The Politics of Loss and Its Remains in 
Common Threads: Stories from the Quilt

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With panels corresponding to the size of a body, coffin, or a grave, the AIDS Memorial Quilt evokes “for many an image of war dead strewn across a now quiet battlefield.” With the Quilt operating as a surrogate for the bodies of people who have died of AIDS, viewers, whether they are in a museum, church, school, city hall, or the Washington Mall, are invited to witness and experience the atrocity of the disease and the enormity of the human loss of the AIDS epidemic. First displayed in Washington, D.C., in October 1987 with 1,920 panels, and growing to more than 47,000 in recent years, the Quilt was “a brilliant strategy for bringing AIDS not only to public attention but into the mainstream of American myth, for turning what was perceived to be a ‘gay disease’ into a shared national tragedy.” There is no prescription for viewing and experiencing this tragedy. When visiting a Quilt display, no one tells viewers where to start or finish, what panels to focus on, when to stop or leave, or how to respond to the collage of loss surrounding them. As of April 2009, more than 18 million people have visited the Quilt.
With the easy accessibility and increased availability of mass media products today, anyone can experience the Quilt without traveling to a display. Highly acclaimed and recommended by film critics in the United States and winner of the Academy Award for Best Documentary Feature in 1990, *Common Threads: Stories from the Quilt*, narrated by Dustin Hoffman, tells the story of the NAMES Project AIDS Memorial Quilt by focusing on the lives of five very diverse individuals represented by panels in the Quilt. The documentary is, in Cleve Jones’s words, “a beautiful essay” that tells the stories of these five people “struggling with AIDS at a time when hope for survival was nonexistent.” In addition to being an important Quilt merchandise and carried by numerous libraries and video rental sites, this documentary has been shown extensively on public television.

In this essay, I examine the politics of loss and its remains in *Common Threads*. To accomplish this, I first discuss the notion of loss and its remains. Next, I provide a brief overview of the film and situate it in its appropriate political and historical context. Third, using the concepts of bodily, spatial, and ideal remains, I analyze the politics of loss in the film. I conclude by examining these politics as we approach the silver anniversary of the inaugural display of the AIDS Memorial Quilt.

**Loss and Its Remains**

Although the notion of loss has conventionally been relegated to the realm of the psychological or psychoanalytic, Judith Butler contends that loss should be conceived “as constituting social, political, and aesthetic relations.” Loss, in this sense, cannot be confined as something that occurred in the past to be left there; on the contrary, loss creates and induces an active tension between the past and the present, and in so doing, it constitutes and transforms the present. As such, the social, political, and aesthetic relations of the present are always already comprised of, and haunted by, loss in its symbolic, ideal, and material forms. This new way of thinking about loss, Butler continues, “seeks to bring theory to bear on the analysis of social and political life, in particular, to the temporality of social and political life.” Such a perspective is particularly
significant to individuals and social groups, such as gay men, injecting drug users, women and men of color, commercial sex workers, and trans-genders affected by the AIDS epidemic. Besides being the most impacted by HIV/AIDS, these individuals and groups are already among the most disenfranchised in U.S. society. These lives—and losses—are, as Butler argues, unintelligible and “unreal” in the national imaginary, thus, making them “ungrievable.” An ungrievable life, Butler notes, “is not quite a life; it does not qualify as a life and is not worth a note,” for “it is already the unburied, if not the unburiable.” A new perspective of loss engages in an analysis of social and political life, including those deemed unreal, ungrievable, unburied, and unburiable.

Loss cannot be cut off and detached from its remains. As David Eng and David Kazanjian aptly observe, “We might say that as soon as the question ‘What is lost?’ is posed, it invariably slips into the question ‘What remains?’ That is, loss is inseparable from what remains, for what is lost is known only by what remains of it, by how these remains are produced, read, and sustained.” Engaging loss from the perspective of remains animates the past through the creation of bodies, subjectivities, and subjects (bodily remains); spaces, representations, and new meanings (spatial remains); ideals, potentialities, and knowledges (ideal remains). These three realms of remains might be seen as active rather than reactive, creative rather than insipid, prophetic rather than nostalgic, social rather than solipsistic, confrontational rather than reactionary. The panels of the AIDS Memorial Quilt, including the ones in Common Threads, are powerful bodily, spatial, and ideal remains—and riveting reminders—of the lives lost to AIDS.

Reading Common Threads

*Common Threads: Stories from the Quilt* is a significant cultural artifact associated with the AIDS Memorial Quilt. This artifact was widely distributed by the NAMES Project Foundation, the national organization that provides funding and oversees the display of the Quilt. Based in part on the book *The Quilt: Stories from the NAMES Project*, written by Cindy Ruskin, photographed by Matt Herron, and designed by Deborah Zemke,
**Common Threads** is a feature-length documentary released in 1989, two years after the first display of the entire AIDS Memorial Quilt on the National Mall in Washington, D.C.\(^1\)

The film focuses on the lives of five people memorialized by panels in the Quilt. They are Dr. Tom Waddell, an Olympian, founder of the Gay Games, and a white gay man whose story is told by his friend and mother of his child, Sara Lewinstein; David Mandell Jr., a white young boy with hemophilia whose story is told by his parents, David and Suzi Mandell; Robert Perryman, an injecting drug user and heterosexual African American man whose story is told by his widow, Sallie Perryman, an African American woman; Jeffrey Sevcik, a white gay man whose story is told by his partner, Vito Russo, a film historian and a white gay man; and David Campbell, a white gay man whose story is told by his partner, Tracy Torrey, a U.S. Navy veteran and a white gay man who became his own storyteller as he succumbed to AIDS during filming.

Interspersed with the life narratives of the five men from early childhood to death, the documentary presents a parallel history of the U.S. government’s neglect and lack of political response to the growing epidemic and the emergence and creation of the AIDS Memorial Quilt. Using statistics to detail the number of U.S. Americans diagnosed with, and killed by, AIDS, the film provides coverage of the early years of the epidemic (1981–1989) and concludes with a powerful and solemn sequence of names read aloud on the Washington Mall.

**Situating Common Threads in a Political and Historical Context**

The film’s (re)presentation of the early years of the AIDS epidemic is a chronicle of, and reaction to, the social, cultural, and political climate of the United States at that moment in history. AIDS is actually an amalgamation of two parallel epidemics—biomedical and cultural—mutually influencing each other. AIDS, the biomedical epidemic, is a narrative of an infectious disease and the search for a cure. AIDS, the cultural epidemic, is an ongoing social and political struggle over scientific, sexual, and social processes of signification associated with the biomedical epidemic.\(^1\)}
Indeed, cultural struggles over definitions and meanings started at the onset of the biomedical crisis. The definition of AIDS itself has evolved and changed over the years. In 1981 medical researchers called the newly identified medical condition GRID (gay-related immunodeficiency). The process of coupling a medical condition with a sexual identity served to create, maintain, and perpetuate discursive dichotomies and social hierarchies in the United States (for example, homosexual and the “general population”; us and them; guilty and innocent; moral and immoral; perpetrator and victim; love and death; anus and vagina; normal and abnormal).13

As disease and marginal groups in society (such as gays, injecting drug users, commercial sex workers) became endlessly and inextricably linked by the dominant biomedical discourse of AIDS, the notion of “high-risk” groups emerged. As the name suggests, “high-risk” groups focus on identity—who people are personally, socially, and culturally—rather than behavior—what people do that might put them at risk for HIV infection.14 This focus maintains a safe distance between the mainstream (i.e., white heterosexuals) and the disenfranchised (i.e., white homosexuals and drug users of color) in the United States. It is therefore hardly surprising that the U.S. government, dominated by the ultraconservative politics of the Reagan era, remained silent about the exploding AIDS epidemic in its early years. This point is made more poignantly by Jan Zita Grover about Reagan’s silence: “Gary Bauer, president Reagan’s assistant, told Face the Nation that the reason Reagan had not even uttered the words AIDS publicly before a press conference held late in 1985 was that the Administration did not until then perceive AIDS as a problem: ‘It hadn’t spread into the general population yet.’”15 It is painfully clear that the lives of people in the “general population” are infinitely more valuable. As Judith Butler reminds us, they are “highly protected, and the abrogation of their claims to sanctity will be sufficient to mobilize the forces of war,” while the lives that are socially and culturally marked do “not even qualify as ‘grievable.’”16

It was during this grim and frightening—the lack of effective biomedical treatment to keep people living with HIV/AIDS alive—and shameful and embarrassing—the government’s silence and neglect of people living with HIV and dying of AIDS—period of U.S. history that the AIDS Memorial Quilt was conceived and created and Common Threads was
produced and distributed. It was a time of hopelessness, desperation, terror, and despair.\textsuperscript{17}

Although Cleve Jones’s AIDS Memorial Quilt draws on the U.S. tradition of quilting, it is, as Christopher Capozzola accurately observes, “largely an invented tradition” designed to challenge the conservative discourse of nation and traditional definitions of the family prevalent during the Reagan years. Through this contestation, it demanded that marginalized groups in U.S. society, such as gays and injecting drug users, be included in what it means to be American. The Quilt, Peter Hawkins notes, “redescribes the entire nation in terms of the epidemic—it says, America has AIDS,” and in the process it attempts to persuade the government to act with compassion toward its citizens.\textsuperscript{18} Ironically, to ensure the inclusion and sympathetic treatment of gay men in the discourse of “America has AIDS,” Cleve Jones and the NAMES Project staff disavowed the Quilt’s close ties to the gay community. In fact, Jones admitted that he and his staff “deliberately adopted a symbol and a vocabulary that would not be threatening to nongay people.” Although the process of “de-gaying” the Quilt was not necessarily uncontentious, this was nevertheless the political and historical context in which \textit{Common Threads} was produced and circulated.\textsuperscript{19}

The stories of the five lives memorialized in the AIDS Memorial Quilt and presented in \textit{Common Threads} serve to “maintain contact with the dead,” thus enacting an active tension between the present and the past and loss and its remains.\textsuperscript{20} These are the lives that are, in Judith Butler’s words, “unreal” and have “already suffered the violence of derealization” by the powerful and invisible dynamics of normativity in U.S. culture. Such lives, Butler adds, “have a strange way of remaining animated,” and by engaging with them in \textit{Common Threads}, we can embark on an analysis of their bodily, spatial, and ideal remains.\textsuperscript{21}

\textbf{Engaging the Politics of Loss and Its Remains in Common Threads}

The process of viewing attempts to create a sense of identification between the viewer and the subject, and viewing \textit{Common Threads} enacts
the relationship between the viewer and the remains of lives lost to AIDS. As Simon Watney suggests, the process of identification works in two ways: “the transitive one of identifying the self in relation to the difference of the other, and the reflexive one of identifying the self in a relation of resemblance to the other.” Loss and its remains resulting from AIDS enter the realm of public visibility in the transitive mode, with the condition that any possibility of identification with it is thoroughly refused. What are the politics of this engagement with loss and its remains? What are the potentials of this engagement? What are the new possibilities suggested by this engagement?

**Bodily Remains**

Bodily remains activate the relationship between the past and the present through the creation of bodies and subjects. This relationship attends to the ways unreal and ungrievable, abject and unlivable bodies are haunted by creative possibilities whose meanings emerge from making sense of their material remains. Based upon a close reading of *Common Threads*, I focus on two bodily remains: the AIDS body and the sexuality of such bodies.

Moving away from abstract AIDS statistics to concrete images of people with AIDS during the early years of the epidemic, the media created, maintained, and perpetuated a particular representation of the AIDS body. Such a representation has become so familiar in the popular imagination that most people do not question its hegemonic status. The AIDS body, in this dominant and pervasive representation, is “ravaged, disfigured, and debilitated by the syndrome,” and the subjects with the condition are “generally alone, desperate, but resigned to their ‘inevitable’ deaths.” Presenting the lives of five people with AIDS, *Common Threads* complicates this hegemonic representation of the AIDS body by reinforcing it at times and challenging it at other times.

At first glance, it appears that the images in the documentary reinforce many of the familiar representations of the AIDS body. There are pictures of the “before and after” to provide evidence of the ways HIV ravages the body and destroys the person. Tom Waddell is shown as an athlete who competed in the Olympic Games in Mexico City in 1968. David Mandell
Gust A. Yep Jr. is described by his mother as a “life eater” while he is playing in a yard. Robert Perryman is seen with his wife, both healthy-looking and dressed in formal attire. Jeffrey Sevcik is shown as a healthy young man in a black-and-white photograph. David Campbell and his partner, Tracy Torrey, are seen in pictures as professional young men at work. The “after” pictures show Tom Waddell alone and looking out a window, David Mandell Jr. looking emaciated in a photo with his brother, Robert Perryman looking thin and forlorn, Jeffrey Sevcik lying in bed, and Tracy Torrey looking wasted and speaking to the camera in bed alone. The disfigurement is particularly noticeable in images of Mandell and Torrey, and bottles of medicine—another indication of disease and illness—are prominent visual elements of their narratives. The inescapability of death of the AIDS body is particularly poignant when Tracy Torrey makes his own quilt panel and tells his deceased partner, David, through the rolling camera, “Hang in there, buddy. It won’t be long before we are together again.”

*Common Threads* also appears to reinforce hegemonic representations of the AIDS body through race, class, gender, and sexuality. The five lives presented in the documentary are three white gay men, an African American heterosexual male drug user, and a young white hemophiliac, representing the three major “risk groups”—homosexuals, injecting drug users, and hemophiliacs—identified by the medical establishment. Such a selection reinforces the popular media image that gay men are “always presumed to be white and middle class,” and injecting drug users are presumed to be straight “poor people of color.” By keeping these “risk groups” separate and independent, gay men of color, white injecting drug users, white women and women of color, among others, become unseen, obscured, and unintelligible in terms of funding; educational, medical, and social services; and the popular imagination. Although Sallie Perryman tests positive for HIV, she remains a narrator of her late husband’s life, and her own psychological and material realities of living with the virus are ignored in the name of focusing on the life of her dying partner. The gay men in the film—Waddell, Sevcik, and Campbell, along with Russo and Torrey—and the young hemophiliac and his parents—the Mandells—are signaled by their speech, self-presentation, profession, and surroundings as distinctively middle class. Perryman, the African American man, is established right at the onset as a heterosexual male,
and discussion of his struggle with drugs confirms his identity as a drug user. When his wife, Sallie, says, “He didn’t take my furniture out of my house. He didn’t rob me. He didn’t rob anybody,” she appears to be challenging the ubiquitous image of the drug user with AIDS—the inner-city poor, criminal, heterosexual of color.27 The statement, however, appears peculiar in this context. We do not typically imagine a husband robbing his wife, and by conjuring up this prevalent image, it ends up reactivating and affirming it in the popular imagination.

Although the film reinforces some of the hegemonic representations of the AIDS body, it also challenges them in important ways. During the Reagan era, dominant conceptions of nationhood and the family certainly did not include AIDS and the populations it affected. AIDS seemed so “un-American,” and many people and communities in the United States actively avoided it symbolically and materially.28 These hegemonic discourses of nation and family are brought into crisis in Common Threads. Calling it “truly an All-American family,” Sara Lewinstein discusses how she, a lesbian, and Tom Waddell, a gay man, decided to become a family and have their daughter, Jessica. Tom “was everything I would want for my child to grow up with,” exclaims a smiling Lewinstein. When they decided to have a child, she recalls what she said to Waddell, “You are wonderful. You are athletic. You are smart. You are a doctor. My mother would have no complaints.”29 The idea that a lesbian and a gay man are so perfectly matched emotionally, intellectually, and psychologically to form a family and have a child confronts and resists the traditional heteronormative model of family.

Defying popular stereotypes of drug users, the documentary shows Robert Perryman as a dedicated and responsible father. Sallie, his wife, recalls, “Rob wanted to be the best father that he could and he was so nurturing and caring about his daughter. He bathed her, he washed her, he took her for walks, he rolled the stroller, he changed diapers.”30 These images open up new discursive horizons for thinking about families and family life in the United States in the late 1980s.

As I discussed earlier, popular images of the AIDS body is one of death and decay; it is certainly not one of life and vitality. Although some of the images depicted in Common Threads are in hospital rooms, a common site where AIDS bodies are located, one sequence involving Tom
Waddell tampers with popular expectations. In the scene, Waddell is in a hospital room, not as a patient, but as a visitor and a proud and expecting father. Lewinstein has just delivered Jessica, their daughter, and Waddell looks radiant and ecstatic. While the popular imagination expects AIDS bodies to be ravaged and waiting for death, Waddell’s image is glowing from bringing life to the world.

The AIDS body is not conceived as sexual in the popular imagination. With the exceptions of Waddell and Perryman, who produced children, *Common Threads* depicts its subjects as essentially devoid of sexuality. The absence of discourse about their desires, fantasies, and activities literally edits their sexual lives off the screen, or, as Richard Mohr puts it, “sex is bleached right out.”31 However, sex and sexuality are fundamental dimensions of human experience and subjectivity, and this seems to be particularly true of gay men who are socially and culturally defined by their sexual identity.32 That Waddell’s and Perryman’s sexuality remain on the screen while others’ were edited out is worth noting. Perryman is a heterosexual man, and Waddell is a gay man who had a child with his best friend, a lesbian. The showcasing of procreative sexuality at the expense of silencing other forms of erotic engagement continues to reinforce a particular hierarchy of human sexual expression that is damaging to gay men, lesbians, and other sexual minorities.33 However, the visual and discursive presence of two gay men and their partners—Jeffrey Sevcik and Vito Russo, David Campbell and Tracy Torrey—and their discussion of the physical attraction between them at least suggest an unseen, yet palpable, nonprocreative and nonheteronormative sexuality that is resistive, resilient, and undeniable.

**Spatial Remains**

Spatial remains animate the relationship between the past and the present through the creation of spaces and representations.34 Such a relationship attends to the intersections between subjectivity and space and the representation and temporalization of loss. I focus on two spatial remains, based on my reading of *Common Threads*. The first is the association of AIDS with large gay meccas and inner cities in the United States, which creates the connection between physical geography and AIDS. The
second is the construction and institutionalization of the sequelae “HIV-positive = AIDS = Death,” which uses the chronological presentation of events in the film to create a discursive space to interpret the biomedical and cultural epidemic.

When the biomedical establishment and the government instituted and institutionalized the notion of “high-risk” groups, they essentially attached AIDS to a social identity. As AIDS became inextricably linked to gay men and injecting drug users, a spatialization of the disease was also cemented: the association of AIDS with large gay meccas and inner cities in the United States. This spatialization of AIDS is largely supported and preserved in the film.

The connection between AIDS and large metropolitan centers with substantial gay populations, such as San Francisco and New York City, is made in the documentary. Three of the gay men—Waddell, Sevcik, and Russo—lived and died in either San Francisco or New York City. Waddell lived, and died, in San Francisco. The Golden Gate Bridge, a familiar landmark of the city, is featured when Tom and Sara decide to become a family and have a child. Sevcik was shown in a street interview during the Gay Parade in New York’s Chelsea District. His partner, Vito Russo, originally lived in New York City. Living to his commitment of “we are going to do this together,” Vito moved to San Francisco to take care of his partner after Jeffrey was diagnosed with AIDS. In addition to these life stories, many of the news reports—interviews with physicians, street reports, coverage of community events—were also set in San Francisco.

The inner city is a racially coded space to signify people of color with limited financial resources, opportunities, and life chances. That inner cities and drug users are associated in the larger AIDS national imaginary is not surprising. Although this connection is not explicitly made in the depiction of Robert Perryman in the film, there are subtle visual cues that point the viewer in that direction. When his wife, who was presumably being interviewed in her home, is onscreen, the viewer sees a room with a refrigerator and a small table with a sewing machine on top. One is left to wonder if this is a small kitchen or very small living quarters. When Robert decides to die in the hospital, the camera shows his room, and through his window the viewer can see roofs of shabby buildings, the visual signifiers of a poor neighborhood.
In contrast, David Mandell Jr., the young white hemophiliac, is shown in what his mother, Suzi Mandell, calls “our middle American home.”

The house appears spacious, and young David has many places in which to play. Some of the visual cues seem to confirm that they live in the suburbs. After David’s death, Suzi recalls her response to an invitation to go to the local Gay and Lesbian Community Services Center to make a quilt panel for her son: “I gulped. I said I have to ask my husband. We had not ventured very far from our middle American home into that area of the city.” But they decided to go. After arriving, Suzi recalls, “It seems like five minutes later that David [her husband] was very, very busy helping them out with the mailing and I was very busy stitching letters into a person’s panel.” She then came to the powerful realization that, “suddenly, for the first time since my son’s death, it was okay to laugh, really laugh.”

In this scene, new promises for connection and community and new possibilities for political engagement can be imagined when the spatialized boundaries of AIDS are crossed, and perhaps temporarily torn down.

Through the narrative structure of the documentary, another form of spatialization is produced. This one creates a temporalization of loss—a chronology—that establishes the discursive space for the formula “HIV-positive = AIDS = Death.” It is important, however, to situate it in a larger context: HIV was not labeled a causal agent of AIDS until 1984, and an HIV-antibody test was not licensed until a year later. Although the chronology remains somewhat unclear, it appears that some of the people in the film were diagnosed with AIDS either before an HIV-antibody test was licensed or the antibody test was meaningless in the presence of AIDS-related symptoms and illnesses. Sara Lewinstein recalls Waddell’s negative results for a number of medical tests he ordered. He was diagnosed with AIDS shortly after Sara noticed his weight loss and Tom discovered white patches on his tongue. Both were “signs of AIDS” at that time. Vito Russo discovered a spot on his leg that later turned out to be a kaposi sarcoma lesion, a rare form of skin cancer that people with AIDS were developing during the early years of the epidemic. In these narratives HIV and AIDS become conflated, reflecting the limited biomedical knowledge about the condition at that time. Because the five lives depicted in the film end in death, the HIV-AIDS-death sequelae is
established. The separation of HIV—the virus—from AIDS—the medical condition—becomes clearer when Sara Lewinstein and her daughter test negative for HIV. In another scene, Sallie Perryman reveals that she had already been HIV-positive for more than two years at the time of the filming. Seemingly hopeful and realistic, she says, “In my mind, I decided that I am not going to get sick. I don’t have to get sick. I am not going to let worrying about it make me sick. That’s how I’ve been coping. Whether this works or not, time will tell. But I feel great.” 39 The documentary does not conclude with a voiceover, as most viewers had become accustomed to hearing in those days, announcing Sallie’s death. Whether this was because Sallie was alive or the producers elected not to reveal Sallie’s death at the time the documentary was released is unknown, but the lack of a voiceover opens up a space to imagine hope and to challenge the inevitability of the temporalization of loss based on the formula “HIV-positive = AIDS = Death.”

**Ideal Remains**

Ideal remains activate the relationship between the past and the present by invoking potentialities, knowledges, and new ways of becoming. The lives lost to AIDS represent blocked potentials of ideals and meanings; the process of engaging with ideal remains can “unblock their political and social potentials and to create an openness to the world in the interest of imagining alternative strategies of becoming.” 40 Based on my reading of *Common Threads*, I discuss two remains: the ideal of the uniqueness of the individual and the ideal of justice, activism, and affective life.

The documentary suggests that each of the five lives portrayed on the screen, and in each Quilt panel, are unique. Seeing the “Quilt as evidence” of this uniqueness, Cleve Jones observes, “For all the beauty and tenderness of each panel, the hard fact was that someone of value had to die to make it happen.” 41 Their lives—the amalgamation of genealogy, history, biography, psychology, and geography—are like no other. The focus on the individual, Richard Mohr reminds us, reflects the primary central claim of liberalism. He further notes that “it asserts the individual, not groups, classes, or society in toto, as the locus of human value” and in turn interprets this prime value to be “the permission for a person to
make plans of her own and to carry them out to a degree compatible with other people having a similar permission.”

The process of naming names and remembering individual lives not only makes such lives irreplaceable, it also engages the viewer in a relationship between the past and the present to unblock the potentials of such lives. The opening sequence of the film, slowly showing photographs of several faces, from children to adults, against a backdrop of news reports on AIDS, invites the viewer to wonder about the trajectory of these lives if AIDS hadn’t arrived. The scene continues with the camera moving to the AIDS Memorial Quilt display in Washington, where individual loss and national devastation, unrealized plans and blocked potentials, are witnessed en masse.

The uniqueness of the five lives featured in the documentary is captured and reported in some detail. Waddell is characterized as a high achiever—an Olympian and an ultra-competitive athlete, a leader who founded the Gay Games, a respected activist, an intellectual with a doctorate degree—and a loving human being—a great friend, sensitive man, dedicated father. Perryman is presented as a thoughtful husband, devoted father, giving friend, and supportive counselor. Mandell is characterized as a strong and active child, a “life eater,” and a courageous soul. Sevcik is described as innocent and childlike, gentle and sensitive, playful and theatrical, spiritual, passive, pessimistic, and nervous in large gatherings. Campbell is described as a handsome man, and both Torrey and Campbell are presented as successful professionals—one in the Navy and the other in landscape architecture. Dustin Hoffman, the narrator of the film, tells us, “these lives take very different roads to the same fate,” their death from AIDS.

The sense of “being different” is evident in some of the film’s protagonists. Sevcik and Campbell, both gay men, and Mandell, a hemophiliac, are aware of their difference in the social world. Russo described his partner, Sevcik, as “too gentle to live among wolves.” These men express the ideal of, and wish for, equality in treatment in different ways. For example, Torrey tells us that Campbell, his partner, realized his homosexuality at an early age, and “he would have become an interior designer if it weren’t for the great stigma attached to that occupation, and therefore, decided to become a landscape architect instead.” In an attempt to realize
the ideal of equal treatment, Campbell did not pursue his professional dream. Mandell’s father, aware of his son’s difference as a hemophiliac and the violence perpetrated on them in the early years of the epidemic, notes in the film that “I felt that it was important for David to have as much freedom and abilities without us putting restrictions on him so that he could have a normal life.” The struggle for “normality,” which I read as an investment in the ideals of inherent personal value and equal and fair social treatment, is particularly salient for individuals whose lives are “disposable,” valueless, and unreal.

Witnessing some of the injustices resulting from an oppressive social body, an inhumane and unresponsive government, a homophobic and sex-negative medical establishment, and a sensationalistic and invasive media, the documentary provokes and stirs powerful affective responses, including anger and rage, sadness and grief, empathy and compassion. The last scene, set at an AIDS Memorial Quilt display in Washington, has the camera scanning thousands of panels as names of the deceased—men and women, sons and fathers, daughters and mothers, brothers and sisters, adults and children, relatives and friends from all walks of life—are read aloud by different people and in different sections of the display. After reading a list of names aloud, including that of her own son, David, Suzi Mandell walks through the massive display and reminds us:

Too many people . . . too many people . . . too much love gone . . . too much tragedy. I took David’s story . . . and multiply that by the number of panels and it was all so horrendous. Every one of those persons that is represented by a panel is a person who was loved by somebody and that loss, the tremendous loss . . . and I kept thinking of the possibilities for David, what he could have been, what his promise was, and how cut short it was, and again multiply that by the number of panels . . .

If the number of lives lost appears impossible, unbearable, and unfathomable, the viewer is brought in to witness the enormity of the loss one final time with a panoramic view of the Quilt.

The process of witnessing “the naming of the dead” and emoting over these losses does not necessarily constitute progressive political action, as it might give the viewer the fantasy of participation and concern.
Elaborating on this point, Michael Musto suggests that there should be a warning sticker on the Quilt that reads “Don’t feel that by crying over this, you’ve really done something for AIDS.” While viewing the lives—and their loss—in Common Threads might provide the viewer with the personal and collective context to experience grief and mourning, some AIDS activists, such as Douglas Crimp, argue that it is not enough:

The fact that our militancy may be a means of dangerous denial in no way suggests that activism is unwarranted. There is no question but that we must fight the unspeakable violence we incur from the society in which we find ourselves. But if we understand that violence is able to reap its horrible rewards through the very psychic mechanisms that make us part of this society, then we may also be able to recognize—along with our rage—our terror, our guilt, and our profound sadness. Militancy, of course, then, but mourning too: mourning and militancy.

In this sense, mourning and activism are more intertwined than opposed. Just as mourning takes on many forms—individual and collective, public and private—so does activism—social, cultural, political, and academic, to name a few. Together they can generate energy for continuing political work.

**Postscript**

Common Threads was released in the midst of a period of hopelessness, desperation, terror, and despair. The AIDS epidemic was—and still is—advancing at an alarming rate in some of the most disenfranchised communities in the United States, leaving few lives untouched and killing many. The slow government response and the homophobia apparent in biomedical research and AIDS-related services fueled and maintained potent social stigma imposed on people with AIDS. With a focus on loss, I examined the creative and political potentials of bodily, spatial, and ideal remains of the lives depicted in the documentary. While it reinforced and maintained some disempowering notions of the AIDS body, it also opened up new possibilities for thinking about more inclusive, less
heteronormative, and more queer conceptions of the family. With the exception of procreative sexuality, the AIDS body was desexualized but always haunted by its unseen possibilities. The film also maintained the spatialization of AIDS, particularly the association of AIDS with large gay meccas and U.S. inner cities. Although at times it preserved the formula “HIV-positive = AIDS = Death,” there were also moments of disruption of such inevitability. The documentary depicted the five lives living with AIDS as unique and valuable, which challenges the “unreality” and “ungrievability,” to invoke Judith Butler’s terms again, of such lives. In addition, by showing the enormity of loss due to AIDS, Common Threads opens up possibilities for the viewer to mourn and engage in progressive political action.

In spite of the declaration of its “nonpolitical” nature by its creator Cleve Jones, the AIDS Memorial Quilt is a political project engaged in the naming of the unnameable—the lives lost to AIDS—in an era of public silence, social discrimination, and government complicity. Similar to the Quilt’s conversion of “bodies of people with AIDS, coded as frightening, untouchable, and contaminating” into “embraceable and tactile forms that evoke warmth and attraction,” Common Threads transforms the lives with AIDS from a statistical abstraction to embodied multidimensional human beings with all their fragility, character, and potential.

What are the creative and political potentials of the documentary at the end of the third decade of the AIDS epidemic? With the introduction of highly active antiretroviral therapies (HAART) in the mid-1990s, AIDS has changed from a frequently fatal disease to a manageable “chronic health condition,” at least in wealthy nations on the Western Hemisphere. People are still dying of AIDS, but many individuals with HIV/AIDS are living longer and healthier lives. Although the epidemic continues to profoundly affect gay communities in the United States, it is rapidly spreading in communities of color and the poor and killing many of their constituents. Given the simultaneous systems of oppression based on race, class, gender, and sexuality in this country, women, people of color who are also gay, men who have sex with men but do not identify as gay, trans-identified individuals, commercial sex workers, and prisoners, among others, continue to be acutely affected by the epidemic. But AIDS is not simply an epidemic affecting disenfranchised groups in
wealthy nations. AIDS is, and has always been, a devastating disease with a global reach.56

In the current biomedical, political, social, and cultural landscape of AIDS, some of the radical images in Common Threads are quite simply not that radical anymore.57 For example, the radical notion of family depicted by Tom Waddell and Sara Lewinstein—a gay man and a lesbian having a child together—is more visible and commonplace today, at least in large metropolitan centers in the United States. At the same time, the emaciated and ravaged AIDS body has less cultural resonance today. On the other hand, the disruption of the sequelae “HIV-positive = AIDS = Death” has gained greater strength, a product of the combination of medical treatment advances and aggressive pharmaceutical advertising. Finally, the sexuality of AIDS bodies remains highly controversial in the current U.S. cultural landscape. It invokes powerful images of fear and terror. As evidenced by the emergence of topics such as “barebacking,” “bug chasing,” and “the down low,” these images are also endlessly fascinating in the popular imagination. The sexuality of AIDS bodies also reactivates the homophobic fantasy that Simon Watney compellingly describes: “the spectacle of AIDS calmly and constantly entertains the possible prospect of the death of all western European and American gay men from AIDS—a total, let us say, of some twenty million lives—without the slightest flicker of concern, regret, or grief.”58

Reading Common Threads at this moment of history is a journey to the early years of the AIDS epidemic, the quiet activism of the AIDS Memorial Quilt, the ambivalence of witnessing the remains of AIDS that remind viewers of their own personal vulnerabilities and losses, and the “archive of emotions” of the fight against AIDS—both the biomedical and the cultural epidemics.59 It is also a journey of continuing reanimation of past losses in terms of what remains—bodily, spatial, and ideal—to engage their creative and political potential.

NOTES

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loss and its remains. Finally, I thank Dr. Donald Arquilla for his clarity and encouragement as I continue to engage with these losses.


3. Hawkins, “Naming Names,” 764; figures are from the NAMES Project Foundation, “Quilt Facts.”


25. *Common Threads: Stories from the Quilt*.


27. *Common Threads: Stories from the Quilt*.


29. *Common Threads: Stories from the Quilt*.

30. *Common Threads: Stories from the Quilt*.


33. It could be argued that perhaps the producers of *Common Threads* were concerned about the production of what Douglas Crimp calls “phobic images”—that is, pictures “of the terror at imagining the person with AIDS as still sexual.” The power of this terror might indeed turn presumably heterosexual viewers away from the documentary and confirm and uphold their homophobic and sex-negative attitudes and prejudices toward non-heteronormative erotic fantasies and practices. See Crimp, *Melancholia and Moralism*, 106.


35. *Common Threads: Stories from the Quilt*.

36. *Common Threads: Stories from the Quilt*.

37. *Common Threads: Stories from the Quilt*.


39. *Common Threads: Stories from the Quilt*.


43. *Common Threads: Stories from the Quilt*.


45. *Common Threads: Stories from the Quilt*.


55. See, for example, Cathy J. Cohen, The Boundaries of Blackness: AIDS and the Breakdown of Black Politics (Chicago: University of Chicago Press, 1999); Brett C. Stockdill, Activism Against AIDS: At the Intersections of Sexuality, Race, Gender, and Class (Boulder: Lynne Rienner, 2003); Stoller, Lessons from the Damned; Yep, “AIDS/HIV.”
56. Stockdill, Activism Against AIDS; Stoller, Lessons from the Damned; Cindy Patton, Globalizing AIDS (Minneapolis: University of Minnesota Press, 2002).
57. When I write about change, I am not suggesting a progress narrative presuming that “things are getting better” in a seemingly linear and unidirectional fashion. Here I stress the importance of locating change in the dense particularities of its context.