

## *Introduction*

The highest as the lowest form of criticism is a mode of autobiography.

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I REALIZE, OR IMAGINE, that I have been researching and writing this book my entire adult life, maybe longer, often in ways that felt more like living than researching or writing. There have been many moments, long and short, of dead ends, false starts, frenzied spurts, overwhelmed abandoning, intellectual and political excitement and despair, lag and belatedness, and premature optimism. Waves of activism have surged and subsided. I have read of the end of AIDS many times, as its meaning and impact for various demographics have shifted—though it has also been difficult to think of friends, acquaintances, lovers, allies, and strangers as constituting “demographics.”<sup>1</sup> Survivor’s guilt happened and then stopped. Laws changed, medicine changed, policies changed, and continue to do so.<sup>2</sup>

Lines between reasoned argument and conspiracy theory got double-crossed. African truck drivers, the 4 H’s (homosexuals, Haitians, heroin addicts, hemophiliacs), migrants inter alia were to blame. Male circumcision was a cause then a prophylactic. Then, it was all structural determinants: racism, poverty, political economy. HIV-positive people could be organized into a political identity. They could not or should not be. The disease could be politicized and/or needed to be handled purely scientifically.

An impossible heterogeneity of human experience has been crowded together under the banner of HIV/AIDS, marked by different constituencies of care and neglect, indifference and hatred, guilt and innocence, to name a few, and then how to imagine talking to, for, from, and about those constituencies? On the one hand, efforts to combat the pandemic were seen to have been hamstrung by a deafening silence. On the other, AIDS was from the outset an epidemic of signification—a cacophony of pronouncements, symptoms, fears.<sup>3</sup> We needed to cut through the noise. Difficult internalized

group affects like shame and stigma were the blockages. We needed mourning and militancy to counter those. Governance was the problem. Governance was the solution.

The yoking of sex and death created a deeper psychic crisis in the possibility of imagining social reproduction at all. I could (and will) go on, but I have landed back—for now—on Dennis Altman’s assertion in 2000 that HIV/AIDS was best understood as *also a crisis of the imagination*.<sup>4</sup> The sites of that imagining of the crisis were/are manifold: most obviously the body itself in scientific and vernacular understandings partly produced by the long-standing ideological imaginings of race, sex/uality, the body politic in terms of both national and international political and social imaginaries, and then the political or public feelings, along with the personal/private ones that these contending imaginings stir, block, and disavow.<sup>5</sup> Much of this laundry list worms its way into this book that follows, falls behind, and gets ahead of itself. To begin archiving what this book asserts as a crisis in and for the imaginative faculties, I turn to some historical genres of cultural expression that privilege the imagination: novels, poetry, film, and to reading other genres that do not foreground their imaginativeness: beauty pageants, legal and policy documents, and memoir/testimony for what I riskily term their poetics.

I hope to mobilize the Audre Lorde of “Poetry Is Not a Luxury,” when she defines “poetry as the revelation or distillation of experience—not the sterile word play that, too often, the white fathers distorted the word poetry to mean—in order to cover their desperate wish for imagination without insight,” and when she locates in Black women particularly “an incredible reserve of creativity and power, of unexamined and unrecorded emotion and feeling.”<sup>6</sup> These insights underwrote what has been termed the “affective turn” in certain humanities and social science scholarship. Simultaneously the turn to the poetics of genres that disavow their own poetics emerges from the powerful Cesairean declaration that “poetic knowledge is born in the great silence of scientific knowledge.”<sup>7</sup>

Nearly twenty years ago, as I was starting to think about HIV/AIDS as a reading and writing project, I wrote about arriving in New York for graduate school, a decade or so earlier:

The huge and fascinating world of gay Manhattan was emotionally and intellectually difficult to negotiate. The early nineties saw the continuation of the devastation of the AIDS pandemic. Anti-retroviral combination therapy was not yet widely available. I met gay men my age or younger (I was in my mid-twenties) or gay men in their fifties or sixties. It felt like the half-generation older

than me were dead or sick or dying. I briefly dated a man in his mid 40s who recounted that in 1989, he attended at least three funerals a week. At the same time there was a wealth of activism, intellectual inquiry, and quotidian practice around HIV/AIDS that was on the periphery of my consciousness. I remember bowls of condoms on coat-check counters at every gay bar and animated and often combative conversations about testing, safer-sex, seroconversion, status disclosure, monogamy, serodiscordant dating, promiscuity, drug-trials and the like, not realizing that I would revisit many related issues in a radically different context when a decade later I would begin writing about the HIV/AIDS pandemic in South Africa which is now reported to have an infection rate of 25% and 32% in KwaZulu Natal province. I see part of the intellectual challenge of my current work as putting an essay like Douglas Crimp's "How to have promiscuity in an epidemic" in dialogue with questions of transactional sex and migrant labor to see what parts of a theory of sexuality as a collective rather than privatized set of norms and practices can travel or can travel only in a developmental and imperialist way and which ones cannot travel at all.<sup>8</sup>

Rereading that paragraph above, I am now struck by my coy evasion of the laboratory of "sex itself": the unthinkability of not using a condom, the occasional flashlight-bearing safer-sex monitor in backrooms intoning "Lips above the hips, gentleman," the forms of sociality in gay urban worlds that emerged and did not from visits to what a friend somewhat poetically termed "the petting zoos."<sup>9</sup> I will respect my earlier reticence. Out of that concatenation of experience and reflection, cause and effect, diagnosis and remedy, context and event, hope and terror—partially listed and then narrativized above—I found a small quasi-bibliotherapeutic thread to follow. Book-reading had always been a mode, an activity to stall the overwhelming flood of experience, to both lose and find myself, and to learn something about the world. How to start, where to proceed, and when to end became the simple and overwhelming questions. (I fear the haunting of childhood reading of *Alice in Wonderland* here: "Begin at the beginning,' the King said gravely, 'and go on till you come to the end: then stop.'" Impossible advice to follow, and there relatedly were/are too many heads that warranted the fantasy of chopping off in the history of the imagination that this book attempts.)<sup>10</sup>

In the terrible and heady days of the first decade of the twenty-first century, as HIV/AIDS became a key component of international humanitarianism—the benevolent edge of what Teju Cole would later call "the white savior industrial complex," which I discuss in chapter 5—I had the strange fantasy of providing a reading list to the fleet of aid workers as they flew

between foundation meetings and hastily assembled African orphanages and local NGO offices. Would reading a novel like John le Carré's *The Constant Gardener* (2001) or better and shorter Phaswane Mpe's *Welcome to Our Hillbrow* (2001), or a poem like Ingrid de Kok's "The Head of the Household"—analyzed in chapter 4—help them resist the self-consolidating sympathy I suspect underwrote the enterprise, or more importantly help the people they wanted to help? They did not have the time nor inclination to learn isiZulu, isiXhosa, Luganda, Setswana, and Kikuyu (and frankly neither did I), but a poem might be as, if not more, useful in the training of their imaginations in the life worlds of the objects of their care than another policy brief. I remain caught between W. H. Auden's assertion that "poetry makes nothing happen," and Muriel Rukeyser's sense that "poetry extends the document," and Audre Lorde's insistence on the affective and political necessity of poetry.<sup>11</sup>

This book project has been marked by the obsessive making and then tossing of bibliographies. There is, moreover, no doubt that the horizons of my imagination of HIV/AIDS have at least partly been structured by working as an instructor of literature and then as the codirector of an interdisciplinary human rights center at a law school in a US university during a long period of crisis in higher education over the value of the humanities. And then there is the attenuated nature of teaching and the often too lateness of learning, and the competing temporalities of academics and activism. I remember vividly an exchange with Rachel Holmes of FOTAC (Friends of the Treatment Action Campaign) on a panel in Austin in 2007, where I invoked the "Do no harm" sentence of the Hippocratic oath, which probably only works for doctors and may be impossible in an era of telehealth, to say we don't know enough yet to act effectively. She rightly responded, "We have no time. People are dying." My hope is that there might yet be something useful in the incommensurate temporalities of activist and academic work. *Pandemic Genres* probably contains vestiges of those pedagogical and bibliographic/therapeutic dispositional and institutional habits on the question of what, if anything, can the soi-disant literary and cultural critic contribute to understanding and ending the HIV/AIDS pandemic through attention to the historical and affective determinants of the imagination of HIV/AIDS, archived in literary and cultural forms?

Here is how I elaborate that driving question. During the long turn of the last millennium, HIV/AIDS became the focal point of a global public health crisis and a related international humanitarian one, both crises saturated

with national and global sentimentality, and requiring significant work of the imagination. For roughly the twenty years from the founding of World AIDS Day in 1988 to Barack Obama's 2009 reupping of George W. Bush's President's Emergency Plan for AIDS Relief (2003), key parts of national and international public spheres cared about AIDS. The demographics on both sides of that relationship of care, real and ostensible, did not remain static. World AIDS Day was founded to raise public awareness around the devastation that HIV/AIDS was causing in mostly gay male communities, themselves highly stratified, in the North Atlantic world.<sup>12</sup> The constituencies, real and imagined, of both iterations of PEPFAR were envisaged differently. Around the mid-1990s, when antiretroviral therapies became widely available in that North Atlantic world, the pandemic became less gay and more African in national and international public spheres: from the toxically rendered 4 H's (homosexuals, hemophiliacs, Haitians, and heroin addicts) to some geographically undesignated "African." As microbiologist and former executive director of UNAIDS Peter Piot noted in passing: "When we think of AIDS, it's Africans, black people and so in that sense there is probably that racist undertone."<sup>13</sup>

Internationally funded "aid"—much of it for HIV/AIDS prevention and then treatment—became a significant part of many African nation-state's healthcare, both in terms of national health budgets, and more pervasively, in terms of a large network of HIV/AIDS nongovernmental organizations (NGOs). These events, processes, and institutions form part of the concatenation of discourses, practices, and policies that constitute neoliberalism, which is the global dominant in the imagining of political economy in this long historical moment. While the implementation of neoliberalism obviously differs even in places as geographically proximate as South Africa and Botswana, for the purposes of this book, it is possible to isolate three key features:

1. The extension of free-market principles into the realms of governance, social organization, and subjectivity.
2. The financialization of economic value, deregulation of economies, hegemony of global supply chains, and curbing of government spending, usually through privatization and austerity measures.
3. The individualization of responsibility and decline in the idea of the public good and the commons, and the attendant diminishing of democratic accountability.<sup>14</sup>

While neoliberal logics define the contexts, it is important to note that government expenditure on antiretroviral rollouts in both Botswana and South Africa push, at least partially, against the neoliberal dictum of reduced government spending on public goods like public health, even as the public sector contribution to the rollout has been uneven across the nine provinces of South Africa and the monies from the Global Fund and PEPFAR have been significant.<sup>15</sup> The presence of social and disability grants marks another site of the South African state's sometime resistance to neoliberal economic governance, even as the success of the rollout program meant some people living with HIV lost access to the sustaining support of disability grants because they were no longer deemed "AIDS-sick."<sup>16</sup> Concurrently, the experience of Africans living with HIV/AIDS became a subject/object of aesthetic representation in multiple genres by Africans and others. The figures, tropes, and rhetorical strategies of these diverse cultural representations engaged the representational strategies of the public policy pronouncements of officials of postcolonial states, an emerging global NGO-speak, the organs of international bodies like the United Nations, and national and international journalism, to name a few. *The tropes, figures, and rhetorical strategies of those diverse cultural representations, particularly on the terrain of feeling, comprise the topic of this book.*

The understandable and justified rhetorics of urgency around the pandemic produced a figuring of the human experiences of those people most affected by it: those who needed help, through, on the one hand, a universalist rights talk and, on the other, necessary but dehumanizing discourses of pathogens, practices, numbers, and demographics. The helpers in contrast saw themselves and were seen to inhabit the affective structures of a sympathetic imperial benevolence. In understanding the pandemic, attention to representations of experience that consider questions of the aesthetic, when it was broached at all, was presented as something of a luxury. Much superb ethnographic work—Mark Hunter, Catherine Campbell, Didier Fassin—powerfully suggested that careful listening to the experiential narratives of individuals and communities living and dying in the pandemic could and should impact ameliorative policy initiatives and should give rise to collective mourning and memorializing projects.<sup>17</sup> This book hopes to analyze expressive cultural genres of representation for alternate imaginaries of HIV/AIDS and develop modes of reading dominant, more "realist" genres to highlight the *imaginative* work they enable and block.

Estimates in the early 2000s claimed that South Africans were dying at a rate of 600–800 people a day from HIV-related causes. It takes the work

of the imagination to make that number meaningful.<sup>18</sup> It is this work of the imagination that I have somewhat riskily termed “poetics” in this introduction. This task of imagination is obviously globally stratified—those of us living and dying in the heart of the global pandemic in sub-Saharan Africa will feel and experience it differently from those of us elsewhere, and there is obviously massive internal differentiation within that positing of a divided geography. Although a powerful claim by the South African memoirist, Adam Levin, the subject of chapter 2, reads: “Aids is a riddle. It is invisible and yet is everywhere, all around us, in people we love, in me. It doesn’t matter if you are Hiv—positive or negative. The world has Aids. And if you give a shit about the world you have it too.” But of course we do not all have it in the same way, and that accusatory “if” condenses many political and affective questions.

I attempt to imagine how we might take Levin’s simple sentence “The world has Aids” seriously. What kind of an archive would need to be assembled? What analytic tools, narrative strategies, and disciplinary and interdisciplinary protocols could begin to pose the overwhelming set of questions in that simple sentence? Very few scholar/writers have the learning and/or training to be properly interdisciplinary, but an ill-disciplined reading of that archive can run interference in a global network of easy certainties about Africa, illness, and real and ostensible aid. Let me work through five examples of what could constitute part of this imaginative archive: iconographic, narrative, ethnographic, legislative, and exhortatory— respectively, an anonymous reappropriation of a famous South African photograph, the sentence from Adam Levin’s memoir mentioned above, Didier Fassin’s recounting of the story of Puleng, the US “President’s Emergency Plan for AIDS Relief” (PEPFAR) (2003), and a passage from Edwin Cameron’s *Witness to AIDS* (2005). Both the differences among the five in scale, reach, and power and the oddness of their juxtaposition form part of the comparative point.

In the era of state-sanctioned AIDS denialism in South Africa, it was common to imagine the deaths from the pandemic as the singular sign of the betrayal of the national liberation struggle. This betrayal is most damningly rendered iconic in T-shirts emblazoned with the reappropriation of probably the most famous photograph of the national liberation struggle: Sam Nzima’s pieta of Hector Petersen, being carried by his schoolmates after being shot by the police in Soweto in 1976. That iconic image has the caption appended—“Who is killing South Africans now?”<sup>19</sup> I cannot but think that the composition of the image as a pieta accounts for much of its resonance, drawing as it does on centuries of Christian representations of

innocent suffering. That the image shows Petersen being carried by other children rather than by a maternal figure adds to the powerful blasphemy of the photograph. What happens to the figure of the child-headed household under the conditions of the pandemic is front and center of the analysis of the Ingrid de Kok poem in chapter 4. In the early 2000s, that question of “who is killing South Africans now?” was forcibly directed at the Mbeki government. Nevertheless, the answers to that question move far beyond the problems of the response of the organs of the state.

While the pandemic is clearly in South Africa, it is equally clear that it is not simply of South Africa. Jean Comaroff parses this claim with trenchant irony: “The pandemic is savagely cosmopolitan, making blatant the existence of dynamic translocal intimacies across received lines of segregation, difference and propriety.”<sup>20</sup> The paradox of a savage cosmopolitanism gets at the deep historical and transnational determinants of the individual deaths caused by AIDS without reinstating the pieties of a failing nationalism, as we also remember the difficulties of distinguishing between friend and enemy, co-national and foreigner, in the periodic spates of xenophobic violence in South Africa.<sup>21</sup> Phaswane Mpe’s 2001 novel, *Welcome to Our Hillbrow* (mentioned in my putative reading list for aid workers), is the text that eerily prefigured those events, with HIV imagined as a central othering strategy, across the divides of city and countryside, foreigner and citizen, the living and the dead.

There are enormous ethical difficulties in broaching Levin’s deceptively simple claim that “the world has Aids.” PEPFAR, the piece of legislation that I discuss in what follows, asserted that “the world has Aids,” though it resisted the universality that the word “world” implies through its focus on “foreign countries.” PEPFAR speaks for and about, but very rarely to or from, HIV-positive people around the globe. The only individual voices cited in PEPFAR are those of President George W. Bush and his quotation of a frustrated doctor in rural South Africa. We are regrettably, and perhaps unavoidably, in the ongoing legacy of Marx’s indictment of “parliamentary cretinism” in *The Eighteenth Brumaire of Louis Bonaparte*: “They cannot represent themselves; they must be represented.”<sup>22</sup> But AIDS is not only a disease of subalternity. Anyone can get it but not everyone does, and the possibilities of life-sustaining treatment fell and fall too often along the lines of the world’s great power cleavages.

Before we get to PEPFAR, let us imagine where to look for the voices and experiences PEPFAR excludes. Testimony is a crucial and powerful form

and practice in galvanizing support for fighting the pandemic, but is not easily translated into policy pronouncements, and necessarily invokes the baggage of native informancy. Testimony cannot avoid its own performative and generic structures, even as it performs the claim of unmediated access to the authenticity of personal and historical experience. Didier Fassin, in an interestingly anxious reading of a story told to him by a dying woman in Alexandra, the oldest “township” in Johannesburg, South Africa, articulates the power and limits of testimony: “But the fact that her life narrative is part of a practice that may be qualified as ‘cultural,’ in the sense that it is deeply embedded in a space of conventions historically situated, does not exonerate the person receiving it from reflecting on its meaning.” Remarking that Puleng was probably unconsciously following autobiographical practices that the media, international organizations, and social science researchers have helped to spread does not mean there is no need to analyze what she meant in telling of herself. Puleng tells Fassin: “On my funeral day, I don’t want you to prepare a meal. Because people act like at a party. It costs a lot of money. But what’s the use if I’m dead. It’s only to put them in debt. No, I just want them to bury me . . . But I don’t think of that all the time.”<sup>23</sup> We see HIV/AIDS suspending, if not breaking, rituals of cultural continuity because such rituals are not materially sustainable due to debt. We further get the sense that Puleng may authorize Fassin’s account even as she is not presented as an author of it, but most importantly for my purposes, we see that the most personal of accounts may also be the most ideologically saturated, which should be a reason for taking them more seriously rather than dismissing them. I run up against this conundrum repeatedly in my second chapter on memoir.

Secondly, there is an idea in Levin’s claim that the world may have AIDS that AIDS may be a symptom of the massively complicated commodity chain that distributes resources—material and affective, life and death—so unevenly. There is no international tribunal, nor perhaps can there be, in front of which to make this accusation, but then as Levin, with an aching archness, claims, “But justice has nothing to do with Aids or pain or life. I think I should pin a little note on my forehead just in case I am tempted to forget something absolutely critical to my physical and emotional well-being. ‘Remember: Nothing is fair about Aids.’”<sup>24</sup> Survival is a kind of fundamental ethical position here, and for so many in sub-Saharan Africa, impossible. For those of us who have time, silence feels like complicity and to speak at all is to risk obscurity. I am reminded of Paul Farmer’s assertion in *Pathologies of Power*: “Writing of the plight of the oppressed is not a particularly effective

way of assisting them”;<sup>25</sup> but this may be less true about writing about fictionalized or poetic accounts of such human subjects. Imaginative genres like fiction and poetry and to some extent testimony have already issued an invitation to be read and discussed. Fassin’s claim above that Puleng’s testimony needs to be analyzed as something other than an instance of socially mediated narrative may open a small window here onto the Lordian affective domain and its agential possibilities.

Let us now focus on a particularly powerful document’s imagination of the pandemic—namely the 2003 US President’s Emergency Plan for AIDS Relief, commonly known as PEPFAR. My first set of questions: How does this plan imagine and equally importantly resist imagining the human subjects it wishes to help? When and where does it imagine the targets of its interventions as individuated human subjects, as a demographic, as a figure to be constructed—the African suffering from HIV and the helping hero/es—to list two such figures. Since I wish to read PEPFAR as a document in the archive of the imagination of AIDS, I have chosen to focus on what might be termed its poetics. Poetics works best for making the work of the imagination meaningful, and PEPFAR has an interesting relation to the Aristotelian unities. Didier Fassin argues powerfully that an insistence on an idea of shared space and time between the centers of the pandemic and the rest of the world is critical for establishing a moral imperative to alleviate the suffering caused by the pandemic: “Contemporaneity asserts belonging to a common world experience simultaneously in its convergences and confrontations, a world to which we all belong but experience differently.”<sup>26</sup>

A poetics also has a *techné*, a set of rules for constituting its shifting subjects. In many ways it would have been easier to write an analysis on “The Politics of PEPFAR,” with PEPFAR seen as driven by aspects of the US domestic agenda—an uneasy mix of evangelical compassion and moralism—saving the world through an imposition of Christian sexual morality; but even “abstinence only” is more complicated than that, and a consideration of the appropriations for PEPFAR reveals that roughly only 7 percent of the monies to be allocated were reserved for abstinence-only prevention initiatives. Let me explain my own numerical manipulations. In its initial allocations 20 percent of PEPFAR’s total budget was earmarked for prevention programs, and a third of that had to be for “Abstinence until Marriage” (AUM) programs, so a third of 20 percent is just under 7 percent. The AUM requirement was removed by the Bush administration at the end of its tenure in 2008. Nearly \$1.5 billion was spent on such programs, which many

academic studies revealed to have minimal or no prevention impact.<sup>27</sup> If I had led with the dollar amount rather than the percentage, I suspect outrage rather than minimizing might be the readerly affect, but since I don't want the perfect to be the enemy of the good, I didn't. Funding for the AUM programs may have been the price for bipartisan congressional support, and the programs were presumably dropped once that political calculus was no longer in play.

Although it is still possible to discern a family-values agenda in PEPFAR in terms of its concern with children and orphans over homosexuals or men who have sex with men (MSMs) and intravenous drug users. The invention of MSM as a category of people to be reached by HIV prevention efforts reveals a taking seriously of the critique of the idea that sexual acts create identities, though, in many ways, MSM rather quickly becomes an NGO-prompted social identity.<sup>28</sup> Willy-nilly, HIV/AIDS prevention policies fashioned new kinds of people, though PEPFAR tended to imagine preexisting kinds of people, and fairly sentimentally at that.

One of the things that may make it easier for a regime to cut AIDS services at home but expand them abroad is that the predominantly heterosexual nature of HIV transmission in places like sub-Saharan Africa allows for identification in place of demonization where difference along the line of race is mitigated by an imagined sameness along the lines of sexuality, kinship, and, more unevenly, religion. As will become clear, a poetics may contain or imply a politics, but cannot really be reduced to one, especially if we understand politics as a calculus of the possible. To read PEPFAR as if it were a poem is clearly a category error, but to read it for its poetics may allow the work of the imagination in the response to the pandemic to become visible.

Levin's sentence "The world has Aids" makes the world, rather than an individual living and/or dying with it, or a particular country or demographic, the subject of the pandemic. In terms of a more narrowly Aristotelian poetics, we would seem to be in the terrain of the epic here. The pandemic begins *in medias res*—as a moment in a variety of powerful world historiographies, sometimes as repetition, sometimes as rupture. It has been my earlier contention that former South African president Thabo Mbeki's controversial responses to the pandemic facing his citizens, at least partially, grew out of a recognition that HIV/AIDS revealed the persistence of imperial ideas about the lasciviousness of Blackness going back to the roots of the civilizing mission of European imperial interest in Africa.<sup>29</sup> For the historiography of decolonization, HIV/AIDS represents a significant failure

of the transformative promises of independence and freedom, as it does in the great narratives of Enlightenment ameliorative public health. AIDS is not polio or smallpox, in the sense that modern science and public health have not eradicated it, though smallpox in an earlier era of colonization has a terrifying history, sometimes in the mode of avoiding colonial responsibility for genocide.<sup>30</sup> In addition, so much response to the suffering of the pandemic has been to blame the victims: AIDS as God's punishment for sin. I want to risk the absurdity of imagining a reading of PEPFAR as if PEPFAR were a poem, maybe even an epic poem about the world having AIDS. HIV/AIDS is also obviously a tragedy, inspiring pity and terror but little catharsis. What feelings is an epic likely to inspire? And what, if anything, might they be good for?

Secondly, how might those whom PEPFAR imagines as its objects of emergency relief read the poetics of such a document? How might these human subjects understand themselves as imagined by an initiative like PEPFAR? Their experiences are clearly varied in the extreme, and my reading will have to repeat some of the strategies of PEPFAR itself in working through similar processes of abstraction, generalization, condensation, figuration, and ambiguity, while attempting to hold in place the claim that one of the things a poetics is useful for is access to the singular.

The central piece of legislation for the President's Emergency Plan for AIDS Relief is Public Law No. 108-25, 117 Stat. 711 (May 27, 2003), passed by the 108th Congress, and self-described as an act "to provide assistance to foreign countries to combat HIV/AIDS, tuberculosis, and malaria, and for other purposes."<sup>31</sup> Its short title is "United States Leadership Against HIV/AIDS, Tuberculosis, and Malaria Act of 2003." The paleonymy of the word "act" can undo readers here, but that might be more generally true of all "acts" rather than be specific to just this one. I read this act as representative of the imagining of the pandemic by the rulers of the most powerful country in the world. "Emergency plan" pulls in at least two directions as something like a contingency plan for an emergency and a plan in response to an emergency. And then in the semantic register of the law, there are "states of emergency"—the legal suspension of the law due to real or imagined threats to the possibilities of governing under the law.<sup>32</sup> The act goes on to imagine aid in a way that violates the national sovereignty of a whole range of countries, especially those in "sub-Saharan Africa," in that it abrogates to itself the right to set health policy for other countries. "Emergency" justifies intervention, and I have not even touched the cluster of (subjective) associations surrounding

the word. One could do something similar with “plan,” noting the contrast of its measured, rational, and practical connotations with the urgency of “emergency.” Given what we learned about “just in time capitalism,” particularly in relation to global supply chains during COVID shutdowns, the phrase “emergency plan” feels somewhat quaint.

As a piece of legislation, however, the rules of its genre require that it refute many of the language features we associate with a poem. It must imagine the language it deploys as minimally ambiguous, limit rather than proliferate its references, create a blueprint for action and accountability, and imagine a consensus in the ways that it should be read. Simultaneously, the act has a poetics in that it must both shorthand and elaborate the set of situations it wishes to ameliorate and perform the forms of its genre, while invoking and perhaps creating poetic chains of association. While its authorship is nominally attributed to the president in its common name—PEPFAR—its official short-title suggests a collective author—a huge collective author—in the words “United States.” Although obviously the act is not written by everyone in the United States. This representational strategy of representational democracy opens into a poetics in the sense that the following cluster of questions emerge:

1. (a) Is the authorizing body—Congress—in metonymic relation to the whole US—whichever way we can imagine that?  
(b) Or is a single congressional representative a proxy for his constituents?
2. Does the phrase “United States” denote a staggering diversity of referents—even as it marks a set of limits, most obviously citizenship?
3. May the act itself wish to make the US mean something that it has not meant before i.e., a world leader in the fight against AIDS, malaria, and tuberculosis?

Let us move first to the findings of the act:

Congress makes the following findings: (1) During the last 20 years, HIV/AIDS has assumed pandemic proportions, spreading from the most severely affected regions, sub-Saharan Africa and the Caribbean, to all corners of the world, and leaving an unprecedented path of death and devastation.

(2) According to the Joint United Nations Programme on HIV/AIDS (UNAIDS), more than 65,000,000 individuals worldwide have been

infected with HIV since the epidemic began, more than 25,000,000 of these individuals have lost their lives to the disease, and more than 14,000,000 children have been orphaned by the disease. HIV/AIDS is the fourth highest cause of death in the world.

(3)(A) At the end of 2002, an estimated 42,000,000 individuals were infected with HIV or living with AIDS, of which more than 75 percent live in Africa or the Caribbean. Of these individuals, more than 3,200,000 were children under the age of 15 and more than 19,200,000 were women.

(B) Women are four times more vulnerable to infection than are men and are becoming infected at increasingly high rates, in part because many societies do not provide poor women and young girls with the social, legal, and cultural protections against high-risk activities that expose them to HIV/AIDS.

(C) Women and children who are refugees or are internally displaced persons are especially vulnerable to sexual exploitation and violence, thereby increasing the possibility of HIV infection.

(4) As the leading cause of death in sub-Saharan Africa, AIDS has killed more than 19,400,000 individuals (more than 3 times the number of AIDS deaths in the rest of the world) and will claim the lives of one-quarter of the population, mostly adults, in the next decade.

While the act may begin in agreement with Adam Levin's claim that the world has AIDS, there is no "finding" on the gay deaths at home, arguably still the most prominent association with the suffering from HIV/AIDS in the US in 2003. In its synoptic logic, the act partly removed the US from the world, ignoring the vulnerability of racial and sexual minorities in the US in the more than 65 million individuals who have been infected with the HI virus over the last twenty years. We are in some of the domestic costs of US exceptionalism here. Plus, given the then US regime's resistance to meeting its financial obligations to the United Nations, the reliance on United Nations numbers slides between irony and hypocrisy.<sup>33</sup>

PEPFAR's reliance on the figuration of the body count cannot pass unnoticed here. What feelings might the affective flatness of these tabulations invoke in a reader? Does providing the huge number of people affected overwhelm or facilitate a speedy passage through the text? An irresponsible anecdote to shorthand a supplementary reading here: Sometime in the early 1970s, my sister is refusing to eat her dinner, a common occurrence. My mother attempts to shame her into doing so by invoking the "millions of starving children in Biafra." My sister, who was and remains sharp, responds, "Name three." Of course, the act cannot name all 25 million people who have died of AIDS, because it is not interested in them as individuals and the act

would still be being read in Congress years later. Though I do not know how exactly long it would take to list and read 25 million names, there are public representations for which numbers will not do. War memorials, for example, have at least two strategies: one literal—list the names of every dead soldier; one achingly poetic—the genre of the tomb of the unknown soldier, whose anonymity is paradoxically the ground for his representativity. These war memorials do the *post facto* work of memorializing and mourning.<sup>34</sup>

The act under discussion here cannot really broach how its author—the “United States” or the “world”—could or even should mourn these 25 million dead. The great public memorial project of the first wave of the pandemic among gay men in the US, the AIDS quilt, invests movingly in the singularity of each death as it expands and reworks a gendered, sentimental national craft—quilting. I do not think a mandated global quilt could do the same work—and we are right to be wary of governments that tell people how to express their feelings, and the form and meaning of a quilt are hardly universal. (The contrast between the AIDS quilt and the COVID memorial on the national mall is the subject of my coda to this book.) In the genre of the war memorial, the causes of death—the enemy combatants/regimes—oscillate in their significance in the face of shared human mortality.

Similarly, in the case of HIV-related deaths, questions of blame or responsibility in a document like the one under discussion are relentlessly politicizable, but recede under the moral imperative of ameliorative action, or more simply President Bush’s claim of “a plague of nature.” This problem can be parsed as follows: becoming involved in working out who and/or what can be blamed for these deaths gets in the way of action. Simultaneously, without a narrative and analysis of causation, how can one imagine remediation? The initiative, at least in the moment of its findings, with the attendant focus on identifying those most vulnerable, will dodge this dilemma through a chivalric construction of women, children, and refugees as worthy victims.<sup>35</sup>

What distinguishing characteristics are given to the dead and the future dead here? The past dead may enter the act only as a rationale for urgency; they stand as warnings of future death if nothing is done. And we can argue whether that characterization works to humanize them or not. In terms of the living, the important characteristics are geography, gender, age, and refugee or internally displaced status. Occupational status appears not to matter, though later soldiers and agricultural workers will be mentioned. Geography may appear as a euphemism for race, though the rising rates of infection in the Russian Federation are seen as a problem. Victimology

along a sentimental vector of innocence appears the most consistent rubric for understanding those the pandemic most affects. And innocence has an identitarian character. The earlier history of the US's own pandemic similarly reified categories of victimage—the four H's—Haitians, homosexuals, hemophiliacs, and heroin addicts—with varying degrees of the imagining of responsibility within the desire to suggest that if you were not one of these four H's, you were okay. The necessity of establishing those who are victims versus those who are agents of their own infection is an important distinction in the policing of sympathy and identification, and thus, worthiness of help. One could perhaps inhabit these identities in subversive ways, for example, by claiming that migrant laborers are internally displaced people or refugees, but mostly these expanded categories of victims—women, children, refugees, internally displaced people—are given minimal history—the historical processes under which these identities became vulnerable is underexplored—because of fear of complicity between the ostensible benefactors and larger agents of the same vulnerability, but PEPFAR never imagines this. The line between helpers and helped must hold in the no man's land where no one is responsible for the suffering endured.

The question of accountability is most cogently and incoherently begged in President Bush's claim of HIV/AIDS as a "plague of nature." No tabulations have been made for a body count of American AIDS-related deaths for US inaction during the 1980s and 1990s, and I am not sure what forms of actuarial practice could do this. In the case of South Africa, Pride Chigwedere and others claim the death toll from Thabo Mbeki's AIDS denialism as 330,000 preventable deaths between 2000 and 2005.<sup>36</sup> The tracking of causation in these calculations feels impossible to me, as the relation between structural vulnerability and policy failure are hopelessly overdetermined, and this tabulation of preventable deaths and the attachment of them to a South African president indicates the "naming and shaming" strategy of human rights more than anything else.<sup>37</sup> I could not produce a number of deaths for, let's say, the AUM programs of PEPFAR, and my general hunch is that we need much more expansive imaginings of accountability and justice than isolating political leaders in a world that has AIDS. The problem of counting and discounting is central to my final chapter.

While PEPFAR cannot really imagine accountability beyond "a plague of nature," its imagination of effective policy, alongside its implicit distinctions between innocent and guilty "victims," reveals deep commitments to classed and "civilizational" intimate sexual and family forms, investments

partially shared by the 2004 film *Yesterday*, discussed in chapter 3. Most obviously, the act holds up Uganda as the African nation state exemplifying what can be shorthand as best practices—a term extensively critiqued in chapter 5:

(A) Uganda has experienced the most significant decline in HIV rates of any country in Africa, including a decrease among pregnant women from 20.6 percent in 1991 to 7.9 percent in 2000.

(B) Uganda made this remarkable turnaround because President Yoweri Museveni spoke out early, breaking longstanding cultural taboos, and changed widespread perceptions about the disease. His leadership stands as a model for ways political leaders in Africa and other developing countries can mobilize their nations, including civic organizations, professional associations, religious institutions, business and labor to combat HIV/AIDS.

(C) Uganda's successful AIDS treatment and prevention program is referred to as the ABC model: "Abstain, Be faithful, use Condoms", in order of priority. Jamaica, Zambia, Ethiopia and Senegal have also successfully used the ABC model. Beginning in 1986, Uganda brought about a fundamental change in sexual behavior by developing a low-cost program with the message: "Stop having multiple partners. Be faithful. Teenagers, wait until you are married before you begin sex."

(D) By 1995, 95 percent of Ugandans were reporting either one or zero sexual partners in the past year, and the proportion of sexually active youth declined significantly from the late 1980s to the mid-1990s. The greatest percentage decline in HIV infections and the greatest degree of behavioral change occurred in those 15 to 19 years old. Uganda's success shows that behavior change, through the use of the ABC model, is a very successful way to prevent the spread of HIV.

In moments such as these, the poetics of PEPFAR appear to collapse into ideology, and thus invite contestation and demystifying. Conveniently ignoring the fact that the Uganda statistics are disputed, largely along the lines that the 1995 statistics do not have figures for large parts of the country, the act holds up the so-called ABC plan. This acronym implies a pedagogy and a poetics of pedagogy, and an insulting one at that. The best strategy to fight AIDS is likened to learning the first three letters of the English alphabet. We are not told how this acronym translates into African languages. It is so simple any child can do it. During a time when neoliberal economic policies mitigate against public education in highly indebted poor countries like Uganda, the use of learning the alphabet in English—a metaphor for literacy perhaps—as the strategy for social marketing as a "very successful way to prevent the spread of HIV" can only be read as irony. Moreover, this imaginary

of sex in Uganda is produced by spectacular condensation and displacement. ABC did not work only cognitively in the way that PEPFAR imagined it. It also generated a range of phobic, graphic, demonic, and demonizing imaginaries. For a sampling of the sexual representations of the longer life of ABC, readers with strong stomachs and an appetite for the absurd are encouraged to google charismatic Ugandan pastor Martin Ssempe, who runs with ABC to engender in images and languages of scandal, disgust, and terror a particularly wild pornographic configuration of family values and “normal” sexual behavior. The long life of ABC includes the showing of gay rimming and fisting pornography in churches with injunctions not to “eat the poo poo,” and the bringing of phallic fruit and vegetables—cucumbers, carrots, and bananas—to daytime television talk shows to demonstrate the dangers of sodomy. I do not want to rehearse the “homosexuality or homophobia is the decadent western import debate here,” but need to note that the incitement to behavioral change often also works along the lines of shock and awe, to borrow a slogan, as much as rational assent. The film *Miss HIV* (2008) discussed in chapter 1 is at least honest enough to assert that people needed to be made to feel very afraid. The appropriate literary term for this Ugandan moment in PEPFAR is most likely euphemism.

In terms of the moralizing, rather than the moral, imagination of PEPFAR, what became known as the “anti-prostitution pledge” (APP) or the “anti-prostitution loyalty oath” (APLO) marks obviously ideological intrusions in the neoliberal imperial benevolence of PEPFAR and reveals the continuities between older colonial forms of “helping” and newer de-territorialized ones.

No funds . . . may be used to promote or advocate the legalization or practice of prostitution or sex trafficking.

No funds . . . may be used to provide assistance to any group or organization that does not have a policy explicitly opposing prostitution and sex trafficking.

Nothing in the anti-prostitution clause “shall be construed to preclude” services to prostitutes, including testing, care, and prevention services, including condoms.<sup>38</sup>

These injunctions forget the overriding rationale of PEPFAR as an act/ion to alleviate suffering through the improvement of health outcomes. PEPFAR imagines the APP or APLO as a prophylactic against any figuration of sex work as a labor rather than a moral issue and wishes to exclude an obvious key constituency in HIV prevention and treatment from access to the political. The third clause will, however, grant access to the minimally medical.

It is difficult to argue against “health,” even if it is both well-known and obvious that the term and the practices that have been held under it contain a multitude of normative assumptions and judgments and that population health is one of the most powerful sites of biopolitics and more subjective and affectively saturated versions of “the good life.” Sex workers can receive “testing, care, and prevention services, including condoms,” but not dignity or any form of support that might help them organize to improve their lives, and thus appear as both deserving and undeserving “victims of AIDS” and as figurations where the contradictions in the document between aid and policing emerge. The anti-prostitution clauses are fought from the outset through several successful legal challenges in the United States, and their implementation has been uneven, though the chilling effects have been extensive.<sup>39</sup>

With these caveats around ABC, and sex workers, somewhat surprisingly I find the plan less riddled with irony and ideology than the motivation or the findings. It sets out to collaborate with many stakeholders in the roll-out of antiretrovirals, and while initially the proviso allowing only brand-name drugs could be used to make accusations of a shell-game kickback to pharmaceuticals, the implementation of the plan fairly soon allows for generics—after testing—a necessary step given the history of third-world drug dumping and the scandals of substandard generics.<sup>40</sup> PEPFAR does not imagine intervening in standard protocols of testing, despite contemporaneous work on the difficulties of testing in sub-Saharan Africa. Edwin Cameron has called for routine if not mandatory testing, which flies in the face of deeply held assumptions that testing must be voluntary and confidential. Cameron argues that such testing will facilitate treatment, if and when treatment is readily available, and will do much to reduce stigma, given that circumstances particularly in rural areas make confidentiality almost impossible.<sup>41</sup> Jonny Steinberg’s *Sizwe’s Test: A Young Man’s Journey through Africa’s AIDS Epidemic* (2008) dramatizes through a singular story the immense psychological difficulties around testing. Steinberg’s book, with its sustained attention to the interactions, achieved and avoided, between an individual and the kind of public health initiatives PEPFAR would want to support, offers insights that PEPFAR, perhaps due to the generic limitations (as a piece of legislation) imposed on its moral imagination, fails to consider. And still Sizwe refused to test.

Over its now twenty years, PEPFAR funds have enabled access to life-saving pills for millions of people. Ungenerously, I note how the antiretroviral rollout can also begin to look something like an alibi. Laurier Decoteau

makes the important point “that when the shift to governing health through biomedical citizenship is centered on the squatter camp, it can be understood as a form of exclusionary inclusion. By doling out pills without providing sustainable living conditions, the post-apartheid state has abandoned the poor.”<sup>42</sup> However, that accusation should not only be leveled at the post-apartheid state. The same accusation can be reworked in terms of the international range and reach of PEPFAR. By doling out pills through a newish network of public and private partnership—biomedical citizenship in the PEPFARian imagination is, oddly, partly denationalized—the US government performs ostensibly benign neoliberal governance as a way of not acknowledging the causal role of neoliberal economics in the production of health vulnerability in the populations it says it wants to help.<sup>43</sup> While this critique holds, it can also be abused, most obviously in the way that it underlay the AIDS denialism of former South African president Thabo Mbeki and his health ministry.

Moving from the act’s imagining of the helped and the help to that of the helpers, as President George W. Bush proclaimed in his 2003 State of the Union address: “Ladies and gentlemen, seldom has history offered a greater opportunity to do so much for so many. . . . The United States should lead the world in sparing *innocent* people from a plague of nature” (italics mine).<sup>44</sup> There are multiple layers of irony here, and the demand for purity of motive seems facile in the double-edgedness of imperial benevolence. We are, at least, in an idea of a shareable history, albeit in the self-aggrandizing language of opportunity rather than responsibility. It might be possible to make a reading of presidential self-staging as an Aristotelian tragic hero—an embattled president embroiled in an increasingly difficult, unjustified, and unpopular war (five months before he declares “mission accomplished” for a conflict that lasted officially another twenty years, with the fallout for the people of Iraq and Afghanistan continuing and no end in sight). Instead, here President Bush—the younger—seeks a humanitarian legacy, blinded by hubris, but, at least, promising to make a valiant effort to address what many have called the greatest humanitarian crisis of our times. Even so, this version of the pandemic appears as the equivalent of a moral bargain—to do so much for so many—requiring minimal sacrifice on the part of the doers.

The rhetorical echoes of another famous speech by a leader of the so-called free world cannot go unnoticed. Here is a line from arguably the most-quoted wartime speech of Winston Churchill about the efforts of RAF fighter pilots: “Never in the field of human conflict was so much owed

by so many to so few.” Reading across anachronistic temporal frames—something a focus on imaginative reconstruction may permit—George W. Bush may at least have had an antifascist unconscious before antifascism gets shorthanded into ANTIFA and becomes a salvo in a rearticulation of the culture wars as an enemy of patriotism rather than its ground. An imagining of Bush as a fighter pilot may not only have occurred during his notorious Top Gun photo op in the same year, if one remembers who the “so few” refers to in Churchill’s speech.<sup>45</sup> Toymakers capitalize and/or satirize this national imagining of militarized masculine leadership when they make a George W. Bush “Top Gun” action doll in time for Christmas later the same year.<sup>46</sup> The archive of what Lauren Berlant called “national sentimentality” dredges all kinds of flotsam and jetsam. (I am trying hard not to make a 2023 “Barbieheimer” joke here.)

The prevalence of military metaphors in virology and in the “fight against AIDS” more broadly would form part of an extended imaginative context for this reading.<sup>47</sup> In the historical movement from yellow ribbons to red ribbons to pink ribbons as symbols of public awareness/consciousness-raising, the trace of military symbols/metaphors becomes visible in the ameliorative efforts that may claim that the suffering from illness is comparable to war trauma, and reworked and displaced imperial nationalism emerges as the buried concept-metaphor of humanitarian care.

The idea of the pandemic as a moral opportunity without military metaphors is invoked by South African judge Edwin Cameron in the close of his memoir, *Witness to AIDS* (2005):

We cannot escape our grief or the losses we have experienced or the suffering that has been. But we can act to minimize those occurring now, to prevent further deaths, to open our hearts and hold in them those who, now, are afflicted with illness and its isolation. Our grief is there, continent wide—pandemic. But we cannot allow our grief and our bereavement to inflict a further loss upon us: the loss of our own full humanity, our capacity to feel and respond and support. We must incorporate our grief into our everyday living, by turning it into energy for living, by exerting ourselves as never before.

AIDS is above all a remediable adversity. Our living and life-forces are stronger, our capacity for wholeness as humans is larger than the individual effects of the virus. Africa seeks healing. That healing lies within the power of our own actions. In inviting us to deal with the losses it has already inflicted, and, more importantly, in enjoining us to avoid future losses that our own capacity to action make unnecessary AIDS beckons us to the fullness and power of our own humanity. It is not an invitation that we should avoid or refuse.<sup>48</sup>

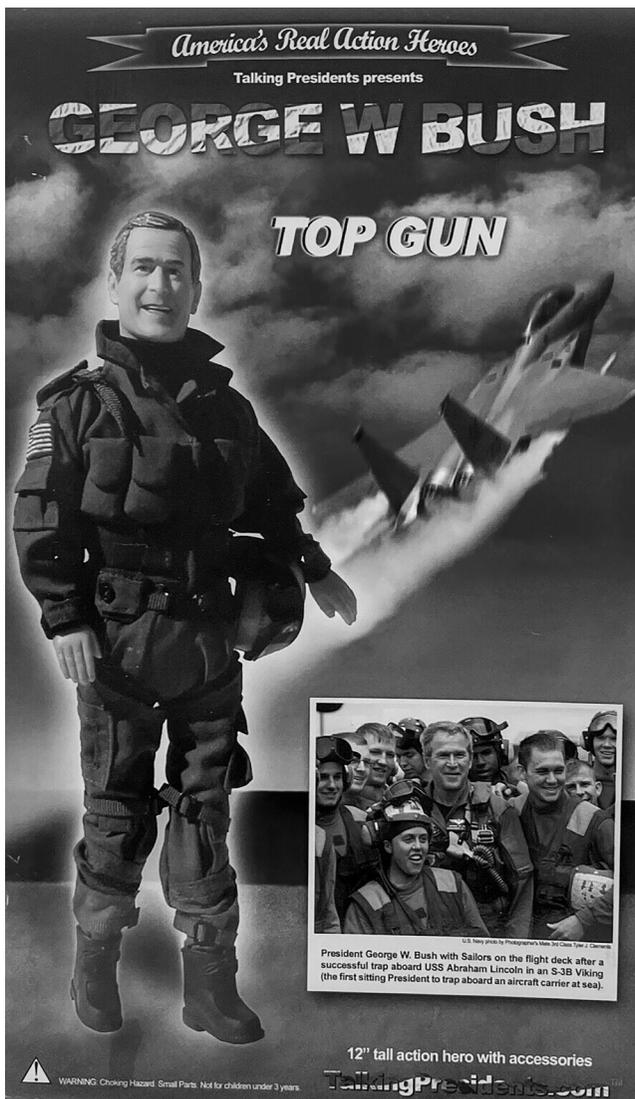


FIGURE 1. George W. Bush Top-Gun Doll (2003). Talking Presidents. “George W. Bush Top Gun Doll with Accessories, Limited Edition, Action Figure A1.” Photograph courtesy of the George W. Bush Presidential Library.

We, and like Cameron’s “we,” this plural pronoun must remain open, are in an imagination of a collective subject almost saturated with agency, in the concept-metaphor of invitation rather than opportunity. Cameron insists on a liberal humanism that, even though it shares a history with President Bush’s imperial benevolence, also differs from it in the insistence

of the work of mourning—the sublimation of grief into exertion. Grief too is pandemic, continent wide. *Witness to AIDS* offers an invitation, but “we” need a plan.

PEPFAR, the anonymous reworking of Sam Nzima’s iconic photograph, Fassin’s story of Puleng, and passages from two South African AIDS memoirs show us how to imagine how the world is in HIV/AIDS, and how “the world has Aids,” and indicates what a reading for the imagination may look like. The book that follows this introduction investigates *how* more formally sublimated aesthetic representations and performances supplemented ethnographic, journalistic, national, and international legal and policy accounts. The book samples and analyzes the archive of cultural production—novels, poems, films, a beauty pageant—around the pandemic in very different national contexts, namely Botswana, Kenya, South Africa. While national difference in the kinds of cultural responses to the pandemic mattered, I argue that the iterative traces of colonial notions of the sexuality of Blackness—perverse and normative—were central to many imaginative accounts of African encounters with HIV/AIDS for readers literate in English, alongside the hangover from the earlier gay North Atlantic incarnation of the pandemic.

Moreover, novels, poems, and films frequently represented the pandemic in the terms of the “tradition/modernity” dyad as the macro-explanation of African subjective experience. Throughout the book, I demonstrate how these genres—old and new—are prompted by the immediate circumstances of local and national instantiations of the pandemic and how their representational strategies draw on much deeper and wider discourses of race, sex, and power. My analysis of these cultural products moves from the difficulties posed by a certain kind of reality testing—can they be seen as historically representative?—to the question of how and why they imagined HIV/AIDS in the ways that they did and what can be learned, and for who, from these imaginings. In short, when is the subject of HIV/AIDS imagined as a universal collective and when is it particularized, stigmatized, or granted immunity?

The cultural archive of the pandemic was vast, growing, and continually in search of new forms—I think here of the memory book phenomenon, or the integrated (in terms of genre, such as comic books, newspapers, billboards) multimedia campaigns growing out of South African television soap operas.<sup>49</sup> The linguistic competence and multiple disciplinary training needed to read that archive, like the archive itself, is overwhelming. Therefore, evidence of strategic sampling is apparent in the chapter outlines

that follow. While it would be tempting to present the chapters as case studies, they need to remain more dialectical to produce the concepts, feelings, experiences, and discourses of the cases studied.<sup>50</sup>

The book makes one central argument: the long historical *imaginaries* of race and empire (in all their extractive and humanitarian guises), and sex in its full panoply of incoherence, underwrote (or overwrote) all attempts to bring the pandemic into public representation, and that attention to genres which stage themselves as imaginary may at least forecast possibilities for new imaginaries.

Early on in the epidemic in the North Atlantic world, Paula Treichler offered an analysis of HIV/AIDS as “an epidemic of signification”—a powerfully contested site of meanings around political economy, disease, stigma, sexuality, race, and medicine.<sup>51</sup> Cindy Patton produced a still startlingly resonant account of the construction of African AIDS in the west in 1990, but the speed of the progression of the pandemic in sub-Saharan Africa and the spectacular failures of both the postcolonial African state and the major institutions of the international public sphere to make any serious inroads in the spread of the disease induced what could paradoxically be termed a paralysis of pragmatism, and the insights of Treichler and Patton struggled to move beyond the North American academy.<sup>52</sup>

The idea of HIV/AIDS as also a problem of signification, representation, and hermeneutics became discredited as somehow an immoral response to the specter of so much premature (and increasingly, apparently unnecessary) death. The former South African president Thabo Mbeki’s couching of his so-called “denialism” in precisely the terms of the historical construction of the disease did not help.<sup>53</sup> The HIV/AIDS pandemic appeared in the public spheres of “the developed world” as part of the deeply phobic ongoing histories of colonialism, or as “the wages of sin,” or as a major humanitarian crisis. Emma Guest’s *Children of AIDS* (1989, updated and reprinted in 2004) and Stephanie Nolen’s *28: Stories of AIDS in Africa* (2007) bookend the journalistic engagement with a documentary, testimonial desire to turn the encounter with Africans living with HIV into what Lauren Berlant has termed “an empathetic event.”<sup>54</sup> Some fascinating travel-writing resulted, including Dervla Murphy’s *The Ukimwi Road* (1993).<sup>55</sup> Ruth Whitney’s novel *Slim* (2003), set in Uganda, gave fictional form to the empathetic event.<sup>56</sup> In the 1990s, African writers like Alexander Kanengoni and Vivienne Kernohan were already writing back.<sup>57</sup> In 2000, Meja Mwangi published *The Last Plague*, and in 2001, Phaswane Mpe published *Welcome to Our Hillbrow*.<sup>58</sup>

In 2008, Sindiwe Magona's *Beauty's Gift* appeared.<sup>59</sup> These texts perform translation work for local and global English readers in negotiating the slide between the familiar and the exotic—the difficulty in making the claim that Africans affected by HIV are just like you and then not; how ideas of cultural difference intersect with analyses of emerging globalization in the reporting of the human face of the pandemic.

The first part of this introduction offered a series of snapshots or fragments from the diverse and diffuse archive of imaginings of HIV/AIDS in intersecting national and transnational contexts to set up the often singular cultural representations that follow. These cultural representations sometimes concur with and sometimes dispute other significant attempts to shift HIV/AIDS imaginaries: Both Paul Farmer and Dennis Altman powerfully recast HIV/AIDS as a consequence/symptom of global political economy, revealing the complicities between uneven development and the spread of HIV evident in the imaginings of PEPFAR.<sup>60</sup> Uzodinma Iweala's *Our Kind of People: A Continent's Challenge, A Country's Hope* (2012), along with the aforementioned Didier Fassin book, show weaving personal testimony into broader sociological explanations can shift both epidemiological and sociological accounts.<sup>61</sup>

#### PLAN OF THE BOOK

Chapter 1 sets the stage by analyzing the figure of Miss HIV as a form of subcultural or vernacular storytelling and pedagogy, as the imagined center of the pandemic shifts from the North Atlantic gay world of the 1980s to sub-Saharan Africa, and as a protagonist in a global culture war around issues of sexuality. The Miss HIV Stigma Free Beauty Pageant, first held in Botswana in 2003, marked the use from below of a beauty pageant—a hegemonic form often understood by a globalizing western feminism and specific nativisms/nationalisms as oppressive, along sexism and cultural imperialism lines, respectively. The pageant was sponsored by the multinational pharmaceutical Merck, a local NGO (The Center for Youth and Hope), the Bill and Melinda Gates Foundation, and De Beers (the South African diamond monopoly).<sup>62</sup> Reading the pageant at the level of production makes it clear that the “African” HIV/AIDS pandemic and the responses to it can never be adequately described by the designation “African.” The contestants were sometimes trained on how to be a beauty queen by the reigning Miss

Botswana. In key ways, the pageant works by specularizing the reclaiming of normative gender fantasies by stigmatized subjects. Miss HIV Stigma Free was, however, not the first Miss HIV. As far as I can track her, Miss HIV makes her debut in John Greyson's extraordinary 1993 AIDS musical *Zero Patience*, and stars as the villain of Ethnographic Media's documentary about the Botswana pageant *Miss HIV* (2008).<sup>63</sup>

By the early 2000s, the gay male AIDS memoir was a recognizable international literary genre from Herve Guibert in France to Reinaldo Arenas (Cuba/US), Paul Monette, David Feinberg, and David Wojnarowicz (US), and Adam Mars-Jones (UK), to name just a few of the most famous.<sup>64</sup> Essex Hemphill and Joseph Beam's anthology *Brother to Brother* offers a significantly more political take on these biographical lineaments along the vector of race.<sup>65</sup> Chapter 2 explores Adam Levin's *Aidsafari* (2005) as a gay, white South African memoir that inevitably inhabits the histories shorthanded in those broad identitarian categories, about the time when HIV/AIDS shifts in the global imagination from a gay disease to an African one.<sup>66</sup> The Levin memoir is about the experience of a kind of sexual outlaw, a hedonistic party boy laid low and then halfway redeemed by his eponymous neologism—Aidsafari—one word—a kind of bourgeois David Wojnarowicz with a potentially happy ending. Levin's memoir makes and resists high humanist claims around universalist moral imperatives in relation to the pandemic but also reveals how its pains and burdens are borne with massive differentials within a distinctly personal, perhaps even singular account.

Chapter 3 analyzes Darrell Roodt's *Yesterday* (2004) as the first isiZulu-language feature film and the first South African feature film to make a person living with HIV its central protagonist.<sup>67</sup> *Yesterday* retells the oldest South African story: a family destroyed by migrant labor, though the temporality of this family form is clearly a palimpsest whose history is oddly out of place. The narrative unfolds in hauntingly familiar ways with AIDS as a new wrinkle in the drama of the affective and subjective forms of colonial modernity in what could be termed the South African liberal imaginary. I argue that the phantasmatic nuclear family ripped asunder by AIDS is imagined as a necessary point of identification for viewers in order to have sympathy with the eponymous Yesterday's predicament, and that it thus obscures rather than reveals the intimate lives it hopes to create sympathy for.

Thinking about the role of affect in public life, chapter 4 refutes Habermasian notions of communicative rationality that have historically struggled both to engage and theorize "political feeling." I engage key

feminist and queer scholars Lauren Berlant, Ann Cvetkovich, Audre Lorde, and Douglas Crimp—mostly based in the United States—and their ideas, respectively, of a “corresponding publicness to the intimate,” “public feelings,” “poetry is the way we help give name to the nameless so it can be thought,” and connections between ideas and practices of mourning and militancy. I work with these thinkers to reconfigure hegemonic liberal ideologies around the public/private split in the context of the South African HIV/AIDS pandemic, focused on poems about HIV/AIDS.<sup>68</sup>

The chapter analyzes the relation between illness as a profoundly subjective, embodied experience and a public one, deeply mediated by social discourses of shame and stigma, the historical forces of racialization and the market, new forms of governmentality in relation to the ir/rationalities of public health policy, and beyond. That these representations are poems, and thus bound up with performances of formal protocols and ideas of aesthetic sublimation, adds a corresponding wrinkle to the question of what kinds of public knowledge and subjective experience they may contain. Contextually, many of the major questions that the rubric of public feelings wishes to address are evident in an event like the South African Truth and Reconciliation Commission, where narrative testimony was imagined as having emotionally reparative force in a wider project of nation-building.<sup>69</sup> Borrowing from Muriel Rukeyser’s idea that “poetry extends the document,” and Audre Lorde’s “Poetry Is Not a Luxury,” I turn to poetry as a way of interrupting what could be called neoliberal uses of testimony, documentary realism, and memoirs as the privileged archive for thinking about the role of affect in public life.<sup>70</sup> My hope is that the poems can stand in supplementary rather than substitutive relation to these other forms and genres.<sup>71</sup>

Many of the texts published about HIV/AIDS in sub-Saharan Africa in English at the turn of this millennium conform to the narrative rules and prose styles of what is often termed fiction for “young adults” and operate within the framework of the confessional with the apparent intention of warning/educating HIV negative people and/or promoting tolerance of those who are already HIV-positive. Chapter 5 will focus on Carolyne Adalla’s *Confessions of an AIDS Victim* (Kenya, 1993) and Lutz van Dijk’s *Stronger Than the Storm* (South Africa, 2000).<sup>72</sup> Both novels reveal a fatalism difficult to recoup for political agency, relying on a sensational moralism to do the work of imagining survival and social reproduction in the face of the pandemic. In *Confessions of an AIDS Victim*, the first-person narrator of what is essentially one half of an epistolary novel represents herself

and her infection as the result of bad personal choices. The young people in *Stronger Than the Storm* are clearly victimized by more than themselves. The HIV/AIDS pandemic is revealed as both a new crisis for the reproduction of social life and as a continuation and intensification of preexisting colonial and postcolonial biographies. In the perceived urgency of their pedagogical imperatives, both novels chart swerving courses between figurations of agency and victimage. Both novels engage their historical contexts through an allegiance to realism and by inviting national allegorical readings, but also need to produce more universally identifiable protagonists.

Kgebetli Moele's *The Book of the Dead* (2009) provides the single-most elaborated fictional attempt to imagine the HI virus as an authorial agent.<sup>73</sup> HIV is presented as the actual author of the second half of the book. Chapter 6 reads Moele's novel as an attempt to understand the historical agency of HIV/AIDS in post-apartheid black South African biographies by making HIV an author, and further considers the oblique references to other possible books, authors, and genres for the writing of these biographies. Death by AIDS can be read in the novel as punishment for the racial betrayal of the national liberation struggle by Black elites for forgetting the historical injustices of settler-colonialism and apartheid, even as the sociological descriptions in the novel refuse to name apartheid explicitly. The eponymous book of the dead rewrites the notorious documentary forms and practices of the apartheid state in an often almost literal counting and discounting of Black life and death.

The coda to this book deals with "African AIDS" in the time of COVID. The top brass of the United States wanted to ignore HIV/AIDS in the 1980s—Ronald Reagan notoriously managed to serve seven of his eight years as president without mentioning the word AIDS publicly. That was not the case with Donald Trump and COVID-19. Trump produced a series of spectacularly incoherent pronouncements, sometimes with the intention of minimizing the risks of this new coronavirus, but also using the virus to stir the mix of xenophobia and economic protectionism central to the populist tenor of his presidency generally. Since the threat of COVID was perceived as universal and less containable to marginal populations, ignoring the disease was not an option for Trump as it was for Reagan. The cultural and symbolic differences between a disease whose mode of transmission is mostly airborne and one which is mostly sexually transmitted are at play here, particularly in terms of the moral logics of guilt and innocence. In relation to the two very different pandemics, and in terms of an ill-defined

phenomenon named denialism, Trump, on occasion, began to look more like an earlier South African president, Thabo Mbeki, whom he could not resemble less stylistically or temperamentally. This coda resituates the central arguments of the book in the era of another global pandemic.

This book will be the first single-authored monograph to analyze the literary and cultural production of and about the “African” HIV/AIDS pandemic. It is in dialogue with *Blood on the Page* (2010), Lizzy Attree’s collection of interviews with African writers, who have written about HIV/AIDS, as well as Ellen Grünkemeier’s *Breaking the Silence: South African Representations of HIV/AIDS* (2013), though my book will suggest that there was more noise than silence in this representational scene.<sup>74</sup> I use the extraordinary ethnographic insights of Jonny Steinberg’s *Three Letter Plague/Sizwe’s Test* (2008) to both ground and expand upon the readings of the cultural archive of the pandemic.<sup>75</sup>

This book continues and partly revises for an African set of texts and audience the now long tradition of cultural analyses of HIV/AIDS arguably inaugurated by the Paula Treichler essay mentioned above, given defining impetus by the anthology *AIDS: Cultural Analysis, Cultural Activism* (1988) edited by Douglas Crimp, and hopes to join the resurgence of works on HIV/AIDS such as Joseph Osmundon’s wonderful *Virology: Essays for the Living, the Dead and the Small Things In Between* (2022), Steven Thrasher’s *The Viral Underclass: The Human Toll When Inequality and Disease Collide* (2022), Marika Cifor’s *Viral Cultures: Activist Archiving in the Age of AIDS* (2022), Laura Stamm’s *The Queer Biopic in the AIDS Era* (2021), and Ally Day’s *The Political Economy of Stigma: HIV, Memoir, Medicine and Crip Positionalities* (2021), as well as the edited anthologies: *AIDS and the Distribution of Crises* (2020) and *Literary and Visual Representations of AIDS: Forty Years Later* (2020).<sup>76</sup> *Pandemic Genres* adds a selected African archive to these inquiries and offers a more global contextualization to their predominantly national framings to understand better what Jean Comaroff has called the “savage cosmopolitanism” of the pandemic, which implicates us all.<sup>77</sup>

Over the many years that I have been working and not working on this book, I have been asked about its main “takeaways”—mostly by well-intentioned people. That is a question that makes me both defensive and irritated. “Takeaways,” besides being the non-American English word for fast food takeout, can seem part of the ensemble of neoliberal governance discourses—the vulgar lazy sibling of “best practices”—that I critique in chapter 5: easy, portable, resistant to accountability, reductive. Instead of

writing a book, I guess I could have made a bumper sticker, or refrigerator magnet, or even better yet a piece of kitchen verbal art, along the lines of “Live, Laugh, Love” that said “read, think, imagine, care.” The political, moral, and aesthetic imperatives contained by those words are immensely difficult and would obviously not be the same for all readers and their experiences and imaginings of a worldly “African” HIV/AIDS pandemic.