

TWENTY-SEVEN QUESTIONS*



“POSITIVE,” INK ON PAPER, 2020
KAREN FINLEY @THE_YAM_MAM

FOR WRITERS
AND JOURNALISTS
TO CONSIDER WHEN
WRITING ABOUT

**COVID-19
AND HIV/AIDS**

*

These questions were crafted and edited by Abdul-Aliy A. Muhammad, Alexandra Juhasz, Daniel Sanchez Torres, Diana Cage, Elizabeth Koke, Emily Bass, JD Davids, Jennifer Brier, Maxe Crandall, Nicholas D’Avella, Pato Hebert, Salonee Bhaman, Shanti Avirgan, Theodore (ted) Kerr, Virgil B/G Taylor for **What Would an HIV Doula Do? (WWHIVDD)**

INTRODUCTION

The desire to compare COVID-19 and HIV/AIDS is understandable. The response to HIV provides an inspiring road map for how to save lives. For over four decades, starting in the early 1980s, activists, scientists, politicians and cultural producers have been working alongside one another resulting in life saving developments—and goals not yet achieved. Since the late 1990s, HIV has become a manageable chronic illness for those with access to life saving medicine, housing, food, and social support. Meanwhile, stigma, discrimination, and criminalization directed at people living with HIV continue, based on social difference, access to resources and community, and an array of ever-shifting economic circumstances. AIDS activism remains necessary, and the work of AIDS activists vital.

In the face of both HIV and the novel coronavirus, and the biased systems that exacerbate them, a multiplicity of lessons on how to live in an epidemic are needed now as much as ever. This is where the work of writers and journalists comes in.

We have noticed the complexity of the AIDS crisis does not come through in most mainstream magazine and newspaper articles looking to draw a connection between the novel coronavirus and HIV. The two viruses are easily conflated without recognition of what the comparison, for example, elides or overlooks. AIDS is too often rendered as a 20th century American pandemic that impacted primarily middle class, white, urban east and west coast gay cisgender men.

We—a collective of people across the United States with varied relationships to HIV (and now COVID-19), committed to the ongoing AIDS response—have seen how this dangerously oversimplifies and commodifies the HIV response to reflect dominant narratives of white heroism and claims to victory, while also erasing the diversity of the HIV response across time.

A wide variety of tactics are needed to pass on information about how people survive, thrive, and die with dignity. This cross cultural and intergenerational learning can occur when published writing about AIDS engages with the ongoingness of the crisis, and includes Indigenous people, Black people, people of color, women, trans and non-binary people. Any writing in response to this pandemic should engage with the virus through the experiences of people who do drugs, experience poverty, work as sex workers, live undocumented, and who are or have been in prison.

In response to the gap between what we were reading, and what we are needing, we came together to craft a list of 27 questions for journalists and writers to consider when writing about the two viral crises.

Our questions are informed by a similar project for the “How We Do Illness” issue from Triple Canopy. In the fall of 2018, over 40 artists, administrators, critics, curators, and individuals living with and impacted by HIV/AIDS gathered to share their insights, frustrations, tactics, and experiences with making, seeing, and contemplating AIDS—

related culture. The result was a free online and print document, *Twenty-One Questions to Consider When Embarking on AIDS Related Cultural Production*, of service to artists, curators and others thinking of embarking on AIDS related projects, maybe for the first time.

In the same spirit, we offer this non-exhaustive series of questions as provocations and illuminations, put forward with the understanding that there are no single or correct answers. Rather, as a group of people who benefit from interrogation, collectivity, and accountability, we offer this document to support writers and journalists in their efforts to ensure that a complex understanding of the history and present of HIV is part of the conversation at this historic moment. In this spirit, we are open to your questions about our questions, and can connect you to a vast array of people who have lived and worked with HIV.

- YOUR FRAMEWORK
1. If you are comparing COVID-19 and HIV/AIDS, why? What are your goals in making the comparison?
 2. If you plan to use HIV/AIDS as a point of comparison to COVID-19, how will you do so? Are you talking about the virus? The epidemic at a specific historic moment or geographic location? The history of the response across politics, science, and culture? The ongoing crisis nationally and internationally?
 3. What is the horizon of your engagement with COVID-19: are you writing about a pandemic with an (imagined) discrete timeline or are you thinking about this moment as the beginning of what will be an ongoing reckoning of how we will live with this virus?
 4. In writing about COVID-19, are you looking for “points of origin” or “patient(s) zero” in order to assign blame on individuals or groups you perceive to be other than your audience? If so, how might this contribute to already prevalent biases about which racialized bodies are capable of being originators and vectors of contagion?
- YOUR SOURCES
5. Where does your knowledge about and connection to HIV come from? Research? Life experience? Interviews?
 6. Who are your sources? Are they reliable and varied? Or are they white, cisgender, and male, from an owning-class background, who have already been interviewed for stories on the COVID-19 pandemic? How will your sources contribute to the preexisting racialization and gendering of these narratives? How will you seek out the perspectives of people and communities impacted by COVID-19 and HIV/AIDS who may not already be part of media conversations?

7. If you are writing about “AIDS Activism,” how will you clarify what time period, geographical location, demographic composition, identities, tactics, visual imagery, and culture-making (movies, slogans, books, actions) characterize the work you are focused on? How will you ensure your reader understands that AIDS activism is many and continues?
8. Are you including HIV as part of a list of recent pandemics, such as H1N1 or SARS, which you see as related to COVID? If so, is there something specific about that comparison that you want to communicate? In what ways are you flattening or playing up differences between them? What role does sexuality, race, perceived nationality, and the history of who gets represented play in which illnesses you are writing about?

YOUR SUBJECTS

9. How does overall persistent erasure of experiences of poverty, sex work, or drug use impact how you can/will engage a comparison between HIV/ AIDS and COVID-19?
10. Will your writing consider and center the experiences of people and communities most devastated by COVID-19? Are you contributing to a broad understanding of who is being affected and who is being effective in the face of the pandemic? Have you written on COVID-19 in jails, prisons and detention centers? Do you know the history of HIV and willful neglect in the same institutions, or the decades of activism behind bars led by imprisoned people living with HIV?
11. If you focus on a given individual in your writing, what does that attention reveal or bury about the systemic forces that produced an individual’s circumstances/experience? How can you reframe your project to ask infrastructural questions and shift focus to the systemic context?
12. Early in the AIDS crisis, not enough attention was paid to race, class, and gender as it related to the emerging health crisis. Over the years, a lot of work has been done to correct those oversights. How is your writing / reporting contributing to the ongoing process of correction? What steps have you taken to ensure that this same oversight is not allowed to continue with COVID-19? For example, how does your work address anti-Asian stigma or stereotypes, state-sanctioned homophobia and transphobia exacerbated gender-based violence, or the disproportionate impact of COVID-19 on African Americans, on Native Americans?
13. Will your writing consider the range of people living with illness? Will it center the people living with HIV and COVID-19 who are most vulnerable, at risk, least served and represented? How do race, class, and gender analysis inform how you write about COVID-19 and HIV/AIDS? Are the people with COVID-19 in your story all or mostly those who were ostensibly “healthy” and non-disabled at the time of the pandemic? Are your expert sources people living with chronic illness and disability?

14. How will your writing position people who are ill, or who are placed at risk of illness? How are you resisting the labeling of some people as a “problem”, and others as a “hero”?
15. How will your work wrestle with western biomedicine as it relates to capitalism, colonialism, immigration, the criminal justice system, and other structures that impact survival?
16. How will you keep physical bodies at the forefront of your writing and thinking at this transformative time? How will you account for the ways in which disease keeps all of our bodies entangled and vulnerable?
17. How will your writing make space for the ongoing power of the dead?
18. How will you cover the lifting of restrictions, when many people will regain some access to their lives before COVID-19? Will you include chronically ill and disabled people? Will you include those who did not or could not work from home?

YOUR AUDIENCE

19. Who do you imagine as the reader of your work? How does your imagined audience alter the focus of your message? Does your story assume that your readers are able-bodied and live without chronic illness? How will you write knowing that some people will have experience with HIV/AIDS or COVID-19 beyond what you may be able to know as a writer or journalist?
20. What do you hope your readers will understand about viruses? About health? Medicine? Systems of care? Their own positioning with regard to pandemics and pandemic afterlives and aftermaths?

YOUR IMPACT

21. Have you considered how oversimplified narratives of illness can reproduce cultural myths about the ill and the innocent, illness and guilt? Who benefits from narratives and mythologies of blame? Have you considered the relationship between HIV criminalization and COVID-19 criminalization?
22. Is your writing rooted in public anxieties about contagion? What are the benefits of this approach in terms of providing awareness, advice, and context? Who might be hurt—and what is erased—by narratives that foreground fears of contagion?
23. How can your writing address the network of systems that puts some individuals and communities at greater risk than others? If you are focusing on single operatives like Trump, will you also address the systems that put these operatives in positions of power?

24. How will your writing address the fact that we operate within a structure where the socially prescribed remedies (arrest, incarceration, punitive action) to real problems (violence, discrimination, spread*) exacerbate the harms of this epidemic?
25. How does your work add to or challenge the often stated idea that COVID-19 does not discriminate, an echo of a sentiment often said about HIV?
26. In your writing, how are you navigating the long term unknowns and variables around what a COVID-19 positive diagnosis can mean for someone's life, and the differences between living with COVID-19 and living with HIV?
27. How does your writing cultivate hope through change rather than grasping at themes of heroism, miracles, normativity, or business as usual? What role have you let faith, imagination, or under-represented tactics of survival play in how you frame your writing about COVID-19 and HIV/AIDS?

ADDITIONAL
INFORMATION

Below are articles and cultural projects about COVID-19 and HIV/AIDS. Our hope in sharing the articles, including ones written by members of WWHIVDD, is to highlight work that has frustrated, inspired, and informed us in creating this document. In sharing the articles and projects, we aim to provide resources to help both broaden, and deepen the writing and reporting on COVID-19 and HIV/AIDS.

SELECT COVID-19
AND HIV/AIDS
ARTICLES AND
WRITING

Addressing Coronavirus in African Countries With High HIV Rates: An Interview With UNAIDS Head Winnie Byanyima, by Emily Bass, The Body

Anthony Fauci compares race disparities of coronavirus to AIDS epidemic, by Steven Nelson, New York Post

Can Deborah Birx Save Us?, by Emily Bass, Washington Post

Coronavirus: Three lessons from the AIDS crisis, by Laurie Marhoefer, The Conversation

COVID-19 and HIV Are Not the Same. But They're Similar in Many Ways That Matter, by Mathew Rodriguez, The Body

Dealing with the Loss of Intimacy in the Time of Digital Funerals, by Abdul-Aliy A Muhammad, The Body

Decriminalizing Sex Work, HIV and Substance Use Is the HIV Prevention Strategy We Need, by Jason Rosenberg, The Body

Facing the fear: How Covid-19 and H.I.V./AIDS responses compare, by Michael J. O'Loughlin, American Magazine

Fighting for Public Health: The HIV/AIDS and COVID-19 pandemics are very different, but both reveal that the United States has never understood the connection between community and personal well-being, by Michael Bronski for Boston Review

For H.I.V. Survivors, a Feeling of Weary Déjà Vu, by Jacob Bernstein, The New York Times

Have Americans Really Forgotten AIDS?!: We Need to Remember AIDS Lessons Learned During the Coronavirus Pandemic, by Hank Trout, A and U Magazine

How to Live With a Virus: The COVID-19 pandemic becomes a part of our ongoing understanding of HIV, by Theodore Kerr, POZ

How to Survive a Plague, by Andrew Sullivan, New York Magazine

How To Survive Yet Another Plague: I Lived Through The AIDS Epidemic. Here's How To Live Through Coronavirus, by Mark Schoofs, BuzzFeed News

I Celebrate Media of Social Proximity, by Alexandra Juhasz, In Media Res

I Study Prisons and AIDS History. Here's Why Self-Isolation Really Scares Me, by Steven Thrasher, Slate

Lessons the AIDS epidemic has for coronavirus, by Brandon Tensley, CNN

Lessons we can—and can't—apply from HIV/AIDS to COVID-19, Buffett Institute on Global Affairs

My Second Pandemic, by Victoria Noe

Our COVID-19 Response Is Living in the House HIV Activists Built, Abdul-Aliy A Muhammad, The Body

Surprised by the Coronavirus Racial Disparities? These Longtime Black HIV Providers and Activists Aren't, by Tim Murphy for The Body

We can't forget women as we tell the story of covid-19, by Jennifer Brier, Washington Post

What Lessons Does the AIDS Crisis Offer for the Coronavirus Pandemic?, by Masha Gessen, New Yorker

What we can learn from the history of HIV surveillance during the era of COVID-19, by Abdul-Aliy Muhammad, Racebaitr

SELECT COVID-19 AND HIV/AIDS PROJECTS #coronavirussyllabus, a crowdsourced cross-disciplinary resource from the Social Science Research Council

AN ARMY OF THE SICK CAN'T BE DEFEATED: REFLECTIONS ON CARE WORK IN PERPETUAL SICK TIMES, Web Art Gallery, Curated by Ezra and Noah Benus for Visual AIDS

Asian American Feminist Antibodies, a zine an Asian American Feminist Collective, and Bluestockings NYC Collab

COVID-19 and HIV, Webinar series, International AIDS Society

COVID-19's Impact on LGBTQ New Yorkers, Virtual Town Hall Series from New Pride Agenda

Pandemic Lessons, from HIV through COVID-19, A conversation with four lauded veterans of many epidemic cycles, from Columbia University's Earth Institute.

The Cranky Queers Guide to Chronic Illness: A Newsletter of Strategies for Health and Wellness in Sick Times

The Essential Female Workers of COVID-19, an episode of the All Ears podcast

The Fact of Blackness COVID-19, Medical Data, and the Racial Design of Public Health, Conversation from Data & Society

'Things Can Change In an Instant', an episode of The Atlantic's Social Distance podcast

What Does a COVID-19 Doula Do?, a zine and event series from What Would an HIV Doula Do? and ONE Archives Foundation

WWHIVDD

What Would an HIV Doula Do? is a community of people joined in response to the ongoing AIDS Crisis. We understand a doula as someone who holds space during times of transition. We understand HIV as a series of transitions that begins long before being tested or getting a diagnosis, and continues after treatment. We know that since no one gets HIV alone, no one should have to deal with HIV alone. We doula ourselves, each other, institutions and culture. Foundational to our process is asking questions.

WWHIVDD has been featured in The Body, Art in America, POZ Magazine, and Racebaitr. The collective was a finalist for the Visible Award, and was featured in the short film, A Place In The City. Their exhibition Metanoia: Transformation through AIDS Archives and Images, commissioned by the ONE Archives Foundation has been on view at the LGBT Center in NYC, and the ONE Galley in West Hollywood. In the spring of 2020 they released a zine that asks, What Does a COVID-19 Doula Do?

ONLINE

These questions were drafted in April 2020. An updated set of articles, writing and projects are available on our website at hivdoula.work/27-questions. See all of our #COVIDDOULA work at hivdoula.work/coviddoula.