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*Hope in View of HIV/AIDS in South Africa:
Public Discourse, Faith and the Future*

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[OLVJIL001]

A minor dissertation submitted in *partial fulfillment* of the requirements for the award of the degree of Master of Philosophy [MPhil in HIV/AIDS and Society]

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COMPULSORY DECLARATION

This work has not been previously submitted in whole, or in part, for the award of any degree. It is my own work. Each significant contribution to, and quotation in, this dissertation from the work, or works, of other people has been attributed, and has been cited and referenced.

Signature:

Signed by candidate

 Date: 29/03/2005

Table of Contents

Abstract	
Acknowledgements	
List of Abbreviations	
1. Introduction	1
1.1 Motivation	1
1.2 Scope and structure of the research	4
1.3 Key concepts	6
2. Rationale and theoretical framework	8
2.1 Researching HIV/AIDS in South Africa	8
2.1.1 Transdisciplinary studies in the context of HIV/AIDS	9
2.1.2 “Cultural studies”	10
2.2 The social construction of HIV/AIDS	12
2.2.1 Discourse, public discourse and culture	14
2.2.2 Image as discourse	15
2.2.3 The social construction of emotion	16
2.3 The study of religion and Christian Hope in the context of HIV/AIDS	19
2.4 Researching “hope”	22
2.4.1 Drawing a line in the sand between individual and public discourses	23
2.4.2 Hope and hopelessness in PLWHA	24
2.5 Conclusion	27
3. Two images of hope in South Africa	29
3.1 Description: One image of the future, another without hope	29
3.2 Context: Images of the New South Africa	31
3.3 Context: Images of “African AIDS Victims”	36
3.4 Dominant discourses of national hope ruptured by HIV/AIDS	40
3.4.1 “The African Renaissance”	41
3.4.2 “The Magic Bullet”	44
3.4.3 “The rainbow nation”	47

3.4.3.1 Social cohesion	47
3.4.3.2 Hope and stigma	52
3.4.3.3 Hopeless futures	55
3.4.4 Hopeless and Othered: pulling it all together	58
3.5 Conclusion: HIV/AIDS as a challenge, hopeful humanism	61
4. Potential of Christian discourse in the context of HIV/AIDS	65
4.1 From public media to public religion	65
4.2 Potential assets of Christian public discourse	67
4.2.1 Christian discourse is strongly narratological	68
4.2.2 Christian discourse has a performative and declatory aspect	69
4.2.3 Christian discourse: both a public tool and express individual emotion	71
4.2.4 Christian discourse celebrates irrationality	73
4.2.5 Christian discourse is strongly metaphorical	75
4.2.6 Christian discourse has power over the past	76
4.2.7 Christian discourse is 'value-laden'	77
4.2.8 Christian discourse is authoritative on issues of hope	78
5. Potential of a Theology of Hope in the context of HIV/AIDS	79
5.1 Learned hope: hope that experiences the negative	80
5.2 A political theology: hope involved in the social and political	85
5.3 A transformative and liberatory hope	86
5.3.1 Simultaneous multidimensional action	86
5.3.2 Real economic transformation	88
5.4 Imaginative force	89
5.5 Hopes beyond 'the God of Success' and 'the apathetic man'	91
5.6 Hope in the context of biomedicine and death	93
5.6.1 A theology of hope and death	95
6. Conclusion and way forward	98

Bibliography

ABSTRACT

Since the miracle of peaceful democracy in South Africa, “hope” has been a strong theme in the public media. Hope for a renewed nation, for Renaissance, for something extraordinary at the end of the Rainbow Nation. At the same time, South Africa is apparently also the HIV/AIDS capital of the world, with accompanying narratives of hope, despair and horror. How do we reconcile these opposing images of South Africa? Does the social construction of “hope” in the public discourse affect the way we understand and interact with HIV/AIDS? Do discourses of “hope” have real and practical consequences when it comes to crucial issues such as policy, prevention, stigma, risk perception or funding?

The following exploratory and transdisciplinary study seeks to pull together a wide variety of theoretical and analytical stances in order to examine the social construction of hope in the context of HIV/AIDS in South Africa. The theoretical framework is built from a base of cultural theory, discourse analysis and theology, and binds these together into a transdisciplinary argument. This is done in two related parts.

Firstly, focused on the theory of “cultural studies” and the “social construction of HIV/AIDS”, two media images are deconstructed: one of the World Cup Soccer bid and another of South African AIDS. The aim here is to deconstruct some of the public discourses of hope and hopelessness, showing that the use of “hope” is not natural or obviously positive in the context of HIV/AIDS in South Africa. The resulting conclusion is that there is discourse of national hope for South Africa that actively excludes HIV/AIDS from the national imaginary, placing HIV/AIDS and people living with HIV/AIDS as profoundly Other.

The second section of the study then shifts attention to mainstream Christian constructions of hope in the public media. Through analyzing the potential of Christian public discourse and Jurgen Moltmann’s Theology of Hope, the argument here is that Christian discourses of hope could be utilized to bridge the gap between national hopes and HIV/AIDS. The conclusion is that the church therefore has a unique opportunity to lead and invigorate the fight against HIV/AIDS through a cautious application of “hope”.

In conclusion, this study seeks to problematise any naturalized use of the concept of “hope” in HIV/AIDS, to reinvigorate further research into different cultures and philosophies of “hope” so as to be able to trace a more careful route towards a determinedly hopeful discourse of HIV/AIDS in South Africa. In this way, we seek to carefully shift discourses of HIV/AIDS from a calamity and national threat to a public challenge and opportunity.

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LIST OF ABBREVIATIONS

AICs	African Initiated Churches; also known as African Independent Churches
AIDS	Acquired Immunodeficiency Syndrome
ANC	African National Congress
ARHAP	African Religious Health Assets Program
ARV	Antiretroviral Therapy
ASRU	AIDS and Society Research Unit (University of Cape Town)
CPSA	Church of the Province of South Africa (Anglican Church)
DOH	Department of Health
FBO	Faith-based Organisation
FIFA	Federation of International Football Associations
HAART	Highly Active Antiretroviral Therapy
HIV	Human Immunodeficiency Virus
IDASA	Institute for Democracy in Southern Africa
IHP	Interfaith Health Program
IMC	International Marketing Council of South Africa
KZN	Kwazulu Natal
MRC	Medical Research Council
NGO	Non-governmental Organisation
PLWHA	People living with HIV/AIDS (both infected and affected)
SAAVI	South African AIDS Vaccine Initiative
SAB	South African Breweries
SACC	South African Council of Churches
TAC	Treatment Action Campaign
TRC	Truth and Reconciliation Commission
UCT	University of Cape Town
UWC	University of the Western Cape
WCC	World Council of Churches
WHO	World Health Organisation

Chapter 1. Introduction

Hope becomes a passion for what is possible – Søren Kierkegaard.

1.1 Motivation

There is a wonderful advert on the television at the moment. It is a South African Breweries advert during which a diverse group of South Africans loop a thick rope around the world and, to the emotive soundtrack of Johnny Clegg's *The Crossing*, pull the continents of the world closer together. The voiceover ends, "...by harnessing the power of our nation we can all achieve the extraordinary. South African Breweries, inspired by a nation". As intended, this advert engenders warm and hopeful feelings towards being a "New South African" - of living in a special place in extraordinary times. The optimism of "the new" is still strong as it is evoked ten years after the first democratic elections and is expressed across our media and through deliberate marketing campaigns such as "Proudly South Africa", Brand South Africa's "Alive with Possibility", or the "Homecoming Revolution".¹ We had a peaceful transition to democracy, we are said to have the best constitution, the most abundant wildlife environment, competitive sporting heroes, and the most admired icon living in the world today, Nelson Mandela. According to various public studies, despite the challenges of reconstruction and development, we are an increasingly hopeful and optimistic nation (see Boyte 2004, IMC 2005, Mbeki 2005).

On the other hand, we are also apparently the "HIV/AIDS Capital of the World" (see Kauffman 2004). We have stigmatized HIV/AIDS victims, deepening poverty, a threatened economy and widening fissures along the fault-lines of race, class and gender. Yes, there are moments of hope, treatment programs started, courageous individuals making a difference, but for every triumph there seems to be a handful of discouraging let-downs, unseen factors, inexplicable results, human errors and grinding fear, anger and apathy. The media is still regularly filled with doomsday scenarios and "unbelievable" statistics - the future of our nation becomes unimaginable - unimaginable and inexplicably

¹ For more information on these campaigns, see www.imc.org.za, www.proudlysa.org.za, www.homecomingrevolution.co.za, or www.sagoodnews.co.za.

Other to the mythology of the hopeful “Rainbow Nation” or the “New South Africa”. Such is the reaction that caused the HIV/AIDS/STD Strategic Plan for South Africa 2000-2005, intended as the guiding policy document for the national response to HIV/AIDS, to begin with the bewildered words, “During the last two decades, the HIV pandemic has entered our consciousness as an incomprehensible calamity” (GOVZA 1999, 5).

During my immersion in the academic world of HIV/AIDS for the completion of this degree, I began to find these differing projections of the New South Africa increasingly incompatible. I began to wonder at the way HIV/AIDS was being partitioned off as a career or humanitarian concern – certainly with conscious empathy and an increasing knowledge – but somehow inexplicably separate from my private hopes as an individual, hopes for my friends and family, for my home and for “us” in South Africa. I began to consider ways to express this through academic research. There is a vast and rapidly growing body of knowledge about the psychological or psychosocial effects of the disease on the individual, through which issues of hope and despair are already being researched. But what I was trying to grasp was something at a more public level than that - something less tangible but present across disparate disciplines or bodies of knowledge and representation.

I began to collect everything related to HIV/AIDS that I could lay my hands on, both media and academic literature, and immediately noticed how often the word “hope” was used in nearly all HIV/AIDS-related material. From news articles and personal accounts to policy documents and research papers, fund-raising flyers and graffiti on taxis. I soon began to struggle to find an article that did *not* use the word or sentiment of hope or hopelessness. The concept seems to cross every sector and subject touching on HIV/AIDS - sometimes it was tucked into a text, but more often it was standing blatantly in the titles of government HIV/AIDS campaigns, books on HIV/AIDS, international conferences, headlines, research projects and in the names of hundreds of non profit organizations and projects. “Hope” was everywhere, and appeared especially dominant in the HIV/AIDS-related discourse of the mainstream Christian religions. It appeared that “hope” was not only an individual expression of emotion, but also a public theme, a naturalized assumption. “We need hope”, “I have hope”, “there is hope”, “work towards hope”, “lost hope”, “channels of hope”, “bearers of hope”, “living in hope”, “project hope” – an

endless list of organizations, projects and headlines calling on hope in this time of HIV/AIDS.

I began to wonder at this very natural way “hope” was being invoked in every sector relating to HIV/AIDS. When you read the term, is it obvious what sentiment is intended, and for whom? In a public transcript or discourse, does “hope” take on different meanings in different contexts? Do personal aspirations and national hopes bear the same weight? And what are our hopes in a time of HIV/AIDS, anyway? Are they focussed and projected, or is there an underlying theme of “we-hope-it-will-just-go-away”? Do our (my / your) hopes for the New South Africa interface at all with the hopes for the epidemic, or is it only possible to dream of a “Rainbow Nation” or an “African Renaissance” if you are able to ignore HIV/AIDS entirely? Are HIV/AIDS victims who are represented as hopeless consequently then set apart from this optimistic national discourse? Could these issues of public hope have real and practical consequences when it comes down to crucial issues such as policy, prevention, stigma, risk perception or funding?

At first I was apprehensive about approaching a topic that is so closely linked to very personal experiences of the epidemic – that researching “hope” on the public level could be an affront to the ongoing battles people living with HIV/AIDS (PLWHA) fight in order to remain hopeful in the face of despair. An added caution stemmed from addressing something so emotional or “spiritual” in an academic realm that values tangible and rational research. Nevertheless, I began to wonder if these cautions did not themselves reflect underlying currents and power structures that could be affecting the way we perceive, live with, and research HIV/AIDS.

It became apparent to me that some of the intangible questions I had been considering could be examined through researching the social constructions or public discourses of “hope” in South Africa. It would necessarily be a broad and interdisciplinary research project, as well an exploratory one that could be begun but not entirely answered in the confines of a mini-thesis. Ultimately though, it would be a project that would begin to satisfy both my personal interaction with HIV/AIDS as well as have a pragmatic effect on various aspects of HIV/AIDS research, which is ethically necessary in this time of great urgency.

1.2 Scope and structure of the research

It is therefore my aim to begin to problematise or deconstruct “hope” in the public discourse of HIV/AIDS in South Africa. The topic was researched through the analysis of a broad literature across a variety of disciplines as well as a wide search of English-medium print-media archives. This media search was by no means either an exhaustive search or a rigorous analysis of every single article on HIV/AIDS, but was intended to provide suitable background knowledge and an awareness of dominant “trends” in the material. The core body of material for this initial media search was built from all articles on HIV/AIDS from the weekly newspapers *The Mail and Guardian* and *The Sunday Independent* for the period June 2003 to February 2005 and the daily *Cape Times* newspaper for the same period. Once the research arguments had been established, further primary material was gathered from various electronic media archives and Christian media sources such as *The Southern Anglican* magazine.

The research process was further informed through informal discussion with HIV-positive friends and colleagues. An academic literature search delved into all material containing words such as “hope”, “optimism”, “fatalism” or “confidence” and spiraled out from there. In addition, wide research was done on the social and critical issues of HIV/AIDS in society. This wide-ranging literature search identified two primary areas of academic knowledge relevant to the dissertation. The first was the interdisciplinary body of research on the “social construction” of HIV/AIDS and especially the interpretation of HIV/AIDS as an “epidemic of signification” (Treichler 1999). The second was the literature surrounding the Christian response to the epidemic and the “Theology of Hope” as developed by Jürgen Moltmann and his compatriots. These two seemingly disparate bodies of knowledge form a framework through which the following dissertation begins an interdisciplinary study of “hope” in the public discourse.

As this is an interdisciplinary study of an exploratory nature, it was deemed necessary to delineate its rationale and theoretical foundation as thoroughly as possible. Concepts such as “discourse” and “culture” have vast interdisciplinary backgrounds of their own that require explication. In addition, considering the methodology and theoretical instability inherent in this method, it was considered important to expose as much of the researcher’s

“positioning” as possible. As this discussion is lengthy, it was coalesced into a chapter of its own and will not be reiterated here in the introduction as might normally be expected.

Therefore, this study is presented in four major steps. Chapter 2 aims to explain the rationale for the research into “hope” and the method chosen to do so. The two main bodies of academic knowledge will be unpacked, namely, “the social construction of HIV/AIDS” and “the Theology of Hope”. In addition, central concepts will be problematised, such as: transdisciplinary research, cultural studies, public discourse and the social construction of disease and emotion. Finally, a brief outline will be given of current research into “individual” aspects of hope in HIV/AIDS so as to differentiate it from “the public” for the purposes of this study.

Chapter 3 is then positioned as an example of an analysis of the discourses of hope in a single media article that pulls together various themes that potentially impact on “hope”. This article was expressly chosen as a representation of dominant themes of hope that were identified by the aforementioned media search. The argument here is that the concept of hope can be deconstructed to reveal multiple discourses at play in two photographic images. In addition, it will be argued that there is a visible dominant discourse of “hope for the New South Africa” that has not internalised HIV/AIDS into its present or future projections, and therefore places HIV/AIDS as profoundly Other.

Chapter 4 then seeks to continue these considerations, but focussing on some of the particular assets of Christian (public) discourse that potentially make it a suitable vehicle to span this divide between public optimism and HIV/AIDS. Here, media examples used to forward the argument will be mainly taken from Christian HIV/AIDS guidebooks and articles from Christian magazines.

Chapter 5 then examines the potential of utilizing Jürgen Moltmann’s Theology of Hope in the context of HIV/AIDS in South Africa. The argument here is that if the Christian discourse of hope is so dominant in the public arena and (potentially) carries the message of the Theology of Hope - then it could be a suitable channel through which to create an inclusive discourse of HIV/AIDS within the New South Africa.

The final chapter then seeks to pull together these various threads of discussion and recommend areas for future research. In this way, this thesis aims finally to suggest that through an inclusive discourse of hope, the public representation of HIV/AIDS could be shifted from an “incomprehensible calamity” to a public challenge and that the church is well set to play a primary role in this mission.

1.3 Key Concepts

AIDS

Acquired Immunodeficiency Syndrome (AIDS) is the medical designation for a set of symptoms, opportunistic infections, and laboratory markers indicating that a person is in an advanced stage of HIV infection with an impaired immune system.

HIV/AIDS

This term will be used to indicate the complete range of stages of infection, sero-conversion and resulting opportunistic infections associated with this pandemic, as well as the cultural, behavioural, political and spiritual factors impacting on the course of the pandemic. While it is acknowledged that HIV and AIDS are different conditions, for the sake of convenience and to remain in line with current academic and media conventions the term “HIV/AIDS” will be used instead of “HIV and AIDS”.

HIV/AIDS epidemic

It is currently understood that there is not just one epidemic but multiple local and national epidemics with different characteristics and patterns. In addition, HIV/AIDS is in fact a “pandemic” that spans localised and national borders. However, while the plural “epidemics” or “pandemic” would be more accurate, for the purposes of this study the more commonly used singular “epidemic” has been maintained, but in the understanding that it represents multiple variations and experiences of being infected and affected by HIV/AIDS.

PLWHA

In the same way, a person (or people) living with HIV/AIDS cannot be considered a discrete cultural category as it encompasses multiple varieties of people and experiences of HIV/AIDS.

Discourse

This is a central concept in the study and will be fully defined in section 2.2.1. I follow the more general interpretation of Hall (1990) who (leaning on the work of Foucault) defines discourse as a group of statements which provide a language for talking about – i.e. a way of representing – a particular kind of knowledge about a topic.

The Other

The concept “the Other” is a widely used in the humanities and in cultural theory. The word “Other” generally indicates those outside of, and implicitly subordinate to, the dominant group. According to Said (1978), a distinctive aspect of being “Other” is that one is the object of someone else’s fantasies, but not a subject with agency or voice.

Chapter 2. Rationale and theoretical framework

So it was that in this disease there was no cause which came within the province of human reasoning; for in all cases the issue tended to be something unaccountable
- Procopius on the plague (542 AD).

While the dearth of clear conceptual methods through which to study “hope” in the public discourse of HIV/AIDS is certainly challenging and intellectually stimulating, at the same time it can be potentially hazardous. It raises a clutch of thorny methodological issues and calls for knowledge at a number of levels. In the following chapter the theoretical framework of the dissertation will be established in order to explain the rationale for this choice of methodology and theory, to delineate my understanding of some of the more amorphous concepts, and to clarify my own subjective positioning to the reader as far as possible.

2.1 Researching HIV/AIDS in South Africa

Is it necessary to argue at length that HIV/AIDS is an important field of research at this time in South Africa? Surely the multitude of personal accounts of weekly funerals and inexplicably young deaths are enough to convince us that this epidemic is a disease-complex with deep implications for nearly every aspect of our lives. Current statistics project that there are over 5 million people living with HIV in South Africa, with over 900 people dying of AIDS every day (ASSA 2002).² I also consider it important that, as Whiteside and Stover (1997) point out, the full macro impact of the Southern African epidemic may not yet be felt for another 50-75 years. My understanding of HIV/AIDS is based on the premise that the disease is as much an epidemic of society as it is biomedical, that is, while it is a biomedical agent it is transmitted and understood through social processes and situations that are as equally important as the biomedical paradigm. I will admit here to a “political” agenda in so far as I believe that HIV/AIDS can be seen as a nexus for everything that is “wrong” with our society, and therefore an opportunity (given sufficient motive and urgency) to effect change across a broad spectrum.

² This is according to the ASSA2002 Aids and Demographic Model. See www.assa.org.za or www.redribbon.co.za for current statistics and further demographic models.

2.1.1 Transdisciplinary studies in the context of HIV/AIDS

The more we have come to understand the disease as both a biological and social phenomenon, the more we understand our interaction with it reflects a complex and multidimensional reality – and an international and multicultural one at that (Rosenberg 1992, 303).

More and more research is emphasizing that the HIV/AIDS epidemic is not only a biomedical phenomenon, but is complexly embedded in the social paradigm as well. This recognition of HIV/AIDS as a multiplex disease has resulted in a many calls for multi-, inter-, or transdisciplinary research (see Craddock 2004, Kauffman and Lindauer eds. 2004, Lindenbaum 1992). Such research is seen as the avenue to putting aside academic wrangling in a cooperative drive to find the “something missing” from our current knowledge, and as a route to forming over-arching understandings of an epidemic that has stepped out of neat boundaries and invaded every aspect of society. This mini-thesis is presented for the interdisciplinary degree of “MPhil in HIV/AIDS and Society”, which prompts precisely the approach I am here adopting. However, although interdisciplinary research is recognized as necessary and urgent, researching HIV/AIDS with all its complexities and uncertainties from this “interspace” remains problematic, and an exploratory study of “hope” in the public discourse of HIV/AIDS even more so. However, as mentioned, the “discourses of hope” can be seen in every sector of HIV/AIDS commentary, and the researcher is therefore similarly compelled to follow beyond safe disciplinary boundaries. Therefore, for the purposes of this study the term “transdisciplinary” will be used to more clearly describe the combined (simultaneous) use of various methods and theory within a single study, rather “interdisciplinary” which more commonly applies to differently placed academics working together on the same project (see Max-Neef 1991, 15).

But how can knowledge be meaningfully generated, situated in an interdisciplinary interspace, based on an already interdisciplinary body of knowledge (that is, “cultural studies” and “religion”) and using a transdisciplinary research method? As Gunderson, who works between the fields of faith and public health, observes,

...Working in the relationships between disciplines, fields of practice, institutional capacities and competencies...is not primarily an intellectual space, but a physical, existential space that is in between all those things we know. The space in which we are trying to do scholarship is filled with haunting ambiguities and confusions in which hope and horror are intermingled (Gunderson 2003a, 20).

The greatest danger inherent in a transdisciplinary method is that the study can consequently lose academic relevance and can offend specialists in the fields it transverses. This is especially true for a study such as this where, by necessity, certain complex topics and discussions must be dealt with at a superficial level, pointing towards future research but not completely dealing with every aspect of each new consideration. The only defence against such concerns can be a “belief” and an “intention”. The belief is that transdisciplinary studies have value that counter-balance these short-comings, especially considering its ability to pull wide-ranging but related discussions together into a new light. The intention is to treat the material as thoroughly and ethically as possible in the context of the mini-dissertation, and to consistently point the reader towards the larger debates through referencing. Therefore, in this case, this choice of method is supported by the understanding that it functions as a starting point for further discussion and therefore resulting critique from disciplinary specialists is both anticipated and welcomed.

2.1.2 Cultural studies

As Doherty (1999) suggests, rather than bringing theory to cultural texts we need to let our theorizing emerge from those texts. The point is not to affirm one's theoretical identity, but to have an encounter that threatens it (Nuttall and Michael 2000, 23).

Therefore, in an effort to further “position” this research: I am a “white” South African woman. I come from an academic background in literary and historical studies and in “the real world” worked in the media and publishing industries. A more recent segue into sociology and interdisciplinary research was reflected by a new insertion into the world of non-profit organizations and “development” projects. This trajectory has positioned me

academically in what I understand to be the field of “cultural studies”, which in itself is an interdisciplinary and much contested position, and one that spans fields such as anthropology, sociology, philosophy, history, linguistics, critical theory and hermeneutics. It is this complexity that has led McRobbie to talk of the “messiness of cultural studies” (1992, 772). For my purposes, Threadgold best describes the general theoretical assumptions that connect different researchers in this field:

...A social constructionist view of language; the idea that realities and subjectivities are constructed in and by language; that subjects construct themselves and the worlds they inhabit in their everyday uses of language; that power relations are constructed and deconstructed through these processes; that what we call the social and cultural are similarly constructed and deconstructed; that this activity is characterized by narrativity, that changing narratives, telling stories differently, might change the social world and that the goal of work on and with language is a politics committed to social change through what Eco (1979) would have called a semiotic labour on and with texts (2003, 1).

Cultural studies, as I understand it, is further differentiated by the attention it gives to “mass”, or “popular” culture. “Part social movement, part interdisciplinary studies” (Davies 1995, 1), cultural studies seeks to “discover, to expose, and to struggle with the potential for ‘hegemonic’ control embedded in ‘mass’ and ‘popular’ culture, especially with respect to ideologies of race, class, gender and nation” (Thornton 2000, 29).

The greatest amount of critique aimed at cultural studies is therefore focused on its lack of “critical literacy” (see Nuttall and Williams 2000, Parr 1996, Thornton 2000). While this study does not have the capacity to go into this in any great detail, one response to this critique has come from David Coplan, who is identified as one of the most skilled practitioners of contemporary cultural studies (Nuttall and Michael 2000, 14). Coplan replies that it is precisely what he sees as an “instability” at the heart of cultural studies that makes it so productive – which enables him to ask questions that would otherwise

remain hidden (1994, xix).³ While understanding that in the context of an academic dissertation this extreme positioning would be inappropriate, I nevertheless nurture the sentiment that it is sometimes in stepping beyond the boundaries of the “expected” that new ideas are forged, and that these new ideas are urgently needed in the context of HIV/AIDS.

2.2 The social construction of HIV/AIDS

In multiple, fragmentary, and often contradictory ways, we struggle to achieve some sort of understanding of AIDS, a reality that is frightening, widely publicized, yet finally neither directly nor fully knowable. AIDS is no different in this respect from other linguistic constructions that, in the commonsense view of language, are thought to transmit preexisting ideas and represent real-world entities yet in fact do neither...rather, the very nature of AIDS is constructed through language...
(Treichler 1999, 11).

There are a growing number of researchers from various disciplines and backgrounds who I have perhaps crudely clustered under the label “social construction of HIV/AIDS”. As mentioned, this is one of two bodies of knowledge on which this thesis relies heavily. What links these intellectuals together is an interest in the way that diseases emerge within a social context, the way complex processes and concepts are defined and understood, and the way these conceptions of disease affect our responses to the epidemic.⁴ The understanding that the knowledge, powers and institutions that govern thought and social behaviors are “constructed” is a central concept of cultural studies. As Thornton observes:

³ In the preface to his book, Coplan writes: “Gone are the empiricist (mis)representations of sociology, the unwarranted authority of synthesizing positivist anthropology. I don’t make it easy for readers with a particular disciplinary interest to pick out what they think they are looking for. I don’t tell you where I’m going or where I’ve been” (Coplan 1994, xix).

⁴ This is a large and varied body of knowledge. See, for example, Fee and Fox eds. (1988, 1992) for the social construction of contemporary history; Sontag (1991) on the metaphors of disease; Seidel (1993) on competing discourses of HIV/AIDS; Adam (1989, 1992) or Aggleton, Hart and Davies eds. (1989) on social construction in the context of sociology and social research; Cochrane (2004) on the social construction of epidemiological and surveillance knowledge; Barbour and Huby (1998), Patton (1990) or Treichler (1999) on HIV/AIDS as an epidemic of signification; or LeClerc-Madlala (2001) on the cultural construction of HIV/AIDS and femininity.

According to this view, the knowledge that we have, and often take for granted, such as ideas of economy or culture, has been ‘constructed’ through a complex set of experiments, procedures, insights and above all, texts in which this knowledge is contained and communicated. Generally it is held that this construction takes place within a context of power relations that suppress some kinds of constructions, while elevating others to the status of ‘the normal’ or the canonical...cultural studies however, holds that these ‘texts’ are reproduced, sold, taught, institutionalized or practiced in relation to some system of power that necessarily makes a selection, imposes values and morality and thus determines their truth or goodness (2000, 35).

While there is valuable work being done from various sources, an academic on whose work this discussion is particularly reliant is Paula Treichler, whose various writings are gathered in the book, *How to have a theory in an epidemic: Cultural chronicals of AIDS* (1999). Treichler observes that the AIDS epidemic has produced a parallel epidemic of meanings, definitions and attributions that she has called “an epidemic of signification”. Researching the HIV/AIDS epidemic in this way is not an exercise aimed at arriving at a single “truth about AIDS”, but is interested in examining the process and consequences of particular forms of narrative construction of disease – where the very nature of HIV/AIDS is constructed through language and the influence of dominant discourses.

There is, of course, an overlaying concern that such a focus on language and social constructions can be frustrating and distressing in face of the despair and practical demands of the HIV/AIDS epidemic. However, all those researchers involved in the social construction of HIV/AIDS share an understanding that such factors as language and discourse have very real and practical consequences. For example, as the history of HIV/AIDS in South Africa has shown most clearly, the battle between scientists, politicians, dissidents and activists is one of (public) discourse – a battle of ownership between different bodies of knowledge and power. Various contenders have fought for symbolic ownership of the HIV/AIDS epidemic, each with their own set of interests, and impacting differently on the generation of HIV/AIDS discourse (Adam 1992, 6). Issues of power and discourse therefore determine such fundamental concerns as: who has the authority to speak on HIV/AIDS and who remains silent, where research and funds are

directed, what is researched, how policy is created, and even how important we perceive HIV/AIDS in relation to “our” lives. Hall argues,

The question of AIDS is an extremely important terrain of struggle and contestation. In addition to the people we know who are dying, or have died, or will, there are the many people dying who are never spoken of. How could we say that the question of AIDS is not also a question of who gets represented and who does not?... (AIDS) is a site at which not only people will die, but desire and pleasure will also die if certain metaphors do not survive, or survive in the wrong way (1992a, 285).

The social construction of HIV/AIDS therefore has very practical and pragmatic consequences, not only impacting on such “hot issues” as prevention and treatment but also on broader aspects of our lives “beyond HIV/AIDS”.

2.2.1 Discourse, public discourse and culture

The term “discourse” has been interpreted in a multitude of ways (see Mills 1997). For the purposes of this study, “discourse” gains a more general interpretation such as the one by Stuart Hall, where a discourse can be seen as “a group of statements which provide a language for talking about – i.e. a way of representing – a particular kind of knowledge about a topic. When statements about a topic are made within a particular discourse, the discourse makes it possible to construct the topic in a certain way. It also limits other ways in which the topic can be constructed” (Hall 1990, 290). For example, Treichler (1999) variously points out how the nature of AIDS is constructed through discourses of medicine and science; “First World” or “Western” discourses of “Third World AIDS”; or discourses relating to gender or heteronormativity.

Foucault (1978) famously says, “we must conceive discourse as a violence that we do to things, or, at all events as a practice we impose upon them.” What is particularly important for this study is the understanding that discourses are produced within power relations. That is, a “dominant discourse” that is commonly visible in the public media has been

made successful by its connection to networks of power (see Abu-Lughod and Lutz 1990, Gibbons 1987, Hall 1990, Mills 1997). In unpacking HIV/AIDS as an “epidemic of signification”, Treichler (1999) points out that while HIV/AIDS is a complex cultural phenomenon that produces diversity and contradiction, “dominant” meanings also emerge – default meanings that can be expressed with little fear of being challenged. These dominant discourses therefore create “preferred readings” of public texts - that is, the reader is not passive, but is positioned at a nexus of various power influences, where a dominant discourse has a greater impact and effect.

Therefore, although the concept of a “dominant discourse” will be used for the purposes of this study, another angle (perhaps for future research) would be to more clearly define different “cultures” of hope. While Abu-Lughod might go so far as to recommend replacing “culture” with “discourse” altogether (1991, 147), my understanding is that a study of “cultures of hope” would more explicitly delineate boundaries and differences between representations of hope in public and private transcripts. In this light, an exploratory look at dominant discourses of hope in the public media is clearly lacking in nuanced understanding of cultural variations hidden from the public transcript. In the same way, the focus on English-language print media severely limits this discussion, as it does not encompass the various constructions of hope in different contexts, languages and cultures. In defence, however, this study is positioned as a preliminary discussion, which would lead to further, targeted research.

A further critique of such “discourse analysis”, and indeed of all interpretive social science, is that such research often reveals more about the researcher than the material being researched (see Blommaert and Bulcaen 2000, Mills 1997). Again, the only defense can be an “intention” to be as critically “exposed” as possible throughout the study so that readers can build their own understanding of the researcher’s position and the research process.

2.2.2 Image as discourse

A photograph is a secret about a secret. The more it tells you, the less you know
(Arbus quoted in McClintock 1995, 124).

In the following chapter, various discourses reflecting on hope will be highlighted through a close analysis of two news photographs. It is therefore perhaps necessary to briefly discuss the use of an image as discourse. In cultural studies, the image has been particularly privileged, and is taken as a “visual metaphor” which influences consciousness and memory (Nuttall and Michael 2000). News photography has a particular potency as such images not only represent visual markers and symbols (such as “Rainbow Nation” and “African AIDS”) but they are also presented to the reader as windows into “the real” – as compared to articles which would accompany these pictures and could be more easily cast aside as journalistic “opinion”.

Journalism calls on news photography to secure an alibi of transparency and immediacy. News photographs as a genre draw on the discourse of clarity, transparency and naturalness towards which all realisms aspire; in addition, their sense of immediacy and truth is bolstered by their use in the media, which itself is driven by a discourse of professional access to truth. Photography gained power through the history of realism to which it lays claim, a history of telling the ‘truth of the world’ (McClintock 1995, 125).

Therefore, for the purposes of this study, the image is a “text” and not a snap shot of reality, and as a text can be deconstructed and examined for underlying structures of power, knowledge and discourse.

2.2.3 The social construction of emotion

As both an analytic and an everyday concept in the West, emotion, like the female, has typically been viewed as something natural rather than cultural, irrational rather than rational, chaotic rather than ordered, subjective rather than universal, physical rather than mental or intellectual, unintended and uncontrollable, and hence often dangerous (Lutz 1990, 69).

In the context of HIV/AIDS, the dominant discourses that are most commonly examined are those of medicine, development, gender, ethics or morality (see Seidel 1993, Treichler

1999) and consequently, speaking of the social construction of “hope” in this tradition at first appears unusual. However, another group of researchers to whom this thesis is obligated are those (mostly cultural anthropologists) who have studied the social construction of emotion (see Lutz and Abu-Lughod 1990, Lutz and White 1986). These academics have studied discourses of emotion and emotional discourses as social practices within diverse ethnographic contexts. Their approach is differentiated from previous work (for example in the psychology field) by its focus on “the constitution of emotion, and even the domain of emotion itself, in discourse or situated speech practices, by its construal of emotion as about social life rather than internal states, and its explorations of the close involvement of emotion talk with issues of sociability and power – in short, with the politics of everyday life” (Abu-Lughod and Lutz 1990, 1-2). This research has been valuable to this study as it assists in creating an (academic) line between individual experiences of hope as an internal emotion, and the social and public representations of such an emotion – as will be discussed in more detail below.

In their collection *Language and the politics of emotion*, Lutz and Abu-Lughod (1990) argue for a view of emotion as a discursive practice. That is, by paying attention to discourse, they show that emotions are not monolithic concepts, but are places of shifting and contested meaning in the same way that other social constructions are. In fact, emotions are even more susceptible to multiple moral readings because of their indirect quality, and the complexity of conceptual and situational factors contributing to emotional meaning (White 1990, 51). “A specific emotion attribution may have a range of potential entailments, and just which implications are brought to bear in a given interpretation may remain ambiguous” (ibid).

In this view, emotion, like the discourse in which it participates, is informed by cultural themes and values and also serves as an operator in a contentious field of social activity. Emotion therefore also affects the social field in which it operates, and serves as an idiom for communicating such diverse matters as social conflict, gender roles and the nature of the ideal or deviant person. Abu-Lughod and Lutz (1990) continue (emphasis theirs):

...Emotion and discourse should not be treated as separate variables, the one pertaining to the private world of the individual consciousness and the other to the public social world...emotion talk must be interpreted as *in* and *about* social life

rather than as veridically referential to some internal state (11)...the reality of emotion is social, cultural, political and historical, just as is its current location in the psyche or the natural body (18).⁵

For example, Lutz explores the concept of emotion as a master Western cultural category, and examines the unspoken assumptions embedded in the concept of emotion from a “widely shared American ethnotheory of Protestant European, middle class background evident in social science theorizing, everyday discourse and clinical psychology” (1986, 289). For this thesis, based on dominant discourses in English-language print media, in the globalising and post-colonial context of South Africa, Lutz’s research rings true despite its stated focus on the Euro-American emotive discourses. In fact, as mentioned, further study would then be necessary to examine the local and cultural variations to this dominant discourse.

However, for the purposes of this dissertation, one crucial theme that Lutz examines is the way emotion stands in an important and primary contrast relationship to two contradictory notions: emotion is opposed, on the one hand, to the positively evaluated process of thought and, on the other to a negatively evaluated estrangement from the world. “To say that someone is ‘unemotional’ is either to claim that that person is calm, rational, and deliberate or that he or she is withdrawn or uninvolved, alienated, or even catatonic. Although each of these two senses of the emotional has played an important role in discourse, the contrast to rationality and thought is currently by far the more dominant and common use of the concept” (Lutz 1986, 289). We will return to this contrast between emotion and rationality later in this discussion. However, it was necessary to briefly mention this at this stage as it impacts on the rationale for the second body of knowledge that frames this interdisciplinary research namely, the Christian public discourse of hope and the “Theology of Hope”.

⁵ Although there is not the capacity to engage with this further in the confines of this thesis, this point can be powerfully defended using critical theory such as Lacan’s epistemology. For example, Lacan was the first psychoanalyst to blur the distinction between a picture of psychoanalysis as the province of emotions and philosophy as that of the mind (Ragland-Sullivan 1986).

2.3 The study of religion and Christian Hope in the context of HIV/AIDS

But what about Christians in the world? They are left standing between the theologians and the politicians, and they hear both sides. They live in the church as well as in politics. Somehow they must bring together their personal faith and their public political interest. This, however, is becoming an increasingly difficult assignment for Christians today (Moltmann 1975, 101).

While the theoretical discussion on “religion” and the “Theology of Hope” will be most completely dealt with in Chapters 4 and 5, it is necessary to mention it here in order to explain its relevance to this study, as well as to ensure that the section on the Christian public discourse is not seen as a separate entity from the chapter relating to the (“secular”) public preceding it. This intention immediately exposes an understanding about religion and discourse: namely, that the academic and public division between “religion” and “other” public life (such as politics) is a false binary division, built on since the Enlightenment, and one that masks the many ways “religious” discourse (beliefs, perceptions or culture) are intertwined within every aspect of the “the social” (see Benn 2002, Cassanova 1994, Cochrane 2003b, Derrida and Vattimo 1998, Habermas 2002). As mentioned, an initial media search quickly highlighted that discourses of hope were most evident in articles and documents on HIV/AIDS with a Christian focus.⁶ This was especially apparent in statements by Anglican officials, who have traditionally held a prominent position in the South African media (and political) discourses. Therefore, an initial rationale for including “religious public discourse” within this study was based on its prevalence, and the belief that this discourse should not be set aside for “religious academics”, but is an important element of the South African public discourse on HIV/AIDS and therefore needs to be studied within the public framework.

⁶ Such statements are based on a broad reading of media articles and as such will not be completely references throughout this study. However, as a demonstration, consider briefly a surface comparison between two primary documents on HIV/AIDS. The UNAIDS report “HIV/AIDS and young people: Hope for tomorrow” (2003a), despite the title, only contains the word “hope” within the text once, and this is to say that “in such circumstances young people have little hope for the future” (28). In stark contrast, the WCC document “Facing AIDS: The challenge of the churches response” (1997) contains the word “hope” no less that 43 times and directly confronts the issue of hope in sections such as “A theology of suffering, death, hope and resurrection” and others on counselling, prevention and care.

Robert Garner points out that a large majority of South Africans are affiliated to Christian Churches and that this affiliation is not purely “nominal” with research confirming that about half of South Africans attend worship once a week or more, “making it one of the most ‘churchy’ countries in the world” (Garner 2000, 46). What this means is that for a majority of South Africans, their interpretation of public constructions and discourses would be powerfully religious (see Benn 2002, Cochrane 1999, Du Toit 2002). Luckoff et al (1992) similarly observe that religion and spirituality are “among the most important factors that structure human experience, beliefs, values, behaviour, and illness patterns” (673).

Another reason for addressing “the religious” aspect within this study was to respond to an increasing demand for research into the ways religious groups (congregations, communities or assets) can be utilised to combat health crises such as HIV/AIDS (see ARHAP 2003, Green 2003, Green et al 2002, Schmid 2002, UNAIDS 2002, Woldehana et al 2004) This is less in recognition of individual effects of spirituality or faith, and more a realisation of the multitude of ways religious organisations and groups potentially work towards social health. Some of these “assets” can be found in other (secular) organisations, but some are unique to the religious group.⁷

Finally, my sojourn into the realm of religion and the “Theology of Hope” emphasised the fact that theologians and philosophers tied into an interest in the religious tradition have most extensively covered the concept of “hope”. While it will be impossible to do this tradition justice within the confines of this mini-thesis, I also believe it would be inappropriate to simply ignore this tradition and focus on the social aspects of hope as an emotion without considering the (intertextual) history upon which these hopes are built.

Therefore, various factors influenced the decision to include Christian Hope into this study. Firstly, Christian discourses of hope are prominent in the English print media examined. Secondly, to separate such a dominant discourse out on its own would not engender the appropriate understanding that various dominant discourses influence individual interpretations. Thirdly, a majority of South Africans are powerfully influenced

⁷ For a growing discussion on this topic see the African Religious Health Assets Program (ARHAP) based at the University of Cape Town, or the Interfaith Health Program www.ihpnet.org.

by religious discourse. Fourthly, there is an increased demand for research into the religious aspects of HIV/AIDS. Finally, Christian Hope has a strong philosophical or theological tradition that impacts on this discussion.

There are, however some obvious concerns attached to this decision. Firstly, I must openly admit that I am not theologically trained in any formal way, and acknowledge that no matter the need for such transdisciplinary research, the surface-level exploration across such a complex philosophical tradition as I will be forced to make is extremely hazardous, and potentially insulting. My lack of knowledge in the intricacies of “liberation theology” has been one example of a need for further research that was not possible in the confines of this study. However, I take comfort in two supporting factors. Firstly, the Christian discourse is visible in the public domain and is interpreted and acted on every day by “lay” people such as myself. If a Christian discourse of hope has theological complexities that I have missed entirely, then further research will definitely be needed to understand how these complexities appear and are enacted in the public domain. My second comfort is found in the work of academics in groups such as ARHAP who are similarly wrestling with the transdisciplinary complexities inherent in bringing “the religious” into its public place in studies on health and society (see Gunderson 2003a). My understanding here is that there must be a certain amount of “give-and-take” in order to begin this type of exploratory research, onto which more intricate, localized and comparative research can then be built.

Finally, the rationale for focusing to such an extent on Moltmann’s Theology of Hope, and applying it to the “public-national” context of HIV/AIDS is based on the understanding that Moltmann is not advocating a hope exclusive to the Christian experience. As South African theologian Denise Ackermann observes,

According to (Moltmann), Christian hope quite simply means that there will be a new creation of all things. This is not a narrow hope – one that offers comfort to Christians and lets the rest of humanity take care of themselves. It is hope for *all* of creation, for Israel, for the peoples of the world, for this earth and all that is in it (2003, 81).

Therefore, the concept of applying Moltmann's Theology of Hope to the context of HIV/AIDS is not a missionary endeavor. Rather, it is an examination of a powerful discourse of hope in the context of HIV/AIDS, and an attempt at highlighting a potential philosophical path to a better future, whatever your belief or faith.

2.4 Researching "Hope"

All hope abandon, ye who enter here – written across the gate of Dante's hell.

The study of hope has a vast and far-reaching background and for centuries, academics and philosophical thinkers have been engaging with the concept. While there is not the capacity to go into this in great detail here, it is necessary to point out that "hope" cannot be seen as merely an "emotion". It has different levels of meaning, intertextual references and various cultural connotations. The main argument here is that the invocation of hope in a text cannot be taken as a simple designator of emotion that has a common meaning to all readers. Hope is not an obviously positive emotion that we should all strive for. For example, Hesiod portrays hope as one of the evils that came out of Pandora's box with sickness, insanity and vices, and thereafter plagued mankind. In this context, hope actually intensifies man's suffering (Moltmann 1975, 16).

To add to the rationale for researching hope as discussed in the first chapter, hope is also more than "just an emotion" in its capacity for bridging human diversity. That is, in various philosophical traditions, hope is what makes us human - as "all men live in hope" (Moltmann 1975, 21). In fact, man [sic] can be defined exactly as "the being who hopes" (see Meeks 1974, 109). This will be discussed in more detail in the following chapter, but at this point it is important to consider that researching public discourses of hope in this transdisciplinary manner allows us to take a step beyond studies of culture, difference and the contemporary unpopularity of universalism - and (back) towards a consideration of a humanist, or a consolidated response to HIV/AIDS.

2.4.1 Drawing a line in the sand between individual and public discourses of hope

Hope remains an individual challenge (Lindauer and Walsh 2004, 177).

As this statement shows, in contemporary academics, hope is mainly considered to be in the terrain of individual psychology and spirituality – and in the case of HIV/AIDS, primarily something that a PLWHA needs to “work at”, “find” or “hold onto”. In the following section, we will briefly explore some of this research so that the next chapter can move to the deconstruction of “the social” without seeming to turn a blind eye to this large and important body of knowledge.

It must first be clarified that this division between individual and public discourses of hope is an artificial line, drawn in order to narrow the confines of this academic study. Individual experiences and expressions of hope are obviously embedded within the public representations of HIV/AIDS. However, the focus of this research is on public constructions, rather than individual expressions – public discourses that shape the interpretations and actions of groups, societies and nations (see Cochrane 1999).

The main question this study seeks to address is therefore not “who are these PLWHA”, or “how are PLWHA experiencing hope”, but rather, “what are some of the underlying assumptions and meanings within the layered public discourse, and how could these issues of power, diversity and representation be affecting the way we (the public) speak, think and act on the crisis of HIV/AIDS?” We do not seek to uncover the “truth” of an emotional psyche, but rather seek to expose our/my/your assumptions and constructions when we say “I hope” in a time of HIV/AIDS in South Africa. Furthermore, in deconstructing the public transcript and scrutinizing it for breaks, patterns and inconsistencies, we can begin to glimpse the hidden transcript or discourses. This is possible if the dynamic between the public and the hidden is indeed a constant struggle – rather than a solid wall (see Scott 1990).

2.4.2 Hope and hopelessness in PLWHA

Factors that help adolescents reduce high-risk behaviours:

- *Positive relationships with adults*
- *Feeling valued*
- *Safe and welcoming school environment*
- *Recreational activities*
- *Exposure to positive values, rules and expectations*
- *Having spiritual beliefs*
- *A sense of optimism about the future*

(UNICEF 2003, 21)

As discussed, hope (or its variations such as aspirations, optimism or apathy) has most commonly been examined from a psychological or psychosocial perspective. In the case of research into the epidemic, the focus has almost exclusively been on the impact of the disease on people living with HIV/AIDS (PLWHA), and on the importance for young people to have hope as part of various prevention strategies.

This focus on the individual aspects of hope grew from extensive studies predating HIV/AIDS. For example, some studies showed how the will to live and hope are closely linked. "Hope has been regarded as a major motivator of behaviour, acting as a powerful life force, producing vitality and liveliness in life (Dubree and Vogelpohl 1980). Ross (1995) observes the considerable documented evidence, which shows that without hope, death can result, or that prolonged and repeated exposure to events which are not life threatening but are unavoidable, and over which the individual has no control produces hopelessness. The end product of this is frequently death (see Frankl 1959, Seligman 1974, Limandri and Boyle 1978).

These types of studies linked naturally to those reviewing the effects of poverty on mental and physical health - for example, not only depriving people of resources, but also increasing fatalism, emotional distress and suffering (see Scheper-Hughes 2004, and Farmer 2003, 2004). Bolland conducted a study of the effect of hopelessness on risk behaviour among adolescents living in high-poverty, inner-city American neighbourhoods. He concluded that people living in poverty come to believe that they are

unable to take control of their lives and make things better for themselves (2003, 145). Therefore, the youth succumb to the threatening circumstances they face because “...poverty and violence may vitiate an adolescent’s sense of safety, security, and hope, leaving little room for long-term aspirations and planning” (ibid, 146).

In a study on the dynamics of hope in adults with HIV/AIDS in southern Finland, Kylma et al (2001) have done an extensive search of the vast of literature that examines the way the disease impacts on levels of despair and generally the destruction of hope. They also point to an increasing number of studies of long-term survivors with HIV/AIDS that show levels of coping with the disease that includes being optimistic and having hope. Their own study uses grounded theory to unpack the contents and processes of hope, despair and hopelessness, and they interestingly come to the conclusion that the dynamics of hope is a “multifaceted and complex combination of ‘hope, ‘despair’ and ‘hopelessness’”, and that these factors work in “dynamic alternation” with each other (ibid, 1). This is interesting as it highlights the way that even through methods researching the individual, a multiplicity of representations and dynamics are simultaneously present in relation to “feeling hope”. Other research has even been driven to classify different “types” of hopes. For example, a study by Paraklyea (1991) identifies two types of hope, curative (hope for cure) and palliative (hope for relief from pain and a peaceful death).

Similarly, the interest in religion as a health resource has been reflected in research that has examined the health and clinical ramifications of faith. The WHO points out that “patients and physicians have begun to realize the value of elements such as faith, hope and compassion in the healing process”. In one study 93% of patients with cancer said that religion helped sustain their hopes (WHO in Culliford 2002). Gayle Newshan (1997) examines spiritual aspects of pain in patients with HIV or cancer – where the spiritual domain involves: hope, meaning and love or relatedness. Coleman (2002) points to the way spirituality has a direct relationship with cognitive and social functioning and an inversely related to HIV symptoms. Hope is also very evident in research into HIV/AIDS-related stigma where, for example, the most dangerous form of experienced stigma has been shown to be that which is internalised and leads to loss of hope and abandonment of life aspirations (Nyblade 2003). There is even research on the effects of AIDS volunteerism as “bearing witness” and the effects this has on the individual by “increasing their levels of hope, self-esteem, social support, and develop purpose in life” (Hall 2003).

In the HIV/AIDS context this type of research has resulted in many programs and projects aimed at increasing varieties of hope in both PLWHA and in HIV/AIDS prevention campaigns. In the former, “positive living” or “positive prevention” is seen to utilise hope as part of a coping strategy with the effects of the disease (see Pegrum 1997). This has obviously become a more dominant discourse with the advent of ARVs (first internationally, and now in South Africa) and the move to change HIV/AIDS from a fatal to a chronic disease (see Treichler 1999). In the latter, HIV/AIDS prevention campaigns increasingly promote positive living in which “hope for the future” is an important factor. *loveLife*, for example, considers itself to be a “brand of positive lifestyle” and in this way is “capitalizing on the innate optimism of South African youth”. It is currently running a central “See You There” campaign, which promotes HIV/AIDS prevention focussed on positive future-orientation and hope (loveLife 2004, see also Epstein 2003 and Parker 2003 for discussions against this prevention method).⁸

A very interesting study that is worth special mention here is one by a group of local (UCT) researchers who considered the ramifications of “finding a positive identity for HIV/AIDS in South Africa” while working with a group of HIV/AIDS infected women from a poor urban township area. In brief, Stein, Soskolne and Gibson (2003) found that the emphasis on “positive identity” may have unintended and problematic consequences in silencing some of the more painful emotional aspects of HIV/AIDS. They also noted that as they engaged with the material, they were forced to interrogate their own reluctance to move beyond the optimistic views they were being presented with (by the women living with HIV/AIDS) and to challenge their own complicity in facilitating this reassuring portrayal of what it means to live with HIV/AIDS.

As a society, generally, it is much easier for us to hear hopeful stories and the voices of those who are fighting for life. It becomes almost unacceptable for an ill person to talk about the possibility of their death...discourses that emphasise living

⁸ In this section I am skipping over a large area of research – and campaigns that have very public discourses attached to their individual psychology, driven by social institutions (such as medical aid companies, the government and groups of PLWHA) and thus are hugely relevant to a general research into the public discourses of hope. However, in order to remain within the confines of a mini-thesis, the focus of this paper will remain on the representations of HIV/AIDS that are highlighted in the article selected for analysis, and these other aspects of this topic will be largely left for future research.

positively with HIV and fighting for life, help many of the women to cope with the infection and to stand strong in times of less serious illness. These discourses, however, may not leave a space for working through the very real possibility of illness and death (Stein, Soskolne and Gibson 2003, 16-17).

This research shows one aspect of the complex interaction between the individual and social perceptions of HIV/AIDS – and therefore it cannot, as Lindauer and Walsh said, remain an individual challenge.

2.5 Conclusion

Thinking about illness! – To calm the imagination of the invalid, so that at least he should not, as hitherto, have to suffer more from thinking about his illness than from the illness itself – that, I think, would be something! It would be a great deal! (Sontag 1991, 101).

In conclusion, this chapter has traversed a wide range of theoretical and disciplinary concerns that form a complex and sometimes unstable framework for the analysis to follow. The line between the “individual” and “social” constructions of HIV/AIDS has been shown to be artificial, but one that will continue to be drawn in order to wrestle a wide selection of information into the confines of a single study. The theoretical stance of “social constructionism” and “cultural studies” has similarly been shown to be “messy”, and despite the above rationale, I cannot claim that this “social-theory-discourse-theological” approach is the only method that might throw light on the significance of hope in the public discourse. However, it appears a good place to begin this research and a suitable way to incite further discussion.

We will now continue with an example of a deconstruction of the public discourses of hope in the context of HIV/AIDS in South Africa. My rationale here is that while there are studies being done on individual experiences of hope and hopelessness, there is a dearth of knowledge as to how public discourses of hope affect the way we interact with the epidemic. That is, if we are considering the ramifications of individual experiences of

hope, is it not important to first analyse some of the influences in the public domain, before moving inwards to individual variations?

As can be observed from the above discussion, my own “transformative agenda” for this research is becoming clearer. It is an ambition to engender further sensitivity to language and representations of HIV/AIDS in the public media, to reinvigorate research into the philosophy of “hope” in the context of HIV/AIDS, and to begin to trace a route to a “determinedly hopeful” national discourse of HIV/AIDS in South Africa.

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Chapter 3. Two images of hope in South Africa

One cannot think without metaphors. But that does not mean there aren't some metaphors we might well abstain from or try to retire. As, of course, all thinking is interpretation. But that doesn't mean it isn't sometimes correct to be 'against' interpretation (Sontag 1991, 93).

The following chapter is an unorthodox form of “discourse analysis”. Instead of narrowly focusing on a single discourse, what follows seeks to highlight various dominant discourses within the public transcript that could be affecting public perceptions of hope. In order to keep this wide-ranging discussion contained it has been centered on two images from the *Mail and Guardian* newspaper. The discussion will first focus on the images separately, considering their context and position in the media; then they will be considered together, focusing on the effect they could have on each other. In this way, the exercise is primarily intended to problematise the “naturalness” of the concept of hope in HIV/AIDS and to draw attention to the multiple ways different “hopes” can be affecting reader perceptions and subsequent actions. For all the complexity of the discussion that emerges, this chapter can still not be said to capture the sheer range of subtleties of “discourses of hope in the public transcript” and is therefore positioned as a demonstration rather than a comprehensive treatment. Nevertheless, an attempt is made to balance the different discourses and highlight a single dominant theme (or preferred reading) in the instance of these images – namely, the theme that “HIV/AIDS is held separate from joining in the hopeful mythology of a New South African future”. This theme and its accompanying critical observations will then be carried into the following chapters.

3.1 Description: One image of the future, another without hope

At times of crisis, stereotyped representations may be more popular since they provide frames that are easy to understand and communicate (Davis in Baderoon 2003, 317).

In the last edition of 2004, ten years after the transition to democracy, the *Mail and Guardian* newspaper published a double page spread of colour photographs called “The Year in Photos”. Predictably there were photographs of both Presidents Thabo Mbeki and George W. Bush on their campaign trails. Other foreign news included the Madrid railway bombing, some Sudanese refugees, a Palestinian at the new wall separating the West Bank, and a picture from Abu Ghraib prison. Other South African images were of the Schabir Shaik trial, a Sowetan man washing a car window, and a triumphant South African swimming team winning the gold medal at the Athens Olympic games. In the bottom right corner were two more pictures of South African content.



3 Nelson Mandela lifts the World Cup trophy in Zurich on May 15, after it was announced, that South Africa will host the Soccer World Cup 2010. FIFA picked South Africa ahead of Morocco and Egypt for the first World Cup to be staged in Africa.



5 Monica Dlamini and her family in Ixopo, KwaZulu Natal. She has lost three of her sons to AIDS in the past two years. Wonderboy, her only surviving son, has been unable to access ARVs as his identity book was stolen.

The first was a picture of South African icons Nelson Mandela and Desmond Tutu in a jubilant crowd with the South African flag in the background. This was a scene of excitement from Zurich when it was announced that South Africa had won the bid for the Soccer World Cup 2010. The caption also mentioned that FIFA had picked South Africa ahead of Morocco and Egypt for the first World Cup to be staged in Africa. The photograph diagonally next to this was a starkly toned photograph of an expressionless group of South Africans, two adult women and seven children, framed in the far right corner of what appeared to be a rural home. There was also another extremely thin young

boy sitting on a mattress on the floor of the left corner of the image. The caption read simply, “Monica Dlamini and her family in Ixopo, Kwazulu Natal. She has lost three of her sons to AIDS in the past two years. Wonderboy, her only surviving son, has been unable to access ARVs as his identity book was stolen.”

On the surface, the comparison between these two photographs is clear. The first photograph emits feelings of triumph and hope for the future with a strongly nationalistic flavour. It projects anticipation for the future into the year 2010 and beyond. It has recognisable symbols and is a familiar depiction of the “New South Africa”. The other image is one we have become familiar with over the last two decades of HIV/AIDS. It is the quintessential “African AIDS Victim” – tragically hopeless and suffering from both an inexplicable disease and the structural violence of poverty. This is the image that was chosen to represent HIV/AIDS in South Africa for the year 2004.

How do we reconcile these two disparate images? Do they really depict the same country, “our” New South Africa? Does the stark difference between the “hope” and “hopelessness” depicted in the two images mean anything at all? What currents of power flow between these two representations of South Africa? What follows is a discussion that seeks to deconstruct these two representations of South Africa in relation to each other, and in relation to the discourses of hope that are built within and between them.

3.2 Context: Images of the “New South Africa”

Each state has a ‘social imaginary’, something it dreams itself to be, and its explicit declarations and official statistics are likely to be pervaded by this implicit social dream (Treichler 1992a, 385).

The image of Mandela and Tutu in a celebratory crowd with the South African flag in the background is part of a tradition of similar news photographs that have appeared regularly since 1994. Photographs in this tradition all evoke strongly nationalistic and optimistic feelings and include recognisably South African symbols or icons. In terms of “hope” this

is a layered image, as will be unpacked later, but the dominant discourse can be clearly seen to be one of optimism for the South African future.

Ten years after democracy, it can be argued that in many ways the initial euphoria has been replaced by disappointment as the advancement in formal democratic institutions has often not been mirrored in economic and social conditions. South Africa is in fact ranked as the third most unequal society in the world (Jacobs 2003, 36). In addition, “post-apartheid myths of a harmonious multicultural unified purpose and society have become more elusive” (Lewis 2000, 168).

However, contrary to what we “should” be feeling, various methods of social research are showing an “unaccountable” level of social optimism.

For all the crises facing African societies – from poverty and HIV/AIDS to corruption and violence – recent years have also witnessed a note of optimism at variance with the Afro-pessimism fashionable in the West. Stirrings of a renewed Pan-Africanism have taken shape, for instance, in calls for an African Renaissance. What’s going on?...African hope – vivid in South Africa with the vitality of its democratic history, and its modern infrastructure combined with African cultural and human resources – is animated by the power of popular agency (Boyte 2004, 20).

This social optimism appears in various places in the public media such as SAFM reports of South Africa being the fourth most confident nation in the world (SAFM 2004).⁹ In fact, the first editorial of the *Sunday Times* newspaper this year said that were it not for the tragedy of the Asian Tsunami, “South Africa would be having its happiest New Year yet. Rising employment levels, economic growth, successful regional elections and declining crime would have given us cause to celebrate” (Sunday Times 2005, 18).

Levy (1984) observed that certain emotions are “hypercognized”, that is, they are the object of considerable attention and knowledge as compared with other emotions which

⁹ See public opinion surveys being run through the Institute for Democracy in Southern Africa (IDASA) for recent reports and discussions on national confidence and optimism www.idasa.org.za

are “hypocognized” receiving little attention (Brenneis 1990, 120). From its prevalence in the media, hope can be seen to be “hypercognized” in contexts where it relates to South African nationalism or confidence. A primary source of this hopeful discourse is the state, and its drive for national cohesion. Various analysts have observed that since 1994, national policy has been supported by a series of powerful narratives: namely, the Rainbow Nation, the African Renaissance and the New Patriotism (Chidester, Hadland and Prosalendis 2003). Look for example at a recent ANC newsletter article from President Mbeki, titled “Our national season of hope”. Speaking about his annual State of the Nation Address and the national budget, Mbeki says,

As we have done consistently in the past, we must continue to communicate a firm message of hope to all our people. The fact that we convey that message does not mean that we do not know the problems that continue to face us with regard to the challenge to eradicate the legacy of the long period of colonialism and apartheid... The people are perfectly aware of our history and remain confident that we will honour our commitment to continue to work to improve their standard of living and quality of life...The masses of our people will therefore respond positively to the message of hope that we will and must communicate to them (Mbeki, 2005).

Hope, in this context, is a deliberate communication strategy. A strategy aimed at increasing social cohesion in face of social, economic and developmental challenges that might tear the nation apart. The theme of social cohesion¹⁰ and hopeful nationalism is strong in South Africa, even if it may seem naive in our globalising world. As Hadland (2004) observes, at the time that South Africa became a new, unified and democratic nation in 1994, the whole idea of nationhood was going out of style everywhere else in the world. National cultures are just as much “imagined communities” as any other cultural identity, and are similarly influenced by institutions, symbols and representations.

¹⁰ In his opening of Parliament speech in 2004, President Mbeki emphasized the importance of social cohesion in South Africa. He pointed to an HSRC project that was investigating what holds us together as South Africans when so many things seem to be tearing us apart. Research from around the world suggests that if a country can support the “good” bonds of social cohesion, then development, security and progress will soon follow (Hadland 2004, see also Chidester, Dexter and James eds. 2003).

A national culture is a discourse – a way of constructing meanings...national cultures construct identities by producing meanings about ‘the nation’ with which we can identify...it constructs identities which are ambiguously placed between past and future (Hall 1992b).

As the SAB advert in the first chapter evokes, the culture of “New South Africanism” is built on constructions of confidence, hope and the idea that South Africa is “exceptional”. Hadland points out to the dozens of times in all sorts of fields when being South African was simply the best. Sport, politics, religion, art, literature, science and music: in just about every category you care to mention, South Africans have achieved amazing, extraordinary things (2004, 85). When Charlize Theron won the Oscar for Best Actress in 2004, Mbeki enthused “South Africa has done it again... The Nobel Prize for Peace, the Nobel for Literature and now, an Oscar for Best Actress. Theron has proved that we as a nation can produce the best in the world... She represents a grand metaphor of South Africa’s move from agony to achievement” (Mbeki in Hadland 2004, 85).

Nelson Mandela, visible in the center of this first photograph has become the most recognizable icon in the world. A large part of his symbolism is similarly built on a base of hope and exceptionalism. “Nelson Mandela created a space of hope in which people could find their own dreams and aspirations taking shape and finding a place. By providing a focal point for a sense of human solidarity, shared in the present, Nelson Mandela changed the way people experienced the space of South Africa and the larger world” (Asmal, Chidester and James 2003, xx). This is most clearly shown by Nobel Laureate Seamus Heaney who wrote the epic poem *The Cure of Troy* inspired by the life of Mandela, which gave birth to a unique harmony of hope and history in South Africa:

History says, Don’t hope
On this side of the grave,
But then, once in a lifetime
The longed-for tidal wave
Of justice can rise up
And hope and history rhyme.

Hope is therefore a dominant discourse in the construction of nationalism and social cohesion in South Africa – a discursive practice of various dominant groups or institutions such as the state. The media can similarly be perceived as an institution involved in these practices, rather than simply a mode of communication. Bourdieu (1998) insists that the media has the power to create, rather than simply describe events. Hall also points out that neutral-appearing decisions on what is “newsworthy” and choices of angles are in fact ideological. “Behind the apparently formal dimensions of its news values lie the ideological themes of the society in which the newspaper operates” (1981, 234). Baderoon (2003) similarly observes that,

By disseminating such storied truths in a complex and powerful circuit of production and readership, the media creates communities out of audiences. Because of this, theorists argue that the media is crucial to generating a sense of national belonging...Such identities (of citizenship and community) are formed in the context of providing a ‘national, political fantasy’ in the media...In this way, newspapers and other media allow audiences to map their symbolic reality (319).

Therefore, this image of national celebration fits into the process of community generation, built on a particular national imagery (or fantasy). The South African reader is emotively compelled to feel a part of the celebration and feel ownership of the recognisable symbols (the new South African flag, the World Cup, Mandela and Tutu). The bright colours of the picture and the expressions of happiness and excitement on the faces visible in the crowd also have emotive content. In addition, the image makes use of a close-up framing which makes the readers feel they are placed within the celebrating crowd rather than an objective onlooker from the outside.

This image can also be linked to all those of its kind (with similar icons in a happy crowd) such as the one where Mandela held aloft the rugby world cup in (1998), the various pictures of celebration surrounding the 1994 elections, and again at the decade of democracy celebrations in 2004. Social cohesion, multicultural nationalism and African unity – all these concepts therefore place this image in a temporal present with a recognisable past and a tangible sense of a hopeful future.

3.3 Context: The “African AIDS Victim” in the media

One death is a tragedy, 1 million deaths is a statistic – Joseph Stalin.

The image of the Dlamini family appears in stark contrast to the national discourse of hope for the new South Africa. While this image will be more completely unpacked in the following section, what we seek to do here is place this image in its context or tradition. The argument here is that just as the previous image is “recognisable” to the reader through its symbols and tradition, so too is this image of “African AIDS” – as they are both images that re-occur in variations of the same themes and that contain symbolic (intertextual) meaning and emotive power.

The South African media is heavily influenced by international stories and perceptions. Not only are news articles picked up from international news services, but media trends (and the accompanying ideologies and stereotypes) travel as well. In addition, due to the effects of globalisation and colonisation, Western or Euroamerican influences continue to hold sway in the South African media and societies.

Various researchers have pointed to the construction of African AIDS in the media (see Craddock 2004, Patton 1990, Seidel 1993, Sontag 1991, Stein 2001, Treichler 1999). The most prevalent representation is the image of what I am calling here the African AIDS Victim. This image is stereotypically a close-up shot of a thin African person staring hopelessly (and silently) into the camera lens. It evolved out of a strong tradition of such images of Africa. As Nicoll and Brown (1994) point out, the images of Africa conjured in Western minds, perpetuated by the biased media, have been those of an oversimplified exotic place variously depicted as a game park or an apocalyptic vision of famine and civil war.

Stein (2001) notes that First World coverage of HIV/AIDS in Sub-Saharan Africa has an unfortunate tendency to fall into “Death Voyeurism”. For example, the largest theme category for all US news magazines covering HIV/AIDS in Sub-Saharan Africa was the “disaster/death/hopelessness” theme which is seen to appeal to a large mainstream

audience, and fulfils the dramatic requirements for achieving entertainment value (ibid, 8). Not only is such “death voyeurism” entertaining, but it is built on a tradition of images of Africa. As Treichler (1999) says, “visual representations reinforce the illusion of truth, in part because they reproduce familiar representations of the Third World and reinforce what we think we already know about AIDS in those regions” (383).

Therefore, the image becomes familiar through repetition over time, and its illusion of “truth” is similarly reinforced. Dialectically Other to “Western” experiences of HIV/AIDS, these images usually present a starving African AIDS Victim as the homogenous icon for the African experience of the HIV/AIDS epidemic. This image has persisted despite the advancement in treatment and messages of “positive living” or “HIV/AIDS as a chronic disease”. The image of the African AIDS Victim is therefore a dominant one, and is further bolstered by sensational stories such as those depicting child-headed households, as well as by public fundraising and marketing efforts that use such images to raise support.

AIDS in Africa. The phrase itself has come to signal an almost apocalyptic level of devastation. Broadcast from television, photojournals, and newspapers, images of the epidemic as it has progressed through sub-Saharan Africa are by now mind-numbingly familiar: painfully wasted bodies; haunted eyes; isolation; fear; imminent death. The words accompanying these images are also becoming predictable in their descriptions of ‘plague,’ ‘horror,’ ‘calamity,’ ‘conflagration,’ and deaths that are ‘biblical’ in number and proportion (Craddock 2004, 1).

But this dominant discourse of hopelessness is not only driven by foreign media. The requirement for drama and entertainment is as much at work in South African media coverage as it is anywhere else, and HIV/AIDS, now silently with us for over two decades, is in many ways lacking in dramatic urgency (see Parker 1995, Stein 2002). As in Euroamerican media, this encourages sensationalist reporting and “Death Voyeurism”, as Stein (2001) observes,

... This has been achieved in part in the usual fashion through the proliferation of sensationalist reporting in the form of flashy headlines, the trite analysis of emerging ‘scandals’ and images of emaciated people, often referred to as ‘victims’

and 'sufferers' dying of AIDS. As Gevisser notes: "More than anything, the photos of 'AIDS Victims' struck me...every single media image of a person with AIDS I could find had that person in a passive, submissive position...their wrists were limp, and they were useless" (9).

What emerges then is a one-dimensional image of a passive and powerless African AIDS Victim in the midst of a swirling, sensational epidemic. HIV/AIDS statistics are argued up and down, and if you look at the history of HIV/AIDS in South Africa, across medical breakthroughs, policy and statistical announcements and action plans, it reads as a drama of hopes repeatedly raised and dashed (see Van der Vliet 2001, 2004). For example, Karen Michael despairs of the HIV/AIDS reporting of the South African business press, which she notes is full of "sturm und drang" – sensational doomsday scenarios, rather than clear, concise reporting that could have pragmatic effects. "Unfortunately the valuable information is often buried under an avalanche of fluff or swathed in hysterical adjectives, and is only discernible to the expert eye... South African business can expect to see anything between 2% and 50% declines in the productivity level of its workforce in the next five to ten years" (Michael 1999, 1-7).

Yet even though most HIV/AIDS coverage in South Africa is of the "sturm und drang" variety, this does not automatically mean that audiences get caught up in the emotive and sensational coverage. For example, as Johnston, speaking of an American audience, points out – because the visual images of African AIDS have remained the same for such a long time they have lost their dramatic impact. Therefore, even if the tragedy has not declined, the drama has - "continued drama requires continual change in order to maintain the required level of tension... epidemics of acute infectious diseases can themselves become a part of the 'background noise' of society" (Johnston 1995, 9-11). In the South African context, Soal, a health writer for the *Cape Times* says, "Editors, like everyone else, often glaze over AIDS stories. Once they've done the shock horror stats story on World AIDS Day, that's enough for the year" (Soal in Galloway 2001, see Stein 2002). A *Mail and Guardian* editorial (2004a) preceding World AIDS Day has the title "Don't read this – it's a story about AIDS". The article points to a growing trend of South African readers who are "turned-off" by the word "AIDS" in news headlines or blurbs. Therefore, even if HIV/AIDS media coverage was increased or modified, this might not have any influence on readers, other than to have more unread stories.

More serious papers in South Africa don't avoid HIV/AIDS stories...but they too know very well that readers run away from this depressing content. Falling circulation sales figures on days with front-page AIDS stories reflect this unambiguously...editors accept, sometimes reluctantly, that there's reader resistance. The problem is that they don't seem to be putting much effort in trying to change things...this is one case where Sun-shine journalism will not help disinfect a society. Instead, what's needed is sustained creative effort to communicate a mission-critical matter to disaffected audiences (Mail and Guardian 2004a).

Stein (2002) has similarly observed a clear sense that "reader fatigue" has set in - that people have had their fill of reading about the human pain and suffering caused by HIV/AIDS, "life is cruel and dark and there is only so much we want to read about it" (20). Considering the despair and urgent need for action in the HIV/AIDS epidemic in South Africa, how can it be possible that readers are simply not interested in reading stories about HIV/AIDS? One answer comes from Moeller (1999) who investigates the modern syndrome of "compassion fatigue". Her main argument is that as the media leads us from one sensational trauma to another, in a breathless tour of disease, famine and death, we lose our initial horror, and become apathetic – inured to the suffering around us. Moeller points out that images are appropriated to appeal emotionally to readers and viewers. But she then asks, what does it mean when we become blasé about the pictures we see?

Crises are turned into a social experience that we can grasp...just another moment of pain to get its minute or column in the news. Our experience and our understanding of a crisis is weakened, diluted, distorted. If the news shows prompt us to equate chronic famine with chronic fatigue syndrome we are somewhat relieved. It helps absolve us of responsibility for what we see and can do little about. So with relief, we go on with our everyday lives – until some other crisis image seizes our attention for a second (Moeller 1999, 35).

Moeller continues by pointing out that didactic images overload the senses, "all those starving brown babies over the years blur together" (ibid, 36). The construction of the

“African AIDS Victim”, and its very familiarity can create distance and compassion fatigue.

The above discussion briefly points to a few of the contextual issues of an image of “African AIDS Victims” in the South African media. The “hopeless victim” is constructed as a voiceless monolithic category in power plays between Self and Other, West and the Rest, infected and unaffected, media and audience, or nation and state. The sensationalism of HIV/AIDS - that is, death voyeurism and the image of the hopeless victim - does not mean there is automatically more emotion or empathy from readers towards PLWHA. On the contrary, it can mean an apathetic space is created between “us” and “them”. This will be discussed in more detail in the discussion that follows.

3.4 Dominant discourses of hope disrupted by HIV/AIDS

We have a noble task ahead of us – reconstruction of our country. We cannot afford to allow the AIDS epidemic to ruin the realization of our dreams – Chris Hani (1991).

It has therefore been suggested that these two images of South Africa, one of hopeful nationalism, and the other hopeless HIV/AIDS, each have their own deeply layered interpretations, and appear to stand dialectically apart from each other. However, what is interesting for the purpose of this study is the question of how these images potentially impact on each other. That is, they are placed side-by-side in a spread of important images of South Africa for the year 2004: to what extent do dominant discourses of hopeless HIV/AIDS come into conflict with dominant discourses of hope for the New South Africa? And does this affect our understanding and interaction with the HIV/AIDS epidemic?

What is useful here is the concept of a “semantic shock”. This is a term for the coming together of two different meanings that then produce a new meaning, for example, through metaphor, which offers similarity between semantic fields, previously considered dissimilar (Kearney 1998, 148). I am suggesting that these two images, although both

representations of South Africa, are so dissimilar that placing them together is in fact a “semantic shock”. That is, placing Monica Dlamini and her family within the picture of celebration for the Soccer World Cup 2010, or the World Cup celebration with her in her home in Kwazulu Natal would be a semantic shock to the reader. What we seek to explore here, is why this is such a shock, and what underlying issues of discourse and power can this shock reveal.¹¹

The following discussion will be loosely grouped under the symbols of “The African Renaissance”, “The Magic Bullet” and “The Rainbow Nation”. These categories are used as devices to pull together disparate threads of discussion and are not intended as in-depth analyses of each of their unique philosophical or ideological ramifications.

3.4.1 “The African Renaissance”

*South Africa has a government, political and other social formations and masses of the people who see themselves as part of the motive forces for the victory of the African renaissance. Our first task, therefore, is to transform our society consistent with this vision (Mbeki 1999a, xxi).*¹²

As mentioned previously, there is a dominant discourse of national hope in South Africa, which is in part driven by the political institution. A part of this national hope is that which refers to an African Renaissance. In a recent weekly electronic newsletter, President Mbeki quoted Theophile Obenga at length saying,

Any Renaissance must correspond to a period of strong emotions, intensive creativity and flames illuminating the countryside – and exceptional period when a

¹¹ The linguistic term “semantic shock” has been chosen above other complex concepts from critical theorists so as to remain within the confines of this dissertation. However, it is valid to note here that future research could more fully engage in a nuanced deconstruction of the “metaphors” of hope, for example, by applying Ricoeur’s seminal work on the centrality of semantic dissonance in creating meaning - and the various ways metaphors have the power to “re-describe reality” (see Ricoeur 1978).

¹² This section is generally indebted to works on the African Renaissance in the collection of the same name edited by Makgoba (1999).

generation's creative genius discovers its mission, fulfills it to its best, without betraying, diminishing, reducing or downsizing it. It should correspond to great moments in history and great works. All peoples want re-birth after misfortune: wars, genocide, holocaust, ignorance, obscurantism, colonialism. Rebirth is a positive attitude of hope (Obenga in Mbeki, 2004).

The image of an African country being given the World Cup Soccer tournament can be linked to the hope for an African Renaissance, the concept of a unified and progressive Africanism and of a nation (and continent) that becomes part of the international community on its own terms. But the persistent image of the Hopeless African AIDS Victim can be seen as a direct affront to this vision, to Obenga's passionate call for re-birth and positive hope. In fact, Mbeki, as a key supporter of the African Renaissance, himself admitted on World AIDS Day in 1999 that, "There can be no talk of an African Renaissance, if AIDS is at the door of our continent" (Mbeki 1999b). While we will not explore this here in any great detail, this idea that HIV/AIDS destroys the hopes for African Renaissance could partially explain some of Mbeki's responses to the epidemic. As Van der Vliet (2004) observes,

Why should an intelligent, sophisticated man who believes passionately in an 'African Renaissance', and an 'African Century' refuse to deal with the epidemic in (a) rational way...? One answer might lie precisely in this passionate belief itself. It is surely impossible to hold this vision for the continent, and at the same time conceded that tens of millions of young adults are infected and dying (86).

In terms of a Renaissance, Africa needs to move beyond the social construction as a victim whose agency is removed and is formed by the gaze of the "West". As discussed above, dominant constructions of African AIDS make this increasingly difficult. In addition, much of the "AIDS Industry" revolves around African states (and smaller groups) seeking (financial) support from "the West". If international financial support is necessary, and its marketing relies on images of hopeless victims and orphans begging for international aid, then the victim image is (re-in)forced on Africa by these institutions of power.

African Renaissance also contains a fundamental hope for the progression and development of the African continent. Various academics and journalists have pointed out

that HIV/AIDS is a development crisis, and in fact is also a “retrograde” virus in that Africa has lost the progress it had made over the last thirty years (see Lewis 2004, Mills 2000).

In all affected countries with either high or low HIV prevalence, AIDS hinders development, exacting a devastating toll on individuals and families. In the hardest-hit countries, it is erasing decades of health, economic and social progress – reducing life expectancy by years, deepening poverty and contributing to and exacerbating food shortages (UNAIDS 2004)

African Renaissance is therefore up against a growing Afro-pessimism from Euroamerican media and critics, where AIDS is seen as the final straw for a continent buckling under “grinding poverty”, “rampant malnutrition”, war and genocide (see Boyte 2004; Schoepf, Schoepf and Millen 2000). For example, Sontag (1991) observed early in the epidemic, “what biologists and public health officials predict is something far worse than can be imagined or than society (and the economy) can tolerate. No responsible official holds out the slightest hope that the African economies and health services can cope with the spread of the disease predicted for the near future” (172). In her research on diversity and “white” culture in South Africa, Steyn observes:

...A deep-seated belief that loss of European control inevitably ushers in the chaos, stagnation, poverty and irrationality that is the ‘essence’ of Africa. The ‘white’ imagination that is exposed in these encounters is structured by a profound ‘Afro-pessimism, a pervasive negativity which actually accounts for a great deal of stress experienced by white South Africans in a country now controlled politically by Africans (2003, 243).

Images of “African AIDS” such as this certainly could reinforce such pessimism, and in turn be reinforced by such belief. Hopes for African Renaissance therefore become more elusive in the light of discourses of hopelessness and pessimism.

In addition, the hope for Renaissance is also based on a hope for African unity. In contrast, the African response to HIV/AIDS has been anything but unified. Part of this response could be explained through another dominant hope - South Africa’s belief in its

“exceptionalism”, which has been briefly mentioned above. South Africa has a particularly dominant social construction of itself as “special” and “different” from the rest of the world and the rest of Africa. Nuttall and Michaels (2000) point out that cultural responses to the idea of African Renaissance are part of ongoing articulations of South Africa and Africa’s Otherness to each other. Ndebele (1999) similarly observes that there are those who are marketing an image of South Africa as a haven of safety and success in a dark violent and threatening continent. “Doesn’t it pay to belong to South Africa, to be free from the ‘chaos of the north’, to keep the north at bay at all costs? Doesn’t it pay to be an onlooker, gazing out at ‘the rest of the continent’ from the window of a vacation house that offers comfort and security? What does it take to keep things this way?” (10) While proponents of African Renaissance may argue the connection, this Otherness from Africa has roots in the messages projected by apartheid propagandists of the chaos and decline in “black Africa up North” (see Simon 2001). Since HIV/AIDS has come to the public eye, some people seemed to believe that South Africa was “different” from the rest of Africa and would not suffer the devastation seen to the north (Van der Vliet 2001). As HIV/AIDS then appeared to inexorably progress down from this north, it could be argued that part of a South African resistance to accepting the disease is its lingering (and hopeful) social construction as “exceptional”. That is, how can the horrific doomsday statistics be true if we are special? Should we not be experiencing another miracle and leading the way for the rest of Africa in this as in other areas? How can it be true that we are the HIV/AIDS capital of the world? The HIV/AIDS epidemic thus becomes profoundly Other to our hopes for Renaissance, exceptionalism and African leadership.

3.4.2 “The Magic Bullet”

Throughout society, it has dawned on the population that AIDS could destroy the optimism of the new South Africa by annihilating millions. Like the rest of the world, we await the scientific breakthrough that never seems to come (Smetherham 2002, 43).

While the World Cup Soccer image does not speak directly to hope in biomedicine, it does relate to discourses of progress and advancement. Hope as a construct is clearly visible in

articles on the biomedical aspects of HIV/AIDS. In fact, the majority of headlines using the word “hope” lead into stories of hopes raised or dashed by biomedicine: of new vaccine trials, new medications and progress, and then the failures, drug resistance, super infections and public disputes over findings.¹³ This is not surprising as medical discourse remains dominant in the context of HIV/AIDS, both in terms of its authority and power, and in its (resulting) prevalence in the media (see Seidel 1993, Treichler 1999).

Currently, it appears that “hope” is most commonly mentioned when linked to articles on antiretrovirals (ARVs) and vaccines. The “enduring hope” has been that once a cure or vaccine has been invented the disease can be controlled (Rugalema 2004) - that through this medication, HIV/AIDS will no longer “automatically” lead to death, can then become a manageable chronic disease and potentially be conquered entirely. This dominant hope is based on a framework of faith (or hope) in science. Craddock notes that vaccines stand as a testament to the paradoxes of despair and optimism that characterise the fight against AIDS (2004, 257). But no matter how far the limitations of the biomedical model have been exposed by the epidemic (see Benn 2002, Jansen 2001), there remains a dominant (arguably “Western”) subtext that it is simply a matter of time until science solves the problem of HIV/AIDS.¹⁴ The following long extract from a magazine article titled “Warriors of Hope” is one example of this.

Once, this was a hostel for those who worked the wards. Now, in the heart of a war-zone, it houses what may be the last, best weapon in the stockpile. A thing called hope...the hope is that HIV/AIDS, the deadliest plague since the Black Death of the 14th Century, will one day fall into the same category as measles, polio and smallpox. An epidemic conquered by a vaccine...Every age has its plague, and every plague, sooner or later, must meet its nemesis...SAAVI’s original goal was to have a vaccine ready for widespread use by 2005. The goalpost has now been shifted to 2010. That cushion of caution reflects a growing awareness of the social, political, and economic challenges of tackling the virus in

¹³ Superinfection is the increasingly prevalent (and scientifically demoralizing) instance where a PLWHA becomes simultaneously infected with another strain of HIV while still fighting an initial infection – thereby making the hope for an effective vaccine virtually impossible.

¹⁴ Based as it is on public discourses, this dissertation does not engage with the multiple frames of reference that individuals apply to their understanding of disease – such as “African cultural beliefs” that would work in conflict with this Western positivist ideology

its continent of origin. But the spirit of eagerness and optimism remains...(Silber 2003, 13-16).

This extract shows the alternating function of hope and despair acting simultaneously (see .2), yet at the end of the article there remains a faith in the final triumph of science and medicine. What does this mean in the “semantic shock” between these two images? The battle fought in the public media preceding the rollout of ARVs in South Africa has been a roller-coaster ride of hopes raised and destroyed. At the moment, the rollout itself appears in the media alternatively as a government assurance that it is going as planned (“we can report progress that gives cause for hope” - advert for the DOH 2004) and as a systemic failure at localized sites (“KZN struggles to keep up” - Cullinan 2004).

These reports and their like comment on systems and leadership, and are underpinned by a dominant discourse of hope in the final triumph of science and medicine.

However, the last line of the caption under the Dlamini family’s image is a stark irony that only increases the image’s sense of hopelessness: “She has lost three of her sons to AIDS in the past two years. Wonderboy, her only surviving son, has been unable to access ARVs as his identity book was stolen.” The irony is that this caption sets Wonderboy apart from the above discourses of hopes and scientific debate. Even given access to the (national) dominant hopes of biomedicine, he remains an Othered victim - a victim of crime, of structural violence, and of his own actions. In the tension between these two images, the hope for (biomedical) progress is stumped by “the human factor”, by the circumstances that biomedicine cannot control.

We discover with a shock that our beautiful and youthful bodies are vulnerable, despite our preoccupation with them and all the technological advances we have harnessed to preserve them. *This should not have happened*: AIDS is an affront to our human ego, our intelligence and achievements – in other words, to our arrogance (John 2000, 375 – emphasis his).

The African AIDS Victim is Othered as he or she stands as a reminder of the inevitable failure of science and the frailty of our hopes for progress against disease and ultimately mortality.

3.4.3 “The Rainbow Nation”

In South Africa, with its first and third world communities, the epidemic will be of a different order of magnitude between the two societies. We must be aware of this and of the social and psychological stresses it will cause. AIDS cannot be wished away. It may be yesterday's story, but it is still tomorrow's disease (Whiteside 1993, 1).

Just as hope was shown to be a national discourse driven in part by political (and other dominant) desires, a dominant hope for “rainbow nationalism” can be seen as well. Nuttall and Michael (2000) point out that South Africa is a place of striking multiple identities yet, “the new nation has tried to mask these complex configurations by foregrounding an over-simplified discourse of rainbow nationalism” (1). There are two main themes that have been grouped here under the term “Rainbow Nation” which was coined by Archbishop Emeritus Desmond Tutu (seen in the first image of the World Cup Soccer bid). The first is the hope for social cohesion despite cultural diversity, and the second is the hope for a positive future (that is, wishing on a rainbow or finding gold at the end of a rainbow).

3.4.3.1 Social cohesion

When people see their 'way of life' at risk, they characteristically become less tolerant of social differences. In their quest for order and control, they construct distinctions between normal and perverse, legal and criminal, innocent and culpable, healthy and diseased. Labelling AIDS as a disease of certain groups becomes a way to focus blame, to isolate the resources of contamination and contagion, and to deny the vulnerability and responsibility of the wider population (Nelkin, Willis and Paris 1991, 5).

The two images can be clearly contrasted from a perspective of national social cohesion, or the lack thereof. In the World Cup Soccer image, the reader feels they stand amidst a multi-cultural “rainbow” group, with the icons of Mandela and Tutu who are “owned” across racial and cultural lines. In contrast, the Dlamini family, from “rural” Kwazulu-

Natal represent a single cultural entity, one that is Other to the dominant English-speaking readership of the *Mail and Guardian* newspaper.

In very basic terms, the ideal hope for a truly multicultural “rainbow” society is one that is cohesive despite its differences. However, as we will now examine, a construction of HIV/AIDS such as this, sets the HIV/AIDS Victim as Other from dominant “group” discourse. HIV/AIDS has a profoundly Othering effect, where the threat is consistently externalised to some Other body (see Campbell 2003, Treichler 1999, Joffe 1999). As John (2000) succinctly exclaims,

Perhaps the fascination with AIDS has other and even deeper roots...perhaps it is finally rooted in the seemingly universal desire to divide into ‘us’ and ‘them’. We are told repeatedly that colour, creed, nationality, wealth and gender are not to be used to define ‘the other’. Here HIV and AIDS are very convenient: no matter how HIV is transmitted, if you have it you are unlucky, bad, condemned, different, marked, tested, documented – as over against the rest of us, the ‘good’ ones! (375).

In South Africa, due to its historical background and profound fissures between cultures, this Othering of people living with HIV/AIDS is acerbated and often even taken as “normal” – in the same way as identification within racial classifications is (or was) taken as the norm. Furthermore, Adam (1989) notes that a great deal of mass media treatment of AIDS has strongly constructed people with AIDS as Other than self. Sontag observes, “A wave of statements and articles affirming that AIDS threatens everybody is followed by another wave of articles asserting that it is a disease of ‘them’ not ‘us’” (1991, 170). A historical characteristic of epidemic diseases has been the way they test social cohesion, following pre-existing faultlines in society, leaving people’s most fundamental loyalties and assumptions exposed to view and widening the gap between divisions such as the rich and the poor (see Arnold 1993, Bateson and Goldsby 1988, Evans 1992, Farmer 1992, Morris 1998, Slack 1985).

The hope for a Rainbow Nation is constructed as a “national” or “group” hope – and as such is best portrayed in images of multicultural groups. In contrast, the Dlamini family, as representative of PLWHA are starkly alone, framed in the corner of a photograph of an

empty room, which conforms to the tradition of such images.¹⁵ Other than in images of HIV/AIDS activist marches, the HIV/AIDS victim is always alone. There are rarely pictures of a group of different (rainbow) people with HIV/AIDS, or of “a PLWHA and his or her neighbours”. Similarly, while there are personal accounts of individuals with HIV/AIDS, there are few stories of groups and communities of people living with HIV/AIDS – again, other than the articles on activist groupings such as the TAC, or stories of HIV/AIDS-related NGOs.

Therefore, in this instance, hope is positioned as the emotion of society and hopelessness the individual “deviance” from this dominant norm (see Lutz 1986, Lutz and Abu-Lughod eds. 1990). Any grouping has more power to socially construct dominant discourses, and here, the theme of national hope has more institutional support than that of hopelessness. The discourse of hope has more power as it has institutional support, group power, and authoritative figures (namely Mandela and Tutu). In the second chapter we spoke of the way emotion stands in a contradictory relationship, where to say someone is “unemotional” is either a sign of calm rationality or catatonic alienation (see 2.2.3 and Lutz 1986). In this instance, the later meaning is more prominent when the PLWHA is placed in contrast with the emotional enthusiasm of the other image. Here, the lack of emotion (lack of hope) is a sign of Otherness from the dominant “norm” of hope.

As previously mentioned, the construction of the Hopeless HIV/AIDS Victim is profoundly racialised in South Africa as it is in the rest of the world. While there are images of “white” HIV/AIDS activists, there are no “white” HIV/AIDS victims looking hopelessly and mutely into the camera. Sontag (1991) observes a Eurocentric fantasy that “people with little reason to expect exemption from misfortune have a lessened capacity to *feel* misfortune. Thus it is believed that Asians (or the poor, or blacks, or Africans or Muslims) don’t suffer or don’t grieve as Europeans (or whites) do” (139). Certainly, the complete lack of expression on every face of the Dlamini family (and compared to the huge smiles on the faces in the other picture) may well play into this interpretation. It is the African AIDS Victims’ hopelessness that sets them as Other – as separate from the hopeful future projected in the other picture of “rainbow nationalism”. That is, it is not

¹⁵ To clarify, they are a group of people, but in their expressionless, hopeless Otherness as “AIDS victims” and framed in that way in their house across the bare floor, this group of people are physically set apart from the reader in contrast with the mid-crowd shot of the World Cup image.

only the fact that they are affected by HIV/AIDS and poverty that makes them Other, but their very representation as being hopeless that sets “them” apart.¹⁶

Furthermore, while the World Cup image depicts cheering and shouting, the HIV/AIDS Victims stare mutely at the photographer and reader. Their Otherness is enhanced by their silence, their subalterneity (Spivak 1988), and their voice can only be found through representation by activists, journalists, academics and government officials. Stein (2001) points out that various research has shown the alarming extent to which HIV positive voices have been marginalized by mainstream media.

When PWAs are presented this is almost exclusively as ‘patients’ in need of care and compassion. South African journalist Mark Gevisser expresses this most forcibly when he writes that ‘the media often kills people with AIDS long before they are ready to die, fuelling the public misconception that if you have it, you might as well be dead’ (Stein 2001, 7).

What makes us human, for Freire, is that we are beings who communicate, who have a word. Therefore, the deepest act of dehumanisation, of treating people as things, is to strip them of their word, to censor, to refuse to communicate, to shun dialogue (Freire 1993, 119-148). Therefore, in their “mute acceptance” of their hopelessness, they are denied the opportunity for an interior landscape and are reinforced as objects, nonhuman and Other.

In addition, not only are they “silent”, but they are “motionless” as well; hands dangling quietly, compared with the energy of punched fists and waved flag of the World Cup image. Lack of voice and motion reinforces their lack of agency, and they are again objectified to the reader’s gaze. The African AIDS Victims become objectified Others in their stillness, their lack of energy, movement and “life”. They are stills of impeding death. This is reinforced by the construction of “the poor” as “not able to do”, which has been well documented in the development fields (see Comaroff and Comaroff 1991).

¹⁶ Due to the focus on “public” hope, we will not move here to a further discussion of the way this dominant discourse of hope could be affecting HIV/AIDS individuals. For example, when a PLWHA expresses that they have “worked though despair to hope” they could be conforming to the dominant discourse of hope rather than being “allowed” to express their fear - due to the power of these constructions (see 2.4 and Stein, Soskolne and Gibson 2003).

Steve de Gruchy (2003) observes,

...(There is) the assumption that there is a divide between the non-poor and the poor that reflects a divide between actors and beneficiaries, agents and clients, doctors and patients, and ultimately the subjects and objects of history. We seem to accept that there is a class of people who can do, and a class of people who are not able to do. In making this fundamental assumption of being 'not able to do' are we not simply mirroring the power dynamics that lie at the heart of the experience of poverty, and hence reinforcing the very problem we think we are solving? (31).

This image of the Dlamini family as hopeless objects denies the family agency and denies them recognition of any efforts and strategies they are enacting to live with HIV/AIDS. As they are flattened into one-dimensional models, we gain little understanding of what core beliefs are influencing them (religious, cultural, psychological or emotional). Their lack of hope and silence in even expressing their hopelessness means they lose all possible agency, and are set apart from the transforming (agentive) Rainbow Nation (see Sontag 1991, 5).

Abu-Lughod and Lutz (1990) point out that two aspects of social relations emerge as crucially tied to emotion discourse: sociability and power relations. Sociability can be seen in the prevalence of emotion language in "settings where solidarity is being encouraged, challenged, or negotiated" (13), for example, during threats to social cohesion. Power is even more thoroughly bound up with such discourses, and "the ways power relations determine what can, cannot, or must be said about the self and emotion, what is taken to be true or false about them, and what only some individuals can say about them. The real innovation is in showing how emotion discourses establish, assert, challenge, or reinforce power or status differences" (ibid 14). In the interface between these two images, hope is a powerful emotion discourse that is being wielded with the purpose of increasing social cohesion. What this means, is that the African AIDS Victim stands apart from this national social cohesion, and therefore from the national future (see 3.4.2.3).

3.4.3.2 Hope and stigma

The attribution of emotion brings to bear presupposed knowledge about the desirability or undesirability of generic courses of action on the interpretation of events...in this manner, an expression of emotion becomes a pronouncement or claim (often implicit) about the way things are or, more significantly, the way they ought to be (Bailey in White 1990, 49).

What I would like to explore here, is the idea that there is a stigma against “hopelessness” which is reinforced by the dominant discourse of national hope. Lutz observes,

Western discourse on emotions constitutes them as paradoxical entities that are both a sign of weakness and a powerful force. On the one hand emotion weakens the person who experiences it. It does this both by serving as a sign of a sort of character defect...and by being a sign of at least temporary intrapsychic disorganization...On the other hand, emotions are literally physical forces that push us into vigorous action (Lutz 1990, 70).

The dominant discourse of national hope, driven by powerful men such as Mbeki, Mandela and Tutu is a good example of emotion as a powerful force, intended to push us to action. Hope is here a “socially valued” emotion, like courage or valor. It pushes us to cohesion and to positive nationalism.

In contrast, the (female)¹⁷ hopeless African AIDS Victim can be seen as a sign of weakness – of an emotion (like grief or rage) that is not socially desirable. This fits in to a tradition of stigmatization of people with mental disorders such as schizophrenia or manic depression, which are “unattractive” to society (see Sontag 1990). In this tradition, no matter the knowledge that mental illness is a “blameless disease” as much as any other there remains a stigma towards such individuals from the public, that they should

¹⁷ Of course, constructions of PLWHA are gendered as well. However we do not have the capacity to address this completely here. Consider briefly the ramifications of the Soccer image having only hopeful men in the picture, and the AIDS picture of despairing women and children. For an example of an in-depth discussion on the gendered construction of HIV/AIDS see Treichler (1999), and see Lutz (1990) for further unpacking of how the emotional female has been mythically constructed in contrast to the exemplar white, upper-class, Northern European older man.

“control” themselves better. Lutz (1990) observes that one of the most dominant emotive devices is a “rhetoric of control” where a common set of metaphors are used in which someone or something “controls, handles, copes, deals, disciplines, or manages either or both their emotions or the situation seen as creating emotion (e.g. I believe an individual can exercise a great deal of control over their emotions by maintaining a positive outlook)... This rhetoric of control requires a psychosocial essence that is manipulated or wrestled with and directs attention away from the socially constructed nature of the idea of emotion” (Lutz 1990, 72). That is, the PLWHA is given responsibility to “control” his or her despair, and “we” the public can then ignore the issues of power and culpability that we bring to our reading of the Other’s emotions.

Hopelessness has traditionally been closely linked with the individual’s control of disease. Even Thucydides noted that, “the most terrible thing of all was the despair into which people fell when they realized that they had caught the plague; for they would immediately adopt an attitude of utter hopelessness, and, by giving in this way, would lose their powers of resistance” (154). According to historian Keith Thomas, in the plague-ridden England of the late sixteenth and seventeenth centuries, it was widely believed that the happy man would not get plague (in Sontag 1990, 55). Even now that we understand more clearly the nature of infection, theories that diseases are caused by mental states and can be cured by will power remain at large, and are compounded by the way HIV/AIDS is linked to poverty:

A patronage that simultaneously grants ‘victims’ powerlessness and then assigns them blame for that powerlessness is nothing new...it is therefore important to make connections between the construction of AIDS victimhood and similar constructions of the poor, who also suffer the triple curse of objectification, institutionalised powerlessness and blame for their condition (Grover in Farmer 1999, 84).

The result of this, however, is that despite our knowledge that the Dlamini family’s hopeless state is primarily a result of structural violence, and therefore largely beyond their control – there remains a stigma attached to their hopelessness. This stigma is an underlying perception that they should be better at “controlling” their negative emotions. This stigma is caught up in a web of classist and racist discourses, in which this passive

Othering may be interpreted by some readers as indicative of the lack of “worth” of PLWHA to society. One of the most pervasive effects of the Othering of PLWHA comes in whispers of “there are too many ‘people’ anyway”. For example, in the Birth to Twenty (or Mandela’s Children) research project, when asked on her attitude towards HIV/AIDS and living in a democracy, 14 year-old Abby Flynn replied,

I think I was 10 when I heard about it on the news. Although it’s a terrible virus, I think it’s a blessing in disguise – there are too many people on the planet, and it’s wiping out some so the rest can survive...I think it was better under Nelson Mandela...It feels as if Thabo prefers black people, while Nelson liked everyone, no matter what their colour (in Ferguson 2004, 102).

Attitudes such as these are supported by the societal attitude that “AIDS is for prostitutes, for people who have nothing to offer” (Nabagala in UNAIDS 2001,18), and the stigma that PLWHA are a burden to society. The familiar text of a woman pictured in a sparse rural hut with eight children (and then adding in the three she has lost to AIDS), gives strength to the “Western” discourse of Africans as “overpopulated and uneducated”, helpless to help themselves. It reinforces what certain readers already believe to be “Africa” and “African AIDS Victims”. If PLWHA are portrayed as set apart from national hopes, then does that not make them a burden with nothing to offer except their hopelessness, a drag in “our” drive for the new South Africa, or an added burden of depression to our already stressful lives? If stigma is someone “possessing an undesirable difference” (see Goffman 1990, Joffe 1999), in this image, the undesirable difference is their hopelessness. Lutz (1986) describes the Euroamerican construction of emotion as a schema that unconsciously serves as a normative device for judging the mental health of culturally different peoples (288). In the semantic shock between these two images, the discourse of national hope is set as the “normative” dominant discourse, and the hopelessness of the PLWHA is therefore “deviant” to this. The hopeless African AIDS Victim is therefore again stigmatised as Other from the national discourse or culture of hope

3.4.3.3 Positive futures

A proliferation of reports or projections of unreal (that is, ungraspable) doomsday eventualities tends to produce a variety of reality-denying responses (Sontag 1991, 179).

The second dominant discourse of hope that has been grouped under the title “Rainbow Nation” builds on the desire for multicultural cohesion, and becomes a hope for a positive future – wishing on the gold at the end of the rainbow.

What is more real (“imaginable”) to the reader: the doomsday image of Hopeless African AIDS, or the exciting projection to 2010 when South Africa will host the World Cup Soccer tournament? Is it possible that in the dominant discourses of national hope, there is a theme that hopes HIV/AIDS “will just go away”? Rosenberg (1992) observes that historically, epidemics have a dramaturgic form, that is, they are an event not a trend, with visible episodes. In South Africa, this is still very much the case, with the discourse of HIV/AIDS as a chronic disease playing a much lesser role to that of HIV/AIDS the epidemic. In addition, this perception of HIV/AIDS as an event is strengthened by our heavy reliance on the metaphors and analogies with other epidemics such as cholera and plague, or with wars and battles, which historically have a beginning and an end (see Johnston 1995, Rosenberg 1992, Strong 1998). HIV/AIDS as an event implies it will end sometime in the future, irrespective of human interference. This hope could also be strengthened by increasing mentions in the media that statistical projections into the future put the South African HIV/AIDS incidence and death rates as having “levelled off” by 2010, just when we host the Soccer World Cup (see Dorrington et al 2004, Shell 2000). Therefore, the image of HIV/AIDS would only be a semantic shock to the dominant discourse of national hope if the reader perceived HIV/AIDS to be a threat to his or her future. If HIV/AIDS is just another epidemic event that must be endured until it “goes away”, it can be placed in the background noise of a society that is wishing on better things at the end of the rainbow.

Throughout the above discussion, the word “future” has been consistently mentioned. “Hope” is a word that points to the future, that is, to be hopeful means there is an imaginary agency projecting forwards from the present. Sontag says,

Reality has bifurcated, into the real thing and an alternative version of it, twice over. There is the event and its image. And there is the event and its projection. But as real events often seem to have no more reality for people than images, and to need the confirmation of their images, so our reaction to events in the present seeks confirmation in a mental outline, with appropriate computations, of the event in its projected, ultimate form. Future-mindedness is as much the distinctive mental habit, and intellectual corruption, of this century as the history-mindedness that, as Nietzsche pointed out, transformed thinking in the nineteenth-century (Sontag 1991, 177).¹⁸

The battle between the dominant discourses of hope in the public media is one over control of the “future image”, of what Treichler (1992a) called the “social imagery” of the nation – something (the state) dreams itself to be. Nuttall and Michael (2000) observe that in South Africa, terms like “transition” dominate. Although transition seems to be about the present, in fact it carries an inflection towards the future, and seems to replace or avoid the space of the present, which appears to be over-whelmingly traumatic (317). A dominant focus on a selective future, mixed in with discourses of national hope gives little power to images of hopelessness and despair of HIV/AIDS in the present.

Hope is also the power to imagine the future (see Moltmann 1975) – in this case, a struggle over who has the right to imagine in the public domain, and what form this imagination can take. Rosenberg has pointed out that this has had very real effects in the history of epidemics, as most communities are slow to accept and acknowledge an epidemic due to a “failure of imagination”. He continues,

¹⁸ While I accept Sontag’s point here that future-mindedness is a dominant discourse, as we have proven above, I do not readily accept that this orientation automatically makes all those involved “intellectually corrupt”. For example, if “intellectual corruption” here means that the future is emphasized at the cost of the present, then this cannot apply to theorists such as Moltmann who believe fundamentally in the transformation of the present driven by hope for the future. Moltmann (1975) sees hope as the power to imagine. Kearney (2000), in turn, points to imagination as the power of metaphorically reconciling opposing meanings - through semantic shock or dissonance. Hope, imagination, or future-mindedness might well be the mental habit of our time, but in some instances can be a creative force rather than a sign of intellectual corruption.

...Acknowledgement would threaten interests – specific economic and institutional interests and, more generally, the emotional assurance and complacency of ordinary men and women...only when the presence of an epidemic becomes unavoidable is there public admission of its existence. Bodies must accumulate and the sick must suffer in increasing numbers...the pattern has repeated itself in century after century...the stakes have always been high, for to admit the presence of an epidemic disease was to risk social dissolution (Rosenberg 1992, 281).

In the context of this study, an acknowledgement of the harsh realities of HIV/AIDS would threaten the “social imagery” projected by the dominant discourse of national hope. Will HIV/AIDS ever be properly acknowledged in South Africa? If the social imaginary focuses on hopes for a successful World Cup Soccer tournament in 2010, skipping over the effects of HIV/AIDS, it seems unlikely.

The public imagination is of course influenced by a variety of sources. From symbolic constructions such as those already mentioned, to religious discourses (which will be discussed in more detail in the following chapter). Imagination is also driven by fictional forms in the public such as films and television, which in South Africa, is also heavily influenced by international media and therefore “globalised” social imaginary. While we do have local television shows which incorporate HIV/AIDS into their present fiction, there are also American and British fictional realities which continue to promote hopes and images of the future that do not (and have never) been touched by HIV/AIDS. Globalisation has been described as the state in which “we know more about famous people far away than ordinary people on our doorsteps” (ILRIG 1998). This means that our “imagination” is also influenced by discourses of hope built within non-South African media.¹⁹ While we do not have the capacity to do a broad spectrum analysis of all international discourses (and visions) of hope for the future here, the point remains that these influences rarely contain mention of HIV/AIDS, or the effects of HIV/AIDS in this future.

¹⁹ As a quick exercise I randomly selected three “block buster” films and kept an eye out for discourses of hope. Astoundingly all three mentioned hope at the crucial moments of the action: “Hope, it is the quintessential human weakness and simultaneously the source of your greatest strength” (The Architect: Matrix Reloaded – at the moment of Neo’s universe-altering decision), “There is always hope” (Aragon, Lord of the Rings: The Twin Towers – on the eve of the final battle), and “There is no worse death than the end of hope” (Arthur, Arthur – also on eve of the final battle).

Sontag (1991) points out that “AIDS, like cancer, does not allow romanticizing or sentimentalizing, perhaps because its association with death is too powerful...now the generic rebuke to life and to hope is AIDS” (111-112). Therefore, by being labeled by HIV/AIDS, the Dlamini family is not longer allowed to be part of the social imagination – romance, sentiment, imagination, future, these are only available to “the rest of us” – and again, PLWHA are profoundly Othered. “We” can imagine a future for South Africa filled with transition, rainbow nationalism and Renaissance. However, the imagination founders when faced with a future of AIDS orphans, social devastation and economic disaster. Again, “they” are standing motionless while “we” are moving forward into the future we can imagine and manipulate.

3.4.4 Hopeless and Othered, pulling it all together

When people see their ‘way of life’ at risk, they characteristically become less tolerant of social differences. In their quest for order and control, they construct distinctions between normal and perverse, legal and criminal, innocent and culpable, healthy and diseased. Labelling AIDS as a disease of certain groups becomes a way to focus blame, to isolate the sources of contamination and contagion, and to deny the vulnerability and responsibility of the wider population (Nelkin, Willis and Parris 1991, 4-5).

The above discussion reveals a variety of tensions and themes that are exposed in the “semantic shock” between the two images. We have seen how dominant discourses of national hope are threatened by HIV/AIDS, and consequently move to exclude HIV/AIDS from this social imaginary. In a variety of ways, PLWHA are stigmatized as a result of their positioning as “hopeless”. Let us consider some of the possible consequences of this, and the way forward.

In a variety of ways, the HIV-negative (or “HIV-unknown”) reader is positioned to feel part of the dominant discourse of national hope, of African Renaissance, the Rainbow

Nation and part of a cohesive society. From this position, the reader can (or must) ignore HIV/AIDS so long as it does not affect their imagined future and is an event that is happening in the background and will be ended soon anyway. But as we have seen, this social imaginary covers over a multitude of faultlines and fissures in our society, between people of different races, classes and cultures. Slack (1985) points out that historically, a lack of social cohesion has also been a contributing factor to the spread of infectious diseases, “where there is poor social cohesion, people tend to blame others and flee”. What I am suggesting here is that fleeing need not only be physical. If there are dominant discourses of hopelessness built into the social construction of HIV/AIDS in South Africa, and these strongly oppose both our optimistic social imagery and personal imaginations – showing up the lack of cohesion - then this could cause the reader to either Other HIV/AIDS completely, or ignore the ramifications of HIV/AIDS entirely, and both these actions could be seen as “flight”.

This chapter has sought to highlight some of this social imaginary in relation to hope and HIV/AIDS. From the above discussion it becomes clear that there are multiple themes of “hope” pushing and pulling the reader (between the emotion of hope and hopelessness). However, it is clear that the image of the Dlamini family is completely Other (in difference not sameness) to the hopeful imagery of the New South Africa. PLWHA who are portrayed as “hopeless” are stigmatized by this contrast to public perception. No matter that they have reason to feel such fearful emotions, or are subject to structural violence, their despair is not a valued emotion in a society driven towards hopeful Renaissance and transformation. The challenge is to find a way to acknowledge their agency and individual hopes, and still emphasize their need for support from the rest of society.

Thirdly, the proliferation of such images of Hopeless African AIDS Victims has created a stereotype. Many studies on South African youth have despaired that those researched continue to believe that they can “spot” a person with HIV/AIDS – a belief which is prevalent even in university educated students who have been educated on HIV/AIDS (see Levine and Ross 2002). It would be interesting to research further whether this belief relates to the stereotype of PLWHA as visibly Hopeless Victims, that is, people with no future, sentiment or imagination. There is increasing concern that the focus on poverty as the major factor in HIV/AIDS implies that the poor are uniquely at risk, simultaneously

encouraging and leaving the affluent with a false sense of security (Van der Vliet 2004, 81). This also creates a barrier for the economically advantaged to come out either to be tested or disclose. Similarly, the “hopeful” social majority might not consider testing or prevention is necessary to them, considering their position and imagined future. A further question that arises from this is; if an HIV/AIDS prevention campaign then aims to strongly promote positive living (to an HIV/AIDS-negative normative audience), could this inadvertently be reinforcing this perception that “hopeful” people do not have HIV/AIDS?

Finally, it can no longer be accepted that hope is an obviously or naturally positive term in the context of HIV/AIDS. Discourses of hope are linked in with positions of power and representation, not all of them useful to the fight against HIV/AIDS. Therefore, it would not be possible to simply recommend that the way to combat the hopelessness of HIV/AIDS is with positively hopeful messages, or conversely to downplay the hopeful national imagery of hope for the new South Africa. Any such simplistic invocation of hope or positive-living, risks falling foul of the same dangers as have been revealed in these images. What is necessary is a more complex “philosophy” of hope that can be sensitively utilised in different cultural and community contexts.

The interest of the two images discussed in this chapter lies in their relation to each other, in our (your / my) relation between them. What we are seeking is a route (or discourse) capable of bridging the gap between HIV/AIDS and the New South Africa in a way that does not cause alienation or Othering from either side of the divide. Hope is not an optimistic “magic bullet”— it is the knowledge that we are engaged with a long-term struggle to change entrenched systems, views and power structures and still be inspired to go forward. The challenge is to encourage a public discourse that can “entice” the reader into feeling secure enough to bring HIV/AIDS into their lives and future – secure in the knowledge that the hopes that they treasure can be maintained even if HIV/AIDS is in their future imagination.

3.5 Chapter conclusion: HIV/AIDS as a challenge and hopeful humanism

Without economic and social hope we will not have peace, and AIDS surely undermines both – President of the World Bank, James Wolfenson 2000.

We must keep hope alive – UNAIDS Director, Peter Piot 2001.

Fundamentally, this challenge means changing HIV/AIDS from an “incomprehensible calamity” as the South African Strategic Plan calls it, into a hope- and energy-filled challenge. That is, HIV/AIDS need not be in dialectic opposition to African Renaissance or the Rainbow Nation, in contrast to what President Mbeki said, we *can* have an African Renaissance in sight of HIV/AIDS. What this needs is imaginative power, which can be gained through hope and semantic shocks such as the one between these two images. What we are in need of are more public discourses of hope that are inclusive of variety and imaginative force. We are in need of public discourses capable of placing the HIV/AIDS epidemic within the New South Africa through constructions of hope, not false optimism.

In an article titled “A challenge, not a threat”, HIV/AIDS researcher Mary Crewe describes how little has been done in South Africa to move beyond a discourse of negative effect.

Instead of using HIV and AIDS in the most creative ways to understand how we can use this most fascinating of all epidemics to effect real social, political and cultural change, we have acted defensively, trying to buttress the society against the perceived threats of the epidemic... This does little to change behaviour and less to alleviate fear and fatalism. There has been little that seeks to generate a fascination with the epidemic (Crewe 2004).

To the researcher, HIV/AIDS can be overwhelming in the way it touches every aspect of our lives and calls for multiplex and simultaneous responses. Instead of being overwhelmed, what this could in fact mean is that HIV/AIDS could *be* our African Renaissance, our transformation – our impetus to change everything wrong in our society,

and our world. As Paul Farmer says, “The massive loss of life due to HIV disease is only one symptom of a very sick world in which hundreds of millions are going without any modern care at all. Addressing AIDS properly offers a chance to set some of this right” (Farmer in Sontag 1991). Whiteside (1995) similarly observes, “AIDS is a catastrophe for the infected individual and their families. It is a disaster for the worst affected countries. For all of us it is a challenge. Not only do we need to stop the epidemic but we also need to look at the environment that allowed it to spread. If we address this then we will address many of the core facets of development and the injustices that are so rife.” In this regard, the greatest failure would be in the event of science discovering a magic bullet and HIV/AIDS then disappearing into the mists of history as “just another epidemic event” without us having taken advantage of this opportunity to correct much of what is wrong with our society.²⁰

What we are talking about here is a new way of speaking about HIV/AIDS, a social discourse that treats HIV/AIDS as a challenge rather than a threat, a “movement” based on a common hope for humanity. This is not optimism, but rather hope that clearly sees all the challenges we face and still continues forward. Here HIV/AIDS becomes a unifying force rather than a stigmatised Other, it becomes part of the social imaginary of the nation, tapping into our national belief in miracles. As HIV/AIDS activist, Judge Edwin Cameron says,

This is my message of hope. That is the encapsulated truth about AIDS. People must feel grief, but they must also feel anger because what is happening need not be happening. But most important they should feel hope because this epidemic can be dealt with...so, ultimately, through the grief and the anger we must feel hope. That’s my message. It’s a challenge bigger than apartheid. Those who are refusing the challenge are committing an enormity comparable to apartheid. It is a challenge to all of us in South Africa...the hope is that our action, our capacity or belief translated into action, can change this (2002, 291).

²⁰ Please note that I do not intend in any way to suggest here that a “magic bullet” which could ease the despair and suffering of millions of people would not be welcome, but by focussing optimistically on a “quick fix”, we can miss the opportunity to take up the large-scale challenge presented to us with such urgency.

Of course, the modern academic may well cringe at the sentiment in the above paragraphs. Influenced by post-modernism, theories of social optimism and humanism have largely been debunked. However, discourses of hope for humanity remain visible in the public media. In the articles on HIV/AIDS that were scanned, phrases that reappear regularly are those such as; “all men live in hope”, “hope in common humanity”, “hope in the world”, or “born in hope”. Rosenberg says,

... We live in a fragmented society... Yet AIDS has reminded us that we all share at least some common fears and ways of responding to social crisis... plague reminds us that human beings will not so easily escape the immanence of evil and the anxiety of indeterminacy. Mortality is built into our bodies, into our modes of behaviour, and into our place in the planet's ecology. Like other epidemics, AIDS has served well to remind us, finally, of these ultimate realities (1992, 292).

HIV/AIDS has not only reminded us of ultimate realities, but as a threat to us all, reminds us of our shared humanity. As Gary Gunderson says, it is common on campuses to speak of ourselves as living in a postmodern time, meaning mostly that we are liberated from rational optimism, “while it may be possible to be postmodern on campus, it is not on the streets” (1999, 14). Gunderson describes the Prisoner of War Monument at Andersonville, “the inscription alludes to the passage in Isaiah, ‘prisoners of hope’. Sometimes we feel like we are captured by a hope that can only expose us; that we cannot fulfill. The only good news is that this is true of all of us of every persuasion in every field not just us social optimists” (ibid, 13).

Many intellectuals are increasingly noting the limit of postmodern perspectives that reject humanism or social optimism. Millen, Irwin and Kim (1999) point out that well-intentioned efforts to emphasize particularity and to honor the unique character of specific cultures, traditions and identities can be pushed to the point where all sense of solidarity and shared meaning is lost. “We are asked to believe that human beings are now so speciated by gender and race – though we are silent about class – that there can be no universal knowledge, politics or morality.” Furthermore, it is usually not among the victims of oppression and prejudice that such ideas have gained dominance. “It is not (oppressed people) who have abandoned idealism, universalism, truth and justice. It is those who already enjoy these things who have denounced them on behalf of the others”

(O'Neil in Millen, Irwin and Kim 1999, 386). Millen, Irwin and Kim end their collection observing that although they have shown ample reason for a pessimism of the intellect, "we conclude the volume by offering reason to cultivate an optimism of the will. We believe that the practice of 'pragmatic solidarity' indicates a way to move beyond fatalism and inertia...any victory over indifference and unjust suffering is a victory worth celebrating" (1999, 390).

Theories and discourses that address our shared humanity in pragmatic solidarity are important for various reasons. They combat the pre-eminence of the Othering effect of HIV/AIDS. They work against the culture of self-interest, which is "usually praised as 'individualism'...(and which) now receives an added boost as simple medical prudence" (Sontag 1991, 161). The work towards creating a discourse of cohesion that includes HIV/AIDS emphasizes that PLWHA are also "born in hope" and not dehumanised as hopeless Others. Therefore, while seeking a theory of common humanity in hope may be academically unpopular, it remains vital in the context of HIV/AIDS in South Africa. We are here taking up the challenge to place our national (shared) hope in view of HIV/AIDS. One group of academics who have continued to wrestle with theories of humanism are academic theologians. The next chapter will therefore take up this challenge, and investigate how far the Christian discourse of hope can be utilized to this purpose.

Chapter 4: Potential of Christian discourse in the context of HIV/AIDS

Some people use the term 'post-modern' when they abandon their concern for the common future of humanity and withdraw into their histories, calling everything arbitrary or 'multi-optional'. This decline of community is the coming anarchy and is the surest road to disaster...Even if no one likes to think universally any more, the (universal church) is called to life through God's universal hope, and represents that hope. The angel of the future is its promise and its defence (Moltmann 1997, 42).

Churches are channels: hope bearers – even in the midst of the AIDS pandemic (Christian AIDS Bureau in Pick 2003, 11).

The previous chapter highlighted some of the possible effects a particular dominant discourse of hope could have in the context of HIV/AIDS. There are of course many other dominant constructions of “hope” that could be examined in this way, but for the purposes of this exploratory research, we will remain with the question raised in the previous chapter, namely: How can we bring HIV/AIDS into the discourse of hope for the “new” South Africa? This chapter seeks to cross over to an examination of Christian public discourses on HIV/AIDS, interrogating the thesis that Christian discourse has the potential to act as such a “bridge of hope”.

4.1 From public media to public religion

As argued previously, religion is an important system of belief in South Africa and is a “source” of much of the dominant discourses of hope in context of HIV/AIDS (see 2.3). What was also mentioned in the second chapter rationale is that this dissertation is based on a firm belief that the separation between secular and religious aspects of social life is an artificial one. This separation places Christian discourse in a false dichotomy with “other” social discourse and research, and while these chapters have been divided for methodological reasons, in truth this division furthers this illusion. Christian hopes impact on social, political and public life and representations and vice versus. Christian hopes

stated in the public media would therefore work within and around the themes of hope as described in the previous chapter. An obvious example of this must be the presence of Archbishop Tutu standing alongside Mandela in the centre of the crowd celebrating the World Cup Soccer bid. The reasoning behind the division of chapters is that such a method can more clearly interrogate the “particular” nature of the Christian discourses of hope. As discussed, current research on religion in the HIV/AIDS pandemic focuses primarily on the potential for the church (and other religious bodies) to support existing programs and campaigns, which possibly misses the potential for unique aspects of religious bodies and discourse to be exploited (see 2.3). While hope appears as “naturally” in Christian discourse as anywhere else, and therefore requires careful consideration, it is in the process of deconstruction that we may find characteristics particular to the mainstream Christian representations of hope that might be utilized in the fight against HIV/AIDS.

The discussion that follows in the next two chapters is based on a wide range of academic and media resources. However, demonstrative extracts used in each section will be pulled from two types of primary sources, namely a handful of mainstream Christian guidebooks on HIV/AIDS published in South Africa and from articles in the *Southern Anglican* magazine, also published in South Africa. These are all seen to be an example of “public discourse” as they are aimed at influencing lay-Christian knowledge on HIV/AIDS, and are all freely available through bookshops and public libraries and are further directly disseminated to Christian groups.

Please note that the following discussion is obviously limited by its focus on mainstream Christianity and public discourses. The realization that “religious life in southern Africa is a mix of indigenous and externally sourced religious worldviews” (ARHAP 2004, 4) would be essential in exploring these themes further into any localised examination of how congregations and individuals interact with the public discourses of hope. The fact that the mainstream (and particularly the Anglican) religious discourses are the most visible in the English-medium print media does not imply that it has a greater influence than other religious and cultural influences. It is merely an indication of a public discourse that is visible for initial discussion of this sort. In addition, Schmid noted in her localized study of mainstream Christian responses to HIV/AIDS that while religious public discourse on HIV/AIDS might be increasing, local congregations remained largely silent

even while their “institutionalized” public discourses increased (2002, 107). This serves to highlight that research such as this is not intended as an indicator of what is being said within different congregations, but rather a study of dominant social constructions visible in the public domain, which then influence internal structures such as congregations and then individuals.

4.2 Potential assets of Christian public discourse

I hope that Christians, looking at the pandemic and seeing orphans cared for, the dead buried by concerned strangers, men and women giving up good jobs for AIDS work, prisoners turned community workers, sex workers turned counsellors, and ordinary people living lives of quite extraordinary love and sacrifice, will say: ‘God is in this’, and be willing to join in (Bayley 1999, 5).

There is an increasing interest in the potential role that religious groups can play in the HIV/AIDS epidemic (see 2.3), which is further encouraged by a belief that they have certain (sometimes unique) capabilities. These are most commonly expressed from a public health perspective. For example, religious groups are seen to have “captive audiences”, health infrastructures in areas where there are none, trained staff, charismatic leaders, access to the poorest of the poor, international connections and supportive structures. However, the most interesting characteristics of religious groups for the purposes of this study are those linked to the understanding that most religions are primarily “discourse based”.²¹ In this chapter, we will seek to unpack some of these discourse-related assets. The next chapter will then explore the potential of utilizing these assets in the context of Moltmann’s Theology of Hope.

In an examination of community wisdom and theological reflection, Cochrane (1999) considers the public sphere of Christian discourse and action as it relates to the specific South African local context he engages with. In a section of his study, he calls on Averil

²¹ In that their perceptions are heavily influenced by their interaction with primary texts, and consequent “discursive” actions such as preaching, ritual, reading, bible study, song and prayer prevail.

Cameron's (1991) analysis of the success of Christianity in replacing classical Graeco-Roman discourse as the dominant discourse of Europe. Cameron observes that the Christian discourse proved to be strongly "elastic", giving it "the ability to flexibly express a convincing view of the actualities that dominated the life of citizens and non-citizens alike and to open up a sufficiently hopeful range of possibilities to gradually enable them to grasp the outlines of a new future" (Cochrane 1999, 140). Cameron outlines certain "rhetorical strategies" that Christian discourse uses towards this end. Drawing on Cochrane's framing of Cameron's work in the South African religious context, we will consider some of these rhetorical strategies of Christian discourse as are relevant to this study.²²

4.2.1 Christian discourse is strongly narratological

The first asset of Christian discourse is that it is strongly narratological, or constructed through story – a characteristic that can be seen in its reliance on the scriptures and its discourse tradition (Cochrane 1999, 143). This is important in the context of HIV/AIDS, as it means that Christian discourse could have a greater capacity for the creation and engagement with individual and community narratives, that is, narratives visible in the public sphere. An increase in (a variety of) narratives would combat the dominant presence of social constructions such as the monolithic "Hopeless African AIDS Victim", and would allow multiple voices to be heard. This could also have the effect of combating the alienating effects of mass media, enhancing the realisation that there are individuals behind the numbing (and mostly hopeless) statistics. Gunderson also notes that a particular strength of religious congregations is their ability to frame or tell stories, "the strength to answer 'who am I?' without dumbing the question down to a set of statistics, labels and legal obligations" (2000, 362).

Furthermore, this study has so far observed the hegemonic nature of various binary social constructions, such black and white, hopeful and hopeless, subject and object. Cochrane observes that Christian discourse has a special capacity to integrate reality, "to overcome

²² This study will continue to use Cameron's material through the lens of Cochrane instead of turning directly to Cameron's material directly. While slightly awkward, this method was chosen so as to be able to lean on Cochrane's expertise in matters of academic theology in the South African context.

the kinds of dichotomies that have so fractured our language and practice” and that this gives Christian discourse its power (1999, 123). Not only does this mean a Christian discourse can more easily negotiate between constructed separations (such as society and the church), but it is possible that it can also more easily negotiate between the binary constructions within HIV/AIDS narratives, such as hope and despair, negative and positive, self and Other. Is it therefore possible that a “Christian” interpretation of such narratives has a greater potential to integrate these dichotomies?

For example, in *The Church in an HIV Positive World: A Practical Handbook* (2004), HIV/AIDS narratives are presented to the reader under the subheadings “Churches mobilise to bring hope into the darkness” and “Living in hope: stories by People Living with HIV/AIDS”. While there is not the capacity here to closely analyse these stories, it is valid to note that despite their headings, these stories contain multiple emotions and “constructions of hope” rather than presenting any single monolithic view. The narratives openly engage with what it means to be Christian in an HIV/AIDS-positive South Africa, good, bad or ugly. However, this argument would require a great deal of further research as many “secular” HIV/AIDS projects encourage a narratological strategy, and there is no space here to do a comparison (or to link secular narratives to religious traditions). Furthermore, like all discursive strategies, this one must also be carefully considered before it is wilfully despatched. For example, little is yet known of the effects of different narratives constructions, on either the audience or the speaker. Nevertheless, a Christian discourse of hope may have a greater capacity to engage with these debates simply because it places greater importance on such narratological issues.

4.2.2 Christian discourse has a performative and declaratory aspect

The second aspect of Christian discourse that Cochrane highlights is what Cameron calls “the performative, declaratory aspect of Christian rhetoric”.

This emphasizes drama, liturgy, ritual, song, choral prayer, symbolic demonstrations, and art, in order to bridge the rational and irrational, knowledge and mystery, thought and feeling, external and internal experience, the personal and the public, the immanent and the transcendent. In recent South African history,

the unity of these elements has been found in fasts, resistance funerals, vigils, symbolic marches, struggle songs, and the like. Where this unity works, there is no comparable discourse available, for example, in philosophical postulates, political theory, social analysis, or secular ideological constructs (Cochrane 1999, 143).

In this respect, the Christian discourse of hope may have a more direct route to its “enactment” than other social discourses of hope in HIV/AIDS - such as the vacillating discourse from the state (between national hopes and HIV/AIDS as an incomprehensible calamity). For example, Comaroff observes that ritual provides “an appropriate medium through which the values and structures of a contradictory world may be addressed and manipulated” and that “the construction of messages through the medium of symbols is the essence of all ritual” (1985, 196-197). Performing rituals of hope, in whatever form (that is, even songs, prayers or liturgical dances) may well give a Christian discourse of hope further impetus or impact than “positive messages” being sponsored in health promotion campaigns such as *loveLife*. Again, research is needed into the possible “negative” impact that some “hopeful” religious rituals may have as well.

The other aspect of this rhetorical device is that of declaration. While there may well be individual effects of declaring hope or faith, what is pertinent here is to consider the effect of institutional declarations made in the public. As discussed, public discourse on HIV/AIDS has been a roller-coaster ride of hopes raised and dashed. It has reached a point that very few leaders in South Africa dare make promissory claims of any kind so as to avoid being proven wrong in the media. In the *Southern Anglican* magazine (2004) there was an interesting statement thrown in at the end of a regular CPSA update article (emphasis mine):

As the CPSA, we have made *a commitment* to these people and their families to provide them with Christian care and to eradicate from both church and society the dehumanisation of stigma. In making *this promise* we have taken on an enormous challenge to make our church a more compassionate and less inward looking one. We have before us *a vision*, as articulated by the Archbishop, of working for a ‘generation free from AIDS’... We need to support, encourage and inspire each other if we are not to give in to despair (Jones 2004, 46-47).

In this extract a promise is clearly laid down, even in acknowledgement of its inherent challenges. Furthermore this promise is driven by a clearly stated vision of the future. Is it possible that a Christian discourse of hope can more easily make promises and lay out visions of the future that include HIV/AIDS than other public discourses of hope? Could this strong declaration of intent affect the readers' commitment, belief, action or hope?

4.2.3 Christian discourse can be both public tool and express individual emotions

Cameron's claim...defines something important in the nature of Christian discourse: its potential to be sufficiently flexible for use as a public and political instrument, and simultaneously capable of expressing a wide range of private feelings and emotions (Cochrane 1999, 142).

Throughout this dissertation the argument has struggled to draw an artificial line between public and individual expressions of hope. This has been a struggle because although such a differentiation is useful for research purposes, the public and the individual are intricately and inextricably linked (see 2.4.1). A Christian discourse may contain essential discursive devices that allow this integration to be more effectively managed. For example, the creation of a public "religious" tool for changing behaviour in the context of HIV/AIDS may have greater success than its secular counterparts if it can more successfully ride the line between public and private dimensions (certainly something theologians have been battling with for a long time). One consideration that arises from this speculation then, is that in the planning of public health campaigns from within religious institutions, it may be vital to do so using the structures of the Christian discourse – rather than falling automatically into the norms of public health or health promotion messaging. This is important as HIV/AIDS behaviour change programs have proven to be largely ineffectual, and therefore must not automatically assume superiority to religious discourses that have been effectively changing behaviour for centuries.

In addition, the previous chapter discussed the possible stigmatisation of certain aspects of "emotional discourse" in the public perception (see 3.4.3.2). In this respect, it is possible that Christian public discourse supplies greater opportunities (or "allows") individual emotions to be expressed differently. Consider for example when Tutu broke down and

wept at the TRC hearings. This “excess of emotion” was not perceived to be “unmanly” or “irrational” – instead, it was “allowed” as a valid and genuine expression of social pain. Tutu even wrote a poem during the TRC process, the first three lines: “The world is wept / Blood and pain seep into our listening; into our wounded souls / The sound of your sobbing is my own weeping...” (Tutu in Stanley 2002). If Tutu has not been seen as a religious man, would his grief have been taken in the same accepting way? As a commissioner, was he only able to cry because of his place in the religious institution? The Christian discourse is built on a foundation of emotive concepts and constructions and this spills over into the public discourse. This could mean that a Christian discourse could more effectively address issues of hope, pain, mourning, death and despair than some of the other public discourses could – and draw these emotions toward public as well as individual uses.

Consider the possibilities of utilising the Christian “discourse” of lament in the context of HIV/AIDS. We have discussed above that PLWHA have not been given the public space to express their fears and hopes without coming into conflict with dominant discourses. Ackermann (2000) speaks of the value of public lament in the context of the TRC.

Lament is a form of mourning. It is also more...Lamenting is both an individual and a communal act which signals that human relationships have gone awry. While lamenting is about past events, it also has present and future dimensions...It instinctively makes a link between healing and mourning which make new relationships possible in the future...The cry of lament, while ostensibly wrought from the human heart in situations of suffering, is filled with enigmatic energies, unbearable urges...It is a coil of suffering and hope...It is, in essence, supremely human (220-221).

In South Africa, we have compassion fatigue, reader fatigue, and prevention fatigue. We also have an inability to cope with the sheer grief from daily funerals and “doomsday” statistics, we no longer know how to mourn in the public space. The sheer tragedy of the epidemic overwhelms us all. It would therefore be extremely valuable if a religious discourse could lead a (dominant) lament of this tragedy in the public space, a public mourning that is simultaneously an action of “restless hope” (Brueggemann in Ackermann 2000, 221).

4.2.4 Christian discourse celebrates the irrational

As discussed in the previous chapter, HIV/AIDS has grown alongside a strong belief that medical science and rational behaviour would halt the epidemic's spread. However Marais observes, "as a disease intimately tied to poverty, unemployment, migration and gender discrimination, AIDS has resisted responses that rest squarely on a faith in Reason" (2000, 10). This lack of understanding has resulted in the failure of many HIV/AIDS programs:

Essentially, it is a rationalist approach that sees behaviour as the outcome of transparent, predictable and consistent decisions that can be altered by new, equally rational, inputs. Applied to HIV/AIDS it runs into two problems: HIV/AIDS is a disease that seems to defy rationality, and the approach shows a profound lack of knowledge and understanding of stressed social behaviour (ibid, 15).

But Christian discourse can be said to "celebrate the irrational" (Cochrane 1999, 141).²³ What this could mean is that a Christian (or religious) discourse is well set to manage the complexities of the HIV/AIDS epidemic without being completely undermined by this apparent lack of clear cause and effect. In this sense, a Christian discourse can be likened to an exploratory study in comparison with the empirical studies pursued by medical science – more open to complexity and instability. Rosenberg (1992) says, "accepting the existence of an epidemic implies – and in some sense - demands the creation of a framework within which its dismaying arbitrariness can be managed" (282). It is therefore possible that Christian public discourse, with its "celebration of the irrational" could be such a framework through which we can work towards a public acceptance of the epidemic.

In addition, as mentioned previously, "irrationality" is often linked to "emotionality" in contrast to the more dominant concept of rationality and thought (Lutz 1986, 289). As discussed, a religious leader or discourse might have a greater capacity (or leeway) to express emotion without being judged as irrational-hysterical and therefore

²³ I am here again leaping over huge academic discussions in relation to religion, science and rationality. See, for example, Habermas (2002), Browning and Fiorenza eds (1992).

inconsequential. Perhaps future research should consider the potential for Christian discourse to step over public wrangling and confusion over HIV/AIDS statistics and other “rational” frameworks, and emotively engage the public on the basis of its rhetorical strategy and strengths of discourse.

Academics and intellectuals of a religious “bent” seem similarly willing to engage with the intangible and “irrational” in contrast to “reasoned” science. Cochrane says, “perhaps it is time to debunk the hegemonic character of economics in the social sciences and reinstate the sensibility of human aspirations, feelings, imagination and lust for life that religious life at its best celebrates” (2003, 48). These factors which he highlights as important would certainly appear “irrational” to some scholars, especially those not in the religious studies department, just as studying “hope” at first appears unreasoned.

Cameron argues for another important rhetorical strategy characteristic of Christian discourse: the “rhetoric of paradox”:

Paradox might be seen as a sign of the absence of logic or clear thinking, a mark of ignorance perhaps. But life experience is filled with what are felt to be paradoxes, allowing no resolution of them other than the holding together of their contradictions or the loss of all meaning...Christian theology...its archetypal paradigm lies in the proclamation of an irresolvable riddle as the very location of truth – this essential structure pervades its language and gives it its dialectical character (Cochrane 1999, 141).

Throughout this dissertation, paradoxes of HIV/AIDS in society have been highlighted. For example, how can we raise awareness of the victims of our society without turning them into powerless subjects of our gaze? How can we increase public urgency towards HIV/AIDS without using discourses of crisis, or sensationalism? In fact, it can be argued that HIV/AIDS is essentially a paradox at heart. It is therefore possible, that Christian discourse may have a unique ability to manage this tension and motivate hope (or creative imagination) beyond the immobilising effects of this disease-complex.

4.2.5 Christian discourse is strongly metaphorical

The next possible asset of Christian discourse is its “metaphorical” nature.

(The) dynamic referential quality of the Christian mythos enabled people across a wide social, economic, and intellectual spectrum to relate its claims about the nature and purpose of life to the experiences they were undergoing. Reference here was not simply linear, a direct correspondence between language and reality; it was strongly metaphorical, exhibiting a ‘split reference’ (Ricoeur) by which two things logically unrelated to each other are juxtaposed to produce new meaning, breaking open the imagination (Cochrane 1999, 141).

While there are many metaphors embedded in the discourses of HIV/AIDS, what is of particular interest here is that Christian discourse is said to have a tendency towards “split reference”, relating to the “semantic shock” discussed in the previous chapters. This was shown to be a vital technique for deconstructing hegemonic discourses of hope and despair in the public discourse. Therefore, while some of the established metaphors in the Christian discourse may have worrisome aspects (for example the popular trend of equating PLAWHA to lepers), the metaphorical nature of Christian discourse clearly can have some benefits in its ability to bridge seemingly disparate issues and in the Christian audience’s comfort with (and acceptance of) such rhetorical strategies.

While this is an area that requires a great deal of intricate analysis, consider briefly the Christian churches’ emphasis on collectivity through proclaiming “we are one family in Christ” or “we are the body of Christ” and then “the body of Christ has HIV/AIDS”. Gennrich (2004), for example, uses these singular concepts (of family or body) to battle against public or mass denial and stigma, “when one part of the Body suffers, the whole Body suffers” (1 Cor. 12:26). Evoking the family, or the body in the context of a group response to HIV/AIDS is a metaphorical exercise – one example that potentially carries healthy and cohesive messages.²⁴

²⁴ We will discuss in the following chapter some of the more detrimental aspects of such discourse.

4.2.6 Christian discourse has “power over the past”

A further feature of Christian discourse is what Cameron identifies as its “power over the past”:

What gave Christianity its cultural power was the capacity of its discourse to bridge the eras, to build upon its cultural capital, and to accommodate what seemed valuable in the declining classical culture... We are not yet able to define precisely how this capacity may be taken into a strategy of public Christian discourse (with its accompanying practices) in the shift from apartheid to a reconstructed South Africa. But that the subjugated memories need this capacity seems incontrovertible (Cochrane 1999, 143-144).

It is possible that Christian discourse could act as a bridge between the rosy optimism of the New South Africa and a new era with HIV/AIDS standing in our future. In other words, as a bridge, building on the past optimism and moving to a future of realistic hope.

Archbishop Njongonkulu Ndungane quotes UNAIDS executive Peter Piot as having said at the Bangkok HIV/AIDS Conference of 2004: “Political systems come and go, politicians, businesses and UN organisations come and go, but the long-term perspective, the memory and the future is with faith-based organisations and religions... that perspective is what has been missing in our response to the AIDS epidemic” (2004b, 9). This ability to span the past, the present and the future “in hope” can be seen as an asset of Christian discourse.

4.2.7 Christian discourse is “value-laden”

The efficacy of discourse – ritual, political, emotional – lies largely in how compelling its audience finds it to be (Brenneis 1990, 116).

While there are various other “assets” of Christian discourse that could be considered in this discussion, there is, one more that is particularly relevant – its “value-laden” nature that leads to indoctrination. Garner observes the mechanisms religious groups use to

influence the behaviour of its members such as socialization, exclusion and religious experience. He also points to indoctrination – the persistent advocacy of a set of ‘facts’, values or norms – as an important mechanism used by any religious group (1999, 6-7). Garner then points out that it is becoming clear that value-free education – which seeks only to communicate the dangers of HIV infection – is largely ineffectual on its own, “such teaching, even if delivered persistently, does not operate in the same way as indoctrination...Religion provides the most powerful source of such a (value-laden) discourse” (2000, 66).

Consider, for example, the issue of compassion. A study on HIV/AIDS youth noted that typically HIV prevention education aimed at teenagers focused on creating awareness, eliciting compassion for those infected with HIV, and teaching HIV prevention skills. These were shown to be ineffectual, and one main point was that compassion-based activities lacked a real connection to adolescents' own behaviour (Somera and Laub 2000). In addition, we have spoken previously of the issue of “compassion fatigue” as a result of media overload. Yet compassion is a central theme in Christian discourse, with a rich intertextual “value-ladenness”- giving it relevance beyond what an HIV/AIDS prevention campaign can evoke. In this brief example, the indoctrination and practice of compassion in the context of HIV/AIDS could therefore be seen as an asset of Christian discourse.²⁵

4.2.8 Christian discourse is authoritative on issues of hope

Finally, the power of any discourse is determined in a large part by the power (authority) of those who put it forward to the public. A further asset of Christian discourse in this context can be that it is socially “authorised” to speak about hope. The Judeo-Christian traditions have been called the alma mater of hope (see Meeks 1974, Moltmann 1975). If any institution is authorised to speak about hope in a time of HIV/AIDS it is the religious one. Furthermore, Benn points out “religious organizations are rooted in local structures and command a considerable degree of trust and credibility with many people, particularly

²⁵ Again, some problematic aspects of Christian compassion in the context of HIV/AIDS will be discussed in the following chapter.

on moral and social issues. They are therefore in an excellent position to mobilise communities to respond to the HIV/AIDS crisis” (2002, 16).

The question then, is how can a Christian discourse utilise these strengths and positions of authority towards a positive end in the fight against HIV/AIDS, and not fall into the trap of hegemonically “controlling” the theme. As a start, this would depend on the church being hermeneutically self-aware and conscious of the effects of its messages in the public discourse.

This chapter has sought to briefly tease out some of the unique characteristics of a Christian discourse that could be used in the context of HIV/AIDS. Religious constructions of hope in the public media need to be as thoroughly deconstructed as any other. However, it seems likely that there may be unique advantages to promoting particular messages of hope through the medium of Christian public discourse and congregations. These advantages could therefore be considered to be a “religious health asset”. While this is a barely formed thesis, it does go towards arguing that religious groups may have potential beyond that which can be found in “any” health-seeking community.

In the following chapter, we will now consider the potential of utilizing Moltmann’s Theology of Hope in the context of HIV/AIDS. This will further investigate the thesis that a Christian public discourse of hope could be utilised to span the chasm between HIV/AIDS and the New South Africa.

Chapter 5: Potential of utilizing a Theology of Hope in the context of HIV/AIDS

Without some goal and some effort to reach it no man can live...to live without hope is to cease to live. Hell is hopelessness. It is no accident that above the entrance to Dante's hell is the inscription: "Leave behind all hope, you who enter here" ...whoever takes away hope from a person or a society kills them (Moltmann 1975, 89).

Denise Ackermann, a leading South African theologian, considers Christian hope in the context of HIV/AIDS in South Africa in her personal reflections, *After the Locusts*. She observes,

...We have to be actively and passionately involved in trying to bring about that for which we hope. This implies hands-on 'doing'. Hope is not an armchair activity. Hope has very little currency if it is just a 'pie in the sky when we die by and by', a trick masquerading as optimism covered with a religious veneer. True Christian hope is tougher, more realistic; it is essential to the life of faith and actively involved in life. Yet it often seems as though hope has 'emigrated from the church'. Perhaps this is so because it is too often understood as referring only to the future. Or perhaps it is seen as simply unrealistic (2003, 81).

Wrestling with these issues, Ackermann points to Jürgen Moltmann as the theologian with the greatest impact on Christian thinking about hope. In this chapter, we will consider some of Moltmann's contributions that are relevant to the discussion in the previous chapters. This, by necessity, is a rather limited look at a complex theology from a large philosophical tradition. But, as discussed, this research aims to initiate discussion rather than "deal" with the Theology of Hope comprehensively. Furthermore, because I have no theological training, I have not engaged fully with Moltmann's central point, that Christian hope is fundamentally eschatological. Instead, as in the previous chapter, I have sought to pull out the main themes of Moltmann's theology that corresponds with the "public secular" discourse with which we have so far engaged. What this means is that what is left for future study is the exact effect of the Theology of Hope on individual perceptions of spirituality and eschatological hope.

5.1 Learned hope: Hope that experiences the negative

Christian hope is learned hope in that it knows concretely the overwhelming power of the negative and of the judgment over all being and its possibilities and yet is still hope (Moltmann 1975, 36).

One of the central points that Moltmann insists on is that Christian hope is not optimism. That is, it is a faith that can have nothing to do with fleeing the world, with resignation, numbness or retreat, “In this hope the soul does not soar above our vale of tears to some imagined heavenly bliss, nor does it sever itself from the earth” (Moltmann 1967, 21). In the context of HIV/AIDS what this means is that religious groups and leaders *must* engage with the epidemic if they are speaking of hope. The Christian hope cannot be only for “life after death” or only engage with the epidemic in a normative way that keeps the disease at a distance from their projections towards the future as congregations or religious groups.

While this chapter seeks to focus on the “positives” of the Theology of Hope, it cannot downplay the inherent dangers in any dominant discourse – especially one wielded with such natural ease as “hope” in the Christian context. Moltmann observes that the world religions hold an ambivalent relationship to hope, “the infinite hopes of man are preserved in the religions: but, by the same token, they are also abolished, betrayed, and rendered ineffective by the religious” (1975, 15). Religious leaders have historically tended to represent the best and the worst of humanity during epidemics (Forsyth 1999,13). HIV/AIDS is no different with some leaders utilising a discourse of hope to further stigmatise PLWHA.

Meeks (1974) speaks of an “inadequate relationship to existing reality” (95). Just as discourses of national hope can leap over HIV/AIDS towards their future imagery, so too can religious discourses of hope inadequately embrace HIV/AIDS. Learned hope is a hope that experiences the negative. What this means is that the negative (HIV/AIDS), is not projected on to the Other, but is accepted as part of the body of Christ. While various theological papers have called for the acceptance that “the body of Christ has AIDS”, this does mean that the Othering of HIV/AIDS is miraculously halted. As we have seen, the Othering of PLWHA is much more pervasive and subtle than this.

For example, many articles and papers on religion and HIV/AIDS speak of a “compassionate hope”. While a compassionate hope has very specific meanings to different religious discourses, in the public domain, even a compassionate hope falls foul of some of the effects of power, Othering and optimism as is discussed in the previous chapter. Consider Pick’s manual, *HIV/AIDS: Our Greatest Challenge Yet! The Road Ahead for the Church in South Africa* (2003). This book was published in South Africa and presents itself as a manual for religious groups and individuals. It comprehensively covers many of the primary issues and concerns facing a religious society in the context of HIV/AIDS. It also speaks of the importance of destigmatization and that “we are challenged to bridge the divide between ‘us’ and ‘them’ because we are all in one sense living with AIDS” (75).

However, consider the following long extract from the section called “A theology of suffering and death, hope and resurrection” (all emphasis is mine and will be unpacked in the discussion that follows):

It is exactly at such times that we can become aware of the functioning of the Holy Spirit, who intervenes and intercedes on *our* behalf, giving *us* hope and strengthening *us* to support *those* who are *weaker* than ourselves. It is at such times that the Spirit calls on *us as believers* to function as the Body of Christ, willing to be broken on behalf of *others*. It is that Spirit which calls out for God’s promises to be heard anew, and for hope and intimacy with him to be renewed (Ro 8: 15, 24-26) ...“Like the Servant who suffers, *we* are called upon to share in the suffering of *those* who are living with HIV/AIDS. In reaching out to *those* who are infected with this much-feared virus, *Christians* must constantly be aware of *their* own vulnerability and mortality. In the same way as Christ, in facing death contemplated the glory ahead, *we* are to look forward with hope and faith to the resurrection. We must hold fast to God’s promise that death is not the end... This message of hope and faith in a loving God must be proclaimed by his followers to a world that is experiencing the enormous tragedy of human suffering caused by HIV (53-54).

On the surface, this long extract appears quite admirable. However, I am interested here in the discourse at a textual level. Consider first the sentence “giving us hope and

strengthening us to support those who are weaker than ourselves". The repeated use of the pronoun "us", in contrast with "those who are weaker" creates a subtle division between "us" and "the Other". Considering the discussion of the previous chapters, placing the person with HIV/AIDS as "weaker" is greatly problematic. Firstly, the PLWHA is placed as a victim, incapable of agency, and secondly, "weaker" has connotations of weakness of emotional control, or weakness in the face of sexual choices. Further in the extract, "us as believers" is set in contrast to "those Others" with HIV/AIDS. Then later again "we as Christians" are called on to "share" the suffering of PLWHA. "We" are to "look forward with hope and faith to the resurrection". In other words, the form of address is consistently one of the plural Christian group ("we/us/our") looking across at the singular (or amorphous "those" Other) weaker victims living with HIV/AIDS. This (albeit unconscious) arrangement of pronouns, based on standardised forms of Christian discourse, inescapably sets the PLWHA as Other to "we/us" Christians – and "we" are living in hope for "them". In this light, the message of a shared hope is undermined by discourse conventions that place the Christian as a group compassionately caring for "the Other". In addition, this subtle Othering implies that HIV/AIDS is a challenge for individuals rather than (us/our) the religious group – that is, the group is caring and assisting individuals with HIV/AIDS rather than reflecting on their collectivity and culpability in the epidemic. The focus is on individual behaviour and care rather than social change (see Gunderson 1999, Lomas 1998).

As an aside, please note that this particular manual shows exemplary insight into the position of the church in the context of HIV/AIDS, and has not been pulled out as an example in this exercise because of its "weakness" or "failure", but rather because it is one of the best guides of its sort, but which nevertheless shows problematic discursive effects. This supports the argument that the most powerful discourses are embedded within texts in a "natural" manner that evades detection even from "conscientised" writers such as this.

Moltmann (1972) says that we must make sure that hope language does not just become the ideology of the affluent among us. I would take this one step further to say that we must take care that it does not become the ideology of those who perceive themselves to be HIV-negative. This caution could be enacted with (at the very least) the linguistic device of saying "those *of us*" living with HIV/AIDS, instead of the more generative "those".

The real problem with this form of “Othered compassion” for PLWHA is that it still “supports” the victim, while maintaining the message that HIV/AIDS is not a risk to Christian people. Moltmann reiterates throughout his work that Christianity is a hope for the hopeless (1975, 57). It is not a case of “us” compassionately hoping for “them”, but instead “they” are the Centre, the focus of the Christian discourse, and “we” are the periphery.

There are further forms of “Othered compassion” that can be seen in the public discourse of HIV/AIDS, for example the Christian focus on “AIDS Orphans”. Increasingly, it is being recognized that the church’s focus on HIV/AIDS orphans could, in part, be driven by its greater comfort in dealing with “innocent victims” - rather than all Christian (and non-Christian) people who have contracted the disease through uncomfortably sexual means. The same can be said for the consistent focus on narratives of women who have received HIV/AIDS from their husbands. This points to a targeted “compassionate hope” rather than an all-inclusive discourse, a learned hope that embraces the negative. We pray for the poor and the needy, the downtrodden, the vulnerable and people living with HIV/AIDS, but we are not praying for “those of us” with HIV/AIDS, or for “our” HIV/AIDS epidemic. Jantzen (1994) articulately pulls this argument together:

We are horrified by these things, and we should be. They are horrific. They are not to be romanticized or sentimentalized; and our revulsion to them should not be suppressed, lest we develop calluses around our souls...the question is not whether we feel fear and revulsion but what we do with it. I have suggested that what we must not do is deny those feelings, pretend they are not there, refuse to let the symptoms and suffering of fellow human beings bother us, or repress our fear at their mortality and ours...another common way of coping with our feelings of horror is to offer compassion at a distance...like St Francis, the church needs to stop holding its holy nose and take the men and women with AIDS and HIV into its arms and learn from them to see Christ (307-310).

Moltmann speaks of a “hope against hope”, where “in the midst of despair they were born again into living hope” (1975, 37). “Hope must therefore be sufficiently comprehensive

and profound. It must encompass happiness and pain, love and mourning, life and death if it is not to lead us into illusion” (ibid, 188). Therefore, it is necessary for Christians to embrace HIV/AIDS because of its themes of hopelessness and despair. In relation to the previous chapters, a Christian Hope would find as much “value” and “worth” in the hopelessness of the African AIDS Victim as in the dominant discourses of national hope – as it is only through unblinkingly embracing the negative elements of life that a Christian hope can be found. Moltmann argues that the theology of hope understands and experiences the negative and knows itself to be out of joint with the times, especially optimistic times (Meeks in Moltmann 1975, x). This means that a Christian hope, guided by Moltmann’s theology would have power to stand against discourses of national optimism that do not include HIV/AIDS.

In contrast, in the situation of a disheartened society, “Christian faith becomes ‘counting on hope’ and is demonstrated through freedom from panic and apathy, from escape and the death-wish. It then leads to courage to do what is necessary, resolutely and patiently” (Moltmann 1974, 335). Is it possible that a Christian discourse of hope has an effect on social apathy such as “compassion fatigue”? Moltmann continues, “...When we exorcise demons and feelings of impending doom. When people are set free from irrational fear, from the paralysis of anxiety, from escaping into fantasies, from the militant urge to destroy, then they find the courage resolutely and patiently to do what is necessary to break the vicious circles” (1975, 185). From this it seems possible that such a Christian discourse could work counter to the discourses of fear and sensationalism in the media – could act as a buffer to the effect of social apathy and compassion fatigue in its various forms.

Therefore, in the case of both discourses of hope and hopelessness in the context of HIV/AIDS in South Africa, a Christian discourse of hope may have unique potential to “see” more clearly, hope more inclusively, and move those of faith beyond apathy to action.

5.2 A political theology: hope involved in the social and political

Hope becomes practical if it grasps today the real possibilities in order to repel spheres of the negative, of evil and suffering. In league with the real possibilities which are at hand in the world, hope must become militant and take sides with life against death, peace against war, and the poor and oppressed against their oppressors (Moltmann 1975, 27).

A further central point of Moltmann's theology is the insistence that a Christian Hope cannot merely be a "poetry of feelings", but must be a political theology, involved in social and political issues, with practical and pragmatic effects (1972, 104).

It is true that the 'gospel of peace' (Eph. 6:15) creates the hope of faith, but nowadays we must learn how to put this hope into action on earth. We have to stop using the traditional abstract language of God's peace, language which does nothing for anyone, and speak concretely of peace while doing something to overcome poverty, violence, and the destruction of life. To put hope into action, we must interpret the gospel of peace politically (Moltmann 1975, 172).

There are various examples of Christian hope being spoken of in the context of HIV/AIDS in abstract religious language, but not leading to pragmatic action or structural change. This is opposite to those Christian discourses of hope that directly produce images of the future, such as the example given in the previous chapter of the promise for a generation free from AIDS (see 4.2.2).

What Moltmann's theology of hope implies is that Christians must involve themselves in the issues of society, and not hold themselves apart from it. This is therefore a "requirement" of the Christian faith and its discourse of hope, and it goes against the (modern) separation between church and society – or where progressive Christians involve themselves in class and racial struggles separately from their religious observance. A discourse of hope that demands political and social involvement has a clear potential to act as a bridge between the discourses of hope and hopelessness from chapter 3. That is, to live in hope demands you see the hopeless in the world and act towards the correction of social injustice.

5.3 A transformative and liberatory hope

According to the inner dialectic of Christian hope, ultimately the rich do not save the poor, but, on the contrary, the poor may save the rich (Moltmann 1975,116).

From the above, it is clear that Moltmann's theology of hope is essentially transformative and liberatory. In fact, he perceives Christianity and its founding text the Bible as fundamentally revolutionary. "If we begin to read the Bible as the book of God's hope, then we will find that it is a highly revolutionary and subversive book. The hope about which it speaks is valid for the hopeless and not for the optimists" (1975, 46). We will consider a few of the most relevant aspects of this transformative hope.

5.3.1 Simultaneous multidimensional action is required

In Moltmann's perspective, the liberation of human oppression (through hope) requires the transformation of power and values. In the context of HIV/AIDS this is not a new or unique concept. For example, in 1988, the PANOS institute was already calling for social, economic and political change as the primary response necessary to control HIV/AIDS (Sabatier 1988, 5). However, there is a further aspect of Moltmann's theology, namely that such transformation needs to be waged simultaneously on five fronts: against racial and sexual alienation, economic exploitation, political oppression and the destruction of nature. He suggests that working exclusively within any one dehumanizing dimension may actually increase oppression or exploitation in another dimension (Meeks 1975, xiv-xv). As Moltmann says, "it is necessary to speak of 'liberations' in the plural and to advance the processes of liberation in several dimensions of oppression at the same time...liberation must be sought in all these five dimensions simultaneously in every specific situation. Anyone who falls short here is courting death. Anyone who becomes too abstract and general here will achieve nothing" (1974, 329-336).

Consider the following long extract from an article in the *Southern Anglican* written by Archbishop Njongonkulu Ndungane:

The reality is that when the church separates the sacred from ‘the real world’ it fails God and the people it serves. It is when the Church disassociates itself from the hurly-burly of life that injustice and oppression and abuse prevail. It is how holocaust, apartheid and war flourish...Prophetic ministry is the calling not simply to insist on anti-retroviral drugs for people living with AIDS, but also to monitor that the government is keeping its promises. It is the calling to inform politicians that there is no such thing as a holy war. It is the calling for us to respond to issues such as same sex marriage, abuse, corruption and family values. We dare not ignore unjust economic systems, the negative aspects of globalisation and important health issues. We must work towards preservation of our eco-systems and national resources...My greatest fear is that the church’s greatest temptation in our present political oasis will be to withdraw into a holy huddle. *Aluta continua* – the struggle continues! (June 2004a, 26).

In the first four lines of this newsletter, the reader can see the political theology discussed above. Here the Christian reader is compelled to involve his or herself in the “real” of society. Each of Moltmann’s five areas of oppression are mentioned, and involvement in HIV/AIDS is included in all these issues, which must be taken up simultaneously as “prophetic ministry”.

What makes this call for simultaneous transformation so important is that it speaks directly to what was previously called the overwhelming nature of the HIV/AIDS multiplex crisis, which seems to affect (and be affected by) every aspect of society (see 2.1.1). In this respect Moltmann’s theology of hope can be seen as a discourse capable of imagining and demanding simultaneous action rather than be overwhelmed by it; of not falling into the trap of narrow focus on one aspect of HIV/AIDS, and leaving “the rest” to someone else. Conradie (2004) speaks of the need for something like a “rainbow alliance” in which literally all sectors of the South African society from various perspectives and persuasions (red, green, brown, purple) will have to be involved in the fight against HIV/AIDS. In this respect, a Christian discourse of hope, guided by the demands of Moltmann’s theology, could therefore have a unique ability to motivate this “rainbow alliance” and keep it from being overwhelmed.

5.3.2 Real economic transformation

Moltmann therefore suggests that the only way out of the vicious circles we are caught in is to work hard for social justice. In pragmatic terms he sees this to mean the redistribution of economic power. “What is needed is not aid to developing countries but social justice. ‘Feed the starving’ is necessary, but only during the transition to a more just world economic system. Christians are called on not only to show love but to have faith” (Moltmann 1975, 181).

This appears a simple enough point that has been made by many academics and activists calling for social change. However, it also speaks to the compassionate hope as discussed earlier. In many cases, the call for Christian hope sometimes becomes a call for Christian charity. The concept of charity has been problematised by various theorists. For example, Poppendieck calls charity the abandonment of our hopes for the elimination of poverty, and Gustav Gutierrez demands that the poverty of the poor is not a call to generous relief action, but a demand that we go and build a different social order (both in Farmer 2003,153). In *The Pedagogy of the Oppressed*, Paulo Freire (1993) observes that charity is a form of oppression where an unjust social order is the permanent fount of this “generosity” which is nourished by death, despair and poverty. Freire sees true generosity as fighting to destroy the causes that nourish false charity. Jantzen (1994) observes,

The recipients of the charity, while perhaps having to accept it out of their necessity, are diminished in their humanity by it, forced to receive condescension, to accept the role of victim...as for us as givers of such charity, we are isolated not only from those who suffer but from our own humanity as well by such refusal to encounter disease and death...distance ourselves from learning about the dignity and courage, humour and hope available to those who use their illness to discover their meaning and their worth (397).

Moltmann’s theology problematises any charitable hope that does not have intentions towards real economic transformation.

Moltmann therefore calls for a political hermeneutics which “sets out to recognise the social and economic influences on theological institutions and languages, in order to bring

their liberating content into the political dimension and to make them relevant towards really freeing men from their misery in certain vicious circles” (1974, 318). Therefore a discourse of hope from this tradition would be self-aware and conscious of the effects of power and constructed representation as has been seen to be important in previous chapters. “For only he can plan the future who already has the power to bring it about. All plans and models of the future must take into account the power constellations of the present and then extrapolate the future desired by the controlling powers...the future is different from the present only if it begins by changing the present” (Moltmann 1972, 91).

5.4 Imaginative force

(Hope is) not an opium of the masses but an imaginative force that can give power to the 'will to change' (Moltmann 1975,24).

Another central characteristic of Moltmann's theology of hope, is that here, hope is an imaginative force. What this means in the context of the HIV/AIDS epidemic, is that a Christian discourse of hope could potentially give the space and motivation to the creation of a social imaginary that includes HIV/AIDS. If you can imagine a thing, you can work towards such a future. White (1990) observes, “because of its evocative functions, emotion discourse is especially relevant for theories of social action. To talk about or express emotion in context is to expect to evoke a certain type of response in both the self and the listening other” (64). In the context of Moltmann's theology, hope, as an emotive discourse, has imaginative force to encourage social action.

However, there are some important codicils to this understanding of hope as an imaginative force. Firstly, it is essential that everyone have the same opportunity and power to define their future for themselves. A society that does not do this becomes a closed society and “together with hope it kills humanity” (Moltmann 1975, 29). What this means in developmental terms is that this Christian discourse of hope must be a participatory process, and not the church prescribing its hopes onto its members. Tracing this back to the previous chapters, it is important that PLWHA are given the space to define their own hopes and social imaginary, instead of being silenced by what the

dominant discourse believes they should be feeling. In fact, according to Moltmann's theology, the focus of Christian hope is "not simply the open future, but the future of the hopeless" (1975, 118). The hopes of the hopeless become more important than those of the dominant discourses of hope. "Hope for a new and different future is possible only among the suffering and the oppressed. Genuine future thus always focuses on the negativity of the present" (Moltmann 1972, 91). An asset of such a Christian hope could therefore be that value is given to the hopes of the Other.

Moltmann continues and points out that it is not enough to only improve social and political conditions, but "men must also be aroused out of their inner apathy and be encouraged to become self-reliant" (1972, 5). That is, they must be encouraged to use their own imaginative force rather than have another's imposed on them through charity and compassion. What this all requires is "intersubjective communication" (see Habermas in Romm 1996), or what Freire calls "dialogic action" – where through cooperation, unity for liberation, organisation and cultural synthesis, people are allowed to express their "humanness" in the struggle for humanization (see Freire 1993, De Gruchy 2003).

Not only is such a hope participatory but it is also inclusive, and does not position itself as better or apart from other discourses of hope, but works within them. As Ackermann says of Moltmann, "this is not a narrow hope – one that offers comfort to Christians and lets the rest of humanity take care of themselves. It is hope for *all* of creation, for Israel, for the peoples of the world, for this earth and all that is in it" (2003, 81). "The churches can proclaim the universality of God's love for all men in Christ no longer by means of their own claim to absoluteness but only in open-minded dialogue and unreserved cooperation with groups which believe differently" (Moltmann 1975, 177). Linking to the previous chapters, this theology of hope is essentially a hope for all humankind, despite our differences. This can be seen where Moltmann engages with Dostoevsky, saying, "Everyone is guilty of everything. No one will be saved unless all are saved. Common suffering and solidarity in the negatives will liberate the world, will make it a human world and therefore God's world" (Moltmann 1975, 86).

Another potential asset of Christian hope of this kind is that it "can destroy the seeds of resignation which spring up in the course of social-political work and it can itself become a stimulus to creative imagination" (Moltmann 1975, 39). This is an important aspect as

many accounts of people working in the field of HIV/AIDS speak of burnout and feeling failure and loss of hope, finally retreat into resignation and apathy (see Ndungane 2004b). It would be valuable for future research to examine if Christian hope can give people working in the HIV/AIDS field a greater or lesser capacity to continue with their work. Moltmann calls his theology an “experiment of hope”. He says,

Hope does not guarantee that one will have only the wished-for experiences. Life in hope entails risk and leads one into danger and confirmation, disappointment and surprise... Those who finish things too easily and all those who think that they are already finished shrink before this experiment... the experiment of hope is neither a certain nor an easy way, but it is the way of life in the midst of death (1975, 188-189).

Such a Christian discourse of hope would therefore battle on despite moments of exhaustion and disappointment, and give imaginative force to those most in need of it.

5.5 Hopes beyond “the God of success” and “the apathetic man”

Personal interior transformation without change in socio-economic conditions is an idealistic illusion... change in conditions without personal transformation of the inner man is a materialistic illusion (Moltmann 1975, 6).

So far, we have focussed on the way the Theology of Hope speaks to the liberation and transformation of the Other. However, what makes this different (and potentially more powerful) from other discourses calling for development and social change is the way it is linked in with the transformation of the personal at the same time (see 4.2.3).

A paradox that has been mentioned throughout this thesis is how to bridge the gap between personal hopes (for national success and individual happiness) and the needs of those portrayed as hopeless. In terms of transformation, how can we work towards the economic transformation that would heal the environment in which HIV/AIDS thrives, if

our personal and national hopes (for Renaissance and development) are bound up in the very system that causes this oppression?

Moltmann addresses this from the perspective of the officially optimistic Western society that has built-in values of activity, success, profit and progress.

Whether we are conservative or revolutionary, whether we are satisfied with our society or want to transform it, we all believe at bottom in action and success. We are convinced that we can solve all problems through right programs and actions...we hate to admit and reflect upon what misery our optimism and our programs of action have inflicted upon other persons and upon nature...this one-sided orientation toward action and success, however, makes men inhuman and represses the other weaker and more sensitive side of life. From this perspective, those who suffer are sick; those who weep and mourn show no stamina...the suffering of others makes no impression on us. Love is no longer a passion, but only a sexual act (1975, 71).

The Christian who lives in hope is called not only to be a revolutionary with a desire to change society for Others, to “help” with HIV/AIDS from a humanitarian standpoint. He or she is also moved to engage with their own culpability and apathy as “people of action” through recognition of the suffering they cause. This means to look at the image of the Dlamini family and not only see HIV/AIDS as an epidemic event that needs to be handled, but also as a family who are in their position because of our/my/your actions and hopes. “Apathetic existence must be changed into its opposite: an existence of pathos leading to sympathy, sensitivity, and love” (ibid, 72). Moltmann’s Christian hope calls for a profound empathy with the Other that makes a mockery of such things as “compassion fatigue”. In this instance, personal transformation comes through serving the Other, “by serving the oppressed first, Christianity in truth serves all men. For, without the liberation of the poor, blacks, women, the sick, the aged, and those without hope, the others cannot become truly human, and humanity cannot attain to any community that deserves to be called human” (ibid, 177).

A hope of this kind is essentially self-effacing. Remember the inherent dangers of a national discourse of hope that sets individuals or the South African nation as different or

exceptional (see 3.4.1). Bayley (1999) observes, “AIDS threatens religion and religious people, for AIDS destroys more than just our immune defences. It threatens many of the defences religious people normally use to protect themselves from reality...Our (unauthorized) sense of virtue and being-set-apart is threatened or destroyed” (3). A Christian discourse of hope that is self-effacing can work against these dominant discourses of exceptionalism that endanger real cohesion and increase effects such as stigma or Othering.

For example, in a recent interview in the *Southern Anglican* magazine, Tutu was asked what has made the South African people so resilient and so forgiving. He replied that we must not forget about the people of Kenya and Zimbabwe who have also surprised the world by forgiving. He also then said that the TRC process showed that there were people on all sides who had remarkable generosity, “It is a gift, so we can’t boast. It is that, quite improbably, God holds us up as a beacon of hope. So in a sense it is that we are able to succeed not for self-aggrandizement, we are able to succeed for the sake of God’s world” (Tutu in Giljam 2004, 23).

5.6 Hope in the context of biomedicine and death

The medical struggle against sickness and premature death must not lead to repression of the awareness of human suffering or of the human art of dying and mourning (Moltmann 1975, 170).

The final point of Moltmann’s theology that we will consider here is its potential for use in the context of biomedicine and death. In chapter 3 we considered the ramifications of a dominant discourse of hope in the final triumph of biomedicine (see 3.4.3). A Christian discourse of hope does not automatically stand apart from this hope based on science and rationalism. As Moltmann says, theology here “is not only a religious symbolism of anxiety and hope, but also a political initiative in the conflicts of the present. It shares in and cooperates with the presence of the future in scientific progress and politico-ethical decisions” (1972, 91).

However, Moltmann does problematise some of these hopes arising from the faith in biomedical progress. He argues,

Based on these hopes, concrete visions have been projected, partly from irony, partly from foolishness: 1) the conquest of virus and other infectious diseases gives rise to the vision of a germ-free world, 2) the development of psychopharmacology is combined with the Utopia of a pain-free life, 3) the incipient technique of organ transplants leads to the idea of replaceable parts of the body and a life without end, and 4) modern eugenics intimates the control and acceleration of the evolution of mankind. It is combined with the vision that ‘in the future man will create better generations of man...the more human interests and hope are fulfilled by biomedical progress, the more the ethical motivations are broken down which propel that progress. People no longer know what they mean when they say ‘I’, or ‘my body’ or ‘life’ or ‘death’ (1972, 94-96).

It is important for the church to engage with these “biomedical” hopes rather than leave them to run “naturally” alongside discourses of Christian hope in HIV/AIDS. An interesting example comes from an advert in the June 2004 issue of the *Southern Anglican*.²⁶ This advert was a double page advertorial titled “The Amazing Story of David Mullins” and propounded the “miraculous” effects of this natural supplement in increasing the CD4-count (and “life”) of AIDS patient, David Mullins. What was particularly interesting about this advert was how, in the nature of such advertorials, it was laid out and written to look like the real articles in the rest of the magazine rather than obviously an advertisement. According to the law, such adverts must have the word “advert” or “advertorial” on clear display so as not to mislead the reader. Unfortunately, the editors of this Christian magazine had layout problems that week, and the word (I assume to be) “advertorial” was accidentally printed in black over the black and green background of the picture of David Mullins (in his cycling outfit) – which makes it extremely difficult to see. Furthermore, what could be seen of this word had been cut off by the picture border. This all sounds a bit facetious, but the point remains that such a text of miraculous hope through a natural supplement, appearing as an article and not an advert, gains further

²⁶ The same issue in which previous quotes were extracted – where Ndungane spoke of a prophetic mission to insist on ARVs to PLWHA

authority by its position in a mainstream Christian magazine. Whether it desires to be or not, the church is engaged with discourses of hope in medicine and science in the context of HIV/AIDS. It is important that it does so in a more conscious fashion.

5.6.1 A theology of hope and death

Hope is only hope in full-frontal recognition of the face of death – Jürgen Moltmann (1975).

In examining responses to the question “Do you know anyone who has died of AIDS”, it appeared that respondents did not consider death to be a health state but rather a religious one...by excluding deaths you effectively have a survivor bias – ASRU researcher on the impact of HAART (2004).

Finally, this thesis cannot come to any conclusion without first attempting to tackle the issue of death in the public context of HIV/AIDS. My discomfort in doing so highlights a similar discomfort in the public media where death is portrayed as another paradox of HIV/AIDS, where death is both everywhere, and nowhere.

For the readers who are sensitized to stories of HIV/AIDS or live in communities where people are regularly dying of HIV/AIDS, death is everywhere. The challenge here, says Bishop Rubin Phillip, the co-ordinating bishop for the HIV/AIDS response in the Anglican church, is to offer hope in a context that is “crowded with images of death” (in Paterson 2000, 14). Here the challenge is to find hope in face of this despair. Paterson says, “perhaps what we need...is some serious thinking about a theology of death, some work on liturgies to bring hope in the context of death, a concerted effort to find spiritual responses to the fatalism that prevents people from looking to their own futures with hope, and stops them seeing the value of looking after themselves” (ibid). This is the eschatological area in which this thesis does not have the capacity to engage properly. However, to round off this brief discussion, Conradie points out that “the Christian hope for the resurrection of the dead is essentially a hope in Godself...this comes to fruition in the hope that in death we will meet not nothingness but Someone” and “the challenge for

Christian theology in a world where millions are dying is ‘to give an account of the hope that lives in us’ (1 Peter 3:15) – if indeed this hope may be found to be still alive” (2004, 20).

Paradoxically to this apathy caused by visions of death, there is again the case of an audience that does not “see” death, in the same way they do not see HIV/AIDS. While death may be on the nightly news, this is usually as a sensational break from the norm or social order (see Baderoon 2003, 320). “We” are rarely compelled to engage with our own deaths, and death and mourning are popularly out the public sight. HIV/AIDS, Othered as it is, fits well into this paradigm. Moltmann observes (emphasis his),

Before *physical death* reaches them, many aged and sick people already suffer a *social death*, because no one any longer takes notice of them and relationships to them are broken off... What kind of mourning can really still be experienced publicly?... But if the contact with death, if the contact with the dying, if mourning in which the experience of death is inwardly worked through, if these are repressed, are we not then in the midst of a tremendous repression? And if this is so, then the consequence of such a repression is assuredly a growing apathy and a continually deepening inability to love...” (1975, 168).

This apathy and indifference can be seen in national discourses of hope that exclude HIV/AIDS and PLWHA. While there are certainly cultural differences in the way people deal with death, the public media rarely takes on this challenge of showing hope through death. As Ndungane says,

Secular, and secularised society has a problem with death. We have distanced ourselves from it as a normal, integral, part of human life. But the Church, the body of Christ, is in the business of life and death. Christians must help recapture the concept of a ‘good death’, a ‘perfect end’. As the litany says, ‘from dying unprepared, good Lord, deliver us.’ To die at peace is one of the greatest gifts anyone can have (2004b, 7).

Previously it was mentioned that PLWHA are “killed” by the media before they actually die. In this way, and by not fully confronting death and mourning in our society, we are further Othering the lived experience of PLWHA from the public discourse of hope, and

as Moltmann says, we are taking from the dying one his dignity as a person, “he is then regarded as only a hopeless case” (1975, 168).

The challenge for those living in Christian hope, and the potential for the Christian discourse of hope, is to acknowledge death, and to open the narratological space for a multitude of stories of life, hope, death and mourning. Sontag notes that death is as much a construction in the public discourse as is disease and epidemics, and AIDS is perceived as a “hard death” which increases its metaphorical power. “Being deadly is not in itself enough to produce terror. It is not even necessary, as in the puzzling case of leprosy, perhaps the most stigmatized of all diseases, although rarely fatal and extremely difficult to transmit...the most terrifying illnesses are those perceived not just as lethal but as dehumanizing, literally so” (1991, 125). The churches have a long history of aiding people in a time of death, and of enacting rituals and forms to engage with the idea of death. It is therefore possible that a Christian discourse of hope can more properly engage with death than public discourse of hope has thus far been able. The final chapter of this mini-thesis will seek to pull these threads together, and suggest a way forward for future research. This chapter will conclude with a final passage from Moltmann that speaks to what we are trying to do:

Can we learn to hope? I think we can...we have to go *out* to learn hope...we learn to hope when we say yes to the future. That sounds very simple, but in the diverse circumstances of life it is very difficult indeed. We experience the power of hope when we have to fight against our apathy of soul. We sense it is keeping us alive if, when the outlook is somber, we say ‘nevertheless’, and dare life. Even if the future of humanity and the earth looks dark, to hope means to live and survive, and to work and fight for the life of creation...Today we are foundering on our indifference...true hope isn’t blind. It is only the mystical hope for the redemption of the inner world of the soul that keeps its eyes shut...the messianic for the new world looks into the future with its eyes wide open. We do what we have to do whether we succeed or not (1997, 39-40).

Chapter 6. Conclusion and the way forward

I am not optimistic, but I have hope – Beyers Naude (1994).

This broad exploratory study began with conflicting “feelings” of hope and hopelessness. The discussion that developed from this has brushed over a variety of aspects of “hope” and society in the context of HIV/AIDS and has attempted to pull this together into a transdisciplinary, coherent whole. Fundamentally what has been shown is that “hope” can no longer remain a term used naturally or obliviously in every text relating to HIV/AIDS. Hope in HIV/AIDS is socially constructed and fully entangled in discourses of power and representation. It is also a nexus of both our difference and our sameness with each other. It is therefore essential to treat hope with caution as it carries a heavy load of “assumption” in the public space - it is not “obviously positive” and requires careful research if it is to be wielded in the battle against HIV/AIDS.

It has also been shown that there is a dangerous chasm between discourses and images of national hope and HIV/AIDS. In effect, this places HIV/AIDS and those people living with HIV/AIDS “outside” and Other to the national hopes for the future. What we are in need of is a “semantic shock” to bring HIV/AIDS into the social imaginary, to challenge the public to bring HIV/AIDS into contact with their private and national hopes. In chapters 4 and 5, it was shown that in a variety of ways, a Christian discourse of hope has the potential to act as a bridge between these discourses of hope and HIV/AIDS.

However, this study has also shown various areas that would require future research to take this argument further. The primary one is the extension of this research to a local and individual level. We may talk of public discourse, but at the same time our own argument undercuts itself and shows that while dominant discourses may be powerful and have real effects in society, such an analysis does not reveal hidden transcripts that may be working against these structures of power. For example, we do not know the inner hopes, dreams and coping strategies the Dlamini family may be utilising. We do not even know if they may be “using” the Victim label to their own purposes.

Furthermore, further study is needed if we are to begin to understand the cultural variations and nuances of discourses of hope at local levels - that is, we would need to

seek out different “cultures” of hope. For example, it has been suggested that certain “African cultures” utilise feelings, emotions and imagination in a more conscious way which influences their form of knowing, and in turn has a great impact on their health decisions (Pearce 1993). This type of suggestion calls for further study of cultural forms of discourse, or the ethnopsychologies of emotion within cultures and social institutions.

Another angle of looking at hope in the context of HIV/AIDS would be to address it in a historical manner. For example, there are increasing studies of the increase in public fear in America (see Abu-Lughod and Lutz 1990), as they are moved up and down on the defcon scale after the terrorist attacks on the World Trade Centre, and are increasingly subject to a “culture of fear”. It would be interesting to review the themes of this study in relation to South Africa’s level of public hope (optimism or confidence) through its historical evolution, and how this has affected our reaction to HIV/AIDS.

The research with the most immediate value to the HIV/AIDS context however, would be to examine how public discourses of hope and hopelessness have effects on PLWHA as well as those who believe themselves to be negative. For example, how public media messages of hope might (or might not) be influencing people to be tested, how “at risk” they perceive themselves to be, how Other HIV/AIDS is to their hopeful social imaginary. Why are some people able to blank out HIV/AIDS entirely, and others are overwhelmed by it? How do discourses of hope interact and interfere with HIV/AIDS programs of prevention, treatment and care?

Finally, another area of research would be to examine these issues specifically in the context of religious groups and bodies. How do different religions and localised versions of Christianity interact differently with hope? How do they influence the decisions and interpretations of individuals and congregations? Can such a philosophical discourse of hope really have pragmatic effects, and what would they be?

In conclusion, a carefully treated philosophy of hope can have powerful effects in the context of HIV/AIDS. Essentially, though, focussing on hope allows us to treat HIV/AIDS as a challenge rather than a calamity or threat, as an opportunity for us all to create a social imaginary that is more inclusive and less harmful. Hope gives us the imaginative power to

work towards a future in which HIV/AIDS is our African Renaissance, effecting change across the spectrum of entrenched social problems and injustices. Here, hope is not utopian or optimistic, but is the knowledge that we, as a community, are engaged with a long-term and complex struggle, and still be inspired to go forward.

This thesis ends with a prayer that Eleanor Roosevelt was said to frequently repeat during the drafting of the Declaration of Human Rights in 1948,

Keep us at tasks too hard...Make us sure of the good we cannot see...Save us from ourselves and show us a vision of the world made new.

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