without having either read his other work or a basic understanding of the work of Habermas, Gould appears unflexive in the extreme since he makes no explicit attempt in the text to distance his own science from the science he so heavily criticises. Drawing on the social constructionist critiques of science, to add to the evidence of socially distorted science which Gould himself collects, acts to remove the epistemological grounds for any possible distinction between the two forms of 'social' science and expose some of the rhetorical manoeuvres of persuasion and concealment Gould then attempts in order to build distance between the AIDS science he critiques and his 'better' geographical science.

However, re-viewing *The Slow Plague* through the filter offered by writings published by Gould elsewhere and, particularly, the work of Habermas, acts to cast a somewhat different light on his project. *The Slow Plague* appears to be a remarkably well-motivated and noble attempt to intervene in the communicative reproduction of society via the public sphere, exposing socially distorted AIDS science and then attempting to proffer, through force of argument, an open and rational geographical science to help in the fight against AIDS. However, though this project may be noble and, in its own way, an implicit attempt to negotiate the above paradox, it is, I believe, ultimately still deeply flawed. It is this "gift" of a supposedly open and rational geographical science that proves most problematic theoretically, since his scientific and geographical knowledge is not merely rational and reasonable, potentially awaiting distortion by power. It is power to its very roots, and, therefore, also intrinsically and deeply political. Through strength of will and a deep moral and ethical sense, Gould may be able to distance his work from the distortions of the AIDS science he observes, but he cannot choose to dislocate himself and the geographical knowledge he produces from power and the political. As a result, I believe his "gift" is not a 'better' narrative at all, and, at times, it proves to be an exceedingly problematic, possibly even dangerous, one.

I believe the book's most powerful passages and conclusions stem from Gould's unwillingness to bend; his stubbornness; his desire not to be one of "them" - a "team player." The passionate
criticisms he levels at the work of those within the temporal AIDS research paradigm are devastating and seem warranted. If true, his observations form a damning moral and ethical indictment of this AIDS science. They draw their power from the coupling of Gould's admirable determination to an acknowledged personal situatedness. In these sections he is very much 'present' in the text as an affective, social and political subject. From this 'situation' comes, indeed, a geography for the public good. But the worst of the book comes from this stubbornness too, and arises when Gould attempts to uncouple his situatedness and fails to acknowledge, first, the political and social specificity of the location from where he sees and speaks and, second, the political content of the knowledge he produces. These problematic passages occur when Gould attempts to work, speak and see from the position of a supposedly clear-eyed geographical science. Gould does not seem to reflect on the lessons learned while situated. He is stubbornly unreflexive, both to the evidence he himself collects pointing to the irrevocably politicised sociality of all science - even his supposedly open and rational sort - and to vociferous debate within geography about the problematic nature of representing 'others.'

This conclusion, if accepted, exerts a domino effect through The Slow Plague, revealing geography itself as a highly politicised discipline, Gould's visionary method as problematic, the theoretical viewing platform from where he sees and speaks as earth-bound and socially situated, his spatialisations as constructed metaphor capable of negative, as well as positive, effects, his visualisations as a further intensification of these flaws, and Gould's use of place as an insensitive continuation of his view from on high. A heavy critique - although, as I hope I have shown, I believe Gould tells stories that produce 'truth' in the name of the geographer, stories that will reach a wider audience and may cause harm. So, liber geographicus pro bono publico? No.

Very similar criticisms can, unfortunately, also be levelled at much of the dominant geographical work on AIDS. As stated earlier, this is centrally rooted in a positivist scientific epistemology and relies upon the methods of spatial science to describe and represent the AIDS pandemic. It therefore shares faults with The Slow Plague, including objectification of people with AIDS; an explicit focus on bodies, not social subjects; and a lack of consideration of place or social context
for the illness which would situate and balance the large-scale abstractions patterns of infection which form the core of this geographical paradigm. This work may not reach the same popular audience as *The Slow Plague*, but it still produces representations that could cause harm.

For example, the very title of *The Geography of AIDS* indicates a blinkered approach and neglects to consider that there are, in fact, many geographies to the pandemic, including, most importantly, those belonging to people with AIDS, who exist only as numbers and black dots and act only as backgrounded nodes or vectors for the virus in this account. The cartography in *The Geography of AIDS* is, like *The Slow Plague*, also presented unproblematically - as 'fact', not persuasion. The authors centre Africa in the projections for the global HIV diffusion, daub it with large black question marks and then draw sharp black arrows emerging from the continent to pierce the rest of the world! An inconclusive piece of science thus becomes, when mapped, a dark threat from the mysterious heart of Africa. The *London International Atlas of AIDS* is a more diligent, non-committal, probabilistic treatment of the pandemic. Its depth and technical approach will presumably lead it to a narrower audience than either *The Slow Plague* or *The Geography of AIDS*. This rather cautious approach is, however, undermined by the Atlas' staggeringly crass use of photographic images at the start of each of its chapters. For example, "Part Two: Origins and Dispersals" commences with a grainy stylised photograph of a Haitian "voodoo sacrificial altar" complete with skull and sword. "Chapter Eight: AIDS in Africa" contains only one photo: "A young woman who makes her living as a 'lady of the night' sits in her one-room house in Lusaka, Zambia, before she makes herself up for the evening." The photograph is obviously posed. The woman is sitting on her bed in a dirty room, staring at a wig and clothes on the floor and studiously ignoring her baby. These images act to reinforce offensive stereotypes and deliver a sensationalist message directly counter to the cautious tone of the text. "AIDS in Africa", for example, is embodied in the "African prostitute" who lives in squalor and lacks proper maternal

123 Ibid., p.116.
124 Ibid., p.279.
instincts. The geographical tendency to take "us" away from the spaces and places where AIDS is - through diffusion modelling and cartography - is also reinforced in the Atlas by the frontispiece image for the chapter on AIDS in the United States: an "aerial photograph of San Francisco showing the districts most heavily affected by the AIDS/HIV epidemic."125 Space is pre-eminent. Districts are affected by AIDS, not people. The image reflects the objectifying and distancing tendencies of spatial science's approach to the pandemic, particularly a distancing from gay men and their spaces.126 Geography, of course, does have a significant part to play in the fight against AIDS, as Gould himself recognises. And distance itself can reveal useful and vital information, provided the conceptions of space and place then constructed are sensitively worked and presented. As yet, however, geography does not seem able to fully sustain such conceptions. The picture is one of a discipline letting itself down.

In the course of my analysis of The Slow Plague, I have drawn heavily on a variety of explicitly social critiques of science. In one sense, these criticisms are particularly enabling, even for Gould in his discussions of AIDS science. Scientists are seen not as engaged in the passive description of existing facts in the world, but as actively engaged in formulating or constructing the very character of that world. By this means, therefore, scientists are brought to social, and not just scientific, account for their constructions and representations.127 What is scientifically presented as discovered, out there or natural is revealed to be socially and politically produced and situated and shown to contain significant cultural assumptions. Transcendental, objective scientific vision becomes embodied and situated. So, for example, Gould comes back down to earth with a bump

125 Ibid., p.186.
127 Here I am again reminded of Gould's coliseum. The scientists fight for the real spoils on the floor and the critics bay from the margined seats, calling for them to be bought to social account for their actions. This division is observed by Keller who believes that "discourse about science continues for the most part on two noncommunicating levels: one an increasingly radical critique that fails to account for the effectiveness of science [or even engage with its practitioners!], and the other a justification that draws confidence from that effectiveness to maintain a traditional, and essentially unchanged, philosophy of science." Scientists perhaps possess the social power to largely ignore their radical critics, who are thus marginalised. But it may also be the case that these critics partially contribute to their own downfall by couching their message in too esoteric a language. I agree with Keller in this case, there does seem to be a gap in communication that needs bridging. Engaging in critique of science certainly provokes the feelings of ephemerality described by Hall earlier. Keller, E. F., 1985: Reflections on Gender and Science (New Haven: Yale University Press), p.6.
from his god's eye viewing platform and rather than accepting his apparently authoritative visions as an 'if-you-say-so' truth, they become subject to social and cultural analysis and contestation.

But in another sense, this argument, is also particularly disabling. This critical route makes Haraway nervous, largely because of the extreme relativism it introduces to science. She compares this critical method to epistemological electro-shock therapy when all she wanted was a strong tool for deconstructing the claims of hostile science, showing its historical specificity, and so contestability. Haraway wishes to hold on to the fact that science, whether representation, rhetoric, inscription, persuasion, power or politics, does still enable concrete ways of life and as such cannot be critically dismissed with thumbs-down disdain, especially by those who want to insist upon and imagine a better account of the world. They have stakes in a successor science project offering a better, richer account of the world, in order to live in it well. Her desire is for both an account of radical historical contingency for all knowledge claims and knowing subjects and a commitment to a successor science project simultaneously! She argues that "all components of the desire are paradoxical and dangerous, and their combination is both contradictory and necessary."  

This simultaneously enabling and disabling critique of science thus places me in the tension or paradox identified by Hall, elaborated by Haraway above and encountered by Gould. Siting all scientific work as social and political construction and all conclusions produced therein as representation is a neat and tidy intellectual position, but an uncomfortable stance from a practical point of view. It can lead to a cynical and nihilistic view of science, with this view capable of very real effects too, since science as it stands does offer many people hope, time and chances. This hope could easily be turned to pessimism by such a heavy critical method. So, how fundamentally do "we" accept this critique? To its radical and relativist, and perhaps ultimately disempowering finale? How complete can be our acceptance of the sociology and politics of knowledge and how

complete our dismissal of a positivist epistemology? Gould may indeed be right when he states that science is "our only hope ultimately to stop the ravages of HIV." Similarly, several of Gould's more specific conclusions, though perhaps constructed within a problematic theoretical space, are worth holding. His powerful critique of much AIDS science will hopefully register with those it is aimed at and provoke action, and his calls for better planned and managed research, while they may perhaps come from an urge to accomplish the impossible and shake the personal and political out of the scientific, nevertheless should be heeded. Geography can also offer AIDS research help in several of the areas Gould identifies, if not always in the manner he suggests. Sensitively executed conceptions of space and place will indeed open up new meanings and possibilities within existing realms of research. And, as Brown cogently argues, "Precisely because of the social power of scientific discourse, there is critical potential for spatial-scientific geographies."

However, though Gould rightly pinpoints the importance of science in the fight against AIDS, and thus the need to re-inject a little pragmatism into my discussion after a heavy and wide-ranging critique of science, his attempted negotiations of the paradox, already analysed, do not seem to offer, in theory or in practice, a satisfactory route out of this epistemological tension. It is therefore necessary to turn to other workers and also, ironically in the circumstances, elements of AIDS science itself for indications of the possible form these negotiations could take.

At times, Haraway's visions may seem utopian, but she is, at least, attempting to work from a position that pragmatically recognises and addresses both the sociality of science and the intensely practical nature of many of its fictions. Like Gould she insists on a continued faith and hope in

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130 The Slow Plague, p.204.

131 Treichler briefly describes the form some of these conceptions might take, with the goal of place-specific and place-sensitive work being "to analyze what the members of a culture find meaningful in relation to AIDS", and the production of situated knowledges within "a global anti-AIDS strategy that mobilizes the scientific model of AIDS in culturally-specific ways" thus limiting the universalizing and imperialist tendencies of the scientific model but drawing upon its efficacy. Treichler, P. 1989: "AIDS and HIV infection in the Third World: A First World Chronicle" in Kruger, B. and Mariaini, P. (eds.), Remaking History (Seattle: Bay Press), pp.62-64.


133 At times even Haraway tends towards paradoxy in her desire for a powerful, practical, socially-embedded and constructed science. She does, however, imaginatively and persuasively manage to negotiate this tension, in theory
science, arguing that "science and technology are possible means of great human satisfaction" and insisting on their necessity, since the production of knowledge is, she believes, vital for imagining other possible futures worth inhabiting.134 However, unlike Gould she aims to accept and work with, rather than run from, the intensely politicised sociality of all science. She rejects the harmful and damaging assumption of objectivism, calling instead for a persistence of vision, but a vision, or production of knowledge, that is continually situated within very particular social, political and institutional relations - in stark contrast to the grand-scale, non-specific claims of Gould's geographical science for the "public good". She desires a doctrine of embodied objectivity, with views from somewhere generating specific situated knowledges, with the object of knowledge both pictured and acknowledged as co-constituting agent in the construction of that knowledge. Science, as envisioned by Haraway, would thus no longer escape agency and responsibility in a realm above the social and political fray, but would be contested and contestable to its roots, as it produces its practical fictions, for as Rouse argues, "Science is a means, the most successful means we have devised to date, for constructing and improving representations of the world."135

at least. Accepting that science is intensely and intrinsically social and political, she argues "if our experience is of domination, we will theorize our lives according to principles of dominance. As we transform the foundations of our lives, we will know how to build natural sciences to underpin new relations with the world." This social-science feedback loop suggests that critical attention and effort addressed to the sciences will perhaps be well-rewarded, because we cannot transform our sciences without also transforming the culture and society in which they exist - since science is both part of and reflection of that cultural and societal context and a powerful tool for altering it too. Likewise, societal change will be reflected in transformed science. Haraway, D. 1987: 'Animal Sociology and a Natural Economy of the Body Politic, Part I: A Political Physiology of Dominance' in Harding, S. and O'Barr, J. F., Sex and Scientific Inquiry (Chicago: University of Chicago), p.232.

Harding too is similarly constructive. In The Science Question in Feminism she describes how feminist criticisms of science have moved from a predominantly reformist position to an increasingly revolutionary one: from a liberal project aimed at getting women into science to a questioning of the possibility of using science for emancipatory ends when it is apparently so intimately involved in Western, bourgeois, masculine projects. She then surveys the main feminist critiques of science, from: equity studies, which document the massive historical resistance to women accessing scientific education and jobs; through use and abuse studies; to radical critiques which would argue that science is irrevocably tainted by patriarchy. She positively welcomes the tensions between these criticisms, believing that they all reflect valuable alternative social projects in opposition to the coerciveness and regressiveness of modern science. Her feminist critical project is thus a broad church - she wants liberal reform and radical revolution; a commitment to successor science projects and action to improve existing science. Theoretically it may be necessary to choose between these two positions, but pragmatically they both offer the potential for change.


Certain strands of scientific AIDS research offer hopeful signs that Haraway's negotiation of the theoretical tension can become manifest in practice too. Epstein reports on the first signs of an historic democratization of science triggered by the AIDS moment.\textsuperscript{136} He highlights a changing relationship between 'experts' and AIDS social movements - particularly PWAs and gay sero-positive individuals in the US - with the latter's actions eroding the supposed stand-off between science and the social as they claim the right to intervene in the doing of a science that inscribes on their bodies. This intervention has taken a two-pronged form: involving both political engagement with the larger business/institutional structure of science, and an interrogation and manipulation of the day-to-day conduct of medical work and procedure, for example, in the testing of potential vaccines, 'cures' and palliatives. Science would traditionally consider PWAs as highly biased, but Patton describes how long established subject-object/expert-layperson binarisms are becoming warped, with PWAs able to speak knowledgeably about their condition and thus able to disrupt traditional ways of conducting medical experiments.\textsuperscript{137} Epstein argues that this partial democratization of AIDS science has been enabled by a very specific set of circumstances: medical science is perhaps the most accessible and public of the sciences anyway; US society has become increasingly critical of the pretensions of medicine, with widespread cultural ambivalence resulting in a questioning attitude; middle class gay communities, hit particularly hard by AIDS, possess significant cultural capital which they can mobilise to fight the epidemic; and, finally, the clinical characteristics of the infection results in walking carriers able to build up knowledge of, and speak eloquently about, their condition. These circumstances may be unusual therefore, but they have nevertheless resulted in the opening of democratic fissures, and, as such, signify that a 'socially contaminated' science can generate practical fictions and useful situated knowledges.

Chapter Two - On Safari: A Journalist's Own Story of AIDS in East Africa
Chapter Two - On Safari: A Journalist's Own Story of AIDS in East Africa

Introduction

Where the Story Begins

In the bibliographic essay at the back of *The Slow Plague*, Peter Gould cites a "detailed, personal and anecdotal" account of the 'African AIDS' epidemic.1 This account, *Slim: A Reporter's Own Story of AIDS in East Africa*, was written by Ed Hooper, an English radio and newspaper journalist and photographer who worked in Uganda throughout the mid-1980s, primarily reporting on Central African political affairs, but also filing stories on the state of an apparent epidemic of AIDS spreading rapidly in Central Africa at that time.2 The same account is also cited in, arguably, geography's other major contribution to the AIDS discourse: the *London International Atlas of AIDS*.3 As described in the previous chapter, the Atlas commences each chapter with a photograph intended to illustrate its theme. The chapter examining possible origins of HIV is, compared to Gould's rhetorically laden and contradictory efforts on the same subject in *The Slow Plague*, a piece of diligent and non-committal science in which hypotheses are weighed but no conclusive affirmations are made. Unlike Gould, the authors do not resort to ill-informed 'armchair anthropology' or draw upon speculative racist and colonial constructions of supposedly 'strange' African sexuality and culture to explain possible virus 'jumps' from monkeys/apes to humans. Unfortunately, this conscientious science is undermined by the preceding large black and white photograph. The photograph, reproduced overleaf (Figure 4), directly follows a page bearing the title "The Origins of HIV" and shows the main street of a small Ugandan fishing and trading town called Kasensero.

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Figure 4: Photograph of "Kasensero, on the shores of Lake Victoria, where some of the earliest recorded cases of AIDS occurred", from Smallman-Raynor, M., Cliff, A. D. and Haggett, P. 1992: London International Atlas of AIDS (Oxford: Blackwell Publishers), p.118. Photograph taken by Ed Hooper.
The photograph shows a rutted, baked-earth street, covered by patches of grass and lined with shacks and people standing in their shadows. It leads the eye towards the horizon but stops abruptly in the mid-distance at the shore of Lake Victoria. The text may be telling us that HIV is of indeterminate origin, but the image strongly implies, once again, a specific African source for the virus. Perhaps it percolated from the lake itself? The problems with such a siting were discussed in the previous examination of *The Slow Plague*.

The photograph was taken by Ed Hooper. He had arrived in Uganda in September 1980 as an independent traveller with a professed love for the continent. He secured work for the United Nations as a transport officer on their World Food Programme before gradually moving into journalism and photography. In the mid-1980s he worked as an unsalaried stringer for the BBC and filed freelance reports and photographs on a variety of Central African issues for the *Guardian, Newsweek, the Independent* and the *New York Times*. In 1986 and 1987 he published several articles and photographs in these journals on an apparent AIDS epidemic in Uganda which was supposedly hitting the area around Kasenseroparticularly severely. This period of time saw 'AIDS in Africa' first established as a major news story in the West. The slant given to most of these early media stories suggests that the prime significance of 'AIDS in Africa' was taken to be the supposed fact that HIV was manifest primarily as a heterosexual epidemic on that continent. This 'fact' demonstrated that AIDS and HIV could no longer be metaphorically and literally confined to those in the four 'H' risk categories: Homosexuals, Haitians, Heroin-users and

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4 This notion may seem far-fetched, but it has been used or inferred in many widely-circulated and read popular representations of 'AIDS in Africa.' For example, in a widely published piece, Shoumatoff remarks, "At some level, perhaps only mythical, Kasensero is the font of AIDS . . . How curious it would be, I think, if the source of the Nile and the source of AIDS prove to be one and the same, that vast teeming lake deep in the heart of darkest Africa." Shoumatoff, A. 1988: 'In Search of the Source of AIDS' in *African Madness* (New York: Knopf), pp.132-133. The same article also appeared in *Vanity Fair*, vol 51(7), July 1988, p.105.

Unfortunately, geographical work has also acted to reinforce this notion of Kasensero as mystic source of AIDS. In the previous essay I discussed, in passing, some of the dubious cartographic techniques used by Shannon et al in *The Geography of AIDS: Origins and Course of an Epidemic*, the best-known US geographical text on AIDS. The authors also state "several businessmen' were 'suspected' of dying with AIDS in late 1982 in Kasensero, Uganda, [a] small town [reputedly] a center for smuggling and other business transactions." They conclude therefore "from this remote village setting, AIDS has now become an urban disease in Uganda! 'Suspicious' seen enough for the authors to centre Kasensero in the Ugandan AIDS epidemic. They also provide no possible mechanisms for the sudden shift from rural to urban epidemic. This is awful geography. Shannon, G. W. et al 1991: *The Geography of AIDS: Origins and Course of an Epidemic* (New York: Guilford Press), p.69.

5 Interview with Ed Hooper, 16/2/94.
Haemophiliacs, as had been the case in the early 1980s. Africa was thus held up as a salutary lesson for mainstream white, heterosexual society. Western media coverage of this kind reached its frantic peak in 1986 and 1987, and, on the whole, was riddled with racism and voyeuristic sexism, often conveyed through thinly disguised colonial tropes, images and metaphors. It also betrayed a series of deep anxieties and extreme assertions, stemming, perhaps, both from this recycling of colonial discourse and from a desire to blame someone, or somewhere, for the disease. This discursive overloading results in a series of gross ambiguities, contradictions, tensions, and fractures in the media coverage. It seems to bulge, strain and splinter under the weight of the meaning it is trying to carry. I will examine this specific mid-1980s discursive moment in detail in the next chapter. I believe that the weight and nature of the popular coverage of 'AIDS in Africa' at that time established a formative representational tone and pattern and a similarly formative geographical imaginary - of 'Africa' as dark, disease-ridden source of AIDS - that both drew upon and reinforced earlier colonial and racist geographical knowledges. What 'we' know, as newspaper readers and television viewers, about 'AIDS' and 'Africa' depends, to a large extent, on what 'we' were told during this formative period when the media were saturated with coverage of the 'African' epidemic.

Ed Hooper was one of the first journalists to break the 'AIDS in Africa' story in Europe and North America. In essence, therefore, he was strategically involved in the production and dissemination of this AIDS imaginary. The places he visited and the people he interviewed in Uganda and Kenya would become very familiar to careful readers of the newspapers in the months following his first visits to areas supposedly hardest hit by the AIDS epidemic. Other, often better-known, journalists quickly followed in his footsteps in the search for more stories about 'AIDS in Africa'. Uganda appeared centrally in many of these early media stories, not necessarily because the problem of AIDS was more serious there, but because the government initially displayed a relative openness to journalists - a decision they were perhaps later to regret because of the nature of the
coverage they received and its spin-off effects on attitudes and economics.6 Hooper produced several articles early in the media discourse on 'AIDS in Africa'. Several of his photographs of Ugandan 'AIDS villages' and 'AIDS victims', as they were often tagged, were also widely syndicated in the European and North American media, with the above photograph of Kasensero finding its way, via a picture agency, into an academic book. However, Hooper also devoted much of his time in Uganda to research for a book on the AIDS epidemic in that area. He was eventually expelled from Uganda in 1987 for unspecified reasons, but he believes his constant questioning of government officials about the AIDS situation in Uganda, against a backdrop of increasingly hysterical reports in the Western media, was partly responsible.7 This expulsion effectively gave his book its ending and he returned to Britain to write Slim, a first person narrative of his time in Central Africa reporting on and researching the AIDS epidemic in that area. Slim will act as a centre to my discussion in this section.

*Slim* is subtitled "A Reporter's Own Story of AIDS in East Africa" and splashed across the cover is the further explication "The dramatic story of a journalist working in the heart of Africa who is caught up in the most terrifying and inexplicable medical disaster of our time, the epidemic known in the West as AIDS and to the stricken people of Uganda as SLIM"! This emotive packaging of the book contrasts markedly with its often rather stolid contents. The book contains a considerable amount of technical and medical information, scientific conjecture and debate, policy information, two and a half pages of acronyms, and many verbatim interviews with Ugandan and international officials involved in combating the epidemic, sex workers, people with AIDS and 'bystanders'. Hooper obviously did a massive amount of research and, at times, the book sags heavily under its weight. This technical information is juxtaposed in montage fashion with chunks of autobiography, where Hooper writes about his personal and sexual life in Uganda and his actions and feelings as he reported on the epidemic. Ryle summed the book up well when he wrote:

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6 "I was impressed by the fact that, at a time when the rest of Africa was still tending to deny the terrible impact, or even the existence, of the AIDS epidemic, Uganda had the courage to confront the problem head on." Hooper, E. 1990: *Slim: A Reporter's Own Story of AIDS in East Africa* (London: The Bodley Head), p.259.

7 Interview with Ed Hooper, 16/2/94.
"Ed Hooper was a stringer in Kampala covering the first months of National Resistance Army rule in 1986 for the BBC when the scale of the African AIDS epidemic first became clear; *Slim* is a first-person account of his role in reporting it. It also tells the story of his time as a fast-living expatriate in Kenya and Uganda and the relationship he formed with a Ugandan girl he met in one of Nairobi's most celebrated pick-up bars. The style is rather rough, alternating between the forensic and the confessional, but *Slim* is an honest book, well researched, with a vivid sense of place that bespeaks a palpable love for Africa."8

This personal honesty is one of the most striking features of the book and Hooper describes events and feelings I myself would loathe to relate to a public audience. It led another reviewer to write "Hooper's autobiographical tale has a confessional feel, which derives from the author's own sexual activity in Africa."9 This activity is described in matter-of-fact manner in the book, inviting the comment from a further reviewer personally acquainted with Hooper: "If there was one person I was sure would die of Aids [sic] in Africa, it was Ed Hooper."10

Ed Hooper, like Peter Gould, produces popular representations of 'AIDS in Africa'. They both construct geographical knowledges and are partly responsible for how 'we', the public, know what we know about AIDS and Africa. I focus on Ed Hooper as a second case study and aim to tell another story about a story-teller. Hooper is very much a journalistic kindred spirit to Gould. The intervention both men make in the AIDS discourse is deeply personal, politically motivated and thoroughly committed. They do care. Hooper donates "a percentage of the profits from *Slim* to the indigenous Ugandan relief agency TASO - The AIDS Support Organisation - which is providing remarkable care and support for Ugandans with HIV and AIDS."11 And, the simple fact that he has taken an extra step to the other journalists reporting the same story and produced a book on AIDS in Uganda demonstrates his admirable commitment to highlighting the problems he

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11 *Slim*, p.xiv.
perceives. He is prepared to put his undoubted social power and authority to use in an attempt to help 'the public', both in the West and in Uganda.

Hooper's 'journalist' is therefore remarkably similar to Gould's 'scientist'. Both characters are driven to serve the public good and both seek to make a communicative and political intervention via a tacit public sphere. A strong sense of social responsibility also seems to drive the work of both men. But not only do Hooper and Gould share a similar world [weary] view and strong notion of professional moral obligation within this world, as 'journalist' and 'scientist' they occupy similar epistemological and rhetorical ground - as objective and distanced authorities upon the social. Hooper himself recognises this similarity between their roles. He discusses four brothers in Rakai province, Uganda, who all died close together, probably from AIDS, and declares it as "a phenomenon which would certainly bear further scientific examination. I only regret that I passed over my best opportunity to investigate the matter on a journalistic basis." Science and journalism are here conflated. The latter carries the expectation that it is grounded in an historical actuality, and that it relates to this actuality as metonym. The journalist is thus positioned as passive observer of this actuality. "The privilege of inspecting, of examining, of looking at, by its nature excludes the journalist from the human reality constituted as the object of observation." It is from this supposedly detached position that Hooper, like Gould, aims to make his intervention.

However, as has already been seen in the case of The Slow Plague, the authoritative, privileged, yet distanced, position traditionally taken by journalists and scientists is both myth and one only available with social power. Social power enables the two men to attain this position and they

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12 Both men root their work in very a very similar conception of 'the public': as a mass put upon by government and bureaucracy and therefore in need of assistance from scientific and journalistic free spirits.
13 Slim, p.31.
14 Ibid., p.13.
15 I refer here to an epistemological distance since the journalist enters a space, but the spatial scientist does not. However, both individuals attempt to secure an 'objective' distance for themselves in order to tell their stories, founded upon an epistemological subject-object dualism. The 'journalist's' distance therefore derives from their presence inside a situation but outside of its social context. The 'scientist' similarly attempts to epistemologically withdraw from the social. See Brown, M. 1993: Ironies of Distance: An Ongoing Critique of the Geographies of AIDS, unpublished paper, (Dept. of Geography, University of British Columbia), p.38.
must work to sustain it through rhetorical effort. They pull the "god-trick." Like Gould, Hooper is therefore forced to resort to many of the same rhetorical manoeuvres and deployments in an attempt to prevent social and political encroachment upon his supposedly depoliticised journalistic space. And, as has also been seen, considerable problems can then be unleashed by the representations constructed from such a rhetorical position, since they purport to be objective and neutral when they are, in fact, situated, criss-crossed by relations of power and intrinsically political.

*The Slow Plague* and *Slim* also contain a tension which acts to cast further light on the nature of the above rhetorical manoeuvres and deployments. Gould continually proclaims the possibility of free science while surrounded by a vast weight of evidence pointing to its irrevocably politicised nature. And *Slim* is a piece of literary journalism about journalism itself. Hooper is, therefore, at times present and active in the text as he relays intimate details of his personal and sex life or describes how he travelled around the country, gathered 'facts' and reported the AIDS epidemic. Then at other times he goes absent and slips into the rhetoric of the objective, distanced, passive, truth-seeking journalist, questing for the 'facts' about AIDS in Uganda. The former accounts of how his representations are messily, haphazardly and often exploitatively obtained and constructed makes a mockery of this latter rhetorical stance. Thus, the book at one and the same time both feeds into the discourse on 'AIDS in Africa', as a piece of representation; and outlines some of the mechanics of construction of that self-same discourse. This makes the book a very useful tool for situating his and other media representations of 'AIDS in Africa', but it also contradicts and undermines its own supposedly objective visions.

The ambiguous nature of *Slim*, with its wealth of information on the production of the early media discourse on 'AIDS in Africa' and its representational and discursive similarities to *The Slow Plague* allows my discussion of the book to act as a bridge between the previous critique of *The Slow Plague* and the following section on key moments in the 'AIDS in Africa' media discourse. This necessitates a two-pronged examination of *Slim*: firstly as a piece of popular representation and specific knowledge claim about 'AIDS in Africa', following the pattern set by my earlier
critique of Gould’s work; and secondly as providing background to, and context for, the media reports on 'AIDS in Africa' to be examined later.

Examining Slim as a piece of popular representation involves subjecting it to a very similar style of analysis to the previous essay on The Slow Plague, deepening and further exploring some of the ideas introduced therein and unravelling the rhetorics within which the story is couched. From a position of rhetorical authority, both Gould and Hooper tell stories about AIDS, simultaneously telling wider stories about race, sex, gender, the social, nature, culture, science and religion as they do so. These notions are thus called upon and reinforced or re-negotiated whenever AIDS is talked about. The discursive and signifying practices they use can be seen as shaping forms of consciousness, working on a symbolic and ideological level to construct, encode and legitimate particular social, political and economic aspirations.

Representing AIDS can have a very real, material effect on bodies, possibly life or death as Hall persuasively argues.\(^16\) And when 'Africa' is added to the discursive mix, the combination becomes doubly explosive. Hooper is centrally concerned with the representation of a place already soaked in meaning and association in the Western imagination. Much work has focussed on the linkages between knowledge, representation and power in the colonial period and beyond, and, in this manner, colonial writing and representation are read as part of a discourse both enabling colonisation while being generated by it. Hooper is writing squarely within this nexus, and he cannot escape drawing upon many of the same rhetorical functions, tropes and negative associations.\(^17\)

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Journalism and literary journalism have always played a key part in the creation of imaginative geographies and popular knowledges and Slim represents a continuation of this trend. This 'knowledge' can then link directly to the operation of power and to specific economic and political possibilities and actions. On a small scale it may be that the representations jar the reader into some form of positive action. Or it may be that the representations firm up a conception in that reader's mind of Africa as perpetual site of disease, decay and death. On a larger scale, the actions resulting may also be to the detriment of the represented. For example, pessimistic portrayals of the 'AIDS in Africa' situation as apocalyptic perhaps enables pharmaceutical companies to run vaccine tests there that would not pass ethical muster in Europe or North America and still be seen as benevolent and philanthropic. Popular representations of 'Africa' have thus always had and still have real consequences for living people who have little control over how they are represented to more powerful nations and cultures.

To analyse Slim as a formative piece of popular representation is therefore a useful and necessary task, but its literary journalistic format allows Hooper to describe the mechanics involved in both researching and writing Slim itself and to describe the personal, economic and political conditions and mechanics facilitating and enabling his and other media representations of the apparent AIDS epidemic at that time. These conditions and mechanics are largely effaced in the final media representations as the authors adopt a mode of writing which positions the journalist as passive, observant eye rather than active, embodied and situated agent in the story. Then, when, in the case of the 'AIDS in Africa' media discourse, attempts are made to analyse the representations produced, the journalist as agent is able to remain hidden. For example, Treichler, Watney, Patton, Bryn-Austin and the Chirimuutas all examine various moments in this media discourse,

and produce excellent, incisive and necessary work in the process. But they only analyse the media representations on a purely literary level - as shards emerging not from complex and specific personal and political dis/economies, but from a crude reinstated abstraction of this - the white Western male in Africa - so well have the journalists hidden their tracks. As a result, their analyses of these representations lack depth and any consideration of the personal and political context from which they emerged.

In contrast, *Slim* provides this context. It reveals the background to a key discursive moment, detailing the specific personal, material, political and economic circumstances that gave rise to many formative media representations of 'AIDS in Africa' and in turn allowing them to be situated, not within a purely free-floating theoretical situation as in the above papers, but within a real political economy made manifest through an individual's movements, looks, access and feelings. In the case of *Slim*, Ed Hooper's own photographs and media stories, and probably, by inference, the 'AIDS in Africa' media discourse as a whole, this process of news construction, though negotiated, proves to be centrally rooted in asymmetries of power and diseconomies of sight and representation, with the balance tilted heavily in favour of Ed Hooper and his fellow journalists.

Before commencing my discussion, I wish to introduce a note of caution. For a variety of reasons, not least length (400 pages versus 200) *Slim* is a far more complex book than *The Slow Plague*. *The Slow Plague* carries a central fissure - Gould's unreflexive and idealised notion of science - which can be prized apart to lay his argument bare. In contrast, *Slim* is riddled with fissures and ambiguities stemming from a variety of sources, including: the explosive discursive combination of 'AIDS' and 'Africa'; the subsequent import of the well-documented contradictions and fractures inherent to the strands of colonial discourse upon which Hooper draws in his

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narrative; the difference in the political use of colonial discourse then and now; Hooper's own personal stance, which, at times, demonstrates a palpable and non-patronising love and concern for Uganda and its people in stark contrast to the implications of this colonial rhetoric; and, finally, Slim's own literary journalistic format and the fact that a large part of the book is about journalism itself, which generates a tension between absence and presence, and objectivity and subjectivity, and causes it to operate its own auto-critique.²¹ I therefore do not wish to overstate the logical coherence of the sign systems used by Hooper.

The danger to be avoided in this analysis is to attempt to roll up journalism, science, empire, geography, their rhetorics and representations, the gaze, patriarchy and capitalism (to name but some of the villains present in this text) into an over-simple self-determining system. This is not to deny connections and causalities, but the strength of an account which focuses on a case study like Slim is the deeper understanding, rather than coarse generalisation, that can result. The aim is thus neither to apportion post hoc blame for the form of past representations nor to deride Hooper's actions when constructing them. Instead, I aim for a deeper and broader understanding of a popular discourse - 'AIDS in Africa' - that is still operating in a very similar, and, I believe, dangerous form. Firstly, a deeper understanding of its literary and rhetorical nature, in particular, the routes by which a text situated in the extremely problematic 'AIDS' and 'Africa' discursive nexus can escape its well-meaning author. And, secondly, a greater understanding of the literal construction of this discourse through the juxtaposition of Hooper's account with the final media reports and the subsequent revealing of what normally goes unseen and unsaid within the latter.

²¹ See, for example, Bhabha's argument that the colonial power is subject to the effects of a conflictual economy, constituted in a repertoire of conflictual positions through colonial discourse, and that the colonial stereotype or trope is a complex, ambivalent, contradictory mode of representation, as anxious as it is assertive. Bhabha, H. K. 1983: 'The Other Question' in Screen, vol 24(6), p.22. And, As Spurr notes, "the crisis-ridden, unstable context of colonial power makes for a shattering of its discourse . . . a series of fragments made by stress fractures under the burden of colonial authority." Spurr, D. 1993: The Rhetoric of Empire: Colonial Discourse in Journalism, Travel Writing, and Imperial Administration (Durham, USA: Duke University Press), p.7.
Rhetoric and Representation: the literary construction of 
*Slim*

**A Quest for Truth on a Potholed Road**

Ed Hooper couches *Slim* in terms of a journalistic quest for facts and figures about the AIDS epidemic in Uganda. The book is very much a personal crusade for the 'truth', which is not readily apparent, but instead lies hidden, often deliberately obscured by the machinations of government or bureaucracy. 'Truth' can thus only be exposed by constant and tireless searching, moving, digging and questioning until one receives straight answers. Dowden describes the book as "one reporter's struggle to get his story out . . . Ugandan bureaucracy, the government's fear of creating panic, anger at Western assumptions that Aids [sic] began in Uganda, all conspire to prevent Ed getting to the truth about Aids in Uganda."22

But Hooper's journalistic quest is not simply about finding the 'truth'. His searching has an explicitly moral and political purpose and aim too, one I have already discussed. Hooper's conception of the 'journalist' is, like Gould's conception of the 'scientist', as free-spirited and de-political public servant.23 This public remains, problematically, ill-defined, a pan-global faceless mass of 'common' people 'in the street' who are cowed and let down by their governments and constrained at all times by bureaucracy. For example, Hooper felt that, in Uganda, "the common man was on a hiding to nothing"24 with government largely to blame - "this regime was beginning to bend the rules, and move along the same extrajudicial path as its predecessors."25 The public therefore need a defender. Hooper, commendably, is prepared to fulfil this role: "Dr Abbas stopped for a moment, and I seized the opportunity to ask what efforts were being made to inform

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23 This idea of 'loneness' serves to remove Hooper and his work from any wider systemic context. It is a 'romantic' trope but one which does not bear much relation to the actuality of his specific situation, as stringer for the BBC and other large media organisations.
24 *Slim*, p.4.
25 Ibid., p.263.
the public about the risks." And, in seeking to bring the 'AIDS in Africa' story to Europe as proof of heterosexual AIDS, he is fighting for the public there too.

Hooper lets the reader know that this journalistic crusade for truth is a hard and difficult path to follow. Every road seems to be potholed in his quest for a story. As he travels to Rakai to try and find individuals with AIDS, he declares "the taxi drove slowly onwards down the Masaka road, bouncing into submerged potholes, the windscreen wipers providing one second of clear vision in every three . . . It was a typical day out on the road in Africa: uncomfortable, yet at the same time exhilarating." Elsewhere he remarks: "it looked more like a cart-track than a road . . . It was one of the worst roads that I had encountered in Africa"; and later comments upon "a tarmac road that, despite its occasional pot-holed sections, was generally in excellent working order." Hooper's path may be hard, but he will not be stopped: "a few days later, visaless, I sneaked across the border into southern Sudan in order to report on the guerilla war there. In framing his quest, Hooper relies upon a traditional and much-used positioning of self in relation to 'Africa': of the brave white reporter going 'where no man has gone before' to secure a story and find the truth. Torgovnick describes how Stanley, among others, frames his 'adventures' in this way too. Africa has often been represented as "a testing ground for men, a place of adventure, of rescues from danger." Hooper is no doubt brave and committed, but, as Torgovnick hints in the above statement, this particular framing puts an overtly masculine, manly slant on to Hooper's story. This slant is further compounded by Slim's subtitle - "A Reporter's Own Story of AIDS in East Africa." There are echoes here of Boy's Own stories, a long-running series of British imperial adventure comic-books full of tales of quintessentially British heroes. Watney picked up on this association in his review of Slim, describing it as "yet another 'Boy's Own Story' this time from the Deepest heart of Africa, with AIDS playing the part taken by other exotic diseases in earlier

26 Ibid., p.25.
27 Ibid., p.19.
28 Ibid., p.33.
29 Ibid., p.226.
30 Ibid., p.27.
colonial accounts." This is a particularly lazy review from Watney - the book is not this simple. It is much more than a Boys Own story and far more ambiguous. In Slim, 'Africa' is not simply the backdrop for the play of Hooper's ego. Hooper himself now regrets the book's subtitle, feeling it is misleading: "I now regret the word 'own' in the title, which is, I think, incredibly weak." I would agree with him to some extent. But the gender specificity inferred by the subtitle and in the manner in which Hooper frames his quest does manifest itself in the book. An overt masculinism winds itself right through the text and, as I shall demonstrate later, directly shapes the representations and imaginative geographies that emerge.

**Smitten by Uganda**

*Slim*, the story, begins with two maps. The first, shown overleaf in Figure 5, is a "map of East Africa, showing the main trucking routes" with Lake Victoria positioned centrally in the image. The second map, shown in Figure 6, focuses in on the area around the Ugandan shores of the lake itself and is titled: "Map of Rakai District, southern Uganda."

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34 *Slim*, pp.xvi-xvii.
Figure 5: "Map of East Africa, showing the main trucking routes", from Slim, pps.xvi-xvii.
Figure 6: "Map of Rakai District, southern Uganda", from Slim, pps.xviii-xix.
The second map introduces several places that will become familiar as I trace both Hooper's story and the media's 'AIDS in Africa' discourse: Kyebe sub-county, the lake shore, the border with Tanzania, Kyotera, Rakai, the source of the Nile and Kasensero on the edge of the lake. The area surrounding Kasensero - Kyebe sub-county - has often been positioned, by journalists and geographers, as the possible 'source of AIDS'.36 On the map the county is swathed in the symbols for swamps and marshland. Hooper himself gives a scrupulously careful reading of the origin issue, but the book's subtext runs out of control, relying on a number of images and tropes that act to reinforce the colonial positioning of Africa as innate miasmic generator of new and strange diseases. Maps themselves are socially and culturally emblematic, relying on a whole host of social presuppositions, and they are potentially persuasive and formative too. The maps at the beginning of *Slim* seem to serve a similar purpose to Hooper's photograph of Kasensero in the *London International Atlas of AIDS.* They symbolically connect the AIDS narrative to a swampy marsh at the centre of Africa. The value-laden and damaging conclusions of Shoumatoff are then just a small step away.

The manly nature of Hooper's story and the innate links established between Uganda and AIDS are, unfortunately, both compounded by the strange, but all-too-common, way Hooper embarks upon his narrative. In a short prologue, Hooper sets up his story as a turbulent love affair between himself and Uganda. He states:

"Early in September 1980 I crossed the border from Kenya into Uganda, and straight away began a love affair. As in most love affairs, we were not always happy together - in fact there were times when we loathed the very sight of each other, so much so that on two occasions I was sent packing most cruelly, without even a chance to put my side of the argument. And yet, although I sit here now a little more wisely, and say 'never again', and lick my wounds, were the object of my affections to let me know

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36 See my earlier comments on Shoumatoff's *Vanity Fair* article, the *London International Atlas of AIDS,* and *The Geography of AIDS.*
that I was welcome to return, that we could start again from scratch, that it was all a big mistake, can I really say that I would refuse without a second thought? I fancy not."37

Hooper is hooked, "smitten"38 by Uganda, which carries the direct connotation that he has been stricken, seized, infected or possessed with disease, desire or fascination39 and "suffice it to say that, from the start, Uganda knew that I was hooked."40

What impact does this introduction have in a story about a place and AIDS? The country to be explored is portrayed as feminine, reinforcing the masculine nature of the quest upon which Hooper has embarked. But Uganda is feminized in a particularly striking way, with a distinct set of characteristics. This feminine 'Uganda' is the locus of an addictive desire, with hints of danger lurking inside her. She is knowing, dangerous, irrational, tempestuous and perhaps diseased. This feminizing tendency is a common colonial rhetorical manoeuvre. It serves to transfer the locus of desire onto the object, in this case a female Uganda.41 Hooper's motives are displaced, so that he becomes an innocent, subject to the whims of an all-consuming desire he cannot avoid. 'Uganda' is presented as dominant, alluring, enticing him hither and later sending him packing. In this way, the assymmetries of power that allow Hooper to fly in and out of Uganda, to travel around the country and to love the place are concealed.42 The possibility, then, that 'infection' or 'possession' may act in reverse, from Hooper, and other Europeans, towards Uganda, is completely precluded by his set-up. The impact of the above imagery in relation to AIDS is obvious - Uganda is positioned as agent seeking to lure and infect men like Hooper. Africa is,

37 Slim, p.1.
38 ibid., p.1.
40 Slim, p.2.
42 Ed Hooper is eventually expelled from Uganda by the government, probably because of the awkward questions he was asking both about the fight against AIDS and the political situation in general. The Ugandan government thus has ultimate control over Hooper but until the moment of expulsion he is able to travel fairly freely and is not constrained in the reports he files. I feel the balance of power and control lies firmly with Hooper while he is in Uganda, and quote extensively from the text in order to back this argument up. The reader is therefore also able to examine the situations I am discussing and decide for themselves where control lies.
once again, portrayed as seductive, destructive and potentially, perhaps innately, deadly to the white man. The reverse possibility is not considered.

Hooper's 'Africa'

In the above example, Hooper's good intentions seem to be overwhelmed by the power of the colonial discursive legacy and the negative and offensive connotations of the imagery, drawn from this discourse, upon which he often relies. Elsewhere in the book these connotations are further compounded by other comments on the nature of the country in which he resides.

In the prologue to Slim Hooper paints a thumbnail picture of Uganda's recent history from the 1970s onwards. "To give some historical perspective to the story which follows ... A series of dictators and power-grabbers have milked the country dry, leaving it one of the poorest in the world." This is probably the "historical perspective" most Western media-watchers are familiar with and it is one of political corruption, rigged elections, guerilla movements, social fragmentation, violence, extortion, murder, gunfire at night, army and police brutality, road-blocks and inter-tribal friction. Uganda, at this time, seems to be a society in absolute chaos, almost constantly interrupted by a series of guerilla insurrections and "dirty wars" involving mass rape, looting and indiscriminate bombing. Though democracy had arrived in Uganda at the time of Hooper's story, he is unhappy with the political and military situation he encounters - "I was angry about the soldier's arrogance and casual brutality ... too much power still resided with the bully-boys." Hooper himself actually spends some time in prison, for possession of hemp, which he

43 Hooper, I am sure, would vehemently dispute this analysis and conclusion. In Watney's review of the book he stated: "In 'Slim', as in the 'Heart of Darkness', Africa is imagined in the likeness of a gorgeous, infinitely seductive woman's body." Again, this is a little lazy and a little over-simple. Hooper does have a palpable and non-patronising love for Uganda and its people which shines through in other sections of the book and introduces a degree of ambiguity into any interpretation of his rather clumsy prologue. However, the sheer power of this opening imagery, its colonial associations and subtextual implications all act to convey a dangerous message about Uganda and AIDS. Hooper sought to counter Watney by replying "I don't know whether this image originates from Conrad's brain, cr from Watney's, but it certainly doesn't emanate from mine." However, I feel he misses the point slightly here. The imagery he uses is so commonplace it is almost unquestioned, even, perhaps, by Hooper himself. Its use is not necessarily deliberate or conscious, but its associative effects cannot be overlooked. Watney, S., 1990: Review of Slim on BBC World Service Book Talk, 25 April 1990 and Hooper, E., 1990: Personal letter to BBC World Service Book Talk editor, in reply to Watney's review of Slim, 9 May 1990.
44 Slim, p.9.
46 Ibid., p.273.
states was planted in his house by the police. In Luzira prison, he meets several characters "from crooks to cabinet ministers, who appear later in this book."\textsuperscript{47} The two sets of characters are only one step apart in this country, and everyone, it seems, operates on the wrong side of the law. Hooper's Uganda is still a society on the brink of anarchy and violence. "I felt, however, that Gulu was the sort of wild west town where casual murders could easily happen."\textsuperscript{48} But the violence he encounters is tinged with a theatrical tragi-comic touch. Hooper tells of Alice Lukwena's Holy Spirit Battalion - a religious guerrilla force. Apparently she assures her followers that they will be protected from bullets by sacred oil and ash, and that the stones they throw will explode like grenades. "It was the sort of extraordinary story which could only be told in Uganda."\textsuperscript{49} One might add, 'it was the sort of extraordinary story that is always told about Uganda'! Similarly, while reading the local newspaper, 	extit{New Vision}, Hooper finds an article about the passing of the AIDS scare - "just like such frightening events in the past as 'firing squads, the talking tortoise, child abductions, exported skulls and genitals, trees rising from the dead...'. The talking tortoise? Sometimes I was impressed all over again by what a strange and wonderful place Uganda was."\textsuperscript{50} Uganda may be unpredictable, but it is predictably so, and the magical slant of Hooper's tales of violence acts to remove them from any meaningful context, perhaps psychologically distancing the Western reader from these unfortunate events.

Hooper, however admirably motivated, is engaged in a fairly typical discourse on Africa. Violence, social upheaval, lack of social order and political corruption are presented as a natural state of affairs, endemic to the continent, which is both removed from the rational course of history and examined in isolation from any other context - political or economic. Why was Uganda so vulnerable to political unrest in the 1970s? Whose factories supply the weapons that fire in the night? Who trains and finances the guerillas? It is a discourse of negation and devaluation, and it relies upon a rhetoric of triviality and dehumanization, which, when combined with the emphasis on AIDS in the narrative, may well provoke a feeling of hopelessness or ineffectuality in the

\textsuperscript{47} Ibid., p.9.
\textsuperscript{48} Ibid., p.100.
\textsuperscript{49} Ibid., pp.234-235.
\textsuperscript{50} Ibid., p.271.
reader, after all, chaos seems to be Uganda's natural state judging by these representations.\(^{51}\) I should say at once that to criticise the abuses of Africa in the West does not by any means entail condoning them within African societies, and there is undoubtedly partial truth in much of what Hooper says. But if he is to avoid or dampen the uncomfortable colonial echoes triggered by his narrative and prevent a naturalising of corruption, cruelty and chaos as essence of Africa, I believe that a more detailed contextualisation of the political and economic situation in the African countries under discussion is required. As his narrative stands, *Slim* reads as a story played out in a spatially and historically constrained and isolated 'Africa'. This isolation then acts to rhetorically limit possible Western complicity and involvement in the AIDS situation under examination in Uganda.

The above set of representations of Uganda reinforce several colonial stereotypes and rely upon many fragments of colonial discourse for their telling. Hooper does not tell the reader much that is 'new' about Uganda, and the geographical 'knowledge' he imparts often has a distinctly colonial feel. Then, when the subject of AIDS is laid across this backdrop of a feminized, knowing and infectious country; a difficult, dangerous Africa with swamps and marshland at its core; and an Africa considered in spatial and historical isolation, the reader seems to be marched towards some almost unavoidable connections. These connections, linking Africa, disease and death, already lie latent in Western common consciousness, placed there by years of use and reiteration. The slightest textual nod in their direction simply serves to reactivate these associations and reconfirm Africa "in the post-Enlightenment European mind . . . as a unique space, as a repository of death, disease, and degeneration."\(^{52}\) In a small section on the origins of AIDS Hooper gives the issue a very sensitive reading and declares "no reasonable person can blame a particular group or race or nationality for a virus or disease."\(^{53}\) He also goes on to lament early "inaccurate and misleading" Western science which he believes is partly responsible for the possibly erroneous causal linking

\(^{51}\) This is a theme echoed in the press. For example, the *Los Angeles Times* comments on the "sense of futility about the recurring famine, corruption and economic mismanagement" in Africa. 3/8/91: 'Africa hit by donor fatigue', *Los Angeles Times*, p.7.


\(^{53}\) Slim, p.220.
of Africa and AIDS. However, Hooper's conscious and sensitive intentions in this small section are, once again, overwhelmed by the sheer weight of imagery in the text that suggests, both overtly and in more subtle fashion, that Africa and AIDS are linked: innately, naturally and causally.54

**AIDS from an Isolated and Forgotten Land**

Hooper begins his story proper as he travels with companions from Kampala, through the swampland surrounding the Katonga bridge towards Rakai and Kasensero, on a trip many more journalists were to make later. This was the area where the crucial battle in the last civil war was fought, a scene of "legend" due to "the battle-dressed corpses which were said to lie rotting in the brackish water."55 Hooper declares "the three of us were on the track of the latest of the killer diseases which Uganda seems to spawn with monotonous and cynical regularity . . . Normally such epidemics, even when they caused tens or hundreds of deaths, were dismissed by most foreign reporters as being of only limited news interest when viewed in the general African context of famine, disease and civil war. This epidemic was different."56 On a later visit to Kasensero, Hooper heads across "a long, straight causeway through the surrounding marsh. The scenery was bizarre, almost other-worldly; there was a sense of crossing over into an isolated and forgotten land . . . [They] grew quiet . . . we had fallen victim to the strange and eery beauty of the place."57

In this imagery, Uganda, the very land itself - isolated and forgotten, chaotic and corrupt - is able to "spawn" disease. According to Watney, Africa is often positioned as a terrain of hidden evil, "an undifferentiated domain of rot, slime, filth, decay, disease, and naked 'animal' blackness. This infernal and unhygienic territory is the perfect imaginary swamp in which a new virus might

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54 After acknowledging Hooper's sensitive reading of the origin issue, Watney, in his review of *Slim*, declares that the "text none the less returns obsessively to the question of the much disputed origins of the Human Immunodeficiency Virus". I disagree. The forging of a strong linkage between Uganda and AIDS in *Slim* occurs much more insidiously than through an 'obsessive return' by the author. Instead, the connections are made through the sheer weight of imagery used, much of it in subtextual and contextual passing, which both draws upon and reinforces common but dangerous elements of the colonial discourse on Africa. Watney, S., 1990: Review of *Slim* on BBC World Service Book Talk, 25 April 1990.

55 *Slim*, p.15.

56 Ibid., p.17.

57 Ibid., p.33. This portrayal of the land as "isolated" is rather undermined by the fact that Hooper is travelling through it in a Fiat 125 with several companions, only half a day's drive from Kampala.
'percolate'". Science has been confounded by the HIV and there is therefore, perhaps, a subconscious need to locate its origin outside existing spheres of knowledge, in a "isolated and forgotten" part of Africa - in this case Kasensero once again; to represent the virus as a strange, newly discovered, external challenge to the system, rather than an internal flaw or anomaly. Hooper’s imagery hints that this is the case, thus placing science back in control. He also invokes and reinforces Victorian models of miasmic disease generation, perhaps not consciously, but forcefully nevertheless. Thus, 'older' ways of knowing illness and disease can persist and survive alongside newer 'viral' systems of comprehension and shape understanding.

These models held that disease and sickness would be generated in and emanate from foul atmospheres and squalid conditions. They represent a partial truth or explanation for geographical patterns of disease since those living in conditions of poverty were and are more susceptible to illness. But, like some of Hooper's representations of 'AIDS in Africa', the model considers such places in isolation and naturalises disease as innate to them. The model also carries connotations of blame for those who 'choose' to live in these squalid conditions and are unable to maintain acceptable and hygienic standards of living. The whole truth of disease patterns also lies in the much wider structural inequalities that underpin unequal development and localised 'squalid conditions'. In Uganda this means the legacy of colonialism, the inequities of the world economic system, civil war, internal political turmoil, corruption and mismanagement.

58 In this quotation, Watney was describing other media representations of 'AIDS in Africa', but his words could easily be applied to Hooper's representations. Watney, S. 1990: 'Missionary Positions: AIDS, "Africa", and Race' in Ferguson, R. et al (eds), Out There: Marginalization and Contemporary Cultures (Cambridge, USA: MIT Press), p.95.

59 As I noted in the previous section, Patton argues that the search for the "source" of AIDS in Africa "stems from the wish to discover that AIDS is an 'old' disease which was confined somewhere else until technological change created contact with 'isolated' peoples. Constructing AIDS as 'old' (if not primordial) and situating the virus in 'Africa' naturalized the disease, reinforcing the view that science solves the problems thrown up by nature and society, and is therefore separate form both." By this reading, the sourcing of AIDS in Africa is seen as a rhetorical manoeuvre by science necessary to maintain its community standing and authority. Patton, C. 1990: Inventing AIDS (New York: Routledge), p.69.

60 "Specific diseases, such as cholera, as well as the state of being generally prone to illness, were thought to be caused by an "infected" (or "foul") atmosphere, effusions spontaneously generated from something unclean. Usually identified (first by its bad smell) as decaying organic matter, this disease-carrying atmosphere came to be identified with urban rather than rural squalor, and with garbage, rot and the proximity of cemeteries." Sontag, S. 1988: AIDS and Its Metaphors (New York: Farrar, Straus, Giroux), p.41.
AIDS and Modernity

Elsewhere in the book, Hooper frames his understanding of AIDS in Uganda in an equally limited way. He describes a country stumbling through the early stages of modernity, which has led to a "great divide in Ugandan society" - between the older, rural population and the liberated young, mostly urban-based population who are hedonistic and coming into contact with Western ideas and movies, and driving the boom in the black market. He argues that these are all "factors in the new rootlessness, the easy-come-easy-go lifestyle that, twenty-five years after independence, seemed to permeate not just urban Uganda, but the urban areas of the greater part of sub-Saharan Africa." The onset of modernity seems to be adding to the already innately and naturally chaotic social, cultural and political state of Ugandan society. People are mixing, moving, and altering their 'natural' behaviour; and this creates the 'perfect' conditions for a disease like AIDS to take hold and spread. For example, as Uganda develops "the trucking network, with its attendant 'service crews' of prostitutes and barmaids, constituted probably the most efficient amplification system for HIV in Africa." This representation of Ugandan reaction to modernity and concomitant spread of AIDS carries two sets of implications. Either Uganda cannot cope with modernity, with its people lacking the necessary attributes to develop 'properly', without chaos and disease. Or, more romantically, but equally patronisingly, modernity is positioned as an external evil visited on a more simple and primitive society, which leads to breakdown in the traditional cultural and social fabric and subsequent increased vulnerability to disease. Here too there is a partial truth in this more modern framing of the AIDS situation in Uganda. Social and cultural change and increased mobility and mixing of the population are likely to be contributory factors to the rapid spread of HIV in a society. But, once again, to consider Uganda in isolation is to limit notions of causality and frame an understanding of AIDS in Uganda as innate.

This, then, is a summary of what Hooper says about AIDS in Uganda and Africa. He speaks from a position of rhetorical authority, drawn directly from having seen 'with his own eyes' the truth of

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61 Slim, p.227.
62 Ibid., p.228.
63 Ibid., p.182.
the situation in that area and indirectly from the cachet of his position as journalist and author. His words carry weight, hence he is cited and used by other authorities on this topic. *Slim* will affect attitudes. In much of the book he is sensitive and demonstrates considerable compassion, but he still manages to use images and representations that position Uganda as: female, possibly diseased; knowing agent, very much in control; politically corrupt; innately chaotic and violent; strange and isolated; eerie; a miasmic land spawning epidemics; and disrupted by, and struggling with, modernity. Hooper seems unable to escape the colonial discursive legacy and his subtext therefore insidiously builds a picture of Uganda as an AIDS manufacturing machine. He draws upon a considerable amount of colonial imagery and rhetoric, thus both recirculating and revalidating many offensive conclusions. His reliance upon this imagery results in both a positioning of AIDS as naturalised and innate to Uganda, and a limited spatial and historical frame of understanding of the supposed epidemic there. This naturalising and limiting effect is a direct product of the fragments of colonial discourse he uses to tell some of his story. Inherent in this rhetoric is a disguising of agency and motive, and its use, as in the past, acts to distance Hooper, the reader and the West from involvement in the situation under discussion.

This rhetorical distanciation is compounded by the lack of an adequately wide historical, geographical and economic framing of the AIDS situation in Uganda, and this is, itself, also a typical colonial mode of understanding Africa, which is often presented as suffering from an absence of history.64 This lack is the central absence in *Slim*. Hooper's perspective, like Gould's, does not include colonialism or adequate reflection upon wider inequalities or diseconomies that would provide a more sensitive and nuanced understanding of 'AIDS in Africa'. He misleadingly frames AIDS against "the general African context of famine, disease and civil war" but this is not the level where context stops.65 A wider and more intricate template is needed, one which draws on both local and global scales of explanation and understanding and is grounded explicitly in politics and economics.66 Danger lies in framing the AIDS in Uganda as, either, the

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64 Ibid., p.100.
65 Slim, p.17.
simple product of colonialism and capitalism, or as the essence of Africa. In both cases explanation is tautologically and dogmatically founded upon what 'we' already know about Africa, with the constituency of the 'we' changing in each case.

I feel that Hooper veers towards the latter framing. The lack of adequate political and economic context reinforces the distancing tendencies of the elements of colonial discourse upon which Hooper draws, since both text and subtext act to efface traces of colonialism and the influence and involvement of the West upon the AIDS situation in Uganda. As a result of this collusion AIDS is understood as intrinsically and naturally African. "It is as if HIV were a disease of Africanness . . . a viral embodiment of a long legacy of colonial imagery which naturalizes the devastating economic and social effects of European colonialism." Thus, Africans get sick because their societies are sick and their land is sick. Against a picture of its political, economic, social and cultural unviability, Africa is subjected to an unavoidable act of nature, AIDS, which emerges from the primordial nought and is visited upon a passive ever-suffering mass.

**An Inexplicable Medical Disaster?**

The truth of AIDS does lie somewhere amongst Hooper's images of social, cultural, political and economic chaos and upheaval - war, political turmoil and corruption, run-down health facilities, the onset of modernity, large-scale population movement and so on - and a deepening and broadening of context coupled with a reduction in the amount of recycled colonial rhetoric in his text would move him from a form of understanding of disease in Africa, as innate, that dates from colonial times, to an understanding whereby the roots of disease and illness are also seen to lie in systems of production and social reproduction, exploitation, political corruption and mismanagement, poverty and the exercise of global political and economic power. The causal chain would then be traced back beyond African 'chaos' and 'miasma' to include wider social,

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Institute of Mind and Behavior). I agree with the anti-simplicity and anti-dogma thrust of his argument. However, his template for understanding the 'Third World' in *The Slow Plague* is, as I hope I have shown, also limited, constrained, and dangerous in its connotations.

economic and political causes of ill-health. In this light, the text on the cover of *Slim* - "The dramatic story of a journalist working in the heart of Africa who is caught up in the most terrifying and inexplicable medical disaster of our time" — is exposed as sensationalism. An AIDS epidemic in Africa is hardly "inexplicable" if considered in the context of colonialism, decades of economic exploitation, long-running guerilla wars, internal political corruption and mismanagement, large-scale population movements and so on.

Having analysed *Slim* as representation, it is important to touch down from this discursive realm and speculate on the likely effects of the portrayal of AIDS in Uganda in the book. For Hooper made a determined attempt to bring the story to our attention. As a result, money was earned to combat the illness in Uganda and, perhaps indirectly, others devoted time and money, newly aware of the problems in that country. Readers of the book and of the wider media discourse on 'AIDS in Africa' may also have altered their own sexual behaviour as a result of learning that AIDS was not just a disease confined to the four 'Hs'. The representations may thus have saved lives, here and in Africa. These positive points must, however, be balanced with the book's negative features, which are to be found on the symbolic and ideological level. Much of Hooper's imagery draws on and reinforces, perhaps inadvertently but methodically nevertheless, dangerous and derogatory elements of colonial discourse. His limited spatial and historical context colludes with these elements to distance the Western reader from events in Uganda. Such a positioning may provoke feelings of hopelessness in the reader. This distancing is further compounded by Hooper's choice of literary form. His narrative approach to reality carries the implied promise of a dramatic arc: the story will, like all stories, unfold and resolve. Spurr argues that this mode positions the audience as passive consumers, appreciative of the unfurling storyline, and the likely

69 *Slim*, front cover.

70 Hooper would no doubt counter these conclusions strongly, arguing, as in his reply to the criticisms of Watney, that readings of his book that lay stress upon its uncomfortable colonial echoes impose a meaning and intention upon his words that he himself does not share and, in fact, actively detests. He is adamant and convincing in arguing his love and concern for Uganda, and avoids patronisation in doing so. However, he is writing within a loaded and explosive discursive nexus and, at times, does not seem sufficiently reflexive enough to escape the literary pull of 'Africa', the colonial imaginary. This usage is not necessarily intentional but it is, perhaps, indicative of the way so much of this imagery is almost taken for granted and seen as neutral common knowledge in the West, when it is, in fact, under closer examination positively bristling with derogatory connotations and value-laden implications. Interview with Ed Hooper, 16/2/94.
effect when the narrative centres on 'AIDS in Africa' is to further distance and dislocate the reader from complicity in the text and dampen any desire to intervene or act. The situation will play itself out without the intervention of readers, leaving them free to appreciate the Third World victim aesthetics on display. The changed or reinforced attitudes resulting from the workings of the text on a symbolic and ideological level are, however, far less tangible than the possible positive effects outlined above. These attitudes are capable of manifesting themselves as very real effects too; for example, as already discussed, allowing Africa to be positioned and used as human agar plate. But the positive/negative balance of the text? Impossible to say. It is more important to unpick, learn from and intervene in its often dangerous and offensive rhetorical and representational strategies and tactics.

71 Slim, p.45.
Diseconomies of Production: the literal construction of *Slim*

**Commodifying**

Critiques of representations of 'AIDS in Africa', like the one above, rarely consider the context from which representations emerge, and this lack is a central weakness of much of the work on the 'AIDS in Africa' as covered in the Western media. However, *Slim* provides a first person account of the construction of 'facts' and 'knowledge' about, and representations of, AIDS in Uganda, and it yields a considerable amount of information on the mechanics of the same discourse of which it forms a part. I therefore intend to revisit the text and re-examine it for the details it provides about the conditions that give rise to and facilitate Hooper's representations in *Slim*, in his photographs and stories, and other Western media representations that arise from the same geographical area and feed into the same discursive moment. This revisitation allows these representations to be situated and embodied within a very real economy of production.

The news and, more generally, representations of 'AIDS in Africa' emerge from a complex web of factors stemming from the interaction between reporter and source - generally, in this discourse, a European or North American white male with considerable infrastructural support meeting the urbanised African 'poor'. The journalist is therefore enmeshed in an interaction criss-crossed by cultural and ethnic differences, mis/interpretation and power imbalances, and there is rarely reflection on these complex conditions of access. The mechanics of construction of this discourse are thus centrally rooted in a particular diseconomy - of capital, access, movement, and perception - and a particular set of asymmetrical relations of power, since control over the telling of the story, and any financial or personal benefit that arises from this telling, rest heavily on the journalist's side of the interaction. These diseconomies and asymmetries are the subject of the second part of my discussion of *Slim*. 

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However, though 'Africans' are, I believe, subject to these diseconomies and asymmetries, they are not merely passive, silent subjects of the 'AIDS in Africa' discourse. In *Slim*, native Ugandans make many attempts to shape its form, and they enter the discourse, it seems, because it offers hope they will be heard, even in a distorted fashion, at a global level. However, as the book also shows, Ugandans enter this discourse on incredibly unequal personal terms. Thus, though this discourse arises out of an interaction, the balance of economic and social power is heavily, but not totally, stacked on the journalist's side. Internationally, Ugandan voices will perhaps be seen as unreliable or 'biased'. As Haraway argues, it is only those with social power - like scientists and journalists - who can be seen as objective! And, of course, Africa does not possess the economic and media power to make a significantly loud impact upon the global 'AIDS in Africa' discourse itself. Locally, as Ugandans speak to Hooper, he is in the position of control. He sets the language for the interaction and ultimately decides how the individual will appear in his representations, if at all. He states "in most cases the protagonists of *Slim* speak with their own voices, as transcribed from the sixty hours of recordings which I made", but he ignores the fact that asymmetries of power structure these encounters.\[73\]

Many examples of resistance to Hooper's work can also be noted in *Slim*, including: African media attacks upon the Western press over their coverage of 'AIDS in Africa', which Hooper reads and records; looks and expressions which make him uncomfortable as he goes about his work; comments about his exploitative and domineering movements; and shouts across a room - Hooper is berated with the call "Look at Moneyman" as he enters a brothel to carry out an interview.\[74\] Hooper does not reflect on these apparent resistances, or even appear to notice some of them - largely because he is, indeed, "Moneyman", and therefore able to wield a considerable amount of social and economic power in order to force through or disregard resistance. Until, of course, he is thrown out of Uganda by the authorities! The Ugandan government holds final sway over Hooper but until his expulsion he seems able to move fairly freely around the country, although he is not always able to gain access to government officials. He is also able to file reports as he

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73 *Slim*, p.xv.
74 Ibid., p.313.
would wish, without too many constraints, either externally or internally imposed. But journalistic 'truth' does emerge from a complex and deeply political web and Hooper is, of course, under certain systemic pressures to say only so much or to frame his stories in particular ways in order to be heard. I, however, concentrate on the tangible mechanics of discourse construction here but recognise the intangible complexity that lies beyond the boundaries of Slim. I am dealing with a very specific discursive moment and as the evidence I cite from Slim and the media representations included in the next chapter show, the balance of power, but not all power, does seem to lie with Hooper and his fellow journalists.75

Thus, while asymmetrical relations of power are inherent to the 'AIDS in Africa' discourse and underpin its narration, they are rarely reflected upon in the stories themselves. In Slim, there is very little discussion of colonialism, neo-colonialism or the economic imbalances that would have provided the context for Hooper's presence in Uganda, his ability to move freely around the country and to see, photograph and question officials, people with AIDS and the general public. These asymmetries are also excluded from Slim and the media representations by the intertwining sets of rhetoric predominantly used to tell the 'AIDS in Africa' story. Colonial rhetoric disguises its aggressive, dominatory intentions and often eliminates or distances the colonial agent through its literary form. Journalistic rhetoric, too, performs a similar function. "The standard journalistic forms do not easily permit reflection on the conditions - technological, economic, historical - that make reporting possible."76 Advantage is inherent in the reporter's position and can be read in his/her mobile presence in Africa. They have gained relatively easy access to the 'isolated' area and will, usually, leave with the same ease. However, this easy and affective presence is erased when journalists position themselves in their stories as a passive observing eye, neither affecting the events they observe nor implicated in them in any way at all. Lack of reflexivity therefore becomes key in this story about story tellers. This lack becomes all the more ridiculous, but

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75 This is not always the case. See, for example, David Lamb's book The Africans written after he returned from a four-year spell as that continent's correspondent for the Los Angeles Times. He is able to write much more freely, and politically, without worrying about having his journalist's visa revoked. Lamb, D. 1989: The Africans (Mandarin: London).
dangerous, considering the evidence contained in Slim pointing to the intrinsically situated nature of all representations.

As a result of this rhetorical effacement of presence and the concomitant diseconomies and asymmetries that both enable presence and allow its subsequent effacement in the representations that emerge, information about the mechanics of discourse construction can only be glimpsed in the parts of Slim where Hooper lets down his journalistic guard and personally reflects on his position in Uganda. This section seeks to assemble these 'glimpses' in order to better situate the representations forming the 'AIDS in Africa' media discourse and construct a more realistic and detailed picture of the context from which such representations emerge. In the light of this context, the contradictions in the journalistic rhetoric used to convey these representations become stark.

The first, and perhaps the key, diseconomy in the production of the media discourse on 'AIDS in Africa' is the simple fact that the stories and photographs generated are commodities for consumption. Those whose lives and bodies form these representations may gain, eventually, from them; for example, if raised awareness of the problem of AIDS leads to aid being sent by the readers of the stories, or if they lobby their own politicians having been piqued to action by the media reports. The above sentence is, however, full of 'ifs' and 'mays'. In contrast, tangible and definite financial and personal gain will accrue to the journalist or photographer who constructs the representations and to their media organisation who will sell newspapers on the back of the 'AIDS in Africa' story. And yet, all traces of this gain are effaced in the final media representations themselves.

The capital and personal gains from these stories, and the ethical questions involved therein, are not reflected upon in the media discourse, where the construction of representation is more often couched in a questing and crusading rhetoric than any mention of profit or exploitation. In Slim, Hooper frames his journalism as helping 'the common man', and this is an undoubted offshoot sometimes, but he himself also gets money and recognition from the misfortunes of others. These less altruistic motivations can be glimpsed in the book. For example, in passing, there is an
admission of the central nature of 'AIDS in Africa' stories and photographs as commodities when
Hooper teams up with a news photographer to travel around an area in Uganda supposedly worst
hit by Slim. Hooper declares: "because Paul wanted to build up his stockpile of AIDS photos, we
spent the rest of the day calling in at villages along the road back to Masaka, and then following
directions to the nearest Slim household." These photographs were thus commodities
appropriated from that area. They will lead to financial gain for the photographer, but there is no
guarantee of any return at all for the people whose images appear in them.78

This appropriation of photographs is a local example of wider asymmetries of power and
imbalances in systems of 'knowing' about 'AIDS in Africa'. How we, Western readers, know
what we do about the situation in Africa is based centrally on appropriation - of blood, quotes,
photographs and statistics. We are fortunate since we reside on the powerful side of the
imbalance, the side where economic, media and scientific capital and resources largely rest and
thus the side with the power to dictate the patterns and methods of 'knowing' about and
representing AIDS. This appropriation underpins Slim, and it has been noticed in Uganda and
eloquenty relayed to Hooper. He visits the Rakai district administrator who laments that "a
number of Ugandan and foreign specialists have called into this district and taken blood samples.
But that is the end of it. They do not come back to us with results. Personally I see us as being
used as a source for experiments in the developed world."79 Later, he goes to visit a much
interviewed Ugandan nurse, Sister Nellie Carvalho, who is specialising in the treatment of people
with AIDS. She states that "many journalists had come to fill their notebooks, but few had helped
them in real terms with the crisis they were facing."80

77 Slim, p.151.
78 I need to add that I gain on the back of these media representations of 'AIDS in Africa' too, and therefore,
indirectly, upon the people appearing within them - hopefully a qualification. The above argument therefore applies
equally in the social sciences and science too. The balance for each of us - myself, Hooper and the media in general -
when an attempt to represent 'AIDS in Africa' swings from altruistic assistance to exploitation, is impossible to
determine. It is perhaps evident from the main text, however, where I feel that the balance lies for the media in
general - on the side of exploitation - and I also take issue with the effacement of the commodified nature of the
representations appearing in the press. Hooper's case is far more complex since he is, at least, frank and open about
the gains he can expect from the representations he produces. It is for my readers to judge me.
79 Slim, p.22.
80 Ibid., p.188.
Other journalistic motivations, aside from the financial, are evident elsewhere in the text:

"Early in 1985, I left for Sudan. As chance would have it, my timing was good, for within the next two months, President Nimeiri was ousted in a bloodless coup after sixteen years in power, and shortly afterwards the terrible sub-Saharan famine became, to most people's surprise, perhaps the major news story of 1985. I got some Guardian front pages, I placed stories in several other magazines and newspapers, and the BBC took me on as their (unsalaried) stringer in Khartoum."81

The "terrible" famine is thus directly, perhaps accidentally, but honestly, equated with front pages and a better job. Similarly: "The next four weeks were hectic: there were so many good topics for articles and broadcasts."82 These "good topics" include the so-called "monkey boy of Naguru" who turns out, disappointingly for Hooper, to be "mentally retarded, not raised by apes", and a violent guerilla liberation of the town of Juba in Sudan. "Good" for whom is the obvious question to ask here!83

Moving

Representations of 'AIDS in Africa' thus emerge within a context of commodification and possible exploitation. This large scale economic imbalance is played out on a local level by the relative ease with which the journalist is able to gain access to the area of the story, their ability to move around the country, and the manner in which they are apparently able to command time, space, people and resources in their search for news, often for little financial remuneration for those so commanded. Just as the power to tell the 'AIDS in Africa' story largely resides with a particular set of organisations and countries, so the balance of power to move and see rests with the journalist. These conditions of access mark an exclusion from the reality of those living with AIDS or in general poverty in Uganda, and they lead to a very particular telling of the story, but one presented as the truth of the situation. However, a whole host of economic resources and exploitative

81 Ibid., p.10.
82 Ibid., p.27.
mechanisms have been brought in to play for the journalist simply to arrive on the scene and perceive the events described - only then for this presence and these conditions of access to be immediately effaced in the telling of the story. Hooper's choice of literary format grants him presence in the text and allows him to document these conditions of access, revealing the frequently imperious and imperial manner in which he goes about his work. He forgets that not everyone shares this belief in the importance of his quest.

For example, on one trip Hooper makes to Kasensero and the surrounding area, he teams up with the French news photographer Roland Neveu and "Joseph, a lanky man from Karamoja in north-eastern Uganda who had become his driver and general factotum on what was intended to be a freewheeling four-day safari through western Uganda."84 The journey proves difficult as the roads are bad - potholes and ruts once more riddle the text - "It looked more like a cart-track than a road, and not surprisingly Joseph, together with his prized Fiat 125, grew exasperated long before the rest of us . . . Joseph became ever more heated and protective of his machine."85 But the two journalists pay no heed and push on for the story. "The ruts were fewer now, but still vicious when met with a full load; after one particularly crunching encounter, Joseph stopped the car and said he was turning back. Collective persuasion had to be used."86 Collective persuasion! Once again, white explorers push Ugandan bearers to their limits in a journey across the country. Joseph stands to gain little from this trip but minor expenses and the possible destruction of his car. For the journalists, the possible personal and financial gain is considerable. That evening they are also able to impose themselves upon the extreme goodwill of another local, who probably still regrets the day they showed up at his house. "By the time we arrived at Nazareth, Joseph had already launched into his speech of celebration and introduction which cunningly obliged the incumbent, Father Eugenio K. Lukwata, to provide us four 'newspaper personalities' with both supper and a bed for the night."87 The next day they are able to persuade the Father to use his own vehicle to take them further in their quest for a story and pictures. And, after one journey down a

84 Slim, p.27.
85 Ibid., p.33.
86 Ibid., p.35.
87 Ibid., p.42.
steep hill, "it was noticeable that the good father was starting to make noises about his engine not unlike Joseph's of the previous day." 88

Infuriatingly, Hooper never seems to reflect on this resistance. He possesses the social power to blindly push on in pursuit of the news. When he finally arrives in Kasensero the quietness of the place frustrates his need for information. "Then Joseph had the splendid idea of calling a village meeting. It took place in the shade of Kasensero's one large tree, and was attended by three or four dozen men and women, not all of whom seemed overjoyed at being summoned away from their normal pursuits." 89 Hooper here actually seems surprised at the lack of joy exhibited at his summons! Here we have one man who has pushed two cars to their limits, gained beds and food for four people and called a village meeting, no doubt leading to loss of work for those summoned. To this disruption and exploitation can be added the similar upsets caused on his other trips round Uganda, including the time given to him in interviews by the many individuals directly involved in the fight against AIDS. 90 A similar amount of disruption was presumably caused by the other journalists chasing the same story. The discourse may have positive effects, as already discussed, but its construction is largely, so far, at the literal expense of its subjects. In these sections of Slim, Uganda and its people seem to be mere props or tools, the stage setting for the narrative drama Hooper is enacting. He possesses the power to orchestrate, command and move; using and exploiting time, space, money and people. His power stems from a variety of sources, including economic, cultural and historical/colonial factors. He also visits these areas as a bearer of hope and perceived journalistic authority. He himself represents a culture with the economic power to alleviate the situation he encounters and his presence offers the chance that this culture - his audience - will hear, learn and respond.

88 Ibid., p.55.
89 Ibid., p.56.
90 Jean William Pape, a leading AIDS researcher in Haiti reports to the Panos Institute, "I have given over 60 interviews to American and other reporters about AIDS in Haiti. It is very time-consuming and exhausting, and takes energy I would like to put into my work. Of all those interviews there are only one or two that recorded what I said, and the context in which I said it, accurately." Sabatier, R. 1988: Blaming Others: Prejudice, Race and Worldwide AIDS (Washington: Panos Institute), p.90.
The examples above largely speak for themselves. Journalists and photographers are patently not passive or non-affective, despite the rhetoric that is used to relay their representations. The context from which the media representations of 'AIDS in Africa' emerge is thus further composed of particular conditions of journalistic access riven with acts of domination, subordination and appropriation in the name of stories which offer their subjects no guarantee of compensatory gain.

**Seeing**

On a global scale, media representations of 'AIDS in Africa' can be situated within an overarching context which sees them as appropriated commodities for consumption, with the financial and personal gain from their construction most likely to accrue to those who produced them. At a medium scale, the further context within which these representations are constructed is a set of journalistic conditions of access to the area supplying the story. These conditions are underpinned by asymmetrical relations of power, which enable the journalist to command space, gain easy access to the area and exert control over people and resources. Then, once the journalist has gained access to the area, they need to see and to look. Reporting begins with looking and visual observation is the essence of the reporter's function as witness. This looking is underpinned by exactly the same asymmetrical relations of power that enabled the journalist to arrive upon the scene, and, as Spurr notes, these unequal relations have been playing themselves out in colonial discourse for centuries. The eye of the writer and its technological extension, the camera, have almost always been able to penetrate the interior spaces of non-European peoples and explore their bodies and faces with relative freedom, impunity and inequality. The exertion of this same diseconomy of power still gives the journalist and photographer an extraordinary degree of access to interiors, bodies, faces and situations.

The journalistic gaze in this discourse is a penetrative, privileged and powerful one and acts to place the reader - often, I feel, uncomfortably - in the same voyeuristic position assumed by the journalist or photographer. The objects of this gaze, those who appear in the representations, are

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gazed upon, but denied the power of the gaze; and spoken to, but denied the power to speak freely.

The representations of 'AIDS in Africa' that emerge therefore do so from a disproportionate economy of sight. Hooper, once again, seems to deem it his journalistic right to gain visual access to the interiors and bodies he then uses in his representations. But the impact of this access is likely to be less tangible than a damaged car or the stolen time that results from his movements around Uganda. Instead, in some of the examples that follow, the disproportionate economy of sight manifests itself as psychological terrorism and crass invasion of privacy. This invasion makes an absolute mockery of the effacement of journalistic presence that then occurs as the representations are constructed for publication in the media.

**The AIDS 'safari'

I have already discussed some of Hooper's exploitative movements on his trips to Rakai, Kasensero and Kyebe. The above 1987 trip to these areas made with Roland Neveu turns out to be a key moment for the 'AIDS in Africa' media discourse, since it generates several stories and photos of people with Slim that were then used and shown widely in Europe and North America. These stories and images then led to many other journalists travelling to the area in the following months to produce similar stories - 'AIDS in Africa' and the supposed heterosexual nature of the epidemic had become news. In *Slim*, Hooper documents this trip in detail and describes both his movements and the moments where he and Neveu capture photographic images and find stories. This section of the book thus becomes key for understanding and contextualising the media discourse, since formative representations can be traced through from their germination in Uganda and in the interaction between Hooper, Neveu and their subjects through to their appearance on the printed page.

Hooper commonly frames these trips as "safaris" and this is also a theme picked up by a Ugandan companion on a previous search for stories when Hooper is about to depart on his first trip into Rakai to check the Slim story. He grins, nervously and with a feeling of adventure. His local journalist companion then declares, astutely and perhaps ironically, "I see Eddie is very happy on
Later, as Hooper travels with Neveu on the key trip to Kyebe and Kasensero, he himself uses the same trope in a highly reflexive manner. As he arrives in Kyebe with Neveu he states, "I caught myself wondering how many of these people had Slim. Surely the woman over there: that's more than just high cheekbones, I thought. Then I realised that we were staring outwards like a coachload of tourists on safari." Here Hooper has exposed the diseconomies that underpin his presence in Kyebe and the construction of the 'AIDS in Africa' media discourse. A 'safari' is an extremely good simile given the ease of access and departure he enjoys, the disproportionate economy of sight which allows him to survey, gaze and photograph, and the giddy and excited yearning he exhibits as he nears the area where he might see a person with AIDS. Sadly, this is as far as his reflection goes. Hooper quickly resumes his hunt, with this one moment of self-awareness forgotten and all notions of reflexivity gone as he then resorts to language echoing that of a colonial hunter stalking his prey.

"We had still not encountered a single person who actually had Slim disease. And when we eventually did, it was almost by accident. It was late afternoon, and we were on our way to drop John back in Sanje, when the village grapevine led us to the house of Joseph Kasolo. Joseph, an emaciated man in his mid-thirties, had been very sick for about four months with fever and diarrhoea . . . he told us in a quiet, dignified voice that he had been to the local hospital, where he had been told that he had typhoid. 'That's what I believe. I don't have any evidence to show that I'm suffering from anything else.' [except, perhaps, the fact that he now has two European journalists standing in his hut!] . . . Joseph Kasolo was typical of many of the apparent Slim patients we encountered. There was no absolute medical proof that he had AIDS, rather than typhoid or some other disease . . . the only real evidence was that offered by common sense, by our own laymen's eyes."

Hooper and Neveu, in their quest for stories and photos, here gain access to the interior and body of a Uganda villager. Their gaze then labels the man terminally ill. Their presence in this hut, as

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92 Slim, p.19.
93 Ibid., p.36.
94 Ibid., p.31.
they take photographs and ask questions, is a sign of an inordinate asymmetry of power. After their earlier reflection upon the disproportionate economy of sight they are allowed, here they employ it to the full in order to obtain a representation of 'AIDS [or typhoid] in Africa'. The two men then move on, searching for more stories and images. Four important and extraordinary moments follow, where the disproportionate economy of sight manifests itself again, producing several representations which later appear widely in the Western media. These representations germinate within the broad context of commodification, the drive for personal and financial gain, and the unequal conditions of access and exploitation which brought Hooper and Neveu to this area. Hooper then provides, again unreflexively, an incredible amount of information about the very specific context and economy of sight within which each representation emerges. Little explanation is required for each moment - they are shockingly self-explanatory in the context they provide for the media discourse. However, for each situation I like to imagine the reverse possibility, so, for example, when Hooper gatecrashes a Ugandan funeral, I imagine a car-load of Ugandan journalists arriving uninvited at an English funeral. This exposes the ludicrous but dangerous asymmetries of power that operate and underpin this media discourse, and the invasions of privacy manifested in the name of the journalistic quest.

1. A Widow and a Funeral

After visiting the man above, Hooper and Neveu move on to Kyebe. When they arrive they find the town quiet. They discover that most people are attending the funeral of an important official, believed to have died of Slim and so, quickly, they get someone to lead them there. Upon arrival they start to take photographs of the crowd and interview bystanders - the man has just been buried. Then Hooper approaches the grieving widow and commandeers the local Resistance Committee chairman, Joseph Ssebyoto-Lutaya, to help him question her. One of his questions is the amazingly crass: "Perhaps you could ask the widow how she thinks her husband got sick?"95 He also declares, "It is relatively easy for journalists to overstep the boundaries of good taste and be excused on the grounds that they are merely seeking out the truth, and this was probably one

95 Ibid., p.37.
such occasion. Dispensing with any further attempt at discretion, I asked, 'What about the widow? How is she feeling?'"96

Here the two journalists have gained unauthorised access to a private funeral, commandeered people in this quest, interrogated the widow and excused their intrusion by resorting, again, to unreflexive journalistic rhetoric that couches invasion in the name of a search for the Truth, and allows them to move by a completely different set of moral and ethical rules. They are met with astonishing grace and forbearance, because, it seems, they at least offer hope and a chance that these people's problems will be heard at a higher level.

2. Florence

Having visited the funeral, Hooper and Neveu acquire an entourage of curious followers as they search for someone with Slim to interview and photograph. The 'grapevine' suggests they visit the house of Florence Nassaka.

"The caravan - for such it now felt - set off on foot to search out the house of Florence Nassaka . . . If there was a single encounter which was to sum up the whole of our trip to Kyebe, and which was to render Slim the preoccupation it became for me, it was our meeting with Florence Nassaka and her two-month old son, Ssengabi . . . As soon as we emerged from the trees we saw them sitting outside her house in the sunshine. And yet it was a chilling tableau they presented, with Ssengabi, loosely wrapped in a cotton sheet, lying in Florence's lap, her long fingers cradling his head from behind . . . she looked exhausted and shrunken, the skin drawn taut round her skull, and her eyes betraying a deep languor . . . he was pitifully tiny, like a famine victim . . . Nobody could doubt that both mother and son were dying."97

Here, it seems, Hooper and Neveu have found what they are looking for - a powerful and elemental image of suffering which will be both new and shocking to their readers in the West, since the cause of the suffering is believed to be Slim or AIDS, a 'new' disease to hit Africa.

96 Ibid., p.39.
97 Ibid., pp.47-48.
image is also 'appropriate' in that the sufferer is a woman, and makes the required point that AIDS

AIDS can strike both sexes - the 'lesson' to be drawn from the situation in Africa. However, the image,

though 'new', must still make sense to the viewer within the wider context of Africa media

imagery. This scene has been seen many many times before in the media, captured to show the

'human effects' of famine, war or previous epidemic diseases. This example of déja vu means that

AIDS is thus symbolised here as essence of Africa - simply the next woe in a long line of innate

African misfortunes to produce such suffering. Africa, the place, is once again portrayed as scene

of elemental pain, and poignant but hopeless travail. And Slim, the disease, is abstracted from any

meaningful context and individualised in the body of the stereotypical long-suffering African

woman. The image may be trying to teach 'us' a lesson, but it perhaps ultimately fails because of

this abstraction, which merely acts to reinforce stereotypes and prevent an understanding of Slim

which sees it as arising from a particular and specific set of historical and economic circumstances.

I will discuss these issues in more detail in the next chapter when I examine the final media

representations of Florence resulting from this visit. Photographs of Florence appeared in The


variety of ways and placed within the frames of very different stories. Of course, all traces of the

context within which the representation emerged are effaced.

Having turned up on Florence's doorstep with an entourage and realised that this scene provides

them with the meaning they are looking for, the two men need to capture the scene. This raises a
dilemma for Hooper.

"For a reporter or photographer, the recording of sickness and death always presents a
dilemma. Should one treat such subjects as somehow sacred, and therefore unsuitable

for public consumption, or should one simply attempt to depict them as one would any

other topic, with professional detachment and candour? Some months later the

Ugandan government, eager to protect AIDS patients from the glare of media

attentions, adopted a policy that prohibited the photographing of people with AIDS. On

balance, however, I feel that we were right, that day in Kyebe, to use film and tape to
record the brutal realities of Slim; for Florence had agreed, and in the end permission was surely hers to grant or withhold."

This is true, but only in a limited sense. Did Florence know exactly what she was agreeing to? What followed for her was a gruelling ordeal, and her image eventually appeared widely in Europe and North America, making a considerable amount of money for Hooper. He described to me, in detail, the process by which he obtained permission from Florence. This involved asking the village headman to translate for him and meant that Florence and her child, in her weakened state, were confronted with a large crowd, wealthy European strangers, and the most powerful man in the area. This imbalance and intrusion throws a very different light upon the issue of permission. Hooper is well aware of the flaws in this process and the power he wielded that meant permission would, surely, be granted. However, he feels that the use of Florence's image would save lives - in Africa and in the West - and if he could have conveyed this to her she would have granted permission under more acceptable circumstances. Maybe she would have done, and maybe the image did save lives; although I believe its stereotypical nature limits its effectiveness as a warning about the danger AIDS presents to heterosexuals. This, however, is speculation. The truth of the image of Florence is that it was taken in circumstances shot through with diseconomies of power and sight. Real people were affected and probably intimidated and upset by this appropriation. This generational context is effaced by the time the representation appears in the media as commodity.

Having obtained, in highly dubious fashion, Florence's permission to 'shoot', the disproportionate economies of sight and access underpinning and enabling the situation suddenly become manifest in a frightening fashion. The harsh and specific context within which media representations of 'AIDS in Africa' emerge is laid bare in the paragraph which follows. Hooper states:

"Nevertheless, I also know that I participated in something of a media rape. For the next fifteen minutes, barely containing our excitement, Roland and I photographed the mother and child from every angle, with every lens. Cameras clicked and whirred,

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98 Ibid., p.48.
99 Interview with Ed Hooper, 16/2/94.
pausing only for the changing of films. There was the occasional muttered curse when one blocked the other from his desired shot. And when all that was finished, I took over with microphone and tape recorder.)*100

This is the shocking manner in which the media image was obtained - readers are unwitting accomplices to a rape. Hooper had earlier stated that the scene would be recorded with "professional detachment and candour". The hollow nature of such rhetoric and the gap it manages to build between supposed objective absence and horrific affective presence is here exposed in stark fashion. Hooper and Neveu's masculinist gaze, powered by an extreme disproportionate economy of sight, is brought violently to bear in obtaining the media representations, objectifying this woman and visually raping her. All traces of the rape are removed by the time the image appears in the media. Hooper's partial honesty and reflection in this paragraph make him fully conscious of the asymmetries of power which operate and enable him to obtain this representation of 'AIDS in Africa'. He refers, in passing, to two aspects of the real, brutal context within which this representation emerges: personal excitement at the nature of the 'story' and the possible gain that will come from it; and the diseconomies of sight and access that allow him to take these images. However, he is still only reflective up to a certain, limited point; a rapist who merely knows why he is able to rape.

Having captured Florence's image on film, Hooper then attempts to interview her, through an interpreter, but "even speaking, it seemed, tired her."101 This is hardly surprising considering her condition and the ordeal she has just suffered. Again, this very real impact of journalist upon subject makes a mockery of the passive, non-affective rhetorical stance taken in the 'AIDS in Africa' media articles.

"Some minutes later, we took our leave of Florence and her family, Roland and I gave some money, something which I, at least, was not in the habit of doing. On one level it was a simple gesture of assistance to people whom we had met, and who were in a hopeless situation. On another, of course, it was payment to help ease our

100 Slim, p.48.
101 Ibid., p.47.
consciences. And it was certainly something we could afford. As Roland said later, with typical Gallic pragmatism: 'Wow, this is really a big story.'

Hooper once again refers to the asymmetries of power which constantly underpin his presence and ability to represent: this time, his economic dominance. Throughout this section he reflects upon the conditions and imbalances that allow him to capture these images and at times he seems uncomfortable exploiting them. But this is as far as his reflexivity ever seems to go. He does not seem willing to alter his behaviour, merely justifying it with post-hoc excuses, rhetoric and money. The nature of the case traps him in a tension between the supposedly objective nature of his work and the harsh, and in this case exploitative, reality within which his representations are actually generated, forcing reflection upon him. He is, however, able to overcome these moments of self-doubt with the above justifications. Thus, he leaves the scene with a troubled conscience, but goes on to repeat the experience within the next half an hour.

3. Mirina

Five minutes after photographing and interviewing Florence, Hooper and Neveu learn of another funeral about to take place nearby.

"Mirina, a twenty-three-year-old peasant farmer, was laid out on a bed in the front room of the family house; her body was wrapped in a shroud of bark-cloth... Beside her, the women of the house knelt and wept; occasionally one of them would move her head from side to side, and emit a soft keening sound. Roland took a remarkable photo from the foot of the death-bed, showing Mirina's face wrapped in bark-cloth, and that of a young mourner leaning her head resignedly against the bed-frame. There is natural light from a small window above, through which the faces of other young children can be made out. Two months later, this photograph was printed across a quarter-page of The Times of London, with the caption: 'Too young to know, too sick to move: Ugandan children, stricken with AIDS, await their end inside a mud hut, far from...

102 Ibid., p.49.
doctors who could not give them much help anyway.' Sometimes, one wonders how
the picture departments of large newspapers and magazines actually arrive at their
captions."103

This example reveals many of the same mechanics of discourse construction as the previous two
moments when representations of 'AIDS in Africa' emerged. Hooper and Neveu exploit the same
conditions of access and intrusion as when photographing Florence, and, as before, fail to reflect
deeply upon this intrusion. They maintain an imperious right to be present at a private funeral.
The same disproportionate economy of sight allows them to capture an interior and bodily image.
And they are effective again, with Neveu staging the photograph and moving people around in
order to obtain a more powerful picture. Once more, Ugandans become mere props in the process
of obtaining a media representation. I will discuss the photograph later, but its nature as
commodity is exposed by the fact that its meaning is up for semantic grabs once it enters the
marketplace. Ironically, given the caption imposed upon it by The Times, children were the group
least at risk from Slim. Presumably, however, the picture editor thought his or her version of the
'facts' were more dramatic.

4. Beatrice

Hooper and Neveu move on:

"Another short walk, another victim. Beatrice Namuddu, twenty-four years of age,
was the most severely affected of all the sick people we had seen. We were invited into
the small room where she lay on a bed of straw, like an animal. She had been laid there
because of the severe diarrhoea from which she was suffering: in the small, airless
room, the smell was almost overpowering. We took photographs. Her mother came in
and pulled up her blouse, so we could see the skin of her stomach and breasts, covered
with dark blotches, and hanging like a curtain draped loosely between her hips. She
had no more weight to lose; her whole body was trembling. Her neck was swollen,
presumably form oral candidiasis, or thrush, in the wind-pipe - her breath came out in

103 Ibid., p.50.
short gasps. A large part of her right cheek had been eaten away by an ulcer; yellow fluid was oozing down over her jaw-line . . . she followed me with her eyes as I moved around the room. I felt embarrassed . . . Those eyes! . . . The eyes showed . . . what? Not fear - there was no fear there. But there was pain, and there was sadness."104

This final example is perhaps the most disturbing. The two men here exploit to the full their ability to gain an extraordinary degree of access to interiors, and the bodies of women. Their voyeuristic gaze is able to penetrate Beatrice's clothing, with her mother lifting her daughter's blouse out of the way so they are able to photograph her wounds, stomach and breasts. At this point I feel the imbalance in the economy of sight reaches a sickening level. These men should not have been in that house taking those photographs. Then Hooper's gaze is returned by Beatrice and this small act, perhaps of resistance, is enough to cause him to reflect again upon the intrusive and exploitative nature of his presence in these places and situations. He is rightfully embarrassed, but, as before, takes no action and does nothing to modify his behaviour accordingly. His dicomfiture is, I believe, an indication that he is aware of both the extreme imbalance in power that underpins the encounter and the ultimately exploitative nature of his presence in the room. However, he never fully reflects upon the implications of this realisation for his actions and work, and instead salves his conscience with rhetoric, self-justification and, sometimes, money.

Conclusion

These four moments occurred in frighteningly quick succession in the space of a single afternoon. Each one gives the detailed and specific context from which particular media representations of 'AIDS in Africa' emerged, and allows the reader to see behind the journalistic rhetoric of objectivity and passivity within which the final versions are couched. It is evident that these journalists' work depends centrally upon their intrusion into the private space of others.105 In Uganda, Hooper possesses the social power, drawn from a variety of sources, that allows him to

104 Ibid., p.51.
do just this. These acts of intrusion are an extension of his ability to gain access to the areas where the stories originate. But then, because the subject of the journalistic quest is the 'truth' about, and representations of, AIDS - an illness that writes on the body - the evidence that Hooper needs to witness dictates a further application and extension of the social power he possesses in order to look at, photograph and objectify the bodies of Ugandan people with AIDS. More specifically, because 'AIDS in Africa' was deemed to be news in the West because of the supposedly 'unusual' heterosexual nature of the disease on that continent, the evidence Hooper most needs to collect is written on the bodies of women. The nature of the story that Hooper is aiming to tell therefore leads to an uncomfortable neo-colonial stand off, both in the mechanics of discourse construction, with an English man intruding upon and photographing African women, and in the representations that emerge, where stereotypes, of African women as noble elemental sufferers and Africa as site of death and decay, are recycled and reinforced.106

The operation of this power-laden one-sided gaze is thus integral to Hooper's function as journalist and photographer - it enables his representations of 'AIDS in Africa'. He possesses the social power to construct visions from the bodies of others and rhetorically push them as 'objective', the Truth about AIDS. As the above examples show, this process of construction is neither objective nor passive - anything but! Hooper's gaze is situated and specific; penetrative and voyeuristic; violent, affective and intrusive. The result is an extreme disproportionate economy of sight. However, all traces of this diseconomy are effaced in the final media representations of 'AIDS in Africa'.

These examples starkly expose the gap between the journalistic rhetoric of detached, professional objectivity and the actuality of his presence in these four situations. Hooper himself does reflect upon this gap and, at times, he seems well aware of the tension it creates. He is also occasionally

106 "Western journalism is filled with situations where the observer, from an exterior position, views the bodies of the captured, imprisoned, incapacitated, or dead [and photographs them]. In the postcolonial era the dead or dying body has become in itself the visual sign of human reality in the Third World." Spurr, D. 1993: The Rhetoric of Empire: Colonial Discourse in Journalism, Travel Writing, and Imperial Administration (Durham, USA: Duke University Press), p.24. I believe that the stereotypical nature of many of the media representations of 'AIDS in Africa' acts to undermine the function that Hooper intends for them: as a salutary lesson to the world that AIDS can affect anyone. Instead, they act to individualise the disease and both embody and 'other' it within the 'African'.

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uncomfortable wielding the social power that allows him to be doing his job in that place. But, ultimately, he papers over this gap with self-justification and money, pushing on with the same intrusive actions that led him to reflection, and holding to the rhetoric that these actions undermine. He would perhaps say that his representations save lives, and he may well be right. However, there are semiotic flaws in these representations that will limit their life-saving effect. I will discuss this issue in the next chapter. I also believe that the same representations could have been obtained with much more sensitivity and much less intrusion. And, finally, even Hooper has severe doubts about this salvatory rhetorical stance at times.

**Affecting**

So far, in this contextualisation of media representations of 'AIDS in Africa', I have concentrated upon the mechanics of construction of the discourse - specifically, the disproportionate economies of capital, access, movement and perception that underpin and enable the telling of this story. Thus, the representations can be situated and embodied within the context of a very real economy of production. This contextualisation acts to counter the effacements and distanciations that occur in the way that the 'AIDS in Africa' story is predominantly told, in spatial and historical isolation, and in the rhetorics of 'empire' and journalism, with their presence-removing and agency-disguising tendencies, within which the story is couched. There is plenty of further evidence in *Slim* to suggest that, contrary to the isolationist treatment given to 'AIDS in Africa' in both *Slim* itself and many other media representations, journalists, and thus the organisations and nations from which they come, should be an integral part of the story they tell. They are effective, involved and implicated in a number of key ways.

Examples of Hooper's economic exploitation and psychological terrorism have already been noted, thus making a mockery of any rhetorical claims to passivity or objectivity on the part of the journalist. *Slim* provides other examples of similar affective, and probably typical, actions by Hooper: actions that should have a major and direct impact on the story journalists tell about 'AIDS

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107 Interview with Ed Hooper, 16/2/94.
in Africa', but which are expelled from this discourse to remain dormant in the far margins of Hooper's literary journalism and completely effaced in the Western media representations of the time.

I described earlier how information-hungry Hooper and Neveu call a town meeting when they visit Kasensero, summoning people reluctantly from work. At the end of the meeting, their interpreter declares:

"Though you are not doctors, they are waiting for your advice, if you can provide.' . . . God! How journalists hate it when the tables are turned! I knew that I was not qualified to speak. And yet - here were people who had answered my questions, and who were now asking for advice because they believed, probably rightly, that I was better informed than they. Eventually, I gave a short lecture that identified sexual contact and shared needles as the main methods of transmission, and recommended the obvious preventative measures. Roland suddenly looked up from his camera, and added a few encouraging words - 'Some of the best chemists and best doctors in the world are really working very hard on this disease, to try to find some treatment.'" 108

Hooper and Neveu are unable to maintain their aloof, acquisitive stance and are drawn into the webs of information and meaning that surround 'AIDS' in all countries. Information thus does not just pass from source to journalist, and Shoumatoff's reported conversation with smugglers in the same area of Uganda indicate that he too was unable to remain passive when placed in the same situation: "'When are you going to bring the medicine?' one of them asks. 'We are dying.' "There is no medicine yet,' I say, 'but we are working on it.'" 109

Hooper returns to Kasensero several months later to conduct interviews with the general public, in order to guage levels of 'AIDS' awareness in the town. He asks a fisherman:

"'But are there any people who have come and talked to the people of Kasensero, and explained how it is possible to catch Slim?' 'Yes, very many times, they try to do so .

108 Slim, p.57.
But most times they are news agencies, they are not doctors.' . . . It sounded as if Roland and I were not the only ones to have become active participants in the story, rather than mere observers . . . 'But John, if you know that, and that Slim has killed so many people already, then why are you sharing a woman with other men?' John sighed briefly . . . 'I don't have anything to do, really. I have to sleep with my girl if she comes.' But you told me you fear that you may already be infected.' There was a long pause. 'I feel fine. And I'm suspecting the scientists and doctors to get some treatments, according to the journalists. The journalists say so. So . . . why should I fear much?' His voice trailed off, and I remembered Roland's brief message to the village meeting [which they called] six months earlier. How ironical that perhaps his few words of hope had, through repetition, attained the status of scientific wisdom, and been used to maintain the sexual status quo."

Hooper does not seem to realise the full significance of this conversation. He is not a passive observer of the 'AIDS in Africa' story. He is very much an active participant, deeply implicated in the actuality of the unfolding narrative via his actions and words. Yet this is neither reflected in the media discourse, nor reflected upon. An evangelical spreading of false, or at least premature, hope in Western medical science may get them off the hook in the short term and make people feel better, but it will not promote, and may actively and dangerously discourage, the changes in sexual behaviour necessary to prevent the spread of HIV.

Then, at the end of their 'AIDS safari', Hooper and Neveu attend a church service in Kasensero. A local official addresses them directly in front of the crowd:

"So gentlemen, as pressmen, as news reporters, try to report whatever you have seen to the world community, especially to the international bodies such as World Health Organisation, UNICEF and so forth. I think through this, the rest of the people might survive. Thank you very much for the great work you have done, and we wish you a good journey back.' Everyone applauded, for Joseph was great at hearts and minds,

110 Slim, pp.141-142.
and for a few moments we felt like conquering heroes. The sad truth, however, was that our visit would actually have very little direct effect on the community, save for spawning a small service industry catering for the needs of visiting journalists. Whether our reports, and those that followed, had any longer-term effects on the international response to Uganda's AIDS problem, we have no way of knowing. It is pleasant, though undeniably arrogant, to imagine that this might be the case.\textsuperscript{111}

The hope held by the Ugandans who chose to help Hooper on his safari is evident here, and this seems to be one of the reasons why his sometimes exploitative, dominatory and intrusive behaviour is tolerated. He is perhaps perceived as representing a direct connection with the social and economic power to, if not solve, then at least alleviate the Slim problem. The above paragraph raises two key issues.

First, Hooper again demonstrates partial reflection upon his own position in Kasensero. He frequently doubts his own rhetoric concerning the reasons for, impact of, and benefits likely to accrue from his journalistic quest. This turmoil and tension weave themselves right through his book. The same pattern of Ugandan hope triggering journalistic doubts occur when Hooper visits Kyebe. He speaks to a Moslem elder who asks why he is there and Hooper responds with his usual rhetoric, stating that he is trying to draw attention to the problem of Slim in that area. The elder "was pleased with the answers. Kyebe, he said, needed help - and our visit would let the world know what was happening here. I started to explain that stories and pictures in the Western press did not necessarily translate into medical assistance or relief aid - but then realised that I was reneging on my responsibilities as a guest, for my straightforward reply was not what anybody wanted to hear. Sometimes in a desperate situation it is better to be offered hope, even if it is empty hope."\textsuperscript{112} Hooper is right; the situation within which he is working is complicated and riven with ambiguities and areas of doubt. However, he never reflects fully on the possibility he raises here: that the hope he offers is empty.

\textsuperscript{111} Ibid., p.59.
\textsuperscript{112} Ibid., p.52.
And secondly, Hooper hints at the "small service industry" needed to cater for visiting journalists. This "industry" is therefore one of the few tangible effects springing from the discourse, admittedly bringing in foreign exchange to Uganda, but, as I hope I have shown, under extremely dubious and possibly exploitative circumstances. The existence of this "industry" is, of course, effaced in the final media representations of 'AIDS in Africa' when the journalist goes 'absent' from the text and becomes a passive, invisible eye, observing events without impacting upon them. I shall consider one of the key elements of this "service industry" in a moment. Journalists poured in to Uganda after Hooper and Neveu's representations from their 'AIDS safari' appeared in Europe and North America. Hooper describes the media feeding-frenzy that arose: "with the New York Times article, and Roland's Kyebe video which had just appeared on American network TV, the 'AIDS villages of Uganda' had suddenly become a much sought-after story". Then "over the next few months the 'AIDS villages of Uganda' continued to fascinate the international media; reporters and photographers from many of the world's leading journals and broadcasting stations descended on Uganda looking for powerful or sensational copy . . . At least some of them arrived with the apparent expectation that Kampala's streets would be lined with the Belsen-like faces of the walking wounded; disappointed there, they popped Sterotabs in their water bottles, and set out for the banana groves." This feeding-frenzy is likely to have resulted in the worrying prospect of events in Slim being enacted many times over - the same asymmetries of power and diseconomies of capital, access, perception and production made manifest; many more Florences, Beatrices, and Mirinas captured for representations with their images becoming commodities. Even more worrying are my suspicions that Ed Hooper is one of the more sensitive, concerned and reflexive journalists reporting from Uganda at that time. He is committed to acquiring an in-depth knowledge of Slim, and this perhaps contrasts markedly with some of the hit-and-run journalists

113 Ibid., p.110.
114 Ibid., p.117.
115 Alex Shoumatoff is both a better known journalist and, arguably, a much better writer than Ed Hooper. He undertakes an almost identical journey to Hooper in search of the 'source' of 'AIDS'! Approximately a year after the trips Hooper documents in Slim, Shoumatoff retraces his footsteps looking for material for his own piece of literary journalism. They visit the same villages, bars, and hotels, hit the same potholes, conduct interviews with the same few individuals, and rely on the same rhetoric, images and representations. They therefore both build and reinforce a very similar imaginative geography of AIDS and Africa, and contribute to the continued mythologisation of Africa as the locus classicus of disease and social, cultural and political disorder. Shoumatoff, A. 1988: 'In Search of the Source of AIDS' in African Madness (New York: Knopf) and Vanity Fair, vol 51(7), July 1988.
who arrived after the 'AIDS villages of Uganda' story had broken and came already knowing what
form their representations of the situation would take. And yet, as Slim demonstrates, even
Hooper commits many exploitative and intrusive acts on his quest. Slim is not, therefore, a lone
story. Its narrative can be multiplied many times over, thoroughly entangling all readers of the
story of 'AIDS in Africa' in the actuality of the situation in Africa, through words, meanings,
history and physical interaction, at the same time as they are distanced through the rhetorical and
narrative strategies of the representations themselves.

The Journalists' "Service Industry"

Hooper documents his dealings with these other journalists in Uganda, and also reveals much
about life as part of a sizable and predominantly male European and North American ex-pat
community in Africa, composed largely of businessmen, travellers, journalists, soldiers, embassy
staff, diplomats and aid workers. From these sections of the book falls evidence which suggests
that a spatially and historically isolationist telling of the 'AIDS in Africa' story is hypocrisy of the
highest order. Such evidence mocks the effacement and distantiaton of journalistic and, more
broadly, 'Western' presence in sections of Slim and the media discourse it both describes and
feeds into. To borrow from Gould: this evidence shows that "we" are part of the same sexual
backcloth as "Ugandans" and also that ex-pat presence in Uganda has a significant and
predominantly exploitative impact on the structure of the backcloth in that country! A "service
industry" is supported, exploited and regularly used by the ex-pat community.116

While in Uganda, Hooper is a regular user of this "service industry". He is extremely
promiscuous when resident there and frank about this sexual activity in Slim. This promiscuity led
Hooper to have eight HIV tests during his time working in Africa. He eventually meets his future
wife, Sue, a native-Ugandan, in Buffalo Bill's, a pick-up bar and restaurant in Nairobi frequented
by many ex-pats, journalists and sex-workers.

116 I use the term "service industry" ironically.
This sexual and economic interaction, in which Hooper plays full part, completely undermines the isolationist treatment of the story in the press and in the sections of *Slim* where Hooper adopts journalistic rhetoric to quest for the 'truth' about AIDS. In this, the final part of my analysis of *Slim*, I wish to focus in more detail on this sexual/economic interaction. Such a focus sees a number of the themes already discussed coalesce together: the overt and offensive masculinism of Hooper's introduction to Uganda resurfaces to shape the representations and imaginative geographies that emerge when he discusses his sexual activity; distinct asymmetries of power underpin his conditions of sexual access; and finally, as before, Hooper never fully reflects upon these asymmetries.

Hooper set up his narrative within the context of a love affair, between him and a 'knowing' and dangerous feminized Uganda. This placing of the balance of agency, control and power with the 'other' is repeated on a small-scale when he describes the advent of his promiscuity upon arrival in Africa:

"I... had compensated for ten years' worth of public-school inhibitions with a late spring sowing of wild oats when I returned to East Africa in 1980. It was then that I spent my first night with an African woman... And that one night was enough to breach the wall of the dam. Repressions were discarded like underwear... I had discovered the further joys of being with African women. I found out that generally they were uninhibited, unsaddled with Western hang-ups and extremely sexy"117

This, like his earlier positioning of Uganda as female, is a common trope; with the white, European male morally undone upon arrival in a seductive Africa. He yields to its sexual pull, to elemental forces of a wild human nature. Hooper also reinforces stereotypes of the 'African' woman, as overtly sexual, natural and more given to the expression of passion and desire. This re-use and reinforcing of stereotypes, then, can be added to the damage, documented earlier, that the book inflicts on a symbolic and ideological level. The rhetoric chosen to convey the above information once more places agency and control within Africa, and with "the African woman" in

117 *Slim*, p69.
particular. In this light, Hooper is merely acting naturally, responding to an irresistible siren's pull. Whereas, it could more accurately be argued that Hooper has simply arrived in a place where the economic situation is such that he is able to exploit his social and economic power for sexual gain, like colonialists before him and like many of his fellow ex-pats.

A picture of the "service industry" that forms and exists within this economic imbalance can be built up from the glimpses of it provided in Slim. The actuality of the situation seems to be a long way from Hooper's literary tales of seduction and reciprocity, and he himself proves to be a highly active part of an unequal economic system, which in places is able to manifest itself as an informal apartheid. "There were several watering-holes where the expatriate community was wont to congregate. On Sundays, a large percentage would descend on one or other of the rival sailing clubs at Entebbe and Kaxi, on Lake Victoria. These were essentially whites-only establishments, though a de facto agreement obtained whereby African wives or girlfriends could also attend, if appropriate." Hooper often visits one particular "watering-hole" - Buffalo Bill's. As noted, it crops up in several of the media representations of 'AIDS in Africa, often, ironically, as evidence of the indigenous promiscuity and debauchery of African' social life. Hooper describes the bar as follows. "I decided to take a taxi up to 'Buffalo Bill's Wild West Bar and Eating House'. Buffalo Bill's, or BB's for short, is an establishment famous for its succulent and attractively-priced T-bone steaks, and for its malayas, or hookers, who are said by many of the male patrons to display similar characteristics." Hooper glibly conflates women and meat and commodifies both. He betrays the economic imbalance that underpins the bar's trade - expats go to Buffalo Bill's for cheap sex.

118 I am aware that my critique enters dangerous ground as it moves to consider the sex industry existing alongside the expat community in Africa. My access to this situation occurs through the limited and specific 'keyhole' offered by Slim! I therefore risk voyeurism too. As I shall show, Hooper reflects only partially upon the social and economic imbalances that enable his promiscuity while in Africa. In analysing the situation I run the risk of presenting the women involved as passive and silent 'victims', despite my well-intentioned aim being to redress some of the imbalances that underpin the sex industry in Uganda and Kenya. For this reason and because of this risk, I acknowledge the agency, voices and motivations of these women as a significant aporia in my account and I choose to concentrate solely upon an analysis of Hooper's representations and position in Uganda, rather than attempt to re-position the women he meets within this analysis.
119 Slim, p.119.
120 Ibid., p.63.
Hooper becomes marginally more reflexive later as he further fills out the picture of the economic and social relations that surround and enable his promiscuity, as European in Uganda. He remarks that women "for what reasons, I did not dare to enquire - were readily available. Armed with these new discoveries, I felt myself quite the lady-killer, and, over the next three years I had a succession of lovers and girlfriends. Many were one-night stands . . . But I was educated, and entertained, and amazed, by nearly every one."121 "For several weeks I thought nothing of spending a twelve-hour day following the NRA to the front, returning to write and file my copy, and then retiring to bed with someone who had been a stranger an hour before"122 He is, for some of his time in Uganda, recklessly promiscuous. After his second HIV test "I assured my father that I'd be careful, and then three hours later picked up another girl in the hotel bar."123

In detailing his sexual relations above, Hooper sustains a notion of complete reciprocity but, as before when he photographed the three women for his stories, his words betray a tension. He partially reflects upon his conditions of access and position in Uganda in relation to the events unfolding around him, but does not engage in a full confrontation with the implications of this reflection - he "dare" not enquire why women are "readily available" to him, although, one suspects, deep down he probably knows! Later, in other sections of the book he fills out the economics that underpin his sexual relations: "Sometimes, in the morning, I would give some money (for the bus, the baby, the hair-do, whatever); sometimes I would not. If the lack of payment was resented, the woman concerned normally had too much pride, or dignity, to mention the fact - but would refuse further invitations to my house or bed."124 "During the night I woke a number of times, and then would wake her also . . . Come the morning, I felt indifferent and empty; I just didn't want to be with her anymore. I gave her some money and waited for her to

121 Slim, p.69.
122 Ibid., p.62. How unusual is Hooper's case? One journalist reporting on AIDS bumps into another - "At my hotel in Nairobi I had met a foreign correspondent for a North American daily. He was an ambitious, smart fellow who was particularly interested in the subject of AIDS, because, he explained in the bar, he had slept with women all over the world. "But I'm cutting down on the fucking now, and trying just to stick to blow jobs," he said." Conover T. 1993: 'Trucking through the AIDS Belt' in New Yorker 16/8/93.
123 Ibid., p.62.
124 Ibid., p.69.
leave."\textsuperscript{125} But, throughout the course of *Slim*, he never explicitly connects his economic power and these economic relations to the "availability" of sexual relations and his promiscuity.

In the following paragraph, Hooper states that it is "the economic imperative that render[s] African women 'available' to white men," but he then seeks to remove and absolve himself from these exploitative relations with a series of self-justifications. He is, he argues, different! This ultimate lack of reflexivity seems to be partially provoked by the tensions and complexity added to Hooper's personal situation when he begins a serious relationship with a woman he meets in Buffalo Bill's. He eventually marries and returns to Britain with Sue, and sections of the book document the rather turbulent early stages of his relationship with her. He expends considerable discursive energy arguing, perhaps as much for his own benefit as the reader's, that they are both "different to the others": that he is not exploitative and that she is not a *malaya*.

"Perhaps, I was far more to be condemned than the most racist of expatriates, the one who would call black women kaffirs, niggers, whores and worse - behind their backs, to their faces, it hardly mattered . . . But who, whatever his unpleasantness, would have struck and honoured a straightforward business deal: you screw, I pay. I could not deny that it was the economic imperative that rendered African women 'available' to white men . . . Given a free choice, I was sure that most African women would far sooner spend a night with a young, attractive man of their own race, age, habit and language, than with one who was often ten, twenty, thirty years older, who might be abusive and stupid, who understood little and cared even less about their culture and background. So, with all that in mind - could I still make out that I was a special case? . . . Yes, perhaps I could . . . The first item in my defence was that I had never felt tempted to discriminate against blacks, for in the end racial prejudice and imagined superiority stem only from fear of the unknown. In fact, in Uganda I had more black friends than white . . . And despite my laziness about learning any of the local languages . . . I was treated by many Africans as something of an honorary member of

\textsuperscript{125} ibid., p.134.
the tribe... And secondly, I had always lived the sort of hand-to-mouth existence with which many Africans are familiar [but for, Hooper, of course, this was a lifestyle choice not a necessity]... So, I thought, what am I doing enquiring of Sue about her past? What moral code am I seeking to impose? If I can make a special case for myself, convince myself that I'm more caring than exploitative, can I not also accept that Sue's an original, rather than just another good-time girl from Buffalo Bill's."\(^{126}\)

This is an extraordinary paragraph, one that takes Hooper to the brink of reflexivity and revelation, but then sees him move rapidly away from this brink with a series of rather weak self-justifications.

He continues in this vein as he repeatedly and anxiously asks Sue about her sexual past and economic standing. "She had insisted that she didn't 'do business' - or sleep with men for money. And indeed, she had never asked me for cash, although one time when we cooked dinner at home, she had bought considerably more food than was necessary... She had no job, no visible means of support... So just how did she survive?... Sue told me she survived by a number of devices. If she had a boyfriend, he would buy her clothes and generally look after her; at other times a boyfriend of Maria's might step in to pay the rent, or buy food from the market. Then there were her girlfriends, some of whom clearly were doing business as malayas [who were] generous to their friends."\(^{127}\) "I am not a prostitute," she told me, very clearly. 'I cannot go with a man for money. How can I respect myself after I do that?'... Yet many of the women who went to Buffalo Bill's would probably have given the same answer, even though four out of five had accepted the principle of getting money for sex... Yet not every woman who went to Buffalo Bill's was a malaya. And I found that I was inclined to believe Sue where I would have doubted most others in her situation."\(^{128}\)

\(^{126}\) Ibid., pp. 70-71.
\(^{127}\) Ibid., pp. 67-68.
\(^{128}\) Ibid., p. 68.
The economic/sexual encounters confronted through the 'keyhole' of *Slim* are complex. I do not wish to get drawn into psychological speculation on Hooper's part, speak for the women involved regarding the degree of reciprocity, resistance or control accorded to them, extrapolate too far from the specifics of Hooper's situation to that of other expats, or attempt to 'read' the rhetorical manoeuvres Hooper undertakes in order to distance himself and Sue from male exploiter/female prostitute relations. What is clear, however, from Hooper's account, and of great importance for the isolationist representations of 'AIDS in Africa' that appear both unreflexively in *Slim* and the media in general, is that there is considerable sexual linkage, much of it 'unsafe', and that these sexual relations are frequently underpinned by economic relations, perhaps fluid, unpredictable and indeterminate, but often inequitable nevertheless. And, if Hooper's case is typical, he demonstrates that he holds the balance of economic and social power to gain access to and command over his sexual partners, with remuneration occurring haphazardly and unpredictably at the conclusion of their relations.
Conclusion

"I retained the right to ask questions, and to make critical observations... For as soon as one lost the freedom to comment upon the fact that the resistance committee system was not working well in some areas; that there was still fighting in much of the north and the east; that respect for human rights had deteriorated during the previous nine months; that people were being thrown into prison illegally; that one of the reasons why AIDS was spreading so fast in the country was that a lot of people were having sex with more than one partner; that some of the officials appointed to help fight the disease were dragging their feet due to political cowardice... as soon as one felt constrained not to mention such issues because one knew that this was a Third World country which had been exploited by its colonial masters, or because one liked its people, and knew that they were poor in a way that most Westerners couldn't even imagine, or because one had a nice house, and a regular income, and a good bunch of friends, and one didn't want to lose them - then one had sold out the very principles that a journalist was meant to uphold."


"I would like to dedicate this book to all good committed journalists everywhere." David Harvey,

The nature of my analysis of Slim entails that I arrive at something of a non-conclusion. As I stated in my introduction, I do not wish to bind the various representational strategies, rhetorics, asymmetries of power and resultant diseconomies that have formed the focus of my discussion into an over-simplified self-determining system. My aim is, instead, a deeper understanding of the literary and literal construction of vitally important, formative popular representations. Firstly, an understanding of how these representations are rhetorically constructed, how 'authority' is achieved and held, how geographic knowledges gain their weight and validity - in essence, how 'we' know what we know about 'AIDS in Africa'! This form of critique allows one to both learn
from existing representations and, hopefully, intervene, upon the firm basis of this understanding, in a discourse that is still highly active, still sodden with meaning, and still a very real site of life or death. And secondly, a deeper understanding of the literal construction of media representations of 'AIDS in Africa', using the discursive mechanics revealed in Slim to situate and contextualise these representations within a real economy of production; rather than a rhetorical one, which would correspond to the mythic, passive, objective stance of the journalist, or a theoretical one, corresponding to the attempts by those who engage in critique of the media representations to situate them within a limited abstract context. My conclusion, therefore, is the complexity unearthed during this two-pronged analysis.

There may be discursive ambiguities, contradictions and complexities revealed by this analysis of Slim and arising from its literary form, its rooting in an individual psyche and its ideologically explosive subject matter, but there are also, however, dangerous coterminous tendencies in the intertwining rhetorics within which Hooper couches his representations of 'AIDS in Africa'. As I shall show in the next chapter, these same tendencies manifest themselves in much stronger form in the media discourse which Hooper's work fed into. This discourse contains a greater weight of journalistic and colonial rhetoric than Slim and also lacks its undermining personal honesties and partial reflections. The rhetorics of journalism and colonialism often combine in Slim to distance the 'Western' reader from the events described and efface their involvement and complicity in the AIDS situation in Africa. They do this by removing the author as affective presence from the text, relaying the story in 'objective' narrative manner, displacing agency onto the object of discourse and disguising authorial motives and situation. This distanciation is compounded by Hooper's framing of the story. Like many of the media representations, Hooper discusses 'AIDS in Africa' in relative spatial and historical isolation.

This limited template combines with the tendencies unleashed by his rhetoric to efface any outside involvement, especially Western, in the AIDS situation in Africa. And, in turn, it acts to naturalise corruption, chaos, mismanagement, misfortune, suffering, disease and death as essence of Africa – connections and associations that are well-grooved and powerful in the Western consciousness.
From here it is but a short step to positioning Africa as source of AIDS and allocating blame for the 'brewing' of the disease, and few external mitigating or contextualising circumstances are provided to counter this view.

This conflation of rhetoric, association and template thus acts to overwhelm, unintentionally maybe but forcefully nevertheless, most of Hooper's good intentions. He may well care deeply but the results of his representations are not just misunderstanding in this case; the results are, as Hall argues, all too real. I feel that Slim's balance sheet has been pushed into the negative by Hooper's templating and the blisters of colonial rhetoric that erupt through his text. He is raising awareness of the AIDS situation in Uganda, but the manner in which he does this, I believe, more destructive than constructive. This negative effect will emanate from the working of the book on a symbolic and ideological level as Hooper's representations manifest themselves in affected attitudes, behaviour and actions.

But Slim describes the construction of, as well as feeds into, a particular discursive moment and it is clear that many negatives also arise from the literal production of the representations. Hooper not only produces representations, he describes how these are messily and often exploitatively obtained and, therefore, the book also contains evidence that acts to undermine its own rhetoric of idealistic objectivity. But in this evidence lies the book's extreme utility too. Just as the book almost seems to turn on itself, performing an auto-critique and riddling itself with ambiguities and contradictions, so it can be turned critically upon the dominant media representations that form a powerful 'AIDS in Africa' discourse. Slim also reveals the personal, political, material, and economic conditions that enable and give rise to these media representations. It therefore performs a grounding and distance-collapsing function on its own sections of journalistic and colonial rhetoric and, importantly, on the media representations too. An immense amount of critical meaning is added to them as a result, and I will attempt to follow these implications through in the next chapter.
"Slim" thus exposes the gap between the rhetorics of journalism and empire and the heavy actuality of the journalist’s presence in Africa. This gap would be ludicrous if it were not so dangerous. Media representations are not produced solely for the ‘public good’. They are valuable commodities and, in the case of ‘AIDS in Africa’, the personal and financial gain that accrues from them seems to fall to those who already hold the balance of power. An immense amount of social and economic power is exerted in their production, largely along lines of existing inequity - West-Third World, male-female, rich-poor, white-black, well-sick - and this is seldom reflected upon in the representations themselves, even though it is reflected in them, entailing that they actually represent the encounter between a man whose profession is itself a sign of standing and education, possessed of the power to pull the God-trick and construct swingeing Truths from haphazard encounters and partial perspectives; and a country and a people who are indeed held in an unfavourable position within an inequitable capitalist system. This encounter and exertion gives rise to extreme, often horrific, diseconomies of capital, access, movement and perception in the production of these representations of 'AIDS in Africa'. Commodification, and these asymmetries of power and diseconomies of production form a more realistic context within which to situate the media discourse. In producing representations, it is apparent that Hooper is neither objective nor passive. He is intensely affective and has a very real, often negative impact upon the represented, which compounds the likely deleterious impact of the book on a symbolic and ideological level. The same people tend to suffer as a result of both production and consumption. Real people suffer real indignities in the production of this discourse, with little prospect of gain. These real, often violent and exploitative effects demonstrate that "we", the readers of "Slim" and the media representations, are ineluctably entangled in the actuality of 'AIDS in Africa', despite the distantiating rhetoric within which these stories are couched.

Given the gaps between rhetoric and actuality that fracture The Slow Plague and Slim, reflexivity, or rather its lack, emerges as a key consideration. Gould was stubbornly unreflexive to the evidence he himself collected, which pointed to science as intensely social and undermined his own idealistic scientific stance. Hooper is also unreflexive, but not to the same stubborn degree. At several points in the text he partially reflects upon his position in Uganda and upon the
diseconomies of production he utilises. He also, at times, expresses doubts about the rhetorical justifications for his work. Ultimately, however, he pulls away from this brink, falling back on money and renewed self-justification to ease the tension he has encountered, and failing to confront the full implications of his reflection.\(^{129}\) Thus, he fails to fully reflect upon his actions, his rhetoric and upon the dissonance between these two.

With more reflexivity in production and presentation, and less colonial rhetoric, the damaging aspects of *Slim* would be damped down and the positive effects envisaged by Hooper would be more likely to manifest themselves. As the quotation at the beginning of my conclusion shows, Hooper has to negotiate a tremendous amount of political and moral complexity in order to produce his representations. He is well aware of this fact and of the responsibilities he bears as a result of his position in Uganda reporting on AIDS, even if his negotiations subsequently stumble and the representations he produces fail to reflect fully the complexity of the situation he so eloquently and passionately describes here.

To return to Gould's metaphorical coliseum: I sit in the margined seats wearing my white toga and, at times, as I read *Slim* my overwhelming desire was to lower my thumb in disdain at the spectacle in the textual arena below. But to do so is simply not an option. Committed journalism, like science, is a vital tool in this fight against AIDS and in the very real fight for life and death which is being played out in this discursive field, but it can learn from the labours of those in the 'margined' seats. Irreducible insights to political practice are indeed offered from this position, however ephemeral it may feel at times. Hooper is right to argue that "in the end, responsible journalism

\(^{129}\) As a result, he is able to maintain a stance of innocence and passivity throughout the text, whatever rhetorical mode he is operating in: as absent journalist, and as present, semi-reflective individual. In the latter mode, Hooper argues that though he may seem to be affective and exploitative, he is, in fact, different to 'the others' and his work will, despite his doubts, lead to good. Pratt observes similar strategies of representation when she contrasts sentimental colonial travel writing with earlier colonial informational/scientific writing. Of the former she states, "though he is positioned at the center of a discursive field rather than on the periphery, and though he is composed of a whole body rather than a disembodied eye, the sentimental protagonist, too, is constructed as a non-interventionist European presence." At times, Hooper, too, relies upon this non-interventionist positioning, contrary to all the evidence he then relays from that position. Pratt calls this the discourse of "anti-conquest" - the strategies of representation whereby European bourgeois subjects seek to secure their innocence in the same moment as they assert European hegemony. Pratt, M.L. 1992: *Imperial Eyes: Travel Writing and Transculturation* (New York: Routledge), p.78.
has as important a role to play as have condoms, clean needles, and health education campaigns.\textsuperscript{130} Perhaps the most powerful and intense example of this form of journalism is the work of Randy Shilts, who constructed negotiated, situated, reflexive and politically driven representations, anchored in a deeply principled sense of morality.\textsuperscript{131}

\textsuperscript{130} Slim, p.165
Chapter Three - A Continent Under Siege: The Western Media Report on 'AIDS in Africa'
Chapter Three - A Continent Under Siege: The Western Media Report on 'AIDS in Africa'

Introduction

In *Slim*, Ed Hooper describes the background to, and literal construction of, a formative and frightening discursive moment: the telling of the 'AIDS in Africa' story in the Western 'quality' press in the late-1980s. And, through his news photographs and reports, Hooper also feeds several key representations into this moment himself. This period of time saw the story first break in the West, and then be relayed over and over again within a very similar, and offensive, set of representational modes, metaphors, tropes, stereotypes and linguistic structures - some of which are also used in *The Slow Plague* and *Slim*.

The period can be seen as *momentous* in several senses of the word. Firstly, it represents a time of intense and frantic media discourse on the topic of 'AIDS in Africa'. Nearly all 'quality' Western newspapers, radio and television stations focussed on the issue and sent journalists to the area. They then ran very similar 'AIDS in Africa' news stories, series and features within a short space of time. I choose here to focus on the subset of print journalism but recognise that the full nature of this discursive moment was also ineluctably shaped by other media too. Secondly, this period of time saw the 'AIDS in Africa' discourse take a particular shape and direction - it was given considerable momentum. An offensive and derogatory discursive pattern was established, with a distinct geographical imaginary mobilising around the semiotically loaded and resonant term 'Africa'. This pattern persists and is still playing itself out in the media. And, finally, the 'AIDS in Africa' media discourse is of intense moment, since, as Hall suggests, people can live and die through its flux and form.

The story was reported for a number of complex and contradictory reasons. Firstly, the scientific evidence emerging from 'Africa' at the time suggested an HIV male-female infection ratio of 1:1. This evidence contradicted the statistical picture of infection in Europe and North America, where it
was believed that HIV was largely confined to the offensively formulated 4 'H' risk groups: Homosexuals, Haitians, Heroin-users and Haemophiliacs. As a result, the 'African AIDS' situation was labelled a 'heterosexual epidemic' and therefore deemed newsworthy as a lesson that the disease could, and would if social, sexual and educational precautions were not taken, spread through the mainstream heterosexual population in the West too.1 This story angle positions 'Africa' as both lesson for the West and a future to be avoided. Secondly, tentative figures and 'eyewitness' evidence suggested that the 'AIDS' situation in 'Africa' was reaching extremely serious proportions, with words like 'plague' and 'apocalypse' commonly used. Many stories run in the press did, therefore, have a genuinely altruistic motive. Like Hooper, the authors were aiming to draw attention to the perceived situation and hopefully, as a consequence, draw aid too.

Thirdly, several less tangible and contradictory reasons also seem to underlie the telling of the 'AIDS in Africa' story. Media stories are symbolic commodities and media organisations aim to make money. 'AIDS in Africa' provides a vessel for titillation and voyeurism via exhibition of 'strange African sexual practices' and as such represents extremely valuable, newsworthy copy. And finally, while 'Africa', as supposed site of heterosexual AIDS, may represent a lesson for the West, this positioning simultaneously translates AIDS into a threat to all. Many of the media stories appearing at the time seem to betray this psychological anxiety - at one and the same time acknowledging 'AIDS in Africa' as a lesson to be acted upon and attempting to minimise the threat posed by stressing the differences between the African and Western situation that would prevent this threat becoming reality.

These 'reasonings' underpinned the late-1980s 'AIDS in Africa' discursive moment. The media representations forming this discursive moment therefore exhibit the anxieties and tensions of individual journalists and a society attempting to come to ontological and epistemological terms with what seemed to be a potentially deadly threat to its very existence. Further complexity and...
ambiguity is added to the discourse by the immense weight of tangled meaning and metaphor released by the explosive combination 'AIDS' and 'Africa'. This juxtaposition places 'AIDS' - a nexus of meaning and discourse that unavoidably pulls on notions of sex, race, gender, religion, science, the social, nature and culture - alongside 'Africa' - the literary site for polymorphous and perverse collusions between racism and sexism and the trigger for a series of historical and colonial resonances and imaginative geographies. The result of this collision is a particularly distinctive, often shocking, media discourse, and one that is still used and playing itself out.

Several papers comment on aspects of this discourse. They focus on its literary construction and, not surprisingly in view of its contents, are highly critical of the images and representations used by the Western 'quality' press when telling the 'AIDS in Africa' story. These include works by Treichler, Watney, Patton, Bryn-Austin and the Chirimuutas. I wish to draw on this work, combine and fill it out with the insights gained from Slim regarding the literal construction of the discourse, and analyse the articles that formed this powerful media moment. My primary aim is to untangle and unpick the intertwining rhetorics used to tell the story. First, of journalistic objectivity and passivity. This rhetorical stance is, by convention, adopted in a much more assertive manner in the newspapers under consideration than in Hooper's schizophrenic 'now-you-see-him, now-you-don't' literary journalistic format. The media discourse admits no space for personal reflection on conditions of journalistic access or on feelings and emotions generated during the encounters giving rise to the story. Slim, however, can be used to partially situate such representations, exposing the 'God-trick' that builds distance between the journalists and the objects of their discourse. And secondly, the discursive moment sees predominantly white, Western males travelling around and constructing representations of 'Africa'. The discourse is intimately linked to historical notions of 'Africa', the black subject, sexuality and disease in the

Western imagination. In the telling of their stories the journalists rely heavily upon rehashed strands of colonial discourse and these strands act to create a monolithic popular geography - offensive and of potentially dangerous practical import. I intend to speculate on the possible effects of the 'news', 'facts' and 'knowledge' constructed within this discursive media space, thus concluding by turning from the power that embraces the forming of the discourse to the possible power and implications that emanate from it.

The news is an immense feat of social construction - not the reflection or reporting of reality. Slim details one particular aspect of this construction process: Hooper reveals the asymmetries of power and disproportionate economies of capital, access and sight that underpin the initial generation of these representations. Slim also highlights the manner in which journalists are fully embroiled in the stories they tell, despite the passive, objective manner in which these stories are later narrated. Messy and affective presence thus becomes authoritative absence once the representations appear in the newspapers. The actuality of Hooper's presence in Uganda therefore acts as useful counterpoint to the media representations themselves, partially replacing the effaced journalistic presence in the stories and situating them within a more realistic economy of production.

But, in this final section I have raised my focus from the work of one man to the work of the 'Western media' in general and the 'quality press' specifically. Much work centres on the role of the media in society and the particular nature of this wider economy of production. These readings

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4 I focus here on the broad nature of the 'AIDS in Africa' media discourse and the general characteristics of the geographical imaginary constructed and reinforced therein. For a fuller exposition and genealogy of a specific strand of the colonial and geographical legacy reworked within this discourse, see Jarosz, L. 1992: "Constructing the Dark Continent: Metaphor as Geographic Representation of Africa" in Geografiska Annaler 74 B(2), pp.105-115. Jarosz examines the historical persistence and the ideological power of the metaphor of Africa as the Dark Continent. She describes its tenacity as a metaphor, charts its use by Western explorers, missionaries, journalists, literary authors and academics, including, briefly, discourse upon AIDS, and argues that this persistence is testimony to "its emotional and dramatic power, its aesthetic appeal for Western audiences, and, most importantly, its crystallization of Africa as Other, simultaneously incorporated and excluded as negative reflection of the Western self-image" (p.113).
range from theories of systemic conspiracy in information provision, both of the political left and right, through to free-market analyses, with many highly complex theorisations falling between these two extremes. This theoretical arena is the site for much heated debate. A discussion of this debate is beyond the scope of this chapter; but, in examining supposedly formative media representations of 'AIDS in Africa', it is necessary to take an explicit, if simple, theoretical stance, since my examination of these representations already suggests an implicit belief in the ability of the media to deleteriously shape social consciousness. Firstly, global media ownership structures are such that the power to chronicle the 'AIDS in Africa' story rests heavily with Western multinational corporations. This is not to suggest or even hint at any form of conspiracy theory, merely to indicate that the discourse does take the form of an overwhelming Western examination of 'Africa', with all the negative historical and geographical connotations implied therein. And secondly, within these ownership structures, news is a valuable commodity, not primarily a social service or a reflection of the world to the reader. This money-making function works itself out in the 'AIDS in Africa' media discourse in a number of ways. The economics of reporting from Africa and the time pressures on journalists and editors seems to contribute to their resorting so often to easy clichés, racist stereotypes and ill-thought-out explanations for the situations they encounter there. The scope for reflexivity, reconsideration, novelty and depth is limited by the economics of the discourse. The need to sell papers and excite the reader leads to an undertone of sensationalism, melodrama and titillation, even in the 'quality press' accounts.

Spurr argues further that the consumption of this news is a perverse pleasure, partly dependent on the ability of readers to remain largely unaffected by the sorrow relayed to them. By this reading, not only does commodification lead to overtly sensationalist treatments of serious issues, but a

7 See, for example, Hooper's comments that "reporters and photographers from many of the world's leading journals and broadcasting stations descended on Uganda looking for powerful or sensational copy . . . At least some of them arrived with the apparent expectation that Kampala's streets would be lined with the Belsen-like faces of the walking wounded; disappointed there, they popped Sterotabs in their water bottles, and set out for the banana groves." Slim, p.117. See also Harriman who states: "Journalists are sent off to all sorts of catastrophes and political feuds overseas and told to file tight, comprehensible copy, and quickly. Those who don't, don't go overseas next time. To function like this journalists have to have fairly durable, well-stocked kit bags, not just with a few clean shirts or blouses, but of attitudes and recognisable perspectives as well." Harriman, E. 1987: Hack: Home Truths about Foreign News (London: Zed Books).
series of aesthetic devices then come into play to elicit and ease consumption of these stories. For example, the montage mosaic form of newspapers is seen to make 'AIDS in Africa' spatially - in terms of layout - and rhetorically equivalent to a sex scandal or lottery win. No real reason is given to engage with, or devote attention to, one rather than the other. All items are given a similar aesthetic and narrative treatment and reported variously as objects of horror, beauty, pity, avarice and so on. But ultimately, Spurr argues, the result is a certain possession of social reality leading to pleasure for the benefit of the observer's sensibilities. Spurr may be overstating his case somewhat, since most articles are founded upon and convey at least a partial truth to the reader. Perverse pleasure and reader passivity are not the only likely responses to these AIDS stories. However, there is a risk that this mediatized consumption of misfortune will, in certain cases, add further social 'distance' to the gap between the reader and the person with AIDS in Africa since complicating distancing tendencies also lie: in the isolationist framing of the 'AIDS in Africa' story as exactly that - purely 'African', with no causal, explanatory or determining linkages with the West; in the rhetorics of journalistic objectivity and empire within which the story is couched; and in the newspapers' narrative approach to reality. This narrative approach carries the implied promise of dramatic arc. The story will, like all stories, unfold and resolve. Spurr argues that this mode positions the audience as passive consumers, simply appreciative of the unfurling and ultimately resolving storyline. The 'news' has been identified, the authorities notified, and it assuredly will be dealt with, thus obviating the need for concrete and practical action from the consumer.

Spurr's arguments are persuasive, but this 'Western' storytelling and the commodifying and potentially numbing and distancing tendencies therein will, of course, come to nothing if they are not believed by the audience. Just as theorisations of mass media production and role are the site of much debate, so the relationship between the mass media, public opinion and social

9 Ibid., p.25.
consciousness does not admit of formulaic answers. Audiences are active participants in the construction of meaning and do not necessarily absorb media messages in dumb and passive fashion. Kitzinger, for example, examines audience perception of AIDS in various U.K. sociological subgroups and finds an ambivalent relationship between audience and media and health education texts. The word of 'science' is quite often doubted, with many individuals continuing to believe that kissing or touching a person with AIDS is dangerous, despite a massive weight of evidence and representations saying the contrary.

The relationship between the mass media, the individual recipient of their messages and the subsequent formation of public opinion is thus exceedingly complex. This relationship is neither adequately explained by, for example, Habermas' apocalyptic scenario that the mass media are corrupting the habits of self-reliant critical thought necessary for democracy and therefore responsible for the decay of the public sphere, nor, at the other end of the spectrum, a more optimistic reading which would see this strand of public discourse as offering the prospect of universalizing transcendence and a liberatory public subjectivity. With respect to the 'AIDS in Africa' discourse, there is partial truth in many of the representations as well as racist and sexist imagery. These representations may indeed help alleviate the situation they describe and/or reinforce, engender or encourage dangerous attitudes and opinions, depending on audience reception. In this particular discourse the mass media speak to a tacit public sphere, but individual interpellation to the supposedly mass subject position resulting is likely to be varied.

But this theoretical complexity should not be allowed to defuse or detract critical attention from the 'AIDS in Africa' media discourse itself. There is a simple and necessary democratic need to be suspicious of and check all those who, like Gould, Hooper and the journalists examined here, speak in the name of an undefined 'public'. This powerful ability to address such an audience and

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abstract oneself in public is itself an unequally distributed resource, largely available—historically and in this specific case—to those who are white, Western and male. This distribution skews and biases the supposedly public discourse under investigation. Warner therefore argues that the very mechanism designed to end domination—the free public sphere—is itself a form of domination.\(^{12}\)

And, specifically in reference to AIDS discourse, he also argues that, as a result, a skewed mass media, in pursuit of a public demanded by professional journalism, all too frequently interpellate their public as heterosexual: uninfected but threatened. Gould's cartography and rhetoric saw him implicated in such practices. As will be seen, such interpellations also seem to operate in the 'AIDS in Africa' media discourse, with mass publicity attempting to function as psychological prophylaxis! Once again, however, it is necessary to add the rider:'... if the message is accepted by the audience.'

In the light of this complexity and all these qualifiers, who is to say that racist and sexist media representations of 'AIDS in Africa' have a negative impact on social consciousness? As Driver argues, there is indeed "much more to be said about the ways in which individuals remake the symbolic geographies they are sold."\(^{13}\) But if people are to be critical and to reject, remake and reconstruct received representations, it is because everyday life and historical memory have generated an alternative or parallel framework through which to understand texts and representations.\(^{14}\) I believe that the monolithic and largely offensive nature and crushing weight of the 'AIDS in Africa' media discourse, overlying an historical legacy of Western representations of 'Africa', leaves very little room for alternative frameworks of understanding. In this case, how individuals know what they know about 'AIDS in Africa' is likely to be a direct or indirect result of this discourse.


\(^{13}\) Driver, F. 1991: "Henry Morton Stanley and His Critics: Geography, Exploration and Empire" in Past and Present 133, p. 35.

I intend to analyse the first set of stories on 'AIDS in Africa' to appear in the major British and US serious news publications, and then focus more specifically on published stories and photographs emanating from Hooper and Neveu's 'AIDS safari' which formed part of this wave of coverage. As evidence of a supposed epidemic of AIDS in Africa trickled through to the West in the mid-1980s, the response of most newspapers was to assign a correspondent to the continent who then filed a series of articles, as 'eyewitness' to the 'epidemic', which were often published over consecutive days as an 'AIDS in Africa' special. The 'AIDS in Africa' story was almost entirely confined to the so-called 'quality press'. There had been intense previous reporting of AIDS as a domestic issue throughout the early-1980s and though large segments of this coverage were concerned with the nature of this supposed 'gay plague' and linked issues of guilt and immorality, the overall media message was confused and often contradictory. Between newspapers and even within them, between editorials, news reports, and features, each with their own codes and conventions, many different AIDS narratives, messages and morals were relayed.15 Even after the 'AIDS in Africa' story broke and put a potential new slant on AIDS as a domestic issue, the tabloid newspapers in Britain continued to relay a narrative line which was heavily anti-gay in its undertones. Of the tabloids, Britain's Daily Star was the only one to take real notice of 'AIDS in Africa' - they ran a shocking and astonishing two-day special on AIDS in Uganda in 1990, which, unfortunately, was only a small step away from some of the representations appearing in supposedly more worthy newspapers.16


The first two-page spread was headlined: "Land of the Living Dead - Shock Report from Uganda." It went on, "huddled together in a small wooden hut, the tiny babies are watched by their grim-faced mothers and a nun... They are all dying of AIDS in the land of the living dead... The twin provinces of Masaka and Rakai that used to support 1.2 million has been devastated by the scourge of death. Throughout this remote mountainous region thousands are dying monthly of the mysterious sickness they know locally as... SLIM." This sensationalist and offensive storyline echoes the packaging of Hooper's book rather too closely for comfort. The Star states "pitiful Ugandais the AIDS cradle of the world" and then resorts to sexual voyeurism and titillation, adding that "most Ugandan girls lose their virginity by the time they are 14. At one AIDS-education programme, secondary school students told counsellors they couldn't give up sex... because they liked it too much! And most of the teenage students admitted they had intercourse without condoms EVERY day." The article is surrounded by photographs of "orphans" and babies - stereotypical 'African' iconography - with captions that leave little work for the interpretive powers of the observer and force the meaning of the accompanying photograph. For example: "The Agony behind a picture of innocence. For this tiny child, cursed by his parents' sexual ignorance and living in permanent pain, there is no future..." There is also a close-up photograph of a nun captioned, "Sister of Mercy: Sister Margaret
The 'AIDS in Africa' narrative seems to contrast significantly with the varied and contradictory domestic AIDS stories run. By contrast, the former narrative is both relatively monotonous in tone and content, and long-running: very similar storylines, imagery, photographs, tropes and metaphors are used again and again across all newspapers examined, including *The New York Times, The Washington Post, The Times, The Guardian, The Independent, Newsweek* and *Time*.

**A Continent's Agony: The New York Times**

The first newspaper to run an 'AIDS in Africa' special was *The New York Times*. Their medical correspondent Doctor Lawrence K. Altman filed a story headlined "AIDS in Africa: A Pattern of Mystery" from Kigali, Rwanda, in November 1985.17 This article introduces a number of themes common to many of the media representations that were to follow. Though Altman reports from Rwanda, his specific geography is lifted, by the headline writers, to the mythical level of "Africa" which then allows a glib alliterative twinning of place and disease: "AIDS in Africa". In each report, a few haphazard, spatially specific interviews and sets of statistics are taken to be representative of a whole continent and, as a result, an immense amount of diversity is denied. Africa, the continent, is four times the size of the U.S., contains more than 50 countries, 900 ethnic groups and 300 language families, but journalists still feel able to speak authoritatively about the AIDS situation there. The apparently homogeneous and certainly mythic "Africa" that appears in the media discourse is an imaginary triggered by journalistic evidence drawn almost solely from Uganda, Rwanda or Kenya, but frequently powered it seems, more by a colonial discursive legacy than by the actuality of the situation in these countries. The totality of the continent is subsumed within the construct "Africa" and simultaneously much is excluded, to be replaced by stereotype.

Sullivan, her face etched with sorrow comforts the sad youngsters" when, in fact, her face actually appears remarkably serene.

The second spread saw more of the same imagery used: "For this land cursed by the deadly virus is rapidly becoming the orphan hell-hole of the world. It is a country where ragged, lonely children like little Grace Namuwonge face hunger, back-breaking work and poverty ... alone." The reporters also rely on a similar metaphor to Gould in describe the AIDS situation in Uganda: "Throughout these AIDS-ridden valleys of death, the misery and poverty is worsening."

The above articles build an offensive and racist portrayal of Uganda and rely upon many 'African' stereotypes for their telling. Unfortunately, as will be shown, many of these same stereotypes also circulated in more serious newspapers.

and cliché. For example, the Altman article stereotypically pairs "Africa" with "Mystery", which once more acts to position both the continent and the virus outside existing spheres of [Western] knowledge, stressing the continent's ultimate unknowability, the virus as external threat to the system rather than internal anomaly, and - since mysteries are there to be solved - the pressing need to deliver "Africa" from this state of confusion through the application of science and reason.

Compared with later articles on the same topic, Altman's work is scrupulously careful and very even-handed, especially on the origin issue. He states, "Africa has been the focus of attention for some time, in part because some scientists have suggested that the disease may have originated there. However, others point out that it was first recognized, not in Africa, but in the United States, and that no scientific evidence has proved any theories about where it originated." And, unlike Hooper and Gould, he does not then load his text with metaphors which generate meanings running counter to this balance. He does, however, speak through the ubiquitous but anonymous "scientist", "researcher" and "expert" - a common rhetorical tactic used in many of the 'AIDS in Africa' representations. This takes away personal responsibility from Altman for the implications of his words, adds effective but spurious weight to his narrative, since the individuals are not cited, and concomitantly boosts these individuals as the sources of authoritative and objective information on 'AIDS in Africa', investing in the myth of objectivity. This tactic sidesteps the fact that the pronouncements, work and results of these 'scientific authorities' are neither neutral nor innocent of power. As has been shown, they are quite capable of articulating the same discourses of racism and sexism that ebb through the 'AIDS in Africa' media narrative.

This positioning of "scientists" as relaying neutral information is probably not surprising considering Altman's dual occupations - journalist and doctor - but it contrasts sharply with his view of AIDS information emanating from Africans and their governments. He declares, "To this reporter, who is also a physician and who has examined AIDS patients and interviewed dozens of doctors while traveling through Africa, the disease is clearly a more important public health problem than many African governments acknowledge," and he also notes, with apparent surprise, "Some African countries have refused visas to journalists inquiring about AIDS." This Africa-
West dichotomy, which supposedly sees African governments actively politicising a neutral scientific and purely medical factual arena, recurs in most of the 'AIDS in Africa' articles. It may well have been the case that African governmental obfuscation occurred, but they are not the only involved party with a political and power-laden stance - the whole issue of 'AIDS in Africa' is intrinsically politicised and criss-crossed by relations of power. A rational, reasoning and reasonable 'West' does not oppose a political and biased 'Africa'.

Altman's article also provides the first explicit framing of 'AIDS in Africa' as a lesson for other parts of the world: "scientists now generally believe the African experience, however it is ultimately diagnosed, will almost certainly contain lessons vital to the health of people throughout the world", with this lesson to be drawn from the supposedly heterosexual nature of AIDS on the continent. "AIDS appears to be spreading by conventional sexual intercourse among heterosexuals in Africa and is striking women nearly as often as men, according to researchers here." This 'lesson' positioning carries uncomfortable undertones, with Africans apparently dying so that others, the readers of the Western media narrative, can live. But there are also problems with the premises upon which this over-simple positioning is based. The approximate 1:1 male:female HIV infection ratio believed to exist in Africa is, unfortunately, obtained by using European and North American statistical methods and classifications of sexuality. The sexuality of the people is read through imperial eyes and reduced to two categories - hetero and homo - which automatically denies any possible complexity of human sexuality in the African countries under scrutiny. "The relatively recent emergence of the classificatory system of Western sexuality is by now as completely taken for granted and de-historicized as Linnaean taxonomy."18 The very odd European and North American notions of sexuality are taken to be the global norm and then used as the lens through which to view the sexuality of others. The culturally condescending conclusion reached, therefore, is that there is limited homosexuality in Africa.

Although Altman's article was probably one of the most balanced and least assertive pieces to be written in the 'quality' press, as the above examples show it still contains several strands of re-worked colonial discourse. It was re-published in the *International Herald Tribune* for global circulation and its content led to the seizure of all shipments of the paper into Kenya - because of its racist content and inferences, according to the Kenyan government, and because it simply aimed to tell the Truth about AIDS in the face of African governmental denial, according to the Western media.

Little did the Kenyan government know what was coming! *The New York Times* continued to report regularly but briefly on 'AIDS in Africa', but concentrated more heavily on the domestic AIDS situation. Their next special feature on the story was in August 1990 when they ran four consecutive full-page spreads titled, "AIDS in Africa: A killer rages on", and serialised under the subheading "A Continent's Agony."19 These reports were filed by Erik Eckholm and John Tierney from Nairobi. Their subheading sees another 'A' added to the alliterativelist: "Agony", and it is not a condition felt by the people, but by the very land itself, the whole continent. This conflation of 'Africa' and 'African' is a common colonial discursive trope: the two are used almost interchangeably for each other in the media narrative. The continent is personified and imbued with a set of feelings and attributes stereotypically assumed to resemble those of the 'African', and, at the same time, the naturalness and primitiveness of the 'African' is stressed, as being close to the land, or almost the land itself. Both are portrayed as eternally suffering, reeling from a never-ending series of natural woes, of which AIDS is merely the next disaster in line. This emotive media angle positions AIDS and the resultant condition of agony as innate to Africa. Disaster, disease and suffering are naturalised, and extracted, once again, from any wider frames of economic, geographical or historical understanding.

In contrast to Altman, Tierney and Eckholm do not report 'AIDS in Africa' as an explicit lesson to be heeded by the West. Instead, their report resorts to crass and offensive cultural and racial speculation, gossip and hearsay in order to establish apparently fundamental and incontrovertible

differences between, if I may borrow ironically from Gould, the sexual and cultural backcloths for AIDS in Africa and the West. This line of reporting acts to 'other' the disease within Africa and further reinforces a supposedly 'natural' causal linkage between 'AIDS' and 'Africa' to add to the repetitious literary linkage in the headlines of the discourse. Gilman argues that this strenuous discursive 'othering' of disease has a psychological root, allowing 'us' to feel safe.20 It is certainly a pattern repeated many times in this discourse, with 'Africa' frequently positioned as the repository for disease and depravation.

Tierney and Eckholm state that "in contrast with the pattern in the United States, AIDS in Africa is spreading mainly through heterosexual intercourse, propelled by long-neglected epidemics of venereal disease that facilitate viral transmission." So, they suggest that HIV can be spread heterosexually, but add that circumstances in Africa are sufficiently different from those in the West to make comparisons between the two places worthless. They continue to focus, voyeuristically, on 'African sexual difference' [once again, presumably from Euro-American norms] throughout the article, noting that "Researchers are just now turning attention to little-known sexual practices that might also raise transmission odds. In parts of Central Africa including Zambia, Zaire, Zimbabwe and Malawi some women engage in a practice known as 'dry sex.' In variations of the practice, designed to increase friction during intercourse, women use herbs, chemical powders, stones or cloth in the vagina to reduce lubrication and cause swelling." Similarly, they declare, "surveys do show that extramarital sex is commonplace in Africa" - unlike New York of course! And that "AIDS confronts Africans not only with death but with challenges to traditions. Sanford Mweupe of Lusaka, Zambia, was required by tribal tradition to have sex with the widows of his brothers, who had died of AIDS." This level of fascination with 'African' sexuality - which repeats right through the media discourse - represents a continuation of colonial discursive trends and acts to reinforce 'Africa' in the Western imagination as site of 'strange' and 'primitive' sexual practices. There are also hints that 'Africans' brought the disease on themselves by engaging in these unnatural practices. This is an ironic formulation, since AIDS is at once

positioned as 'natural' to Africa and Africans, 'Africa', in turn, is seen as the 'natural' location for a disease like AIDS to develop and spread, but this spread is thought to occur via 'unnatural' practices. Ironic and contradictory maybe, but nevertheless a formulation that ties in to the similar moralistic portrayals of gays in Europe and North America. AIDS is thus barricaded outside 'normal' Western heterosexual society through literary exertion - mass publicity as prophylaxis.

Tierney and Eckholm's reports contain an overwhelming number of subtextual linkages and allusions which act to assemble a complex web of overdetermined meaning binding 'Africa', 'AIDS' and 'Africans' together in a supposedly 'natural' triad, but one which is somehow underpinned by 'unnaturalness' too. And, no doubt, this exceedingly uncomfortable level of sexual voyeurism also sells newspapers.

This whole series of New York Times articles is peopled by a cast of characters forming a narrative spine very familiar to readers of the 'AIDS in Africa' media discourse, including truck drivers, prostitutes, nuns and white doctors. As in Slim, events in Africa are frequently portrayed in this theatrical manner: a play enacted for the reader's benefit, with an ultimately tragic ending. Understanding of the AIDS situation in Africa is therefore couched within a theatrical narrative frame, in the realm of caricature and stereotype, and this common framing prevents any serious attempts to understand the actuality of the situation in explicit political, medical and economic depth. There is a distinct risk, therefore, that readers are perhaps less likely to intervene than to sit back and enjoy the show. So, for example, when Tierney and Eckholm attempt to posit an HIV

21 In searching for a new angle on the 'AIDS in Africa' story, several Western journalists have recently produced 'lifestyle' pieces on long-distance truck drivers in eastern Africa. These 'human interest' pieces allow the newspaper to sidestep the heated debates about 'facts, figures and origins' with the 'intrepid' journalist teaming up with a driver to document their 'adventures' on a particular journey. The reports, not surprisingly, focus largely on prostitution and the 'wild and reckless' nightlife at the truck-stops along the route. A central theme is the fatalistic attitude and behaviour of the truckers' with respect to AIDS infection. There is a real risk, therefore, of promoting a feeling of hopelessness and, possibly, frustration in the reader- 'if these men don't care and continue to take sexual risks, then why should I care...?' Also, while these stories may emanate from a stance of downgraded factuality, the corollary of this is an increased amount of offensive voyeurism and cultural and sexual speculation. These reports include Conover, T. 1993: New Yorker, 16/8/93, p.56-75, "Trucking through the AIDS belt. Along the remote routes of eastern Africa, long-distance truck drivers have been affectionately revered as cowboys in convoy. But now they are also identified as the unwitting carriers of AIDS, particularly in Rwanda, at the heart of the AIDS Belt, where their infection rate is fifty one per cent." Also see Cohen, D. 1993: The Guardian 11/12/93, p.28-35, "Road to ruin. We've heard the statistics, we've read the scientific speculation. But what is the reality of AIDS in those countries worst affected? David Cohen reports from a highway in Kenya where the virus is passed on like a baton in a relay race."
transmission mechanism, they turn to this cast of characters and suggest that "a small group of infected prostitutes passes the virus to large numbers of men who take it to their wives and girlfriends... For many women, especially those with little education who have left the dreary cocoon of the village, selling sex may seem essential for economic survival." The weary hopelessness of their tone suggests little can be done to alter the above situation and they also make appallingly crass and sweeping value judgements about life in an 'African village'. A character is also introduced in their narrative for explanatory purposes who appears again and again throughout the 'AIDS in Africa' media discourse: the diseased and threatening prostitute, who passes the virus to others rather than has it passed to her - an awful but common historical positioning of 'the prostitute,' which acts to embody her as source of disease, in this case AIDS.22

Finally, all the Tierney and Eckholm articles contain large photographs of single women supposedly 'suffering' from AIDS. Females with AIDS, especially mothers, signify AIDS as heterosexual and as a very real threat to the family, thereby reinforcing one of the key messages of the media discourse. The first article leads with a photograph of a woman in bed inside a hut, captioned: "In Africa, AIDS is devastating young adults like this dying 28-year-old woman, right, near Masaka, Uganda. She was comforted by Maureen Nakimera, a social worker with an AIDS support group." The second page contains a close-up shot of a woman breastfeeding. She stares back at the camera. The image is captioned, "Beatrice Habeenzy of Hamuntamba, Zambia, has left her husband, who she thinks gave her AIDS. She has lost one child and the baby she is nursing may be infected." The second article contains a very similar image - a woman once again is photographed holding a baby, but she looks directly away from the camera. The caption states, "This 28-year-old Zambian woman found out she had AIDS last year when she visited a hospital after falling ill. She still has not told her husband." I will discuss this imagery in more detail when I turn to the media representations produced by Ed Hooper, since all the above photographs bear a striking resemblance to his own photographs of Florence. But there are, obviously, many problems with the imagery, both in its stereotypical nature [with AIDS embodied in the supposedly

long-suffering African woman and Africa portrayed as place of elemental pain], its implications [the situation there is presented as hopeless and African 'victims' merely await their fate], its effect on the reader [AIDS is individualised, stereotypically characterised and therefore depoliticised, perhaps triggering inertia in the reader], and, finally, in the probable invasion and intrusion upon privacy that enabled the photographs to be taken and the subsequent objectification of women that occurs.

A New Agony: *The Times* of London

Across the Atlantic, despite a very different colonial history and set of relations to Africa, a remarkably similar media discourse was enacted. The media discourse on 'AIDS in Africa' displays a dangerous and offensive homogeneity, with a very similar content in the U.S. and Britain, between newspapers and between articles. The discourse is site of monotonous repetition and continual reinforcement of colonial frames of understanding, metaphors and images. There was very little new in the news where 'AIDS in Africa' is concerned.

In Britain, *The Times* ran the first 'AIDS in Africa' special. Their three-part series commenced in October 1986 and was headed "AIDS: AFRICA'S NEW AGONY."23 Over-simple alliterative packaging of the situation occurs once again, with "agony" added to the seemingly inseparable pairing of "AIDS" and "Africa". The insertion of the word "new" adds an extra twist to the heading since it implies that Africa is a place of essential, timeless 'old' agony, with AIDS simply the next in a long, long line of woes to strike the continent. The articles were written by Thomson Prentice, the newspaper's Science Correspondent, and the first was titled "A continent under siege" and subtitled: "Africa, the cradle of civilization, may also be the birthplace of a disease that could destroy it." Again, Africa is personified and in this case presented as being under siege. 'Africa' and 'African' are used interchangeably throughout the discourse and therefore assumed to have the same set of characteristics. Prentice's text is particularly explicit on the origin and source.

of AIDS, perhaps the most overtly problematic and political of representational issues since sourcing the virus so readily and seemingly inevitably connects to connotations of blame. And, as was seen in the case of Gould, this sourcing serves absolutely no, more altruistic, purposes within popular representations. In this case Prentice portrays Africa as natural fount of life and death, able to give birth to a new, world-destroying disease. Hooper resorted to very similar imagery. Both journalists draw upon miasmic theories of disease generation in order to sustain a dramatic narrative which envisages the very land itself spewing forth disease and illness, an old and familiar colonial trope.

The first article in this three-part series included the quarter-page photograph of Beatrice, taken by Neveu on the AIDS 'safari' with Hooper, and captioned in a particularly crass, sensationalist and ignorant manner: "Too young to know, too sick to move: Ugandan children, stricken with Aids, await their end inside a mud hut, far from doctors who could not help them much anyway."24 Beatrice lies on the bed in a shroud. There are faces at the window behind her and straw on the floor of her dwelling. A small child rests his/her head on the end of the bed and stares at the camera. The scene is classical, almost biblical: shroud, straw, child, light from a single window, mournful faces. The caption is appallingly inaccurate. The hut is not made of mud. Beatrice is a woman and she is already dead. There is only a single child in the room and s/he is perfectly healthy and quite able to move. Neveu, in fact, moved the child in order to obtain this particular composition. But together, text, caption and photograph act to reinforce images of 'Africa' as a "stricken" continent, a land of victims helplessly awaiting their inevitable fate.

In the article itself, Prentice reinforces the positioning of 'Africa' as source of AIDS, despite a very weak attempt to maintain some sort of journalistic balance on the issue. He states, "Whether or not the disease originated in central Africa - as many researchers suspect - or was imported from the US and Europe - as Africans prefer to believe - international air travel means that Aids is being exported virtually every day to the capital cities of the world" [my italics]. Detached, objective and

rational researchers 'suspicions' are here counterposed with African 'beliefs'! To which side does Prentice incline? And whatever the initiallocation of AIDS, he has absolutely no doubt where the HIV is going from and to now, with AIDS apparently being "exported" from Africa by the plane-full. Africans are here positioned as disease-ridden threat to the rest of the world. The implications of these representations, and the next unwritten step in Prentice's line of reasoning, would presumably be even tighter immigration controls upon African travellers.

Prentice opens his first article with the following: "The patients are gently lifted down from the back of open trucks that have brought them miles along dusty, pot-holed roads [there seems to be a journalistic obsession with pot-holes!]. . . They are young men and women suddenly made old. Some are babies who will never reach childhood. They arrive at the crumbling steps of the clinic. . . Haggard mothers with sickly children clinging to their back." This stereotypical African victim iconography has been seen many times before in Western media reports of famine, war, natural disaster and political turmoil. It is unlikely that such descriptive, value-laden imagery would be used in connection with similar events in the West, but it appears throughout the 'AIDS in Africa' media discourse. Its repetitive historical use acts to essentialise 'Africa' as place of long-standing, unavoidable and natural suffering, thus reinforcing the use of the word "new" in conjunction with "agony" in the title of the piece, and displacing the discussion from the realm of politics and economics. The clinic steps are "crumbling", but, it seems, that is just the way it is in Africa. The imagery simply confirms what 'we' already know about the continent and no further or wider context for the events are provided or 'necessary'. Prentice then declares, "A catastrophic epidemic of AIDS is sweeping across Africa, scarring the face of the continent and killing thousands of men, women and children. The horrific picture, only now beginning to emerge, offers harsh truths and inescapable lessons for the rest of the world" with the lesson seeming to be the flawed and oversimple 'fact' that "in Africa AIDS is essentially a heterosexually transmitted disease . . . Homosexuality is rare"; the harsh truth being the 'fact' that "The scale of the African crisis . . . stuns the imagination . . . [it is] a hideous, unmanageable disaster"; and the reason that the horrific picture is only just beginning to emerge being the political machinations and denials of African governments - "Individual governments are reluctant to acknowledge the real scale of their AIDS
epidemics." True, perhaps, but if so there are reasons for this reluctance, and the African angle on the epidemic is not the only one that is intrinsically politicised.

In the above representations the continent is again brought to life and seen to suffer as much as the people, with its 'scarred face' signifying its new agony. 'Africa' has long been constructed and represented as much more than a mere place in the Western imagination. It possesses an almost human geography, in the literal sense of the word, and is seen as embodying a contradictory mix of pure, maternal, innocent or life-giving characteristics, a long-suffering forbearance, and, at the same time, as possessing innately threatening, infectious qualities - witness, for example, Hooper's portrayal of Africa as both alluring and diseased, which is echoed in the media representations under examination. This derogatory 'African' imaginary echoes, recirculates, reinforces and legitimates earlier colonial discourse on Africa. Its use here may also have a very real impact on people's lives. There is, of course, the possibility that these articles will draw attention to the issue and result in private and governmental efforts to alleviate the situation reported. Western media coverage of "Third World disasters" has often triggered surges of aid, charity and compassion. This response pattern may indeed repeat itself here, but with 'AIDS in Africa' predominantly represented as a lesson to the rest of the world, as being "unmanageable" in Africa, and as simply the next woe in a long line to the strike the hopeless and helpless continent, the reader may instead be led more forcefully to the conclusion that they should do nothing about the situation other than save their own skins! This is speculation, but whatever the overall balance of reader response to these representations, there is no doubt that they are also laden with many derogatory connotations for their subjects: 'Africans'. Positive and ameliorative discursive effects would, if indeed manifest, be better provided by more sensitively constructed representations. To be fair to Prentice, he does end his article by calling for efforts to ease the epidemic, but, like Hooper in Slim, I feel that his text and subtext have long since escaped him.

The second article, which appeared the following day, contains a similar weight of dubious imagery. The media penchant for alliteration reaches ludicrous but dangerous levels in the title of
the piece: "Prevention versus Promiscuity." These are neither opposites nor even mutually exclusive. Both can exist alongside each other within any strategy to combat AIDS, and Africans do not have to choose between the two - unsafe sex is the problem, not sex *per se*. In presenting prevention and promiscuity as an oppositional choice, Prentice is also reinforcing colonial images of Africa as promiscuous site of unbridled sexuality, and from here it is but a small step to a moralistic understanding of AIDS as an illness that is self-inflicted, when there is absolutely no evidence whatsoever to suggest that Africa is any more or less promiscuous than anywhere else.

Prentice files this second article from Burundi, "the very heart of central Africa, and at the core of the Aids epidemic that stretches right across the continent. Some scientists believe that the Aids virus originated somewhere among these majestic hills and lush valleys, perhaps mutated from the African green monkey, possibly carried unwittingly for generations among the Hutu peasant farmers or the rival Tutsis who now rule Burundi" then brought to the capital, Bujumbura, by Burundians looking for work, who were "symptomlessly carrying the virus." Hooper used a very similar set of imagery in *Slim* and Prentice is here relaying an immensely complex but troubling positioning of 'AIDS' and 'Africa' and 'science', which is commented on by Patton. "Constructing AIDS as 'old' (if not primordial) and situating the virus in 'Africa' naturalized the disease, reinforcing the view that science solves the problems thrown up by nature and society, and is therefore separate from both." So, Prentice is here, in the space of one short paragraph: suggesting that AIDS originated in Africa, an extremely problematic siting as has been shown; sourcing AIDS more specifically in the "very heart of Africa", again confirming and reinforcing what the Western consciousness already 'knows' about that mysterious, alluring but threatening imaginary place; and positioning AIDS as an 'old' disease that lay hidden within this "heart", therefore outside spheres of Western knowledge, and arriving, via the "unwitting" primitive African, as an external agent to be dealt with by modern science, rather than a flaw within the system.

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Within this intricate web of meaning, it is apparently Africa's encounter with modernity that has acted to shake the virus out into the open. Prentice suggests that AIDS existed "symptomlessly", perhaps for generations, in the primitive heart of Africa, prior to this encounter. He describes the mechanisms of modernity and urbanisation which apparently released the virus as follows - Burundians "gradually lost some of their rural village traditions and codes of conduct. Men who left their families behind were able to marry again . . . and form countless liaisons with women." Then bars sprout up in the urban areas and "girls, who learned that prostitution was as good a source of income as any in the overcrowded town, became regulars." Hooper relied on the same imagery to portray modernising Africa almost as an AIDS manufacturing machine. Here, Prentice seems to suggest that Burundians were better off, both socially and physically, before the onset of modernity, which is a particularly romanticised portrayal of prior 'African tribal existence'. Urbanisation is believed to disrupt tradition and result in the Sodom of the African city. A further implication of this line of argument is the suggestion that Africans are unable to cope with modernity. It is seen as an unnatural social state for them. AIDS would not have arrived on the global scene and the African would be better off if only 'primitive' tribal structures were still intact!

Prentice's third and final article continues to focus on the supposedly hazardous African encounter with modernity and urbanisation. It is titled, "Nightmare of a raddled city . . . Kinshasa the Aids capital of the world." To raddle means to apply a plastering of rouge to the cheeks in order to beautify and cover up underlying blemishes, spots, blisters or signs of disease. Kinshasa is therefore explicitly gendered by this title, and represented as alluring on the surface but blemished, seedy and possibly dangerous or diseased underneath. Like Hooper and like many colonial reporters before him, Prentice portrays the African scape as feminine and betrays the ambiguous, anxious relationship of the Western male traveller to the continent, framed by a mixture of disgust and desire, fear and fascination. In this context, the imagery serves to further naturalise 'Africa' as site of self-inflicted, innate and threatening illness and disease, and once more displaces understanding of 'AIDS in Africa' from the practical medical and political realm into the

aestheticised but nevertheless dangerous realms of the colonial imaginary. This naturalisation
tendency, which runs through much of the media discourse, is compounded by Prentice's later
statement: "Tragic, too, that a fatal flaw in the maternal instincts of most African women leads them
to choose injections rather than pills for their sick babies." This statement is divorced from any
wider medical context and absolutely no evidence for the assertion is provided.28 Instead, African
women are represented as instinctively and fatally flawed, acting out a self-destructive theatrical
tragedy on an intrinsically and essentially unviable continent for the benefit of the reader. Then, in
filling out this picture of the African urban Sodom, Prentice returns to focus on supposed
promiscuity and introduces, once again, one of the key characters in the 'AIDS in Africa' media
discourse, the prostitute, who is objectified as a source and reservoir of disease and seen as
infecting others but not considered as having been infected by someone herself: "Sexual
promiscuity is rife in Kinshasa, as in most central African towns and cities. Many men, if not
most, have numerous liaisons with different women, including prostitutes, who have been clearly
identified in Kinshasa and elsewhere as reservoirs of Aids infection."

28 Why are these "African women" expected to have understood modes of viral transmission before the Centre for Disease Control in Atlanta? Why do medical injections infect children in Africa when they are portrayed as safe in the West, and if the answer to this question is needle-sharing and lack of new equipment, what are the economic reasons for this difference?
Back to Buffalo Bill's: The Guardian

This *Times* Prentice series was closely followed by a very similar three day 'AIDS in Africa' set of articles in *The Guardian*, written by Peter Murtagh. The *Guardian* is perhaps the most liberal of the high circulation 'quality' newspapers in Britain, but, unfortunately, their series reads just as offensively as the above articles, with Murtagh repeating and reinforcing many of the same racist and sexist images, notions and tendencies. His articles accomplish the same conflation and overwriting of geographies - they are subtitled 'AIDS in Africa' but Murtagh only visits Kenya and Uganda. They are peopled by the same set of characters, and they are underpinned by the same set of crass generalisations and assumptions; for example, Murtagh authoritatively declares that "the disease has spread along trade routes from its epicentre west and south of Lake Victoria... many truckers like nothing better than to round off a day's work by visiting a prostitute." Murtagh also relies upon much colonial imagery for the telling of his story, and, in particular, once again personifies the African scape and imbues it with a mixture of danger and desire - in this case, he describes Mombassa as follows: "the port with its spicy mixture of Africans, Arabs, Indians and Europeans, and the hint of dangerous excitement lurking in every dark corner". Thus, the articles contribute further to the relentless and monolithic repetition of derogatory imagery forming the 'AIDS in Africa' discourse. However, *The Guardian* series is of particular interest because the articles intersect, dramatically, with Hooper's story in *Slim*.

The first *Guardian* article appeared on February 3rd, 1987, and was titled "A present from Buffalo Bill", with the subheading, "AIDS in Africa. Peter Murtagh begins his three-part report with a visit to the happy hookers of downtown Nairobi." Sic! Murtagh commences with probably the most offensive sentence in the whole media discourse, stating that "The best time to observe the Nairobi hooker is at dusk when the tropical sun dips beneath the Rift Valley and silhouettes the thorn trees against the African skyline. It is then that the hooker preens *itself* and emerges to stalk *its* prey: The wazungu. The hookers head for the city's hotels, bars, and nightclubs where they

31 Ibid., p.25.
32 Ibid., p.25.
know they will find herds of wazungu - white men looking for fun and with money to burn . . .
The first night I walked into Buffalo Bill's there was an Englishman at one end of the bar with a
lady on either arm. "Aids," he shouted above the din, "I couldn't give a fuck" . . . The bar closes
at midnight and many of the customers head downtown to one of the city's discos. If you hurry,
you can catch the floorshow at the New Florida, a windowless flying saucer-shaped nightclub
suspended above a petrol station. Around midnight, the disco music stops and Wagner is put on
the turntable. The dance floor is taken over by three women and five men . . . the show reaches its
climax when, to the accompaniment of Strauss, the men rip off the women's trousers to reveal
fishnet stockings and suspenders" [my italics].

Buffalo Bill's is the Nairobi bar and restaurant frequented by Ed Hooper and many of the ex-pat
community, and here Murtagh appears to be engaging in a spot of participant observation. He
starts by objectifying these women and patronisingly portraying them as, first, "happy hookers,"
and then as animals. Hooper, to recall, compared the women in the same bar to succulent steaks.
Murtagh also echoes many of the other positionings of prostitutes in this discourse by suggesting
that they stalk and seize their prey. There is no conception that these women may themselves ever
be placed under physical or mental threat, no attempt to analyse the situation from their point of
view or to question the economics that underpin the situation. This portrayal mirrors the frequent
ambiguous positioning of the Africans cape, with the locus of desire transferred onto the object of
that desire, thus effacing or disguising colonial or neo-colonial agency and appropriative
tendencies. The desire is then thought to be underpinned by a threatening danger, which, in turn,
hides the real balance of power crossing the encounter. Murtagh's lame attempt at participant
observation was presumably meant to portray, once again, the depraved African urban Sodom, but
the picture he paints seems remarkably tame and safe compared with most Western city centres at
night. And, as with all forms of participant observation, Murtagh neglects to consider that he
himself, and his fellow ex-pats, are fully implicated in the truth of the situation he observes, as
Slim itself demonstrates. The events are also aestheticised and dramatised in a form that mimics,
ironically in the light of Hooper's evidence regarding journalistic movements and actions in Kenya
and Uganda, media representations of African safaris. The 'seriousness' of the news item is thus
downgraded to the level of entertainment and titillation- it is unlikely that a domestic news item would be presented in such a manner.

The above article was run along side a photograph of two female faces smiling at the camera. This photograph was captioned: "For £25 Nancy and Susan will give a British soldier a good time... and possibly more." The photography has an obvious symbolic effect on the reader. Again, women are objectified in the discourse and presented, like Hooper's Uganda, Prentice's Kinshasa and Murtagh's Mombassa, as alluring on the surface but dangerous underneath. Murtagh leaves the reader in no doubt as to which way he regards the HIV as passing in this potential interaction- from Nancy and Susan to the soldiers. But the photograph had a very real effect too, with Hooper fully implicated in this impact. Hooper states, "While in the Press Centre, I got hold of a photocopy of the first article in Peter Murtagh's three-part series on 'AIDS in Africa', which had appeared in the Guardian at the beginning of February. Entitled 'A present from Buffalo Bill', and sporting a large photograph of punky Nancy and Afro-haired Susan, two of BB's regulars, smiling full-face at the camera, it was a vivid reconstruction of Murtagh's evening at the wild west bar... As it turned out, Murtagh's article had an immediate impact on the lives of Nancy and Susan, and I was the unwitting catalyst. I was reading the article at Sue's house, when one of her visitors saw the photograph (captioned, 'For £25, Nancy or Susan will give a British soldier a good time... and possibly more'), and insisted on borrowing it for five minutes. In fact, I did not recover it until two hours later, by which time local legend had it that the two of them had been photographed because they had AIDS. I argued till I was blue in the face that this was nonsense, and not what the article said at all. Meanwhile, Nancy and Susan, by all accounts, were angry because they had been told it was just a quick snap, with nothing being said about publication in a British national newspaper. Whatever, their reputations were ruined, and very soon they stopped calling at Buffalo Bill's." Amidst this talk of representations, portrayals and images, it is sobering to reflect on the fact that these stories and pictures are built upon the bodies, faces and

experiences of real people and that they can also have a shuddering, all-too-real direct impact on these same people's lives.

The second article in Murtagh's Guardian series was titled "Death is simply a fact of life," reinforcing the discourse's positioning of Africa as site of inevitable, monotonous and rapid turnover of cheap lives. This article contained another representation that similarly impacted directly back upon its subject. Murtagh interviewed the Scottish doctor Wilson Carswell, who, at that time was based in Kampala and "the leading authority on AIDS in Uganda." The article quotes Doctor Carswell as saying "Next year we'll see the apocalypse. Come back to Kampala then... there'll be plenty of parking space." The linking of AIDS and the apocalypse is a common popular and moralistic framing of the disease, used not only in conjunction with 'AIDS in Africa', but in connection with gay men with AIDS in the U.S. and Britain. This appalling framing suggests that AIDS is God's wrath falling on a morally and physically unviable place or people, and, as such, is a just punishment for 'unnatural' behaviour. Shortly after this article appeared, Hooper himself attempted to secure an interview with Doctor Carswell but was informed by the UNICEF representative in Uganda, "Well, I think Wilson may be in some sort of trouble with the government at present. I certainly don't think he'll be wanting to have any more dealings with the press." Hooper did eventually manage to meet with Doctor Carswell at a later date and, in Slim, he comments that Carswell "eventually said that his conversation with Murtagh had been for background use only, and that although he had made both remarks, about the Apocalypse and about parking space, the latter had actually referred to Uganda's chronic petrol shortage. About three weeks after the Murtagh piece came out, the Carswells were officially told they were no longer welcome in Uganda." Carswell's apocalyptic metaphor may have had deliberate moralistic implications, though Hooper suggests not and believes that Carswell is a sensitive and thoroughly committed man. It may have been simply a clumsy and careless comment, or it may

36 Ibid., p.156.
37 Ibid., p.349.
38 Interview with Ed Hooper, 16/2/94.
have been intended to shock Western readers into action. If Hooper's account of the situation is taken to be true, one is led to the inevitable conclusion that Murtagh engaged in manipulation of his source material in order to assemble a more powerful, dramatic and sensational narrative, emphasising the fact that journalists are engaged in the active construction of representations which are subsequently capable of impacting, in shocking manner, on real people - not the simple and apolitical reflection of reality to the reader. However, their objectivist rhetorical dislocation from the social enables them to largely evade responsibility for their utterances.

In the same article, Murtagh also documents his own AIDS 'safari' in Rakai province in Uganda - the same trip made by Hooper and, as these articles show, a favourite destination of many Western journalists seeking eyewitness accounts, photographs and the testimony of 'African AIDS victims.' Murtagh goes on to describe one such encounter on this trip. "Josephine Nnagingo lives in a mud and wattle farmhouse in the middle of her family's field of banana trees not far from Kyotera, a few miles from the shores of Lake Victoria... Nearby... is the church... We made our way to Josephine's home as the chorus of happy voices in beautiful harmony wafted gently through the banana trees." Again, Africa is represented as serene and attractive on the surface, with death and disease lurking behind this veneer... "Josephine, who is 27, felt ill about three years ago, shortly after the birth of her fifth child. She got cramps in her stomach, began to vomit and developed chronic diarrhoea. She also has pains in her throat and chest, and a skin rash covers much of her body... She is slowly starving to death and does not expect to survive much longer. The wasting of her body had made her head appear outsized, and her dress is now too big for her. Her arms and legs are desperately thin, and she moves only with pain." A close-up photograph of Josephine accompanies the article.

A week later, a very similar encounter was described by Michael Serrill in *Time* magazine's own AIDS in Africa special report. Perhaps he and Murtagh were on the same 'safari'? This report was entitled "In the grip of the scourge," a positioning of 'AIDS in Africa' that echoes the earlier notion of AIDS as apocalyptic and also hints that the disease is morally self-inflicted, a
chastisement or punishment for wrong-doing. Serrill describes meeting "Josephine Najingo, a 28-year-old mother of five who lives in the dusty Ugandan trading center of Kyotera . . . [she] is dying because she had sexual intercourse with her late husband [sic] . . . a prosperous trader." Her name and age are slightly different to those provided by Murtagh, but a *Time* photograph shows the same woman wearing the same dress. Serrill adds, "She knows she will die, just as thousands of people in her town and the surrounding countryside have already died after being infected with the AIDS virus . . . Fifty of Kyotera's leading businessmen are dead. The streets are filling with homeless orphans, the offspring of AIDS victims in outlying areas. Josephine, racked by fevers, chronic diarrhoea, throat lesions and a painful itching rash that covers her chest and arms, now passes her days sitting listlessly on a straw mat outside her house, waiting to die."

If thousands were dead and homeless orphans filled the streets, it seems strange that the same woman should appear in both *The Guardian* and *Time*, and that only two women, Florence and Josephine, should appear as 'evidence' in seven of the largest news media print outlets in Britain and the U. S. I do not suggest that the story is myth, merely that its evidential foundations in the Western press seem to be so shallow, shoddy and limited: one small area of Uganda, two day-trips by, possibly, two separate groups of journalists, and two women.

Serrill and Murtagh provide remarkably similar descriptions and photographs of Josephine's condition and body and these, in turn, also resemble those of Florence that appeared in five other major newspapers and *Slim* itself. The 'AIDS in Africa' discourse thus relentlessly and meticulously surveys and objectifies the bodies of 'African' women and offers up supposed evidence of AIDS written upon them. I will discuss the likely semiotic effect of this weight of imagery in a moment, but it is clearly founded upon a sickening voyeurism. There is no way of knowing if Murtagh and Serrill enact the same degree of invasion and intrusion as Hooper and Neveu but neither do they reflect upon their personal conditions of access to this woman nor

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contextualise and situate the representations within a wider political, economic or medical framing which would act to counter their stereotypical nature.

Instead of supplying sensitive context, Murtagh further compounds the stereotypical nature of his portrayal of Josephine with the following: "In a desperate search for help, people in the area have turned to witchdoctors and herbalists. Some of the men around Kyotera who believe that Aids is witchcraft have sex with the widows of victims... Animal bones may be hung on the front door of the patients home and the witchdoctor may prescribe dog soup." Likewise, Serrill concludes his *Time* article in similarly crass form: "Should AIDS somehow deeply invade heterosexual populations elsewhere, Africa has a stark lesson to teach about how suddenly and inexorably the disease can erode and destroy the comfortable assumptions and familiar habits of a more advanced culture that believes itself immune to the most primitive- and frightening- forces of nature." This is a muddled, and badly written conclusion, but, in addition to the Africa-as-lesson trope, Serrill seems to be suggesting that the West is a more advanced culture, far removed from primitive and natural Africa yet still fragile and vulnerable, with AIDS capable of returning it to the primitive 'Africanised' state from whence it came!

**The Use of Florence's Photograph**

Finally, in this analysis of this particular moment in the 'AIDS in Africa' media discourse, I wish to turn to a specific discussion of the photographs used to accompany the above articles, in addition to those generated by Hooper and Neveu's 'AIDS safari' and the image of Florence in particular. It is evident that the discourse drew upon a disproportionately large number of photographs of single women or nursing mothers, each apparently 'suffering from AIDS.' The possible discursive reasons for this selection have already been examined. Here, I am, instead, concerned with the likely semiotic effects of this imagery. Hooper argues that his harrowing portrait of Florence would, if shown worldwide, demonstrate that AIDS is a threat to all, force
reflection and behaviour changes upon complacent heterosexuals, and thereby save lives. Is this likely to have been the case? And, are there any other implications stemming from the use of these photographs in conjunction with the news text and captions described above?

This nature of this relationship between text and photographs is key in understanding the overall impact of the media discourse. Approximately one third of the newspaper space devoted to each 'AIDS in Africa' article is taken up with large print black and white photographic imagery. This imagery sits, as has been shown, within the context of a particularly offensive, frequently racist and sexist discourse on Africa. The text inflects and shapes the meanings granted by the reader to these photographs. Thus, a particular news image is not necessarily stereotypical or racist by nature. It derives some of its meaning from its context and it is not inconceivable, therefore, that the same image of Florence could be used for radical ends if placed within a different narrative. Captions, in particular, are of crucial importance since they constitute informal instructions to the viewer on how to read and interpret that photograph. But photographs, in turn and given their predominant role in the news media, can also add meaning or inflection to the text. The two therefore exist in a complex dialectical relationship with the reader. Unfortunately, the discourse under examination is site of both stereotypical text and similarly tended, certainly not contradictory, photographic imagery. The signs are not hopeful; quite literally, in this instance.

To add to the formative images and articles documented above, images of Florence taken by Ed Hooper appeared in five further 'AIDS in Africa' media specials, issued within the same time period, with two of these articles written by Hooper himself. A brief outline of these images and articles fills out my analysis of the media discourse and further illustrates its monotonously offensive nature. However, though I aim to discuss the photographic imagery appearing as part of this discourse, I do not wish to reproduce any of the photographs of Florence or the other women described above. Once I knew how the photograph of Florence was taken, I felt increasingly uncomfortable and voyeuristic looking upon it. To reproduce it, or others that are similar in

40 Interview with Ed Hooper, 16/2/94.
composition and content, would simply not feel right. She has been exhibited enough. My scholarship partakes of the exactly the same ideological constructs it seeks to criticize and also acts to constitute Florence as object of analysis. I may be engaging in critique, but I am interested in Florence for the same reasons as Hooper and his editors - as 'black African woman with AIDS.' Similarly, just as Hooper gained personally from her photograph, I also hope, indirectly, to gain a qualification upon the same foundations. The exhibiting of Florence here would not, I believe, be legitimated by any claims to exception on the part of 'scholarly-ness'. This would merely re-confirm a positivistic belief in what one sees as unproblematic - an ironic turn in the light of my earlier comments on Gould's work. The knowledge of how Florence's photograph was taken, though useful for critical purposes, operates only on an intellectual level. It cannot, unfortunately and tragically, put humanity back into the photograph. Description of the photographs will therefore have to suffice.

Florence's photograph first appeared in The New York Times in September 1986 alongside a short article written by Hooper himself, filed from Uganda and entitled "An African village staggers under the assault of AIDS." As with all the other articles discussed, there is here both a conflation and simplification of geographies. Uganda becomes the whole of Africa and in turn, 'Africa', the imaginary, becomes Uganda. In the photograph, Florence has no discernible expression on her face. She is kneeling and facing to the right on the ground outside her house. She is very, very thin and resting on her knees is her baby boy. The child is naked, having been "unwrapped" for the benefit of the cameras, also very thin, and he has his eyes closed. The photograph is captioned, "Florence Nassaka with her 2-month old child in Kyebe, Uganda. Both are suffering from AIDS."

The rest of Hooper's article closely resembles sections of the 'AIDS safari' he documents in Slim, although the conventions of the media do not permit him the same degree of partial reflection upon his actions as in his own book. He states, "The funeral of Mirina Nakalawa was just beginning in

the compound tucked away among the matooke trees and coffee bushes. Her body had been wrapped in bark-cloth, according to local tradition, and was laid out on a bed in a small room. Beside her, the women in her family were keening softly. Outside, the men sat in the shade of a tree, some of them getting quietly drunk though it was only mid morning." Thus, the reader is privy to the same journalistic invasion and intrusion, but not permitted to see exactly how Hooper has gained access to this private occasion or to read how he feels. Instead, it is as if Hooper, and therefore the reader, is a silent and invisible witness to the events described. This is the journalistic God-trick in action, but, in contrast to his supposed value-less and objective stance, Hooper introduces judgemental morality into the subtext, commenting on the men's mid-morning drunkenness.

He goes on, "Florence was sitting in the sun outside her neatly kept hut of mud and stones, holding her two-month-old boy, Ssengabi, who was wrapped in a cotton sheet. Until a year ago, Florence had been a vivacious woman nearly six feet tall. She now appeared shrunken, her skin drawn taut around her skull. Very slowly, she unwrapped Ssengabi. He was pitifully tiny; the bones of his arms and legs showed clearly and loose folds of skin hung from his buttocks and thighs." Once again, there is no space given to Hooper's personal reflection on this scene or the unfolding events - it is as if Hooper is not bodily present. This journalistic abstraction and bodily absence is in stark contrast to the repetition of the same uncomfortable degree of bodily surveillance and description enacted in many of the 'AIDS in Africa' articles, which, without any wider contextualisation, acts to reinforce the discourse's tendency to position AIDS as innate to and essence of 'Africa'.

Florence's photograph next appeared in November 1986 in the *Newsweek* 'AIDS in Africa' special, titled "Africa in the plague years." The article was written not by Hooper, but by *Newsweek* staff reporters and the photograph was supplied to the magazine by Hooper's photographic agency. It appeared alongside the caption, "Two victims: Uganda barmaid and son."

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The photograph has here undergone a significant shift in literary context and, therefore, in meaning. Within Hooper's article above, Florence's photograph is illustrative of the truth of a particular moment: Hooper's encounter with her in Kyebe. Her body bears witness to its occurrence and to her own condition, to the existence of 'AIDS in Africa.' But, since the photograph so closely resembles so many others seen in the Western media connected to 'disaster' stories from 'Africa' and no wider, more sensitive explanation for the existence of 'AIDS in Africa' is provided within the text - just more stereotyping and naturalising - there is also nothing to prevent the photograph being read, at a more general, mythic level, as situating AIDS as simply the next woe in line to strike 'Africa' and explaining it as an innate disease of 'Africananness'. In the Newsweek story, Florence is nameless and tagged simply as a typical "victim" of 'AIDS in Africa'. The photograph therefore just performs at the latter, mythic and stereotypic level. In fact, Florence's photograph is probably used because it is such a good stereotype. The painfully thin but stoic mother and son look exactly how 'African AIDS victims' should look. In this case, they bear witness not to the truth of their own encounter with Hooper, but to the apparent actuality of life in "Africa in the plague years" - 'Africa' is clearly suffering, but as one would expect. However, the photograph does not just bear witness in this manner. Its stereotypical nature spins off into a particular explanation for the situation and, as above, since the text itself contains no wider explanatory context for the existence of the image or the condition, the photograph itself serves to reinforce a reading of AIDS as simply innate to and essence of 'Africa'. The Newsweek report contains very little political, medical or economic information about the supposed epidemic and, like so many of the 'AIDS in Africa' stories, frames its account within an extremely limited spatial and historical context. The article is filled out with similar victim iconography - anonymous "emaciated patients in a Ugandan AIDS ward" and "suspected AIDS victims in Zaire" - and another example of a journalistic 'safari' through Rakai in Uganda with its resulting intrusion, invasion and surveillance: "A typical victim is Teresa Namaganda, wasting away in her bed from months of 'slim disease' in the village of Kinyaga . . . In the tiny village of Simba, 24-year-old Gertrude Nalubega, a former housemaid, lies on a bed of straw. Once amply endowed she is now a gaunt woman who can barely keep her food down." The central function of this discourse seems
to be the exhibiting of "typical victims", as both witness to, embodiment of and explanation for 'AIDS in Africa.'

In June 1987, Florence's photograph was next used in the 'AIDS in Africa' special run in The Independent. Titled, "This march of death will scar a generation" and written by Mary Anne Fitzgerald, this one-page article used Florence's image as centrepiece. The photograph was captioned, "Africans call it 'slim disease' because of its emaciating effects." Thus, Florence's photograph is used, once again, because of its stereotypical nature. She and her son are 'quite obviously' thin and bear witness to the "emaciating effects" of "slim disease", and they are 'quite obviously' "African" too - after all, they look remarkably like so many of the other images of African women shown in the Western media. The photograph therefore serves the same purposes of evidencing, illustrating and explaining both the story and 'AIDS in Africa' as a whole, and performs this function solely within the realms of myth, stereotype and imaginary. The surrounding text does nothing to counter this tendency; and, in fact, exacerbates and amplifies it. Fitzgerald remarks that "evidence points to Central Africa as the well-spring for the Aids virus on the continent" and that "these doomsday predictions are coloured by a complex mosaic of traditions, taboos, poverty, political upheaval and economic instability that are the continent's hallmarks. This 'African condition' as it is sometimes collectively called, makes it difficult to assess the incidence of Aids and to curb its spread." So, AIDS is, apparently, both bubbling up from within the continent itself and enabled by the "African condition." Difference on the continent is at once conflated and collapsed, and poverty, instability and upheaval are portrayed as innate to, and essence of 'Africa', rather than the workings of rational political and economic factors, as would presumably be the case in the West. Fitzgerald seems here to be writing, instead, about 'Africa' the colonial imaginary - a place capable of miasmically generating a 'new' disease.

Further photographs of Florence appeared in May 1988 on the cover of The Washington Post's Weekly Journal of Medicine, Health, Science and Society next to the headline "Out of Africa", as a

prelude to a story by Philip J. Hilts entitled, ironically in the light of the photograph on the front cover and the messages about AIDS and origins given off by the headline, "Dispelling Myths about AIDS". The photograph was also used by The Independent on Sunday in conjunction with an article written by Hooper himself at the time of the publication of Slim - April 1990. The piece was titled "The villages of the damned" and was remarkably similar to his earlier article in The New York Times, discussed above, with his 'AIDS safari' and visit to the three women described, but without the personal reflection that appears in Slim. The title of the article echoes other metaphors used within this media discourse, of AIDS as 'apocalypse' or 'plague', visited upon a physically and perhaps morally unviable population, although within the article itself Hooper gives the issue a fairly sensitive reading and avoids any such crass positionings. The photograph was captioned "Florence and her baby son, Ssengabi, at Kyebe in 1986. Within six months, both were dead."

The 'AIDS in Africa' media discourse therefore contains an extraordinary number of classically composed and stereotypical images of 'African women' as silently suffering 'victims', set within text that serves only to amplify this stereotypical tendency. These news photographs perform a number of semiotic functions within the media discourse, and they are integral to its overall effect on the reader. Hall, Margolis and Webster argue that photography is unique in its fusion of both symbolic and iconic functions, and it is this fusion that gives them immense semiotic power within this, or any, media discourse. The iconic function grants photographs considerable force or 'thereness.' They are deemed to be objective, a witness to actuality. News photographs are thought to transmit an authentic reality to the reader, denoting that which is. In contrast, their symbolic function is generative of myth, triggering emotional content and meaning beyond the

45 The Independent on Sunday, 1 April 1990, pp.9-10.
46 Hooper states that he did not choose this title. He handed his copy over to the newspaper and subeditors set the headline. As with the packaging of his book and the caption applied to Neveu's photograph of Beatrice by The Times, it seems to be the case that a more sensationalist, and presumably marketable, slant is often put on the work of the journalist by the newspaper's staff. Interview with Ed Hooper, 16/2/94.
ability to describe verbally. This function does not involve new knowledge about the world; the ideological and symbolic concepts embodied in photographs and texts produce recognitions of the world as one has already learned to appropriate it. Photographs pull on and trigger ideological and mythic associations, resonate within the realm of the reader's 'already known' and further universalize and valorize the subjects and associations triggered. This symbolic function therefore sees photographs connote, as well as denote, and they are thus simultaneously vague and precise in their meaning.

The iconic, precise function of news photography adds authority to the articles and simultaneously guarantees and underwrites the narrative's 'objectivity'. The photograph is, apparently, a powerful record of the 'facts' relayed in the text; a rubber-stamping of their veracity: 'this really happened, see for yourself!' News photographs are thus a rhetorical device and a key part of the journalistic God-trick, since they help to neutralize or disguise the ideological function of the newspaper and convince the reader of the 'objective' nature of the particular story. The nature of this powerful tricking iconic or rubber-stamping function is exposed by the manner in which Florence's photograph, because of its stereotypical nature, is used to testify to the veracity of so many stories, 'facts' and 'truths', and in so many ways: when alive, when dead, as Florence, as victim, as barmaid, as mother, as African woman, as thin, as emaciated, as suffering . . . Similarly, Beatrice's photograph is used to testify to the 'truth' of the existence of dying children in Uganda even though this 'truth' bears no relation at all to the literal, as opposed to representational, content of the image.

This 'objectivity' is enabled by the effacement, in the image itself and in the accompanying text, of the specific social engagement resulting in the photograph: the negotiation between photographer and subject. The inclusion of this engagement would reveal - as can be seen from the information Hooper gives in Slim on the photographing of Florence - that the image is the highly specific product of a particular moment and a situated individual, and that the taking and selection of that photograph was therefore an intrinsically ideological, power-crossed act. Thus, by appearing to witness an event or situation unproblematically, photographs suppress their selective, interpretive, ideological function. The iconicity or 'thereness' of news photography, perhaps even more so
than the 'objective' rhetorical stance adopted in the accompanying text, tends to overpower the
reader's critical faculties and disguises the semiotic work done by the photograph on the mythic,
ideological and symbolic level. The photograph seeks "a warrant in that ever pre-given, neutral
structure, the real world" and uses this warrant to launch, surreptitiously but powerfully, into the
symbolic dimension.48 The news photograph is thus able to function as both the final term of the
newspaper's denotative chain and as the first term in the potentially dangerous connotative,
symbolic, mythical and ideological dimension. I wish to focus on three possible derogatory and
intertwining ideological connotations that may spin off from the photographs of female 'victims'
used in so many articles in the 'AIDS in Africa' discourse. But, in contesting this imagery, it is
still vital to hold with the partial truths of these images. To dismiss them entirely would be to deny
the suffering of those framed within. Critique must therefore take place not in relation to the 'truth'
of the image, but in relation to the conditions of its literal and aesthetic construction, its
surrounding context and to its social effects.49

Firstly, these photographs focus explicitly on a single woman's body and, often, her baby. Hall
argues that this focus on the body inflects or displaces the story away from its political point.50 He
describes the use of this manoeuvre or transformation in many different situations and believes that
it is one of the most powerful vehicles in the rhetoric of news photography. In this case, these
women's bodies are offered as evidence of 'AIDS in Africa' but they also constitute its boundaries,
which are therefore drawn far short of political, economic and medical factors such as government
inaction, inaccessibility of health care, racism and sexism. This personalised, apolitical and
isolationist framing of 'AIDS in Africa' is, as has been seen, compounded and reinforced by the
spatial and historical isolationist framing of the situation in the text, together with the tendency to
naturalise AIDS as essence of Africa rather than explore politico-economic reasons for the apparent
epidemic. Crimp analyses images of people with AIDS in the U.S., but his words still apply here.

48 Hall, S. 1973: "The determination of news photography" in Cohen, S. and Young, J. (eds.), The Manufacture of
50 Hall, S. 1973: "The determination of news photography" in Cohen, S. and Young, J. (eds.), The Manufacture of
He argues that, "the privacy of the people portrayed is both brutally invaded and brutally maintained. Invaded, in the obvious sense that these people's difficult personal circumstances have been exploited for the public spectacle, their most private thoughts and emotions [and bodies] exposed. But at the same time, maintained: the portrayal of these people's personal circumstances never includes an articulation of the public dimension of the crisis, the social conditions that made AIDS a crisis and continue to perpetuate it as a crisis. People with AIDS are kept safely within the bounds of their private tragedies."\(^{51}\) This photographic focus on the isolated person acts to abstract the experience of living with AIDS away from the determining context of health care provision, the state, politics and economics. It also acts to construct boxed, framed and isolated 'victims': "whether we are shown black Africans or American gays, the person with AIDS is invariably imprisoned within the demeaning category of the 'victim', in which he or she is stripped of all power and control over the actual complex meaning and dignity of an individual's life."\(^{52}\) The sheer weight of images of people alone, suffering, ravaged, labelled as 'victims' and apparently resigned to their deaths may reinforce a sense of hopelessness in the reader and result in inactivity, since the situation appears to be both private, not political, and to be a tragic, foregone conclusion. This possibility clearly runs counter to Hooper's hopes for his photograph of Florence.

Secondly, news photographs are, in addition to their pretensions to depict a pure or whole reality, intrinsically aesthetic devices. They follow formal rules of artistic composition and content, so, for example, "a mother holding her starving infant is photographed in the manner of the Pietà evoking not so much pity as the acknowledgement of the aesthetic representation of pity. The photograph is not the sign of starvation, but the sign of a sign, removing itself from the reality of starvation as it strives towards iconicity."\(^{53}\) Spurr, here, was discussing stereotypical 'Third World' 'victim' imagery, but he could, almost exactly, have been discussing several of the images of women that


appeared in the newspapers alongside 'AIDS in Africa' stories, including Hooper's photograph of Florence. There is therefore a risk that these images and, in particular, the photographs of Florence, are so 'obvious' in their semiology, so stereotypical, so resonant and connotative of other images, both photographic and classical, that they merely act to aestheticise these women's bodies, their suffering and 'AIDS in Africa'. Indeed, it is probably this incredibly resonant, classically satisfying nature that ensured the image of Florence would be used in so many different publications. There is little in the text surrounding the images to counter these stereotyping tendencies.

More specifically, these images act to boundary AIDS within the unique body of the 'African'. These 'victims' are clearly 'African victims', with a special and distinct set of attributes and connotations. This leads to a third set of derogatory ideological connotations which resonate with, draw upon and flow from the legacy of Western colonial and neo-colonial images of and discourse on 'Africa' and the 'African'. Images almost identical to those of Florence, Josephine and Beatrice have been seen so many times before in the Western media. These new photographs are read and used within this legacy and, in composition and content, themselves "fit neatly into the pre-existing Western image of a wasting continent peopled by victim-bodies of illness, poverty, famine."54 These bodies bear witness to the apparent existence of 'AIDS in Africa' but also put a distinct interpretativeslant on the disease, the place and the people, which overlays and reinforces the de-politicising personalisation arising from both their content and composition and from the limited framing within the accompanying text. These stereotypical images of the 'African woman' bring powerful imaginary personal and geographical attributes to bear upon the situation, isolated from any relevant social and political context, as definition of, and explanation for, 'AIDS in Africa'. This, in turn, reinforces the validity and applicabilityof this imaginary. So, 'Africa' is positioned as place of woe, elemental suffering and hopeless travail and as innate generator of disease; 'Africans', and women in particular, are, once again, pictured as silent, emaciated and listless victims, awaiting their inevitable and natural fate, a people already dead to all intents and purposes;

and AIDS, though variously seen as sprung from the land itself or externally visited on a 'deserving' people, is pictured as the next woe in line to strike the continent, essence of the land and people. AIDS and Africa are thus rolled up by the text and photographs of the media discourse into a neat self-determining package, explained within the realm of myth and ideology and without recourse to wider political, economic and medical factors.

Anxieties and Ambiguities

Having traced a path through the newspaper text and images that form this 'AIDS in Africa' discursive moment, it is necessary to step back and attempt to reflect upon the discourse as a whole, rather than upon particular fragments of it. From this latter position, the discourse reveals a monolithic and repetitive veneer of assertiveness and offensiveness - with 'Africa' and the 'African' positioned as objects of this relentless and derogatory sledging. Yet, behind this veneer, the discourse is riddled with fissures, friction, tension, ambiguity, logical inconsistency, anxiety and contradiction.

This discursive complexity and contradiction stems from the nexus of meaning produced, at that specific moment, by the juxtaposition of 'Africa' and 'AIDS'. The economic and geographical nature of the discourse results, once more, in a Western chronicling of 'Africa', and this, in turn, unavoidably situates the discussion within the legacy of centuries of colonial discourse upon that continent. 'Africa', the imaginary, is an immensely powerful and resonant construct within the Western consciousness and the images and texts produced within the discursive nexus do not escape its forming and shaping influence. In fact, they act to newly encode and legitimatemany existing colonial and neo-colonial positionings, framings and understandings of 'Africa', and, in this process of encoding and legitimating, also freight in many of the ambiguities and ambivalences latent within 'Africa' the imaginary. Stereotyping of this nature is far from a straightforward representational process. Bhabha, for example, argues that the colonial power is subject to the effects of a conflictual economy and that the colonial stereotype or trope is a complex, ambivalent, contradictory mode of representation, as anxious as it is assertive. The representations then
constructed within this economy will therefore evidence a profound ambivalence towards "that 'otherness' which is at once an object of desire and derision."55 This ambivalence and contradiction certainly manifests itself within the 'AIDS in Africa' media discourse, where 'Africa' appears as discursive site for an anxious play between sameness and difference, desire and disgust.

It is likely that many Western media representations of 'Africa' - whether portraying famine, disaster or war - would evidence the same anxieties and ambivalences, with these ambiguities also stemming from the colonial discourse upon which the representations draw, often quite directly and blatantly. However, the 'AIDS in Africa' discourse seems to add an extra twist to this anxious play of same and different. The addition of 'AIDS' to the nexus both amplifies and exacerbates this play and makes each of the contradictory ambivalent feelings about 'Africa', in turn, more pointed and purposeful than is perhaps the case in general media representations of the place. 'AIDS' brings its own epidemic of signification to the discursive moment, generated as individuals and societies attempted to grapple with what, exactly, this apparently incurable and seemingly inexorable and fatal disease meant.

The 'AIDS in Africa' story is frequently relayed to the Western reader as a conscious lesson for 'us', white Western heterosexuals, to learn; and this lesson is therefore centrally founded upon a premise of sameness: that 'we' are the same as 'them' and consequently vulnerable to exactly the same patterns of disease. However, not only is this premise of sameness founded upon flawed assumptions [assertions of sameness can be motivated by ignorance and racism just like assertions of ineluctable difference] and revealing of selfish motivations [with Africa presented as a hopeless case, let 'us' concentrate upon saving ourselves], it also seems to be, at all turns, undercut and undermined by strenuous amplification of the colonial discursive tendency to assert fundamental and offensive differences between Africa and the West. These assertions seem to be motivated by definite but ultimately indeterminate high anxieties, including, perhaps, a psychological desire or

need to 'other' AIDS within Africa, blame the people there for its arrival upon the world scene and then barricade or confine it metaphorically within that place. The 'AIDS in Africa' media discourse, like colonial discourse in general, thus says as much about the West as Africa, and is riven with the tensions of individuals and societies attempting to battle with the metaphorical and psychological implications of 'AIDS', with this battle enacted upon the terrain of the imaginary, 'Africa'. The 'Africa-lesson-same/Africa-not-lesson-different' contradiction provoked by 'AIDS' overlies and amplifies very similar, pre-existing contradictory impulses latent within colonial discourse on 'Africa'. In effect, therefore, the addition of 'AIDS' into the general Western media discourse on 'Africa' acts to turn up the volume on its anxious and contradictory assertions of sameness and difference and on the many individual stereotypings and positionings used as evidence for these assertions.

Yet another tension and trigger of complexity is added to the 'AIDS in Africa' media discourse by the contradictory demands of the medium itself. These newspapers couch their work and role within the rhetoric of objectivism and an altruistic search for, and uncovering of, the Truth. This rhetorical stance disguises the fact that the news is neither objective nor a mere reflection of reality - it is intrinsically situated and socially constructed. This is not to deny the possibility that 'socially constructed' news can then help; even, for example, in improving the lot of those people with AIDS in Africa. Altruistic motives do drive some elements of the 'AIDS in Africa' discourse. But it must also be recognised that these stories and pictures are commodities too, intended to attract readers and to be easily consumed. This money-making function seems to be just as big a formative influence in the 'AIDS in Africa' discourse as altruism given the number of cheap and easy stereotypes resorted to, and to the level of gossip, racist hearsay and titillation used to underpin supposedly well-researched articles. The nature of the discourse as commodity is therefore likely to act as a further amplifying boost to some of the assertions of 'strange and fascinating' difference which span it.

The juxtaposition of 'AIDS' and 'Africa' within a media discourse therefore bloats and strains the resulting nexus with meaning and metaphor, and criss-crosses it with amplified tensions, fissures
and contradictory impulses: of sameness and difference, of distance and closeness, of disgust and desire, of fear and pity, of altruism and greed, of an urge to help and an urge to stare, of hope and hopelessness, of pasts and possible futures, and of what is deemed natural and unnatural for particular societies and people. These contradictory and ambivalent impulses both work themselves out within the individual representations produced and are re-triggered by them. So, for example, Africa is at one and the same time portrayed as the same as the West and therefore a useful lesson to 'us', but also as land of innate and essential woe, travail and disease, intrinsically different to the West and, to all intents and purposes, a hopeless case. This stress on offensive difference tends to overwhelm the message of the lesson. Similarly, Africa is seen as the cradle of civilization, the source or birthplace of all human life and also as the source of its potential death, in the form of AIDS. The West is pulled towards Africa and is itself sourced there, but at the same time pushes itself away and attempts to stress, again, its difference and, hopefully, its subsequent safety from contamination. A further twist to this discursive push and pull is the hope, voiced in several of the articles, that the cycle of life and death will turn again and that Africa will also prove to be the source of life in the shape of a vaccine or cure for AIDS. Africa is thus seen as both mother of life and of death; desirable, benevolent and promising on the surface but deadly, treacherous and dangerous underneath. This ambivalent play of disgust, danger and desire winds itself right through the media discourse.

Some of the above articles are fairly specific and name Africa as likely source and origin of AIDS, while others perform a more subtle dance, carefully balancing the words of 'experts' and 'researchers' but ultimately, in their subtext and choice of metaphor, sourcing AIDS in Africa equally conclusively. However, when the articles attempt to flesh out originary mechanisms, they run once more into a morass of contradictions. So, AIDS is represented as coming from both without and within Africa, from above and below. The former positioning sees AIDS as a plague externally visited upon the continent with the resulting connotations that [Christian] God is punishing its people, presumably for their unnatural and immoral sexual practices and the chaos of their society. This metaphorical positioning is contradicted, often in the same article, by representations that suggest that AIDS spewed from within the land itself and is, therefore, the
very essence or nature of Africa. Some articles then attempt to elaborate on this miasmic generating mechanism and link its operation to the impact of modernity on the continent. This elaboration sees AIDS generated within the heart of Africa, but latent and harmless until development and urbanisation flush it out of this natural hiding place. Africans, apparently, either cannot cope with modernity or they have failed to develop properly, with the result that the natural behaviours and balances, appropriate to both primitive, tribal Africans and a restrained and cultured modernity, are upset, unleashing AIDS to prosper in this chaos.

It is perhaps, however, dangerous to lay too much emphasis upon the tensions, illogicalities and contradictions within the motivations for the 'AIDS in Africa' discourse and appearing, on close examination, within the representations themselves. Again, to over-stress complexity at this detailed level is to detract from the simple fact that this discourse is site of many, many crass and offensive racist and sexist representations. Likewise, to proffer anxiety as a trigger of over-assertiveness is not to provide an excuse for the violence within these images. Article after article portrays Africa and Africans in, perhaps ambivalent, but nevertheless stereotypical and derogatory fashion. Triggering disgust or desire, natural or unnatural, giving life or spewing death, driven sexual deviants or hapless and hopeless victims... they are grasped as functional objects and lose in this discourse time and time again. And loss within discourse is not simply a matter of then suffering, like the bearer of a bad passport photograph, an 'untrue' representation. These representations are a matter of life and death, and, on the grand scale, they form a monolithic and repetitive popular geography, crushing in its weight and single-minded in its stridency, assertiveness and offensiveness, even if this assertiveness betrays anxieties and hides contradictions buried within. This geographical knowledge, promulgated by the 'AIDS in Africa' media discourse and mirrored or echoed in many texts elsewhere, including the work of Gould, Shannon et al, Smallman-Raynor et al, and Hooper, is likely to provide the dominant frame of understanding of the 'AIDS in Africa' issue and situation for individuals in the West. Entering speculative territory now, what is the likely nature of this understanding and what effects could result from such a framing?
Conclusion

Text and photography combine and collude in the discourse to reiterate a positioning of Africa as the colonial imaginary 'Africa': site of elemental suffering, hopeless travail and innate generator of disease, whether spewed from below or drawn from above. Africans, in turn, become 'Africans': sexualised and gendered characters in a theatrical drama; silent, emaciated and listless victims awaiting their inevitable fate; and sexually promiscuous deviants driven by unnatural urges, hell-bent, quite literally. But always, whatever the variation, the African is merely a body or signifying husk - never a social subject - used, in every sense of the word, in conjunction with the connotations of the colonial imaginary 'Africa', to explain 'AIDS in Africa' at the level of myth and colonial hearsay and, perhaps, to entertain and titillate the reader. And finally, AIDS, whether from without or within, is presented and embodied as a disease of quintessential 'Africanness'.

This imagery may well be riven with tension and logical contradictions, but the colonial legacy means that it merely confirms what 'we' already know about Africa and Africans, and logic is therefore perhaps overpowered by the imagination.

The interweaving tendencies of these representations to personalise and 'Africanise' 'AIDS in Africa' diverts and inflects the discourse from the explicitly political and sites understanding and explanation of the situation within the realms of ideology and myth, rather than within the overt realm of politics, economics and medicine. This inflection away from an explicit and sensitive political treatment is emphasised by the consistently isolationist framing of the discourse, in which Africa is discussed as a separate spatial unit divorced from any deep or considered historical context, and compounded by the aesthetic form in which newspapers offer up these representations for consumption. It is also further aided and abetted by the journalistic rhetoric of objectivity within which the stories are couched. The iconicity of news photographs and the rhetoric used to tell these stories, reinforced by textual hints that Africans themselves are biased and overtly political when they speak on the same topic, acts to efface the author's direct presence in the narrative. This effacement removes all traces of the journalist's impact on and involvement in the situation. Also effaced, therefore, are the wider systems and powers that enable his/her presence...
in Africa, affect that continent via this presence, and link the journalist to the reader, generally as part of the same political and economic unit as the journalist, and more specifically, as consumer and partial funder of the representations constructed by them. Western readers are thus further distanced from the actuality of the 'AIDS in Africa' situation, and their understanding is constrained both by the fact that a key part of this actuality is closed off to them, and by the manner in which the rhetoric of objectivity disguises intrinsically constructed and situated representations as rational, reasonable and universal Truth, transparent and innocent of power.

However, Hooper's work alone revealed these media representations to be both personally and politically situated and socially constructed, and the above examination of them also reveals their content to be intrinsically political- anything but a transparent relaying of the Truth about AIDS in Africa. Power therefore embraces the making of these representations. Indeed, it is a huge and forceful implicit presence in the construction of the representations that enables such an explicit authorial absence within them and that motivates their distancing tendencies. On a small scale, traces of this forceful presence are apparent in Hooper's actions, thoughts and movements in Slim, and, on a larger scale, similar imbalances in power are evident in the simple fact that the 'AIDS in Africa' media, medical and economic discourse, as played out on a global scale, so often takes the form of a Western chronicling and overwriting of 'Africa'. Within the media discourse in particular, there are extraordinarily distinct lines of power drawn, in terms of who can speak and how that speech is then reported, and who is represented and in what form. The losses from this imbalance seem to fall all too heavily upon Africa, the African and the person with AIDS. Unfortunately, even this piece of work - a chronicling of the chronicling - is not excluded from a reification of this imbalance. However, to hint at the operation of power behind, within and through these 'AIDS in Africa' representations is not then to immediately lay the 'blame' at the feet at one or other of the 'evils' of capitalism, neo-colonialism or patriarchy. These factors are necessarily entwined within any explanation of the workings of this discourse, but the whole is far more complex and elusive than these coarse templates suggest. Hooper's work allows one to trace the first glimpses of the more subtle constellations of power and knowledge embracing some of these 'AIDS in Africa' representations, but further work is clearly needed to fill out this picture.
And further work is needed too on the possible impact of this shocking and distinct 'AIDS in Africa' popular geography - I can only speculate here.

These media representations will clearly have a range of impacts on different people. Limited good may stem from them if they trigger the reader into offering aid or assistance to the area or provoke behaviour changes. Unfortunately, however, the set of representations examined do not, on the whole, seem to give the reader much reason to act upon what they read about 'AIDS in Africa'. Neither in changing their own behaviour, since the positioning of the situation as a lesson and any altruistic motives in producing the representation seem to be overwhelmed by countervailing textual and subtextual messages and connotations that 'AIDS in Africa' is intrinsically different. Nor in intervening and acting to help Africa, since the weight, tone and nature of the imagery suggests that AIDS is on such a scale there that the continent may as well be abandoned to its fate and that death of this nature is simply Africa's lot, with another new agony likely to follow even if AIDS is stopped. The possibilities for intervention are themselves framed in extremely limited terms by these representations - sending money to a charity seems to be the only option directly offered to the reader. No other political purchase point or linkage is provided, and the possibility that structural or personal change in the West may be necessary to fundamentally alleviate some of the problems viewed is itself largely precluded by the isolationist framing of the discourse, the distancing and disguising rhetoric of objectivity used, and the essentialised and naturalised portrayal of 'AIDS in Africa' offered. Beyond this specific issue-related impact, the media discourse is also perhaps likely to reinforce insidiously racist notions of, and attitudes to, Africa and Africans in general, of 'Africa' as a space of degenerate uniqueness. As a result, even if benefits arise from the discourse for the subjects of it, they could be much more sensitively provided. Determining and then tracking these possible attitudinal changes through to concrete actions - for example, the introduction of stiffer immigration policies or simply the personal treatment of particular individuals - is an impossible task, but this does not mean that determining linkages are not present.
Similarly, further tracing the impact of the 'AIDS in Africa' media discourse through to Africa itself is an even harder task, but, again, though hard to identify, determining and causal linkages operate. It has already been demonstrated that the represented can themselves be deeply and shockingly affected by the construction of the representations - witness Florence for example - and by their impact when circulated too - Nancy and Susan would testify to this. More generally, the nature of the discourse is likely to shape and influence the broader climate of global public and governmental opinion, which, in turn, will determine financial and policy responses to the AIDS situation in Africa and to the continent in general. The representations will, undoubtedly, have drawn attention and funds to the problem, but, as discussed above, their nature, and specifically their tone of weary hopelessness and inevitability may perhaps have unduly limited such a response - 'after all, why bother?' - as well as precluding more fundamental changes. And, as Patton suggests, this particular framing, of helplessness and hopelessness may also enable and underpin other, more sinister responses; for example, the operation of ethically unsound vaccine trials.56 Much more work is needed to map out this terrain and confirm or deny these speculations. The Western 'AIDS in Africa' media discourse has also triggered something of a counter-representational offensive, from African governments and news publications.57 These counter-representations take issue with the strident sourcing of AIDS in Africa and attempt, in turn, to suggest that AIDS spread to Africa from the West via potential mechanisms such as germ warfare, tourism or U.S. military personnel. Hooper believes he himself was expelled from Uganda as part of this attempted counter.58 However, the Western media possess the power to shout the loudest. Where these counter-representations are mentioned at all, they are dealt with as 'propaganda', and, ironically, seen as an indication of the overtly politicised and biased nature of the 'African', in contrast to the supposedly apolitical, rational and considered representations of the Western media which triggered the flurry in the first place - further evidence of the unequally

58 Interview with Ed Hooper, 16/2/94.
distributed ability of individuals to abstract themselves in public and subsequently access the public sphere.

To turn to the power and implications that flow from these representations is necessarily to step on to the treacherous terrain of functional argument, but geographical knowledge has always been and will always be implicated in relations of power and caught within a wider social context. The 'AIDS in Africa' media discourse contains significant coterminous tendencies acting to inflect the narrative from an explicitly political treatment and distance the reader from the full actuality of the situation, but this inflection, and distanciation is itself intrinsically political, laden with all-too-real implications. The discourse also contains a considerable amount of highly offensive racist and sexist imagery. The crushing weight of these 'AIDS in Africa' representations will impact resoundingly upon people's lives, and to take issue with their nature here, though a start, is not enough.
Postscript
Postscript

"Imagine yourself now in the center of AIDS space blowing a big soap bubble around Cleveland..."

Perhaps the HIV spreads in this way, slowly capturing the counties in AIDS space until the multiple bubbles reach those on the periphery and the infection is everywhere"


"It is good to know that this epidemic which was going to wipe out Africa is just a big bubble of soap"


On the 21st of March, 1993, the 'AIDS in Africa' Western media discourse fractured. From the mid-1980s until that date, most 'quality' newspapers in Britain and the U.S. had run a steady stream of stereotypical 'AIDS in Africa' stories, specials and photography features, following directly in the pattern of the articles examined in the previous chapter. On one level, this discourse was riven with ambivalence, contradiction and tension, but it was nevertheless monolithic in tone and angle, with consensus on the 'fact' that Africa was suffering a extreme 'plague-like' epidemic of AIDS. This apparent extreme level of suffering deemed 'AIDS in Africa' newsworthy, and it was reported in a highly distinct, but offensive manner in nearly all the 'quality' newspapers. Firstly, as a lesson to the West that AIDS could and would spread heterosexually if precautions were not taken, although, as has been seen, it is debatable as to the extent to which this lesson hit home given the form within it was couched. And secondly, repetitively and derogatorily framed, understood and explained within the realm of a mythic and stereotypical 'Africa'.

This monolith was shattered by a story run in the well-respected London Sunday Times entitled, "Epidemic of AIDS in Africa 'a tragic myth.'" The story was filed by Neville Hodgkinson, the newspaper's Science Correspondent, and it represented the first shot in the newspaper's
'campaign' to question the fundamental premise that, until then, had bound media coverage of 'AIDS in Africa' together: that AIDS was rife on that continent. This *Sunday Times* 'campaign' is still running, and has actually broadened to call into question further foundational premises of the AIDS discourse, with shocking, but predictable results. I focus here on the articles in the 'campaign' dealing specifically with 'AIDS in Africa'. Other publications have tended to hold to the traditional 'AIDS in Africa' line and angle during this 'campaign', and some have been drawn into vitriolic debate with the *Sunday Times*. I close with a brief chronology, description and analysis of this frightening and complex debate. It both merits discussion in its own right and allows me to draw together many of the themes and issues explored in the previous chapters, not least the intrinsically political nature of representations of AIDS and the responsibilities of those with the ability to construct such powerful and potentially deadly images.

The first *Sunday Times* article was fairly tentative in tone compared with some of their later representations. Nevertheless, it declared, "Africa is not in the grip of an AIDS epidemic, and false assertions that the continent is being devastated by HIV are leading to a tragic diversion of resources from genuine medical needs, according to a growing body of expert opinion." This assertion introduces a number of themes played out throughout the campaign. Denying the existence of an AIDS epidemic in Africa will have drastic and obvious implications if their assertion turns out to be false, both in the West, where people are now given no reason to either alter their behaviour or act to alleviate the 'African' situation, and therefore in Africa itself, where people could die if a real epidemic is treated as myth in the West. The *Sunday Times* never addresses the political and potentially deadly implications of their words. Instead, they attempt to ground their 'campaign' in altruism - the articles are, supposedly, run for the public good, and specifically 'African good' since the myth of AIDS is causing a "tragic diversion" from genuine medical needs. The newspaper also exhibits a distinct lack of reflexivity throughout this 'campaign', neglecting to mention that they themselves were one of the voices making these supposedly "false assertions that the continent is being devastated by HIV" only months before. In making their 'new' assertions, the *Sunday Times* then hides behind the ubiquitous newspaper "expert". Presumably these "experts" are altogether different in calibre and authority to the ones
used earlier in the discourse to testify to the 'AIDS apocalypse' striking Africa! The *Sunday Times* conducts much of their narrative through ventriloquy. This allows them to evade responsibility for their utterances, and maintain a stance of pseudo-objectivity, based purely on the authority radiated by such titles and dependent on the disguising of the fact that they select and construct their articles from these disparate sources, actively choosing to give voice to some individuals and not others. The identity of the "growing body of expert opinion" gradually reveals itself in the course of the 'campaign', and they are a motley bunch indeed.

The *Sunday Times* goes on, "The challenge . . . will outrage much Western medical opinion, which points to 'heterosexual Aids' in Africa as a warning of what could happen elsewhere." Thus, their new angle on the situation is believed to undermine the first lesson to be drawn from 'AIDS in Africa' and install, in its place, a different lesson, to be emphasised in much greater detail in following articles: that the Western mainstream heterosexual population are unlikely to experience an AIDS epidemic. Only one member of the "growing body of expert opinion" shows himself here to back up this angle on 'AIDS in Africa' and his credentials go unexplored: "Dr Harvey Bialy, a leading American scientist with long experience of Africa . . . says there is 'absolutely no believable, persuasive evidence that Africa is in the midst of a new epidemic of infectious immuno-deficiency'"**, although no believable, persuasive evidence is provided to show that Africa is not in the midst of a new epidemic either. But, the *Sunday Times* does posit two possible reasons for the existence of the 'African AIDS myth.' Firstly, "that HIV testing is frequently misleading in Africa. The tests react to antibodies to malaria as well as HIV producing up to 80-90% false positives." And secondly, that these inaccurate African test results are then further combined with haphazardly estimated infection rates and inflated for political reasons, stating that, "because international funds are available for Aids and HIV work, politicians and health workers have an incentive to classify people as Aids sufferers."

This reasoning introduces a further series of ironies which also sound throughout the 'campaign'. The first is that in pointing to the inaccuracy of HIV testing in Africa, the conservative *Sunday Times* echoes much earlier comments voiced by radical critics of Western science's dominant role
in framing 'AIDS in Africa.', including Patton and the Chirimuutas.2 While science and the media initially presented 'AIDS in Africa' as apocalyptic, Patton suggested that this was an exaggeration for exactly the same reasons cited by the Sunday Times. This 'campaign' therefore sees the political field surrounding 'AIDS in Africa' warp and distort in an extraordinary and complex manner. For example, on 14th November, 1993, the Sunday Times published several letters from irate politicians and AIDS organisations arguing that AIDS in Africa is not myth, but they also published one from Wilmette Brown on behalf of the "International Black Women for Wages for Housework" who stated, "Investment in the myth of Aids in Africa enables disinvestment in overcoming genuinely epidemic diseases of poverty . . . As a black women's group, we consider the Sunday Times articles on the myth of Aids in Africa a public service."3 The second irony in this new discourse is that in the above statements there are the first hints of the newspaper pointing the finger of blame at those supposedly responsible for the generation of the 'AIDS in Africa' myth - African politicians who apparently inflate figures to attract aid money, and health workers who have a similar incentive to attract funds to their project! This represents another distinct flip in the 'AIDS in Africa' discourse. African governments are still portrayed as deviously and greedily politicising the situation, only this time they are believed to be inflating figures to attract aid, rather than disguising high levels of AIDS incidence to protect tourist revenue and their own self-image.

And, to cap it all, the final irony in this first article in the Sunday Times 'AIDS in Africa' series is that the story runs with a large photograph of two young children, captioned, "Aids victims in Zambia." However, in contrast to all the other newspaper images discussed earlier, these "victims" are instead depicted in the picture of health, smiling and eating. The photograph, connotatively anchored by its caption, powerfully evidence's 'AIDS in Africa' as myth; after all, if its "victims" actually look like this, there can surely be no plague.

All the same themes and ironies repeat in the second *Sunday Times* article on the 'AIDS in Africa' myth, which ran five months after the first, on the 29th August 1993. The story was again written by Neville Hodgkinson, but this time his copy was filed from Nairobi. It therefore includes supposed first-hand evidence of the 'AIDS in Africa' myth, and is considerably more assertive in tone. The newspaper ran the story as its page one headline under the ludicrous banner title "Babies give lie to African Aids", and then continued the story inside the paper under the similar, "Babies who survive cast doubt on HIV claims." Not only does this framing conjure up some ridiculous images in one's mind, it is an explicitly emotive angle on the issue, emphasised still further by the continued distinctive use of photography. As in all the 'AIDS in Africa' articles, news photographs perform a highly persuasive, rhetorical function. In this case, a group of smiling babies is captioned, "Smiles that confound the experts of doom . . . happy and healthy 'Aids babies' at Nyumbani hospice in Nairobi." The story and accompanying photographs frame the issue in an emotively confrontational way: "happy babies" versus "experts of doom", with the former apparently battling against the condemnation of the latter, and the latter perhaps almost disappointed that toddler deaths are not ensuing! Again, the story represents a startling flip in the 'AIDS in Africa' media discourse. Earlier, images of children, including Florence's son, Ssengabi, and stories of orphans, were used to persuade the reader of the dreadful Truth of the situation in Africa. Now, similarly emotive images of children are intended to directly counter this Truth. The discourse is site of a semiotic and rhetorical battle.

The article itself is based on the testimony of just one man, a priest who runs a Kenyan hospice. "Father Angelo d'Agostino is puzzled. He sits at the heart of Africa's alleged Aids epidemic with a hospital full of HIV-positive children who, health experts say, are condemned to die. Except that they are very much alive . . . in common with growing numbers of scientists and doctors around the world, d'Agostino is beginning to question whether HIV is really the killer it has been made out to be. He, like them, suspects that many 'Aids' cases are really old diseases given a new name." Again, the *Sunday Times* pits "health experts" against a "growing numbers of scientists

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4 *The Sunday Times*, 29 September 1993, pp.1, 6.
and doctors" and attempts, simply by mentioning these titles, to convince the reader of the weight of what they themselves say. It is as if they are merely and objectively reflecting a debate in the wider world to the reader. But newspapers do not reflect, they construct, and in this case censor and select who is reported and how. And by hiding the debate - if one exists - behind "experts" and "scientists", they distance the reader still further from the issue, which is presented as occurring in a Kafkaesque isolated and official intellectual realm, far above readers' heads. The reader can only watch passively as the debate is reported, await its "expert" resolution, and is given no political purchase point or means of gaining entry to an issue which affects them directly and may lead to life or death for many.

In this second article, the *Sunday Times* posits exactly the same reasons for the supposed existence of the 'AIDS in Africa' myth - inaccurate and inflationary testing for HIV in Africa, combined with further hints that health organisations and African governments are keen to see high figures for financial and political reasons. For example, they state,"Encouraged by WHO-funded units and numerous non-governmental organisations involved in the fight against Aids in Africa, doctors are reporting growing numbers of Aids cases. But researchers have not established the extent to which these are genuinely the result of a new virus, as opposed to a consequence of an intensification in long-established threats to health" [my italics]. And add, "a recent crisis announcement on Aids by the [Kenya's] health minister is seen within the international aid community as an attempt to win back donor sympathy and funds, according to the journal *Africa Confidential*"

The article then concludes with the self-righteous and extraordinarily unreflexive statement, "If the HIV theory of Aids turns out to be flawed, scientists may prove to have done Africans, more than any other people, a huge injustice." The *Sunday Times* is attempting a rhetorical manoeuvre that grounds its 'campaign' in altruism once again, and reinforces a conception of newspapers in general, and it in particular, as defenders of the public good - in this case, protecting Africans from scientists! They neglect to mention that if "the HIV theory of Aids turns out to be flawed", they, along with many other newspapers, will also have done Africans "a huge injustice." But the issue
is not quite this simple. The *Sunday Times* presents the situation as an either/or choice. Either 'AIDS in Africa' is apocalyptic or it is non-existent myth - a gross oversimplification and a reflection of newspapers' tendencies to sensationalise and search for confrontational extremes in the quest for a powerful and strong commodity/story. In many respects, therefore, the *Sunday Times* ais involved in a backlash - partly against themselves and the earlier frantic and unrealistic positionings of 'AIDS in Africa' as, for example, apocalypse! AIDS within a population is, as Peter Gould recognises, a slowly-developing condition, not a lightning-strike, but the former positioning, though more 'realistic', does not contain the necessary urgency to make 'good' news. As a result, this drama and urgency was added by the media via their frantic framing of the story. Perhaps, just perhaps, 'AIDS in Africa' is neither a 'plague' that will wipe out the continent as the earlier media discourse suggested. This overblown positioning, as has been shown, was one that owed much to myth itself. Nor, perhaps, at the other extreme, is 'AIDS in Africa' a complete fiction. Both extreme positionings carry dangerous life or death implications. It seems to be the media under investigation who are, above all, doing Africa "a huge injustice."

After the publication of this second article, other newspapers entered the debate. On the 9th January 1994, *The Independent on Sunday* published a direct counter to the above story. It was written by Steve Connor, their Science Correspondent, and titled "Paper accused of Aids 'distortion." 5 It continued, "A doctor [d'Agostino, the priest in the above story] who was quoted extensively by the *Sunday Times* to support its view that the Aids epidemic in Africa is a myth has denounced the newspaper for 'gross distortions' and misrepresentation... in a strongly worded statement to the *Independent on Sunday*, he condemned the *Sunday Times* and reaffirmed his view that HIV causes Aids and that there is a serious epidemic in Africa... He accused Mr Hodgkinson of having a "hidden agenda that became evident only at the time of publication"... He said he sent a fax to the *Sunday Times* to correct the errors in Mr Hodgkinson's article soon after it appeared, but received no acknowledgement and no correction was published."
In the meantime, however, the Sunday Times ran another massive spread, representing, to date, their most assertive revised statement on 'AIDS in Africa.' The story appeared in the 3rd of October 1993 edition of the newspaper, and was, once again, filed by Neville Hodgkinson, this time from Dar es Salaam, and carried as their front-page lead under the headline "African Aids plague 'a myth.'" 6 By this stage in their campaign, however, placing 'myth' within quotation marks seemed a ridiculous gesture, since the Sunday Times was quite clearly the motivating force behind this disturbing new angle on the 'AIDS in Africa' issue. In fact, the newspaper emerged from behind the words of others inside the paper, where the bulk of the story continued in a double page spread under the inch high heading, "THE PLAGUE THAT NEVER WAS." 7

As with the other articles in the series, the evidence for this strenuous assertion is extraordinarily limited. The whole story is constructed solely around the personal testimony of two French charity workers, Philippe and Evelyne Krynen, "trained nurses" who "head the largest Aids organisation for children in Tanzania" and have been working in the country since 1989. This "Aids organisation" goes unamed. According to the Sunday Times, when the Krynens first arrived in Tanzania they prepared a report on the AIDS situation there, which "presented a dramatic picture: children alone in empty houses emptied of adults, or abandoned into the care of grandparents; a football team destroyed by the disease." The Krynens state that this report then became part of the initial 'AIDS in Africa' myth, and was cited on television, in the press and by "Aids organisations." No citations are given. The Sunday Times then states, "Four years later the couple recognise their understanding of the situation was utterly wrong . . . Philippe now declares: 'There is no Aids. It is something that has been invented. There are no epidemiological grounds for it . . . Whenever I have been able to follow people reported to have Aids for any length of time, I have seen them cured. When you look into it, they are not really Aids cases. So where are these cases? Always in the hands of other people - hospitals, reporters, photographers . . . The world has been brainwashed about Aids. It has become a disease in itself, without the necessity of having sick people any more.'" But while quoting and then appearing to side with Philippe Krynen

7 The Sunday Times, 3 October 1993, pp.10-11.
inhis claim that AIDS is a complete myth, the article must still confront apparent evidence of AIDS-related illness and death in Africa. This is put down to the psychological effects of the myth: "Studies elsewhere in Africa have shown a close correlation between HIV-positivity and risk of illness, but the Krynen's think this may be a consequence of health workers - and patients - giving up hope in the face of an HIV 'death sentence.'" This is a remarkably unreflexive piece of writing. The "HIV death sentence" is one that has itself been partially written by the Western media and underpinned by the extensive use of 'victim' iconography. It may well have a detrimental psychological effect upon those so diagnosed and upon the treatment they receive from others, but this media implication goes unexplored. Similarly, the 'reality' that the Sunday Times opposes against this 'myth' is capable of killing too, but the paper does not seem aware of the potential weight or consequences of its words. There is also contradiction between Krynen's claim that there are no sick people and the apparent fact that an "HIV death sentence" is in operation. The article is a flawed and illogical muddle.

In order to illustrate the revised understanding - that AIDS is myth - the paper then prints a photograph of the Krynens surrounded by their apparently healthy, happy and smiling charges, and, once again, news photographs play a vital rhetorical role in the 'AIDS in Africa' discourse. The Sunday Times then goes on, "Dramatic testimony by two medically trained charity workers based at the "epicentre" of Aids in Africa has provided devastating new evidence against the view that the continent is engulfed by an epidemic of the disease. After five years in charge of 230 staff helping 'Aids orphans' in the Kagera province of northwestern Tanzania, Philippe and Evelyne Krynen have concluded that stories of Africa being in the grip of a new sexually transmitted disease are a lie. These latest reports underpin growing evidence casting doubt on the scale of Africa's Aids problem. Health workers and government officials, including Zimbabwe's health minister, increasingly see the scare tactics of the Aids lobby as diverting attention from more fundamental problems."

Here the Sunday Times again set up the 'AIDS in Africa' situation in dichotomised and confrontational terms. They are prepared to rely upon the testimony of two individuals based in
one province of Tanzania who argue that 'AIDS in Africa' is a myth in order to question "the view that the continent is engulfed by an epidemic" of AIDS. The actuality of the situation is unlikely to be represented by either of these media extremes. And, in addition, not only is the extrapolation of the Krynens' evidence across the whole of Africa ridiculous in the extreme, it is one the paper is only able to sustain through the boosting and sensationalising of this tenuous testimony by emotively labelling it "dramatic" and "devastating". Similarly, this single testimony of two individuals is given spurious weight when it becomes mysteriously pluralised as "these latest reports" in the article itself, and then used to supposedly "underpin growing evidence casting doubt on the scale of Africa's Aids problem." Little evidence, apart from the thin personal testimony of Doctor Bialy, Father d'Agostino [subsequently withdrawn] and now the Krynens, has actually been shown to the reader in the course of the whole 'campaign', although they are constantly reminded of its apparently snowballing background presence. If it is indeed "growing", it is only because it is being rhetorically inflated to the maximum by the Sunday Times. This is hardly objective, detached journalism, but then, at this stage in the media discourse, that should come as no surprise. And, though representing such a distinct departure from the previous media discourse on 'AIDS in Africa' and the line still taken by other newspapers, the Sunday Times exhibit the same derogatory tendency to conflate the diverse geographies and cultures of Africa and deal with the continent as a single homogeneous unit.

In explaining the existence and persistence of this 'myth', the Sunday Times at least resorts to an explicit political treatment, even if it then ignores the role of media itself in shaping the 'AIDS in Africa' discourse. In a sense, this explicit political treatment represents an advance over the previous media articles which attempt to explain the actuality of the 'AIDS in Africa' situation solely within the aestheticised, naturalised and essentialised realm of 'Africa', the colonial imaginary. But this 'political' turn is also, unfortunately, a small mercy, still extremely limited in scope and problematic in its implications. The media are presented as relaying the 'facts' of the matter all along, with governments and health organisations accused here of deliberately misleading the media and the public by distorting and inflating these 'facts' for selfish political reasons. The
accusatory and combative tone adopted by the Sunday Times in this article represents an upshift in the level of assertiveness with which they relate their narrative.

So, for example, "stories of Africa being in the grip" of AIDS are positioned as a "lie", suggesting that the Sunday Times sees a deliberative and manipulative agency behind the existence of the myth. Similarly, they point to the "scare tactics of the Aids lobby", whoever they may be, and thus present this group as an undemocratic, devious and threatening block who must be combatted, like previous ominous references to "experts of doom". The nature of this threat is filled out as follows: "Critics of these [World Health Organisation] estimates say they are often based on poorly conducted surveys, which are then inflated by empire-building Aids organisations and taken at face value by governments desperate for the foreign currency an Aids problem can attract." NGO and African governmental greed are, apparently, the motivational forces behind the existence of the 'AIDS in Africa' myth! Denying an apocalyptic problem or inflating a non-existent one, African governments do not win in this discourse.

The Sunday Times goes on, "Across Africa, the World Health Organisation (WHO) has a network of representatives in large, air-conditioned offices whose work has been increasingly dominated by Aids . . . the representatives often exert a lot of power, helping to channel funds from drug companies, donor agencies and the WHO itself, dwarfing local medical spending." The reference to "large, air-conditioned offices" is not exactly a subtle use of rhetoric, and highlights where the reader's ire is intended to be directed - toward the cool and spacious WHO. Further 'evidence' from the Krynens describes how their power plays itself out locally: "local people working for Aids agencies have become rich. They have built homes in Dar es Salaam, they have their motorbikes; they have benefitted a lot." And, unfortunately, though resorting largely to a dubious but nevertheless explicitly political explanation and framing of the supposed 'AIDS in Africa myth' prior to the publication of this article, here the Sunday Times adds in an extra level of explanation that once again portrays Africa and Africans in an offensive and stereotypical manner. They quote the Krynens discussing the children in their care. They state, "Families just bring them as orphans, and if you ask how the parents died they will say Aids. It is fashionable nowadays to say
that because it brings money and support." As usual in this discourse, there is no wider discussion of the economic and political context for the problems in Africa under examination. For example, why, if the above is true, do these people want money and support? This strand of the article is further illustrated with a large close-up photograph of a child clad in rags, staring enigmatically out at the camera. The picture is captioned, "Children in Africa are without their parents for many reasons - claiming to be Aids orphans can get them better treatment." This portrayal of African children as scheming and devious is particularly offensive and represents a dramatic reversal in the 'AIDS in Africa' discourse since similar images of children 'awaiting their fate' as 'innocent victims' were previously used to emotively illustrate the supposed all-consuming apocalyptic nature of 'AIDS in Africa.' These two sets of image, though almost identical in appearance, when semiotically and connotatively anchored and forced by different captions and context, fall at opposite ends of a rhetorical spectrum spanned by active guilt and passive innocence. The *Sunday Times* articles ludicrously position babies as agents who 'give lie' to AIDS and children as agents giving lies in order to successfully outwit science, medicine and the media for several years!

With this upshift in assertiveness and as a result of their more explicitly political treatment of 'AIDS in Africa', there comes an implicit change in the nature of the *Sunday Times* role in this discourse: from newspaper as simple reporter of the 'facts' to newspaper as defending and campaigning for the public good. In the earlier articles there were glimpses of the newspaper acting in this supposedly altruistic role, protecting 'Africans' from the psychological havoc apparently being wreaked by the 'AIDS in Africa' myth. But now, in this latest article, this campaigning role is adopted in a more overt manner and the nature of their public constituency undergoes an alarming switch as it becomes more clearly defined. The *Sunday Times* is now seeking to protect the reader's pocket from the grabbing hands of the faceless AIDS bureaucracy, and from greedy 'Africans'. This combination of a now explicitly politicised narrative and the resulting shift in roles of the newspaper is strangely both simultaneously disempowering, representing, in many ways, a retrogressive discursive step, and empowering too, representing, in other ways, a positive advance in the general 'AIDS in Africa' discourse. A consensual 'objective Truth' - that 'AIDS in Africa' is of serious 'plague-like' proportions and to be understood within a
framing that encodes and legitimates 'Africa', the colonial imaginary - is shattered by this 'campaign', all be it in a highly suspect and offensive manner. This Truth is then replaced by a series of truths, with various sides arguing for the preeminence of their own version of the actuality.

The shattering of the monolithic nature of the 'AIDS in Africa' discourse can be seen as particularly disempowering, and, as such, it seems to be a frightening raising of the 'representational' stakes surrounding the issue. A pessimistic reading of this potentially debilitating discursive impasse would perhaps conclude that the 'AIDS in Africa' discourse has reached its own relativist crisis of representation: an apparently irresolvable stand-off between 'AIDS in Africa' represented by Peter Gould's "soap bubble" and the same situation as represented by Philippe Krynen's "bubble of soap"! The latter "bubble of soap" is certainly no better a metaphor for the situation, it is still tinged in places with derogatory strands of colonial discourse, and it may actually, pragmatically, do more damage than a framing of the 'AIDS in Africa' situation as apocalyptic. At least with this latter framing, readers are still left with the option, however limited, of intervening and then assisting people with AIDS. Nevertheless, as has been shown, the sets of representations on both sides of the impasse carry many dangerous and derogatory connotations. They do not really offer much of a choice. And, with this shattering of the monolithic consensual Truth of the discourse and the subsequent acknowledgement of the explicitly politicised nature of all representations constructed within this discursive space, Truth, as grounds for action, presumably then becomes merely a question of who can shout the loudest in this representational stand-off, a matter of rhetorical combat. In such a situation, those most likely to lose are those who already seem to suffer most as a result of the various representations of AIDS and 'AIDS in Africa' investigated and yet who have most at stake in this discourse: 'Africans' and people with AIDS.

But a more optimistic reading of this shattering of the monolithic nature of the 'AIDS in Africa' discourse is possible too. In some senses, it can be seen as a particularly empowering fracture, provided it can be capitalised on. The Sunday Times 'campaign', at last, forces a wider acknowledgment of the intrinsically political and socially constructed nature of the 'facts and
figures' which frame 'AIDS in Africa'. This implicationspins off from one of the 'campaign's' central thrusts - that the supposed 'myth of AIDS in Africa' has been constructed by a particular political constellation - and parallels the tenor of my own arguments with respect to the representations of Gould, Hooper and the Western media in general, even though it differs radically in conclusions. Also, this shattering of the monolithic Truth of the discourse does at least admit, potentially, more complex and critical possibilities and explanations for the AIDS situation in Africa and, in itself, it starts to reflect the divided political and critical terrain surrounding the issue. A dominatory, derogatory and offensive framing of 'AIDS in Africa' is questioned, even if, unfortunately, there is then a subsequent attempt to oppose this framing with an equally problematic set of representations. At least a discursive space now exists between these two extremes, a space within which more sensitive representations of AIDS can perhaps be situated, negotiated and constructed. Hopefully, Geography will be able to respond. I started by examining the manner in which the discipline has attempted to deal with and represent AIDS and concluded that, disappointingly and surprisingly, the dominant and visible response of the discipline has come almost entirely from those working within its spatial science tradition and proved exceedingly problematic. I then examined some of the complex personal, political and popular geographies generative of, encoded in and legitimated by the 'AIDS in Africa' media discourse. With the advent of the Sunday Times 'campaign', these geographies fracture and warp still further, and Geography is now faced with an even more complex political and critical terrain to negotiate. But this terrain must be negotiated. As yet, there is no medical cure for AIDS, and there is no sign that one will arrive in the near future. Words and representations are, therefore, all that is available to ease the pain of the condition. Complex AIDS geographies call for a response from a more complex and critical Human and humane Geography which, like all of those shouldering the deep responsibility for the construction of representations of AIDS, must strive to construct more sensitive, ethical, situated and persuasive visions and representations; a Geography not for the "public good", this is neither specific enough nor adequately situated, but a reflexive and scrupulously self-critical Geography for the good, most importantly, of the HIV-positive individual and the person with AIDS.
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