

5. **Kenneth Keniston, Introduction to the Issue, Daedalus Vol.113(3) IX-XXXII, 1989.**

Metaphors and Theories of AIDS

The metaphor most used to understand AIDS is that of war. We speak of our battle with AIDS and vow to fight it. A war, as author Susan Sontag notes, involves an enemy, soldiers on both sides, weapons, a struggle to win. As she does not note it also suggests an outcome : the idea that the war will end in victory or defeat. Thus the war metaphor, with its unstated hope that there will be a victory for our side, but also prepares as poorly for the long-term consequences of AIDS. Wars eventually end. They do not get steadily worse or continue indefinitely. They are followed by a time of peace. We do not view them as something we must live with forever. But as I have suggested , this is unlikely to be the case with AIDS.

If in most of us, optimists, the war metaphor promotes fantasies of complete victory, in pessimists, it encourages the equally problematic image of unconditional defeat. To pessimists, the war is already lost : the incidence of AIDS will double every year until vast proportions of the world's population are affected. The medical-care system will be overwhelmed; health insurance will collapse; nations will be decimated; international trade will cease; production will plummet; and the vestigial uninfected population will barricade itself in armored enclaves to prevent infection.

Another common metaphor is that of the AIDS crisis. A crisis is, of course, a turning point--the moment in a drama or in the course of a disease or a social problem when conditions peak, when something has to be done, and when, depending on what we do, the problem either subsides or leads to catastrophe.

Another prevailing image of AIDS is that of epidemic, or more dramatically, of plague. This metaphor is inviting in some respects accurate. But we think of epidemics and plagues, like crises and wars, as mass afflictions that grow, crest, reach a peak, lay waste to a proportion of the population, and the subside or disappear. The problem, again, is that we have no idea when AIDS will crest, or indeed whether it will crest. The epidemic and plague metaphors thus also ill prepare us for the long-term prospects.

Of the many other social constructions of AIDS, I will comment only on the one we virtually all accept, nearly the characterization of AIDS as a "disease" and its incorporation into a biomedical framework of understanding. Such a characterization would seem to be only commonsensical in a rational-scientific age. But had AIDS first appeared a thousand or even a hundred years ago, the disease construction, with its biomedical implications, would have been unimaginable.

But is it in any way misleading? let me grant at the outset that the biomedical view of AIDS is, overall, the best single way of understanding it.

Nevertheless, we need to recognize the limitations of the disease model.

AIDS is in some ways more like a chronic condition, such as diabetes. In other ways, AIDS resembles conditions like polio or spanish influenza, characterized by an initial infection that may be followed by additional symptoms decades later.