

GIA 6144: Topics in Global Governance: Political Geography of AIDS

Audience

This seminar is intended for PhD students.

Background

AIDS marks a major discontinuity in the natural history of humankind. In rich countries it erupted as a challenge to the belief that, due to the capacities of medicine and the healthy circumstances of modern life, infectious diseases were in inexorable decline. In some poor countries, particularly those in Africa south of the Sahara, AIDS reversed the longevity gains achieved since the 1950s and indeed in many places wiped them out altogether. There is a distinct geography to the evolution of the pandemic.

AIDS, then, was a shock disease. AIDS was a crisis generating intensive societal self-examination. The impact of AIDS, then, was (and is) demographic, scientific, cultural, and social. These impacts and responses were filtered and animated by cultural and political contexts. In this sense, there is a distinct geography to the responses to the pandemic.

These geographies of impact and response are profoundly political in nature; that is, they are shaped by (and in turn produce new) inequalities of power. This course examines these multiple political geographies of AIDS.

Syllabus

The course will consist of 15 weekly seminars organized as follows.

1. Making space for AIDS. The earliest reports of a new disease and why a geographical understanding was first deployed.
2. Challenges to 'Gay Plague' model. The accumulation of exceptions to the association of the new disease with a gay lifestyle. How these were either dismissed or accommodated.
3. Homophobia in the rich countries. The moral panic around AIDS will be discussed.
4. Racism in the rich countries. How racism contributed to the early invisibility of the epidemic among people of color.
5. The African origins debate. The ways that reports of the new disease in Africa were used to draw up a new global geography of vulnerability that drew upon pre-existing imaginary geographies of 'Darkest Africa'.
6. Global epidemiological models. The cultural and political purposes of epidemiological modeling will be discussed by reviewing the first three generations of epidemiological models developed by the WHO and associated institutions.
7. Risk behaviors versus risky identities. The relationship between behavior and identity in AIDS policies will be discussed by examining the problematic overlap between injecting drug users and various sexual identities.
8. Educate-and-include versus identify-and-separate I. The challenge posed to AIDS policies by the need to regulate behaviors that in many contexts were socially proscribed. In this seminar we will look at the challenge of extra-marital sex for AIDS policies both within and between nations, looking in particular at the history of PEPFAR
9. Educate-and-include versus identify and separate II. The regulation of sexual activity between men will be examined and cross-cultural comparisons made. The regulation of sexuality through space will be particularly emphasized through a discussion of the many intersections of the 'closet' with AIDS policies.

10. AIDS activism. The development of a new social movement around the medicalization of the epidemic and the need to resist some of the consequences of the way medical power was exercised upon the sick and potentially sick.
11. Cultural activism and AIDS politics I: Literature. I will examine the ways that cultural activism extended and at times qualified the campaigns of AIDS activists. I begin with works of literature: plays, novels, and poems
12. Cultural activism and AIDS politics II: Music. I will look at representations of AIDS in both popular and avant-garde music to show how both took up the political agendas of AIDS social movements
13. Cultural activism and AIDS politics III. Art. I will look at the visual arts, both photography and installations showing how the homophobia of earlier attacks on 'pornography' challenged the possibility of activist art.
14. AIDS drugs and the political economy of pharmaceuticals. The race to identify the virus and then to commercialize both testing and therapy produced a geography of access to prophylactics and treatments that continues to structure the geography of being able to stay alive across the world.
15. Designing new metaphors. We do need to make space for AIDS but the way that we do so has very important implications for the way we treat the people who are living with AIDS or who may be at risk of HIV infection. The class closes by asking if we can self-consciously design good metaphors by which to live.

Course texts

Barnett, Tony, and Whiteside, Alan. AIDS IN THE TWENTY-FIRST CENTURY. New York: Palgrave Macmillan, 2002. 432 pp.

Crimp, Douglas. MELANCHOLIA AND MORALISM: ESSAYS ON AIDS AND QUEER POLITICS. Cambridge: MIT Press, 2004. 330 pp.

Epstein, Helen. THE INVISIBLE CURE: WHY WE ARE LOSING THE FIGHT AGAINST AIDS IN AFRICA. New York: Picador, 2008. 352 pp.

Farmer, Paul. AIDS AND ACCUSATION: HAITI AND THE GEOGRAPHY OF BLAME. Berkeley: University of California Press, 1991. xiv + 338 pp.

Guibert, Hervé. TO THE FRIEND WHO DID NOT SAVE MY LIFE. New York: High Risk Books, 1994. 240 pp.

Kirp, David L., and Bayer, R. AIDS IN THE INDUSTRIALIZED DEMOCRACIES: PASSIONS, POLITICS, AND POLICIES. New Brunswick: Rutgers University Press, 1992. 408 pp.

Patton, Cindy. GLOBALIZING AIDS. Minneapolis: University of Minnesota Press, 2002. 192 pp.

Sontag, Susan. ILLNESS AS METAPHOR; AND, AIDS AND ITS METAPHORS. New York: Macmillan, 2001. 183 pp.

White, Edmund. THE FAREWELL SYMPHONY. New York: Vintage, 2001. 432 pp.

Student participation and assessment

Students will prepare a presentation of a reading one week in three. These preparations will be summaries that will be posted to the Scholar website for the class. These five presentations/summaries will each be graded out of a total 10%. In addition, students will have to prepare a course paper of no more than 3,000 words that will be marked to give the remaining 50% of the course grade. The course paper will be due on the day of the last class.