

AIDS and the Saviour Community

Pervasively Protecting a Moral Identity by Expelling the Immoral “Other”

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The world has yet to live up to the challenges presented by AIDS. The global discourse in support of eradicating the disease is strong, invoking voices from high-ranking government officials, celebrities and media campaigns. Without doubt there is strong interest to eradicate the disease. However, a counter-discourse also exists, one that is not as altruistic and that seeks to exploit certain facets of the disease in its favour. As the first health issue to be formally securitized by state governments and the United Nations, AIDS has crossed an ethical divide that some scholars argue is problematic.¹

This paper will focus on how AIDS is constructed and discussed within American national security discourse. It will argue that within the AIDS security discourse, there is a counter-discourse constructed by a “saviour community,” which has an agenda of protecting its self-proclaimed “pure” American identity. This community has prioritized AIDS as a security issue by naming it as a threat to national se-

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curity, in an attempt to stigmatize and expunge those with the disease from the American identity, and reconstitute the American identity in a pure form. Rather than using overt forms of discrimination, stigmatizing the “risk community” is an effective tactic to discredit and shame homosexuals, visible minorities, drug users, the poor, and sex workers. This paper argues that the tactics used by the saviour community in securitizing AIDS exemplify Michel Foucault’s concept of biopower. While this shift towards securitization is promoted as a promise to protect healthy citizens, embedded within this discourse is an attempt to secure a pure formulation of the American identity.

In the United States, health professionals have created a risk demographic for AIDS, and continue to target prevention programs to certain social groups. This is exhibited by the “HIV/AIDS Surveillance Report,” an in-depth statistical examination of HIV/AIDS transmissions, deaths and risk categories, conducted by the Center for Disease Control (CDC). According to the CDC’s report:

Tailoring HIV prevention programs to selected groups is based on an understanding of the distribution of risky behaviors in the population and the association between these risky behaviors and infection. For example, data on sexual behaviors and drug use have allowed the CDC to guide the planning, implementation, and evaluation of HIV prevention services to men who have sex with men (MSM) and injection drug users (IDUs).²

The risk demographic is expanded to include high-risk heterosexual behaviour, visible minorities, and the poor. Since its inception in the United States, AIDS has been associated with a particular social demographic.

The very use of the word “risk” connotes behaviours that are threatening to a population. Labeling the behaviour of a group as “risky” constructs a demographic aligning those with the disease and the stigma that is attached to it—victims of AIDS are seen to embody the negative characteristics of the risk community. This constructs a community of those labeled a part of the “risk demographic” (herein to be known as the risk community) to be “othered” out of the pure American identity.

Population provides the entry point to the concept of biopower. According to Foucault, the ability to create a “healthy” population—whether it is to create healthy workers or lessen the burden on the health care system—was a significant development of the institutions broadly understood as the state. Through a geneological lens, the series

of institutions that normalized practices of health and hygiene (such as hospitals, education programs, statistics gathering, etc.) reoriented the technology of discipline away from a physical, punishing mode towards one of normalizing. Emphasis was placed on a normative conception of the population mean; biopower is the set of techniques used to normalize a population and shape subjects.

Foucault links the development of biopower to the development of capitalism. He states that:

...Biopower was without question an indispensable element in the development of capitalism; the latter would not have been possible without the controlled insertion of bodies into the machinery of production and the adjustment of the phenomena of population to economic processes. But this was not all it required; it also needed the growth of both these factors, their reinforcement as well as their availability and docility; it had to have methods of power capable of optimizing forces, aptitudes, and life in general without at the same time making them more difficult to govern.³

The state and industrial capitalism developed together and were complicit in the development of biopower. The effects of biopower are felt throughout the social body, but are subtle enough not to feel repressive. Normalized, docile and complicit bodies make great citizens and workers.

The recently translated (2003) "Society Must Be Defended" lectures by Foucault offer a unique entry point/explanation for state control of populations. The lectures are situated during the period when Foucault was writing *Discipline and Punish* (1975) and *The History of Sexuality Volume One* (1976). What is unique about the lectures, and also the source of much criticism, is Foucault's contention that the modern state was built upon a foundation of war, its constitution coded in dried blood:

[P]olitical power does not begin when the war ends. The organization and juridical structure of power, of states, of monarchies, and societies, does not emerge when the clash of arms ceases. War has not been averted. War obviously presided over the birth of states: rights, peace and law were born in the blood of battles ... the law was born in burning towns and ravaged fields. It was born together with the famous innocents that died at break of day.⁴

Despite the seemingly civil and docile nature of the modern state, a war

is still being waged within its boundaries, albeit in a different, less pronounced form. According to Foucault, a "race war" is being waged within the state: "Conflicts—political, economic, juridical—were ... very simply articulated, coded, and transformed into a discourse ... which was that of the opposition of races."⁵

The race war requires some explanation. The term "race" is not used to describe a visible characteristic of some persons skin: rather, race is used to describe what is acceptable within society, what traits are desired; it describes the ideal characteristics of subjects within a governable territory. Tracing the development of modern Europe using examples of warring "races," such as the Normans and the Saxons, Foucault argues that the state is founded upon a series of discriminations that outline who is "in" and who is "out." When the Normans are in power, they want the Saxons out of the population, as they are the foreign enemy corrupting the proper Norman form of governance. Over time, this war is coded into constitutions of the state, becoming the legitimate juridico-political model.

Coding the race war into the constitution and practices of the institutions of the state pushes the war onto a different battleground, says Foucault: "We must defend society against all the biological perils of this other race, this sub-race, this contra-race which we are in the process of, in spite of ourselves, constituting."⁶ The normalizing institutions of the state provide the virtual battleground for the race war.

The race war is exemplified in the saviour community's treatment of AIDS. Through its positions of power in media, government and business, the saviour community has unequal access to linguistic and social resources. This access is used to deploy stigmatization as a discursive tool to control the behaviour of the population. In the case of AIDS, the saviour community has the task of controlling what they deem to be immoral, deviant or unsafe behaviour (such as drug use and "aberrant" sexuality) among less socialized and less stable demographics, e.g., the poor, ethnic and otherwise marginalized communities.

Robert Crawford links the saviour community, with its institutional, corporate and bureaucratic capacities, to Foucault's biopower:

As long as the dominant metaphors of health connote control, we lend our participation to a regime of disciplinary power and to the self-discipline on which it relies, to a self-regulating, contained selfhood that narrows our identities to that which is compatible with various institutional, corporate and bureaucratic agendas.⁷

Biopower is essential for maintaining order within the American iden-

tity, and the saviour community is entrusted with this power to construct and protect an American identity. Biopower delineates the boundaries of who is inside and who is outside. The counter-discourse disseminated by the saviour community seeks to construct a method of pushing the risk community to the outside.

As a result of the above, purity, seen to embody all of the characteristics of the ideal subject, is viewed by American citizens as something worthy for which to strive. Health is therefore constructed as a virtue within the American identity. According to Crawford, "the identity signified by HIV/AIDS comes to be seen as the other of this 'healthy' self: an 'unhealthy' other who is perceived not only as a physical danger, but as an equally threatening and dangerous identity."⁸ Health is used to negate the unhealthy "other," providing the dualism necessary for an inside. Unhealthy bodies are a threat to be feared by the general population. AIDS encapsulates this fear; it has the ability to pollute the healthy inside, destroying the healthy identity necessary for the functioning of the workforce.

The saviour community carved the parameters of a pure identity using a discourse of morality. Morality is deemed legitimate by the saviour community and has boundaries so that it is possible to demarcate who is on the inside and who is on the outside. The saviour community uses this discourse to set security priorities to ensure that the population continues to function within the economy. What the saviour community seeks to expel is what is discursively constructed as corrupting, impure, dirty, subversive, or what Susan Sontag terms a "tainted community."⁹

The construction of a "tainted community" is the subject of the book *AIDS and Its Metaphors*, in which Sontag compares the AIDS discourse to that of other diseases, especially "licentious" ones such as syphilis. Much like AIDS, syphilis was viewed as punishment for individual transgressions, the consequence of straying from a moral code. Explicating the moral aspect of diseases, Sontag says that "AIDS is understood in a pre-modern way, as a disease incurred by people both as individuals and as members of a 'risk group'—that neutral sounding, bureaucratic category which also revives the archaic idea of a tainted community that illness has judged."¹⁰ Judgment is grounded in moral terms despite its supposed neutrality. Although the tainted community exists within the boundaries of the American state, its expulsion from the American *identity* is punishment for engaging in behaviour outside the discursive boundaries delineated by the saviour community.

Discourse serves as a useful practice for the saviour community; however, it alone is not enough to exclude the other. In order to pre-

serve its identity on the inside, the saviour community must also mobilize a defense against potential invaders. Drawing on Sontag's work on metaphors, Majid Rahnema states:

In societies, the need for protective cultural 'membranes' has equally been a major and constant concern, both for the community and for its constituent households. These socio-cultural membranes are constituted in order to distinguish the community or household member from the stranger, and to create, within the protective cell, the necessary conditions for everyone to participate in the shaping of their common values.¹¹

The metaphor of a societal membrane is essential to understand the boundary created to demarcate an inside and an outside of an identity. The saviour community acts as the protective membrane for the pure community. AIDS is viewed as an invader that must transcend the membrane in order to infect the host—though, interestingly, those afflicted with AIDS are implied not only in transcending, but also in constituting the membrane itself: the outside gives meaning to the inside, and reifies the boundary in between. Those with the disease, or identified as being within the risk community, are labeled by the saviour community as threats due to their potential to invade, infect and undermine the morally pure members of the American state.

That it is a choice to label a phenomenon as a threat means that security is an inherently normative claim. According to Robert B.J. Walker, "the forms of political realism that play such a crucial role in the legitimation of contemporary security policies affirm the way things should be far more clearly than they tell us how things are."¹² Purity fits this picture of political idealism. The saviour community has a vision of the way society should be, and seeks to force this image on the way society is. Walker elaborates: "[security claims] cannot be dissociated from even more basic claims about who we think we are and how we might act together," thus "modern accounts of security are precisely about subjectivity, subjection, and the conditions under which we have been constructed as subjects subject to subjection. They tell us who we must be. And they offer to tell us how we might stay this way."¹³ Because the saviour community enjoys unequal access to linguistic and social resources, it is able to construct a claim about identity, defining what the "we" is, and using its power to ensure that this identity remains secure.

Thus far, this paper has presented a theoretical basis for the forces and reasons behind a saviour community and its role of protecting identity by negating and excluding the tainted other. AIDS is em-

ployed as a tool to achieve this goal. It is prevalent within certain demographics that are not wanted on the inside. The saviour community is able to mobilize a purity discourse around AIDS, expelling the impure other embodied by those demographics. Issues of sexuality, class and race do not need to be publicly contested; instead, the saviour community is acting only to "protect" the general population from AIDS.

Providing evidence for the underlying racism, classism and sexism is not easy. There are no explicit statements within the AIDS discourse that directly and explicitly stigmatize the other. This could not occur publicly because it would challenge the socio-political shifts made during the twentieth century with regards to civil, sexual and social rights. Those rights will not easily be retracted now or in the foreseeable future. However, there is a point of entry that provides a concrete example of the saviour community protecting a pure identity. This point of entry is the neoconservative movement. The next section will argue that the saviour community most clearly reveals itself in the policies of the Reagan administration, guided by neoconservative and Straussian logic. Following that, the securitization of AIDS will be examined, alongside further evidence that a pure identity is being protected by AIDS policies within the United States.

Neoconservatism arose in late 1960s America as a reaction to what was viewed as misguided liberalism.¹⁴ Its adherents viewed the various movements of the era—such as civil rights for blacks, second wave feminism, anti-war protests, sexual freedom and increased drug use—as unraveling the American moral order. Writing in 1967, Daniel Patrick Moynihan, one of the founders of neoconservatism, says that "liberals must see more clearly that their essential interest is in the stability of the social order."¹⁵ The egalitarianism, moral relativism and historical determinism of that era were seen as weaknesses; liberal soft-line stances on these issues distorted the reality of the empirical world, as the neoconservatives saw it. Those who did not see this were encouraging a spiral into tyranny. The neoconservatives were concerned with the nihilism that was seemingly plaguing America, but saw the solution emanating from Straussian ideology.

Neoconservatism was largely the product of the students of Leo Strauss and Paul Wohlstetter. However, it was Strauss who was most concerned with domestic issues. According to Shadia Drury, "Strauss has given his students a totally extravagant faith in the capacity of the right thinking elite to determine the will of the people. The key is to use the most artful and most reliable techniques that history has made available. And in Strauss's view, nothing has ever proved to be more

effective than religion."¹⁶ Although the use of religion may have some positive influence in domestic affairs, it can also cause turmoil, as Drury notes: "It is also the case that religious fervor often turns political and even militant. Religious groups are not always satisfied with the religious freedom that liberal society affords them They are interested in imposing their vision of private morality on the rest of society."¹⁷ Neoconservatives employed religion to ensure morality in America. Rather than confront the advancement that liberals had made in the sixties and seventies, a confrontation that would surely be political suicide, the neoconservatives aligned themselves with the religious right to achieve their goal of a morally ordered America.

To implement their Straussian philosophy, the neoconservatives needed to gain access to political office. Often occupying various secondary positions within government from the sixties onward, they eventually gained control of the Presidency with the election of Ronald Reagan in 1980. Reagan was the first President compelled to deal with AIDS. Neoconservatives were able to construct AIDS as a morality issue, discursively stigmatizing those with the disease, expelling them from the morally ordered American identity. The head of Reagan's AIDS commission, James Watkins, said the following about the possibility given by AIDS to reorder American society:

We have an opportunity to restructure what a healthy lifestyle is about.... [T]oo often we assume a child in our society will be healthy.... [T]his may have been true years ago, but society is changing. One third of youngsters today are born into poverty. Now we are hardening an underclass and there is a strong overlay between that underclass and AIDS. It is mainly Hispanic and Black Americans. AIDS brings into focus a variety of flaws in our system [T]he job of educators then is to help people learn in a fundamental way about human biology and their own bodies so they can possess lifelong strategies for healthy wholesome lifestyles.¹⁸

Foucault's biopower is clearly present in this explicit statement about social control. In order to maintain a healthy population, the neoconservatives designed a method of assigning outsider status to people with AIDS or at risk of contracting it; those in the risk community therefore made easy targets for stigmatization. According to Emily Martin, "Watkins put it all together: the social control entailed in disseminating biological knowledge of the body; the fear and threat of AIDS, linked to 'flaws in our system,' among them homosexuals, people of color, and people living in poverty."¹⁹ The flaws within the system are flaws

within the identity, impure components that must be expelled in order to keep the machine functioning. These flaws act as a drag on the system and their expulsion would ensure a more efficient functioning of the American machine. The saviour community was able to capitalize on the emergence of AIDS and act immediately to stigmatize the constructed risk community. It was not only AIDS that was feared, but those people who were others, those who could potentially corrupt the health of the American order. Members within the continental United States, who were not members of its pure identity, became a demographic feared from within.

The general population in the United States began to see AIDS and the risk community as a threat. Robert Crawford unpacks this argument:

The anxiety provoked by the AIDS epidemic among the so-called 'general population' is not a fear of the epidemic 'breaking out' of the cultural and social ghettos in which it is, at present, largely contained; it is also about preserving the social self, it is structured in domination. The fear occasioned by this disease and its epidemic character is simultaneously a fear of destabilization of the tenuous relations of identity—*both within and between*—by which self is insulated from other. At stake in the AIDS epidemic is a 'spoiling' of identity, a fluidity that dissolves 'immunity'—the ability to distinguish self from non-self. Therein lies its perverse utility: AIDS provides a 'natural alibi for the strengthening of defenses against dangerous identities—against sexualities, addictions, vulnerabilities and the unsafe meanings that threaten from within and without the boundaries of legitimate self-hood.²⁰

Stigma is a discursive act that can only be understood in relation to broader notions of power and domination. The perverse utility of AIDS is reflected by its ability to cast outside of the American identity those viewed as a threat or danger to those on the inside. Stigma plays a key role in producing and reproducing relationships of power and control, and is central to the constitution of the social order.²¹ This leads to identifiable social actors (such as the neoconservatives, or more broadly, the saviour community) seeking to legitimate their own dominant status within structures of social inequality.²² Stigmatization as a discursive act is used as a tool to ensure that those perceived as being in a risk group, i.e., those with the disease, are unable to have membership on the inside.

The neoconservatives have not disappeared. They are still

prominent within think tanks, the media and the Republican Party. One legacy of the Reagan years was that this particular section of the saviour community stigmatized the risk community. It was not until Bill Clinton's presidency that AIDS officially entered national security discourse.

In April of 2000, Clinton officially declared AIDS to be a threat to United States national security, a policy that remains intact today.²³ This was the first time that a disease had been constructed as a threat to US national security. Thus, a discursive shift occurred on the issue, from its official perception as merely important to its construction as a tangible threat. This shift also served to militarize the stigmatization of the risk community. According to Gwyn Prins:

During the past twenty years there has often been an uneasy relationship between the claim that an issue is important and the claim that it is a 'security issue.' That is because the political benefits of making the latter claim are high, but so too are the costs. If an issue can be 'securitized,' it is the equivalent of playing a trump at cards, for at once it leapfrogs other issues in priority. But the unavoidable cost of this is, first, that to obtain that priority, people must be persuaded to be afraid of the threat, and to see it as a 'clear and present danger;' and second, that it throws the solution into the hands of state—or state-derived and mediated—structures, for they alone command the resources to meet the meet the scale and the urgency of the 'securitized' threat, once it is accepted as such.²⁴

The implications of the above statement are crucial for understanding AIDS as a contingently constructed, exogenous threat.

AIDS has a contingent nature because as a danger or a threat, it only exists in an inter-subjective realm of discourse. Its meaning must be constructed. According to David Campbell, labeling danger is an act of interpretation, such that once a phenomena is labeled as a danger it becomes so:

Modern societies contain a cornucopia of danger; indeed, there is such an abundance of risk that it is impossible to objectively know all that threatens us. Those events or factors that we identify as dangerous come to be ascribed as such only through an act of interpretation of their various dimensions of dangerousness. Moreover, that process of interpretation does not depend on the incidence of "objective" factors for its veracity. For example, HIV has been considered by many to be America's major public health issue, yet pneumonia and influenza, diabetes, suicide, and chronic liver disease

have all been responsible for more deaths.²⁵

In this view, declaring AIDS to be a threat to national security is an act of interpretation. Danger cannot be objectively qualified. Labeling a threat as dangerous is thus a political move, leading Colin Hay to conclude that "as soon as we move from the realm of mere description to that of explanation we move from the realm of science to that of interpretation. In this realm there are no privileged vantage points, merely the conflict between alternative narratives premised on different ontological, ethical and normative assumptions."²⁶ The decision to label AIDS as a threat is an interpretation by those with the power to construct security policy.

The construction of AIDS as a security threat is also contingent because it is based on a specific social definition of the disease, rather than a medical one. Pointing to AIDS as a single entity against which resources can be mobilized distorts the true character of the disease. According to Sontag:

That AIDS is not a single illness but a syndrome, consisting of a seemingly open-ended list of contributing or "presenting" illnesses which constitute (that is qualify the patient as having) the disease makes it more a product of definition or construction than even a complex, multiform illness like cancer. Indeed, the contention that AIDS is invariably fatal depends partly on what doctors decided to define as AIDS—and keep in reserve as distinct earlier stages of the disease. And this decision rests on a notion no less primitively metaphorical than that of a "full-blown" disease.²⁷

The definition of AIDS, however, is not discretely and narrowly defined within the general discourse, nor the security discourse in particular—but it has been constructed as such. Pointedly labeling a broadly constituted disease achieves a specific function, thereby questioning its ability to be an objective threat to national security. Under the guise of a legitimate biopolitics, the saviour community used scientific knowledge and warped it to reflect their interests of protecting the American identity. The second component to this discussion, AIDS as an exogenous threat, proves the validity of arguing for a pure inside identity, contrasted with an impure, foreign outside. Relating to the subjective nature of the disease discussed above, it must be noted that plague-like diseases are deemed to originate from outside the boundaries of the state, or emanating from the foreign. According to Sontag:

One feature of the usual script for plague: the disease invaria-

bly comes from somewhere else. The names for syphilis, when it began its epidemic sweep through Europe in the last decade of the fifteenth century, are an exemplary illustration of the need to make a dreaded disease foreign. It was the "French pox" to the English, *morbus Germanicus* to the Parisians, the Naples sickness to the Florentines, the Chinese disease to the Japanese. But what may seem like a joke about the inevitability of chauvinism reveals a more important truth: that there is a link between imagining disease and imagining foreignness.²⁸

The construction of AIDS as a threat links the disease to the outside. Although not highly contested within the West, in other regions of the world AIDS is not seen as coming from Africa. Some states, such as Russia, have even hypothesized that the disease originated in America; others have gone as far as to argue that the disease was introduced to Africa by Americans seeking to control the population.²⁹ Imagining the disease as foreign has important implications for its domestic interpretation. The location of the disease on the outside of the territorial boundaries of the US has the same effect on the risk community within its boundaries: they are seen as foreign, as othered, unable to really be within the pure identity of the US.

Naming AIDS as a threat to national security has several implications, as discussed above. Constructing the illness and guiding its meaning in a certain direction has an effect on how it is perceived by the public. The saviour community is able to mobilize a definition of AIDS that differs from other infectious illnesses, a distinction that is not needed and only serves to stigmatize certain unwanted members of American society. Giving the disease an origin outside the American boundary further connotes foreignness to the disease, and therefore to those most at risk, or those who have already contracted it. The purpose of constructing AIDS as a threat, as foreign, as dirty, achieves the aim of eliminating certain members of the American demographic from its pure identity. The proper functioning of society is secured by this elimination.

This paper did not argue that AIDS is not real, or that securitizing the disease is a deliberate attempt by governments and social conservatives to remove a "corrupting" force from the social body. What this paper sought to demonstrate was that a counter-discourse exists within the current AIDS discourse, and that the counter-discourse reveals a darker side of securitizing AIDS. The argument presented was not a call for AIDS to be desecuritized. The situation in sub-Saharan Africa is stark, with AIDS killing and infecting millions of people; the

scope of the devastating effects requires a securitized approach. Rather, this paper aimed to explore the interesting question of why one particular disease was deemed a threat over other, more prevalent diseases and illnesses. The intangible nature of discourse and identity allows significant room for interpretation. This paper is an invitation to further discuss the discourse of AIDS and security.

Notes

¹ See especially the works of Stephen Elbe: "The Futility of Protest? Biopower and Biopolitics in the Securitization of HIV/AIDS," ISA Convention, Montreal, Québec, 2004; and "Should HIV/AIDS Be Securitized? The Ethical Dilemmas of Linking HIV/AIDS and Security," *International Studies Quarterly* 50.1 (2006): 119-144.

² Centers for Disease Control and Prevention, *HIV/AIDS Surveillance Report, 2004*, vol. 16 (Atlanta: US Department of Health and Human Services, Centers for Disease Control and Prevention, 2005), [inclusive page numbers].

³ Michel Foucault, *The History of Sexuality: An Introduction (Volume 1)* (New York: Random House, 1990), 141.

⁴ Michel Foucault, *Society Must Be Defended: Lectures at the Collège de France, 1975-1976*, eds. Mauro Bertani and Alessandro Fontana, trans. David Macey (New York: Picador, 2003), 50.

⁵ *Ibid.*, 71.

⁶ *Ibid.*, 53.

⁷ Robert Crawford, "The Boundaries of the Self and the Unhealthy 'Other': Reflections on Health, Culture and AIDS," *Social Science and Medicine* 38.10 (1994): 1364.

⁸ *Ibid.*, 1348.

⁹ Susan Sontag, *AIDS and Its Metaphors* (Toronto: Collins, 1989).

¹⁰ *Ibid.*, 46.

¹¹ Majid Rahnema and Victoria Bawtree eds., *The Post-Development Reader* (Halifax: Fernwood Publishing, 1997), 113.

¹² Robert B.J. Walker, "The Subject of Security," in *Critical Security Studies*, eds. Keith Krause and Michael Williams (Minneapolis: University of Minnesota Press, 1997), 62.

¹³ *Ibid.*, 66; 71.

¹⁴ John Ehrman, *The Rise of Neoconservatism: Intellectuals and Foreign Affairs 1945-1994* (New Haven: Yale University Press, 1995), 33.

¹⁵ *Ibid.*, 37.

¹⁶ Shadia Drury, *Leo Strauss and the American Right* (New York: St. Martin's Press, 1999), 19.

¹⁷ *Ibid.*

¹⁸ Emily Martin, "The End of the Body?," *American Ethnologist* 19.1 (1992): 133.

¹⁹ Ibid.

²⁰ Crawford, 1349.

²¹ Ibid., 1359.

²² Ibid., 1358.

²³ Peter W. Singer, "AIDS and International Security," *Survival* 44.1 (2002): 145.

²⁴ Gwyn Prins, "AIDS and Global Security," *International Affairs* 80.5 (2004): 931.

²⁵ David Campbell, *Writing Security: United States Foreign Policy and the Politics of Identity*, rev. ed. (Minneapolis: University of Minnesota Press, 1998), 2.

²⁶ Colin Hay, *Political Analysis: A Critical Introduction* (New York: Palgrave, 2002), 88.

²⁷ Sontag, 28.

²⁸ Ibid., 47-48.

²⁹ Ibid., 52.