
Modification of Affective Ties and HIV Infection: A Sociological Study of the Spread of HIV Infection in African Societies

The Problem

These last decades are witnessing the appearance in the world of a deadly, complex virus. Its consequences on the population are beyond telling: thousands of people dead, infected, affected. The efforts summoned to curb the spread of the virus in the social fabric seem insignificant as compared with the enormity of the problem. In countries of the South, more than anywhere else, the death toll is unnerving. According to UNAIDS, 42 million people are living with HIV/AIDS in the world today. Five million of them contracted the virus in the course of last year. The epidemic continues to take a heavy toll on sub-Saharan Africa, with 29.4 million

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cases¹. With respect to Burkina Faso, from ten cases in 1986, official statistics² put the figure at 13,899 cases as of 30 June 1999, and today, the HIV prevalence rate is estimated at 7.17% of the general population (WHO/UNAIDS), that is, more than 370,000 people infected with HIV, about 7% of them being young adults from 15 to 40 years old... At this critical point in the spread of the scourge, it is, more than ever before, incumbent upon sociology to sound the best points of

view to understand the social determinants which underpin this phenomenon. Yet this subject continues to puzzle scholars.

In going through the extensive literature on the problem of AIDS in Africa, one is struck by the recurring question as to what scientific approach to adopt in the face of this research subject. From the epistemological standpoint, the demands of scientific rigour which lead to objectivization of objectivization (Bourdieu P. 1980) are still topical. Such objectivisation raises the question of commitment and distance in the face of social realities as recommended by Elias and echoed by Fassin in another field

(Fassin; D. 1999), and which have been highlighted innumerable times for anyone interested in scientific research. The sense of urgency prompted by the magnitude of the epidemic in Africa and, above all, the wholesale application of some conceptual, theoretical and methodological frameworks spawn in other lands or in other historical contexts – therefore, fraught with ideology – in the apprehension of social phenomena on African soil, contribute largely to weaken scientific contributions and, consequently, to actually underrate the importance of the dynamics of history in Africa.

And yet, this situation needs more attention. With regard to HIV infection, some analyses show that the uncontrolled spread of the epidemic is a product of African societies' irrational affective systems which, hastily considered as essentially ahistorical, are incapable of addressing present-day social challenges. Such analyses which are strongly influenced by the rigid paradigms of structural anthropology explain HIV infection in Africa in terms of the rigidity and immutability of some ancient cultural practices which are peculiar to some socio-ethnic groups. The substantialization of these ancient cultural practices quickly gave rise to explanatory couples such as "sexual promiscuity", "quatre H», etc., as factors of HIV infection (Van de Pierre et al. 1984, Serwadda et al. 1985; Grmek, 1989; Hardy, D., 1987; Caldwell, P. 1991, etc.). Similarly, the absence of the historical dimension in the analysis of social practices on African soil is present, to a certain extent, in the theories which explain the progression of HIV infection by the force of uncontrolled sexual urges. Not only does this supposition fail to take into account the historical dimension in the building up of sexuality, it equally takes sexual attraction as the only basis for relations between sexes.

These are the grounds for criticism of those scholars, for they make a fundamental methodological error which, basically, denies that the dynamics of history affect Africa in its own way. This amounts to saying that African social structures are static; that they do not evolve, and that even if they evolve, they cannot overcome the constraints imposed on them by strange "objects"³. This paper, which is a research project, advances a different explanation for the spread of HIV, which is seen as an outcome of the historical process of rebuilding African societies. Our first endeavour is to posit that in this major transformation (Polany,

K. 1983), human interdependence is modified. The idea will be to see in it the modification of sexual attraction and how such modification influences and rewards relations between the sexes. This approach requires that we define what we mean by emotional valences, that we understand their underpinnings and see how modifying these could help us to understand the phenomenon.

The first step is to refute the reduction of the relationship between the sexes to mere sexual valences. Common sense shows that the direct cause of transmission of the virus is sexual urges, and, by direct extrapolation, "sex". To our mind, this fallacy which is practically accepted as an absolute truth comes from the Freudian theory of child sexuality (Freud, S., 1962) which lays emphasis on the biological and desire-related aspect of sex. According to Freud, sex is the expression of a strong biological urge which the individual tries at all times to satisfy directly or indirectly, the only checks being the constraints, mostly external which society imposes on him. The pre-eminence given to the biological and erotic basis of sex is criticised by a good number of scientists (Bozon, M. and Leridon, H., 1993). For, sexual activity is neither natural nor biological; it is a social construct. Moreover, considering the bare sexual attraction, that is, singling them out, amounts to eliminating the influence of the entire affective system on the latter, thereby taking away the very means of understanding the historical development of sexual relations, which alone can explain the historical significance of sexuality and that of HIV infection.

Is it possible to isolate from the structure of sexual relations the determination of emotional structures in their entirety to retain only the effect of sexual urges? Is it not judicious to integrate them into the emotional structure in order to see how modifications of the whole affect them in a significant manner? We believe that by failing to adopt this approach, that is, by considering sexual attraction per se, we limit sexual relations to them and, by so doing, fail to grasp the influence of the entire emotional set-up. Sexual urges per se do not give enough answers to the analysis of sexual relations. We must seek to discover the importance of the dynamics of the affective system (in which sexual attraction is only one of the dimensions) for it is these dynamics that map out sexual relations to a considerable extent.

According to Leroi-Gourhan, such sexual attraction, which metamorphoses in the course of historical evolution, is to be found in all the depth of perceptions. Basically, he maintains, the idea is figuring out how a code of emotions gradually develops in time and space, which code gives the ethnic subject the purest form of affective integration in his society.⁴ This code of aesthetical emotions which is underpinned by ethnic memory and which draws from deep visceral and muscular feeling, skin sensations, the senses of smell, taste, hearing and sight, and finally, from the intellectual image which is a symbolic reflection of the sensory tissues in their entirety⁵, is shaped, in the course of time, not only by material experience, but by the capitalist principles of the market economy as well (Braudel, F., 1979; Marx, K., 1982) and these impose a perpetual reconfiguration or redefinition of sexual attraction. The resultant modification of ethnic memory, which can be clearly seen through the dialectics of individual experiences and mental structures (Bourdieu, P. 198), automatically brings about a modification of emotional behaviours. Then the latter, influenced by the perception of values, forms and rhythm, and which constitutes the framework of relations between the sexes, encounters the virus in the course of their manifestation: such is the historical dimension of the HIV infection.

However, if we admit that the infection is the outcome of the encounter of affective behaviour with the virus, what follows is for us to understand this "object" which is the virus, grasp its meaning, its performance force. In this respect, we should avoid considering the virus as being active in its own right. To define it methodologically as a singular object is to take away any active status from it. It should instead be seen as a function of For according to Elias, to understand representations, possible methods of definition or speeches individuals make on things, such things must lose the character of concept of action and become functional concepts (Elias, N. 1981). So, the "object" which is HIV, its method of action and manifestation and the speeches and representations which refer to it, take their meaning, their performance force from the transformation of human interdependences. Thus, from the infection through the etiology and the classification of symptoms to treatment and, above all the representations which refer to it, in a word, the "disease" phenomenon necessarily bears the traces

of human interdependence and historical social contradictions.

A second endeavour closely linked to the first is to state that even as the modification of emotional structures is going on, what Christian Falloix called the process of socialization is unfolding, that is, a mechanism which forever creates a belonging among things considered separate. We cannot overlook the fact that the control of sexual relations is more than a mere political challenge. This fundamental issue has always pitted in every society, the central authorities, the organs of state, against the social peripheral orders. But what is the real challenge, the basis of such opposition? If the immediate goal of this competition is to curb HIV infection as soon as possible, we think we are dealing here with the invention of a universal and acceptable vision of relations between the sexes, a modernity which is peculiar to African societies.

The depiction of African affective systems as being rigid and unable to cope with the emergencies of the day has led some analysts to explain the spread of HIV in terms of the inadequate efforts made by the state in the fight against the epidemic. Thus, the whole problem hinges on the drawing up of a multi-sector strategy to fight the epidemic, on the one hand, the strengthening of state standardization, on the other hand, and more specifically, regulatory initiative and involvement of civil society through community-based organizations⁶. Such thinking amounts to asserting the pre-eminence or efficiency of the state in the regulation of African social structures, whereas the regulatory role of the state so much advocated as legitimate means of fighting the epidemic leaves a lot to be desired.

It is widely accepted that the spread of the virus in African societies is disquieting. What is less well known is the failure of government action plans aimed at rolling back the scourge. Why this failure? We believe that, basically, the crisis of the initiatives put in place to fight the scourge reveal the torpor of education and socialization structures. One would be mistaken to think that the technical mechanisms (condoms, adverts, etc.) intended to change social behaviour will succeed just because they are technical. That is not the case. The technical factor is never neutral; it is interpreted socially. (Braudillard, J., 1968), for its integration in social relations takes

place, first and foremost, in a field of forces within which, as Serge Moscovici states, the object transforms and is transformed. He states that before entering the universe of an individual or a group, the object goes through a series of reconciliations with, and adjustments to, the other objects already present from which it borrows some properties and to which it adds its own. Becoming distinct and familiar, it transforms and is transformed... Indeed, it ceases to exist as such and is transformed into an equivalent of the objects (or notions) to which it is subjected through the relations and links established.⁷

However, this fight whose means and consequences are both the inculcation of the initiatives aimed at fighting the epidemic in customs and habits and the imposition of a universal and acceptable vision of relations between the sexes, continuously pits central forces against peripheral ones. This confrontation which is clearly seen through individual experiences, informs the body which is the seat of sexual attraction. The body being at the centre of social conflicts, the social determinants never influence it immediately by direct action on the biological order. They are relayed by the cultural order which re-configurates them and transforms them into rules, obligations, prohibitions, repulsions or desires, tastes or distastes.⁸ Accordingly, the representations as well as the practices which individuals come up with or make of their bodies and the bodies of others, that is, the way this body is used, bear the signs of these general social conflicts everywhere. This situation gives rise to links. For, even as the dynamics of the competition between antagonistic social orders unfold, new behavioural norms and relations between the sexes emerge.

Indeed, in the competition between the central authorities and those of the periphery played out through the federation of the latter to the "central civilisation," the affective systems of the individual are profoundly influenced. Most often, at this stage, prohibitions strengthened by social penalties are imposed on the individual in the form of self-restraint. The compulsory suppression of urges and desires and the sense of decency which surrounds them integrate at this point with habits which the human being cannot shun... There develops an internal conflict in his subconscious between the urges and desires which promise pleasure and the

prohibitions and restrictions pregnant with threats, the feelings of decency and social discomfort of social origin?⁹

Further, the invention of the modern code of social conduct, unstable and precarious in balance, which is the result of this historical process, first engulfs the dominant strata and then goes on to the broader and broader strata of the general social fabric. This modern code of social conduct which is always mutating finds its unstable and precarious balance in the fact that it bears the marks of historical level of separation of social orders and, above all, in the process of socialization as a mechanism which forever recreates belonging to entities considered separate. As Christian Falloix¹⁰ maintains, "social change is not just an affirmation of the separation, but that of the development, the conquest and reconquest of this uniqueness in the socialization process."

Thus, it is only through the interplay of the modification of emotional structures and the pivotal role of the socialization process in the unification of peripheral social systems to the "central civilization" that we can understand the spread of the HIV/AIDS epidemic in African societies. Without such a perspective, one cannot grasp African modernity as an ongoing process.

Methodology

Studying the spread of HIV in African societies is a daunting task. The complexity of the subject is evidenced by the difficulty in choosing an appropriate methodology. For the purposes of this survey, we think it will be futile to try to hem the phenomenon into one discipline. The idea here is rather to break down barriers between the various disciplines involved forthwith in order to efficiently tap into the contribution of each of them. Hence, in our approach to the subject, we have drawn from history, biology, physiology, psychoanalysis, anthropology and economics. The second point, which is closely related to the first, is the consideration that a study of the spread of HIV infection should take into account the long duration. This reference to historicity is fundamental for it is thanks to it that we will, through an analysis of the dialectics of personal experiences and social structures, chart out the progress, through time, of the transformation of affective systems influenced by material civilization and the capitalist principles of the market economy. This historicity which profoundly influences the body, the seat

of affective values in all their dimensions, reveals at all times, that is, at every moment in time, the historical movement of separation and unification of peripheral social orders from, and with, the central civilization. This historical movement or this civilization process which has left its imprint on the body and which can be analysed, inter alia, through the transformation of family and religious structures, fashion in clothing, bodily care and methods of use, etc., profoundly and differently affects sexual attraction and social categories, leading to the encounter with the virus and, by the same token, the infection. So the analysis, mindful of making effective use of the data collection techniques set forth below (that is their advantages and disadvantages according the demands of field survey), will strive to relate these affective manifestations to history, that is, to constantly changing social configurations.

Survey Population

The survey involves individuals and institutions chosen on the basis of research needs. It involves :

- State institutions such as the National AIDS Control Committee (Comité National de Lutte Contre le SIDA), the Ministries of Health, Women affairs, PROMOCO, etc. ;
- officials of associations and NGOs working in the areas of AIDS, women, the youth, etc. ;
- officials of religious institutions (pastors, imams, priests, animists, etc.) ;
- people infected with HIV as well as persons not infected, without distinction of category ;
- people whose occupation contributes to the invention and transformation of aesthetic codes (dressmakers, blacksmiths, joiners, etc.) ;

Data Collection Tools

Documentary Research

It will be very useful. The above-mentioned institutions have data which will be invaluable to us. Such data could be on the epidemic, its evolution, state initiatives to fight it, obstacles encountered, strategies implemented, prospects, etc. This official data will be relied upon and interpreted as and when appropriate.

Questionnaire

We used it with a view to gauging social practices. It will be used sparingly

because of a number of shortcomings with regard to the effectiveness of the tool itself. This tool leaves out some important information because of its standardized format. Furthermore, making large-scale use of it is very costly. It is not indispensable in this kind of survey but it is important to a certain extent because it can be used to quantify some social or emotional bearings, which the individual experiences could reveal.

Semi-guided interviews

This data collection technique was largely used. The idea is to gauge in the spread of HIV, the impact of the transformation of aesthetic codes on the gender balance of power, which is the hallmark of historicity. Based on the dialectics of individual experiences and social structures, we try to carry out in-depth personal interviews with the above-mentioned target population.

Data Processing

Analysis

There are two methods of analysis depending on the data collection tools used. For the in-depth personal interviews, the analysis is manual. For surveys by questionnaire, the analysis is computerized. It should be noted that manual analysis has the advantage of bringing the researcher closer to his subject while computerized analysis has the advantage of matching a wide range of variables and doing so in a much shorter time.

Variable Test

This is the principal method of data processing. Jean Claude Passeron defines it as a technique which introduces, by multiple matching, new variables into an original equation of two variables in order to study the effects. The procedure seeks to monitor the effect on the primary relation of each of the sub-cases (subsets) corresponding to the different values of the new variable analysed. It is for this reason that the procedure is called a variable test.

1 Statistics culled from the bulletin of the "Agence Nationale de Recherches", N° 38, November/December 2003.

2 Official Sources: National Multi-sector HIV/AIDS Control Programme. Emergency Action Plan for 2001 (Period: 2001 – 2005). These are approximate figures as the situation is always changing.

3 By strange "objects", Bruno Latour refers to: river pollution, frozen embryos,

AIDS virus, ozone gap, sensor robots ... which have invaded man's world and which puzzle him. Latour, B. "Nous n'avons jamais été modernes," La Découverte, Paris, 1991.

4 Leroi-Gourham, A. Le geste et la parole : La mémoire et les rythmes, ed. Albin Michel, Paris, 1965, P. 82.

5 Leroi-Gourham, A., op.cit., P. 83

6 Official sources, op.cit.

7 Moscovici, S., La psychanalyse, son image et son public, PUF, Paris, p.61.

8 Bottanski, L., Les usages, sociaux du corps, Annales. Economies, sociétés, civilisations, ed. Armand Colin, p. 205.

9 Elias, N., La civilisation des mœurs, éd. Pandora, Paris, 1974, p.276.

10. Palloix, C., op. cit., p. 6

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