
Beyond Bare Life: AIDS, (Bio)Politics, and the Neoliberal Order

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It is impossible to contemplate the shape of late modern history—in Africa or elsewhere—without the polymorphous presence of HIV/AIDS, the signal pandemic of the global here and now. In retrospect, the timing of its onset was uncanny: the disease appeared like a memento mori in a world high on the hype of Reaganomics, deregulation, and the end of the Cold War. In its wake, even careful observers made medieval associations: “AIDS,” wrote Susan Sontag (1989: 122), “reinstates something like a premodern experience of illness,” a throwback to an era when sickness was, by its nature, immutable, mysterious, and fatal. Such reactions make plain how the genesis of the pandemic affected our very sense of history, imposing a chronotope of its own, a distinctly *unmodern* sense of fate unfolding, of implacable destiny. By unsettling scientific certainties, AIDS also prefigured an ironic, postmodern future. As Sontag intuited, it marked an epochal shift, not merely in the almost omnipotent status of medical knowledge and its sanitized language of suffering, nor even in the relationship with death, so long banished from the concerns of those preoccupied with life and their seemingly limitless capacity to control it. AIDS also casts a premodern pall over the emancipated pleasures, the amoral, free-wheeling desires that animated advanced consumer societies. And, as is often the case when Western self-images of reasoned control face homegrown disruption, the disease was deflected onto Africa as primal other, Africa as an icon of dangerous desire, Africa as the projection of a self never fully tamable.

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In more ways than one, then, AIDS represented the return of the repressed, the suppressed, the oppressed. Soon overwhelming the received limits of virology and immunology—indeed, of the restricted lexicon of bioscience *sui generis*—it set off an avalanche of mythmaking. There have been those in the tradition of Nietzsche (1910: 77) who insist that modernity has banished such mythmaking, that it has condemned us to pain without meaning. In our day, says Jean-Luc Nancy (1997: 149), suffering is “no longer sacrificial.” Our bodies are broken and repaired, but “there is nothing to say.” There certainly has not been a shortage of things to say about AIDS. On the contrary, AIDS has sparked a veritable plague of images: what Paula A. Treichler (1988) memorably termed an “epidemic of signification.” Striking the unstable landscape of the late twentieth century like a “lightening bolt” (Nancy 1997: 146), it cut a swath at once awesome and absolute, marking out the path of economic and environmental changes that sped the evolution and transmission of new viruses across and within species (Davis 2005: 55). In the process, it signaled emerging biopolitical insecurities: unrecognizable aliens capable of disrupting existing immunities, penetrating once-secure boundaries at a time of deregulated exchange. In the West, the disease prefigured a novel order of post-Cold War terrors: of protean, deterritorialized invaders who hijack our defenses and threaten to coexist with us in a deadly symbiosis that sets off rapidly mutating, mimetic forms of violence and counterviolence. In short, it is a process that W. J. T. Mitchell (forthcoming) has called the “cloning of terror.”

As all this suggests, AIDS has been rewriting the global geopolitical coordinates within which we think and act. We may lack the nerve or imagination to theorize it adequately, but it has certainly been theorizing us for quite a while. “It doesn’t matter if you are HIV-positive or negative,” insists South Africa activist Adam Levin (2004: 226), “the world has AIDS. And if you give a shit about the world, you have it too.” The threatening mutability of the disease challenges efforts to impose stable categories of recognition and exclusion in an already disrupted late-modern geography. The pandemic is savagely cosmopolitan, making blatant the existence of dynamic, translocal intimacies across received lines of segregation, difference, and propriety. But it has also revived old specters, marking out pathologized publics and crystallizing latent contradictions and anxieties. And, in so doing, it has exacerbated existing economic and moral divides on an ever more planetary scale. Coming as it did at the time of a radical restructuring of the axes of a bipolar world, of the liberal-democratic nation-state and the workings of capitalism itself, the disease served as both a sign and a vector of a global order-in-formation—and with it, a new sense of the nature and possibilities of the political.

Here again, the timing has not been coincidental. It scarcely needs saying anymore that as states around the world set about outsourcing key aspects of governance, withdrawing from a politics of redistribution, the grand disciplinary institutions of the modern state have shrunk, or that the task of social reproduction—of schooling, healing, law enforcement, frail care—has been ceded to ever more complex public-private collaborations, to volunteer workers and more or less viable communities under the sway of corporatized regimes of expert knowledge. If “family values” are the all-purpose glue meant to ensure social and moral reproduction under these conditions, AIDS has been read as a quintessential sign of all that imperils a civilized future-in-the-world, an iconic social pathology. In its primal association with non-normative sexuality, AIDS also lends itself to a language of revelation and retribution, evoking strong emotions that, at least in the West, suggest barely repressed anxieties about sexual subjectivity and desire at a time of profound upheaval in gendered relations of power and production (Butler 1997: 27).

Also in play in all this is the uncertain issue of citizenship. Here too AIDS has figured as a standardized nightmare (Wilson 1951). Across the world, as nation-states disengage from the regulation of processes of production, the political subject is defined less as a patriotic producer, *homo faber*, than as a consumer of services; the state, reciprocally, is expected to superintend service-delivery, security, and the conditions of healthy, untrammelled commerce. With the erosion, if not the erasure, of social categories rooted in nation, territory, and class, identity vests ever more crucially in individual bodies: bodies defined as objects of biological nature and subjects of commodified desire. Would-be statesmen represent the predicament of contemporary governance as a Herculean battle to balance minimal government with maximum personal safety and self-realization, their rhetoric focusing centrally on the quality of life, understood in simultaneously moral and material terms. AIDS embodies, all too literally, core contradictions at issue in such discourse. For some, its onset made plain the dangers of laissez-faire and a drastic reduction of the reach of the polis—the erosion of institutions of public health, for example, in the name of corporate science (Brazier 1989). But such critical, social reflection, at least in the global North, has been overpowered by another process already noted: a projection of the dystopic implications of neoliberalism onto the victims themselves. Thus it is that the archetype of the homosexual AIDS sufferer became the specter of a world driven by desire sans moral commitment. The hysteria that erupted in the United States with the first awareness of the epidemic made plain how central is the register of sexual “perversion” to the neoconservative imagination (Berlant 1997). This is an imagina-

tion that strives to reduce expansive vocabularies of politics, social debate, and intimacy to a straightjacket of absolute oppositions: nature and abomination, truth and deception, good and evil.

Ever more assertively, sex is seen, for good and ill, to hold the key to life. It is a fetish, attributed with a decisive agency all its own. Much has been written about this, of course. Here I wish to emphasize the way in which sexuality instantiates the dark underside of the commodity form and the world it makes possible: transaction cut free from moral regulation and social constraint, manifest in the perversion of responsible reproduction and of the putatively wholesome appetites that animate market-driven sociality. Indeed, an older politics of class and ideological struggle is being widely displaced by what Simon Watney (1990: 100) has termed a “politics of intense moral purity,” the sort of politics made evident in the disproportionate, disfiguring part played by gay marriage in the 2004 U.S. election. Just how pervasive is this politics of perversion? A liturgy of seamy evidence springs readily to mind. For example, a recent report revealed that in the 1990s the U.S. Air Force’s Wright Laboratory proposed to develop an “aphrodisiac” chemical weapon to deliver a “non-lethal blow to the morale of enemy troops by provoking homosexual behavior among them.”¹ In a reflection on the film *Brokeback Mountain* and the Abu Ghraib debacle, Jesse Kornbluth (2006) asks why it is that “gay sex [is] unacceptable within our borders, but ideal to export to foreign torture chambers.” Fresh pictures from Abu Ghraib, he notes, confirm a systematic effort to attack Islamic values—in terms that often mimic what he dubs “S&M” gay porn. “Our interrogators strip the Iraqis of their heterosexual masculinity, then force them to reenact somebody’s idea of gay scenarios.” As in Abu Ghraib, so also in Guantanamo: there, too, rituals of dehumanization have acted out homegrown, homoerotic traumas that cannot be resolved or be satisfactorily cathected (White 2005). Like many features of the new imperialism, this effort to project depraved sexuality onto others—while our own forces engage in a depraved sexualization of warfare—revisits technologies of an earlier colonial era. The enduring consequences of that history are writ large in the contemporary politics of HIV/AIDS in Africa.

But I am running ahead of myself. My broad concern here is how, and with what consequences, HIV/AIDS is implicated in the world-altering processes that have reshaped the late-twentieth-century international order: how it has played a

1. “U.S. Military Gives ‘Make Love, Not War’ New Meaning,” *Cape Times*, January 17, 2005. See also “Pentagon Reveals Rejected Chemical Weapons,” *New Scientist*, January 15, 2005, www.newscientist.com/article.ns?id=mg18524823.800.

role in the redefinition of our moral geography and sense of biosecurity, in the rise of new kinds of political subjectivity and sociality, the emergence of new configurations of integration and exclusion, prosperity and immiseration.

Exporting the Pandemic: AIDS Goes South

In the two and a half decades since HIV/AIDS was identified, therapeutic advances have rendered the condition manageable. As South African “actorvист” Pieter-Dirk Uys (2005) has put it, it is now a “life sentence . . . not a death sentence.” Or rather, it should be. In point of fact, the most devastating burden of suffering has shifted to parts of the world where, from the vantage of the privileged, misery is endemic, life is cheap, and people are disposable. As has often been noted, mass-mediated images of the disease have had a signal impact on late-twentieth-century Western constructions of third world peoples as abject, intractable, and doomed (cf. Treichler 1999: 210). Achille Mbembe and Sarah Nuttal (2004: 348) suggest, in respect to Africa, that these images exceed even the archetypes of otherness implied in Said’s Orientalist paradigm. They are correct. Global geopolitics have produced new zones of exclusion in which alterity becomes highly relative. The Muslim terrorist might have emerged as the acme of opposition to American dominance in the post-Cold War world, but disease-ridden Africa epitomizes another otherness, a product less of an axis of evil than an axis of irrelevance. Bereft of its former strategic significance and unpromising to those in search of profitable commodity markets,² the continent disappears once more behind colonial images of nature red in tooth and claw. Once more it becomes a site for European philanthropy and adventurism. Once more it is depicted as a horrific exemplar of all that threatens the natural reproduction of life: mothers whose wombs incubate death, genocidal leaders who court dissident science, men who rape virgins—even babies—to rid themselves of infection, children bereft of innocence who are driven to preternatural sex and violence for profit.

These circulating discourses intersect in complex ways with HIV/AIDS as a lived reality in the postcolony. There, the condition is ever more crucial and contested—at once a sign, a source of sociality, a figuration of altered states of collective consciousness, and a vector of new senses of political possibility, entitlement, and democracy. For AIDS makes scandalously plain the human costs of economic and political marginalization, the limited impact of humanitarian intervention, the

2. Ironically, current evidence suggests that despite its endemic poverty, Africa remains a profitable site for direct Western investment (Comaroff and Comaroff 2006).

toll of an ever more monopolistic control over the means of life itself. In many African countries, HIV revivifies scarcely suppressed memories of the violence and medical neglect of times past, jibing with enduring legacies of scientific racism, material extraction, and technological dependency. Small wonder that the disease animates traumas which invert the phobias of the West: suspicions that it was inflicted on black populations by genocidal racists, by careless experimentation, by the CIA, or by drug companies and their craven local sidekicks.

Across Africa, moreover, standardized European nightmares play into a host of local anxieties and etiologies. Discourses of perversion and shame have been common, for instance. The spread of AIDS has spurred the vilification of homosexuality despite compelling evidence that its transmission here is predominantly heterosexual. It has also licensed the policing of other forms of sexuality not securely under the control of normative authority, hence the demonization of independent women, immigrants, and youth. As Neville Hoad (2005) notes of South Africa, the sexualized tropes of colonial racism continue to stalk the politics of HIV/AIDS, provoking official denial in the face of the “silencing phantasm of sexual respectability.” Studied refusal to acknowledge the pandemic by those in authority perpetuates the association of race, sex, and pathology. AIDS activists and educators struggle to break these associations and the conspiracies of suppression and displacement that perpetuate them. They aim to secure public places from which sufferers can claim their status in unambiguous terms. It is in light of this struggle that a small gesture made by Nelson Mandela took on enormous significance. In announcing that his sole surviving son had succumbed to the disease, he declared: “The only way of making [HIV/AIDS] appear a normal illness like TB or cancer is to come out and say that someone has died of [it]” (Gedye and Sapa 2005). Local commentators referred to this as their “‘Rock Hudson’ moment” (Uys 2005).

But the inaudibility of talk about AIDS is often less a matter of brute repression or secrecy than of complicated communicative practices in the context of radical uncertainty. Nuanced registers and indirect forms of speech flourish in a field haunted by the ubiquitous presence of the disease. For death is the unspoken referent around which much everyday signification has been reoriented. In South Africa, where one in five adults is said to be infected and some clinics report that nearly 40 percent of women between twenty-five and twenty-nine years are HIV positive,³ maintaining the ambiguity of one’s status, or the presence or absence of

3. “More AIDS in South Africa,” *IOL News*, July 11, 2005, www.int.iol.co.za/index.php?set_id=1&click_id=13&art_id=qw1121085722613S162.

the disease, can be an act of self-preservation, defiance, or resignation in the face of an apparently implacable fate. Adjectives such as *fat* or *thin*, *sharp* or *sluggish*, *sallow* or *pumped* prime the delicate labor of framing identities and broaching futures in the shadow of the pandemic. The work of sustaining the self in the face of AIDS also takes on a discernible spatiotemporal aspect. Frédéric Le Marcis (2004: 454) speaks of the distinctive map of Johannesburg drawn by sufferers as they traverse the city in search of care. Their journeys chart a metropolis partly visible, partly hidden from sight. In their tenacious quest for treatment, their ailing bodies are a place of meeting of the public and the private, the official and the unofficial, the said and the unsaid.

All this suggests that AIDS in Africa—as fetish or taboo, disputed truth or irreducible reality—has been *prolifically productive*. I use this last term in the manner of Marx and Foucault to imply that it has given birth to significant forms of sociality and signification, of enterprise and activism, both negative and positive. The pandemic has redrawn the parameters of existence, as intimate pleasures become mortal risks, as trust and fidelity are freighted with deadly salience and patterns of physical and cultural continuity are eroded in unprecedented ways, as entire generations are “stolen,” as children become mothers and schools become orphanages (Wines and LaFraniere 2004). Where adult workforces are depleted and domestic incomes dry up, new orders of dependency and debt, caring and custody, take shape. So do new etiologies, utopian vocabularies, and visions of apocalypse, all intensified by fears of human malevolence and witchcraft (Ashforth 2002). Such conditions breed desperate forms of inventiveness, representation, and enterprise. Vibrant expressive genres have sprung up around the pandemic; among them, the Body Maps project in which South African artists and activists commemorate those who, in the words of Ingrid de Kok (2004/2005), “die of love’s lesions.” But the impact of AIDS is also evident in the less elevated business of everyday exchange. The banal accoutrements of death jostle other domestic commodities on roadsides and in markets: coffins, wreaths, all manner of medicaments, sacrificial beasts. Communities struggle to find the time and place, and the ritual and financial means, to process the weight of mortality, thus to avoid the ultimate abjection of “bare death” (McNeil 1998). The prospect of being unable to dispatch the dead with due ceremony—to properly consign them to the ancestral world—marks the null point of social continuity, as threatening to an imagined future as is bare life in the present.

While it often unfixes received signs and practices, AIDS can also authorize strong new associations and visions of the common good. Those who embrace a politics of “positive” identity defy silence and invisibility by becoming emphatic

embodiments of the disease. Members of the South African Treatment Action Campaign (TAC) wear its declarative T-shirts like a uniform and take diagnostic indices as terms of person identification. They introduce themselves at support group meetings, for example, by announcing their CD4 T-cell counts and viral loads (Robins 2004a: 7). In these contexts, claiming positive identity can be tantamount to a conversion experience: quite literally, a path to salvation, since identification can bring access to medication and material support. A “positive” South African, a neophyte in an antiretroviral (ARV) program, put it thus: “I am like a born again. . . . It’s like committing yourself to life because the drugs are a life-time thing. ARVs are now my life” (Robins 2004a: 6). These testimonies redeploy the register of transmutation common in the Pentecostal churches that have burgeoned across the global south in neoliberal times, churches that have had ambivalent relations with AIDS movements. Rebirth through the disease likewise involves standardized formulas of self-declaration, a passage to new ontological certainty and transparency that claims to reverse the deceptions of prejudice, secrecy, and untruth. Like Susan Sontag (1989) in her vain effort to banish metaphor from representations of illness, AIDS activists often fetishize the language of science in their eagerness to limit the semantic resonance of discourse about the disease—although, as we shall see, they also struggle to reconnect popular science to a vocabulary of critical politics.⁴

The various forms of activism and enterprise, anger and argument, cooperation and conflict that have emerged in response to AIDS in Africa belie images of abjection. Not only have several countries—Burkina Faso, Senegal, and Uganda, for example—made an impact on rates of infection, the pandemic has also triggered energetic forms of mobilization, striving, and assertion among activists who, often in stark contrast to their counterparts in the West, aspire to extend themselves to a more general politics of life couched in the language of citizenship and global equity. To this end, AIDS activists have forged broad, heterogeneous alliances with international movements, nongovernmental organizations (NGOs), and private philanthropists as well as with various corporate entities acting in the name of conscience, public relations, or opposition to biotech monopolies. And they have pressed a range of national and transnational concerns—from entitlement to life-saving drugs and the rights of HIV-positive

4. Critics have accused TAC of downplaying the often severe side effects of ARV medication; activists in the United States, by contrast, have struggled to make drug companies acknowledge the complex consequences of treatment (Decoteau 2005: 14–15). Claims for the manageability of AIDS medication in South Africa must be seen in relation to the assertion by so-called denialists that ARVs are deadly poisons.

migrants, through the ethics of medical experimentation, to the legal and moral status of intellectual property. In an era when many Western intellectuals lament the “lasting eclipse” (Agamben 1998: 4) of politics as we know it and antiglobalization activists struggle to engage rapidly mutating, deterritorialized opponents, AIDS campaigners in Brazil, India, and South Africa have developed innovative repertoires of popular insurgency. Recuperating older idioms of mass struggle in light of contemporary aspirations, they infuse their current tactics with a novel understanding of the uses of law, media, and the agitprop arts, the better to come to grips with complex configurations of power within and beyond the state (cf. Farmer 2003). For example, João Biehl (2004: 111) claims that in Brazil professionals and activists have been especially adept at assembling techniques aimed at maximizing equity within the neoliberalizing state. The initiative, he argues, has emerged as one of the most viable sites for recrafting a vision of democratic politics and ethics. There are grounds to question some of the claims made for a politics of health citizenship, as we shall see: to ask whether the terms in which it articulates its concrete, biopolitical entitlements might hamper its broader goals. Yet it is undeniable that health activism in several parts of the south have proven particularly vexing to states seeking to reconcile the privatization of public services with constitutional empowerment, especially where governments struggle to assert sovereignty against the force of transnational markets and translocal organizations.

This has been very obvious in the heated battle in South Africa between AIDS activists and the African National Congress (ANC) regime. It could be argued (see Robins 2004b) that the movement in support of a constitutional right to ARVs—a movement centered on an alliance between the Treatment Action Campaign and *Médecins Sans Frontières*—has been uniquely capable of engaging the kind of public-private, local-translocal collaborations that comprise government in this day and age.⁵ The movement has managed to link its specific, biopolitical demands to the more capacious terms of enfranchisement enshrined in the Freedom Charter;⁶ TAC has adopted the songs and commemorative calendar of

5. Also active on the national scene is the National Association of People Living with HIV/AIDS (NAPWA), which, while not as internationally visible as TAC, organizes a network of support groups, the AIDS Law Project at the University of the Witwatersrand, and a string of local and translocal NGOs (see Le Marcis 2004; Robins 2004b).

6. This document, ratified in 1955 at the Congress of the People held at Kliptown, Soweto, was the benchmark of opposition during the years of apartheid rule. Its terms included demands for a multiracial, democratically elected government; equal opportunities; the nationalization of banks, mines, and heavy industries; and the redistribution of land. In 1956, 156 people involved in the creation and ratification of the Freedom Charter were charged with treason (see Worden 1994: 104).

the antiapartheid struggle (Robins 2004b: 667).⁷ Yet it also has a thoroughly neo-liberal appreciation of the sites and vehicles of extra-institutional, transnational politics, of the fact that corporate interest, no less than humanitarian empathy and guilt, can be mobilized to its cause in large part by playing on the productivity of media images.⁸ In addition, activists show a shrewd understanding of the degree to which politics itself has migrated to the domain of the law; thus their defiant “smuggling” of cheap generic drugs into a country that refused to provide them and their boldness in suing the government over its legal obligation to make ARVs available to all. As this suggests, the movement fully embraces a politics of shame and passion: *pace* Nancy, it fulsomely engages the rhetoric of sacrifice, even martyrdom, epitomized in the compelling figure of its leader, Zackie Achmat. In an unfolding drama broadcast across the nation, a visibly ailing Achmat refused to take ARVs (entreaties by the likes of Mandela notwithstanding) until the government in 2003 undertook to provide them for all in need.

The techniques of such mobilization imply their own limitations, of course, and AIDS activists in South Africa and elsewhere have faced many reverses. Still, their tactical creativity underlines the ever greater salience of health in the reciprocal engagement of rulers and subjects across the world. But why has the biomedical definition of *life* become so central a site of contestation where other kinds of populist politics—the politics of labor movements, for instance—seem to be eroding? Why is it that, in many places, access to medicine—rather than, say, jobs, clean air, or freedom from war—has come to epitomize citizenship, equity, and justice (Gross 1991; see also Petryna 2002; Biehl 2004)? How might this fact shed light on various theories about the shape of late modern politics—from those focused on the impact of liberalization to those preoccupied with the state of exception or the novel intersection of governmentality and sovereignty?

Life and Nothing But? *Homo Sacer* and the Politics of Salvation

It has become commonplace to reflect on the increasing centrality of biopolitics in our time. Hannah Arendt (1958: 320–21) long ago identified a preoccupation

7. Zackie Achmat, one of TAC’s founders and its most charismatic embodiment, affirms that the movement strives to structure its activities according to the old antiapartheid calendar of struggle; TAC organizes protest marches from St. George’s Cathedral to the Houses of Parliament in central Cape Town in mid-February, for example, marking the opening session of the year, as did protesters in the past (personal communication).

8. In an interview on Chicago Public Radio in April 2006, Achmat noted that TAC owed much to aggressive media techniques such as those laid out by ACT UP in its *AIDS DemoGraphics* (interview by Jerome McDonnell, *World View*, Chicago Public Radio, April 12, 2006).

in the modern world with what she termed the “immortality” of “life itself.” This fixation, she argued, was the consequence of a growing sense of individual mortality, giving rise to a compensatory concern with the “everlasting process of the species mankind.” Foucault (1978) famously linked the preoccupation with life to the birth of modernist politics. Agamben, almost as famously, takes this a critical step further. The “*production of a biopolitical body*,” he argues, “*is the original activity of sovereign power*” (1998: 6; original emphasis). Nor is this unique to our time: the secret of modern and archaic power alike is its capacity to control “bare life” by excluding it from a meaningful social existence. Bare life is thus paradoxically made part of the political by the very fact of its exclusion.

But what is distinctive about modern politics, for Agamben, is that it “knows no value . . . *other than life*” (1998: 10; emphasis added). To wit, bare life is simultaneously its object and its subject: the object of state enforcement, the subject of projects of democratic emancipation. As exception becomes the rule, a contradictory process manifests itself. A predisposition to human liberation and a tendency toward state fascism collapse into each other, rooting themselves in the same ground: the “new biopolitical body of humanity” (Agamben 1998: 9). This con/fusion drives the political history of the West, culminating in a polis in which an unprecedented capacity and concern to enhance life is rivaled only by the power to destroy it. As is well known, Agamben personifies this predicament in the enigmatic figure of *homo sacer*, one who “cannot be sacrificed and yet may be killed” (1998: 82). We are returned, here, to Nancy’s view that mortality is no longer sacramental—although Agamben is less concerned with the existential meaninglessness of modern existence than with the fact that it is at once sacred and scandalously dispensable.

More than one contemporary observer has seen the apotheosis of *homo sacer* in the Third World HIV/AIDS sufferer: a scarcely human being condemned, in an age of humanitarian empathy, to callous exclusion, to death without meaning or sacrificial value; a being left untreated in an era of pharmacological salvation (Biehl 2001; Kistner 2003). If, in Agamben’s words (1998: 84), “all men are potentially *homo sacri*” in relation to sovereign power, the immiserated AIDS sufferer would indeed appear to be the everyman of our time: there, but for grace of geographical chance, go we all. Yet as we have seen, the moral politics of AIDS belies these observations. It insists on making death sacrificial once more.

It is hardly surprising that in the world after 9/11—in which crisis and exception have become routine, in which the classical Weberian model of sovereign state legitimacy seems less and less credible—Agamben’s passionate provocations have proven compelling. He has been credited with, among other things,

“repoliticizing” Foucault (Kistner 2003: 152), thus to move political philosophy beyond mere metaphysics (Hansen and Stepputat 2005: 16).

It is largely for this reason that his perspective has appealed to those grappling with the political valence of HIV/AIDS. For Biehl (2001: 140), the communities of destitute, undocumented, mostly infected persons that have emerged in Brazil with the so-called Africanization of AIDS are zones of abandonment, zones populated by *homo sacri* who belong neither to the living nor the dead. Even as activists, NGOs, and the state collaborate to provide medication on a national scale, new lines of exclusion spring up to separate those worthy of salvation from those condemned to death camps. Biotechnology here thrives alongside structural violence. Jeffrey Kahn’s (2004) account of the detention of HIV-positive Haitian refugees at Guantanamo Bay in the 1980s makes a similar claim. Held by the U.S. Immigration and Naturalization Service without access to legal council, this population provides unnerving evidence to the ways in which early AIDS policy foreshadowed the politics of terror. For Kahn, this is a prime example of Agamben’s model of sovereignty: the power to banish and to disregard the law. Ulrike Kistner (2003: 135–36) argues that the same conception of sovereignty makes sense of the notorious South African “AIDS war,” enabling scholars to move beyond moral condemnation to more reasoned historical-critical analysis. The government stance on the disease is less “eccentric,” she suggests, than it is evidence of a shift in the generic nature of power. At issue is a “new role [for] the State in the arena of health and medicine,” one that reiterates classic notions of sovereignty as the control over life and death (3).

In each of these three instances, Agamben’s allegory—the act of sovereign exception, the purgatory of *homo sacer*—is used to show how modern government stages itself by dealing directly in the power over life: the power to exclude, to suspend law, to strip human existence of civic rights and social value. Agamben’s “historico-philosophical” argument is propelled by a number of forceful images. Chief among these is the “camp,” understood less as a historical fact than as a paradigm, as the “hidden matrix” against which normal, healthy political subjects come to be defined (Agamben 1989: 166).

But the very attraction of this mode of argumentation raises theoretical questions. For one thing, it moves by way of a very limited set of archetypes and metaphors—the ban as originary political act, the production of bare life as the threshold from nature to culture, the camp as hidden matrix—to which the making of all modern politics is reduced. For another, it hovers ambiguously between metaphysics and history. While this species of ambiguity can be highly suggestive, it can also, when applied literally to circumstances in the world, lead to

oversimplification; it blurs precisely what demands specification in the quest to plumb the shifting political significance of AIDS in contemporary Africa, for example. What is more, it is unclear what kind of historical justification Agamben might offer for his contention that naked life, life shorn of civic and political rights, has become the *sole* preoccupation of modern sovereignty; unclear in comparison with the views, say, of Arendt (1958), who links the mounting obsession with “life itself” to the decline of *homo faber*, of the civic-minded worker, turned inward by the privatizing thrust of capitalism. If, for Agamben, a fixation on biopolitics is the defining feature of modernity *tout court*, how are we to account for the struggles currently underway over the definition of life itself, over the ways that it is mediated, interpreted, abstracted, patented? These struggles are critical to understanding the power play that surrounds AIDS in Africa and elsewhere: power linked to the rise of the life sciences, for instance, whose engagement with biotechnology and capital have had a significant impact on the characterization of human existence and the control of its value—and on the shape of biopolitics. And just how useful, in confronting these issues, *is* the concept of bare life, spoken of in terms of pure subjection and gross biological being, meaningful only as a sign of sovereign power? The question is crucial if we are to take seriously Agamben’s own exhortation to engage in a politics that recuperates civic being.

More immediately, it is consequential if we are to make sense of the various ways in which HIV has been politicized and politics biologized. The stigmatizing rhetoric of the disease, especially in respect to “African AIDS” (Patton 1988), has all too often fed off the slippage between metaphysics and history, archetype and instance. And all too often the complicated local histories and sociologies of the disease are obscured by grand allegories of exclusion, crisis, and apocalypse. While the will to power or the effects of structural violence might significantly sever life from civic protection and social value, no act of sovereignty—save perhaps in the fantasies of philosophical absolutists or biological determinists—can actually alienate humans from entailment in webs of signs, relations, and affect. Darrell James Roodt’s movie *Yesterday* powerfully underscores this insight: an HIV-positive woman in rural KwaZulu-Natal, ostracized by her neighbors, builds a scrap-metal hospice in the bush for her husband who is dying of AIDS.⁹ Here, in a zone of exclusion and erasure, bare life asserts a stubborn connection to socially meaningful existence. In the face of the social death endured by many AIDS sufferers, the will to assert visibility, dignity, kinship, and attachment fuels the task of everyday survival. The insistence on positive life—life imbued with ordinary,

9. Directed by Darrell James Roodt, HBO 2004 (in isiZulu with English subtitles).

future-oriented expectations—is palpable in the forms of mobilization that press for recognition of the disease. So too, once more, is the rejection of bare death. Exclusion here is less a total exile from the law or social order than a dislocation between different moments and sites of its instantiation (see Bull 2004: 6).¹⁰

Which takes us back, briefly, to the three examples I introduced previously, those that use Agamben's insights to explore historically specific instances of the contemporary politicization of HIV/AIDS.

From Bare Life to Biocapital

While the stories of AIDS sufferers abandoned in Brazil or detained in Guantanamo Bay show how forcefully modern power can root itself in exclusion, this angle of vision yields only a partial understanding of the dialectics at play—and hence, the forms of politics at issue in each case. Such processes as orders of historical event hinge in no small part on the effects upon nation-states of neoliberal forces that undermine their capacities to control their economies and borders or to interpolate their citizens as members of participatory, rights-conferring polities. In sum, their *sovereignty*, in an older, modernist sense of the term. As noted by Bull (2004: 3), states have hardly ceased trying to maintain a monopoly over the means of violence. Nor are these efforts merely a matter of exercising legal suspension: as the likes of Walter Benjamin (1978) insist, even under the law, one's vulnerability can be awesome. The Brazilian example also makes plain that social exclusion nowadays has a good deal to do with the inability of governments to subject the workings of international capital to their own rules and regulations, above all, to control the pharmaceutical commodities and intellectual property that have become the elixir of life. In fact, in Latin America, the populist regimes that have come to power in many places on mandates explicitly critical of the impact of global neoliberalism have placed palpable stress on strengthening the nation-state as a way to temper such forces (Lomnitz 2006). What is more, evidence from around the world suggests that prolonged states of emergency (see Agrama 2005 on the Egyptian case, for instance) generate complex new politico-jural discourses that work the aporias between exception and the norms that states of emergency make visible by their absence. In neither the Brazilian nor the Haitian refugee cases are the politics that develop in their wake adequately captured by Agamben's idea of sovereignty—save at the level of metaphor.

10. This dislocation obtains even when exception becomes the rule and "crisis" arrangements become institutionalized (Agamben 2005: 9). Such situations say less about the suspension of law than about how law engages the forces of history.

However we wish to explain the abandonment of impoverished AIDS populations, especially in the global south, their exclusion, we have seen, is producing new political subjectivities and sources of mobilization: a fight for access to the means of survival that arises out of, and forges identities around, “politicized biology” (Biehl 2004: 122). While it might be argued that a politicized biology emerges from within the field of biopower, it seeks to objectify and contest significant effects of that power. If life itself has become the prime medium for exerting authority, it is also the stuff of collective action and aspiration: vide the various kinds of activism that have sprung up around the world to deal with HIV/AIDS, activism that insists on making visible the deleterious effect of exclusion on ailing bodies and beings.

Indeed, this counterbiopolitics is as much a product of governmentality — of the process by which organized power disperses itself throughout a body politic — as are the forms of rogue sovereignty (of lawless, “prerogatory” power) identified by Judith Butler (2004: 56). It makes plain that the dynamics at work in contemporary power relations, north and south, are more complex than is captured by the interplay of governmentality and sovereignty alone. Grassroots activists remain convinced that there is a discernable logic to such power relations, one that impacts directly on their immediate worlds. To be sure, disambiguating these relations — translating them into the languages of accountability, humanitarianism, rights, democratic process, and the like — is the primary work of such counterpolitics. Claims to entitlement based on suffering and injury are central here. Such claims could, and sometimes are, read as evidence of a politics of shroud waving and abjection, a politics of survival (bare life) at the lowest common denominator of social being. But, albeit at the risk of strategic reductionism, AIDS organizers have sought to build a coherent, critical social etiology, thus to forge a narrative of agents and effects, of calculating statesmen and captains of global industry, who personify control over the means of life and death. Just how this politics of strategic reduction takes place is brilliantly exemplified in a drama staged outside the high court in Pretoria in April 2001 during the hearing of a case brought by thirty-nine large drug companies against the South African government for breaching international trade rules to import generic drugs. Crystallizing a campaign that fired international public opinion and a worldwide network of supporters, activists donned large and lifelike cardboard masks of the CEOs of major pharmaceutical companies, each identified by name and corporate logo (Denny and Meek 2001). As the eerie, grinning visages were broadcast across the world, the companies, belatedly realizing the damage done to their public image, withdrew their suit (see fig. 1).



Figure 1 *The Guardian*
(London), April 19, 2001.
Photo by Juda Ngwenya/
Reuters

Such aspirations are not easily achieved, of course. The connective tissue that would give substance to political practice between an older conception of social movements and the romance of a defiant multitude seems as inchoate to would-be activists as it is to those who study them. What has recently been termed a *politics of citizenship* remains tethered to a liberal model of subject and social contract, and while movements like the Treatment Action Campaign have been able to use it to win significant collective rights, their victories have not been unequivocal. The Treatment Action Campaign, for one, has been accused—despite its affinities with a legacy of “mass action”—of individualizing AIDS, hence of failing to deal adequately with its “socio-politico-economic” roots and implications (Deco-

teau 2005: 15). But like others striving to define a “commons” amid the “detritus of empire” (Chari 2006: 3), AIDS organizers in the south build with what comes to hand, seeking to forge alliances and to experiment with cocktails of techniques designed to engage the shifting assemblage of national and transnational forces that appear to control access to the means of life.

As this suggests, a crucial feature of AIDS activism—at least in the global south—is that it focuses ever more overtly on “biocapital” (Rajan 2005: 21); that is, on the knowledge, patents, and systems of exchange and command that make the difference between life and death. For healing is increasingly vested not merely in corporate bioscience but in the drug as ur-commodity, liberated from regulation, even by the medical and caring professions. This returns us to the issues with which I began: the manner in which subjectivity, sexuality, pathology, and citizenship are inflected more and more tightly by the logic of the commodity in both its productive and dystopic forms. Drugs have come to embody ever more succinctly the means of life itself: the means to control qualities of body and mind and hence to subject them to the terms of the market. Pharmaceutical companies now aim to sell their products directly to the consumer (“Ask your doctor about Lipitor”); we are all interpolated incessantly as protopatients. No wonder access to medicaments is now the most contentious issue surrounding the World Trade Organization or that ARVs have become the key sacrament through which born-again sufferers are incorporated into cults of salvation. The independent hold of biotechnology and the pharma-industrial complex over significant dimensions of the life process makes them consequential forces in the operation of sovereignty in our world. Or so it emerges in the plainspeak of African AIDS politics: for example, the UN special envoy for HIV/AIDS to the continent reported in 2005 that while the use of triple-dose therapy in the West had cut the numbers of children with HIV practically to zero, in Africa only 10% of pregnant, infected women have access to the means of preventing mother-to-child transmission (Lewis 2005). Furthermore, there are still no dedicated pediatric ARVs on the market. The prevention of infant pain and death, the envoy added, seems insufficient an incentive to drug companies in a world in which some “children are . . . consigned to the coffins of history.”

It would seem that no account of biopolitics in the modern world, no notion of bare life, can neglect this imploding history of biocapital. It is integral to the ways in which the substance of human existence itself can be objectified, regulated, and struggled over. Many AIDS activists make plain that, if there is to be a redemptive politics of life, one that reconnects *homo sacer* to civic entitlement and ethical being, it must find innovative ways of contesting the monopoly over

the essence of vitality: hence the targeting of patents and intellectual property rights—and the bald rhetoric that equates life and profit. As conventional politics falters in the face of ever more elusive collaborations of wealth, power, and the law, such activism has sought to exploit the incoherences of the neoliberal order against it, finding productive footholds within the aporias of the market system. While it has hardly forced a capitulation on the part of governments and corporations, it has won some significant concessions.

This returns us to my third example, Kistner's account of the "politics of life" at stake in the South African "AIDS war." The notorious conflict over the disease waged between government—above all, President Thabo Mbeki—and the national AIDS movement would appear to constitute biopolitics at its most literal. Kistner (2003: 153) suggests that the effort to assert sovereignty enters directly into the dispensation of life and death; biomedical discourse becomes a critical affair of state—and not merely state but also nation. President Mbeki refuses to accept definitions of HIV/AIDS that characterize it as a sexually transmitted disease, arguing that these definitions perpetuate Western racist stereotypes—and the Euro-American propensity to use African bodies for experimentation and profit (Hoad 2005: 104). For Mbeki, AIDS marks the impact on African immune systems of the living legacies of imperialism. From this perspective, remedies lie less in costly or hazardous drugs, which prolong neocolonial dependency, than on the reversal of inequality; although it should be noted that the ANC in the past has supported domestic experimentation with an anti-AIDS drug, the notorious Virodene, and is presently fostering the establishment of pharmaceutical companies to follow India and Thailand in manufacturing cheap generics.

How useful is it, then, to see in this fractious history, as Kistner (2003: 152) does, "a new regime of bio-politics" that draws ever more directly on the control of bare life, a regime whose sovereignty relies increasingly on medical definitions than on the racial classification of governments past? Here again I would caution against too monolithic a conception of politics, too reified a conception of bare life, too shortsighted a view of the present. Colonial regimes also ruled by putting the lives of their subjects on the line: by separating them from the means of survival—economic viability, healthcare, civic rights—and by striving to reduce them to naked biological being under the sign of physical difference. There, too, banishment was never absolute. The colonized suffered as much through the exquisite exercise of the law as by its suspension.

I would argue that, while his regime is admirably postcolonial in many respects, Thabo Mbeki's stance on AIDS speaks less to a new mode of sovereignty than to the continuing impact of colonial ideologies that have tied life,

even at its most bioscientific, to racialized sexuality. Some AIDS dissidents reject the coital transmission of the disease because they see in it an accusation of black promiscuity. They remain doubtful that Western biological definitions can ever free themselves from stigmatizing determinations, that hegemonic science can ever escape imperial associations of perversion with race. This is why the dissidents' rhetoric sounds so uncomfortably similar to the writing of the colonial discourse theorists, on whom they draw. Those who oppose the "denialists" argue strongly for the possibilities of relatively independent scientific knowledge; as I have noted, the Treatment Action Campaign seeks to purify AIDS talk from the ravages of metaphor. But, while activist politics advocates the uses of a nonsexist, nonracist science (Robins 2004b), it also struggles against entrapment in a reductionist biology. Above all, it seeks to reconnect bioscience to a critical, redemptive sociology, dedicating itself to mass education about the social etiology of the disease, about drugs and the political-economy of their global distribution, about the constitutional entitlement of ordinary citizens to health. In short, to a politics that links a not-so-bare life to a more robust practice of citizenship (Robins 2004b: 670).

Conclusion

The singular productivity of AIDS, then, flows from its status as both a sign and a consequence of late modernity: of the promise and risks of new freedoms; of the unruly conflation of love and death; of personal recognition and species annihilation; of the incessant counterpoint of creation and destruction; and, to return to Agamben, of the paradoxical coexistence of inclusion and exclusion, human emancipation and inhuman neglect. But what AIDS also makes jarringly visible is that these conundrums are caught up in an ongoing dialectic, at once positive and negative, of history and power, capital and geopolitics. Thus the disease, like Hurricane Katrina or the burning *banlieus* of Paris, also lays bare the colonial frontiers etched across the ostensibly integrated landscape of our brave neo world. In the West, as among the more-than-equal everywhere, AIDS may have been brought to heal. It has slipped behind what John Pilger (2005) describes as the "one-way moral mirror" separating the secure from the indigent. But the AIDS activism I have described seeks to shatter that mirror, to break into our self-insulating, self-referential circuits of communication and concern. In the process, it reminds us of something we have all but forsaken: an unalienated sense of politics as a positive calling.

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