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## Special Issue: Framing "Post-AIDS" and Global Health Discourses in 2015 and Beyond

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By Eliza Williamson

The [Journal of Medical Humanities](#) has released a special issue, edited by Gráinne O'Connell, that "analyses the relevance, or possible critiques, of 'post-AIDS' rhetoric and global health discourses via interdisciplinary perspectives."

[Introduction: Framing 'Post-AIDS' and Global Health Discourses in 2015 and Beyond](#) (*open access*)

*Gráinne O'Connell*

This special issue, entitled "Post-AIDS' and Global Health Discourses: Interdisciplinary Perspectives,' emerged from a one day Medical Humanities symposium at the Leeds Centre for Medical Humanities, at the University of Leeds, England, on February 27th 2015. This special issue focusses on the perceived deprioritising of HIV and AIDS in the Sustainable Development Goals, or SDGs, that were launched in 2015. The SDGs function as policy benchmarks for all entities within the United Nations system and they supersede the Millennium Development Goals, or MDGs, which expired in 2015. As the word millennium indicates, the MDGs were launched in 2000 and 2015 was designated as the benchmark year when the successes and shortcomings of the MDGs would be critically assessed. One key difference between the MDGs and the SDGs, which D'Ambruso foregrounds (2013), is that the writing process underpinning the SDGs involved lengthy consultations, and feedback, with communities and health care practitioners around the world. By contrast, because the MDGs were mainly written by government officials, policy makers and health care practitioners without consulting wider communities, the processes underpinning the SDGs consultations are more inclusive than the MDGs. What is most critical about the SDGs for this special issue, however, is that they reflect a clear shift away from 'HIV exceptionalism' and towards what critics have described as 'post-AIDS' rhetoric, specifically when one compares the MDG health goal 6 and the SDG health goal 3.

[Temporal Dissonance: South African Historians and the 'Post-AIDS' Dilemma](#)

*Carla Tsampiras*

While foregrounding the historiography of HIV and AIDS in the South African context, this article analyses AIDS as simultaneously existing in three spheres: first, virtually – as the subject matter of electronically measurable research; second, academically – as a topic of research in the discipline of History; and third, actually – as a complex health concern and signifier that, via the field of Medical and Health Humanities, could allow for new collaborations between historians and others interested in understanding AIDS. Throughout, the central focus is the discipline of History and the global trends that become evident when examining metrics about AIDS research, particularly those that show the hierarchies of knowledge ‘production’, the reinforcement of disciplinary boundaries, and the discrepancy between the amount of research ‘produced’ by scientific and humanities disciplines. Overall, the article suggests that ‘post-AIDS’ is not currently helpful to health historians working on South African and other majority world contexts. More specifically, the article reflects on what AIDS histories still need to be written, and I argue that Medical and Health Humanities could provide a space for historians to work within and across disciplinary boundaries given the ever evolving remit of AIDS histories, temporalities, and narratives.

[Mono-Causal and Multi-Causal Theories of Disease: How to Think Virally and Socially about the Aetiology of AIDS](#) (*open access*)

*Katherine Furman*

In this paper, I utilise the tools of analytic philosophy to amalgamate mono-causal and multi-causal theories of disease. My aim is to better integrate viral and socio-economic explanations of AIDS in particular, and to consider how the perceived divide between mono-causal and multi-causal theories played a role in the tragedy of AIDS denialism in South Africa in the early 2000s. Currently, there is conceptual ambiguity surrounding the relationship between mono-causal and multi-causal theories in biomedicine and epidemiology. Mono-causal theories focus on single, typically microbial, sources of illness and are most concerned with infectious diseases. By contrast, multi-causal theories allow for multiple factors to underpin a disease’s aetiology, including socio-economic and behavioural factors, and they usually focus on chronic non-communicable diseases. However, if these theories are taken to be strictly distinct, this prevents the inclusion of both microbial and socio-economic factors in a single explanation of any particular disease. This strict distinction became a problem when trying to explain the disproportionate prevalence of AIDS in southern Africa and ultimately contributed to the tragedy of AIDS denialism in South Africa. In tandem with viewing how the perceived divide between multi-causal and mono-causal theories underpinned AIDS denialism, I examine Thabo Mbeki’s specific role, while acknowledging

that AIDS is being deprioritised on a broader international level. Overall, I will demonstrate that any long-term plan to eliminate AIDS will require viral and socio-economic factors to be considered simultaneously and that such a theoretical approach requires a clearer understanding of the underlying concepts of disease aetiology.

[HIV Stigma, Gay Identity, and Caste 'Untouchability': Metaphors of Abjection in \*My Brother...Nikhil\*, \*The Boyfriend\*, and "Gandu Bagicha"](#)

*Shamira A. Meghani*

In this article I read textual metaphors of 'untouchability' in 'post-AIDS' representation as an erasure of structures that condition HIV stigmatization in India. Throughout, my discussion is contextualised by the political economy of HIV and AIDS, which has been productive of particular modern sexual subjects. In the film *My Brother...Nikhil*, the stigmatization of Nikhil, a gay Indian man living with HIV, is constituted through visual and verbal caste metaphors, which draw on existing subject positions that are elided as 'traditional', residual, and receding. This stigma is resolved textually through parental acceptance of the gay protagonist and his partner, projecting stigma as traditional and modernity as the resolution. Such metaphors of 'untouchability' prevent the representation of queer Dalit subjects in contexts of HIV and AIDS. Yet if addressing shame and social stigma are key to HIV treatment and prevention programmes, caste cannot be set aside simply as a metaphor. Expanding to include textual representations of queer Dalit subjectivity, the article reads a novel, *The Boyfriend*, and a poem, "Gandu Bagicha," to show ways in which caste stigma and homophobia intersect in contexts of seroconversion risk.

[HIV and AIDS in Irish Theatre: Queer Masculinities, Punishment, and 'Post-AIDS' Culture](#)

*Cormac O'Brien*

This essay provides a critical survey of key Irish theatre productions that present queer men with HIV or AIDS as a central theme while also seeking to situate several of these productions within the controversial discourse of 'post-AIDS' as it plays out in Irish cultural and social discourses. Through this survey, this essay finds and critically elaborates how a discourse of AIDS as punishment is a common denominator in all of these plays; whether that be as a central metaphor in the drama or conversely as a trope that theatre makers seek to disrupt. Throughout, this essay simultaneously attends to the ways in which non-realist, non-linear dramatic structures (as opposed to social realist narratives) have proved to be better positioned to present the realities of living with HIV or dying with AIDS in Ireland since the emergence of the first Irish AIDS epidemic in 1982. By approaching 'post-AIDS' discourses through the lens of HIV

and AIDS in Irish theatre, this essay critically analyses the insidious ways in which 'post-AIDS' Irish culture is bound up with neoliberal discourses of homonormative assimilation and cultural respectability, especially the figuring of HIV/AIDS as punishment for non-assimilation.

[Problematising the Discourse of 'Post-AIDS'](#) (*open access*)

*Liz Walker*

This paper reflects on the meanings of 'post-AIDS' in the Global North and South. I bring together contemporary arguments to suggest that the notion of 'post-AIDS' is, at best, misplaced, not least because its starting point remains a biotechnical one. Drawing on aspects of the sub-Saharan African experience, this essay suggests that, despite significant shifts in access to antiretroviral therapy (ART), HIV continues to be fundamentally shaped by economic determinants and social and cultural practices. In this essay, I question the certainty of the discourse of (Western biomedical) 'positive progress' (Johnson et al. 2015), which underpins the 'post-AIDS' narrative, and suggest that living with HIV and AIDS in our contemporary global context is a life lived with ongoing complexity, stigma and chronicity. I suggest that HIV in the Global North shares many characteristics with HIV in the Global South yet differs in significant ways, not least in the fact that a resource-rich context generates an environment where health and social care support is possible, and, mostly, usual. In both contexts, however, the experience of living with a highly stigmatized illness with no cure in both the Global South and North suggests that this is a point of shared experience.

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