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Shattered Mirrors: Our Search for Identity and Community in the AIDS Era

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SHATTERED MIRRORS: OUR SEARCH FOR IDENTITY AND COMMUNITY IN THE AIDS ERA. By *Monroe E. Price*. Cambridge: Harvard University Press. 1989. Pp. 159. \$19.95.

Alarms are beginning to sound across America. The alarms mark the time for taking a dose of AZT, the only drug currently approved by the Food and Drug Administration to treat persons infected with the human immunodeficiency virus (HIV), the virus that causes AIDS.¹ The sound is a pointed reminder of the extensive reach of the AIDS epidemic. Since 1981, when the Centers for Disease Control (CDC) first reported the opportunistic infections that would come to characterize the acquired immune deficiency syndrome,² in the United States 121,645 cases of AIDS have been reported, and 72,578 individuals have died from AIDS-related causes;³ an additional one million Americans are thought to be infected with HIV.⁴

An epidemic, however, is much more than statistics.⁵ Compre-

1. AIDS, the acquired immune deficiency syndrome, is characterized by opportunistic infections that are unlikely to appear in healthy individuals whose immune systems function normally. AIDS is the last phase of a spectrum of infection with HIV. "HIV causes a predictable, progressive derangement of immune function, and AIDS is just one, late manifestation of that process." Redfield & Burke, *HIV Infection: The Clinical Picture*, 259 *SCI. AM.* 90 (1988); see also INSTITUTE OF MEDICINE, NATIONAL ACADEMY OF SCIENCES, *CONFRONTING AIDS: UPDATE 1988*, 36-38 (describing the stages of HIV infection) [hereinafter *CONFRONTING AIDS 1988 UPDATE*].

AZT, or zidovudine, is recommended both for individuals who exhibit symptoms of AIDS and for individuals who are infected with HIV and have impaired immune systems but who are otherwise asymptomatic. See *U.S. Urges Wider Use of AZT for Adults with AIDS Virus*, *N.Y. Times*, Mar. 3, 1990, at 10, col. 5; Hilt, *Drug Said to Help AIDS Cases With Virus but No Symptoms*, *N.Y. Times*, Aug. 18, 1989, at A1, col. 1. AZT treats the underlying HIV infection; other treatments have been approved for the treatment of particular opportunistic infections associated with HIV disease — for example, aerosolized pentamidine is used to prevent or to treat *Pneumocystis Carinii* pneumonia, the most common cause of death in persons with AIDS. See Gostin, *Preface to AIDS AND THE HEALTH CARE SYSTEM* 6-7 (1990).

2. The first CDC report is foreboding:

In the period October 1980-May 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.

* * *

Editorial Note: *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.

Centers for Disease Control, 30 *MORBIDITY AND MORTALITY WEEKLY REP.* 250 (June 5, 1981) (footnote omitted).

3. CENTERS FOR DISEASE CONTROL, *HIV/AIDS SURVEILLANCE* 5, 13 (Feb. 1990) (cases reported through January 1990).

4. CENTERS FOR DISEASE CONTROL, *HIV Prevalence, Projected AIDS Case Estimates: Workshop, October 31-November 1, 1989*, 263 *J. A.M.A.* 1477 (1990).

5. That is not to say that statistics are unimportant. Tracking the course of the epidemic is necessary to meet health care needs and to target public health prevention and education programs. See E. NICHOLS, *MOBILIZING AGAINST AIDS* 22 (rev. ed. 1989) (noting importance of

hending the impact of an epidemic requires looking beneath the statistics at the individuals whose lives are affected by the disease,⁶ and it requires looking beyond the statistics to the "social construction" of the epidemic. Social construction provides an epidemic with context; it gives form to the societal response to the epidemic.⁷ The epidemic, in turn, will often "color the mood" of the society in which it occurs.⁸

On the cusp of the second decade of the AIDS epidemic, AIDS is at once a biomedical, a cultural, and a political phenomenon, and it appears poised to "color the mood" of, and perhaps even to reshape, American society. This is the premise of Monroe Price's book, *Shattered Mirrors: The Search for Identity and Community in the AIDS Era*.⁹ Price, at the outset of his book, describes AIDS as "a faultline beneath our institutions, threatening to undermine much that we have taken for granted about the pillars of our culture" (p. 1). No doubt, some readers will reject this description, and the premise of the book, on the basis that it overstates the significance of AIDS; for these readers, the magnitude of an epidemic is measured by statistics.¹⁰ However, most readers should find Price's description to be apt, comporting with the descriptions offered by the many others who believe that the AIDS epidemic will be a catalyst for enduring social

HIV prevalence statistics for state and local planning); *Projecting the Incidence of AIDS*, 263 J. A.M.A. 1536 (1990) (editorial) (describing projections of prevalence as "crucial" to controlling epidemic's spread); Morgan, Curran & Berkelman, *The Future Course of AIDS in the United States*, 263 J. A.M.A. 1539, 1539 (editorial) (Projections of the future course of the epidemic "influence the scope and direction of both public and private initiatives related to HIV.").

The political significance of statistics is reflected by the protests that erupted two years ago when the New York City Health Commissioner decreased by fifty percent the estimate of the number of New Yorkers infected with HIV. See Lambert, *AIDS Count: Is the Quest for Precision on the Right Track?*, N.Y. Times, July 24, 1988, § 4 (The Week in Review), at 6, col. 1.

6. The NAMES Project Quilt provides an emotionally moving tribute to thousands of individuals who have died from AIDS. See Weinstein, *Names Carried into the Future: An AIDS Quilt Unfolds*, VILLAGE VOICE, June 21, 1988, at 19.

7. See Gilman, *AIDS and Syphilis: The Iconography of Disease*, in AIDS: CULTURAL ANALYSIS, CULTURAL ACTIVISM 87-88 (D. Crimp ed. 1988) ("It is vital that we understand [the] social construction of AIDS because it has directly affected the lives of so many. People have been stigmatized (and destroyed) as much by the 'idea' of AIDS as by its reality."); Brandt, *AIDS and Metaphors: Toward the Social Meaning of Epidemic Disease*, 55 SOC. RES. 413, 414-15 (1988) ("Social values affect both the way we come to see and understand a particular disease and the interventions we undertake. In this view, disease is 'socially constructed.'"); see also Adam, *The State, Public Policy, and AIDS Discourse*, 13 CONTEMP. CRISES 1, 1 (1989) ("AIDS is something of a 'pure case' in the social construction of disease, having arrived as an unknown and unanticipated phenomenon . . . into a highly developed political and ideological arena which gave it meaning and a 'place' on the historical stage.").

8. Goldstein, *Visitation Rites: The Elusive Tradition of Plague Lit*, VILLAGE VOICE, Oct. 1987, literary supp., at 6 (quoting R. DUBOS & J. DUBOS, *THE WHITE PLAGUE* (1952)).

9. Price is the Dean of the Benjamin N. Cardozo School of Law at Yeshiva University in New York City.

10. See Sincere, *Can Our Civil Rights Survive AIDS?*, Wash. Times, Sept. 25, 1989, at D9, col. 5 (reviewing *Shattered Mirrors*) (describing Price's assumption regarding the pervasiveness of AIDS as faulty); cf. M. FUMENTO, *THE MYTH OF HETEROSEXUAL AIDS* (1990) (criticizing the media for exaggerating the spread of AIDS among heterosexuals in the United States).

change.¹¹

In *Shattered Mirrors*, Price sets out to explore how AIDS might reshape American society by focusing on the three "cultural mirrors" that he believes "have defined our relationships and ourselves since the 1960s" (p. 5): freedom of expression; the idea of fairness and equal treatment under the law; and societal confidence in science and technological progress. Price divides his book into three parts, discussing AIDS in the context of each of these cultural mirrors.

In Part 1, which comprises about half the book, Price discusses the role of the entertainment media in shaping public attitudes, and he ponders the consequences of governmental meddling or competition with the media. Price begins by avowing that there exists in society a strong nexus between sexual expression and individual autonomy: "We assert sexual freedom virtually as a badge of the openness and creativity of our society, as a fulfillment of some unarticulated constitutional promise of individual autonomy" (p. 9). Price suggests that this "ideal of liberation," if not always reflected in actual conduct, is imbedded in the consciousness of society (pp. 9-10). Although Price does not immediately explain the origin of this ideal,¹² he maintains that the media, the "gatekeepers and image makers of the culture," have advanced it significantly (pp. 10-11).

Price then examines how this ideal will fare in the AIDS era when "[s]exual autonomy is . . . transformed from a sign of individual freedom into a source of potential death."¹³ Price focuses on each medium separately — movies ("The Balcony as Classroom"), music ("A Language All Their Own"), television ("Primetime Tutor"), and advertising ("The Haiku of Desire"). The reader who is unaware that Price has some expertise in the field of entertainment law¹⁴ might question his foray into media criticism.¹⁵ However, Price has assem-

11. See, e.g., R. BAYER, PRIVATE ACTS, SOCIAL CONSEQUENCES: AIDS AND THE POLITICS OF PUBLIC HEALTH (1989); THE SOCIAL IMPACT OF AIDS (R. Berk ed. 1988); *Living with AIDS*, 118 DAEDALUS (1989).

12. Later, he suggests a possible explanation for the development of the ideal:

In the area of sexual behavior, the discovery of the effect of penicillin on syphilis and the invention of the birth control pill probably had more to do with changes in our attitudes toward permissible sexual conduct than all the social movements, advertising campaigns, and religious reforms combined.

P. 103.

13. P. 10. By suggesting that "sex = death," Price is engaging in a bit of hyperbole. Although it is true that HIV is transmitted by certain sexual behaviors, such as unprotected anal intercourse, other sexual behaviors are safer. See also *infra* note 44.

14. Price previously has spoken out against the colorization of black and white films. In 1988, he testified before a subcommittee in the U.S. House of Representatives in support of a House bill that would have restricted film colorization. See Yarrow, *Debate Heats Up on Coloring Films*, N.Y. Times, June 22, 1988, at C26, col. 1; see also Price, *Now Playing: Colorization Bill*, NATL. L.J., July 18, 1988, at 13 (op. ed.).

15. The reader might find that Price's critiques tend to cast more weight than their subjects can bear. For example, he describes the movie *Casual Sex?* as both a "fluff of a movie" and "coquettish and clumsy didactic." P. 17.

bled a variety of anecdotes that seem to support his observation that the media are trying to conform their sexual imagery to the AIDS era.¹⁶ Unfortunately, Price offers no empirical data to support his observation;¹⁷ thus, it is difficult to know the extent to which the media have in fact updated their imagery.

The pace of change is important, Price writes, because if the media exhibit a reluctance to self-regulate, then "[m]ore likely than censorship — and in fact already underway — is a direct effort by the government to affect the way the public thinks about AIDS by delivering powerful messages of its own, in its own voice" (p. 38). Even with media cooperation, Price suggests that the government may be better positioned to broadcast a clear and strong message detailing how changes in private behavior can impede the spread of the AIDS epidemic (p. 39). The federal government spent more than 100 million dollars in fiscal year 1989 to educate the public about AIDS, primarily by informing the public how to adjust behaviors to avoid exposure to HIV.¹⁸ According to Price, such extensive government speech will alter society's understanding of the first amendment guarantee of free expression (pp. 39-40).

Before elaborating on this point, however, Price makes a somewhat perplexing diversion that undermines an otherwise thoughtful discussion. Price states that government social programs, particularly education, must account for two Americas: one, the "romantic and idealized America, the America of the father and the mother and two or three children," and the other, "the statistical America . . . where parents, for a complex of reasons, have abdicated the role of moral tutor or feel that their role has been usurped by influences beyond their control" (p. 42). Price adds that he and his wife and their three children are a part of the first America (p. 43). The reason Price feels compelled to share this with the reader is not clear. Price goes on to

16. See, e.g., p.17 (discussing decision by producers to add question mark to the movie *Casual Sex?*); p. 21 ("Janet Jackson urges, 'Let's wait awhile, before we go too far' . . ."). However, Price also notes that "updating" has not come easily.

The clumsy difficulty of [television] serving as a mirror of the society and a moral tutor at a time of change is illustrated by the programming of CBS one summer evening in 1987. To much fanfare, the network showed *An Enemy Among Us*, a program about a young middle-class boy who tested AIDS-positive as a result of receiving a blood transfusion several years before. It was state-of-the-art AIDS instruction, with Gladys Knight delivering a lecture to a classroom of students about the need to postpone sexual relations. "The free-wheeling days of the 60s and 70s are over," she said. This brave attempt to chasten America's youth was followed by the fifth annual Miss Teen American Contest, featuring as role models, the cheerleaders of the Dallas Cowboys, along with fifty-one contestants singing a sultry version of "I Wonder Who's Hot Tonight."

P. 26.

17. Others have collected empirical data on sexual imagery and the media. For a discussion of AIDS and the news media, see J. KINSELLA, *COVERING THE PLAGUE: AIDS AND THE AMERICAN MEDIA* (1989).

18. See Boruch, Coates, Coyle, Davis, Hubbard, Martin & Turner, *Evaluating HIV Testing and Counseling Projects*, in *EVALUATING AIDS PREVENTION PROGRAMS* 98 (1989).

decry that "the ratio of pictures to words in [children's] books seems to have increased geometrically over the years" (p. 44). He complains that modern children's books lack moral lessons, and he misses "moralistic [television] series such as *Lassie* and *The Ozzie and Harriet Show*" (p. 45). The point Price seems to want to make is that society no longer transfers values from one generation to the next in the manner that it once did. Instead, he appears only to be nostalgic for an idyllic past that perhaps never was.¹⁹

Once the reader gets beyond such trifling, Price returns to more solid ground with a discussion of the consequences of government speech in the AIDS era (p. 53). In this context, concerns about government speech²⁰ are compounded because AIDS education necessarily implicates moral values. In the United States, HIV is transmitted most commonly through sexual intercourse between men and through the sharing of needles and syringes used to inject illicit drugs,²¹ behaviors many people view as immoral.²² The danger is that this view of morality will dictate the content of government speech regarding AIDS prevention, making it less "realistic" and thus less effective.²³

Price cites the actions of Senator Jesse Helms as one of the "perils that can ensue when government gets into the business of articulating values" (p. 58). In 1988, Senator Helms sought to prevent publicly

19. In the words of Machiavelli: "Men always, but not always with good reason, praise bygone days and criticize the present." MACHIAVELLI, *THE DISCOURSES* 265 (B. Crick ed. 1970).

20. See generally Shiffrin, *Government Speech*, 27 UCLA L. REV. 565 (1980) (discussing the application of the first amendment to government speech); Note, *The Voice of Government as an Abridgement of First Amendment Rights of Speakers: Rethinking Meese v. Keene*, 1989 DUKE L.J. 654 (noting that analysis of first amendment and government speech differs from analysis of individual expression).

21. In the United States, sexual intercourse between two men accounts for more than half of all AIDS cases, and intravenous drug use accounts for one quarter of all cases. However, worldwide, HIV is most commonly transmitted through heterosexual vaginal intercourse. Other modes of transmission include transfusion of contaminated blood or blood products, transplantation of infected organs, and transmission from infected mother to newborn child. See *CONFRONTING AIDS: UPDATE 1988*, *supra* note 1, at 3.

22. See, e.g., Blendon & Donelan, *AIDS and Discrimination: Public and Professional Perspectives*, in *AIDS AND THE HEALTH CARE SYSTEM* 79 (L. Gostin ed. 1990) ("One in four or five Americans candidly admit they feel no sympathy for those who have contracted AIDS as a result of homosexual activity (18%) or as a result of sharing needles while using drugs (23%)."); NATL. CONF. OF CATHOLIC BISHOPS, *CALLED TO COMPASSION AND RESPONSIBILITY: A RESPONSE TO THE HIV/AIDS CRISIS* 17 (1989) (reiterating "the Church's constant teaching regarding the intrinsic immorality of homosexual activity").

23. Information must be delivered in a manner that is comprehensible and relevant to the audience it is intended to reach. Clearly, this requirement will entail providing written and spoken messages in the different languages and idioms of the various ethnic, racial, social, age, and sexual orientation groups that make up the national population. . . .

There is also a need in AIDS education for frank exchange that allows no misunderstanding. Clear, explicit language is required; yet its use in AIDS education continues to be impeded by the pervasive American reticence about discussing sexual behavior

NATIONAL RESEARCH COUNCIL, *AIDS: SEXUAL BEHAVIOR AND INTRAVENOUS DRUG USE* 263 (1989).

funded AIDS education from promoting or encouraging homosexuality.²⁴ Helms' amendment forced the CDC to monitor the content of AIDS education materials and to establish statewide review bodies to ensure that federal money was not used to describe explicitly high-risk sexual activities or to "eroticize" safer behaviors.²⁵ These restrictions undermined public health efforts to encourage gay men to practice "safer sex." The result was a message that, although carefully calculated not to offend, failed to address as effectively as it might have the needs of those at greatest risk of becoming infected.²⁶

Although Senator Helms' actions are a convincing argument against too great a role for government in AIDS education, there does not appear to be a viable alternative. One possibility raised by Price is that organized religion should be encouraged "as part of a systematic program to influence the behavior of the young" (p. 135). However, Price does not adequately address the problems attendant with this suggestion, particularly the difficulties posed by religious teachings that disapprove of homosexuality or sex outside of marriage. For example, the National Conference of Catholic Bishops in 1989 issued a document that read:

Sexual intercourse is appropriate and morally good only when, in the context of heterosexual marriage, it is a celebration of faithful love and is open to new life. The use of prophylactics to prevent the spread of HIV is technically unreliable. Moreover, advocating this approach means, in effect, promoting behavior which is morally unacceptable.²⁷

Such statements, whether made by government or religious organizations, discourage sexual practices that have been shown to impede the spread of HIV; thus, such statements should not be encouraged.

Most commentators, rather than finding the government's message

24. P. 58. See 133 CONG. REC. S14202 (daily ed. Oct. 14, 1987) (statement of Sen. Helms regarding his amendment); see also R. BAYER, *supra* note 11, at 218 (discussing the Helms amendment).

25. "The Helms amendment became, instantly, a monument to the constraining hand of government." P. 58. For a discussion of explicit education programs and the impact of the Helms amendment, see Crimp, *How to Have Promiscuity in an Epidemic*, in AIDS: CULTURAL ANALYSIS, CULTURAL ACTIVISM 255-71 (D. Crimp ed. 1988).

26. See *supra* note 23 and accompanying text; see also R. BAYER, *supra* note 11, at 218 ("Whatever the ultimate impact of the [Helms'] amendment, its passage underscored the persistence of an antagonism to homosexuality that would, on practical as well as symbolic levels, hinder the American struggle against AIDS.").

27. NATL. CONF. OF CATHOLIC BISHOPS, *supra* note 22, at 19 (footnote omitted). The Catholic Church has not been the only religious institution to express opposition to homosexuality. In 1987, the Reverend Jerry Falwell, leader of the now defunct Moral Majority and host of the *Old Time Gospel Hour*, wrote, "'AIDS is a lethal judgment of God on America for endorsing th[e] vulgar, perverted and reprobate [homosexual] lifestyle.'" Falwell, *AIDS: The Judgment of God*, LIBERTY REP., Apr. 1987, at 5 (quoted in E. SHELF & R. SUTHERLAND, AIDS AND THE CHURCH 23 (1987)).

To be sure, not all individual members of these institutions, and not all religious institutions, have responded to AIDS in this manner. Many of the most devoted caregivers and advocates for people with AIDS have been affiliated with organized religion. See E. SHELF & R. SUTHERLAND, *supra* (providing examples of, and calling for, a compassionate response to AIDS).

too powerful, have criticized the government's reluctance to speak out on AIDS and its reliance on euphemism when it does speak.²⁸ Moreover, historical precedent supports a leading role for government on public health issues, particularly sexually transmitted diseases, with media trailing behind.²⁹ Thus, although Price's warnings about government speech regarding AIDS are well taken, the government can play a salutary role. Witness the respect garnered by former Surgeon General C. Everett Koop; although a self-professed conservative, he advanced an unvarnished message about HIV transmission as well as a plea for compassion for persons with AIDS.³⁰

In Part 2 of *Shattered Mirrors*, Price discusses the idea of fairness and equality under the law. The chapter in this part entitled "Discrimination at Society's Margin" is problematic from beginning to end. Price mischaracterizes some of the issues fundamental to understanding the implications of the AIDS epidemic. Price writes: "AIDS has been a plague of blame and fear. It now promises to be a plague of unfairness, indifference, and discrimination" (p. 64). The reason, Price maintains, is that AIDS is becoming less a disease of homosexual men and "more and more a disease of the [urban poor]."³¹ This rationale implies that in the first decade of the epidemic persons with AIDS were less likely to encounter unfairness, indifference, and discrimination. Numerous accounts suggest otherwise.³²

28. See, e.g., R. SHILTS, *AND THE BAND PLAYED ON* (1987) (criticizing the lack of strong federal leadership); Crimp, *AIDS: Cultural Analysis/Cultural Activism*, in *AIDS: CULTURAL ANALYSIS, CULTURAL ACTIVISM*, *supra* note 25; see also Banks, *AIDS and Government: A Plan of Action?*, 87 MICH. L. REV. 1321, 1333-34 (1989) (reviewing REPORT OF THE PRESIDENTIAL COMMISSION ON THE HUMAN IMMUNODEFICIENCY VIRUS EPIDEMIC (1988) and noting criticisms of the federal government's response that were deleted from Commission's final report).

Over 21,000 Americans had died from AIDS before former President Ronald Reagan ever spoke of AIDS publicly. *Harper's Index to the 1980s*, HARPER'S MAG., Jan. 1990, at 41 (listing as its sources the Centers for Disease Control in Atlanta and Gay Men's Health Crisis in New York City). Price mentions the lack of strong government leadership. P. 134.

29. See A. BRANDT, *NO MAGIC BULLET* 122 (1985).

In November 1934 the Columbia Broadcast Company scheduled a radio address by New York State Health Commissioner Thomas Parran, Jr., on future goals in the area of public health. . . . [T]he talk was never delivered. Moments before air-time, CBS informed him that he could not mention syphilis and gonorrhea by name; in response to this decision, Parran refused to go on. . . . Parran, reacting angrily to being censored, pointed out the hypocrisy in the standards for radio broadcasting. In a press release issued by his office the next day, he commented that his speech should have been considered more acceptable than "the veiled obscenity permitted by Columbia in the vaudeville acts of some of their commercial programs."

Id. (footnote omitted).

30. See *CONFRONTING AIDS: UPDATE 1988*, *supra* note 1, at 24 (commending the "superb leadership" of Surgeon General C. Everett Koop); R. BAYER, *supra* note 11, at 215 ("In direct, unadorned language Koop warned Americans both homosexual and heterosexual about the risks of AIDS. . . . A similar boldness characterized Koop's discussion of intravenous drug [use] and AIDS.").

31. Price makes the "changing face of AIDS" statement at least two times. See pp. 2, 65.

32. "There is little doubt that for some people the AIDS crisis lends force to their fear and hatred of gays; AIDS appears, for example, to be a significant factor in the increasing violence against them, and other homophobic acts in the U.S." Treichler, *AIDS, Homophobia, and Bi-*

Although Price is correct in noting that AIDS is increasingly a disease associated with the urban poor,³³ this does not justify ignoring, as Price appears to, the fact that gay men still comprise the majority of persons with AIDS.³⁴ Price includes subheadings on AIDS and racial minorities, drug users, and children,³⁵ but he makes only one brief mention of AIDS and gay men in the context of discrimination, and in that passage he is overly sanguine. Price writes, "Much of the political energy spent in the period since 1950 has been to discredit and reduce or eliminate discrimination in the workplace — against people of color, against Jews, against women, against the elderly, against gays and lesbians" (p. 75). As a children's game might ask, "[W]hat's wrong with this picture?" Laws prohibiting employment discrimination based on race, religion, gender, and age have been enacted by legislatures and upheld by courts. On the other hand, few laws prohibit employment discrimination on the basis of sexual orientation.³⁶

omedical Discourse: An Epidemic of Signification, in AIDS: CULTURAL ANALYSIS, CULTURAL ACTIVISM, *supra* note 25, at 65. In 1988, Admiral Watkins, who chaired the President's Commission on AIDS, called discrimination "the most significant obstacle to progress' against the epidemic." Blendon & Donelan, *Discrimination Against People with AIDS*, 319 NEW ENG. J. MED. 1022, 1022 (1988) (footnote omitted) (reviewing polling data related to public attitudes and misperceptions about AIDS); *see also* Blendon & Donelan, *supra* note 22 (updating their 1988 article).

33. *See, e.g.*, Altman, *Who's Stricken and How: AIDS Pattern is Shifting*, N.Y. Times, Feb. 5, 1989, at A1, col. 1 ("Once overwhelmingly an affliction of homosexual men, [AIDS] is more and more becoming a disease of poor, black and Hispanic heterosexuals in the inner city.").

34. Despite the "changing face of the epidemic," gay and bisexual men also continue to comprise the majority of new AIDS cases, in addition to the cumulative total. "During 1989, 57 percent of all AIDS cases were among homosexual/bisexual men not using intravenous drugs; 23 percent were heterosexual male or female [IV-drug users]; and 4 percent were sexual partners or children of [IV-drug users] or their partners." INSTITUTE FOR HEALTH POLICY STUDIES, HIV DISEASE: HEALTH CARE AND POLICY ISSUES 15 (draft Feb. 7, 1990) (copy on file with *Michigan Law Review*).

The tendency to deemphasize the impact of AIDS on gay men was evidenced in the first major presidential speech on AIDS delivered by President George Bush in March 1990; in a speech of almost 2000 words, the word "gay" or "homosexual" did not appear once. Remarks of President Bush to the National Leadership Coalition on AIDS, Mar. 29, 1990 (text of speech reported by the Federal Information Systems Corp., available on Nexis). The news media also tend to overlook gay men in their reporting of the epidemic. For example, when President Bush visited children and adults with AIDS at the National Institutes of Health in December 1989, most national newspapers reported only that Bush met with children. *See* Robinson, *Bush Has Hugs, Sweets, Words of Concern for AIDS Patients*, Boston Globe, Dec. 23, 1989, at 7, col. 1 (mentioning visit with adults but not stating that they were gay men); *Bushes Visit Children with AIDS in Wards*, N.Y. Times, Dec. 23, 1989, at 32, col. 5 (reporting only visit with children). *But see* Stewart, *President Visits AIDS Patients in U.S. Clinic*, L.A. Times, Dec. 23, 1989, at A28, col. 1 ("The fact that Bush met . . . with gay men suffering from AIDS was hailed by the National Gay and Lesbian Task Force as the first time that the Administration had openly acknowledged that AIDS 'has a particular impact on the gay community and gay people.'").

35. Children under the age of 13 comprise less than two percent of all AIDS cases. *See* CENTERS FOR DISEASE CONTROL, *supra* note 3, at 13 (cumulative totals through Jan. 1990).

36. *See Developments in the Law — Sexual Orientation and the Law*, 102 HARV. L. REV. 1508, 1667 (1989).

Unfortunately, very little legislation protects gay men and lesbians in the private sector. No federal statute bars discrimination by private citizens or organizations on the basis of sexual orientation. Nor do the states provide such protection: only Wisconsin has a comprehen-

Price also misconstrues other issues. Distinguishing AIDS transmitted sexually between two men, from AIDS transmitted via the sharing of needles, Price writes that sex "was considered to be a celebration of self by many of those within the [homosexual] culture. No similar statement can be made about the use of intravenous drugs . . ." (p. 66). This contradicts what some commentators have said about the use of intravenous drugs and the sharing of injection equipment which may involve special bonds among IV drug users.³⁷

Price next examines "The Vocabulary of Concern." Price discusses the role of language in shaping the societal response to the AIDS epidemic: "Control the language and society's sense of what is fair follows" (p. 81). One of the metaphors Price discusses is the war metaphor, which is frequently invoked to describe efforts to impede the AIDS epidemic.³⁸ Price expresses concern about how the use of this metaphor has sometimes translated into public policy; he warns that "in times of war . . . the actions of government become clothed with an unusual inviolability."³⁹ Price cites as an example the harshly criticized decision of the U.S. Supreme Court in *Korematsu v. United States*, which upheld a military order that excluded persons of Japanese ancestry from designated parts of the West Coast.⁴⁰ Nevertheless, the war metaphor is difficult to avoid.⁴¹

In Part 3, Price writes of the societal dependence on technological innovation and the "crisis of confidence" that results when a problem

sive statute barring such discrimination in employment. Moreover, few state courts have interpreted state civil rights statutes to bar discrimination on the basis of sexual orientation. *Id.* (footnotes omitted).

37. See, e.g., Stryker, *IV Drug Use and AIDS: Public Policy and Dirty Needles*, 14 J. HEALTH, POL., POLY. & L. 719, 721 (1989) ("The social bond forged during initiation into drug injection is an important aspect of needle sharing. Sharing within 'friendship groups' has been reported by a number of ethnographers."); Des Jarlais, Friedman & Strug, *AIDS and Needle Sharing Within the IV-Drug Using Subculture*, in THE SOCIAL DIMENSIONS OF AIDS (D.A. Feldman & T.M. Johnson ed. 1986) ("The sharing of [equipment] symbolizes a wide range of positive relationships among IV-drug users, from the romantic initiation, to the social bonding of running buddies, to the practical mutual advantages for a user and a [shooting] gallery owner."). But see Morgan, *Inside a "Shooting Gallery": New Front in the AIDS War*, N.Y. Times, Feb. 5, 1988, at B1, col. 2 (quoting an IV-drug user as saying, "This talk about addicts liking to share needles is a lie . . . The only reason you would use another person's needles is because you have no money to buy them, your own are clogged up or you are too sick to care.").

38. P. 81. The war metaphor is doing double duty these days, referring also to the government's "war on drugs." See, e.g., *Remarks on Signing the Drug Abuse Resistance Education Day Proclamation*, 25 WEEKLY COMP. PRES. DOC. 1358-60 (Sept. 13, 1989). For a detailed discussion of the many metaphors that have been invoked in response to AIDS, see S. SONTAG, *AIDS AND ITS METAPHORS* (1989).

39. P. 82. See S. SONTAG, *supra* note 38, at 94 (The military metaphor "overmobilizes, it overdescribes, and it powerfully contributes to the excommunicating and stigmatizing of the ill.").

40. 323 U.S. 214, 219 (1944). For a recent criticism of the *Korematsu* decision, see P. IRONS, *JUSTICE AT WAR* (1983).

41. Price himself alludes to the metaphor in the introduction to his book: "AIDS is becoming internalized, as just another threatening fact of life, like the possibility of . . . nuclear war." P. 4.

fails to yield to a ready technological solution. AIDS poses a modern crisis of confidence because, despite rapid advances in biomedical research, a cure or vaccine remains elusive. Price notes that “[a]t present — before the discovery of a magic-bullet cure — AIDS has reintroduced the idea that personal acts have social consequences.”⁴² About that, Price may be correct, but the conclusions that he implicitly draws are troublesome.

Price writes, “[C]onsensual sexual intercourse, primarily unprotected anal intercourse, . . . turned out to yield social consequences of the greatest magnitude” (p. 104). Price then posits that if medical science cannot save society from AIDS, perhaps the government should. Unfortunately, it’s not clear what Price means by this — one interpretation might be that Price is advocating the criminalization of certain sexual behaviors.⁴³ Perhaps a less severe interpretation is that Price is advocating monogamy. This latter interpretation is suggested by what Price writes later in his book: “AIDS becomes a legitimator, sometimes explicitly, sometimes implicitly, for monogamy, constancy, and predictability. It reinstates emotional obstacles to the abrogation of intimate relationships by increasing the cost of achieving new ones” (p. 126). Here, Price misses the mark. He confuses intimacy with sex, and he fails to account for sexual practices that pose no threat to the transmission of HIV.⁴⁴

Nevertheless, Price is probably right that “[a]n abiding legacy of the AIDS epidemic in America will be its effect on the relationship between the individual and the community” (p. 119). The challenge posed by the epidemic is to forge policy and law that impede the spread of HIV while treating with compassion and dignity those who are already infected. Price concludes that the challenge of confronting AIDS demands clear-sightedness and leadership.⁴⁵ And he calls on all

42. P. 104. The sentence conflates the book titles: *NO MAGIC BULLET*, *supra* note 29, and *PRIVATE ACTS, SOCIAL CONSEQUENCES*, *supra* note 11.

43. In almost half the states, same-sex acts between consenting adults are already illegal. *See Developments in the Law — Sexual Orientation and the Law*, *supra* note 36, at 1519.

44. “It is not monogamy or abstention per se that protects one from AIDS infection but practices and protections that prevent the virus from entering one’s bloodstream.” Treichler, *AIDS, Homophobia, and Biomedical Research: An Epidemic of Signification*, in *AIDS: CULTURAL ANALYSIS, CULTURAL ACTIVISM*, *supra* note 25, at 49.

45. Price lauds the efforts of two “heroes” of the epidemic. P. 134. Although it may be somewhat inappropriate to single out a few individuals as heroes when there are so many thousands who confront AIDS everyday, the efforts of particular individuals do stand out. However, both individuals whom Price names are presumably seronegative. This is akin to naming only whites as heroes of the black civil rights movement of the 1960s. There are many HIV-infected individuals whose work might be called heroic: For example, Cleve Jones, founder of the NAMES Project Quilt that reminds those who view it that the epidemic is more than statistics, *see supra* note 6; Belinda Mason, president of the National Association of Persons with AIDS, who, although ill, travels to the meetings of the National Commission on AIDS of which she is a member, and whose spirit and humor inspire those around her, *see Mason, Life on a Thin Wire*, *Wash. Post*, May 6, 1990, at B1, col. 1; and artist Keith Haring, who recently died from AIDS, who used his talent to educate others about the epidemic, *see Sheff, Just Say Know*, *ROLL-*

individuals to respond to the challenge.

In *Shattered Mirrors*, Price has a book that is both accessible and thought provoking. Price makes a persuasive argument that the AIDS epidemic is changing the relationships that individuals have with one another and with government. However, Price occasionally mischaracterizes issues fundamental to understanding the social significance of the epidemic. And Price decidedly underemphasizes the extent to which the epidemic has affected the gay community. Perhaps Price has sacrificed a bit of accuracy in an effort to convince the reader that AIDS confronts all members of society and not merely certain groups. Unfortunately, the inaccuracies may make the reader more skeptical of Price's otherwise sound thesis.

In addition, *Shattered Mirrors* is not as forceful a book as it could be. Although Price is generally adept at framing the issues posed by the AIDS epidemic, his book breaks little new ground. However, if the book's temperance enables the material to reach new audiences, then the book has served a purpose. *Shattered Mirrors* conveys the urgency with which all of society must respond to AIDS. Across America, alarms are beginning to sound.

— William J. Aseltyn

ING STONE, Aug. 10, 1989, at 58 (interviewing Haring and describing his work); Yarrow, *Keith Haring, Artist, Dies at 31; Career Began in Subway Graffiti*, N.Y. Times, Mar. 17, 1990, at A13, col. 1.