How to Have History in an Epidemic

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In 2006 the California senate approved a bill that would require all public schools to adopt social studies textbooks that portray the sexual diversity of society and avoid material that “reflects adversely” upon a group based on sexual orientation. By proposing this legislation, the bill’s author, state Senator Sheila Kuehl (D-Santa Monica), the first out lesbian member of the legislature, sought to enhance the quality of education for all students and the safety of lesbian, gay, bisexual, and transgender (LGBT) students in particular. Recognizing the “contributions” of LGBT individuals and communities in U.S. history, as the bill espoused, would extend existing state law requiring the “accurate inclusion of ‘men, women, black Americans, American Indians, Mexicans, Pacific Island people and other ethnic groups.’” Though quite compatible with a sanitized, “age appropriate” civil rights model of history, the bill predictably ruffled the feathers of conservative Christian groups and some California newspapers that accused the bill of “political meddling” and a “twisting of
history.” After the state assembly had passed a water-downed version, one that omitted the “positive role model” feature, Governor Arnold Schwarzenegger vetoed the bill, claiming that the phrase “reflects adversely” was too vague.²

Upon hearing the news, I wondered, if the bill had passed, how would public schools have reconciled a state legislated commitment to sexual diversity with an existing mandate (in some schools) to teach abstinence-only sex education? Within such a climate, how might the narration of AIDS activism, including the creation of a safe-sex culture, to which gays, lesbians, bisexuals, and queers have “contributed” immensely, unfold? How might the narration of AIDS, a mode of signification historically hostile (not simply “adverse”) to LGBTQ people, proceed? These questions do not simply go away with Schwarzenegger’s veto of the bill. Indeed, they demonstrate some key rhetorical and corporeal dilemmas that face us, as scholars, students, teachers, and activists, making our way through the third decade of the AIDS epidemic.

In Tangled Memories: The Vietnam War, the AIDS Epidemic, and the Politics of Remembering, Marita Sturken argues that “American political culture is often portrayed as one of amnesia, and the media seem complicit in the public’s apparent ease in forgetting important political facts and events. However, this definition of American culture is highly superficial, relying on evidence of memory in traditional forms and narratives.” Sturken continues by stating her central premise—that “American culture is not amnesiac but rather replete with memory, that cultural memory is a central aspect of how American culture functions and the nation is defined.”³ While cultural memory indeed has proven instrumental to nation building, Sturken’s premise might be difficult to accept for queer historians and activists whose intellectual and political labor continues to demonstrate the manifold ways that sexual dissidents are exiled from the National Symbolic—that archive of icons and images that populate the nation’s storehouse of cultural memory. California’s attempt to expunge from the history books gay and lesbian contributions to political life reflects only a recent attempt to police the boundaries of this “official” repository. Such mnemocide—Charles E. Morris’s provocative term for the “assassination of memory”—contracts the discursive space available for resurrecting a queer past in the service of cultivating contemporary
queer lives and futures. Moreover, nearly three decades of AIDS have “contributed profoundly to the material and political depletion of public memory.” Absent “institutions for common memory,” queer pasts are vulnerable to a counternostalgia that has rewritten the 1970s values of sexual liberation as immature and deadly.4

From a rhetorical perspective, the available means of persuasion are severely compromised if the past cannot serve as a resource for present and future activism. This is especially the case if we define cultural or collective memory, with David Zarefsky, as a “storehouse of common knowledge and belief about history that forms the premises for arguments and appeals.” One need only imagine how differently Martin Luther King’s canonical oration “I Have a Dream” would sound without the ethos of Abraham Lincoln and the nation’s constitutional documents that King summoned on the steps of the Lincoln Memorial during the 1963 March on Washington for black civil rights. By calling upon material from the National Symbolic, King’s speech illustrates, as Bruce Gronbeck observes, the strategic appropriation of the “past for guidance of present-day concerns or problems.” How do activists appropriate a past that is not commonly shared? With few, if any, similarly canonical speeches or manifestoes, and with few, if any, “iconic photographs” that circulate with the same regularity and force as, say, the photo of U.S. soldiers erecting the American flag at Iwo Jima, it is no wonder that ephemerality has been named a hallmark of queer discourse. And it is no wonder that queer scholarship has made a self-conscious “archival turn,” documenting and interpreting material from the past, producing an “archive of the ephemeral,” to be used as resources for future activists and historians “who may want to interpret the lives we have lived from the few records we have left behind.”5

If there is anything like an institution for queer memory, one that is not only publicly accessible but that circulates publicly, it is perhaps the NAMES Project AIDS Memorial Quilt, founded by gay activist Cleve Jones in the mid-1980s for two purposes: to commemorate the lives lost to AIDS, the overwhelming majority of whom were gay men, and to challenge the negligent indifference that characterized the federal government’s response to AIDS. President Ronald Reagan’s infamous silence on AIDS until 1987—six years into the epidemic and nearly 50,000 American AIDS diagnoses and 28,000 deaths (and counting) later—made the need
for such a memorial in an AIDS-phobic and homophobic culture palpable. Since its first display on the National Mall in 1987, the AIDS Memorial Quilt seems to have achieved institutional status. After all, it is repeatedly heralded within the mainstream media as the “most powerful icon in the history of AIDS,” the “world’s most vivid symbol of the enormity of the AIDS pandemic,” and the “most effective and enduring symbol of the fight against the epidemic,” its size “dwarfed only by the magnitude of the epidemic itself.” Arguably the most publicized form of the Quilt—aerial photographs of tens of thousands of panels laid out on the National Mall in Washington, D.C.—accentuate the Quilt’s “spectacular” function: disarming viewers with the sheer enormity of the epidemic. Simultaneously, the individual panels dedicated to loved ones who have died from AIDS have been praised for “humanizing the statistics” and putting a “face on this epidemic.” As Capozzola has put it, “The people memorialized in the quilt are commemorated as unforgettable individuals embedded in social relationships rather than statistical representation of forgotten risk groups.” For its commemorative role, the Quilt is often recognized as offering a blanket of intimacy in the face of cold statistics. For its activist role, the Quilt has been credited with no less than “shaking the government and priming the funding pipeline that has poured billions of dollars into AIDS research.”6 With these credentials, the Quilt would likely make a seamless entry into a California textbook narrating AIDS activism and LGBTQ history.

And yet, splashed among the debate over California’s history curriculum were headlines about “AIDS at 25” years old, a temporal benchmark that brought under scrutiny the Quilt’s relevance within a changing epidemic.7 Calling it an “aging snapshot of the first decade of AIDS, when gay white men were dying in the tens of thousands,” the Los Angeles Times in 2006 pronounced the Quilt’s obsolescence. Out of nearly 6,000 blocks of panels (totaling 40,000 individual panels), the Quilt’s 616 blocks dedicated to women no longer mirrored the demographics of the epidemic in the United States, where women account for 27 percent of new infections, highest among African American women. The 260 blocks memorializing African Americans as of 2006 meant they comprised 4 percent of the Quilt’s blocks, even though African Americans accounted for nearly 50 percent of all new infections.8
Predictions that the AIDS Quilt would fade into obscurity consequently signaled a possible shift in the symbolic value of the Quilt. For Cleve Jones, such predictions are unacceptable in light of staggering rates of new infections. The Quilt, he believes, can counter the perception that AIDS is a treatable, chronic condition, a view he sees prevalent among young people today. Jones’s rallying cry against this complacency represents a growing concern, and shift in rhetorical exigencies, among AIDS educators and activists. Kevin Fenton, chief of HIV/AIDS at the Centers for Disease Control and Prevention (CDC), announced in 2009, “There is a serious health threat to our nation—and that threat is complacency.” Ephen Glenn Colter, one of the contributors to Policing Public Sex: Queer Politics and the Future of AIDS Activism, put the problem this way: “change is epidemic, complacency is the real disease, because it dulls thinking about what kinds of safer sex knowledge are livable in an ongoing epidemic and ever-changing world.” Indicative of the “ongoing epidemic and ever-changing world,” the CDC in 2008 revised its statistics for the rate of new infections in the United States; previously estimated at 40,000 per year, it is now hovering at 56,300 per year.9

Consequently, the juxtaposition of California’s education bill in 2006 with media attention to the AIDS Memorial Quilt that same year produces for me a context in which to ask an additional set of questions about the place of historical claims within the rhetoric of this public health crisis: What might it mean to have a history in an epidemic? How might we historicize an epidemic that is now within Western nations considered a “manageable,” chronic condition (at least for those who can afford treatment)? And why might a sense of the past be important now?

My focus on history within and about the AIDS epidemic is not without precedent. In fact, historians of public health Elizabeth Fee and Daniel M. Fox have argued that AIDS has “stimulated more interest in history than any other disease of modern times.” As their book, AIDS: The Burdens of History, illustrates, this “interest in history,” demonstrated by journalists, scientists, public officials, and professional historians, has been motivated by a desire to know both the social and epidemiological history of AIDS (when and where it emerged). In contrast to Fee and Fox, I am interested in examining the function of history within the rhetoric of AIDS activism—rhetorical appeals to the past and in the
rhetoric of historiography about social movements more broadly. I argue that although the AIDS Quilt would likely make a seamless entry into a California textbook narrating AIDS activism and LGBTQ history, it also poses challenges to the temporality of progress that often underwrites such histories. This is because the Quilt is an artifact of progression, not one of progress. I submit that this is one of its most valuable rhetorical features, but it is also the feature that makes it vulnerable to charges of obsolescence. While the significance of the Quilt can be discerned by analyzing the rhetorical features of the Quilt and its ceremonial displays, the rhetorical and political import of the Quilt can also be fruitfully gleaned from analysis of the media coverage of it. Rather than offer an interpretation of the Quilt panels themselves, then, I examine the discourse of history that circulates alongside the Quilt as the “most powerful icon in the history of AIDS” enters—and recedes from—the mass-mediated public sphere.11

The first section of the essay situates the AIDS Quilt within the context of two competing understandings of history, one that narrates the past as exerting inescapable influence on the present, and the other that narrates the past as elusive. This context helps me demonstrate in the second section of the essay that the Quilt is not only a rhetorical response to the AIDS epidemic, but also a rhetorical response to the historicizing of the AIDS epidemic. Here I analyze U.S. media coverage of the AIDS Memorial Quilt to demonstrate the Quilt’s status as an artifact of progression within an AIDS public sphere, a status that places a drag on narratives of progress. The third section examines accounts of the Quilt’s “diminishing future,” including the controversy over its seeming obsolescence, a topic debated on the pages of the New York Times, the Los Angeles Times, the Advocate, and Poz magazine, inspiring even the creation of independent art. The essay concludes by exploring the implications the Quilt’s status as an artifact of progression has on the study of the history and rhetoric of social movements. I suggest that grappling with the Quilt as a rhetorical figure of progression within public discussions of AIDS activism may require developing a model of history that breaks from historiographies of rupture.
History in an Epidemic

For readers familiar with cultural criticism on representations of AIDS, my speculation about the practice of history in the AIDS epidemic should recall Paula Treichler's book-length chronicle analyzing the discourse surrounding AIDS, How to Have Theory in an Epidemic, as well as Douglas Crimp's essay “How to Have Promiscuity in an Epidemic,” initially published in a special issue of October on AIDS activism. Just as Crimp warns against the moralizing dismissals of desire and sexual pleasure in AIDS education, Treichler highlights the danger of abdicating theory in discussions of the prevention and treatment of HIV/AIDS. In her view, theory leads to practical action. Focusing on debates over the AIDS drug AZT, Treichler argues that out of “available resources [AIDS treatment activism] assembled a complex conception of the body and a multi-layered strategy for rescuing it from disease and death.”

Treichler and Crimp's calls remain as urgent as ever, especially given the accelerated rate of new infections and the virus’ spread around the world. Of course, debates over knowledge production are not restricted to the domain of biomedicine or health; they can also impact historical work, as the recent challenge posed to California's history curriculum helps illustrate. Despite its failure, California’s bill affirms the importance of the project Scott Bravmann calls for in Queer Fictions of the Past: a queer cultural studies of history. Extending queer theory's commitment to challenging “regimes of the normal,” Bravmann proposes that scholarship occurring under the sign of LGBTQ history challenge not only heteronormativity but the academic practices of historiography.

I would add that such work could be explored by turning to invocations of the past within public discourse about AIDS.

Within public and scholarly discourse about AIDS (particularly AIDS in the context of sexual transmission), invocations of the past animate
two competing trajectories. In one trajectory, history is said to exert a gravitational pull on the present, impacting contemporary understandings of AIDS and those afflicted with it. In the other, history is considered an elusive narrative slipping away as time marches on. Each of these trajectories offers a way of thinking about history in an epidemic.

The first trajectory can be found in interdisciplinary studies of AIDS discourse that have well documented the striking resemblance that establishment responses to AIDS in the 1980s bear to prior responses to social epidemics such as cholera and syphilis. In this work, the past functions as a context for understanding the contemporary AIDS crisis. So entrenched in prior sense-making devices, such as iconographies and narratives of disease, some industrialized nations responding to AIDS have become, in the words of historian Peter Baldwin, “slaves to the past.” Baldwin argues that, in the arena of public policy, industrialized nations in Europe and North America adopted different approaches to prevention methods that “corresponded to the preventive tactic they adopted during the nineteenth century” when dealing with cholera, smallpox, and syphilis. Because these divergent responses are due to precedence, he claims, they indicate the existence of a “deep historical public health memory.” Similarly, Fee and Fox argue that AIDS was first historicized as discontinuous from modern history, enabling a plague model of disease to dominate.16

The circulation of this public health memory within biomedicine and popular media has had devastating consequences for women, gay men, people of color, and “foreigners,” as Treichler and Sander Gilman demonstrate. Less indebted to a legal concept of precedence than to a cultural studies concept of “articulation” theory, Treichler shows how the “semantic baggage” within gendered representations of AIDS tend to bear “complex historical burdens.”17 Long-standing images of women as vectors of disease within Western medicine were momentarily resurrected in AIDS discourses and displaced onto female sex workers in the early 1980s, while constructions of AIDS as a “gay disease” or “male disease” rendered information about women’s susceptibility virtually and dangerously invisible. Female-to-female sexual transmission was hardly on the biomedicine radar screen and thus further precluded the gathering of accurate information. Making a similar move in his 1987 essay, “AIDS and Syphilis: The Iconography of Disease,” Gilman shows that the vocabulary of syphilis
provided a lens through which AIDS was understood and the perceived “boundaries of pollution” delimited. By comparing early 1980s media representations of AIDS to artistic renderings of syphilis that appeared in Europe some 500 years earlier, he illustrates the way the stigmatization of STDs and the construction of the diseased body as sexually excessive and “foreign” occurred. So great was the force of history in these narratives that “despite appearances of the syndrome among hemophiliacs and IV drug users, sexual orientation persisted as the defining characteristic of the person with AIDS.” For Gilman, recognizing this continuity between past and present “may not eliminate it,” but it can lead to understanding the “regularity with which it recurs historically.” From this perspective, there is a lesson to be learned about the “burdens of history,” the “inescapable significance of events of the past.” If inventional resources that could intervene within a punitive public health memory are not readily accessible as counternarratives, we remain “burdened,” haunted by the ghosts of history.18

If the first trajectory finds the past inescapable, the second trajectory, by contrast, views the past as elusive. This perspective can be seen in work that crosses both AIDS activism and queer scholarship. Testimony offered by Cleve Jones himself in 1987 is illustrative. He describes how his idea for the Quilt emerged: Overwhelmed by grief upon watching so many fellow gay men in San Francisco, including his best friend, succumb to AIDS, he explains, “I went through a period of real despair. My past has been wiped out. I’ve lost all my friends from my youth.”19 The vanishing past to which he refers is not, significantly, restricted to his own personal history. It is instead very much rooted in the collective loss of a gay culture, a point he develops in his memoir, *Stitching a Revolution*. Jones, a longtime resident of San Francisco’s Castro area, recalls reading newspaper headlines in 1985 that the death toll from AIDS in San Francisco had surpassed 1,000. Since the predominantly gay area of the Castro was disproportionately decimated, there was, he writes, a “deep yearning not only to find a way to grieve individually and together but also to find a voice that could be heard beyond our community, beyond our town.”20

Whereas Jones is impacted by the disappearance of “the familiar faces of the neighborhood—the bus drivers, clerks, and mailmen,”21 AIDS activist and cultural critic Douglas Crimp laments the loss of a
more sexually explicit public sex culture: “Alongside the dismal toll of death, what many of us have lost is a culture of sexual possibility: back rooms, tea rooms, bookstores, movie houses, and baths; the trucks, the pier, the ramble, the dunes.”22 The contracted physical space of erotic possibilities would be further contained with rezoning laws in major urban cities such as New York in the 1990s. The reasons that these losses are lamentable are not trumpeted very easily these days for a variety of reasons: the institutionalization of abstinence-only sex education policies for young people, the lexicon of celibacy and monogamy upon which those policies are based, and a gay media conservatism possessing the power to revise history.

The need to be “heard beyond” the enclave of San Francisco’s Castro is a testament to the towering obstacles impeding the circulation of knowledge about queer lives in the United States. Without “institutions for common memory,” writes Michael Warner, queers lack the resources to circulate the ethics, politics, and pleasures of queer culture. “No institutions—neither households, nor schools, nor churches, nor political groups—ensure that this will happen.”23 What is lost in the process is not only the lively sex culture and accompanying promiscuity to which Crimp refers, but the recognition that it is precisely this promiscuity, not its abandonment, that led to the invention and circulation of safe sex by gay people.24

What these two trajectories can tell about having history in an epidemic has provided a profound nexus for understanding the AIDS Memorial Quilt and its role in AIDS activism. In the first trajectory, the past influences present understandings, such that “having a history” means carrying the weight of the past into the present. As it has played out in the context of AIDS, this has not been an especially liberating form. The second trajectory, however, makes clear that evacuating the present of the past entails some important bodily and affective risks as well.

**Bodies, Memories, and the Quilt**

The AIDS Memorial Quilt, in many respects, can be seen as a response not only to the AIDS epidemic but to the historicizing of AIDS—where
past epidemics function as a burdensome weight and where the past is an elusive, vanishing presence. As a response to the inadequate public health policies underwriting the government’s negligent inattention to AIDS, the Quilt addressed the burdensome weight of the past. In addition to homophobia enabling the federal government’s inattention to AIDS, the historicizing of AIDS as analogous to earlier models of disease also explains this inattention. Reagan reportedly considered AIDS as analogous to “measles and it would go away,” a view his biographer aptly characterized as “halting and ineffective.” While reflecting on his original idea for the Quilt, Jones has written, “When I thought of the quilt, I was thinking in terms of evidence.” He recalls telling a friend, “If this were a meadow and there were one thousand corpses lying out here and people could see it, they would have to respond on some level.” The Quilt’s central commemorative function responds to the sense of the past as elusive—to preserve the memories of the lives lost to AIDS, a purpose captured in the slogan “Remember the Names.” The Quilt reconstituted those killed by AIDS and government neglect as “bodies that matter.” The AIDS Quilt, Jones hoped, would challenge the “nation to speak a new political tongue.”

In 1987, the unmasking function Jones hoped the Quilt would perform went largely unheeded by the federal government, despite the kairotic dimensions of its national debut. The Quilt’s first full display on the National Mall in Washington, D.C., took place during the weekend of the October 1987 National March on Washington for Gay and Lesbian Rights, which was timed to capitalize on the presidential election campaign season. Indeed, for some who visited the Quilt that day, it would seem that the federal government was more concerned about preserving the grass on the Mall than protecting the lives of the country’s citizens. As one visitor remembers, “The National Park Service was on hand to enforce that the quilt was shaken every so many hours so that the grass could breathe. I remember thinking, ‘How typical of our government, to care more about the grass on the Mall than the lives that were lost.’” Within days of the March, Congress passed the Helms Amendment, which prohibited the spending of federal tax dollars on AIDS education programs that “promote or encourage, directly or indirectly, homosexual activities.”
To suggest a causal relationship between the Quilt display and the Helms Amendment, or to call the Quilt a rhetorical failure would be too facile, for the obstacles to generating a sustained federal response to AIDS had long been in place. Testimony from CDC official Don Francis, which he gave before a congressional committee March 16, 1987, is illustrative:

Much of the HIV/AIDS epidemic was and continues to be preventable. But because of active obstruction of logical policy, active resistance to essential funding, and active interference with scientifically designed programs, the executive branch of this country has caused untold hardship, misery, and expense to the American public. Its efforts with AIDS will stand as a huge scar in American history, a shame to our nation and an international disgrace.31

National print and television media arguably exacerbated the neglect. In their analysis of nightly television news about AIDS, Timothy Cook and David Colby suggested that television’s relative silence on AIDS until 1983—two years into the epidemic—and its subsequent ebb and flow of stories “enabled the government to overlook the gravity of the epidemic.” Between 1987 and 1989, the number of nightly news AIDS stories decreased by half. “So scarce were the stories about AIDS in the late 1980s and early 1990s that the September 24, 1991, headline in the weekly health supplement of the Washington Post asked, “Whatever Happened to AIDS?”32

As a strategic response to the historicizing of AIDS as analogous to epidemics of the past, the Quilt functioned to document the progression of the epidemic. As an artifact of progression, the Quilt functioned to place a drag on the temporality of progress that often characterized public discussions of AIDS. Cook and Colby argue that beginning in 1983, television networks, like news magazines, started to “express cautious hope, reassuring the audience that scientists were inexorably progressing toward a treatment, cure, or vaccine.”33 The progression of the epidemic, as illustrated by the Quilt’s growth, runs counter to the cultural practice of telling progress narratives.

Commonly found in media accounts of the national displays in Washington is the exponential increase in its size from its initial full display.
What was once described as a “giant quilt” of 1,920 panels, spanning the length of “two football fields” in 1987, became 40,000 panels in 1996, an “exhibit the size of twenty-four football fields.” Calling attention to the growth of the Quilt had already begun by its second national display in 1988, when it was “five times bigger” than the one in 1987, the size of “nearly eight football fields.” Having “grown with dizzying speed,” the Quilt was, in 1992, “more than 10 times the size it was during its first display in Washington five years ago.” Writing for the New Republic, Andrew Sullivan observed that it had grown so large that it could no longer be contained within the Ellipse in front of the White House. “At 26,000 panels, it filled most of the vast space between the Washington Monument and the Reflecting Pool.” Such growth would no doubt earn the Quilt its reputation as a “potent symbol of the continuing epidemic.”

The Quilt has also circulated as a symbol of continued government inattention to AIDS. Capturing both the continued expansion of the Quilt’s size and the continued neglect, the San Francisco Chronicle’s coverage of the 1996 display reported: “The Reagan White House ignored the 2,000 [panel] quilt display brought to Washington in 1987, as well as when it grew to 8,000 panels in 1988. The Bush White House paid it little attention as it expanded to 11,000 panels in 1989 and 20,000 in 1992.” The persistence of the Quilt—the way it continued to return to Washington for displays in 1987, 1988, 1989, and 1992—is a feature the Los Angeles Times described in its coverage of the 1992 display as a model of American citizens’ “refusal to be silent in the face of government inadequacy.” The Quilt becomes as much a measure of resilience as it is a measure of the government’s negligence. Descriptions of some of the panels also draw attention to discrimination, cultural indifference, and government inaction. The San Francisco Chronicle, for example, explains that a panel made for Joe Del Ponte features a picture of him “holding up a sign that read[s], ‘Homophobia Kills, Cure Hate, Stop AIDS,” with the White House standing behind him. The New York Times describes a different panel depicting a “syringe dripping with blood and bearing the words, ‘Another Victim of 3rd World Genocide.’”

In short, media accounts of Quilt displays occasion assessments of failed progress. This is true even in accounts of the 1996 display, which is commonly regarded as a turning point in the history of the Quilt and AIDS
activism, as it was the first time the Quilt was visited by a president of the United States. Bill and Hillary Clinton both walked among the panels, finding panels dedicated to friends they knew. In his memoir, *Stitching a Revolution*, Cleve Jones remarks that the 1996 display was the first time he felt hope, a feeling occasioned in part by the president’s visit to the Quilt. About that year’s display, the *New York Times* similarly announced: “for the first time” the grief that blanketed the Mall was “tempered by the growing hope that AIDS might be transformed into a manageable disease through antiviral drug therapies and genetic research.” This hope radiated from David Varala, an HIV-positive man visiting the Quilt in 1996 for World AIDS Day. He told the *San Francisco Chronicle* that “we’re seeing an incredible change.” “No more chemo. No more IV infusions. I’m moving to pills.” After seven months of protease inhibitors, he had become virtually asymptomatic. The *Washington Post*’s coverage of the 1996 national display of the Quilt also celebrated the new AIDS drugs for their “dramatically slow[ing] the course of the disease and even seemingly revers[ing] its effects.” And yet a crucial difference between the *New York Times* and the *Washington Post* articles is that the latter counters a narrative of hope with a narrative of the fatality of AIDS. After explaining that “many people live seven, eight, 10 years or longer with AIDS” because of the new drugs, the *Post* points out, “but it still kills: sooner, in the case of some; later for others. There is no cure.” The fatality of AIDS is imagined as inevitable, just a matter of time. This feature of AIDS was a chief reason one high school teacher used to explain why she organized a field trip for her students to visit the 1996 Quilt display on Youth Day. She stated, “We want them to realize that right now AIDS is 100 percent fatal, but it’s also 100 percent preventable.” Obvious though it may be, the Quilt facilitates the perception of AIDS as a death sentence, a view that by 1996 was beginning to compete with the emerging historical model of AIDS as a chronic, manageable disease. Thus, despite the optimism circulating in 1996 due to the president’s visit and the availability of protease inhibitors, the Quilt’s contribution to the AIDS public sphere that year served in part to interrupt these political and scientific advancements.36

The *San Francisco Chronicle* perhaps goes even further than the *Washington Post* by tempering a narrative of hope with a sobering narrative of the global epidemic AIDS has become. Its byline, “Despite
progress, epidemic spreading,” captured the ambivalence that springs from a mixture of optimism and despair. While new treatment options gave Western nations reason to hope in 1996, the San Francisco Chronicle reminded its readers that, according to the World Health Organization, AIDS was “spreading at an explosive rate in developing countries, especially those in Asia and Africa, home of 63% of the world’s estimated 23 million HIV-infected people.” In recognition of World AIDS Day, it continued, Uganda newspapers reported a decline in the number of new cases since a nationwide effort had encouraged men to use condoms, whereas in Paris, AIDS activists displayed signs reading, “Zero equals the number of AIDS survivors.” Also cited was Robin Avant, an African American woman who worked for the San Francisco AIDS Foundation. She pointed out that “black and Latino women are the fastest-growing group of new AIDS cases in [the United States].” Testimony from the executive director of the NAMES Project, Anthony Turney, concluded the Chronicle’s coverage of World AIDS Day with a sobering account made possible by the AIDS Quilt. He recalled that in 1987 the Quilt comprised 40 panels displayed in San Francisco’s Civic Center. In 1996 it had 39,000 panels and weighed forty-six tons, a stark reminder that “in his office he sees evidence that the struggle against the pandemic is far from over.” This textual globetrotting through Uganda, France, Thailand, and the United States reveals uneven results of AIDS activism. In the process, a drag is placed on attempts to mark progress on the commemorative World AIDS Day.

In this way, the discourse is burdened not by representations of past epidemics, as in other AIDS discourses described earlier, but a cautionary reminder that this continues to be a worldwide struggle. In their analysis of network television nightly news, Cook and Colby argue that the media’s coverage of AIDS between 1983 and 1989 generally followed an “alarm-and-reassurance” pattern, whereby stories would lead off with dramatic fear tactics and conclude with reassuring stories that quelled fears of the epidemic, usually by reporting on advancements in treatments or research on a cure or vaccine. Accounts of the Quilt displays tend to alter this trend, shrinking the discursive space for reassurance by interrupting the forward march of progress. As the “most powerful icon in the history of AIDS” enters—and recedes from—the mass mediated public
sphere, the reputation of the Quilt as a symbol of a continuing epidemic would become more difficult to sustain.

From Large to Largely Forgotten

Even before the accounts of “AIDS at 25” had questioned the Quilt’s relevance in AIDS activism, the Quilt’s ability to circulate had already become an issue. The twin forces of expansion and ephemerality are said to threaten the circulation of the Quilt, and thus its continued function as both a memorial and educational tool. Despite serving as one of its greatest rhetorical resources, the Quilt’s increasing size has been cited as reason to halt its future display. As early as 1989, two years after its first full display in Washington, D.C., activists and journalists predicted that soon the Quilt would be too large to display in its entirety. The 1989 headline of the Washington Post read, “Ever-Growing AIDS Quilt Set for Finale.” Michael Bento, board member of the National Capital chapter of the NAMES Project, was quoted as saying, “as with the epidemic, [the Quilt] outpaced our ability to keep up.” Another affiliate concurred, stating, “now it’s just growing too large to show the whole thing.” In 1996 the Washington Post predicted that that year’s display might be the “last time any one site will be able to accommodate the ever-growing memorial.” By 2006 it weighed in as a “54-ton albatross,” burdened by the weight of its own history.39

Activists and journalists alike have worried not only about expansion but its ephemerality—the Quilt’s durability as panels decay from age or from exposure to rain or sun. Unlike its granite or marble counterparts, the Quilt, when displayed, is more vulnerable to the elements. From this vantage point, it is, as Flavia Rando puts it, “transient, perishable, conditional.” This aspect of the Quilt has led, in part, to the personification of the memorial. For example, one reporter at the 1989 display who found himself overwhelmed by the fourteen acres of Quilt observed, “So delicate and vulnerable to nature’s elements, each fiber became the very embodiment of the AIDS victim that it represented.” Evelyn Martinez, one of the Quilt repair crew members at the time, similarly reflected on its frailty. Though she worked full time on the panels, she “always feel[s] like they
are not going to hold up. It’s as if they were human beings. As they get
closer, they begin to fall apart.” Restoring them, therefore, becomes more
than an act of memorializing; it is an act of caregiving.40

Nearly twenty years later, the need to mend panels was a focal point
in a front-page story of the Quilt in the Los Angeles Times. For the Times,
the literal withering away of the Quilt is analogous not only to the bod-
ies of those who have succumbed to AIDS, but to the Quilt’s place in
history. The byline reads, “Once a mighty symbol of love and loss, the
tribute to victims with AIDS had gone from large to largely forgotten.”
In a story mostly centered around the Quilt’s dedicated seamstress of
nineteen years, Gert McMullin, the Los Angeles Times leads off with a
description of McMullin hunched over a panel, repairing a section of
the Quilt’s “fraying edges.” “There are some spots that are really faded,
that you can barely see anymore,” she explains. Like Evelyn Martinez,
McMullin personifies the Quilt panels, calling them her “boys.” These
panels are reportedly where “all [her] friends are.” Late at night, when
tired or depressed, she sometimes, we are told, “climbs into the shelves,
covers herself with a section of quilt and falls asleep.” To be touched,
cloaked, and comforted by her “friends” is to be blanketed in affective
and corporeal intimacy. In this scenario, the direction of caregiving reverses
itself. It isn’t the panel deriving care from the Quilt repair worker, but
rather the Quilt repairer deriving comfort from “her friends” who literally
blanket her. The logic of this narrative implies that to forget the Quilt is
to forget those who died from AIDS. Moreover, if the panels symbolize
friends from her past, as they do for Cleve Jones, the past in this scenario
reaches into the present moment. The role it is said to perform, however,
is primarily a therapeutic one inside the warehouse where the Quilt is
stored, invisible from the public eye. Such a role allows the Los Angeles
Times to narrate the Quilt as forgotten and increasingly out of step with
the changing face of AIDS.41

Despite its preoccupation with restoration narratives, the Los Angeles
Times nonetheless invokes the Quilt’s alleged growing obscurity: “The
Quilt has gone the way of AIDS itself in the United States—swept into
the background as new drugs have driven down the death rate here
and shifted the epicenter of anguish abroad, where the disease kills 2.8
million people a year.” Mending a wounded panel is depicted as both
important and less important as advancements in science seemingly call the Quilt’s value into question. Like the bodies whose lives it honors, the Quilt purportedly faces a “diminishing future.”

The Quilt resists usage in AIDS activism, not merely because it is too large, too fragile, or too expensive to display, but because it cannot be folded easily into a chronic model of disease. If AIDS is historicized as a chronic ailment, we recognize that “we are dealing not with a brief, time-limited epidemic but with a long, slow process more analogous to cancer than with cholera,” and that treatment options would more likely extend life than offer a cure. Fee and Fox date the widespread acceptance of this historical framing among medical professionals to June 1989, at an international AIDS meeting in Montreal. In their 1992 book, AIDS: The Making of a Chronic Disease,” Fee and Fox argue, “As contemporary perceptions of AIDS change, so too does its history; historical accounts that at one time seemed most relevant to understanding the epidemic need to be replaced by new interpretations.” The adoption of this newer historical model has not been without rhetorical consequence, for it has fueled the debate over the Quilt’s seeming obsolescence.

Forgetting the Quilt

In his September 2000 article in Poz, David Groff summarized what were still popularly held beliefs about the Quilt: “Whether you think of it as America’s largest work of folk art or biggest piece of AIDS kitsch, moveable cathedral, international cult or do-rag of death, there’s no arguing that Cleve Jones’ brainchild, the AIDS Memorial Quilt, is not only the epidemic’s most recognizable symbol but probably its most enduring.” Despite continued references to the Quilt as the “most enduring” symbol of the AIDS epidemic, its relevance within AIDS activism has fallen under scrutiny. Commentators and activists alike have made the case for the Quilt’s obsolescence by depicting the Quilt as temporally backward, a relic of the past. Characterizations of the Quilt as a relic highlight both the Quilt’s connection to gay men and history and consequently its seeming irrelevance. As such, it is depicted as incapable of adequately addressing the needs of today’s activism.
One primary strategy used to question the Quilt’s utility as a rhetorical tool is to characterize it as a memorial that no longer mirrors the changing face of the epidemic. In 2006, NAMES Project Executive Director Julie Rhoad cited the Quilt’s representational makeup as a “political problem” associated with displaying the Quilt. The fact that it does not “represent the current face of the epidemic,” she explains, is reason not to pursue full displays of the Quilt.45 Because the current face of the epidemic now disproportionately includes African Americans and heterosexual women, the Quilt, she implies, is too gay, white, and male. Although she also cites financial limitations affecting the organization’s ability to display the Quilt in full, the “political problems” she sees would arguably still exist absent the financial constraints. The more recent concern with the Quilt’s representational makeup manifested in 2004, when the NAMES Project decided not to go forward with plans to display the full Quilt in Washington, D.C., prior to the 2004 presidential election. Former NAMES Project manager Mike Smith defended the decision, stating, “I don’t think it is appropriate to do big Quilt displays these days. . . . It needs to go to the communities where the epidemic is spreading.”46 Since Washington, D.C., is one such community where the epidemic is spreading, particularly among African Americans, Smith’s opposition to full displays appears to rest on the assumption that more can be accomplished if the Quilt is segmented into smaller displays targeted to the communities currently affected by AIDS. Accordingly, in 2004, for National HIV Testing Day in June, the NAMES Project elected to display the 1,000 panels made since 1996, when it was last displayed in full.47 Thus, Smith’s logic suggests that the pre-1996 Quilt’s representational makeup conflicts with, if not hinders, contemporary AIDS activism. This is a striking conclusion given that the CDC reports that male-male sexual contact is still the leading cause of transmission for all adults and adolescents (53 percent) as of 2006, the last year for which figures are available; and that of all male adults and adolescents, 72 percent of men diagnosed with HIV or AIDS contracted the virus through male-male sexual contact.48

A one-hour 2006 ABC television news report titled “Out of Control: AIDS in Black America” likewise questioned the Quilt’s role in AIDS activism due to its representational makeup.49 Although the majority of the report examines reasons for the lack of public attention to AIDS
among African Americans, the news report ends with a segment on the Quilt. “Remember the Quilt?” asks the narrator, while aerial photographs of the Quilt from the 1996 display on the National Mall appear on screen. Shots of visitors walking slowly among the panels, and close-ups of panels themselves, function to corroborate the narrator’s claim: “But the Quilt, even then, represented only a fraction of the number of Americans that died of AIDS and most of the faces were white.” The segment then cuts to close-ups of the inside of the building, where the Quilt now resides, “tucked away in a non-descript warehouse in Atlanta.” By showing only the aerial photos of the last full display and then shots of the Quilt “tucked away,” the segment lends credence to activists’ critique that the NAMES Project has let the Quilt languish in Atlanta. Indeed, the narrator points out that the Quilt’s invisibility is a “reflection of the attitudes of most Americans toward AIDS—that it’s no longer an issue in this country, not something we have to worry about. But this year, nearly 20,000 Americans will die of AIDS and most of them will be Black.” At the same time, however, it casts doubt on the Quilt’s ability to reach “communities where the epidemic is spreading,” because it is too white.

As these critiques of the Quilt’s representational features begin to suggest, what also contributes to the perception of the Quilt’s obsolescence is its attachment to white gay male lives and history. This connection is advanced most explicitly by the Los Angeles Times, which describes the Quilt as an “aging snapshot of the first decade of AIDS, when gay white men were dying in the tens of thousands.” Moreover, it points out that in 2005, the NAMES Project received 609 panels, the “majority of them for gay men who died in the 1990s.” Because we are told that the panels, which “once arrived by the thousands each year, now trickle in at a few dozen a month,” 609 panels for an entire year seem substantially small. Why has the flow of panels ebbed? The reason the Times offers is the advent of antiretroviral drugs in 1996 that significantly extend the lives of people with AIDS: “More than any factor, the drugs have transformed the quilt.” With the “annual deaths [of Americans] peak[ing] in 1995 at 51,000, [t]he desperation that had driven the growth of the quilt seemed to fade away. New panels stopped arriving in large numbers,” and “so did the donations of $200 or more that often accompanied them.” Gay men and their families and friends are described as the major source of
fund-raising for the Quilt. Absent their support, the Quilt has seemingly remained frozen in time, an “aging snapshot.” The Quilt, which once grew feverishly as the epidemic grew, now is portrayed as a relic. The ABC report on “AIDS in Black America” furthered this image of the Quilt by using footage from the 1996 display in Washington, D.C., to illustrate the Quilt’s association with gay white men, despite the availability of the more recent display in 2004, in which the 1,000 panels made since 1996 were shown on the Ellipse for National HIV Testing Day.

Not only is the Quilt portrayed as a relic, those who advocate for displaying the Quilt in full are discredited as chasing the past. This can be seen in debates over the NAMES Project’s small-scale displays of the Quilt. To refute charges that the Quilt simply languishes in a warehouse in Atlanta, Julie Rhoad points out that the NAMES Project “tripled the display activity of [the] Quilt” since moving to Atlanta. This has been achieved by loaning sections of the Quilt to hundreds of schools, places of worship, charities, and companies each year. Nevertheless, this smaller scale circulation has garnered criticism. As the Los Angeles Times put it, “those who want to rekindle the fire of the past say parceling out the quilt for tiny displays is like letting a sword rust in its scabbard.” Here, the Times refers largely to Cleve Jones’s efforts to display the entire Quilt in 2004 before the presidential elections. About the NAMES Project’s decision not to display the Quilt at that time, Jones argues, “The people with the Quilt have a weapon that they have decommissioned.” Casting the desire for a full display of the Quilt as a “rekindling [of] the past” implies a less serious rhetorical and political act, as if such a display is merely “for old time’s sake.” Here, the past is understood as an impediment to progress rather than a viable rhetorical resource for social change.

Accordingly, some activists render the Quilt obsolete by locating its rhetorical value in the past, thereby questioning its relevance in today’s AIDS activism. For example, San Francisco AIDS activist Michael Petrelis argues, “The quilt was very effective in the late 80s and early 90s for AIDS awareness.” Similarly, Robert McMullin, executive director of the Stop AIDS Project, said the Quilt, like the red ribbon campaign, “might have ‘lost its punch’ over time.” Neither McMullin nor Petrelis name the Quilt’s perceived representational shortcomings—that it does not represent the changing face of the epidemic—as reason to question its utility
in AIDS activism today. Instead, they use the Quilt’s status as a memorial to do so. For Petrelis, the Quilt’s memorializing function competes with other, more pressing priorities: “There’s hundreds and thousands of people that need a housing subsidy, just trying to keep a roof over their head. Should we be putting our time and money into another vigil? I don’t know.” Similarly, for McMullin, whose organization focuses on HIV prevention among gay, bisexual, and transgender men, “The quilt is about loss.” “And while people are still dying,” he continues, “for most of us, the most important part of our message may not be about people dying.” Even if the Quilt were to mirror the current face of the epidemic, such a representational change most likely would not satisfy those who believe the Quilt’s message is about dying.52

To rescue the Quilt from charges of obsolescence, advocates point to the Quilt’s role in an AIDS public sphere and less to its status as a memorial. Cleve Jones, for example, counters these charges by contending, “It’s not intended as a passive memorial.” Indeed, the Quilt’s ability to both participate in and generate contexts of safe-sex education is elided in the reasoning used by Petrelis and McMullin. Significantly, as Jones makes the case for the Quilt’s continued relevance, he shifts the terms of the debate from the language of “vigil” to the language of “vigilance,” advocating, “We have got to constantly be vigilant against the idea that AIDS is over—that’s what the quilt can do, particularly for young people who think this is just a treatable chronic condition.”53 For Jones, maintaining vigilance means using the Quilt for two purposes: preventing new HIV infections and pressuring political and medical institutions to develop new drugs to treat those who are already infected. If “vigil” privileges the Quilt’s memorializing function, “vigilance” privileges the Quilt’s activist function, serving once again as a stark reminder that the epidemic is far from over. Placed in these terms, Jones shares more in common with Stop AIDS than on first glance, as both are committed to HIV prevention measures, in particular combating the perception among gay men that AIDS is treatable.

In addition to using the Quilt to prevent new infections, Jones seeks to recommission the Quilt to battle bureaucracy within the institutions that oversee the creation and distribution of new drug treatments. As a veteran of earlier AIDS activism, Jones anticipates that there “won’t be
more effective drugs to treat HIV if we don't keep the pressure on the system that creates them.” On one hand, his argument reflects knowledge of the gains borne of AIDS activism from earlier decades, when getting “drugs into bodies” was a key goal, but it does not answer the critique that the Quilt may have limited ability in achieving these goals. Nonetheless, the need to pressure the system is a view corroborated by more recent testimonials from doctors who specialize in HIV/AIDS medicine. For example, Dr. Michael Gottlieb, the author of the CDC’s now famous 1981 *Morbidity and Mortality* article documenting the “first” cases of AIDS, was quoted in the *Los Angeles Times* series on “AIDS at 25” as saying, “I’ve always looked at AIDS therapy as a series of leaky lifeboats. . . . You stay in the first one until you’re sinking, then you jump to another one. But you don’t give up looking for others.” Whether the “you” he refers to are patients or doctors (or both), the metaphor of “leaky lifeboats” emphasizes the scarcity of resources—including time—for extending the lives of people with AIDS.

For some advocates, limiting the Quilt’s circulation to small-scale displays signifies a re-silencing of the disease. This is a view found in the pages of *Poz*, a magazine for HIV-positive readers, in response to the NAMES Project’s decision not to show the Quilt in full in 2004. Concerned with the transmission of HIV among crystal meth–using men who practice unsafe sex, one reader responded to the news of the decision by arguing the following:

I am disgusted that the NAMES Project is refusing to tour the AIDS Quilt—locking it up and showing only a few sections here and there, as if that will impact anything. . . . [D]on’t the Quilt handlers think the loud statement and free press from a full display would be a wake-up call? They have decided to silence more than a million voices when these voices need to be heard. Someday, my name may end up as a patch on that Quilt, and I’ll be damned if it will be kept silent.

For Andrea Bowers, a Los Angeles–based feminist visual artist, the lack of publicity paid to AIDS now that women, especially brown and black women, constitute a significant percentage of HIV/AIDS diagnoses also signifies a re-silencing of the disease. Her video installation, *The Weight*
of Relevance, includes a three-part video segment of the inside of the NAMES Project warehouse, where stacks and stacks of folded panels sit. Departing from the mainstream news media coverage, Bowers’s video does not reproduce the spectacular aerial photographs of the Quilt that we have become accustomed to seeing. Nor does her video include any footage of an unfolded Quilt. Instead, she juxtaposes documentary interviews with NAMES Project staff members with still photographs of folded Quilt panels in storage. Her strategy to depict the Quilt as “still life” while staff members discuss the shifting demographics allows her to call attention to the simultaneous spread of the epidemic among women and a furled Quilt. Denying viewers images of the Quilt unfurled echoes Jones’s concern that the NAMES Project has “decommissioned the most powerful weapon against AIDS.” Unlike Jones, however, Bowers indicts a culture that has once again allowed AIDS to disappear from public eye at the precise moment when ethnic minority women are among the fastest growing demographic affected. Of course, her use of slow-moving still-photography images of the Quilt in storage obscures the fact that the NAMES Project sends out sections to hundreds of organizations each year. Like Jones and others, she implies that these smaller sectional displays are insufficient in the continued fight against AIDS.

The critique of the NAMES Project’s smaller displays negates the importance of those displays to its HIV prevention education programs. In 1995 the NAMES Project rebranded itself by announcing, in the words of then Executive Director Anthony Turney, “Two or three years ago, the quilt was a memorial, a means for grieving. Today, we have a much more active role to play in ending the epidemic.” About the NAMES Project’s plans to rebrand the identity and purpose of the Quilt, a 1995 article in the San Francisco Chronicle, “The AIDS Quilt Comes of Age,” stated that the Quilt had been “transformed from an icon of mourning and emotional reaffirmation into a powerful, pragmatic instrument for prevention and education programs about AIDS.” Since 1994 the NAMES Project has conducted its outreach programs to high school and college campuses, reporting success with stimulating young people’s knowledge of transmission and prevention. Its revamped National Youth Education Program reaches young people in both schools and community centers. And in 1999, with Coretta Scott King as keynote speaker, the NAMES Project
launched its nationwide Historically Black Colleges and Universities Tour, which included Quilt displays as well as HIV prevention education, on-site testing, and counseling, a program that is now formalized among the NAMES Project’s ongoing educational efforts.59

This educational role of the Quilt, pursued in displays smaller than those on the National Mall, is all but absent in the debates over its obsolescence. When once the smaller displays signaled the Quilt’s “coming of age,” they now register the Quilt’s diminishing role in AIDS activism. The smaller displays do not produce the spectacular aerial photographs of the Quilt laid out on the National Mall, but they do allow the Quilt to enter more intimate spaces and temporalities of the everyday. This mode of circulation can create contexts for AIDS awareness and education that may not otherwise occur, a need that is palpable today in light of the prevalence of federally funded abstinence-only sex education programs.

The same “AIDS at 25” Los Angeles Times article that pronounced the obsolescence of the Quilt also announced that the NAMES Project had recently written a new strategic plan, suggesting that the Quilt has “outgrown its activist roots and should now serve as an inspiration to those living with AIDS.”60 Because the Times does not go on to explain how the NAMES Project intends to enact its strategic plan, the future of the Quilt is cast as bleak.

Consequently, those who believe the AIDS Memorial Quilt’s message is primarily “about dying” may doubt the Quilt’s ability to fulfill the NAMES Project’s new strategic plan to be an “inspiration to those living with AIDS.” They might instead find the Southern AIDS Living Quilt more suited to this goal.61 Launched in October 2008 as a project of the Southern AIDS Coalition, the Southern AIDS Living Quilt is an online quilt featuring stories of women living with HIV and AIDS in the South, the region of the United States with the highest number of adults and teenagers with HIV and AIDS, and where AIDS is the leading cause of death for African American women between ages twenty-five and thirty-four. In contrast to the AIDS Memorial Quilt, the Southern AIDS Living Quilt features people who are living with HIV and AIDS. It also distinguishes itself from its NAMES Project counterpart in form; rather than a fabric quilt, it is an online video quilt, “stitched” together via the technologies of video editing and Web site design. In these video
“panels,” HIV-positive women, most of whom are African American or Latina, testify to what it means to them to be HIV-positive, making this both a visual and an oral history project.

As many testify to living with HIV since the 1980s and the importance of “knowing your [HIV] status,” the women featured on the panels literally embody the organization’s commitment to “empower, encourage, and educate.” Currently featuring over 100 video “patches,” the Living Quilt does not seek to reach its audience through its size and scale, as the AIDS Memorial Quilt does, but through its audio/video testimony. Rich in hope and optimism, the testimonies in many of the panels I viewed compare AIDS with diabetes or a similarly chronic condition, adopting a chronic model of disease. Rather than attest to continued fatalities, then, the memorial’s growth will confirm the continued spread of infections among women in what is now the hardest-hit region of the United States. It remains to be seen whether or how the Southern AIDS Living Quilt might inform the future displays of the AIDS Memorial Quilt as the latter seeks to inspire those living with AIDS.

History Revisited

By discussing the AIDS Memorial Quilt as an artifact of progression, I have been gesturing to temporality as a key rhetorical feature in AIDS activism, AIDS discourse, and in social movements more broadly. Indeed, temporality shapes our understanding of AIDS. This is evident in its classification as an “epidemic,” a term describing the rapid progression of a disease through a population. The rate at which HIV-infected bodies succumb to AIDS has also marked public narratives about AIDS. Progress is measured by the speed with which scientific developments occur and by the slowing down—if not complete arrest—of the epidemic. Like speed, duration is a central temporal logic. Expanding the life expectancy of an HIV-positive person is an indicator both of a drug’s success and one’s access to those drugs. The publication of “AIDS at 25” and other milestone stories bespeak the continued need to mark the duration of the epidemic.

At the heart of the debate over the Quilt’s seeming obsolescence is a temporal conflict. Despite continued “advancements” in scientific
knowledge—or perhaps because of these advancements—AIDS activism, including the AIDS Memorial Quilt, is placed in a curious rhetorical position. The availability of the chronic model of disease and the very drugs that have extended life have made it more difficult to engage in the crisis rhetoric that fueled much of the first fifteen years of activism. If, as James Darsey argues, AIDS catalyzed a shift in the rhetoric of the gay liberation movement, making appeals to health a significant priority, then the advent of antiretroviral drugs in 1996 signals a subsequent catalytic moment, altering the temporality of AIDS discourse and the temporality of AIDS activist rhetoric.62

Consequently, if we read the AIDS Quilt as a response to the historicizing of AIDS as a plague, we can begin to understand how the displacement of that historical model with a chronic model of disease produces its own set of rhetorical entanglements. As a “potent symbol of continuing epidemic,” the Quilt’s continued growth has been a recurrent feature of public discussion of the national displays. It once grew with “dizzying speed.” If panels now only “trickle” in, the Quilt risks losing its reputation as a “symbol of a continuing epidemic.” But if it does circulate as a symbol of a continuing (and fatal) epidemic, it makes itself vulnerable to charges of obsolescence, as it competes with the prevailing view that AIDS is a chronic, manageable condition.

To view the AIDS Quilt as representationally flawed because of the number of panels dedicated to gay white men is to miss the way it is marked as temporally “backward” within AIDS activism. Indeed, the perception that it has failed to keep up with the “current” face of AIDS only reinforces its status as “backward.” Queer scholar Heather Love offers the term “backwardness” as both a queer historical structure of feeling and a model of historiography. She argues, “it is important to note the persistence of conditions that lead contemporary queers to experience their identity through the modalities of shame, secrecy, and self-hatred.” By drawing our attention to the ways that pre-1970s liberation era feelings such as shame and stigma still manifest in a postliberation era, Love builds a persuasive case for a “model of history that sees a less defined break between past and present.” She proposes this model of history as a challenge to an “affirmative historiography” and to a politics of affirmation that underwrites queer critics’ attempts to turn shame into a creative,
performative force. One way critics and historians produce an affirmative historiography is by “illuminat[ing] isolated moments of resistance in the larger story of homophobic oppression and violence.” California’s textbook legislation could be regarded as promoting an affirmative historiography, one that narrates acts of resistance by LGBTQ people, such as the 1969 Stonewall uprising. In such a narrative mode, the discourse of pride replaces a discourse of shame that all too often circumscribes experiences of queer people and people with HIV/AIDS.63

By contrast, to account for “bad feelings” would require a mode of narrating history that cannot be subsumed under a “progressivist view of history.” By grappling with negative affects such as shame and loss, we can “find the clues to understanding the social, corporeal, and affective difficulties of queer existence.”64 While shame, loss, and mourning shape encounters with (and critical studies of) the AIDS Quilt, accounting for the persistence of these feelings may not be the only reason to question a progressivist model of history.

Accounting for the persistence of the AIDS epidemic in an era in which HIV is considered a “manageable” condition is also reason to question a progressivist model of history. If the development of drugs that prolong the health and lives of those with HIV is leading to complacency in some communities, as Cleve Jones and other AIDS activists suggest, is this progress? When lives in the United States and abroad hang in the balance of AIDS research and government funding of that research, we cannot afford to refuse the trope of “progress.” But it is worth elaborating and questioning both the rhetorics with which we seek such advancements and the rhetorics that historicize such activism. I have sought to do so by discussing the Quilt as an artifact of progression. By accounting for the AIDS Quilt as an artifact of progression, one that is, like the preliberation literary texts Love analyzes, marked as temporally backward, I have highlighted the Quilt’s ability to interrupt progress narratives endemic to both science and LGBTQ history and explained how the most “enduring” symbol of the epidemic could paradoxically recede from public view.

Casting the Quilt’s changing roles in AIDS activism in metaphors of development has not produced long-term benefits. When the Quilt was said to “come of age” in 1995, it acquired a more activist status by designing the youth HIV education programs. This is a shift that mimics
the trope of “maturity” within historical narratives about the gay and lesbian movement “maturing” from sexual liberation to activist issues such as same-sex marriage, a shift that has also been accompanied by AIDS declining in priority. Given this developmental logic, we could anticipate the rhetoric that suggested the Quilt had “outgrown its activist roots.” If the Quilt came of age in 1995, then it seemed to have entered its golden years by 2006. In 2006 the Los Angeles Times linked the “activist roots” of the Quilt with immaturity by suggesting the organization had “outgrown” them. By implication, the Quilt’s current role as a “curator of history” becomes associated with maturity. Given these rhetorics of development, it is no wonder the Quilt faces the possibility of retirement. As Cleve Jones reminds us, though, to retire the Quilt in a permanent home while the AIDS epidemic persists, as the NAMES Project once considered doing, would be like “building a Holocaust Museum in 1939.”

In 1995 Anthony Turney, then executive director of the NAMES Project, announced that the foundation’s mission “is to put ourselves out of business.” The idea that the NAMES Project would aim to put itself out of business, while fittingly hyperbolic, nonetheless implies that the Quilt will lack purpose once there is a cure or vaccine. After all, there wouldn’t be a need to use the Quilt as an activist tool, no need to remain “vigilant.” What might become of the Quilt if a cure or vaccine does become available? Assuming something like the NAMES Foundation still exists to accept panels and add them to the archive, the Quilt could realistically continue to grow even after the “end of AIDS.” In this way, the Quilt could still assert its status as an artifact of progression. Perhaps then it would symbolize even more than it does now the government neglect and cultural indifference that has marked the long history of this epidemic.

NOTES

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1. Kuehl authorized her claim by citing studies indicating that a “bias-free and LGBT-inclusive curriculum fosters tolerance, resulting in greater feelings of student safety and less bullying of students who are perceived to be lesbian, gay, bisexual, or transgender.” See Denise Penn, “LGBT Legislators Making a Difference in Sacramento,” Lesbian News, June 2006, 14.


11. I examined about seventy-five news articles published in U.S. media about the AIDS Quilt. Given the hundreds of news articles published about local displays occurring any given month around the United States and recurring World AIDS Days, I narrowed my scope to national and major regional newspapers and magazines such as the Washington Post, New York Times, San Francisco Chronicle, Los Angeles Times, Time, Newsweek, and the Advocate. I also examined two prominent media outlets with HIV-positive readers: Poz and The Body.com. The time frame includes the displays of the Quilt in Washington, D.C., in 1987, 1988, 1989, 1992, and 1996; two partial displays on the National Mall in 1993 and 2004; the controversy over the Quilt’s obsolescence; and, more selectively, the controversy about the NAMES Project decision not to display the full Quilt in 2004. The term “AIDS public sphere” comes from Gere’s ethnographic analysis of the AIDS Memorial Quilt. David Gere, How to Make Dances in an Epidemic: Tracking Choreography in the Age of AIDS (Madison: University of Wisconsin Press, 2004), 177.


14. Treichler, How to Have Theory in an Epidemic, 298. Treichler further explains the parallel she is drawing: “Like that for the right to experience pleasure, the struggle for the right to preserve health is founded on a political and theoretical analysis of the body—how it works, what it experiences, and how it exists and is valued in society” (311).


16. Peter Baldwin, Disease and Democracy: The Industrialized World Faces AIDS (Berkeley: University of California, 2005), 1; Elizabeth Fee and Daniel M. Fox elaborate that the widespread acceptance of a plague model indicated a belief in history as “pertinent to understanding the epidemic and that the events in the past that were most pertinent were those surrounding sudden, time-limited outbreaks of infection. . . . Because the history of visitations of plagues was the only history
that appeared relevant to the new epidemic, most people ignored the alternative historical models that were available, “such as a chronic model of disease. I am suggesting that a chronic model is also problematic for it has enabled a complacency that impedes AIDS activism. Elizabeth Fee and Daniel M. Fox, eds., AIDS: The Making of a Chronic Disease (Berkeley: University of California Press, 1992), 3.

17. Treichler, How to Have Theory in an Epidemic, 6, 45.
21. Ibid., 105.
23. Warner, The Trouble with Normal, 51, 52. For the purposes of this essay, I am defining queer as an anti-assimilationist politics that challenges sexual mores and practices otherwise considered “normal” (as in heteronormativity).
27. This is David Gere’s reading of the Quilt. Those memorialized on the Quilt, he suggests, are never rendered completely abject, for the Quilt turns them into citizens, constituents. Obviously, Gere is borrowing Judith Butler’s phrase. Gere, How to Make Dances, 178–179.
28. I am borrowing this phrase from Lauren Berlant and Elizabeth Freeman, “Queer Nationality,” in Lauren Berlant, Queen of America, 150.
30. Quoted in Rimmerman, From Identity to Politics, 94.
31. Ibid., 89.


How to Have History in an Epidemic

Post, October 8, 1989, D3.


42. Ibid.; Halberstam, In a Queer Time and Space, 2.

43. Fee and Fox, AIDS: Making of a Chronic Disease, 5.


61. Southern AIDS Living Quilt can be found at http://www.livingquilt.org/.
64. Ibid., 497.
65. Minnich, “Loose Threads.”