ALLEGHENY COLLEGE

History & Global Health Studies 610
Senior Project

It's Mourning in America: The California Gay Community's Response in the Face of an Administration's Neglect

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April 3rd, 2019

Department of History
Global Health Studies Program

Allegheny College

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Acknowledgments

I would like to thank my academic advisors, Professor Amelia Finaret and Professor Alyssa Ribeiro, for their support and help throughout my time at Allegheny College. I would also like to thank Professor Pinnow for always believing in me, even when I didn't believe in myself. Additionally, I am grateful for Professor Caryl Waggett for her support, empathy, and advice throughout my collegiate career. I'd also like to thank my mom, Debbie, for giving me life, supporting me through my studies, and always being only a phone call away when I needed her. I'd like to thank my friends, Alex Weidenhof and Savannah Lorenc, for helping me find humor while writing and offering advice even when they were also working on their own projects. I am also grateful for my sister, Katie, for helping me with my research despite her own busy schedule. Lastly, I will forever have unending gratitude for my fiancé Jesse Jordon, for all of the love, support, and encouragement he's given me over the last 4 years.

Abstract

When gay American men began falling ill at an alarming rate during the early 1980s, it became apparent that there was a terrifying new threat to public health in the United States. Although it would later become apparent that HIV/AIDS affected more than just the LGBTQ community, it would take years before it was taken seriously. California was an area that was especially affected by this epidemic. There was a distinct lack of response from President Ronald Reagan and other government officials, such as California Governor George Deukmejian. There was a rallying response from the local LGBTQ community that resulted in political activism and the formation of multiple organizations. My thesis is that the California gay community's multifaceted responses to the increasingly deadly AIDS epidemic of the 1980s were a result of the response, or lack thereof, from the President of the United States and his administration and other government officials. By the end of this project, I will demonstrate why the California gay community reacted the way that they did in the absence of governmental leadership from the executive branch. In a time where the President refused to address the epidemic, the California gay community took education, research, and medical care for AIDS patients into their own hands, knowing that without these measures, they, their friends, and loved ones, could likely be the next victims of the overwhelming and terrifying AIDS epidemic.

Introduction

When gay men started falling ill at a rapid pace in the 1980s, nobody knew what was happening or why. There were many reactions, however most notably there was a reaction of indifference, or straight up malice, that came from the President of the United States and other higher up American officials. My project focuses primarily on how the California gay community reacted to the emergence of HIV/AIDS as an epidemic in the 1980s, particularly in cities such as San Francisco and Los Angeles, as both were areas where the very first clusters of the disease became obvious. Initially, I will describe the science of HIV/AIDS and its transmission before delving into the history of its emergence in California before finally addressing how the gay communities of California reacted in comparison to the President of the United States, Ronald Reagan, and his administration. My first chapter will delve into my thesis as it will provide the background of HIV/AIDS, its transmission, and what was known during the first outbreak and what is known now. My second chapter will discuss the lack of response from the Presidential administration during the initial outbreak of the 1980s as well as President Ronald Reagan's specific shortcomings, and my third chapter will describe the multifaceted response that emanated from the California gay community at a time when it seemed as if their plight did not matter to the American government.

While the American HIV epidemic of the 1980s may seem like a problem of the past considering it has been nearly 4 decades since the initial outbreak, HIV and AIDS are still very much problems in modern day America. An estimated 1.1 million people in the United States are currently living with HIV/AIDS, with as many as 15%, or 1 in 7

people, infected with the virus being completely unaware of their HIV positive status.[1] The overall rate of people in the United States with HIV is approximately 308.3 per every 100,000 people.[2] California as a whole has a higher rate of HIV, with approximately 122,079 people living with HIV in the state. This brings their prevalence rate to 376 per every 100,000.[3] Certain parts of the state have much higher incidence rates, however, specifically clustered around the cities of Los Angeles, San Diego, and San Francisco. In Los Angeles County, the prevalence of HIV is 568 per every 100,000. In San Diego County, the prevalence of HIV is 410 per every 100,000. Perhaps the most shocking, however, is the severity of HIV prevalence in San Francisco County, which experiences a whopping rate of 1,746 per every 100,000.[4] This means that there are 5.7 times more people with HIV living in the San Francisco area than the national average.

HIV is not only continuing to affect the United States on an individual level, but also on a federal and financial level. Over the last several decades, HIV and patient rights advocates have fought to get the appropriate funding to combat the HIV/AIDS epidemic. On a federal level and through several different organizations, the federal government provides more than $26 billion towards HIV research and treatment every fiscal year.[5] However, the money is not allocated to one particular organization or cause, and is instead split up between several relevant organizations and agencies to collectively fight against HIV and AIDS. The U.S. Department of Health & Human Services, supported by

[1] Centers for Disease Control and Prevention, "HIV/AIDS," July 23, 2018, https://www.cdc.gov/hiv/basics/whatishiv.html.
[2] Ibid.
[3] AIDSVu, Local Data: California, 2019, Retrieved from https://aidsvu.org/state/california/.
[4] Ibid.
[5] SMAIF, "Budget," HIV gov, May 23, 2018, https://www.hiv.gov/federal-response/funding/budget.

the Secretary's Minority AIDS Initiative Fund (SMAIF), describes the organizations involved and the reasoning behind the breakdown of funds as such:

> Funding for HIV services and activities is spread across multiple federal departments, including Health and Human Services (HHS), Housing and Urban Development (HUD), Justice, Veterans Affairs (VA), and Defense. Within HHS, in particular, responsibility for HIV programs is spread across multiple agencies including the Centers for Medicare & Medicaid Services (CMS), Health Resources and Services Administration (HRSA), Centers for Disease Control and Prevention (CDC), Substance Abuse and Mental Health Services Administration (SAMHSA), the Indian Health Service (IHS), the Food and Drug Administration (FDA), the Office of HIV/AIDS and Infectious Disease Policy (OHAIDP), the Office of Minority Health, and others. Responsibility for HIV research is led by the National Institutes of Health (NIH); in addition, CDC, VA, Defense, and the United States Agency for International Development also support research initiatives. This distribution of responsibility is appropriate, as each agency has its own expertise, and different agencies operate different programs with varying legislative mandates, purposes and with unique histories.[6]

Two of the programs that receive the most funding for HIV/AIDS are Medicare and Medicaid, receiving $9,970,000,000 and $5,760,000,000 respectively in the 2017 Fiscal year.[7]

California also made news headlines as recently as 2017 for its response to the HIV epidemic that they still struggle with to this day. In October of 2017, California Governor Jerry Brown signed a bill that lowers the crime of knowingly exposing a sexual partner to HIV from a felony to a misdemeanor.[8] Prior to this, HIV had been the only communicable disease for which exposure was classified as a felony under California state law. Proponents of the change claimed that people may avoid being tested as they didn't want to risk ever being charged with a felony, and claimed that the law unfairly

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[6] Ibid.
[7] Ibid.
[8] Patrick McGreevy, "Knowingly Exposing Others to HIV Will No Longer Be a Felony in California," Los Angeles Times: October 06, 2017, https://www.latimes.com/politics/essential/la-pol-ca-essential-politics-updates-gov-brown-downgrades-from-felony-to-1507331544-htmlstory.html.

targeted sex workers.[9] Democratic senator Scott Wiener of San Francisco argued for this decision, saying, “We are going to end new HIV infections, and we will do so not by threatening people with state prison time, but rather by getting people to test and providing them access to care,”[10] However, reactions to this decision were split neatly along party lines, and Republican Senator Joel Anderson of Alpine argued against this decision, saying, “I’m of the mind that if you purposefully inflict another with a disease that alters their lifestyle the rest of their life, puts them on a regimen of medications to maintain any kind of normalcy, it should be a felony.”[11] This is a good example of how HIV and how we treat it on a social and legislative level is still a hotly debated topic, and still incredibly relevant to our political climate, even nearing more than 3 decades since the original epidemic of the 1980s.

Even in current day America, AIDS is a controversial subject. When Donald Trump was campaigning for the 2016 Presidential election, his campaign refused to meet with advocates for HIV positive Americans.[12] This stands out as unusual because his opponent, Hillary Clinton, had met with the advocates during her campaign.[13] This caused anxiety to rise among members of the Presidential Advisory Council on HIV/AIDS (PACHA), a group of unpaid experts assigned to 4-year terms by the Secretary of Health and Human Services to advise the administration on how to

[9] Ibid.
[10] Ibid.
[11] Ibid.
[12] Amy B. Wang, "Trump 'simply Does Not Care' about HIV/AIDS, Say 6 Experts Who Just Quit His Advisory Council," The Washington Post: June 19, 2017, https://www.washingtonpost.com/news/to-your-health/wp/2017/06/19/trump-simply-does-not-care-about-hivaids-say-6-experts-who-just-quit-his-advisory-council/?utm_term=.4b93302fd6fb.
[13] Scott A. Schoettes, "Trump Doesn't Care about HIV. We're Outta Here," Newsweek: June 19, 2017, https://www.newsweek.com/trump-doesnt-care-about-hiv-were-outta-here-626285.

effectively combat the American AIDS epidemic.[14] Then, on the same day that he was inaugurated in January of 2017, the White House's official website for the Office of National AIDS Policy was removed without warning or reason.[15]

Tensions between Trump and PACHA reached a boiling point when his initiative to repeal the Affordable Care Act (ACA), or Obamacare, passed through the then Republican-led House under the name of the American Health Care Act (AHCA).[16] Only 40% of those living with HIV/AIDS in the United States are able to afford the medications needed to control the virus, and 40% of those able to afford medicine are only able to do so because of Medicaid. The ACA expanded Medicaid and made more of the population eligible to receive assistance, and Trump's healthcare reform would have directly negatively impacted those with AIDS who receive their healthcare through the government.[17]

When the news broke that the AHCA had passed the House in June of 2017, 6 members of PACHA decided to resign immediately. One of the members who resigned, Scott Schoettes, published a scathing piece through *Newsweek* detailing the reasons for their resignations titled, "Trump Doesn't Care About HIV. We're Outta Here."[18] He spoke of how he and other members of PACHA had been skeptical of the Trump administrations dedication to fighting HIV/AIDS in the United States, but how they had held off on taking action until the AHCA was actually passed through the House and was heading towards being voted into law by the Senate. He urged members of Congress to

[14] Amy B. Wang, "Trump 'simply Does Not Care' about HIV/AIDS, Say 6 Experts Who Just Quit His Advisory Council," The Washington Post.
[15] Ibid.
[16] Ibid.
[17] Scott A. Schoettes, "Trump Doesn't Care about HIV. We're Outta Here," Newsweek.
[18] Ibid.

reevaluate their stance on healthcare, and reiterated the importance of having science as a driving force behind healthcare legislation:

> Experts with real facts, grounded in science, must be in the room when healthcare policy decisions are made. Those decisions affect real people and real lives. If we do not ensure that U.S. leadership at the executive and legislative levels are informed by experience and expertise, real people will be hurt and some will even die. Because we do not believe the Trump Administration is listening to—or cares—about the communities we serve as members of PACHA, we have decided it is time to step down. We will be more effective from the outside, advocating for change and protesting policies that will hurt the health of the communities we serve and the country as a whole if this administration continues down the current path. We hope the members of Congress who have the power to affect healthcare reform will engage with us and other advocates in a way that the Trump Administration apparently will not.[19]

Then, 6 months after 6 PACHA members had resigned, all remaining council members were formally fired by Trump via letter without warning or explanation in December of 2017.[20] Schoettes, who had resigned previously, criticized the Trump administration's ability to move forward without PACHA: "Without it, you lose the community voice in policymaking."[21]

However, despite appearing apathetic to the plight, Donald Trump called for the elimination of the HIV epidemic in the United States and "beyond" in his 2019 State of the Union address.[22] Although it had been more than a year since the entirety of PACHA was fired, only 2 new members had been announced by the time of his address.[23] Furthermore, when his 2020 budget was officially released, he only requested an

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[19] Ibid.
[20] Ben Guarino, "Trump Administration Fires All Members of HIV/AIDS Advisory Council," The Washington Post: December 29, 2017, https://www.washingtonpost.com/news/to-your-health/wp/2017/12/29/trump-administration-fires-all-members-of-hivaids-advisory-council/?utm_term=.0bbcf196dbdb.
[21] Ibid.
[22] Trenton Straube, "How HIV/AIDS Groups Responded to Trump's State of the Union Address," POZ: February 11, 2019, https://www.poz.com/article/hivaids-groups-responded-trumps-state-union-address.
[23] Ibid.

additional $291 million to fight HIV. With the cost of treatment alone, his proposed plan to combat HIV would actually require billions of dollars in funding to be effective.[24] With Trump's actions differing from his words, it is very reminiscent of the Reagan administration. When Reagan finally did speak about AIDS, he claimed that it was "public health enemy No. 1."[25] A protestor outside of the dinner he was speaking at responded by saying, "We don't want to come out of the conference with people saying, 'Look at everything the federal government is doing,' because they're not doing enough… For Ronald Reagan to say they're doing all they can do is false."[26] If one were to replace the name "Ronald Reagan" with "Donald Trump", her statement would still be accurate today.

My thesis is that the California gay community's multifaceted responses to the increasingly deadly AIDS epidemic of the 1980s were a result of the response, or lack thereof, from the President of the United States and his administration and other government officials. By the end of this project, I will demonstrate why the California gay community reacted the way that they did in the absence of governmental leadership from the executive branch. In a time where the President refused to address the epidemic, the California gay community took education, research, and medical care for AIDS patients into their own hands, knowing that without these measures, they, their friends, and loved ones, could likely be the next victims of the overwhelming and terrifying AIDS epidemic.

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[24] Donald G. McNeil, "Trump's Proposed Budget Undermines His H.I.V. Plan, Experts Say," The New York Times: March 12, 2019, https://www.nytimes.com/2019/03/12/health/trump-hiv-aids-costs.html?module=inline.
[25] Gerald M. Boyd, "Reagan Urges Abstinence for Young to Avoid AIDS," *The New York Times*: April 2, 1987, New York Times Archives.
[26] Elizabeth Kastor, "The Flap at the AIDS Fundraiser," The Washington Post: June 01, 1987.

Chapter 1

The Start of an Epidemic

It is paramount to discuss HIV, AIDS, the difference between the two, symptoms, transmission, and treatment. It is also important that I discuss how these definitions, understandings, and treatments have changed significantly since when the disease was brought to the American public's attention in the 1980s. Understanding how AIDS affects the human body amplifies our knowledge of how it devastated the gay community prior to the development of medication to treat it. HIV stands for human immunodeficiency virus. It is a virus that the body cannot ever fully rid itself of, meaning that once you have HIV, you will have it for the rest of your life. The science behind how HIV works is that the virus attacks the infected individual's immune system. HIV specifically does this by lowering the number of CD4 cells, also known as T cells, that a person has. This makes somebody with HIV have a compromised immune system, in turn making them more susceptible to different types of infection and some infection related cancers. HIV/AIDS is spread through the transmission of bodily fluids such as blood and semen, which makes gay men and intravenous drug users especially vulnerable.[1]

While the virus itself is HIV, there are several stages of its infection. The first is the acute HIV infection stage, which is immediately after a person contracts the virus. Within the next month, an infected individual will usually develop flu-like symptoms and are at a very high risk of spreading the infection due to the high volume of infected cells

[1] Centers for Disease Control and Prevention, "HIV/AIDS," July 23, 2018, https://www.cdc.gov/hiv/basics/whatishiv.html.

being produced at this time. After this stage, there is the clinical latency stage, where a person is infected with HIV but shows little to no symptoms while their immune system continues to be decimated by the virus. Without treatment, this stage can last up to 10 years. The final stage of HIV infection is AIDS, which stands for Acquired Immune Deficiency Syndrome. This is the stage in which a person's immune system is so destroyed that they are extremely susceptible to any sort of illness or infection. The life expectancy of a person with AIDS who goes without treatment is 1-3 years.[2]

Scientists have concluded that, although it hadn't come to the public's attention until the early 1980s, HIV may have been transmitted to humans as early as the 1800s. HIV is thought to have been transmitted to humans in Central Africa through their contact with chimpanzees. Chimpanzees carry a virus similar to HIV called simian immunodeficiency virus, or SIV, and humans are thought to have come in contact with it when they hunted and killed chimpanzees for food, thus coming in contact with their infected blood.[3] HIV then, in turn, is thought to have come to the United States in the mid to late 1970s, but due to the nature of HIV's latency period, it wasn't until the early 1980s that the first symptomatic individuals appeared and sought medical attention.

The very first signs of something being horribly wrong came with reports in 1981.[4] The first article ever published that seemed to hint towards some sort of disease linking gay men with compromised immune systems was published on June 5th, 1981, in a report by the Centers for Disease Control (CDC); "In the period October 1980-May

[2] SMAIF, "What Are HIV and AIDS?," HIV.gov, February 21, 2018, https://www.hiv.gov/hiv-basics/overview/about-hiv-and-aids/what-are-hiv-and-aids.
[3] Centers for Disease Control and Prevention, "HIV/AIDS," July 23, 2018, https://www.cdc.gov/hiv/basics/whatishiv.html.
[4] Centers for Disease Control and Prevention (CDC), "HIV and AIDS Timeline | National Prevention Information Network," January 10, 2017, https://npin.cdc.gov/pages/hiv-and-aids-timeline#1980.

1981, 5 young men, all active homosexuals, were treated for biopsy-confirmed *Pneumocystis carinii* pneumonia at 3 different hospitals in Los Angeles, California. Two of the patients died. All 5 patients had laboratory-confirmed previous or current cytomegalovirus (CMV) infection and candidal mucosal infection."[5] The significance of these 5 gay men being diagnosed with this particular type of pneumonia is that it was an unusual ailment to see in the United States, and when it was diagnosed it was typically found in severely immunocompromised individuals;

> *Pneumocystis* pneumonia in the United States is almost exclusively limited to severely immunosuppressed patients. The occurrence of pneumocystosis in these 5 previously healthy individuals without a clinically apparent underlying immunodeficiency is unusual. The fact that these patients were all homosexuals suggests an association between some aspect of a homosexual lifestyle or disease acquired through sexual contact and *Pneumocystis* pneumonia in this population… All the above observations suggest the possibility of a cellular-immune dysfunction related to a common exposure that predisposes individuals to opportunistic infections such as pneumocystosis and candidiasis. Although the role of CMV infection in the pathogenesis of pneumocystosis remains unknown, the possibility of *P. carinii* infection must be carefully considered in a differential diagnosis for previously healthy homosexual males with dyspnea and pneumonia.[6]

This was a significant discovery, as the 5 men who had tested positive for pneumocystis pneumonia appeared to have weakened immune systems, yet did not have any identifiable disease, disorder, or ailment that would cause them to have weakened immune systems.[7] We now know that Pneumocystis pneumonia is what is now referred to as an AIDS-defining illness, meaning that being diagnosed with it indicates that a patient has developed full-blown AIDS rather than remaining in the earlier stages of HIV.

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[5] Centers for Disease Control (CDC), "Pneumocystis Pneumonia - Los Angeles," *Morbidity and Mortality Weekly Report* 30, no. 21 (June 5, 1981): CDC Stacks.

[6] Ibid.

[7] It is important to note that, since this report was published, the cause of pneumocystis pneumonia has been determined to be a fungus rather than a protozoan and has been renamed *Pneumocystis jirovecii.*

During the height of the HIV epidemic in the late 1980s, an estimated 75% of all those who contracted HIV would eventually develop Pneumocystis pneumonia.[8]

A little less than a month later on July 3rd, 1981, the CDC released another report, this time noting not only new cases of Pneumocystis pneumonia, but also discussing another disease called Kaposi's Sarcoma that was also cropping up in immunocompromised gay men in New York and California. In the month since their last report on Pneumocystis pneumonia in gay men in California had been released, 10 additional men located in Los Angeles and San Francisco had tested positive for what was then known as *Pneumocystis carinii*, bringing the total to 15 men diagnosed with Pneumocystis pneumonia in the past 2 years.[9] Two of the men who tested positive for Pneumocystis pneumonia in California were also diagnosed with a rare type of cancer called Kaposi's Sarcoma. Kaposi's Sarcoma had also seen a sharp rise in cases, specifically among gay men in New York and California, as 26 gay men had been diagnosed with bit within a 30-month period. This was a stark contrast to the mere 3 cases that had been reported in either state in the past 20 years.[10]

While there are 4 different types of Kaposi's Sarcoma, the type that is associated with HIV/AIDS is called Epidemic Kaposi Sarcoma. Other types, and the types that were more prominent prior to the HIV epidemic, affected primarily older Mediterranean men.[11] While most kinds of cancer aren't necessarily linked to a weakened immune system, Kaposi's Sarcoma is unique because it is caused by Kaposi Sarcoma associated

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[8] Ibid.
[9] Centers for Disease Control (CDC), "Kaposi's Sarcoma and Pneumocystis Pneumonia Among Homosexual Men - New York City and California," *Morbidity and Mortality Weekly Report* 30, no. 25 (July 3, 1981): 306.
[10] Ibid.
[11] American Cancer Society, "What Is Kaposi Sarcoma?," April 19, 2018, https://www.cancer.org/cancer/kaposi-sarcoma/about/what-is-kaposi-sarcoma.html.

Herpes virus, which is often abbreviated at KSHV or HHV-8.[12] After reaching the end stage of HIV, full-blown AIDS, an individual's immune system will be compromised to the point that they're much more vulnerable to HHV-8 and other Herpes viruses than the average person. While being infected with HHV-8 doesn't guarantee that a person will develop Kaposi's Sarcoma, the virus is far more likely to develop into cancer in an individual who has a decimated immune system. We now know that Kaposi's Sarcoma is, much like Pneumocystis pneumonia, considered to be an AIDS-defining illness and a good indication that an individual has reached the end stage of HIV.

As a result of these developments, the CDC formed a task force in order to further research Kaposi's Sarcoma and other opportunistic infections such as Pneumocystis pneumonia.[13] Although it was still in its very early stages, the HIV epidemic was in full swing. The CDC estimates that there were 42,000 people in the United States living with HIV or AIDS and 20,000 new HIV infections in 1981 alone.[14] After the reports were released, word spread fast in the gay community. Although the reports generated a lot of concern among the "hotspots" of where these disease clusters were identified (Los Angeles, San Francisco, and New York City), gay men throughout the country were scared for their lives. Gay men flocked to hospitals to have every lesion and sore examined, lest they had somehow developed Kaposi's Sarcoma.[15] However, considering the population of gay men in the United States, these disease clusters were actually relatively insignificant, comparatively speaking. In December of 1981, a group of gay

[12] Ibid.
[13] Centers for Disease Control and Prevention (CDC), "HIV and AIDS Timeline | National Prevention Information Network," January 10, 2017, https://npin.cdc.gov/pages/hiv-and-aids-timeline#1980.
[14] Ibid.
[15] J. Fields and R. Cabaj, "Report on Kaposi's Sarcoma Created Undo Anxiety," *Boston Globe*: December 30, 1981.

and lesbian physicians published an editorial piece in the *Boston Globe* as an attempt to quell the fear that the gay community was experiencing. The editorial, written by J. Fields, MD, and R. Cabaj, MD, for the Gay and Lesbian Physicians of New England, states:

> "…we would like to recommend to individual gay men that it would be better to be concerned with the common health problems for which they are specifically at risk. These include sexually transmitted genital and gastrointestinal infections, hepatitis and alcoholism. Effective treatments of preventative measures are available for all of these and can be obtained by having regular check-ups with a doctor or clinic that is knowledgeable about gay health matters. Yet each of these diseases accounts for vastly more illness and even mortality in the gay community than does the new virus-Kaposi syndrome."[16]

By "virus-Kaposi syndrome", they were referencing what would go on to eventually be named HIV/AIDS. Although they were not incorrect- at this time, it was not known that there were already more than 40,000 people infected with HIV in the United States, and by that measure then sexually transmitted diseases were undoubtedly of more concern in sheer numbers, it is undisputable that the gay community's fear was not misplaced. As of 2015, the death toll from HIV in the United States had reached approximately 658,507 people since the beginning of the HIV epidemic in the 1980s.[17]

Almost exactly a year after the first report released by the CDC on what would come to be understood as HIV/AIDS, the *Washington Post* released an article updating the public called "Rare Cancer Found in Gay Men."[18] Since the disease cluster had become apparent, an additional 162 gay men had been reported as being diagnosed with Kaposi's Sarcoma to the CDC. Additionally, 4 young gay men living in San Francisco

[16] Ibid.
[17] Centers for Disease Control and Prevention (CDC), "HIV/AIDS," July 23, 2018, https://www.cdc.gov/hiv/basics/whatishiv.html.
[18] *Washington Post*, "Rare Cancer Found in Gay Men," June 5, 1982.

and 1 gay man living in Chicago were found to have diffuse, undifferentiated non-Hodgkin's Lymphoma.[19] This was discovered while they had also been being studied for Kaposi's Sarcoma, and each of the 5 men identified as having this rare cancer were also found to have had one or more sexually transmitted disease such as anal warts, gonorrhea, syphilis, or Hepatitis B.[20] This led researchers to believe that these men's weakened immune systems were not just making them vulnerable to Kaposi's Sarcoma and Pneumocystis pneumonia, but a plethora of other diseases as well.

In May of 1982, *The New York Times* published an article on the rising epidemic of a disease that seemingly targeted gay men. In this article, they say that researchers have been either calling it "A.I.D.", which stood for acquired immunodeficiency disease, or "GRID", which stood for gay-related immunodeficiency.[21] For the rest of the article, the mysterious disease is referred to as GRID, despite the author mentioning that 13 heterosexual women were also found to be suffering from the disease.[22] This is the first time that there seemingly was a name for the ailment that was affecting gay communities across the United States, albeit primarily in New York City and California.

By September of 1982, the CDC announced that they finally had an official name for the mysterious disease that appeared to be specifically targeting gay men: Acquired Immune Deficiency Syndrome, or AIDS. Identifying the disease as AIDS would replace more controversial and stigma-inducing names like GRID, gay cancer, and gay plague. The CDC released their first ever report specifically calling the immune system

[19] Ibid.
[20] Ibid.
[21] Lawrence K. Altman, "New Homosexual Disorder Worries Health Officials," *The New York Times:* May 11, 1982, New York Times Archives.
[22] Ibid.

destroying virus "AIDS" in September of 1982, more than a year after publishing their first report on health threats specifically pertaining to young gay men.[23] By then, the number of men known to be affected by AIDS had ballooned to 593 cases, with 243 (41%) of those affected ultimately dying from the ailment.[24] However, modern CDC estimates suggest that there were as many as 106,000 people living with HIV in the United States during this time, with 64,900 new infections just in the year 1982.[25] While gay men were still considered to be the most vulnerable to this disease, other at-risk groups had been identified as well: "Reported AIDS cases may be separated into groups based on these risk factors: homosexual or bisexual males- 75%, intravenous drug abusers with no history of male homosexual activity- 13%, Haitians with neither a history of homosexuality nor a history of intravenous drug abuse- 6%, persons with hemophilia A who were not Haitians, homosexuals, or intravenous drug abusers- 0.3%, and persons in none of the other groups- 5%."[26]

At this point in time, the exact way that AIDS was transmitted from person to person had not yet been identified. Ann Japenga of the *Los Angeles Times* wrote on September 28th, 1982, "Early evidence suggested the disease was being transmitted sexually but today no one really knows what's causing AIDS, and there's no guarantee that men who limit their sexual activity are safe."[27] However, with 75% of all AIDS cases affecting gay men, a clear stigma started to erupt. AIDS, with its close relation to the

[23] Centers for Disease Control (CDC), "Current Trends Update on Acquired Immune Deficiency Syndrome (AIDS) -United States," *Morbidity and Mortality Weekly Report* 31, no. 37 (September 24, 1982): CDC Stacks.
[24] Ibid.
[25] Centers for Disease Control and Prevention (CDC), "HIV and AIDS Timeline | National Prevention Information Network," January 10, 2017, https://npin.cdc.gov/pages/hiv-and-aids-timeline#1980.
[26] Ibid.
[27] Ann Japenga, "Gays Trying to Deal with Fear of Cancer," *Los Angeles Times*: September 28, 1982.

opportunistic infection and cancer that is Kaposi's Sarcoma, quickly earned its name as "the gay cancer."[28] Reports of men trying desperately to change their lifestyles and believing that they were being punished by God for their sexuality became a commonplace when discussing AIDS. Gay men weren't the only ones who believed that they were being punished by God- the general public reacted with fear and disgust towards those afflicted with or at risk of contracting AIDS, specifically the LGBTQ+ community. Thomas Nylund, the health services coordinator of the Gay and Lesbian Community Services Center in Hollywood witnessed firsthand the prejudice that the gay community faced as fear ran rampant in the United States as reported cases of AIDS only became more common. He once heard a man on national television say, "Is the disease still confined to homosexual men, or has it become serious?"[29]

Despite at-risk communities more-or-less being identified by the medical community, research still failed to show how AIDS was actually passed from person-to-person in a clear-cut way. Nylund, who would advise gay and lesbian individuals on their health decisions, told people to us their own discretion; "If you think a particular thing you are doing is unhealthy for you and you don't want to be unhealthy, then do what you think is best."[30] Doctors were just as dumbfounded, including Dr. Gottlieb, the physician who had originally identified AIDS: "The people with Kaposi's know what they've got and they know what the prognosis is, but what about the worried well? What do we tell them? The answer is we don't know what's safe."[31]

[28] Ibid.
[29] Ibid.
[30] Ibid.
[31] Ibid.

From when AIDS first came to the public eye in 1981 until late 1983, the CDC had not publicly confirmed how the virus was spread. There were reports suggesting that it was sexually transmitted, but it wasn't until September 9th, 1983, that the CDC released a report that officially confirmed that AIDS was transmitted through bodily fluids;

> The occurrence of AIDS cases among homosexual men, IV drug abusers, persons with hemophilia, sexual partners of members of these groups, and recipients of blood transfusions is consistent with the hypothesis that AIDS is caused by an agent that is transmitted sexually or, less commonly, through contaminated needles or blood. About 91% percent of reported cases have occurred in these patient groups. Among the remaining cases, there has been no evidence that the disease was acquired through casual contact with AIDS patients or with persons in population groups with an increased incidence of AIDS. AIDS is not known to be transmitted through food, water, air, or environmental surfaces.[32]

By this time, more than 2,000 people in the United States had been diagnosed with AIDS. While AIDS had been called "the gay cancer" and famously associated with Kaposi's Sarcoma by the LGBTQ community, it was actually Pneumocystis pneumonia that proved the most dangerous opportunistic infection accounting for 52% of all primary diagnoses of AIDS.[33] Kaposi's Sarcoma accounted for exactly half the amount of AIDS diagnoses than Pneumocystis pneumonia at 26% of all AIDS patients having it, and 7% of all AIDS patients had both Kaposi's Sarcoma and Pneumocystis pneumonia. The other 15% of all AIDS patients had other unspecified opportunistic infections that led them to be diagnosed.[34]

For the next few years, the number of those infected with HIV steadily continued to climb along with panic among the LGBTQ community. Although methods of

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[32] Centers for Disease Control (CDC), "Current Trends Update on Acquired Immunodeficiency Syndrome (AIDS) -United States," *Morbidity and Mortality Weekly Report* 32, no. 35 (September 09, 1983): CDC Stacks.
[33] Ibid.
[34] Ibid.

transmission had been identified, that did not guarantee that the public understood how the virus was passed between people. Additionally, they didn't know what exactly was causing AIDS in the first place- all that they knew was that it primarily targeted gay men and was contagious. The stigma surrounding AIDS at the heart of the epidemic was that it was "the gay cancer". Some surmised that it was even "God's punishment for the Gays." The prejudice that the gay community faced during this time was immense. It is thought that the reason that the country was slow to react was due to the fact that gay men were the ones affected the most. That is why when Ryan White was diagnosed with AIDS following a blood transfusion in December of 1984 at the age of 13, it drastically changed public perception on the epidemic.[35]

The big deal, so to say, about Ryan White is that his diagnosis with AIDS created this idea of an "innocent" AIDS victim. Ryan had been exposed, unknowingly, to HIV through a blood transfusion that was medically necessary due to his medical status as a hemophiliac. In the public's mind, he wasn't exposing himself to the virus through sexual activity or drug use, so he was "innocent." A young boy being infected with AIDS via blood transfusion was an example, in the public's mind, of an AIDS infection in which the responsibility or fault did not fall on the individual infected. This ideology was not new, and can be traced back to the idea of "innocent" syphilis victims as far back as the 1800s.[36] An article published in *The Boston Medical and Surgical Journal* in 1846 introduces this concept:

> Were the disease merely to afflict those persons who have exposed themselves to contagion in the haunts of vice, it might be considered merely a just punishment for moral depravity. But such is not the fact. The innocent victims of syphilis are

[35] Health Resources & Services Administration, "Who Was Ryan White?," HRSA-HAB, October 01, 2016, https://hab.hrsa.gov/about-ryan-white-hivaids-program/who-was-ryan-white.
[36] "Syphilis in Belgium," *The Boston Medical and Surgical Journal* 34, no. 14 (1846): 269.

> infinitely more numerous than the guilty; for it is a disease which follows vice and crime down to 'the third and fourth' generations; syphilis in the parents being, it is generally considered, one of the chief causes of scrofula, pulmonary consumption, and other fatal and distressing diseases in their children.[37]

Ryan White's case added a degree of separation- there were AIDS patients who were supposedly responsible for their infections, like gay men and intravenous drug users, and then there were AIDS patients who were infected through no fault of their own, like hemophiliacs or babies born to mothers with AIDS. It also made AIDS feel more like a risk to straight, white Americans who had previously associated the virus with gay men or intravenous drug users. Ryan White was proof that AIDS could infect anyone and that nobody was safe. It took an "innocent" victim for many Americans to take the HIV epidemic seriously because, whether they would openly admit it or not, they held prejudice and hatred in their hearts for the gay community and intravenous drug users.

Ryan White quickly made news when he wanted to return to school as his health improved after his initial diagnosis, but couldn't because the Superintendent of his district refused to allow him to return.[38] The *Washington Post* described him as, "a 70-pound boy whose biggest dream is to appear on television with Johnny Carson"[39] and his wish to go back to school quickly garnered support across the country. He ultimately died of AIDS in 1990- he had outlived his life expectancy by 5 years, and shortly after his death the Ryan White Comprehensive AIDS Resources Emergency (CARE) Act was passed and the Ryan White HIV/AIDS Program was founded. To this day the Ryan White HIV/AIDS Program is one of the largest sources of government-funded AIDS

[37] Ibid., 269.
[38] Michael Specter, "AIDS Victim's Right to Attend Public School Tested in Corn Belt," *The Washington Post*: September 3, 1985.
[39] Ibid.

resources in the country with it being federally funded $2.34 billion in the 2018 fiscal year.[40]

In early 1985, the CDC published another weekly report that revealed that AIDS was actually caused by a retrovirus.[41] At this point in time, this virus had several names, such as human T- lymphotropic virus type III (HTLV-III), lymphadenopathy-associated virus (LAV), and AIDS-associated retrovirus (ARV).[42] During this time, the CDC preferred the name HTLV-III. Regardless of what it was called, the message was the same: There was an identified cause of AIDS. Fortunately, with an identifiable virus came testing that could determine whether a person was infected with said virus. The diagnostic test that would soon become commercially available to the American public was the enzyme-linked immunosorbent assay, or ELISA, which worked by using antigens derived from whole disrupted strands of HIV.[43] However, at this time it was not known how long it would take somebody infected with HIV to actually test positive for the antigen using the ELISA method. Despite this, the CDC was confident that their testing would, at the very least, have the ability to formally diagnose the majority of individuals infected with HIV or suffering from AIDS. Soon after, more precise testing for HIV would be developed called the Western Blot method, which would further advance the science behind detecting HIV in a person's blood.[44]

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[40] Health Resources & Services Administration, "Who Was Ryan White?," HRSA-HAB, October 01, 2016, https://hab.hrsa.gov/about-ryan-white-hivaids-program/who-was-ryan-white.
[41] Centers for Disease Control (CDC), "Provisional Public Health Service Inter-Agency Recommendations for Screening Donated Blood and Plasma for Antibody to the Virus Causing Acquired Immunodeficiency Syndrome," *Morbidity and Mortality Weekly Report* 34, no. 1 (January 11, 1985): CDC Stacks.
[42] Ibid.
[43] Ibid.
[44] Ibid.

Now that the CDC was beginning to understand how HIV/AIDS, or what they were calling HTLV-III and AIDS, was spread, and they had a way to test for it, they released a list of recommendations for those afflicted:

> An individual judged most likely to have an HTLV-III infection should be provided the following information and advice:
>
> 1. The prognosis for an individual infected with HTLV-III over the long term is not known. However, data available from studies conducted among homosexual men indicate that most persons will remain infected.
> 2. Although asymptomatic, these individuals may transmit HTLV-III to others. Regular medical evaluation and follow-up is advised, especially for individuals who develop signs or symptoms suggestive of AIDS.
> 3. Refrain from donating blood, plasma, body organs, other tissue, or sperm.
> 4. There is a risk of infecting others by sexual intercourse, sharing of needles, and possibly, exposure of others to saliva through oral- genital contact or intimate kissing. The efficacy of condoms in preventing infection with HTLV-III is unproven, but the consistent use of them may reduce transmission.
> 5. Toothbrushes, razors, or other implements that could become contaminated with blood should not be shared.
> 6. Women with a seropositive test, or women whose sexual partner is seropositive, are themselves et increased risk of acquiring AIDS. If they become pregnant, their offspring are also at increased risk of acquiring AIDS.
> 7. After accidents resulting in bleeding, contaminated surfaces should be cleaned with household bleach freshly diluted 1:10 in water.
> 8. Devices that have punctured the skin, such as hypodermic and acupuncture needles, should be steam sterilized by autoclave before reuse or safely discarded. Whenever possible, disposable needles and equipment should be used.
> 9. When seeking medical or dental care for intercurrent illness, these persons should inform those responsible for their care of their positive antibody status so that appropriate evaluation can be undertaken and precautions taken to prevent transmission to others.
> 10. Testing for HTLV-III antibody should be offered to persons who may have been infected as a result of their contact with seropositive individuals (e.g., sexual partners, persons with whom needles have been shared, infants born to seropositive mothers).[45]

While this list may seem relatively respectable and much of the advice offered still holds up, it's impossible to say how accessible this information truly was to the LGBTQ

[45] Ibid.

community. Publishing various reports may not have been the best way to educate the public, and pamphlets educating American households wouldn't be sent out until 1988- 7 years after the epidemic began.[46]

About a year after it was discovered that AIDS was caused by a retrovirus, the name human immunodeficiency virus, or HIV, was finally suggested.[47] This news came amid legal battles between American scientist Dr. Robert Gallo and French scientist Dr. Luc Montagnier, in which the matter of who first discovered the virus was hotly disputed.[48] Each man wanted to take the credit for himself. This dispute was completely irrelevant and held little meaning to those actually suffering from and dying from AIDS every day. It is worth noting that although changing the name of a virus is a major development, *The New York Times* article announcing the name change was merely a blurb on the 21st page of the May 1st, 1986 issue of the paper. This goes to show that even though thousands across the United States were suffering, it wasn't considered to be a front-page story, likely because the LGBTQ community was the group afflicted.

In terms of medications, HIV and AIDS treatments in modern America are incomparable to those of the past: "Today, if someone is diagnosed with HIV, he or she can choose among 41 drugs that can treat the disease. And there's a good chance that with the right combination, given at the right time, the drugs can keep HIV levels so low that the person never gets sick."[49] However, at the height of the AIDS crisis, that was not

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[46] Centers for Disease Control and Prevention (CDC), "HIV and AIDS Timeline | National Prevention Information Network," January 10, 2017, https://npin.cdc.gov/pages/hiv-and-aids-timeline#1980.
[47] Associated Press (AP), "New Name Is Proposed for the Cause of AIDS," *The New York Times,* Washington D.C., May 1, 1986, New York Times Archives.
[48] Ibid.
[49] Alice Park, "The Story Behind the First AIDS Drug," Time: March 19, 2017,

the case. The first drug used to treat AIDS was actually created in the 1960s as a cancer treatment, but failed to show improvement in animal trials so it was essentially tossed aside. The drug was called azidothymidine, or AZT, and was rediscovered in a massive bout of lab testing that was conducted in an attempt to find a way to treat HIV.[50] It was found to cause relatively uncomfortable side effects including, but not limited to, "severe intestinal problems, damage to the immune system, nausea, vomiting and headaches."[51] However, despite these drawbacks, the FDA approved the drug after 20 months of testing on March 19th, 1987, instead of their usual 8-10 years in an attempt to slow the rising death toll from the AIDS epidemic. However, AZT cost a whopping $8,000 a year, or $17,000 in today's money, and was basically unaffordable to uninsured AIDS patients.[52] While there was now some semblance of a treatment, it often was not enough to effectively control HIV, and thousands died simply because they couldn't afford the medication. In modern times, it often takes more than one drug to control an HIV infection, and AZT is still commonly used.[53]

The United States government did not make a concentrated effort to educate the public on HIV/AIDS until the Surgeon General at the time, C. Everett Koop, mailed a congressionally-mandated information brochure on AIDS to every household in America in 1988.[54] President Ronald Reagan, who served as President during the heart of the AIDS epidemic from 1981 to 1989, didn't publicly mention AIDS for the first time until

http://time.com/4705809/first-aids-drug-azt/
[50] Ibid.
[51] Ibid.
[52] Ibid.
[53] Ibid.
[54] National Institutes of Health (NIH), "The C. Everett Koop Papers: AIDS, the Surgeon General, and the Politics of Public Health," U.S. National Library of Medicine, 2019, https://profiles.nlm.nih.gov/ps/retrieve/Narrative/QQ/p-nid/87.

1985 and didn't authorize a Surgeon General's report on the epidemic until 1986, 5 years after the outbreak had begun; "…for the first four years in office, the nation's top health officer (Surgeon General C. Everett Coop) was prevented from addressing the nation's most urgent health crisis, for reasons he insisted were never fully clear to him but that were no doubt political."[55]

The Reagan administration went to lengths to keep Surgeon General C. Everett Koop from being involved in any work that was AIDS-related despite his enthusiasm for the topic. He was once quoted saying, "if ever there was a disease made for a Surgeon General, it was AIDS."[56] Regardless of his enthusiasm, his ability to address the epidemic was all but completely obstructed: "For two years, Koop was excluded from the Executive Task Force on AIDS established in 1983 by his immediate superior, Assistant Secretary of Health Edward Brandt. Journalists received instructions from Brandt's office in advance of press conferences that the Surgeon General would not answer questions about AIDS, and that he was not to be asked about it."[57] Even after he was instructed to send out an information pamphlet, he feared that Reagan's administration would actively try to thwart his attempts to educate the public if they found the information too inappropriate; "Concerned that an in-depth review by Reagan's domestic policy advisers would lead to the removal of crucial public health information from the report, such as on condom use, Koop submitted numbered copies of the final draft to the Domestic Policy Council, which he collected at the end of the meeting with the explanation that he sought to prevent leaks of the report to the media."[58] His efforts were not in vain and he was able

[55] Ibid.
[56] Ibid.
[57] Ibid.
[58] Ibid.

to release his report without censorship. The abbreviated 8-page pamphlet sent out to every household in America began with a message from the Attorney General, which included a strong message urging families to be open about the public health threat that was AIDS: "Some of the issues involved in this brochure may not be things you are used to discussing openly. I can easily understand that. But now you must discuss them. We all must know about AIDS. Read this brochure and talk about it with those you love. Get involved."[59]

By 1992, the science behind diagnosing and treating HIV and AIDS began to advance. That year, the CDC released a report that defined the difference between stages of HIV based on an individual's CD4+ T-lymphocyte, or T-cell, count. HIV primarily attacks CD4+ T-lymphocytes because the virus has an affinity for the CD4 surface marker.[60] Due to the importance of the CD4+ T-lymphocyte in many basic immunologic functions, as HIV progresses and decimates the number of T-cells in a person's blood, the more immunocompromised and prone to infections such as pneumocystis pneumonia they become; "As the number of CD4+ T-lymphocytes decreases, the risk and severity of opportunistic illnesses increase."[61]

As per these new classifications, someone who tested positive for the HIV antigen but maintained a CD4+ T-lymphocyte count greater than or equal to 500 cells/mL was considered to be in the clinical category of asymptomatic HIV infection. These were individuals who had been infected more recently, and who were likely to have months to

[59] Everett C. Koop and Centers for Disease Control (CDC), *Understanding AIDS*, Rockville, MD: U.S. Department of Health & Human Services, 1988.
[60] Centers for Disease Control (CDC), "1993 Revised Classification System for HIV Infection and Expanded Surveillance Case Definition for AIDS Among Adolescents and Adults," *Morbidity and Mortality Weekly Report* 41, no. RR-17, December 18, 1992, CDC Stacks.
[61] Ibid.

years until they became symptomatic. Category 2 was called persistent generalized lymphadenopathy. Individuals in this category had or maintained a T-cell count of 200-499 cells/uL and were then considered to be symptomatic of HIV. The last new clinical category was acute (primary) HIV infection, or what was considered to be full-blown AIDS. These individuals had a T-cell count lower than 200 cells/uL and were the most at risk for developing opportunistic infections.[62]

This distinction was a breakthrough as it defined what AIDS was and how it would be classified and differentiated from other stages of HIV infection. It clarified that, although those with full-blown AIDS were more likely to have opportunistic infections or AIDS-defining illnesses, it was possible to be in the end stages of HIV infection before developing said illnesses; "The population of HIV-infected persons with CD4+ T-lymphocyte counts of less than 200/uL is substantially larger than the population of persons with AIDS-defining clinical conditions."[63] The reason why people developed AIDS-defining illnesses was because AIDS had already decimated their T-cell count and therefore destroyed their immune system, meaning that having AIDS and having an AIDS-defining illness were not mutually exclusive.

In 1992, despite the introduction of several drugs (zidovudine, azidothymidine, AZT, ZDV, Retrovir) to supposedly slow the progression of HIV, HIV infection became the leading cause of death for men between the ages of 25 and 44 years old, according to a CDC report from 1993: "The death rate from HIV infection for persons aged 25-44 years has steadily and dramatically increased during the past 10 years, compared with death rates from most other leading causes of death. From 1982 to 1992, the rate

[62] Ibid.
[63] Ibid.

increased from 0.6 per 100,000 to 52.8 per 100,000 for men aged 25-44 years and from 0.1 per 100,000 to 7.8 per 100,000 for women in this age group."[64] That year, 33,590 United States residents died from HIV or AIDS related causes. By CDC estimates, there were roughly 754,000 people living with HIV/AIDS in the United States in 1992. There were an estimated 48,700 new HIV infections in the United States that year alone.[65]

Finally, between the years 1995 and 1999, a treatment for HIV was developed. Highly active antiretroviral therapy, or HAART, became the gold standard for treating HIV and preventing the develop of AIDS.[66] This, accompanied by educating the public on HIV/AIDS and how to prevent opportunistic infections, helped drastically reduce the number of AIDS-related deaths in the United States. By 1998, 17 years after the first reports of rare infections and cancers targeting previous healthy gay men had emerged, AIDS fell from the top 10 causes of death in the United States.[67]

[64] Centers for Disease Control (CDC), "Update: Mortality Attributable to HIV Infection Among Persons Aged 25-44 Years - United States, 1991 and 1992," *Morbidity and Mortality Weekly Report* 42, no. 45 (November 19, 1993): CDC Stacks.
[65] Centers for Disease Control and Prevention (CDC), "HIV and AIDS Timeline | National Prevention Information Network," January 10, 2017, https://npin.cdc.gov/pages/hiv-and-aids-timeline#1980.
[66] Ibid.
[67] Ibid.

Chapter 2

Radio Silence

The AIDS epidemic was unquestionably devastating to the LGBTQ+ community and still continues to affect them to this day. Perhaps one of the most troubling aspects of the AIDS crisis of the 1980s was the distinct lack of response from the Reagan administration. When thousands were becoming infected with the virus and dying, the President turned a blind eye to the crisis, presumably to save face with the religious right crowd that he appealed to, or perhaps even because of his own personal religious beliefs. It is not known why exactly he spoke out so little on the AIDS epidemic. However, regardless of political affiliation, most can agree that more could have been done to reach out to those suffering and dying from AIDS during Ronald Reagan's two Presidential terms.

Facing the AIDS crisis during his presidency was not the first time that Ronald Reagan had spoken or acted out against gay rights. While campaigning for his first Presidential term, a member of his campaign staff accused two other, high-ranking staff members of being in a homosexual relationship. Reagan ordered an internal investigation and despite the fact that no evidence that would imply that the two men were romantically involved was found, they were promptly fired regardless, just in case that the rumors of their affair were true.[1]

[1] Robert Scheer, *Playing President: My Close Encounters with Nixon, Carter, Bush I, Reagan, and Clinton: And How They Did Not Prepare Me for George W. Bush* (Los Angeles: Akashic Books, 2006), 153-154.

Furthermore, Reagan frequently spoke out against the gay civil rights movement. When questioned about past statements in an interview, Reagan responded: "A fellow asked me if I believed that they should have the same civil rights, and I said I think they do and should but that my criticism of the gay-rights movement is that it isn't asking for civil rights, it is asking for a recognition and acceptance of an alternative lifestyle that I do not believe society can condone, nor can I."[2] In the same interview, he also adds that homosexuality is an abomination "in the eyes of the Lord," and implies that the gay community wants the right to "just free and open sex."[3]

Ronald Reagan officially took office in January of 1981 for his first term as the 40th President of the United States.[4] Less than 6 months later on June 5th, 1981, the CDC would publish their first *Morbidity and Mortality Weekly Report* on what would come to known as AIDS.[5] Despite this, the epidemic did not appear to be a priority for the President or his administration. In a 1982 press conference, reporter Lester Kinsolving asked Reagan administration press secretary Larry Speakes if the President had anything to say about the AIDS crisis, which at that point in time had grown to more than 600 cases. The crowd was confused by his question, but once Kinsolving elaborated and referred to AIDS as "the gay plague", the room erupted with laughter. Speakes took the opportunity to ignore the question and make a condescending joke: "I don't have it! Do you?"[6] Although Kinsolving remained stoic and continued to question Speakes at

[2] Ibid., 154.
[3] Ibid., 154.
[4] William N. Elwood, *Power in the Blood: A Handbook on AIDS, Politics, and Communication* (London: Routledge, 2015), 5.
[5] Centers for Disease Control (CDC), "Pneumocystis Pneumonia - Los Angeles," *Morbidity and Mortality Weekly Report* 30, no. 21, (1981): CDC Stacks.
[6] Caitlin Gibson, "A Disturbing New Glimpse at the Reagan Administration's Indifference to AIDS," The

subsequent press conferences in 1983 and 1984, he received essentially the same response every time: a condescending attitude, laughter, and homophobic jokes.[7]

Despite the AIDS epidemic being clearly defined relatively early on into his presidency, President Reagan still did not publicly mention AIDS until 1985. Even then, he did not speak about AIDS until directly questioned about the epidemic by a reporter during a press conference. Furthermore, he used the opportunity to defend parents who were against allowing their children to attend school with another child who is HIV positive:

> I can well understand the plight of the parents and how they feel about it. I also have compassion, as I think we all do, for the child that has this and doesn't know and can't have it explained to him why somehow he is now an outcast and can no longer associate with his playmates and schoolmates. On the other hand, I can understand the problem with the parents. It is true that some medical sources had said that this cannot be communicated in any way other than the ones we already know and which would not involve a child being in the school. And yet medicine has not come forth unequivocally and said, "This we know for a fact, that it is safe." And until they do, I think we just have to do the best we can with this problem. I can understand both sides of it.[8]

Reagan also used this opportunity to resist pleas to increase AIDS funding and despite this, and despite the fact that he had not publicly addressed the AIDS epidemic for the first 4 years of his presidency, then proceeded to call the AIDS crisis a "top priority" for his administration.[9] This same year, the Reagan administration cut federal funding of AIDS research by 11%, despite the increasing death toll.[10]

Washington Post: December 01, 2015, https://www.washingtonpost.com/news/arts-and-entertainment/wp/2015/12/01/a-disturbing-new-glimpse-at-the-reagan-administrations-indifference-to-aids/?utm_term=.7e5a4e4a80e1.

[7] Ibid.

[8] Philip Boffey, "Reagan Defends Financing for AIDS." *The New York Times*: September 18, 1985.

[9] Ibid.

[10] William N. Elwood, *Power in the Blood: A Handbook on AIDS, Politics, and Communication* (London: Routledge, 2015), 5.

The same year that Reagan publicly mentioned the word "AIDS" for the very first time, someone who was once considered a close friend of the Reagan's had fallen ill with the disease. Rock Hudson, a Hollywood superstar who had starred alongside the likes of Elizabeth Taylor and Doris Day, had been diagnosed the year previous but did not come out as a gay man living with AIDS until he became too ill to hide it from the general public any longer.[11] Rock Hudson was famous for being tall, dark, handsome, and playing the male love interest to his female counterparts. However, he was secretly gay, a fact that he kept private and that very few knew about.

Hudson and Reagan had remained friends following Reagan's years in Hollywood and his involvement in the Screen Actor's Guild. They had seen each other as recently as May of 1984, when Hudson attended a state dinner in support of Reagan and was seated at the first lady Nancy Reagan's table.[12] He claimed he was recovering from a "flu bug" that he'd caught while filming recently in Israel. However, shortly after the state dinner, a biopsy that had been taken from him came back positive for Kaposi's Sarcoma, the very illness that had sparked the term "gay cancer" for AIDS back in the early days of the epidemic.[13]

Hudson kept his diagnosis secret for as long as possible. Even after collapsing in a famous hotel in Paris, his publicist and those close to him all gave conflicting reasons to the media, including liver cancer, anorexia, and fatigue.[14] The truth, however, was that he was in France in order to seek an experimental treatment for AIDS. His plans were

[11] Christ Geidner, "Nancy Reagan Turned Down Rock Hudson's Plea for Help Nine Weeks Before He Died," BuzzFeed News: February 03, 2015. https://www.buzzfeednews.com/article/chrisgeidner/nancy-reagan-turned-down-rock-hudsons-plea-for-help-seven-we#.vxy51KB6z.
[12] Ibid.
[13] Ibid.
[14] Ibid.

thwarted when the French hospital offering the treatment denied his transfer due to bureaucratic reasons. It was then that Rock Hudson's publicist reached out to the White House.

Given that Rock Hudson had a friendly relationship with the Reagans, it made sense that he would feel comfortable asking a favor of them in his time of need. His publicist sent a memo asking if they could contact the hospital that had denied his entry, and said in no uncertain terms that Hudson would die without treatment: "Only one hospital in the world can offer necessary medical treatment to save life of Rock Hudson or at least alleviate his illness."[15] He felt as if, although they had been denied, perhaps being contacted by the White House directly would help him get the treatment that he believed could save his life.

Hudson did not receive the response that he had hoped. An assistant to President Reagan had reached out to his wife, Nancy, who declined Hudson's request to aid him in getting transferred to another hospital: "I spoke with Mrs. Reagan about the attached telegram. She did not feel this was something the White House should get into and agreed to my suggestion that we refer the writer to the U.S. Embassy, Paris."[16] Although the White House would not be intervening in his medical care, Ronald Reagan did go out of his way to call Hudson and tell him that they were keeping him in their thoughts and prayers at this time. This was a move that Nancy Reagan made sure would not go unnoticed: "Mrs. Reagan asked, however, that we inform the press of the President's telephone call to Rock Hudson today, which I did."[17]

[15] Ibid.
[16] Ibid.
[17] Ibid.

The reasoning behind the decision not to call in order to hasten Hudson's transfer to the appropriate hospital was that the Reagans felt as if they should not intervene on somebody's behalf simply because they were friends. However, Ronald Reagan had directly contradicted this sentiment in the past, having specifically intervened in a fundraiser run by his good friend, Bob Hope.[18] It seemed as if the Reagans were comfortable helping out their friends so long as the issue was not particularly controversial. Unfortunately for Rock Hudson, AIDS was a topic that Ronald Reagan was not comfortable with addressing, at least not at that particular point in his presidency.

By the time that Rock Hudson was granted permission to be transferred to the hospital for treatment, doctors told him that his condition had deteriorated to the point in which treatment was no longer an option.[19] He died less than 3 months after reaching out to the White House on October 2nd, 1985. When questioned about Hudson's request and her subsequent denial of said request in 2015, Nancy Reagan's spokesperson answered on her behalf: "I spoke with her about your request and she simply does not recall the incident in question."[20] However, there are documents in the Reagan Presidential Library that prove that this interaction did indeed occur.[21]

Although the first time that Reagan ever said "AIDS" in public was in 1985 at a press conference, he wouldn't formally address the epidemic until 1987. It wasn't until May 31st, 1987 that he actually gave a speech on the AIDS epidemic without being prompted by a reporter, and by the time that he made this speech, more than 25,000

[18] Ibid.
[19] Ibid.
[20] Ibid.
[21] Ibid.

people had already died from AIDS in the United States alone.[22] It must be emphasized that Ronald Reagan didn't decide to give a speech on AIDS until 6 years after the epidemic had begun, and that for the first 6 years of the AIDS crisis he had maintained radio silence. It wasn't until an old celebrity acquaintance of his, Elizabeth Taylor, invited him to speak at the American Foundation for AIDS Research (amfAR) awards dinner, that he addressed a nation that had already seen an unprecedented spread of disease and death during his presidency.

He cheekily began his speech joking about his time as an actor for General Electric Theater and how beautiful amfAR chairman, and incredibly famous actress, Elizabeth Taylor was before actually discussing the AIDS epidemic. Despite Attorney General C. Everett Koop's stance on sex education and teaching school children on how to prevent the spread of AIDS by using condoms, Reagan used this opportunity to reiterate his support of teaching abstinence as a form of AIDS prevention. Furthermore, he also proceeded to discuss low self-esteem as a cause for drug addiction and sexual promiscuity, which he cited as directly causing AIDS. His speech implied that "values" and "morals" should be employed in the fight against AIDS: "Corporations can help get the information out, so can community and religious groups, and of course so can the schools, with guidance from the parents and with the commitment, I hope, that AIDS education or any aspect of sex education will not be value-neutral."[23] Despite directly deviating from the pamphlet that Attorney General Koop had sent to every household in America, he attempted to maintain a united front:

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[22] Michael Specter, "Hillary Clinton, Nancy Reagan, and AIDS," *The New Yorker*: June 19, 2017. https://www.newyorker.com/news/daily-comment/hillary-clinton-nancy-reagan-and-aids.
[23] Ronald Reagan, "President Reagan's AmFAR Speech," Speech, American Foundation for AIDS Research (amfAR) Awards Dinner, Potomac Restaurant, Washington D.C.

> Education is knowing how to adapt, to grow, to understand ourselves and the world around us. And values are how we guide ourselves through the decisions of life. How we behave sexually is one of those decisions. As Surgeon General Koop has pointed out, if children are taught their own worth, we can expect them to treat themselves and others with greater respect. And wherever you have self-respect and mutual respect, you don't have drug abuse and sexual promiscuity, which of course are the two major causes of AIDS. Nancy, too, has found from her work that self-esteem is the best defense against drug abuse.[24]

These statements were problematic for several reasons. These comments seem to run parallel to how he had spoken about gay people in the past, saying that he could not condone their actions or lifestyles. He claims that sexual promiscuity and drug abuse directly cause AIDS, which was not true- while intravenous drug users and sexually active gay men were at higher risk of becoming infected with AIDS, their lifestyles were not the direct cause of the development of AIDS. This 1987 speech heavily implied that AIDS was caused by individual moral failure.

Reagan also went on to describe "innocent" victims of the AIDS crisis, meaning that people who were infected with AIDS through gay sex or intravenous drug use had somehow brought the disease upon themselves, but they had the possibility of spreading it to those who were, in his eyes, morally pure: "If a person has reason to believe that he or she may be a carrier, that person has a moral duty to be tested for AIDS; human decency requires it. And the reason is very simple: Innocent people are being infected by this virus, and some of them are going to acquire AIDS and die."[25] He then continued, using anecdotal evidence to support this idea of "innocent" victims: "Let me tell you a story about innocent, unknowing people. A doctor in a rural county in Kentucky treated a woman who caught the AIDS virus from her husband, who was an IV-drug user. They

[24] Ibid.
[25] Ibid.

later got divorced, neither knowing that they were infected. They remarried other people, and now one of them has already transmitted the disease to her new husband."[26] It is worth noting that the AIDS-causing virus was dubbed Human Immunodeficiency Virus, or HIV, a year prior to this speech in 1986. Referring to HIV as "the AIDS Virus" is perhaps an example of how uneducated he was on the topic.

While the President finally addressing the AIDS crisis was objectively a good thing, he continued to perpetuate harmful, negative stereotypes about AIDS and those who were suffering from it. The "innocent AIDS victim" narrative was not new, as the United States had met Ryan White several years earlier when he garnered nationwide support for his plea to return to school despite his AIDS diagnosis, around a time when Reagan vaguely spoke of his support to parents who did not want their children to go to school with other children who may have AIDS. In this speech, however, he rebuked the idea that AIDS should keep children from school or church, saying, "These fears are based on ignorance,"[27] despite being on the opposite side of the argument merely 2 years ago.

It was no mistake that Reagan used anecdotal evidence in which a straight woman from the south was infected with AIDS by her husband, who was an intravenous drug user. This paints a picture of innocence for the audience. He describes how she unwittingly transmits AIDS to her new husband, a straight man who had assumedly participated in no "at risk" behaviors, and how there is now three or more people suffering due to the "morally corrupt" actions of her drug-using ex-husband. This draws sympathy to his cause. He doesn't talk about the scared, gay, 24-year-old graduate

[26] Ibid.
[27] Ibid.

student in New York City who had developed a nagging cough that just wouldn't go away. He doesn't talk about the homeless heroin addict who had developed a sore that he didn't know whether it was from injecting opiates or from AIDS-related Kaposi's Sarcoma. He didn't speak out when the only people being diagnosed were gay men and drug addicts. He didn't discuss the AIDS crisis until it became obvious that it could infect "morally pure" people, at no fault of their own. The main demographics affected by AIDS were still, and continue to be to this day, gay men and intravenous drug users, but Ronald Reagan purposefully avoided using them as examples because they didn't fit his Conservative Christian image. Instead, he used an anecdote about an innocent housewife, despite the fact that they were among a slim minority of AIDS victims at this time.

At the time of his speech, many feared that Reagan would call for mandatory testing- something that the gay community vehemently opposed.[28] However, instead of ordering mandatory testing, he instead recommended what he called "routine testing":

> While recognizing the individual's choice, I encourage states to offer routine testing for those who seek marriage licenses and for those who visit sexually transmitted disease or drug abuse clinics. And I encourage states to require routine testing in state and local prisons. Not only will testing give us more information on which to make decisions, but in the case of marriage licenses, it might prevent at least some babies from being born with AIDS. And anyone who knows how viciously AIDS attacks the body cannot object to this humane consideration. I should think that everyone getting married would want to be tested.[29]

The gay community argued that mandatory testing could open doors to a lot of harmful practices, such as a national AIDS registry, which could publicly expose somebody's

[28] Elizabeth Kastor, "The Flap at the AIDS Fundraiser," The Washington Post: June 01, 1987.
[29] Ronald Reagan, "President Reagan's AmFAR Speech." Speech, American Foundation for AIDS Research (amfAR) Awards Dinner, Potomac Restaurant, Washington D.C.

sexuality or AIDS status, potentially ruining their reputations and lives. “Routine testing” was fortunately not mandatory or as forceful as they had feared, so there was a sense of relief after Reagan had spoken and had not called for testing to become compulsory. Furthermore, Attorney General Koop also strongly opposed mandatory testing- he was warmly regarded by the gay community and avoided the topic of AIDS testing all together when giving his speech that night.[30] There was undoubtedly a disconnect between the President and his own attorney general not only on that night, but during the entirety of their professional lives together.

Ronald Reagan closed his speech by quoting a man dying from AIDS: “In closing, let me read to you something I saw in the paper that also embodies the American spirit. It's something that a young man with AIDS recently said. He said: ‘While I do accept death, I think the fight for life is important, and I'm going to fight the disease with every breath I have.’ Ladies and gentlemen, so must we. Thank you.”[31] Citing that AIDS was a disease that must be violently fought against was an interesting decision to make, considering that Ronald Reagan was at the end of his second term as President and had not given a speech on the topic until that evening. The hypocrisy of his speech was not lost on the gay community, as a crowd of more than 300 people stood protesting outside of the Potomac restaurant. Lori Behrman, one of the protestors and spokeswoman for New York's Gay Men's Health Crisis Center, commented on Reagan’s sudden enthusiasm for their cause: "We don't want to come out of the conference with people saying, 'Look

[30] Elizabeth Kastor, "The Flap at the AIDS Fundraiser," The Washington Post: June 01, 1987.
[31] Ronald Reagan, "President Reagan's AmFAR Speech." Speech, American Foundation for AIDS Research (amfAR) Awards Dinner, Potomac Restaurant, Washington D.C.

at everything the federal government is doing,' because they're not doing enough… For Ronald Reagan to say they're doing all they can do is false."[32]

Ronald Reagan's speech at the amfAR awards dinner is significant not only because it was his first ever speech on the AIDS crisis, but also because of his previous relationship with the late Rock Hudson. AmfAR was actually created partially in thanks to a $250,000 donation from Rock Hudson as he was struggling through his final months of life.[33] Furthermore, amfAR was championed by Elizabeth Taylor, who was said to have become impassioned about the fight against AIDS after Hudson passed away as she had considered him to be a best friend of hers.[34] So ultimately, although the Reagans had denied Hudson's plea to help him transfer to a hospital to receive the experimental medical care he felt could save his life, Ronald Reagan would end up giving his very first speech on AIDS for an organization that was built upon Rock Hudson's legacy.

Ronald Reagan was not the only Republican hailing from California who failed to adequately address AIDS crisis. Republican Governor George Deukmejian failed his ailing constituents several time while he served as the Governor of California during the majority of the AIDS crisis of the 1980s, from 1982 to 1990. In 1995, the California Legislature presented a budget that would include $25.4 million for AIDS research, education, and social services.[35] This was more than $15 million more in funds than Governor Deukmejian had requested. Requesting additional funds was a conscious

[32] Elizabeth Kastor, "The Flap at the AIDS Fundraiser," The Washington Post: June 01, 1987.
[33] Christ Geidner, "Nancy Reagan Turned Down Rock Hudson's Plea for Help Nine Weeks Before He Died," BuzzFeed News: February 03, 2015, https://www.buzzfeednews.com/article/chrisgeidner/nancy-reagan-turned-down-rock-hudsons-plea-for-help-seven-we#.vxy51KB6z.
[34] Enrique Lopetegui, "'The Battle of AmFAR': Two Women That Changed AIDS Forever," San Antonio Current: December 1, 2013, https://www.sacurrent.com/ArtSlut/archives/2013/12/01/the-battle-of-amfar-two-women-that-changed-aids-forever.
[35] *Los Angeles Times*, "An Aid Package to Fight AIDS," June 23, 1985.

decision made because of a report published by the AIDS Budget Task Force, a 48-member group formed by California Senators and Assemblymen to advocate for Californian AIDS patients, which estimated that there was greater need than what Governor Deukmejian had requested monetarily. The legislature would provide greater support for Californians suffering from AIDS, such as alternative testing sites, more cohesive AIDS education, and broadened health insurance coverage for AIDS victims.[36]

Despite calls to increase AIDS funding from the AIDS Budget Task Force, Governor Deukmejian line-item vetoed $11 million of the $15 million increase in funds requested by democrat-controlled California legislature.[37] Deukmejian ultimately allowed only $4.3 million in additional funds to be allocated towards fighting the AIDS epidemic.[38] Deukmejian's finance official, David Willis, defended him, citing that California's AIDS budget had increased 154% from the previous fiscal year and that Governor Deukmejian was focusing on what he considered to be "high priority areas" such as research and education. Regardless, Deukmejian had not increased research and education funding to the extent that had been recommended, and vetoed nearly all the recommended increases in funding for the care of Californian AIDS patients.[39] According to John Vasconcellos, a Democratic Assemblymen on the AIDS Task Force, vetoing these funds was devastating: "The governor has completely destroyed our ability to deal

[36] Ibid.
[37] Jack W. Germond and Jules Witcover, "California Governor, Legislature Spar Over Money to Combat AIDS," *Boston Globe*: August 17, 1985.
[38] John Balzar, "Possible AIDS Backlash Worries California Gays," *Los Angeles Times*: December 1, 1985.
[39] John Wetzl, "Deukmejian Slices AIDS Funds," *Sentinel USA*: San Francisco, CA, July 4, 1985, University of California at Berkeley Library.

with AIDS comprehensively and the dollars seemed to have come out of essential programs: treatment for AIDS, and research."[40]

In addition to preventing additional funding from being allocated to fight AIDS, Deukmejian also vetoed a 1986 bill that would have made it illegal for individuals with AIDS to be discriminated against when seeking employment or housing.[41] The bill, which would have legally made AIDS comparable to tuberculosis and cancer in discrimination cases, was backed by a multitude of organizations such as the American Red Cross, the Association of California Life Assurers, the California Medical Association, and the California Manufacturers' Association.[42] Although Los Angeles and San Francisco already had city ordinances against discriminating against somebody based on their HIV status, an official state law would have strengthened this stance. However, Deukmejian vetoed the bill, citing that it was "unnecessary."[43] For additional context, his veto came the year after Ryan White made headlines for being discriminated against due to being HIV positive. With such a major example of discrimination that had reached every corner of the nation, it is difficult to explain why Deukmejian would feel that a bill formally decrying discrimination against AIDS victims would be unnecessary.

Deukmejian further solidified himself as an enemy in the eyes of gay rights activists when he came out in support of proposition 102. Proposition 102 was Republican sponsored and had troubling implications for those afflicted by AIDS: "Proposition 102 would require physicians and health clinic who have 'a reasonable cause to believe a person is infected' with the virus to report him (or her) to local health

[40] Ibid., 1.
[41] *Los Angeles Times*, "Wrong Signal on AIDS," July 30, 1986.
[42] Ibid.
[43] Ibid.

officials. The referendum then would require that sexual partners be notified. Further, it would allow for employers to test their employees for the virus."[44] This proposition would directly destroy the concept of privacy for AIDS patients and also open the door for employers to discriminate against their employees based on sexuality and HIV status.

Deukmejian's support of proposition 102 came as a shock to many that surrounded him, although his earlier veto that prevented the passage of an anti-discrimination law could have possibly hinted towards his feelings on the subject. Regardless, following the announcement of his support, he saw immediate backlash. Within hours there were 1,500 gay rights protestors outside of the building in which he worked.[45] Additionally, 3 out of the 4 members of his AIDS advisory committee had immediately resigned. By supporting proposition 102, Deukmejian had gone directly against the advice of not only his advisors, but also the public health community and his own AIDS advisory committee.[46] Fortunately, the proposition ultimately did not pass.

Although many of the politicians and critics who perpetuated harmful stereotypes about the gay community and AIDS victims happened to be members of the Republican party, the Democrats were not innocent in this equation. One of the more notorious political activists who directly spoke out against civil rights for AIDS patients identified as a Democrat, and although he never held a formal position in the United States government, he ultimately unsuccessfully ran for the Democratic Presidential nomination a total of 8 times. His name was Lyndon H. LaRouche Jr., and he was a conspiracy

[44] Robert P. Hey, "Politicians Wrestle with AIDS Crisis," *Christian Science Monitor*: October 12, 1988.
[45] Cheryl Sullivan, "Resignations, Protests over AIDS-Initiative Endorsement," *Christian Science Monitor*: November 2, 1988.
[46] Ibid.

theorist with a cult-like following. The closest modern-day comparison would be a political figure such as Alex Jones, a far-right conspiracy theorist.

LaRouche had a multitude of unusual beliefs spanning from believing that the Queen of England was involved in drug-trafficking, to believing that AIDS was a ploy to conquer America by the "Soviet war machine."[47] LaRouche was once quoted saying, "a person with AIDS running around is like a person with a machine gun running around," and spread the misinformation that AIDS could be spread like the common cold or through insect bites.[48] Despite reputable sources like the Centers for Disease Control (CDC) and the World Health Organization openly disputing his claims, he managed to gather a cult-like following for his group called Prevent AIDS Now Initiative Committee, which was often shortened simply to PANIC, and was able to more than 700,000 signatures from Californians who supported his initiative to quarantine AIDS patients.[49]

700,000 signatures were more than twice the number of signatures needed to get his proposal on the ballot for the November 1986 election. The initiative was officially named proposition 64 and would have involved quarantining more than 300,000 people living with AIDS.[50] The California gay community rallied against the proposition and raised more than $3 million to combat it, but LaRouche only used this as cannon fodder to imply that the gay community was part of an elaborate AIDS coverup.[51] It was not only the gay community that was infuriated by this proposition- politicians, public health officials, and medical doctors across the country spoke out against LaRouche's ideology.

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[47] David L. Kirp, "LaRouche Turns to AIDS Politics," *The New York Times* (New York City): September 11, 1986, New York Times Archives.
[48] Ibid.
[49] Ibid.
[50] Ibid.
[51] Ibid.

Los Angeles city councilman Joel Wachs said that proposition 64 represented "the most sweeping rollback of civil rights since Nazi Germany."[52] Public health officials were concerned that the fear of being quarantined would prevent people from seeking out HIV testing, as the vote on proposition 64 was fast approaching and they wouldn't want to be ripped away from their families, friends, and careers if it were to be passed.[53] The response to proposition 64 being included on the ballot in California was overwhelming negative from those educated on AIDS, yet it appealed to those uneducated and those who were afraid.

Fortunately, in November of 1986, Californians voted against proposition 64 by a substantial majority, with 71% of Californians voting against quarantining those who tested positive for HIV/AIDS.[54] However, the initiative had exposed that 29% of Californian voters did, in fact, favor quarantining AIDS patients.[55] Further analysis of the voter base was able to determine who was most likely to have voted in favor of proposition 64: "…limited education, political conservatism, and Christianity (especially born-again Christianity) were associated with a readiness to quarantine persons with AIDS, whereas advanced education, political liberalism, and a Jewish religious background were associated with an aversion toward such a quarantine."[56] Overall, people who held beliefs in which they viewed homosexuality in a negative light were more likely to vote in favor of LaRouche's proposition: "So long as people with AIDS

[52] Jay Mathew, "Work Ban for AIDS Victims Proposed," *Washington Post*: June 26, 1986.
[53] Kevin Roderick, "Doctors, Health Officials Furious over Prop. 64 on AIDS," *Los Angeles Times*: August 24, 1986, http://articles.latimes.com/1986-08-24/news/mn-17334_1_aids-initiative.
[54] Robert W. Steward, "Dannemeyer' s AIDS Views Have Moderated Somewhat," *Los Angeles Times*: May 15, 1989
[55] Beth A. Le Poire, Carol K Sigelman, Lee Sigelman, and Henry C Kenski, "Who Wants to Quarantine Persons with AIDS? Patterns of Support for California's Proposition 64." *Social Science Quarterly* 71 (2): 240.
[56] Ibid., 246.

continue to symbolize a threat to deeply rooted social and religious values, their civil liberties are likely to be in jeopardy."[57]

Not only did the California gay community and AIDS patients lack the support from President Ronald Reagan and his administration, they were also subject to obstacles created by California Governor Deukmejian. Furthermore, they continued to face negative stereotypes and harmful rhetoric from figures such as Lyndon H. LaRouche Jr., who pushed narratives that led to proposition 64 to be voted on by Californians despite its obvious lack of support from the scientific and public health communities. Throughout their struggles and despite the spread of misinformation, the Reagan administration remained radio silent until 1987- 6 years after the AIDS crisis had begun. Through it all, the California gay community had to fight for their civil rights- a reaction spurred by the indifference from the public servants who were supposed to act in their interest.

[57] Ibid., 248.

Chapter 3

A Rallying Cry

Before delving into the cultural response that emanated from the California LGBTQ+ community during the AIDS crisis of the 1980s, it's important to discuss the advancements that were being made in the name of gay rights in the decades leading up to the epidemic. This context demonstrates why the AIDS epidemic was so devastating to the gay community not only physically but also in the eyes of society and in the context of the progress that they had made. Historically speaking, the gay community has always been the target of hatred and violence. However, the Stonewall Riots of 1969 are often cited as a turning point for gay rights activism in the United States.

By the 1960s, although there were gay bars, they often found themselves repeatedly targeted by the police for no real reason other than the fact that they were local hangouts for the LGBTQ+ community.[1] The Stonewall Inn was a small, mafia-run gay bar located in Greenwich Village New York City. They had experienced repeated police raids throughout the years for petty reasons, and the raids almost always ended up with the arrests of their more "deviant" members such as drag queens, "butch" lesbians, or anybody who happened to be black, while the white male patrons of the bar were allowed to carry on with their, albeit disrupted, evenings.

The incident that began a 5-day series of riots occurred early on June 28th, 1969, when local police had decided to raid the bar for the alleged crime of illegally selling

[1] Andrew Matzner, "Stonewall Riots," *GLBTQ Archives* (2004).

alcohol.[2] Although it started off with the typical arrests and removal of patrons from the bar by the police officers, the atmosphere quickly changed as a crowd gathered in front of the Stonewall Inn. It wasn't long before the crowd became violent:

> The crowd, which had grown to several hundred people, erupted. People began pelting the officers with coins, which represented the payoffs gay bars had to make to the police to stay in business. Then they moved to stones and bottles. The police, surprised by and unused to such resistance from patrons of gay bars, beat those they could reach with nightsticks, but eventually were forced to take refuge by locking themselves inside the Stonewall. The crowd swelled by hundreds more, as word of the riot spread and Greenwich Village residents, many of whom were lesbian and gay, hurried to the scene. Someone squirted lighter fluid inside the bar and attempted to ignite it. Several others grabbed a downed parking meter and used it as a battering ram against the front of the Stonewall. Still others chanted "Gay Power!"[3]

Although the first riot had ended by later that morning, by the evening another riot had broken out. Over the course of the following week, riots would continue to rock Greenwich Village, with the final Stonewall riot occurring on July 1st, 1969. In the following months, the Gay Liberation Front was formed and LGBTQ+ publications soared.[4] The Stonewall riots had given the gay community a voice.

Following the Stonewall riots, the gay community saw years of advancements in their battle for civil rights:

> Those years that followed, the decade of the 1970s, represent a remarkable period of transformation for gays and lesbians, particularly those living in America's coastal cities. At its core, that transformation was about visibility. During those years, there was the first gay television movie; a sexy on-screen kiss between two men in *Sunday, Blood Sunday*; and the release of *Cabaret*, which has been hailed as the first movie that "really celebrated homosexuality." There were gains in politics too: Edward Koch, then serving in Congress, "became one of the first elected officials to publicly lobby on behalf of the homosexuals of Greenwich Village," Kaiser writes. Gay Pride Week was established. Perhaps most significantly: In December of 1973, the board of the American Psychiatric

[2] Ibid.
[3] Ibid.
[4] Ibid.

> Association* voted 13-0 "to remove homosexuality from its list of psychiatric disorders."[5]

The progress of the 1970s would soon be cold comfort for the LGBTQ+ community when the AIDS crisis of the 1980s began. The fear of AIDS was not only an issue for the gay community, but also the heterosexual population as well. The LGBTQ+ community soon saw themselves facing yet another kind of prejudice that they had not previously experienced.

When the AIDS epidemic began, the gay community had an array of reactions. The most prominent reaction found in literature and news reports, however, is an immediate sense of fear. As I previously discussed in chapter one, gay men were unsure as to why this was happening specifically to them, and pondered if it was punishment for their sexuality or actions. It was common to hear men panicking and saying things like, "My mom was right," or, "My minister was right."[6] Many men sought to immediately change their actions and lifestyles out of fear of contracting this "gay cancer." With no clear cause determined behind the epidemic in the early 1980s, seemingly the only major correlation was with homosexuality and this deadly, new immune deficiency.

The lack of information on AIDS in the early days of the epidemic caused a great deal of distress and confusion for the gay community. In an interview with the *Los Angeles Times* in 1982, Thomas Nylund, the health services coordinator of the Gay and Lesbian Community Services Center in Hollywood, California, grappled with the concept that AIDS was "God's punishment" for gay men: "I don't think that God was punishing women for using tampons when they got toxic shock syndrome. And if AIDS is God's

[5] Rebecca J. Rosen, "A Glimpse Into 1970s Gay Activism," The Atlantic: February 26, 2014. https://www.theatlantic.com/politics/archive/2014/02/a-glimpse-into-1970s-gay-activism/284077/.
[6] Ann Japenga, "Gays Trying to Deal with Fear of Cancer," *Los Angeles Times*: September 28,1982.

punishment for homosexuality, why aren't lesbians getting it?"[7] At this point in time, the National Cancer Institute had set aside $2.2 million, or more than $6 million if adjusted for inflation, but had yet to actually allocate these funds. Nylund surmised that this was due to moral objections to the gay lifestyle.[8]

The *Los Angeles Times* publishing an article referencing the prejudice that the gay community were facing during the beginning of the AIDS epidemic was really a forward-thinking move. As I mentioned previously, the President himself, Ronald Reagan, would not go on to publicly mention the AIDS crisis until 1985. The *Los Angeles Times* published this article with their interview of Thomas Nylund in September of 1982, shortly after the AIDS epidemic had started making headlines. When important news such as scientific advancements in AIDS research could only be found as little blurbs, buried pages into the daily paper, an extensive article like this was unique and bound to draw attention.

Japenga's article did, in fact, draw attention to itself. On October 10th, 1982, they published a letter that had been sent by somebody who had learned about the National Cancer Institute's failure to properly allocate their AIDS funding. The author of the letter, John Pearce, called this an "abhorrent delay" and spoke of his intention to fight against this prejudice, saying: "I intend to submit petitions to the National Cancer Institute, signed by members of the gay community, protesting this abhorrent delay in attempting to save and preserve human lives."[9]

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[7] Ibid.
[8] Ibid.
[9] John Pearce, "'Abhorrent Delay' in AIDS," *Los Angeles Times*: October 10, 1982.

One of the first examples of the LGBTQ+ community taking the means of educating the public on this epidemic came in 1981, when Registered Nurse Bobbi Campbell became the 16th person to be diagnosed with Kaposi's Sarcoma in San Francisco.[10] Although many in the early days of the epidemic were dealing with intense feelings of shame and discomfort with their diagnosis and the uncertainty that accompanied it, Campbell decided that he wanted to be outspoken about his situation in order to further spread awareness and educate the gay community. He was one of the very first people diagnosed with Kaposi's Sarcoma, later further identified as AIDS a year following his cancer diagnosis, to go public with his condition. He soon earned the name "AIDS poster boy", a name he wore with pride, occasionally printed on shirts that he would wear to protests and rallies.[11]

Shortly after his diagnosis, Campbell printed posters with pictures of his lesions caused by Kaposi's Sarcoma with the title "Gay Cancer" and hung them up in the windows of a pharmacy in the Castro district, a neighborhood in San Francisco known to have a large population of gay men.[12] The point of this was to encourage other men who may have been at risk of contracting what was then known as "gay cancer" would know what the were looking for. Although there had been reports detailing this "gay cancer" released, none of them had photos of what actual Kaposi's Sarcoma lesions looked like, details on what part of the body they'd appear on, or even symptoms of this particular

[10] Polina Ilieva, "Preserving History of HIV/AIDS Epidemic," *Brought to Light: Stories from UCSF Archives & Special Collections*: July 17, 2017. https://blogs.library.ucsf.edu/broughttolight/2013/07/17/preserving-history-of-hivaids-epidemic/.
[11] Ibid.
[12] Joe Wright, "Only Your Calamity: The Beginnings of Activism by and for People With AIDS." *American Journal of Public Health* 103, no. 10 (October 2013): 1788-1798.

type of cancer that one would need to be aware of. In the absence of literature or information being put forth by the government, Campbell had taken matters into his own hands to educate his community, regardless of what ever sort of discomfort he may have felt posting personal photos of his body in a public space.

Bobbi Campbell didn't stop at posting photos of his lesions- he continued to speak out and reach out to other Kaposi's Sarcoma patients. He was known to show up at San Francisco's Kaposi's Sarcoma clinic and ask to speak with patients, an action that was not always welcome, according to the clinic's head nurse: "Bobbi Campbell… had started to make himself available at the clinic and say, 'I want to meet the patients.' This was not seen as a friendly gesture by the physicians. They thought he was a little off the wall. They also thought he was kind of out of control. I think somebody called him hysterical. He was a flamboyant gay man ... But he was also very, very serious."[13] Regardless of their reservations, Campbell continued to gather men who he'd refer to as his "KS brothers", and formed a "gay cancer" support group, which was sponsored by a local nonprofit organization that focused on terminal illnesses called The Shanti Project.[14] He would continue his activism not only through this support group but also through protests, publishing articles, speaking at conferences, and publishing a public diary between July 1983 and February 1984, before succumbing to AIDS complication on August 15th, 1984.[15]

[13] Ibid.
[14] Ibid.
[15] Polina Ilieva, "Preserving History of HIV/AIDS Epidemic," *Brought to Light: Stories from UCSF Archives & Special Collections*: July 17, 2017, https://blogs.library.ucsf.edu/broughttolight/2013/07/17/preserving-history-of-hivaids-epidemic/.

As fear and confusion spread amongst gay communities across the United States about this "gay cancer" that was beginning to kill those near and dear to them, community-based organizations started forming in the absence of governmental response. In April of 1982, the Kaposi's Sarcoma Research and Education Foundation was formed in San Francisco by a group of Californian physicians and members of the local San Francisco LGBTQ+ community, becoming only the second organization to be founded with the sole purpose of fighting what would come to be known as AIDS.[16] They were preceded only by the Gay Men's Health Crisis (GMHC) in New York City.[17] The organization would go on to be referred to by a few other names such as the AIDS & Kaposi's Sarcoma Foundation before finally settling on the name the San Francisco AIDS Foundation, or SFAF.[18] SFAF co-founder Cleve Jones described the start of the foundation as comparable to being on the battlefield of a war: "It was like a triage unit in a war zone."[19]

SFAF created one of the first ever information hotlines that anybody could call to get the latest news and information on the spreading epidemic. This hotline was staffed primarily by volunteers who worked in 4-hour shifts, the hours of operation were from 9am-9pm, and information was readily given in 3 different languages.[20] A former volunteer recalls the early days of working for the hotline: "You name it—we answered

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[16] San Francisco AIDS Foundation (SFAF), "Our History," 2019, http://www.sfaf.org/about-us/our-history/.
[17] Benita Roth, *The Life and Death of ACT UP/LA: Anti-AIDS Activism in Los Angeles from the 1980s to the 2000s* (New York: Cambridge University Press, 2017), 8.
[18] Neil G. Giuliano, "A History of Reaching Out," San Francisco AIDS Foundation, 2019. http://sfaf.org/hiv-info/hot-topics/from-the-experts/a-history-of-reaching-out.html.
[19] San Francisco AIDS Foundation (SFAF), "Our History," 2019. http://www.sfaf.org/about-us/our-history/.
[20] Emily Land, "AIDS in 1985, and Today," BETA Blog: November 30, 2016, https://betablog.org/aids-1985-today/.

it… A lot of it was just listening to callers. And trying to figure out, what do they need? We had these huge books with lists of all of the referrals we could give. This was before the internet, so we were the central place people got information."[21]

The SFAF continued their activism and in 1983, when reports came out describing AIDS as a primarily sexually transmitted disease, they handed out thousands of condoms in the June San Francisco Pride march.[22] It would be 4 more years until the attorney general would send out a pamphlet describing condom use as an effective way to prevent the spread of HIV. This sort of bottom-up initiative was necessary at a time when the federal government was overwhelmingly silent. Without proper announcements, other than the CDC reporting on discoveries, or efforts to educate at-risk communities, it was local organizations that were able to educate the public, albeit on a smaller scale than a federal initiative would have been.

Another was that the SFAF inadvertently had an effect on the California gay community was that they inspired others to take action. In October of 1982, they presented at an emergency meeting held at the Los Angeles Gay and Lesbian Community Services Center about what was then being referred to as GRID. In attendance were Nancy Cole Sawaya, Matt Redman, Ervin Munro, and Max Drew, who would then go on to found AIDS Project Los Angeles (APLA).[23] They also formed their own hotline in which they read off of a one-page fact sheet, which was all that was known about AIDS at the time of their founding, and worked with a team of 12 volunteers.[24]

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[21] Ibid.
[22] Neil G. Giuliano, "A History of Reaching Out," San Francisco AIDS Foundation, 2019, http://sfaf.org/hiv-info/hot-topics/from-the-experts/a-history-of-reaching-out.html.
[23] APLA Health, "History." APLA Health & Wellness, 2018, https://aplahealth.org/about/history/.
[24] Ibid.

APLA would continue their advocacy in several ways, including publishing educational pamphlets which, much like activism and education done by SFAF, came years before the Attorney General was given permission to publish his own. Additionally, the began to raise funds towards AIDS research and their own educational efforts. In March of 1984, they held a fundraiser that featured Joan Rivers and were able to raise $45,000 towards AIDS research.[25] On July 28th, 1985, APLA held the first ever AIDS Walk Los Angeles. Despite their goal of raising $100,000, more than 4,500 people showed up and they raised more than $673,000.[26] In a time where the Governor of California was capping AIDS research funds despite recommendations to increase spending, the APLA was able to raise money to put forth towards their cause, taking action where the federal government had failed to do so.

A major turning point for the gay community in San Francisco, and across the United States, came on May 2nd, 1983, when one of the first ever public displays in support of AIDS victims took place in the form of the first AIDS Candlelight March. The march was organized by a group of 5 HIV positive San Franciscan men in collaboration with the SFAF, which was then called the AIDS & KS Foundation, one of whom was the "AIDS poster boy" Bobbi Campbell.[27] They had several different reasons for organizing such an event, as described in a special 25th anniversary addition of *Global AIDSLink*:

> "We have to do something," was the call of five young men in San Francisco. Bobbi Campbell, Bobby Reynolds, Gary Walsh, Mark Feldman and Dan Turner were in the prime of life, irrepressible, creative, advocates and admittedly excessive in their displays of sexual liberation so recently won by the gay community. In the face of their own unresolved grief, fear, anger and isolation,

[25] Ibid.
[26] Ibid.
[27] Annmarie Christensen, Sara Ann Friedman, Tina Flores, Radeyah Hack, Julia Masters, and eds., *Global AIDSLink* 106 Washington, DC: The Global Health Council, November/December 2007, 3.

> they were hell-bent to put a public face on the disease that would remember the dead, support the living, and shake up the silent and indifferent government. They used all their well-honed organizing skills and experience to produce a Candlelight march with no idea if anyone would show up. On May 2, 1983, marching behind a banner with the slogan "Fighting for our Lives," an estimated 10,000 people took several hours to march the familiar one mile from Castro Street- the epicenter of the gay community of AIDS and gay activism- to City Hall where speeches made only by people with AIDS aroused and inspired the crowd.[28]

Although there were conflicting opinions in the gay community about how to go about addressing the AIDS epidemic, especially in these earlier days where there was still so much that was unknown, the reactions to the Candlelight march were overwhelmingly positive from the LGBTQ+ community and advocates.[29] Chuck Morris, the former publisher of the *San Francisco Sentinel* who had also recently been diagnosed with AIDS, echoed this support in an opinion piece the gay and lesbian newspaper *Coming Up!*: "I think the march is important because the more people see us- those of us with AIDS- in the flesh, the less they're going to fear us… Hopefully, this march will humanize the AIDS crisis."[30] This first Candlelight march represented AIDS patients taking control of the narrative in a time where fear was dominating the public opinion of AIDS and the federal government remained silent.

Following the Candlelight march, Bobbi Campbell helped form a new group called People With AIDS San Francisco.[31] He, along with Dan Turner, were voted to attend an AIDS forum that was part of a larger meeting of gay and lesbian health

[28] Ibid., 3.
[29] Joe Wright, "Only Your Calamity: The Beginnings of Activism by and for People With AIDS," *American Journal of Public Health* 103, no. 10 (October 2013): 1788-1798.
[30] Ibid.
[31] Ibid.

professionals in Denver by the other members of their organization.[32] There, they met with other HIV positive people from across the country including New Yorkers Michael Callen and Richard Berkowitz, founders of the group Gay Men With AIDS.[33] Despite marked differences in opinion on sexuality and how to approach the topic of AIDS, they managed to create a document called the Denver Principles that outlined how they wanted to be treated and their recommendations for the public health community. The document, in its entirety, read as follows:

> We condemn attempts to label us as "victims," a term which implies defeat, and we are only occasionally "patients," a term which implies passivity, helplessness, and dependence upon the care of others. We are "People With AIDS."
>
> **RECOMMENDATIONS FOR HEALTH CARE PROFESSIONALS**
>
> 1. Come out, especially to their patients who have AIDS.
>
> 2. Always clearly identify and discuss the theory they favor as to the cause of AIDS, since this bias affects the treatments and advice they give.
>
> 3. Get in touch with their feelings (e.g., fears, anxieties, hopes, etc.) about AIDS and not simply deal with AIDS intellectually.
>
> 4. Take a thorough personal inventory and identify and examine their own agendas around AIDS.
>
> 5. Treat people with AIDS as a whole people, and address psychological issues as well as biophysical ones.
>
> 6. Address the question of sexuality in people with AIDS specifically, sensitively and with information about gay male sexuality in general, and the sexuality of people with AIDS in particular.
>
> **RECOMMENDATIONS FOR ALL PEOPLE**
>
> 1. Support & Membership in our struggle against those who would fire us from our jobs, evict us from our homes, refuse to touch us or separate us from our loved ones, our community or our peers, since available evidence does not support the view that AIDS can be spread by casual, social contact.
>
> 2. Not scapegoat people with AIDS, blame us for the epidemic or generalize about our lifestyles.
>
> **RECOMMENDATIONS FOR PEOPLE WITH AIDS**

[32] Ibid.
[33] Ibid.

1. Form caucuses to choose their own representatives, to deal with the media, to choose their own agenda and to plan their own strategies.

2. Be involved at every level of decision-making and specifically serve on the board of directors of provider organizations.

3. Be included in all AIDS forums with equal credibility as other participants, to share their own experiences and knowledge.

4. Substitute low-risk sexual behaviors for those which could endanger themselves or their partners; we feel that people with AIDS have an ethical responsibility to inform their potential partners of their health status.

RIGHTS OF PEOPLE WITH AIDS

1. To live as full and satisfying sexual and emotional lives as anyone else.

2. To receive quality medical treatment and quality social service provision without discrimination of any form, including sexual orientation, gender, diagnosis, economic status or race.

3. To obtain full explanations of all medical procedures and risks, to choose or refuse their treatment modalities, to refuse to participate in research without jeopardizing their treatment and to make informed decisions about their lives.

4. To ensure privacy and confidentiality of medical records, to receive human respect and the right to choose who their significant others are.

5. To die—and to LIVE—in dignity.[34]

The Denver Principles affected a multitude of factors surrounding the AIDS crisis. Much like the Candlelight march, it was a demonstration of the gay community and those living with AIDS to take control of the narrative surrounding the disease. Specifically, it represented a linguistic shift in the community- they did not want to be seen as "victims" or "patients", as they did not want to be defined by their disease. They wanted to be seen as "people with AIDS."[35] Controlling the language that surrounded AIDS gave the community a sense of control. They may not have been able to control how they had become infected, especially when it was not known at first how AIDS evolved from a virus that was transmitted through bodily fluids, but taking control of the

[34] Ibid.
[35] Ibid.

narrative was a way to shift power dynamics at a time when the government had all of the power but did nothing.

The Denver Principles continued to affect AIDS activism for years to come, both directly and indirectly. Directly, the Denver Principles led to the creation of the National Association of People With AIDS (NAPWA.)[36] Indirectly, the Denver Principles opened up dissenting dialogue between groups like NAPWA, which was created specifically for people living with AIDS, and groups like the AIDS Coalition to Unleash Power (ACT UP), a group founded in New York in 1987 that had looser definitions for who should act as political voices or advocates during the AIDS epidemic.[37] While NAPWA and groups with similar names and intentions felt that those living with AIDS should be the ones to direct the narrative, ACT UP was more hesitant to limit who was able to advocate for AIDS patients- a move which may have encouraged their growth, especially at a time where most people living with AIDS would not survive more than a few years, given the lack of treatment options.

Although the original ACT UP faction based in New York City, or ACT UP/NY, would become one of the most famous AIDS organizations in America, there was an abundance of ACT UP chapters spread throughout the United States. With California being one of the first places that AIDS was ever detected and one of the areas in the United States with the highest number of HIV positive people, it is unsurprising that an ACT UP chapter was founded in Los Angeles shortly after ACT UP/NY's founding in late 1987.[38] ACT UP/LA functioned in many different ways, from organizing protests to

[36] Ibid.
[37] Ibid.
[38] Benita Roth, *The Life and Death of ACT UP/LA: Anti-AIDS Activism in Los Angeles from the 1980s to the 2000s*, (New York: Cambridge University Press, 2017), 10.

collecting plastic bags for Kaposi's Sarcoma patients undergoing chemotherapy to vomit into.[39] While the entirety of ACT UP and its many chapters were known to act on a national level, ACT UP/LA also participated in local efforts to fight the AIDS epidemic, such as speaking out against the mass closing of gay bathhouses in the state of California.[40]

Despite the prevalence of AIDS in Los Angeles, Los Angeles County was slow to act: "…not one cent of public money was specifically earmarked for AIDS education or care in a County budget until fiscal year 1989/90, nine years into the epidemic… The County's AIDS Program Office was not established until 1985-86 and the Commission on AIDS was not convened until 1987."[41] With a lack of funding, there were only 2 public health and hospitals departments in the entire 4,000 square foot County- and this was something that ACT UP/LA took problem with. So, in 1988, ACT UP/LA began a string of protests that would last for multiple years with the purpose of pushing Los Angeles County to create and staff a unit dedicated solely to treating and researching AIDS at County-USC Hospital.[42]

Their protests began with picketing and overnight vigils in the hospital's lobby in April of 1988, a demonstration which drew in 60 people to participate.[43] Although it seemed as if by August of 1988 they'd won when the LA County Commission on AIDS voted unanimously to recommend the establishment of an AIDS ward that could handle up to 20 patients, the county further delayed the project, leading to several more protests

[39] Ibid., 60.
[40] Ibid., 61.
[41] Ibid., 63.
[42] Ibid., 64.
[43] Ibid., 64.

and a renewed promise of the installation of 60 beds to house AIDS patients. It ultimately took over a year for the AIDS ward to actually open, and even then, there were only 12 beds available, far fewer than the 20, and later 60, that were promised to the protestors.[44] Regardless of the small amount of beds provided, ACT UP/LA had made their point, and the installation of 12 beds in a dedicated AIDS ward was still better than no AIDS ward at all.

San Francisco, also an area facing a large caseload of AIDS, also formed their own ACT UP chapter, ACT UP/SF. This group actually started under the name AIDS Action Pledge before converting to an ACT UP chapter following the organizations founding in 1989.[45] Among their notable accomplishments were shutting down the entire Golden Gate bridge to thru traffic on January 21st, 1989 in an act of protest.[46] With a group of about 80 protestors, they shut the bridge down during rush hour and police reported "20 to 30 arrests" before they were finally able to restore the flow of traffic for commuters.[47] In a strange turn of events, ACT UP/SF soon split into two separate groups in 1990, with one group remaining ACT UP/SF and the other changing their name to ACT UP Golden Gate, or ACT UP/GG. Despite working together for many years, ACT UP/GG released a statement in 2000 declaring that they had changed the name of their organization to Survive AIDS! in order to further distance themselves from ACT UP/SF, who they claimed were functioning under the belief that AIDS does not exist and the government was poisoning patients through HIV medications.[48]

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[44] Ibid., 69.
[45] Visual AIDS Staff, "AIDS Activism and Beyond: Radical Queer Politics of the 80s and 90s," Visual AIDS, October 22, 2018. https://visualaids.org/blog/aids-activism-and-beyond-radical-queer-politics-of-the-80s-and-90s.
[46] Ibid.
[47] *Los Angeles Times*, "State: AIDS Protest Closes Golden Gate," January 31, 1989.
[48] Survive AIDS!, "A Letter to the Community, ACT UP Golden Gate Changes Its Name to "Survive

While there were a multitude of different groups in California advocating for those affected by the AIDS epidemic, protests were not always such a segregated event. In example, the Candlelight march, although associated with SFAF, was not participated in by only members of SFAF. Often times large groups of people would protest for the same reason in the same area, but not necessarily all members of a particular group, or sometimes even the same cause. When Pope John Paul II came to visit San Francisco, a wide variety of people showed up to protest. There were feminists, members of the LGBTQ+ community, and even Holocaust survivors, offended by the Pope's recent visit with Kurt Waldheim, the President of Austria who was implicated in allegedly aiding the deportation of Jews to death camps during World War II.[49] Regardless of their differences, more than 2,000 came out to protest the Pope's visit to San Francisco, inadvertently all connected through a single common enemy.[50]

The Pope was viewed much like President Ronald Reagan was around this time by the LGBTQ+ community and those afflicted by HIV/AIDS. Not only had the Catholic church strengthened its rhetoric against homosexuality in the recent years by referring to it as "a more or less strong tendency ordered toward an intrinsic moral evil," but Pope John Paul II's tour across America in 1987 was the first time he'd addressed the AIDS crisis whatsoever.[51] Much like how the gay community protested outside of Reagan's amfAR speech that same year, they were reasonably outraged at the Pope's belated

AIDS," March 21, 2000, http://www.actupny.org/indexfolder/actupgg.html.
[49] Robert Reinhold, "The Papal Visit; Protest in San Francisco Is Largest of Pope's Trip," *The New York Times* (New York City): September 18, 1987, New York Times Archives.
[50] Ibid.
[51] Robert Reinhold, "The Papal Visit; AIDS Issue at Fore as Pope Visits San Francisco Today," *The New York Times* (New York City): September 17, 1987, New York Times Archives.

attempt to address the epidemic and protested along the areas he was visiting all throughout the United States.

During the beginning of the AIDS crisis, and even up to current day America, the LGBTQ+ community had to deal with attacks and ignorance from all sides. The President of the United States refused to even utter the word “AIDS”, the California Governor George Deukmejian failed to allocate enough money towards researching and treating the disease, the general public treated AIDS victims like pariahs, and the Pope continued to disavow homosexuality while simultaneously ignoring the hordes of dying gay men in the United States. Due to the negligence of the federal government and the immense prejudice that they were facing, the LGBTQ+ community took matters into their own hands by founding organizations that advocated for AIDS, protesting, speaking out, and advocating for AIDS patients and each other.

Conclusion

AIDS was a devastating scourge to the LGBTQ+ community in the 1980s, only made worse by the Reagan administration's ignorance and failure to address the epidemic for multiple years. Despite the development of life-saving antiretroviral therapies and medications that can prevent HIV transmission with a near-zero failure rate, HIV and AIDS continue to plague the United States and the world. Larry Kramer, an outspoken advocate for the gay community and cofounder of ACT UP and Gay Men's Health Crisis (GMHC), recently published an opinion piece in *The New York Times* expressing his fear that things are only to get worse for the gay community.[1] He has been vocal about his disapproval of the current administration, and in his article he writes:

> …by the time a modicum of acceptance by the outside world starts to arrive, we are visited with a plague. It is a plague of disease, and with our new president it continues to be a plague of hate. There is not one cabinet member who has supportive or welcoming words for us. Every week, it seems, Mr. Trump appoints another judge who is on record as hating us. They will serve for many years. A new Supreme Court will further echo this disdain.[2]

It makes sense for Larry Kramer and other LGBTQ+ advocates to be concerned about this administration's reaction to the AIDS crisis. Despite Trump's stated goals of ending new HIV transmissions by 2030, he chose former Indiana Governor Mike Pence as his running mate- a man who has notoriously acted against the interests of the gay community and HIV positive Indiana residents. Prior to campaigning with Donald Trump in the 2016 Presidential election, he had run for Congress in 2000. On his now-archived campaign website, he stated that he was against same-sex marriage and anti-

[1] Larry Kramer, "For Gays, the Worst Is Yet to Come. Again," *The New York Times*: July 11, 2018.
[2] Ibid.

discrimination laws that would protect the LGBTQ+ community.[3] Perhaps even more alarming, he proposed withholding funds from the Ryan White Care Act, which provides funding for researching and treating HIV/AIDS, unless it encouraged HIV positive people to "change their sexual behavior":

> Congress should support the reauthorization of the Ryan White Care Act only after completion of an audit to ensure that federal dollars were no longer being given to organizations that celebrate and encourage the types of behaviors that facilitate the spreading of the HIV virus. Resources should be directed toward those institutions which provide assistance to those seeking to change their sexual behavior.[4]

Given Pence's staunch religious beliefs, many believe that he was referring to gay conversion therapy. However, he staunchly denies that this was the case.[5]

Pence's commentary and actions on HIV positive Americans continued to show problematic partisanship and delays. In 2015, a small county in Indiana, Scott County, experienced an unprecedented surge in HIV diagnoses among intravenous drug users. Pence, who was the Governor of Indiana at that time, was urged to provide clean needles through a needle exchange program by the CDC and other health officials. However, Pence, an Evangelical Christian, fought these suggestions based on personal moral objections, and did nothing to curb the epidemic for two months, instead taking time to "pray on it."[6] Beth Meyerson, the co-director of the Indiana University's Rural Center for AIDS/STD Prevention, said that Pence's reluctance to adhere to recommendations made

[3] Liam Stack, "Mike Pence and 'Conversion Therapy': A History," *The New York Times*: November 30, 2016.
[4] Ibid.
[5] Ibid.
[6] Megan Twohey, "Mike Pence's Response to H.I.V. Outbreak: Prayer, Then a Change of Heart," *The New York Times*: August 7, 2016.

by the public health community made the situation more difficult to address: “He made it an uphill battle.”[7] Following the application of the needle exchange program, Scott County saw its rate of new HIV diagnoses drop to zero.[8]

Mike Pence’s reluctance to provide the necessary tools for HIV prevention in the midst of a growing epidemic is a situation all too familiar for those suffering from HIV/AIDS. Although it was on a smaller scale and Mike Pence only waited 2 months to take action rather than the years it took for Ronald Reagan to even publicly utter the word “AIDS”, the theme is the same: They were two Republican politicians who used “moral objections” as an excuse to delay necessary medical intervention. Unfortunately, although there has been an abundance of medical advancements in the treatment and management of HIV and AIDS, many of the prejudices against those affected have stayed the same, and we are unlikely to see any more improvement under this current administration. Larry Kramer said it best: “The dismantling of the system started under Reagan… Trump’s just the latest in a long line of its executioners”[9]

[7] Ibid.
[8] Ibid.
[9] Trenton Straube, "Of Course, Larry Kramer Believes AIDS Is Worse Now Than Ever," *POZ*: August 30, 2018, https://www.poz.com/article/course-larry-kramer-believes-aids-worse-now-ever.

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