BEYOND RHETORIC IN AIDS DISCOURSE: A THEMATIC ANALYSIS OF SELECTED SPEECHES ON AFRICA

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Abstract

HIV/AIDS discourse mostly reveals people’s perceptions, attitudes and behaviour, as well as required actions towards the disease. As the scourge rages in the world especially on the African continent, concerted efforts at combating the pandemic gather momentum both within and outside Africa. In all these efforts, the use of language is very paramount and of significant effect. Thus, at various fora, public figures and other stakeholders have devoted time to making speeches and giving talks focusing on the need for passionate strategies to combat the menace and make the African continent safe again. This paper focuses on the on-going HIV/AIDS discourse with particular interest in analysing the use of rhetoric in enlisting appropriate actions that will put an end to the nightmare. Therefore, three related speeches, one from Thabo Mbeki (Former President, Republic of South Africa), Dr Luis Sambo (Former WHO Regional Director for Africa), and Matthew T. Harrington (US Ambassador to the Kingdom of Lesotho), were selected for analysis using rhetoric as the analytical tool.

Keywords: Discourse, HIV/AIDS, Rhetoric, Speech

1.1 Introduction

The startling reports of HIV/AIDS in the early 1980s painted the disease as a ‘rare cancer’ linked to gay men in both New York and California (US) with the claim that the disease could be considered serious yet a limited problem (1996). Since its appearance, the disease has become a significant subject of discussion (Gilbert, 1998; Harbottle, 1998) at various gatherings leading to the production of a parallel epidemic of meanings, definitions and attributions simply described as an ‘epidemic of signification’ (Treichler, 1999).

There is no doubt that HIV/AIDS has continued to be one of the most devastating pandemics affecting the world and the African continent in particular. Thus, the search for its solutions is becoming increasingly urgent and requires multidimensional approaches (CODESRIA, 2010). Much as the impact of the disease is felt worldwide, the struggle to curtail it seems more pronounced and urgent on the African shore and until HIV/AIDS’s simultaneous material and linguistic reality is understood, ‘we cannot begin to read the story of this illness accurately or formulate intelligent interventions’ (Treichler, 1999: 18). The response to the challenging situation manifests mostly in two ways: action and utterance from all the characters (stakeholders) in the struggle.
The various verbal and non-verbal responses to the situation have culminated in the HIV/AIDS discourse. One vital aspect of the discourse is speech, a kind of address presented at occasions by concerned leaders and government officials on the subject matter with the belief that words, i.e., the use of language through speeches have a significant role to play in eradicating the disease. The power of words and the overall use of language in enlisting helps or mobilising people to deal with a situation like this cannot be over-emphasized (Oyeleye, 2005: 172-3).

Since speeches or addresses constitute an integral part of the overall HIV/AIDS discourse, this paper examines the rhetorical strategies employed in the selected speeches.

1.2 HIV/AIDS Discourse

The significance of the ‘epidemic of signification’ may well be due to the fact that HIV/AIDS has been ‘mediamediated’ (Davenport-Hines and Phipps, 1994). The disease is the first epidemic of the information age and as such has been widely reported by the media due to its newsworthiness. The media, therefore, has been significantly involved in defining images of HIV/AIDS using sophisticated information technologies. Researchers have noted that the language used in the media in relation to HIV/AIDS is, in many respects, similar to that used in describing cancer. Cancer has been predominantly described using the language of war, a discourse that has commonly been used in the press to give meaning to HIV/AIDS as well (Brown, Chapman and Lupton, 1996).

The word ‘discourse’ is used from a Foucauldian point of view (Foucault, 1972), not as groups of signs but as practices that systematically form the objects of which they speak. Discourses, thus, are constructive as they do not simply describe the social world, but are the mode through which the world of ‘reality’ emerges. They contain subjects and construct objects (Parker, 1992) as well as knowledge and truth (Ramazanoglu, 1993). Based on Parker’s view therefore, a discourse presents a coherent system of meanings attached to how ‘truth’ is formulated. In other words, the statements in a discourse cluster around culturally available understandings as to what constitutes a topic.

The HIV/AIDS discourse has since been accorded different descriptions in and outside Africa warranting its various phraseological synonyms or alternatives such as ‘Epidemiological Discourse’, ‘War Discourse’, ‘Discourse of Struggle’, and ‘Discourse of the Outsider’. This has given rise to sub-discourses including: Detective (Medical) Discourse; Save-our-soul Discourse; Discourse of Sexuality (Gendered Discourse); and Racialised Discourse.

The notion of ‘Discourse of the Outsider’ originally has a racial undertone (CODESRIA, 2010). A cursory look at the epidemiological discourse in terms of origin and causes of HIV/AIDS will confirm this observation. The theme of the outsider began early with western notions of the disease being African (tracing it to African monkeys or sexual practices), or as a disease affecting mostly members of the gay community, prostitutes, and intravenous drug users. As a result, the African continent is perceived as the outside source of the epidemic, but also the outsider in the discourse of HIV/AIDS. So, in terms of knowledge production regarding the
disease, Africa has been and continues to be the “outsider” excluded from the production of new knowledge required to address the pandemic effectively.

However, the discourse of the outsider has been redefined to reflect Africa’s specific challenges including its vulnerability and search for solutions. It is redefined primarily to address government and other stakeholders’ insensitivity to the disease as evident in studies that focus on migrants, prostitutes, mine workers, soldiers, foreigners and other perceived outsiders. This explains why African governments and policy makers invest very little in dealing with the pandemic as would be deemed appropriate; the feeling has equally lulled a lot of “citizens” (insiders) into a false sense of security where they no longer perceive themselves as being at risk of contracting the disease. However, later developments with new HIV infections still on the increase daily in many African countries jolted African leaders and their governments into some panicky reactions.

In “War Discourse” involving HIV/AIDS, the disease is personified as an enemy with a human face and obviously a villain constantly on the offensive against humanity while ‘Discourse of Struggle’ shows various parties involved in a constant friction with each other especially the diseased body and the disease, victims and health providers, government and the public etc. in terms of responsibilities and expectations. A discourse of war in this regard presents HIV/AIDS in ways very similar to the manner cancer has been understood (Sontag, 1991) and, like cancer, has become a symbol of death and extinction, instilling a deep level of fear in the people. A war discourse has been pervasive in talk about cancer and HIV/AIDS (Sontag, 1991; Lupton, 1993; Brown et al., 1996).

The HIV/AIDS discourse can be traced to five main closely related sources in the society.

**Books and reports:** These are medical instruments or records of activities or discoveries; and clinical observations or medical researches about HIV/AIDS. Since the appearance of the disease in the 1980s, many reports and counter reports have come out either to contest or confirm one finding or another. At any rate, such medical books and reports on HIV/AIDS deal with what is now known as ‘Detective Discourse’ owing to their investigative activities. A central contribution regarding identification and control of HIV/AIDS is made by medical science resulting in a ‘detective’ discourse in which rational strategies of deduction and detection are adopted to locate the ‘villains’ responsible for the ‘crime’ and then ‘punish’ them (Brown et al., 1996).

**Billboards and flyers:** The use of billboards and flyers has contributed tremendously to the popularity of the HIV/AIDS discourse in Africa. Thus, almost every corner and major roads have billboards with HIV/AIDS subject matter mostly in the form of warning or counselling to the general public. A typical example is the billboard below from Botswana (as displayed online):
Public institutions: Institutions like schools, religious places and hospitals are now used as veritable sources of HIV/AIDS literatures. At times, banners or posters are conspicuously displayed at strategic positions in such institutions for educational purposes. Hospitals are particularly awash with such information rendered in colourful door stickers or posters in different languages depending on where they are located.

Formal gatherings: The need to respond with a concerted effort has become so pronounced that formal gatherings of stakeholders, ‘outsiders’ and ‘insiders’ alike, are constantly organised to assess the disturbing HIV/AIDS situation in order to proffer solutions to the menace. Thus, seminars, workshops, conferences, and lectures, which are sometimes sponsored by governments and NGOs, spring up in selected locations to shed appropriate light on the needed course of action.

The media: It is known that the basic role of the media is to entertain and inform the public perhaps on all matters (Meldrum, 1996:74). Therefore, the mass media plays a vital role in informing public opinion on key issues relating to the general wellbeing of the society (Parker, Kelly and Stein, 2001) including communicating knowledge about epidemics such as HIV/AIDS (Chatterjee, 1999). Whether in print or electronic, the media defines what significant events are taking place and offers powerful interpretations of how to creatively understand these events by producing and reproducing them (Tuchman, 1991:90). The media is so dynamic that all HIV/AIDS discourses are accommodated for dissemination alongside the strategic jingles on radio and television as well as cartoons and notices in the print media for the purposes of fighting the disease.

HIV/AIDS discourse, no matter the source concerns the same set of characters. These are: a) the patients or the diseased body (Sacks, 1996:69) i.e. people living with HIV/AIDS; b) the polluter, transmitter of the disease, the infector; c) a ‘guilty’ party, typically HIV positive men, gay men, casual sex workers or intravenous drug users, who are represented as the ‘villain’ by the media (Brown et al., 1996); d) the governments as leaders or commanders; e) the scientists or experts who act as advisers; f) infants, children, women with unfaithful partners, rape survivors and surgery patients who are generally portrayed as passive and innocent victims; and g) the citizens (common people).
As pointed out by Sherwin (2001), the deployment of a war discourse with regard to HIV/AIDS depicts a moment of being under siege by a dangerous foe (the disease has become personified), a serious threat to people’s existence. Therefore, the people require not only a formidable defence but an annihilating counter attack against the enemy, hence the discourse of war creates a sense of urgency in mobilising action against the disease.

1.3 Methodology

Texts of three prominent speeches on HIV/AIDS in Africa constitute the data for this study. The first speech was made by Thabo Mbeki, a former President of the Republic of South Africa tagged: ‘13th International Aids Conference Durban, Speech of the President of South Africa at the Opening Session of the Conference’ in 2000; the second is Dr Luis Sambo’s, the WHO Regional Director for Africa (2004-2015) titled: ‘Speech of Dr. Luis Sambo, WHO Regional Director for Africa at the Conference on “HIV, the Forgotten Epidemic”’ delivered in Rimmi, Italy in 2012; and the third speech titled: ‘Ambassador Matthew T. Harrington Speech/Remarks at World AIDS Day National Commemoration Event: Thaba Bosiu’ was made by the US Ambassador to the Kingdom of Lesotho in 2014.

In analysing the selected texts, the criteria suggested by Parker (1992) for distinguishing and discussing discourses were generally adopted in the overall discussion of the subject matter. To him, a discourse: i) is realised in text (the texts here are the selected speeches); ii) is about objects (our main object is language response to HIV/AIDS as an epidemic); iii) contains subjects (these are characters e.g. the HIV/AIDS patients, government officials, etc); iv) is a coherent system of meanings (e.g. waging war against the disease); v) refers to other discourses (racialised, gendered, medical discourses); vi) reflects on its own way of speaking; and vii) is historically located within the society.

In addition, rhetoric as a language device in the domain of oratory (Worthington, 2008) was applied in eliciting the interest of the speech presenters and the various sub-themes skilfully planted as the rationale for their discussions. This confirms that rhetoric has an organizational function in a natural text (Mann and Thompson, 1987:1). The use of rhetoric goes beyond using methods outside the given subject by slandering, arousing emotions in the audience, or distracting the attention of the audience from the subject (The Stanford Encyclopedia of Philosophy, 2016), to steer the discussion to a logical and an acceptable conclusion without loss of message.

1.4 Data Analysis

1.4.1 Rhetoric in the Speeches

The concern of rhetoric is simply persuasion, the ability to convince the audience/listeners in a speech situation (Allen, 2007) and it is as old as language itself. Rhetoric is presented as a neutral tool open to be used by all persons of virtuous or depraved character. As such, it can be used for either good or bad purposes causing great benefits as well as great harm depending on who and where (The Stanford Encyclopedia of Philosophy, 2016). From various studies on the
relevance of rhetoric, the argument that rhetoric is only useful for those who want to outwit their audience and conceal their real aims, since truth can be communicated using plain language, could be objected to vehemently considering the fact that the power of words or use of language is available to everyone. From Aristotle’s point of view, rhetoric becomes even more useful when facing a mixed or difficult audience. While it is true that rhetoric can be misused, it is easier to appreciate its benefits (Allen, 2007; Worthington, 2008).

Although modern rhetoric theorists have shown interest in all aspects of human communication especially images, gestures, and words (Borchers, 2006: 14-15), in this study, our focus is on words and the three levels of persuasion: ethos, pathos, and logos since they cover the three aspects of speech making in an event namely, the speaker, the subject and the listeners (audience) (The Stanford Encyclopedia of Philosophy (2016); McKay and McKay (2017)). In the discussion, Speech1 refers to that of Thabo Mbeki, Speech2 to Dr Luis Sambo’s, while Speech3 is that of Ambassador Matthew T. Harrington.

Ethos: A speech is said to be rhetorical if it shows elements of ethos by appealing to the speaker’s or writer’s character or reputation. It equally shows credence, intelligence, virtue, or goodwill on the part of the speaker/writer. The three texts of the speeches studied manifest this as exemplified in Table 1 below.

Table 1

<table>
<thead>
<tr>
<th>Text</th>
<th>Ethos Examples</th>
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</thead>
<tbody>
<tr>
<td>Speech1</td>
<td>Name/Office: Thabo Mbeki, President (RSA)</td>
</tr>
<tr>
<td></td>
<td>Knowledge: You are in Africa for the first time in the history of the International AIDS Conferences.</td>
</tr>
<tr>
<td></td>
<td>Credibility: We welcome you warmly to South Africa also for this reason.</td>
</tr>
<tr>
<td>Speech2</td>
<td>Name/Office: Dr Luis Sambo, WHO Regional Director for Africa</td>
</tr>
<tr>
<td></td>
<td>Knowledge: I am aware that previous editions of this meeting have been important forums for the encounter of experiences and peoples of different cultures…</td>
</tr>
</tbody>
</table>
Credibility: I sincerely thank the organizers for asking me to speak at this Conference on “HIV, the Forgotten Epidemic”

Speech3 Name/Office: Matthew T. Harrington, US Ambassador to Lesotho

Knowledge: No child should be born HIV positive; we know how to prevent that.

Credibility: I am honored to address you all today at Lesotho’s national commemoration of World AIDS Day.

A speech maker/writer could possibly be most logical and careful in his argument, but if the audience sees him/her as not trustworthy or unqualified in one way or the other, his/her reasoning and preparation will amount to wastage. A speaker’s ethos consists of his/her knowledgeable status or intelligence about the topic he/she is speaking about. This is evident in the three speeches. All the speech makers occupy dignified positions and they are quite knowledgeable about the issue of HIV/AIDS in Africa and the world.

Pathos: Pathos is the second aspect of rhetoric that deals with a speech appealing to the emotion of the audience. Since a speech is ideally made for an audience, it goes to show that the success of the persuasive efforts depends on the emotional dispositions of the audience. Thus, the orator has a duty to arouse the right emotions, or motivate his audience as would be necessary because emotions have the power to modify our judgments. The rhetoricians of the selected speeches rely heavily on pathos and employ it significantly in their texts. The following examples in Table 2 below are relevant:

<table>
<thead>
<tr>
<th>Text</th>
<th>Pathos Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Speech1</td>
<td>The peoples of our continent will therefore be closely interested in your work.</td>
</tr>
<tr>
<td></td>
<td>You meet in a country to whose citizens’ freedom and democracy are but very new gifts.</td>
</tr>
<tr>
<td></td>
<td>You will spend a few days among a people that has a deep understanding of human and international solidarity.</td>
</tr>
</tbody>
</table>
Speech2  
It is the collective responsibility of all to finish what has been started, in order to make universal access to prevention, treatment and care a reality.

In 2011, more than six million people were receiving treatment in Sub-Saharan Africa, compared with just 100,000 in 2003.

Speech3  
Additional resources are always welcome, but money is not the main obstacle to making better progress in Lesotho.

TREATMENT WORKS! TREATMENT works to prevent new HIV infections…

As seen in Table 2, pathos motivates listeners by making them feel better through the use of expressions ranging from assurance, storytelling, common problem, and figures of speech like repetition. Applying emotional utterances like these enhances a successful delivery of messages to the audience.

Logos: Logos as the third persuasive device in rhetoric deals with ‘appeal to reason’. It is hinged on persuading the audience by a set of arguments presented in a given speech. This is often done when the speech maker/writer demonstrates or seems to be demonstrating that something is the case leading to the audience having a deductive or inductive reasoning as mapped out by the speech. In Table 3 below, examples of logos are presented.

Table 3

<table>
<thead>
<tr>
<th>Text</th>
<th>Logos Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Speech1</td>
<td>Because the possibility to determine our own future together, both black and white, is such a fresh and vibrant reality, perhaps we often overestimate what can be achieved within each passing day.</td>
</tr>
<tr>
<td></td>
<td>Nevertheless, that overestimation must also convey a message to you. That message is that we are a country and a Continent driven by hope, and not despair and resignation to a cruel fate.</td>
</tr>
<tr>
<td></td>
<td>Those who have nothing would perish if the forces that govern our universe deprived them of the capacity to hope for a better tomorrow.</td>
</tr>
<tr>
<td>Speech2</td>
<td>In Sub-Saharan Africa, approximately 300,000 children were newly infected with HIV in 2011. Therefore, we cannot afford to let HIV/AIDS be a forgotten epidemic.</td>
</tr>
</tbody>
</table>
By overwhelming the continent’s health and social services, by creating millions of orphans and by decimating people in the productive age group, HIV/AIDS continues to cause a negative demographic, social and economic impact.

Speech3

...due to our strong partnerships and collective efforts across the globe, new HIV infections have dropped by half since the peak of the epidemic, and life expectancy has rebounded.

An AIDS-free generation is within Lesotho’s reach, but to get there the country must deliver the right thing, in the right place, at the right time.

The arguments raised by the orators are meant to lead the audience to form their opinions about the various issues raised. In other words, the highlighted statements do not end in themselves. Even though the examples illustrate logos, pathos seems to be the underlying motive owing to the expected perlocutionary effects on the audience. Therefore, logos is deemed to be the superior of all the persuasive appeals seeing that all arguments should be won or lost on the basis of reason alone by allowing the words of the speech to do the persuading.

1.4.2 Themes beyond Rhetoric in the Speeches

The use of rhetoric in speeches has two major advantages. In the first place, it is employed to convince the audience of the content of the speech. In other words, it serves as an aid to unravel the whole message in a text without any serious difficulty. Secondly, rhetoric actually helps and guides the orator in marshalling the available points in the text.

In this study, there are secondary but germane themes (messages) which appear as appendages to the HIV/AIDS discourse in the three speeches. The themes, which are discussed below, are considered important because of the topical and sensitive issues they invoke.

a. Extreme Poverty/Starvation in Africa

One of the issues that keep recurring in the speeches is ‘extreme poverty and starvation’ among the common people in Africa. Thabo Mbeki (Speech1) notes with dismay that the ‘world's biggest killer and the greatest cause of ill health and suffering across the globe, including South Africa, is extreme poverty’. He seems to imply that with poverty among the people, fighting HIV/AIDS becomes complicated. Equally, Dr Luis Sambo (Speech 2) concurs by saying, ‘We need to empower the youth and women to address the factors that make them especially vulnerable’. It could therefore be concluded that if hunger is taken care of, it is very possible that the menace of HIV/AIDS will become easy to curtail.
b. Diseases in the land

HIV/AIDS appears to be getting all the attention in and outside Africa because of its devastating grip on its patients and particularly its terminal nature. This is responsible for the somewhat similar scary recognition it has as cancer. However, there are several other sicknesses and diseases facing Africa which include malaria, tuberculosis, hepatitis B, among others. Thus, Thabo Mbeki (Speech 1) declares, ‘As I listened longer, I heard stories being told about malaria, tuberculosis, hepatitis B, HIV-AIDS... I also heard of cholera, respiratory infections, anaemia, bilharzia, river blindness, guinea worms and other illnesses with complicated Latin names’. These health challenges other than HIV/AIDS are gradually experiencing a kick-glove treatment, a dangerous trend and a careless oversight indeed. In essence, as much as HIV/AIDS is regarded as being dreadful and a matter of emergency, other sicknesses and diseases should be concertedly stamped out of Africa for the expected peace and total wellness to be achieved.

c. Need for Proper Management

In fighting HIV/AIDS described by Thabo Mbeki (Speech 1) as ‘a grave human problem’, an impressive quantity of both local and international resources is required. The management of these resources, especially the material resources, seems lacking thereby making a mockery of the so called war against the health scourge. Dr Luis Sambo (Speech 2) therefore advises that, ‘It is imperative that both domestic and international funds are used more efficiently, for greater benefits of affected populations’. As the continent strives to make Africa HIV/AIDS free, proper management is a must. This position is further reiterated by the US Ambassador to the Kingdom of Lesotho, Matthew Harrington (Speech 3), as follows: ‘An AIDS-free generation is within ... reach, but to get there the country must deliver the right thing, in the right place, at the right time.’ The Ambassador argues that ‘... money is not the main obstacle to making better progress. If the struggle against the disease is to yield the desired fruits, proper management of the available resources, human and non-human, must be given a full attention.

d. The Need for Commitment

Success in any project or business is based on the commitment of the executors. A war situation like fighting HIV/AIDS requires more than ‘hoping’ as Thabo Mbeki (Speech 1) erroneously emphasized in his speech. It requires deliberate actions and behaviours which are products of commitment (dedication) on the part of all concerned. Ambassador Matthew Harrington (Speech 3) captures this idea extensively as follows:

Successfully turning the corner on HIV/AIDS ... will take visionary and engaged leadership, accountability and courage.

--Courage from pregnant women to make the long trip to get tested and, if positive, to commit to treatment so that their babies can be born disease free;

--courage from family members, co-workers and communities, to fight stigma and ensure that people living with HIV are not treated as second-class citizens;
--and courage from doctors and medical workers to respond vigorously to any obstacles they encounter, so that the programs they run are effective and have maximum impact.

With commitment from every stakeholder, the sense of ownership required in fighting the disease is established, and the battle against the most dreaded disease, in the continent will be easily attained and very soon indeed.

1.5 Conclusion

The speech texts selected for this study constitute one of the crucial steps in the role of the African continent in the fight against the HIV/AIDS pandemic. Speech making as seen in the study contributes significantly to the on-going HIV/AIDS discourse which has its varieties and sub-types. The reliance of the speeches on rhetoric as a communication device helps tremendously in sensitizing the audience (and stakeholders) by re/defining the deadly disease and soliciting required actions from relevant quarters and stakeholders alike.

1.6 Recommendations

The analysis of the selected speech texts using the rhetorical approach is not only appropriate but rewarding considering the relevance of the texts as an aspect of social discourse. Also, the mixed nature of the audience and the sensitivity of the subject-matter lend credence to the analytical process adopted. In view of the above, we recommend that:

1. Other aspects of the HIV/AIDS discourse including flyers and billboards should be explored by discourse analysts and linguistic researchers for the purpose of establishing their methodology and framework.

2. Newspaper articles on HIV/AIDS should be subjected to rhetorical analysis to establish the relevance of the theory.
References


