LOCATING CITIZENSHIP ACROSS THE CITY POLITICS
OF AIDS IN VANCOUVER, CANADA

By

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Date 15 December 1994
Abstract: Chantal Mouffe has proposed a theory of political engagement or "citizenship" that rejects fixed, essential definitions to "the political". With her pluralistic, non-essentialized political subject, she hopes for a means by which different political struggles can be linked together rather than ordered hierarchically or exclusively. Here citizens are associated in distinct but related struggles, rather than by legal status or community membership. A crucial point in her argument is that political theorists must look for new "spaces" of politics. Since she never expands on this call, we are left with little more than spatial metaphors that fix the locations where citizenship might be found. Political theory typically plots three separate spheres to describe people's lives: the state, civil society, and the family. By spatializing these metaphorical locations I have taken up her call and explored the emergence of citizenship across these spatialized social relations through an ethnography on AIDS politics in Vancouver, Canada.

For each allegedly discrete space in political theory, I note an ongoing restructuring that affects and is affected by the articulation of citizenship with the changes in social relations in place. These restructurings suggest that fixed, essentialized characterizations of space must also be rejected. I sketch the considerable overlap between social relations of state, family, and civil society in locations across Vancouver's AIDS politics. Radical civil disobedience failed because activists failed to understand the overlap of state and civil society through AIDS service organizations. Within those agencies, political engagement is caught between grassroots community orientations (civil society) and the emergence of a large, rapidly bureaucratizing service
system attached to the state. Volunteers who provide all manner of support (from social work to kinship) for people living with AIDS likewise complicate any clearcut distinction between state and family. The overlap of the family with civil society is illustrated by the Vancouver display of the AIDS Quilt. It was at once a fundraising event held in civil society, yet it was also a familial space: allowing families and friends to grieve and mourn their dead. Spatial overlaps enabled (and also constrained) citizenship, as Mouffe defines it. These hybrid spaces articulate de-centered citizens with the ongoing restructurings of state, civil society, and family that are concurrent to the AIDS epidemic. Consequently, I conclude that future work on radical democratic citizenship consider the contexts in which the citizen engages in political struggle.
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Chapter 1.
"New Spaces" of Radical Citizenship and City Politics

I. Flashbacks

a.

A friend and I walk slowly north through Main South, Worcester Massachusetts’ inner city neighborhood. It is a hot and humid New England summer day in 1986. As we approach the infamous corner of Main and Piedmont, an intersection well known for prostitution and drug trade, the decayed urban landscape seems washed out from the haze. Yet clearly I can see a large white billboard above a boarded up three-decker. It reads something like: 'AIDS and Hepatitis B Have Not Been Controlled In This Area! For Further Information Contact the Worcester City Health Department'. We scoff at the usefulness of the city’s outreach strategy. I am sure the stark billboard did little to promote the lives of the citizens under its spartan face, many of whom speak Spanish not English. Still, I always think of that sign whenever I pass through that intersection. And after all these years, it is still burned into my mind, my 'heart’s geography'.

b.

I am sitting alone at the kitchen table drinking coffee, listening to the radio on a quiet Sunday morning some three years later. I am lost in thought in the tiny Vernon Hill apartment my brother Terry and I share while I am home from Vancouver. The phone rings and I answer it. He is not home; I am not sure where he’s gone. My musings about the caller’s relationship to my brother end when I put down the pen. As I write this thesis, however, I now wonder if the caller was my brother’s "buddy" from AIDS Project Worcester (a volunteer who supports the HIV positive client). I will never
During an interview with a very spiritual woman in her seventies who volunteers not only for AIDS Vancouver as a buddy and on the helpline (an anonymous phone information line) but also for the Vancouver Persons With AIDS Society, as well as the NAMES Project AIDS Memorial Quilt display, I asked her if she put her volunteer work in any sort of global context beyond Vancouver. She smiled warmly and summed up her philosophy that led her into AIDS volunteering several years ago, before she ever knew anyone who had AIDS:

"I went to hear Mother Theresa one day when she came to Vancouver. And she said she had so many young people who come up to her and say, 'I want to come out to India to help you. I want to come and work with you.' And she said, 'I tell them, 'No. There is work to be done in your own town, where you live!, and be content to work to the best of your ability in the place that God put you.' That's what she said. And that's how I feel. I'm a bit too old to think about global things, and things like that. I mean, I'm very aware of the global situation and how the rest of the world is affected by [AIDS]. But I don't feel that I'm an 'activist' as such in that way. I feel that if I do what I can right here, for people who are here, that's my job." (emphasis original)

Should I detect 'citizenship' or city politics in any of these vignettes? If so, how and where? Should I only locate political engagement in state actions like the Main South billboard, or should the buddy providing emotional support in a person's home count too? Should the elderly woman's volunteer work at a local agency be considered charity instead of citizenship? In other words, where is the political individual (the person claiming rights, duties, responsibilities, and membership in a political community)? Where are citizens’ struggles for these things being waged in contemporary issues like AIDS? It is a common point of critique against orthodox political inquiry that there are
"new spaces" of politics beyond state-defined locations (e.g. Magnusson, 1992), but then where are these newer spaces vis-a-vis the AIDS crisis (scarcely more than a decade in the making)?¹ In the following chapters I consider the actual locations where the urban politics of AIDS occurs in order to replace political theory's sketch of the spaces of citizenship (typically done simplistically or in metaphor) with a more in-depth account of the way (changing) sites enable and constrain new forms of political identity, which (in turn) modulates how citizenship is defined. I will specifically examine sites of citizenship in AIDS work by spatializing the three spheres of social life outlined in classical political theory: the state, the family, and civil society (each of which I describe in greater detail below). My research draws on ethnographic investigation of AIDS politics in Vancouver from 1992-1993. Its central purpose, more narrowly, is to interrogate recent theoretical attempts to widen the parameters of politics. Specifically I engage Chantal Mouffe's (1991, 1992, 1993) poststructural concept of citizenship as the basis for a revitalized, radical democratic politics. She vaguely insists that we must look for "new spaces" of citizenship, but the actual geographies of those political spaces remain uncharted. Instead she aims her attention on centering the citizen away from fixed identities common to liberal and communitarian theories.

Since Mouffe does not provide a geography of these new political spaces we lack a clear understanding of the relationship between "new" spaces and new identities.

¹ To give a very rough indication of the extent of 'crisis' latest epidemiological data report that there have been over 1,746 cases of AIDS reported in B.C. 1,246 or 71% of those people are now dead (Rekart and Wong, 1993). In Canada over 10,000 people have been diagnosed while 6,930 of them have died (Health and Welfare Canada, 1994).
associated with citizenship. Those lacunae are also stretched by the ways that the locations associated with these spheres of social life are changing at the end of the twentieth century. The decline of the welfare state, the rise of the voluntary sector in civil society, the shift in the form of family and its locations of support: each of these trends complicates any naive quest for "new" locations of citizenship around an issue like AIDS service delivery and care. Ethnographically this thesis interrogates the almost always highly abstract debates of (critical) political theory, in order to provide a more precise atlas of these new spaces of citizenship for which we are supposed to be searching.

By providing an updated political geography, I also wish to augment the search for new spaces of politics in the city. Urban political inquiry (usually pursued under the rubric of political science and rather distinct from political theory) remains tightly focused on the state-centered spaces in its search for politics (Magnusson, 1992). The rise of new social movements has refocused attention in the last decade away from state forums like elections or legislatures towards civil society spaces like neighborhoods or sites of public protest (Castells, 1983; Offe, 1985; Lowe, 1986). Nonetheless, the study of urban, or local, politics has only just begun to grapple with expanded parameters of where 'the political' might be found in the city (not only across public-private divides, but also into public arenas not defined by the state), and has rarely engaged poststructural theory explicitly (Brownhill and Halford, 1990; Marston, 1990; Marston and St. Germain, 1991; Rose, 1990; 1991; Stacheli, 1994; Pincel, 1994). Before these emerging new spaces can be charted it is useful to review how the citizen has been understood in
contemporary political theory.

II. Citizenship

a. the liberal-communitarian debate

We understand the relations between political obligation, rights, and inclusion in political community through the concept of citizenship.² It is a political identity of entitlements and responsibilities that is (potentially) equally shared in a liberal democratic society. Urban politics has long been characterized as a likely (if not favorable) venue for citizen participation and identity-formation.³ The state, the neighborhood, and the city are all public situations wherein the citizen claims rights or entitlements, or evinces obligations to the wider political community. As noted above, these portrayals of the citizen are typically conceptualized through relations of state service delivery, and formal public participation. The private sphere is elided, as feminists have pointed out (Elshtain, 1983; Siltanen and Stanworth, 1984; Pateman, 1989; Fraser, 1989). We simply do not look for (or find!) the citizen in the home, or the family (Rose, 1990). Relations of intimacy, love, caring, and friendship are only exhibited by citizens- according to classical liberal theory- to the extent that they nurture and civilize the individual in order

² For a concise, useful review of these relations, see (Marston and Staeheli, 1994). For a more global history of the concept see (Heater, 1990).

³ For examples see (Wood, 1958; Syed, 1966; Wicwar, 1970; Dahl, 1968; Mill, 1958; Hill, 1974. For a Vancouver example, see (Hasson and Ley, 1994). For a critique that focuses on the structural limitations on urban politics' democratic potential, see (Magnusson, 1985).
to maximize participation in the public sphere (Elshtain, 1983).  

Two approaches to citizenship currently dominate political theory: liberalism and communitarianism (Mouffe, 1992). Liberalism is the hallmark of modern democracy. It focuses on the proper relationship between the individual and the state. Here, politics is defined as actions the citizen takes to get the things s/he wants from the state or other citizens, while mitigating the state's interference in this pursuit of happiness. It is efficiently summed up in Harold Lasswell's (1950) definition of politics that well characterizes urban political inquiry: 'politics is about who gets what, when, and how?'. In liberalism, citizens are conceptualized as corporeal holders of rights. Society reflects and secures these holdings formally in a written constitution, which confers a largely legal status to the citizen. Characteristically, liberal citizenship is socially thin; there is no substantive sketching of community (Sandel, 1982). Instead community is defined as a set of legally-defined citizens, who each rationally pursue their own concept of "the good". Hence liberals insist on what Mouffe (1992) calls 'the priority of the right over the good'. In other words, the individualized citizen defines for her/himself what is good, and his/her rights positively secure the quest for it. Community cannot usually impinge on those rights, nor can it define what is good for the citizen. Liberty is thus a negative concept for liberalism and occurs when rights are denied or squelched (Berlin,

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As Kymlicka (1990, p. 250) points out, these are actually two different conceptualizations of the private sphere. The first is the Lockean distinction between the social and the political; the second is the Romantics' distinction between the social and the personal. While Kymlicka insists that neither strand of liberalism completely locates the family in the private sphere, he concedes that liberals have not drawn the family through these distinctions, nor have they examined the family's structuring of both private and public spheres.
In those instances, it is infringed by the state or other citizens when they block his/her pursuit of the good. The relationship between morality and politics, then, is largely a private-public one: distinct and separate, though tensely related. Morality is where we- individually- decide what is good and bad; politics is where we go about getting what is good.

Communitarianism offers a running critique of liberal political arrangements in modern democratic theory. It is often noted for its tendency to lament the loss of classical Greek notions of citizenship and participation (MacIntyre, 1984; Ricci, 1984). Its view of politics is more ethereal: politics is where we- as a community- decide who we are as a people and what kind of society we deserve (Elkin, 1987). Communitarians insist that liberalism’s fundamental flaw is its lack of community. Theoretically there is no truly, noninstrumental way liberals can join with each other in pursuit of communal goals. Thus they disagree that community is only possible when it provides mutual good ends to each citizen. Citizenship, for communitarians, is about the communal, participatory relationship individuals have with the state or polity. Often the state and community are likened or equated, as with romantic notions of (local) government (Hegel, 1991; c.f. M Brown, 1992). The benefits and obligations of membership in a political community are stressed by communitarians. Thus contra liberalism, communitarianism suggests a priority of the good over the right. In other words, communitarians point out to liberals that we have communal standards of what is good and bad; we do not simply each decide our own moral codes in a social vacuum. Likely then, individual rights can justifiably be trumped for the good of the community.
Morality and politics, for communitarians, often become the same enterprise.

b. the poststructural intervention⁵

Poststructuralism would agree with communitarianism that liberalism overstates the importance and cogency of the singular citizen. That said, it would also contend that communitarians ignore the realities of modern democracy that emphasize liberal individualism. Personal liberty- from the state or aspects of civil society can be threatened and must be protected (Held, 1990; Keane, 1988). Poststructuralism is suspicious of sacrificing individual liberty for the sake of recovering a strong participatory ideal premised on a singular (often romantically pre-modern) axis of community. Sometimes there should be a priority of the right over the good. Interestingly, however, poststructuralists have yet to specify exactly when those trumps should be played (White, 1988).

Poststructuralism rejects the romantic or classical notion that there can be a single moral code in modern society. It takes on the liberal point that the lack of a common

⁵ Poststructuralism contains a diversity of theoretical perspectives. For useful reviews of its various positions see (Pratt, 1994). The intervention I refer to specifically is its critique of a unified, centered subject (see Smith, 1988). Within a broad theoretical brushstroke of 'poststructuralism' feminism, queer theory, and radical democracy have each posed challenges to the longstanding categorical certainties of liberal democracy (Jones, 1990; Mouffe, 1992; Young, 1990; Russo, 1991; Watney, 1991; Carter, 1992; Tatchell, 1992; Evans, 1993; Berlant and Freeman, 1993). These movements have highlighted the reductions and exclusions left in the wake of liberalism’s hegemonic citizen (Pateman, 1989; Fraser 1989, 1990). Most notably (given liberalism’s hegemony) they reject a fixed, a priori identity of the citizen as an unencumbered, instrumental, heterosexual Liberal Man. That static identity has circumscribed the public sphere to the exclusion of certain struggles- especially those deemed private and therefore not political (for instance, the gendered division of labour within the family, the capacity to forge same-sex couplings) (Benn and Gauss, 1983; Siltanen and Stanworth, 1984; Phelan 1989; Benhabib, 1992). In this thesis, however, I specifically engage Mouffe’s poststructural theory of radical democratic citizenship.
good is precisely what characterizes modern democracy (Lefort, 1986). Thus it denies, according to Mouffe, communitarian’s substantive idea of a common good for a political community. A political community is plural, comprised of several different social groups and personal identities. Thus premodern, simplified axes of community or virtue common to communitarian notions of citizenship are rejected. Mouffe (1992), for instance, rails against collapsing social differences into a singular notion of "the citizen", which both liberalism and communitarianism (for very different reasons) do. Consequently, praxis begins not from a predetermined subject-identity of the citizen founded squarely on a simplistic, single axis of community, but rather from how the elements of citizenship (namely: rights, duties or obligations, and the striking of political community) arise or are suppressed in actual contemporary political struggles (Walzer, 1989; Young, 1990; Shklar, 1991; Mouffe, 1993). Identities of the citizen remain open, socially produced, often contradictory, and in flux (Laclau and Mouffe, 1985; Smith, 1988; 1991). That said, poststructuralists would not want to take the modern distinction between morality and politics too far. They would point out that this separation is exactly what cheapens modern politics and makes it so meaningless and instrumental. The good, poststructuralists argue, should not be defined substantively, nor instrumentally. Rather, they note, there are some fundamental principles that members of society do agree on (White, 1988). Mouffe uses the concept of the res publica, drawn from Oakeshott’s (1975) work to discuss the connections presaging citizenship based in these agreed-upon principles. The res publica as Oakeshott suggests, is a common political language or civil intercourse that produces political community. As Mouffe describes it:
"Those rules prescribe norms of conduct to be subscribed to in seeking self-chosen satisfactions and in performing self-chosen actions. The identification with those rules of civil intercourse creates a common political identity among persons otherwise engaged in many different enterprises. This modern form of political community is held together not by a substantive idea of a common good but by a common bond, a public concern. It is therefore a community without definite shape, a definite identity, and in continuous reenactment.

Such a conception is clearly different from the premodern idea of the political community, but it is also different from the liberal idea of political association. For liberalism also sees political association as a form of purposive association, of enterprise, except that in its case the aim is an instrumental one: the promotion of self interest." (Mouffe, 1991, p. 77)

Oakeshott's conservatism leads him to deny conflict at the site of these agreed upon principles or language. Mouffe, alternatively, argues that the res publica is indeed a particular hegemonic project, yet insists that there is the potential for conflict and counter-hegemony because there are plural interpretations of those meanings. Here again, it is helpful to quote her at length:

"Politics is to a great extent about the rules of the res publica and their many possible interpretations; it is about the constitution of the political community, not something that takes place inside the political community, as some communitarians would have it. Political life concerns collective, public action; it aims at the construction of a 'we' in a context of diversity and conflict. But to construct a 'we,' it must be distinguished from the 'they' and that means establishing a frontier, defining an 'enemy'. Therefore, while politics aims at constructing a political community and creating unity, a fully inclusive political community and a final unity can never be realized since there will permanently be a 'constitutive outside,' an exterior to the community that makes its existence possible. Antagonistic forces will never disappear, and politics is characterized by conflict and division. Forms of agreement can be reached, but they are always partial and provisional since consensus is by necessity based upon acts of exclusion. We are indeed very far from the language of civility dear to Oakeshott!" (Mouffe, 1991, p. 78)

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6 While Habermas (1984) and Benhabib (1992) adopt a similar logic in suggesting a performative framework through which a less coercive, more democratic public sphere might be constructed, their commitment to a universal theory of morality underwriting that sphere distinguishes them from Mouffe. As a poststructuralist, she would insist that the very adequacy of those rules, that is, the structuring of the res publica itself, must be perpetually interrogated by radical democrats.
In this passage Mouffe addresses the fears of radical critics of citizenship who have watched the term's appropriation by neoconservativism (for examples see Kearns, 1992). Here citizenship is criticized for its incorporative, hegemonic role, squelching difference and alternative struggles, and legitimating state retrenchment (Mann, 1987; Giddens, 1987; Rose, 1990). That said, her outline is more than a reactive critique of Oakeshott's conservative citizenship. Drawing from lessons taught by both liberals and communitarians, she explicitly defines citizenship as follows:

"...a common political identity of persons who might be engaged in many different purposive enterprises and with differing conceptions of the good, but who accept submission to rules prescribed by the res publica in seeking their satisfactions and in performing their actions. What binds them together is a common recognition of a set of ethico-political values. In this case citizenship is not just one identity among others- as in liberalism- or the dominant identity that overrides all others- as in civic republicanism [or communitarianism]. It is an articulating principle that affects the different subject positions of the social agent... while allowing for a plurality of specific allegiances and for the respect of individual liberty." (Mouffe, 1991, p. 79)

Given the flexible, yet substantive component of poststructural formulations of citizenship, radical democracy seems the appropriate theoretical entree into the new forms and locations of city politics across Vancouver's response to AIDS.

III. The Geographical Imagination of Political Theory

If any number of social relations can articulate with citizenship, it follows that we must broaden out our spatial search for political engagement in local politics. Indeed, repeatedly in her work, Mouffe reiterates the need to investigate so-called new spaces. For instance:

"...it is clearly impossible to identify either the state or civil society a priori as the surface of emergence of democratic antagonisms." (Laclau and Mouffe, 1985, p.180)

"... what has been exploded is the idea and the reality itself of a unique space of the
constitution of the political. What we are witnessing is a politicization far more radical than any we have known in the past, because it tends to dissolve the distinction between the public and the private, not in terms of the encroachment on the private by a unified political space, but in terms of a proliferation of radically new and different political spaces." (Laclau and Mouffe, 1985, p. 181)

"Our societies are confronted with a proliferation of political spaces which are radically new and different and which demand that we abandon the idea of a unique constitutive space of the constitution of the political, which is particular to both liberalism and civic republicanism" (Mouffe, 1993, p. 20)

For the geographer what is bothersome about these passages is that they are only meant to convince the political theorist to rethink the subjects of radical democracy, not the locations for them. I worry that Mouffe is using the word "space" metaphorically, as a gesture to widen the array of social identities that come to mind when we conceptualize "the citizen". Her goal is to ponder who these citizens are, not where they are found engaging in politics. Recently, geographers have criticized the use of spatial metaphors currently popular in cultural studies on a number of grounds that are relevant to the discussion here (see Pratt, 1992; Ley and Duncan, 1993). Smith and Katz (1993 p. 68) argue that "...there has been little, if any, attempt to examine the different implications of material and metaphorical space." Massey (1993) notes the irony that spatial metaphors are often used outside the discipline of geography to convey a static, fixed attitude about space, while geographers themselves have struggled with ways of representing the constantly changing, fluid nature of space, place, and scale. These criticisms suggest that however rhetorically enticing Mouffe's agenda might be to geographers, her refusal to discuss the implications of material space on political engagement shows that "the geographical imagination" of political theory is narrow and underdeveloped. That argument can be lodged against Mouffe's spatial arguments on a number of levels. Most
broadly, her discussion fails to acknowledge the point that all social relations are always spatialized, a point geographers have been arguing in social theory for over a decade (Gregory and Urry, 1985; Massey, 1984). Mouffe never considers that citizens are always engaging politics in material locations. Taking up Smith and Katz’s point above, if we open up citizenship to a spate of social identities it has not been previously associated with before, we must also open it up to a wider variety of material spaces across (in this case) the city.\(^7\) Combining this argument with Massey’s, we must bear in mind that spatialized social processes do not necessarily connote static or fixed placements for political engagement. In other words, changes in locations themselves can contribute or inhibit the emergence of citizenship in social relations not previously considered "political". Joining these two criticisms, I want to enhance Mouffe’s project by demonstrating that the spatiality of her framework is indeed more than mere metaphor. To pursue Mouffe’s project successfully we must consider how citizenship affects, and is affected by, its various spatial contexts. If we do not, we are left with new identities associated with political engagement in the same old static and unchanging locations. An extreme example is instructive: by Mouffe’s argument, looking at city politics would impel us to see a wide array of participants’ social identities across lines class, race, gender, sexuality *inter alia* and focus on how those discourses sometimes overlap and sometimes contract each other through the citizen’s political practice. But those politics would likely take place in the same old places they always have: the voting

\(^7\) We must also reconceptualize political spaces at a number of different geographic scales as well. I take up this point explicitly through this case study in (Brown, 1995b).
booth, the city hall, the neighborhood meeting. Such a paltry geographical imagination leaves us with fairly sophisticated rendering of the citizen but a simplistic account of the spaces they are affected by, and in turn affect. Citizenship, then, must take place somewhere, but not just anywhere. Where struggles over rights, duties, responsibilities and membership occur matter because they shape, and are shaped by their spatial context.

I began this research with Mouffe's premise that citizenship can articulate with a wide variety of social relations, in any location. Consequently in my ethnography, I delved into as many different forms of the responses to AIDS in order to get a sense of the plurality of political subjects working on AIDS issues in Vancouver, speaking to anyone who was willing. My aim was to not anticipate where I thought new political identities (i.e. citizenship) ought to take place. I spoke to elected city officials, provincial and city bureaucrats, a host of volunteers, family members, and people themselves who are living with AIDS, tracking the locations of their political engagement with the AIDS crisis. As their collective stories amassed, I certainly documented the variety of spaces where citizenship took place, beyond the narrow confines of the state. But what also struck me was how inadequate concepts typically used in political theory to describe social life (the state, the family, and civil society) were to convey the structuration of space and political (in)action during the AIDS crisis. These concepts, while heuristically useful, became awkward, cumbersome, and static when spatialized (see below). If we are to introduce a plurality of citizen(ship)s, we must rethink the spaces through which they act or are structured.

IV. Where are citizens and city politics?
In a certain sense, political theory retains such a high degree of abstraction that any discussion of the actual spaces it hints at might be misleading. And yet political theory has tended to hive off social life into three more or less distinct sets of social relations in liberal democracies: the state, civil society, and the family. Given that all social relations are always spatial, these spheres of social life have come to be connotatively (and often denotatively) associated with particular locations in the city. Consequently I used this loose organizing framework to classify the spaces of citizenship I witnessed in Vancouver. What became clearer as the study progressed, however, was not just that politics had shifted away from state-centered spaces towards those of civil society and the family (as many critical theorists would predict). Rather, I became frustrated by the disagreement between the conceptual clarity and mutual exclusiveness of those categories and actual changes to (the social relations in) those spaces that made them flow into one another. This messiness highlighted the de-centered quality of citizens' spaces (both new and old) in city politics. The multiple meanings and interpretations of citizenship hinged on these blurred edges conceptually separating state/fam-

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8 The state, civil society, family triptych can be found in a wide variety of historical and contemporary political philosophy, even in Mouffe's work. See also for instance: Hegel, 1991; Pateman, 1989; Kymlicka, 1990; Cohen and Arato, 1993; Held, 1990; Keane, 1988; Elshtain, 1983.

9 Notice from the quotes on pages 11-12 that Mouffe herself refers to the state and civil society as "spaces", albeit metaphorically. That these three sets of social relations have come to be associated with particular places in the city may seem obvious to geographers, but bear in mind that political theory has tended not to engage in empirical inquiry, beyond the anecdotal example. The materiality of these three spaces- and more precisely the effects of their ongoing changes temporally and spatially are difficult to incorporate in such an abstract tradition of scholarship.
ily/civil society. In paying so much theoretical attention towards plural, de-centered political actors, we have neglected to consider the implications de-centered spaces themselves have on citizenship.

a. The State

The state, of course, typically has a bounded territory and at key sites through that terrain exercises its sovereign authority. Studies of urban politics, typically, have drawn our attention toward these state-centered spaces: the legislature, the city hall, the voting booth, even the point of contact with public service delivery like the welfare office (see figures 1-1 through 1-3). The state is the classic, orthodox location of citizenship. It is the institution that defines citizens communally, and liberally identifies its citizens as bearers of specific rights and responsibilities. The restructuring of the state and economy in recent decades, however, has made it more difficult to locate citizens' spatial relation to the state so readily. Clark and Dear's (1984) state apparatus argument, where they demonstrate the multifacetedness and sheer number of institutional locations of the modern bureaucratic state, immediately diffuses any tight spatial focus to more diverse locations. This arrangement leads to a focus on relations between facets of the state, and state-influenced institutions. Magnusson (1992) alternately has noted the rise of new social movements based on identity politics, and the globalization of capitalism and social movements means that the state can no longer be the sole- or even primary- locus of attention in political inquiry. He argues that we must "decenter" the state in political inquiry. In urban political inquiry, this point has been taken up most explicitly with the "regime" concept over the last few years. Stone (1989) defines regime as a governing
Figure 1-1: Vancouver City Hall: A typical location of "the state" and politics, especially in urban political inquiry (e.g. Helig and Mundt, 1984).
Figure 1-2: Provincial Court of B. C., Vancouver: another typical location of "the state" and politics.
Figure 1-3 Ministry of Social Services Welfare Office, West End, Vancouver: The state is often spatialized at the point of service delivery like the welfare office.
coalition that includes both governmental and non-governmental actors affecting city politics. The concept has been particularly useful in probing the local political culture and "public-private partnerships" that implement and guide urban policy. These hybrid arrangements fuel the de-centered state thesis by making it difficult to trace the effects of the state, since its power has become more diffuse and its boundaries more fluid.

The retrenchment of the welfare state across several Western democracies since the 1970s is arguably one of the broadest complications to any simple location of the citizen to the state (Brown, 1986; Mishra, 1990). Brown has specifically tied retrenchment to the changing morphology of the state, that have been missed in arguments about the downsizing of welfare. As he (1986, pp. 6-7) states:

"There is ample reason to believe that recent policy changes amount to more than a mere slowdown in the rate of growth but arguably less than a life-threatening crisis. The welfare state may be intact, but subtle alterations in its shape and structure have occurred, which in my view have begun to undermine the postwar vision of the welfare state as a force for social justice and political inclusion within capitalist societies."

His argument implores us to rethink the state as the sole location where citizens (as recipients of state welfare) could be found. A crucial element in state restructuring has been the rise of service provision by the voluntary sector, rather than the state itself. Wolch (1990) has termed this body "the shadow state" because of its arm’s-length relationship to the state through funding and contracting. In British Columbia, shadow state service delivery has long been a favored arrangement (Ismael and Vaillancourt, 1988). However, recent work has documented its significance in the past decade (Donaldson, 1985; Butcher, 1986; Rekart, 1993). The shadow state complicates any simple geography of the state because its organizations mediate between the community
of service-recipients and state bureaucracies. Figure 1-4, for instance, demonstrates the enormous financial links between the state and shadow state in British Columbia. Rekart (1993) sampled 133 voluntary organizations and found that the majority of their funds came from the B.C. government rather than other tiers of the state, or non-state sources. What are the implications of these close relations for spaces of citizenship? At the most general level, they describe a not-so clearcut categorical distinction between state and civil society. The geography of these new relations suggest that we do not merely need to look in locations not typically considered to be defined by the state, but that the morphology of the state is shifting. AIDS politics occur at a time when complicated relations between the state and non-governmental organizations are becoming more complex and interconnected. Consequently in this research, I pay particular attention to how those shifts place politics in new locations—both beyond and inside state-centered spaces—that enable citizenship.

b. Civil Society

Civil society is perhaps the most obtuse, and difficult space discussed by political theory. It refers to a wide variety of spaces in the city. Civil society encompasses locations outside of, or beyond the state (Hegel, 1991: Cohen and Arato, 1993).10 Civil society has been used typically by liberal political theorists, then, to describe the limits of state power in social life. Nonetheless, it is typically characterized by public interaction,  

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10 While Cohen and Arato (1993) insist on locating the family within the boundaries of civil society, typically theorists see the family as a separate sphere of life, and I retain that distinction here. Cohen and Arato's argument is more normative than descriptive; they argue that placing the family in the context of voluntary associations would give it a more democratic structure than it historically has had.
Figure 1-4 Shadow State Funding For A Sample of 133 British Columbia Non Profit Organizations.
(See: Rekart, 1993)
especially amongst strangers, or private (i.e. non state) contractual relationships (Tester, 1992). The defining feature of civil society’s social relations is voluntary associations, especially those aimed at common ends as well as individual desires (Cohen and Arato, 1993). ‘Civil society’ conjures up images of public spaces in the city: spaces used by popular protest to attract the attention of fellow citizens (see figure 1-5).

Civil society has, of course, come under increasing attention and interest by theorists of new social movements (e.g. Gamson, 1991). New social movements, and grassroots organizations have become important qualifiers to political theorists’ description of civil society as increasingly vapid, instrumentalized and without the ability to nurture forces of social change in advanced capitalist contexts. Authors as diverse as Boyte, Bellah, Offe, Castells, Cohen and Arato have acknowledged civil society’s potential site for citizenship. Here, political activity does not take place necessarily at or through the state, but through voluntary associations comprising new social movements. Thus we can situate relations of civil society not merely in public spaces of the city, but also in the grassroots community organizations that also bring strangers together in common, voluntary pursuits (see figure 1-6). In such locations, urban politics has witnessed the rise of citizens becoming volunteers who deliver public welfare services.

Data on volunteering in the Canadian context bear these arguments out. Table 1-1 reports a 1986 survey on volunteering in Canada, showing that nearly one-third of Canadians polled volunteer in some ongoing capacity, while over half considered
Figure 1-5 Robson Square, Downtown Vancouver

Public Spaces in the city like this one are typical spatializations of civil society (e.g. Gamson, 1991; Geltmaker, 1992). As a 'new space' of politics, this civil society space in downtown Vancouver is frequently the site of political demonstrations by new social movements.
Figure 1-6 The Vancouver Gay and Lesbian Centre (GLC), located in the heart of the West End at Davie and Bute Streets. Civil Society is the location for many grassroots organizations, spatialized by the neighborhood community center. Indeed, the GLC was the first home for both the Vancouver Persons With AIDS Coalition and the Vancouver Meals Society when each started out. It houses a variety of services for the gay and lesbian community, including a help line, counselling and legal services, a newspaper, and a library.
<table>
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<tr>
<th>Metropolitan Area</th>
<th>% Formal Volunteers</th>
<th>% Informal Volunteers</th>
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<tr>
<td>Canada</td>
<td>27</td>
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themselves more informal volunteers (Duchense, 1989, pp. 18-19, 85).  
Multiculturalism and Citizenship Canada estimates that over 13 million Canadians do volunteer work, the average volunteer giving 191 hours per year. This labor is equivalent to 617,000 full-time positions and worth approximately $13.2 billion dollars per year.  

These data widen out the spaces where we ought to look for the citizen in Canadian society, as well as complicating the distinction between civil society and the state. Public locations beyond the state that bring different political actors together offer tremendous promise to extend what gets defined as politics, or who gets defined as a citizen. An issue like AIDS, whose immediacy and stigma has meant that traditional (state-oriented) locations of politics are often ineffective, seems particularly well suited to take place in locations we would describe as "civil society" These potentials for social change, however, are not always successful everywhere, in part because "civil society" is not the only way to define particular locations used in city politics.

c. The Family

We tend not to think of the family as a spatial concept, and yet its ongoing association with the home betrays the concept’s alleged aspatiality. Typically in political theory, the home was the location where private interests were formed that, then were brought to bear on the state by citizens. In this arrangement, the family was pre-

11 Formal volunteers are defined as people who "willingly perform a service without pay, through a group or organization (p. 97). Informal volunteers are defined as those who help on their own, not through an organization or group (p. 93).

12 Data available from Volunteer Vancouver, #301- 3102 Main Street, Vancouver, B.C. V5T 3G7. See also (Duchesne, 1989).
political. It was a nurturing environment for the citizen (Elshtain, 1983; Pateman, 1989). Feminism, of course, has challenged liberalism's facile public-private dichotomization of social life. It has demonstrated the exclusion of women from the category of citizen in liberalism, which sequestered women in the private domestic- and apolitical- sphere. Feminist theory has long insisted that the family, and by implication the home, was indeed a political site. With the rise of the post-war welfare state, the relationship between state and family has been of particular concern (e.g. Ursel, 1992).

The decline of the nuclear family has led to a questioning and exploration of different forms of kinship (Koontz, 1992; Stacey, 1991; Weston, 1991), and in turn it widens the spatial possibility for where we look for "family". A recent Statistics Canada study on the family declares, "There is no universal definition, but many definitions [of the family], each emphasizing different aspects of the family.... Family definitions depend, to a large extent, on who is doing the defining, and the purpose for which the definitions are provided" (quoted in Priegert, 1994, p. A-5). The ratio of Canadians in families to those not in families has been decreasing over the last 25 years, as Figure 1-7 plots. While the vast majority of Canadians do live in families (83% in 1991), the percentage of Canadians not living in families has increased from 13% in 1971 to 17% in 1991. Married-couple families encapsulate the majority of Canadian families (77% of all families in 1991); nonetheless alternate forms of family-arrangements are on the rise. Common-law families made up 10% of all Canadian families in 1991, up from 6% in 1981. The number of lone-parent families has doubled between 1971 and 1991 (La
Figure 1-7 Ratio of Canadians in Families to Canadians Not in Families, 1992. Quotient was calculated by dividing % in families per year with % those not in families.
Novara, 1993). While these national statistics demonstrate the shifting form of the family, they nonetheless fix it heterosexually. None of these data, for instance, consider same-sex couplings. Familial relations, then, can not be isolated in the home (or in particular forms of the home).

Furthering these processes, AIDS has complicated the already often-complicated, tenuous relationships between gay men and their biological families (Preston, 1992). AIDS has forced the family to come to grips with gays and lesbians, as persons with AIDS confront their families with the facts of their sexuality, and their terminal illness; as well as their needs for familial care and support. In addition to providing or requiring familial-type support because of AIDS, gays and lesbians are now confronting society with same-sex partnerships, or their own self-consciously constructed kinships that have come to be called "families we choose" (Weston, 1991). Struggles over domestic-partnership benefits are the classic example of these restructurings' relationship to state and civil society, but the rise of kinship networks to support people living with AIDS can also complicate the distinction between state and family. State and volunteer-affiliated careworkers have joined, or replaced, familial caregivers as new forms of kinship are forged by people living with AIDS.

AIDS caregiving alongside the restructuring of the family, then, opens up the

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13 "Families described in this report are generally defined in one or two ways. Census families include married couples and common-law couples with or without never-married children living at home, as well as lone parent families. Economic families, on the other hand, refer to all groups of two or more persons who live in the same dwelling and who are related to each other by blood, marriage, common law, or adoption." (La Novara, 1993, p. 7)
possibility that the citizen can be found in locations we typically associate with that institution: the home, the intimate sphere, because struggles for rights, duties, and membership in political community are often forged here through the need for alternate or augmented forms of kinship support. Mouffe’s willingness to locate citizenship within any social relation means that in a context of the local response to AIDS, we must be open to a geography of citizenship that includes the home and even public spheres of private interaction amongst kin. Spatially then, we can certainly consider the home as a potential site for citizenship (e.g. figures 1-8). But we should also consider the many public spaces where intimate, familial sphere can occur as well since, as both Pateman (1989) and Kymlicka (1990) note, private space can often be forged within the public sphere of civil society (e.g. figure 1-9).

In sum, while Mouffe has begun to provide a complex understanding of how citizenship can fit with a wide array of social relations, the categories she uses to bracket those spheres, when spatialized, become awkward to describe the geography of AIDS citizenship because the spaces themselves are undergoing change. That is to say, they themselves are de-centered, in flux, and have been undergoing extensive restructuring during the AIDS crisis. It is on that flux which I focus while considering the structuration of citizenship across spaces associated with the state, civil society, and the family.

V. Vancouver’s AIDS politics contextualized

By the early 1980’s, Vancouver had longstanding and readily identifiable gay and lesbian communities, though they remained separated by class, geography and gender (cf.
Figure 1-8 Spaces of 'The Family': Apartments in Vancouver’s West End. The home, as the epitome of the private sphere, is typically considered to be the space of the family.
Figure 1-9 Another Space for The Family? Along the Sea Wall, English Bay, Vancouver.

Spaces of the family must also include places where familial/ emotional support from kin is expressed, like public spaces of private relations. Many buddies mentioned they spent time with their clients talking while walking along the Sea Wall. Stanley Park is adjacent to Vancouver’s West End.
Figure 1-10 Vancouver, British Columbia, Canada
Adler and Brenner, 1992). Gay men clustered in the city’s West End (see Figure 1-10), a scenic, high-density, high-rise apartment neighborhood immediately adjacent to the downtown core, while lesbians located on Commercial Drive, a working class neighborhood several miles east of the CBD. The rise of gay neighborhoods across North American cities has been well documented, and in many ways, the historical geography of Vancouver’s gay community’s parallels experiences in other cities- most notably San Francisco’s (Shilts, 1982; D’Emilio, 1983; Castells, 1983; FitzGerald, 1986). Drawing gay men from across Canada, the West End gentrified through the sixties and seventies. The number of gay bars in the city grew through the 1960s and by the late 1970s they clustered in the West End. Gradually they became more visible as public spaces by the early eighties. The atmosphere of sexual liberation and the emerging gay consciousness through the 1970s, as well as an increasing number of social organizations (typically around sport) augmented feelings of liberty and freedom, and community (Fairclough, 1985).

Despite a broad and diffuse recognition of homophobia and state surveillance, Vancouver’s gay community had rarely been the target of direct attacks. To paraphrase numerous individuals, ’There never was a Stonewall in Vancouver’.14 This lack of confrontation was usually explained culturally, with an emphasis on Vancouver being "west coast" or a "lotus land", with a relaxed attitude about difference. One gay man in his early sixties recalled:

14 The 1969 Stonewall Inn riot in New York City pitted gay men against police and is typically cited as the flashpoint of the gay-rights movement. See (Duberman, 1993).
"In my opinion this city’s had a very tolerant attitude, for as long as I can remember—much more so than other cities I’ve lived in throughout North America, as a matter of fact. Toronto, Calgary, Edmonton, a couple of places in the states. I lived in New York for a while, but that doesn’t really count there because it’s a melting pot of everything. But Vancouver has always had, in my opinion, a far more tolerant attitude about being different from the norm. I can remember, and this is going back to the very early fifties, right across the country The Castle [a bar] was known as a fruit hangout. . . . During the war American servicemen were barred from going there because of that fact. And yet the local citizens didn’t seem to mind. There was no problem with the police or anyone. It was sort of, 'You do your own thing. We do ours.'"

The interesting political point to be taken, however, was that through the 1980s AIDS issues exerted strong internal pressures inside the gay community that were hardly felt before. For the first time gay Vancouverites had to form a broad-based coalition to meet hard material needs quickly (such as drug treatments, financial aid, housing, food, medical supplies etc.). Before AIDS, there had not been much to link gay men (and lesbians) across their various subject positions (see Cohen, 1991; Adam, 1992). Nor did gay men ever before have to deal with the state as gay men so publicly or collectively.

One of the founders of AIDS Vancouver (the city’s oldest and most comprehensive AIDS service organization) explained:

"The difference between Vancouver and almost every other major city—certainly Toronto which had the raids on the baths in the seventies—was that we’ve never had a cathartic, bonding event. The city has always been "laid back", you know, liberal, do-your-own-thing, go-to-Wreck-Beach, have a good time. Tolerant of all kinds of behavior, welcoming to newcomers. And with a political leadership that has either never seen any particular interest in doing any political gay-bashing. Just the opposite. It’s been very supportive. I mean you could argue there’s oppression, homophobia, minority, that sort of thing, but nothing concrete."

Another person stressed the internal differences in the gay community that AIDS transgressed as she recalled conversations with the men who would form the Vancouver Persons With AIDS Society (a self-empowerment/advocacy group):
"I don't know how they all got together exactly. Certainly a lot of them when I saw them individually said that, in regards to the group, they regarded most of the others as people they would not normally have any sort of relationship with. And so it was very difficult for them to be in a group with these people on the basis of a terminal diagnosis. Different classes. Different social circles. Just different interests. The fact that they were all gay was not enough that they should all be friends, right?"

Thus AIDS became the first material issue related to identity politics for gay men in the city. AIDS service organizations (ASOs), in turn, became outlets for volunteering and financial charity by and for the gay community locally. Before that experience can be detailed, it is important to relay the tremendous external pressure on the gay community to form its own shadow state.

b. The Provincial Government

Vancouver's culture of tolerance was directly challenged through AIDS issues by the provincial Social Credit (or Socred) government throughout the 1980s. The Socreds were a right-wing coalition of Liberals and Progressive Conservatives that (up to 1991) had dominated provincial politics for much of the past fifty years. In 1986 the party leadership was won by the charismatic Bill Vander Zalm, who governed until 1990. The party had long espoused neoconservative calls for entrepreneurship, government downsizing and privatization (Magnusson, Carroll, Doyle, Langer and Walker, 1984). Premier Vander Zalm, however, was a staunch Roman Catholic who repeatedly and unabashedly attempted to press his moral views directly into official government policy (Persky, 1989; Mason and Baldrey, 1989; Leslie, 1991). Issues like abortion and AIDS received particular attention from Cabinet and the Premier. Typically HIV testing, medical services and research were funded, albeit quietly and minimally. AIDS education, prevention and support services were deemed problematic and publicly denied
funding. Socred arguments against funding AIDS initiatives were not based on fiscal conservativism but moral opposition to premarital sex and gays.

Through the decade a number of specific, explosive issues could be strung together readily that demonstrated the government's homophobia and moral reading of AIDS: the refusal to fund explicit safe-sex literature for the gay community, the blocking of a video promoting condom use, a quarantine bill aimed at HIV positive individuals, and the refusal to pay for AZT directly. All the while Vander Zalm and his cabinet ministers repeatedly stressed their personal objections to gay and lesbian "lifestyles". For example the Socred Forest Minister referred publicly to AIDS as a "self-inflicted wound" in 1989, without reproach from the Premier or Health Minister (Leslie, 1991, p. 146). Most controversial, perhaps, was the Health Minister's own 1987 remark that AIDS Vancouver could "take care of their own kind" [sic], though he insisted it was not a slur (Barrett, 1987, p. B-3; Simpson, 1989; see also Weeks, 1989). The popular political culture in Vancouver, across lines of sexuality, widely emphasized government inaction and homophobia around AIDS issues.

c. AIDS in British Columbia and Vancouver

It was not merely the direct Socred attacks that galvanized the gay community into responding (see below), the sheer intensity of the AIDS crisis focused the response. Through the 1980s AIDS cases in British Columbia climbed steadily (see figure 1-11). More to the point, B.C. was the province exhibiting the greatest demand for AIDS initiatives in the country. During Vander Zalm's tenure, B.C would maintain the highest rate of AIDS per capita in Canada (see figure 1-12). By March, 1994 there were at
Fig. 1-11 New AIDS Cases in B.C. 1983-93 (Rekart and Chan, 1993)
Figure 1-12 AIDS Rates in Canada By Province, 1987-1990
(Health and Welfare Canada, 1990)
least 1,746 AIDS cases in B.C. (Rekart and Wong, 1994). And while it is quite
problematic to disaggregate numbers of HIV positive people into "acquisition categories",
both official statistics and community perception suggest that the disease hit the gay
community foremost in Vancouver. It was from that quarter that local responses were
first fashioned.

As early as 1981 there were rumors throughout the West End of a disease
targeting gay men. Stories were filtering up from San Francisco, though information was
sketchy. Staff at St. Paul’s (the West End hospital that was to become a leading center
for AIDS research and care in Canada) conceded that early cases of AIDS during this
time were no doubt seen there but passed off as discreet illnesses until infection trends
were identified in 1981 and 1982. By 1983, it became clear that there were sick and
dying gay men locally, and the problem was growing rapidly. Apprehension was so high
in the West End that a group of gay men began quiet meetings to figure out what could
be done. Seeking expertise, they called Paul Popham of the newly formed Gay Men’s
Health Crisis in New York for an information night at the West End Community Centre
on March 12, 1983 (Shilts, 1987, pp. 246-7). Afterwards, Popham stressed the need for
a local support and service organization to the men. AIDS Vancouver was formed later
that year, and was the first ASO in Canada. Operated at first completely on a volunteer
basis, the organization formed and was run largely by gay middle class white men who
were, in fact, 'taking care of their own' precisely because (in spite of their ardent
demands) they anticipated no help from the provincial government of the day or from the
general community.
d. The Rise of the Shadow State in Relation to Provincial and Local State Bureaucracies

While British Columbia has had a long history of relying on semi-private organizations to provide welfare services (Ismael and Vaillancourt, 1988), the increased use of the shadow state in B.C. through the past fifteen years has been amply documented (Donaldson, 1985; Butcher, 1986; Reimer, 1992; Rekart, 1993). In the case of AIDS, a rapid emergence of shadow state activity has proceeded since 1983. The range and quantity of service providers is demonstrated in Table 1-2 and mapped in figure 1-13. Two agencies dominate. AIDS Vancouver is the principal education, prevention and support service organization in the city. During my fieldwork it had a paid staff of 23, and has a volunteer base of over three hundred. The Vancouver Persons With AIDS Society (PWA) is a self-help group that encourages empowerment and "advocates" for people who are HIV positive or who have AIDS. It had a membership of over 1,200 during my research. Ironically, in spite of government opposition and gay community support, these organizations have consistently received funding from the province.

Local autonomy in British Columbia is tightly circumscribed by the province (Magnusson, 1986). City health departments are largely an arm of the Ministry of Health. Nonetheless by 1985, the city health officer, along with the new director of the provincial Centre for Disease Control (a branch of the health ministry) realized that AIDS Vancouver’s services were invaluable and needed to be subsidized despite government homophobia. They devised a scheme whereby the province would transfer money to the Vancouver Health Department. The money would, in turn, be quietly earmarked for AIDS Vancouver (and later PWA Society and McLaren Housing Society) alongside more
## Table 1-2 The AIDS Shadow State in Vancouver, 1992

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Figure 1-13 The AIDS Shadow State and Vancouver 1983-1993.
While most organizations started in the West End, high rents there have forced many into adjacent Yaletown office space. Yaletown and the West End are separated by Granville.
public city grants to the agencies. This laundering arrangement (well known by people in ASOs but not the public more generally) allowed the organizations to cover overhead, thereby helping to stabilize their position in the city, and more importantly eased some of the intense financial pressure on the gay community. According to provincial health bureaucrats of the day, the Premier and Cabinet allowed the secretive funding to proceed because by 1985 the crisis had become too great to ignore. Nonetheless, the scheme gave the impression that the city was funding AIDS organizations while the Socreds were ignoring dying gay men by only representing their Christian fundamentalist supporters. This ruse further augmented gay support for local AIDS organizations.

More recently city and provincial bureaucracies have interlocked with Vancouver’s shadow state through numerous relationships (often contracting) and shared mandates. The province offers anonymous testing, but locates sites in community facilities. It hires street nurses and community workers to do AIDS outreach and testing in the inner city and West End. The city health department funds a needle exchange staffed by provincial nurses but administrated by a non profit service center. The city also has an AIDS-education coordinator whose campaigns advocate condom use. St. Paul’s Hospital houses the Infectious Disease Clinic, which specifically treats people living with AIDS and HIV. These initiatives aside, the bulk of the education, prevention and support work around AIDS and HIV in Vancouver is done in or by the shadow state.

VI. An introduction to the case studies

The restructurings of state, family, and civil society, are treated through these chapters as the spatial search for the citizen in city politics is undertaken. The rise of the
voluntary sector, of a more democratic public sphere in civil society, as well as the
decline of the welfare state carries through Chapters 3 and 4. The changing definitions
of family is an underlying theme in Chapters 5 and 6. The four chapters that constitute
the case study of this research are organized not by the orthodox categories of state/civil
society/family, but rather by Mouffe’s guiding principle that we investigate new spaces of
radical citizenship, and by the reality of the weave between these conceptually discrete
spheres. The typical "new" location for politics, as noted above, is civil society.

Following Mouffe’s guidelines, I expected the best empirical example of poststruc-
tural citizenship in civil society would be ACT UP (AIDS Coalition to Unleash Power)
Vancouver, a direct-action civil disobedience coalition known for its theatrical and highly
effective hijackings of public space. ACT UP, however, made only modest gains in
Vancouver, and Chapter 3 interprets that failure as a reluctance of its members to
acknowledge the already-changed relationship between Vancouver’s voluntary organiz-
ations (which began in civil society) and the state apparatus.

The overlap and simultaneity between civil society and the state in local AIDS
organizations is the subject of Chapter 4. In it, I examine the way citizenship in the
voluntary sector or "shadow state" articulates with ever-shifting social relations, and
hard-to-define political spaces. Local AIDS organizations that began as grassroots, gay-
oriented community spaces, are becoming highly integrated into the state apparatus as
well as bureaucratizing in their own right as demand rises. I examine the reshaping of
these spaces by looking at the negotiations of identities between citizen and bureaucrat in
employees of AIDS Vancouver, and the citizen-polarity at the Vancouver Persons With
AIDS Society.

In Chapter 5 the boundary between state and family is problematized through an account of the relations between AIDS Vancouver buddies and their clients. The tremendous variability in the way these relationships of support are sustained—especially in the context of an incorporating voluntary sector noted in the previous chapter—challenge us to see citizenship in locations like the home, the bedside, and even the drugstore and pharmacy, through relationships that are full of love and tenderness and especially support, as much as those that take the form of social work and personal advocacy. Repeatedly, I was told that this fuzziness, this lack of definition and boundaries between "state" and "family" was precisely what made buddy relationships work as support systems for people living with AIDS.

The need to understand the cultural saliency of citizenship’s location was nowhere more resonant than at the Vancouver display of the Canadian NAMES Project Memorial AIDS Quilt, which I describe in Chapter 6. Here was a space where family members, friends, and acquaintances interacted with complete strangers. It was a space that clouded any possible distinction between a space of grieving in the family and one of public education in civil society. This chapter challenges Mouffé’s insistence that the citizen be found wherever Schmitt’s 'friend-versus-enemy' distinction exists. The Quilt was a deeply political site, but one that did not hinge on any 'antagonistic moment'.

Preceding the case studies is a critical engagement with the way that geographers— to date— have framed gay men and their spaces, which have been so utterly transformed by the AIDS crisis. In one sense Chapter 2 explains the need for, and
justifies, an ethnographic approach towards the AIDS crisis from within the discipline of geography. It shows how that tack provides an alternate, more social geography of AIDS than has been furnished recently by the discipline's spatial science tradition. At another level, Chapter 2 begins to highlight the stakes of this thesis. AIDS has been called "an epidemic of signification" (Treichler, 1988, p. 31): it evokes so many meanings and connotations for people. Yet it is important to stress the political dimensions of this epidemic, because (as numerous authors have shown) it has so often been de-politicized (Kramer, 1989; Shilts, 1987). With that depoliticization comes a fundamental misunderstanding- and misrepresentation- of 'the geography of AIDS'. "Citizenship" is an accurate conceptualization of the responses to AIDS in Vancouver because- as this study will reveal- they are precisely about struggles around rights, duties, responsibilities, and the striking of political community through such claims: the very characteristics of citizenship in modern democracy.
Chapter 2
Distant Bodies, Distant Spaces:
A Critique of The Geographies of AIDS

I. Geographies of Bodies and Spaces?

Figures 2-1 and 2-2 relay an equivocal geography of AIDS in British Columbia that at once reveals and erases. They are standard representations of "the geography of AIDS"; they mimic figures found in current literature on the subject, at least to the available data's best estimate. As Figure 2-1 alludes, AIDS has been seen as a gay disease (see Edwards, 1992). Figure 2-2 shows that within the province itself, Vancouver has the highest incidence of HIV infection compared to other health units. Certainly these representations tell us much about "the geography of AIDS" in Vancouver, Canada through the past decade. Yet these renderings of AIDS or HIV are intensely partial, incomplete, and- as I illustrate below- ultimately obfuscating. Simple yet pressing queries are prompted: Can Figure 2-1's risk factors really be so mutually exclusive? How has Vancouver's gay community responded? These are some of the immediate critical silences these figures evoke. They hint at a broader erasure.

Situated in scientific epistemology and ontology these representations upstage and exclude other ways of knowing about the places and people dealing with AIDS. Such alternatives, I insist, would portray a more social geography. Yet over the past five years geography has considered the AIDS pandemic largely through depictions like the ones illustrated above. For all its panoply of methods and perspectives, the discipline has drawn nearly exclusively on its spatial science tradition to frame AIDS. Dangerous implications result. The epidemiological model legitimates a heightened focus on the
Figure 2-1 AIDS Cases in British Columbia By "Risk Group"
(Rekart and Chan, 1993)
Figure 2-2 Distribution of AIDS Cases By Health Unit Across British Columbia, 1993
(Rekart and Chan, 1993)
virus and its travels across space. In turn the hegemony of scientific discourse in social life is replicated and reinforced by the discipline’s singular tack. Most importantly, however, gay men (as this chapter will argue) have been closeted by this spatial-scientific geography of AIDS. This consequence is deeply ironic given the gains in visibility made because of their response to AIDS (Signorile, 1993; Altman, 1988).

This chapter explains why an ethnographic approach to the AIDS crisis is warranted within the discipline of geography. It brings longstanding cultural critiques of AIDS’ science to bear on the current geographies of AIDS by showing how gay men and the spaces they occupy are represented and simultaneously erased, in spite of the holocaust that AIDS has wrought on gay communities (Rappoport, 1988; Carter and Watney, 1989; Crimp, 1988a; Kramer, 1989; Crimp and Rolston, 1990; Patton, 1985; 1990; Wallis, 1989; Epstein, 1991). I demonstrate how the erasures (by scientific representations) ironically conceal geographers’ distances from gay men. I am not using the word metaphorically. By "distance" I mean a textually endorsed gap that emphasizes geographers’ ignorance of gay men and their communities. This process is quietly hidden by science’s exclusive focus on the virus itself. Gay men and their spaces are foregrounded unidimensionally, asocially, and only occasionally as nodal points in an epidemiological epic. These people are textually, socially distanced when represented as bodily carriers. The viral focus reduces the already marginalized gay body to a mere vector for illness. Further, geographers have taken an Archimedean, abstracted- hence distanced-

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1 Eyles (1986, p. 435) defines social distancing as, "The separation of two or more distinct social groups for most activities, by either mutual desire, ... or by the dictate of the superordinate group."
account of space in their portrayal of the AIDS crisis. Only certain places are discussed from a global perspective, while others—specifically gay communities in North America—are all but ignored. The implication of these ironic distances is an erasure or closeting of an already stigmatized social group that has transformed places fundamentally in its response to AIDS. Ethnography, I demonstrate, can reveal such geographies in spite of the distances perpetuated by spatial science.

II. Distant Bodies
a. the viral focus

At first glance, it is scarcely intriguing that the AIDS pandemic has been taken up in geography almost exclusively by medical geographers, given the subdiscipline’s longstanding concern over the relationship between health and physical environment (Smith, 1986, p. 293). While the spatial arrangements of health care and support are ongoing research topics (e.g. Willms, Hayes and Hulchanski, 1991), and a critical, theoretically informed medical geography is emerging (e.g. Dorn and Laws, 1994; Kearns, 1994), the spatial diffusion of the virus has been the paradigmatic focus for geographers interested in HIV and AIDS (Wood, 1988; Shannon, Pyle and Bashshur, 1991, Cliff and Haggett, 1989; Smallman-Raynor and Cliff, 1990). Geography has entered the debates over HIV’s origins and has tracked the spread of either HIV or AIDS across the globe in the past decade (Shannon, 1991; Shannon and Pyle, 1989; Gould, 1993). Similarly, predictive models anticipating future geographies have been developed (Loyotonnen, 1991; Gould, 1991b). Finally, of course, the virus or syndrome’s diffusion at various national and subnational scales has been charted, particularly in the United States (Dutt, et al., 1987; Gardner, et al. 1989; Dutt et al., 1990; Gould, 1991b).
Traditionally, the purpose of mapping morbidity and mortality has been to shed light on the cause of disease, or the role certain elements of places play in the progression of the illness (Smith, 1986).

What is being plotted, mapped, etc., across these geographies is the virus rather than the people dealing with it. People with HIV are not brought any closer- in terms of "social distance"- by this brand of geography; the virus is. It is always the main character in these narratives. The virus and the syndrome are the central concerns for geographers. So, for instance, on page 17 of Shannon, Pyle and Bashshur's (1991) book we are offered a full-page plate of the virus, a cross-section on p.21 (see also Shannon and Pyle, [1989 pp. 4-5]). Cliff and Haggett (1988, p. 220) reveal HIV through electron microscopy as well. These texts, as well as Gould's (1993), offer extensive travelogues of the virus' mobility and operations inside the body (cf. Fauci, 1991; Greene, 1993). Such discussions, placed at the front ends of texts, serve as scholarly anchors in scientific discourse, legitimating the subsequent truth claims, lending them a certain authoritative scientific power. Haraway (1991; 1992) and Patton (1990) have both stressed the legitimacy of science gained by such exploratory metaphors. Science can show us what we cannot see ourselves. It can 'boldly go where no man has gone before'[sic]. For geography, cartographies of HIV's mobility within the body can confidently and authoritatively explain (and potentially control) cartographies of the body (HIV's mobility across space).

b. body/virus/science

Consequently the body is explained and portrayed as the vector of AIDS. The
general scientific authority through which the body is depicted solely as a transmission node is furthered in spatial science. The fixation on "patient zero", an airline attendant presumed to have been one of the earliest and most nefarious carriers of the disease, is indicative of this vampire trope and has been incorporated into geography's explanations, albeit sceptically (e.g. Shannon and Pyle 1991, p. 17; cf. Shannon, Pyle and Bashshur, 1991 p. 118; Gould, 1993, pp. 38-39).² Patient Zero becomes a black arrow across a map, defined narrowly by his sexual acts and his antibody status. The media sensationalism and stigma this sort of explanation fuels, making people who are HIV positive feared or pitied, is not problematized (see Watney, 1989). His roles in media hype and cultural mythologies of contagion are never discussed by geographers (cf. Shilts, 1987³; Williamson, 1989; Hanson, 1991). He is important to geographers only to the extent that he spread the virus across space. Similarly, Gardner et al. (1989 pp. 37-39) place abstracted, smoothed HIV/bodies as plots on distance decay graphs to describe the New York, Miami, Houston, and San Francisco metropolitan areas. Through these renderings gay men's bodies become reduced to biological hosts. Their contacts, their travels, their behaviour is important only to the extent that it enables the virus to move across space. There are no other contexts offered for these bodies. The multiple social discourses through which these social bodies are networked are reduced down to behavioral-biological attributes of the host. Thus in extended footnotes Shannon and Pyle (1989, ff 1,2) cite scientific studies of gay men's sexual practices to seal their identity to

² Patient Zero died in March, 1994

³ Randy Shilts died in February, 1994.
particular sexual acts and promiscuities (cf. Watney, 1987; Crimp, 1988b). Geographical
discussion, then, reproduces the modern scientific tendency to fragment the body to such
an extent that the social subject is irretrievably lost (e.g. Rabinow, 1992). It is
instructive to quote Patton (1990, p. 55) on this process with respect to scientific
discourses around AIDS in general:

"In AIDS medical science, the body becomes a screen or agar plate on which the disease
is in play. The complex of symptoms, diseases, in themselves, produces repetitions....
Diagnostic medicine abstracts the symptoms from the body to produce a totalizing
explanation with a single or primary cause, a pathology. Because the immune system,
understood metaphorically, transcends the place of the body, the abstraction "AIDS" folds
back to correspond exactly to the space of the body. The virus is lost and,
metaphorically speaking, the homosexual/prostitute/African/injecting-drug-
user/hemophiliac body becomes AIDS [emphases original]."

While her concern is over the social consequences of scientific hegemony of certain
bodies, Patton notes that these outcomes are predicated on the textual erasure of social
context for that authority (see also Horton, 1989). She insists that science produces
knowledge by filtering out the social world. It reinserts these forms of knowing as
"data" about (for instance) "aggregate behaviour change" (p. 53). Geographical
discussions of AIDS, in this way, perpetuate a distance that is legitimated by scientific
epistemologies of AIDS and HIV. That distance, Rosenthal (1989) suggests, lends a
necessary objectivity to the emotionally charged accounts of the epidemic. It must be
stressed, however, that as a thoroughly social distance, the span between spatial science
and people living with AIDS is structured with considerable social authority. Science has
become a master narrative, an ultimate arbiter, when alternative discourses conflict (see
Patton, 1990 for a discussion).\textsuperscript{4} Treichler (1988) claims the gay body is at once read from but at the same time does not exist in science, stressing many scientist's gaping ignorance, unease, and lack of contact with gay men generally, a point concurred within geography most recently by Knopp (1992). Spatial science, consequently, never considers or justifies its (lack of) renderings about gay men because of this ambivalence. Rose (1993, p. 77) has also called attention to the scientific power exerted over the body in geography through her critique of the masculinist, objectifying gaze towards bodies of the other. Distance validates the objectivity of the geographer’s framing of the body.

The hegemony of scientific authority over the bodies of gay men is all the more amplified in light of the longstanding historical scientific discourses that stigmatized the gay body clinically. The category "homosexual" was a nineteenth century concatenation of a series of behaviours and body types deemed threatening to the social order (Foucault, 1980). Bayer (1981) reminds us that it has only been in the last two decades that homosexuality was declassified as a (bodily) illness by the American Psychiatric Association. AIDS, however, has publicly reinforced this pathology. These bodies have become objects of power through scientific discourse, and the AIDS crisis has augmented that historical process (Epstein, 1991). Gay men’s disease racked bodies—emaciated, scarred by Kaposi Sarcoma lesions—have been so used as markers for suffering and death across the media, images that join with scientific renderings of contagion, contamination,

\textsuperscript{4} Ironically, Gould himself makes this point in a chapter detailing his difficulty in getting (medical) scientists to even consider a geographic perspective, which they immediately dismissed because of they presumed it lacked scientific validity. Though Gould fails to recuperate this demonstration of science-as-arbiter, his Orwellian example illustrates that while all science may be equal, some sciences are more equal than others'.
threat, and guilt (Watney, 1988, 1989; Crimp, 1992a). To be scientifically represented as vectors of transmission, the gay body is available for surveillance and regulation. People living with AIDS are reduced to "victims"-to be both pitied and feared, the already dead, in popular thought (Navarre, 1988). By not showing us social subjects, only bodies, the discipline does not confront- and hence potentially augments-the social power of these scientific-spectre images. Such a distant, scientific, authoritative gaze at the body, Watney argues, is crucial to this hegemony (1989, p. 78):

"AIDS is thus embodied as an exemplary and admonitory drama, relayed between the image of the miraculous authority of clinical medicine and the faces and bodies of individuals who clearly disclose the stigmata of their guilt. The principal target of this sadistically punitive gaze is the body of "the homosexual."

c. bodies of risk

The concept of a "risk group" (as in Figure 2-1) further plays into this stigma. Risk groups have defined the virus through the body, especially the gay male body. Bodies only differ according to their risk capacity for transmission. Loyotonnen's (1989, p. 133) figure 2 (mimicked here as Figure 2-1) illustrates the tactic, as does Table 4 in Smallman-Raynor and Cliff, 1990, p. 188) and Figure 5 in Dutt et al., 1987, p. 463. Shannon, Pyle and Bashshur's broad conceptual model is also framed through risk groups (1991, pp. 157-164). Wood (1988) derives distinctive diffusion models based on bodies. Sexual practices are mapped over social identity. Categories tightly reinscribe the bodily boundaries where there are often fluid transgressions (Butler, 1990). For example, both gay and straight couples may engage in "high risk" anal intercourse, but would be graphed in completely different-yet supposedly meaningful-categories in Figure 2-1. Thus scientific discourse exercises its power through other social discourses. For
example Grover (1988, pp. 27-28), has criticized the notion of "risk group" as it flows out of epidemiology towards the political sphere:

"In the media and in political debate, the epidemiological category of risk group has been used to stereotype and stigmatize people already seen as outside the moral and economic parameters of "the general population." Jesse Helm’s success in October 1987 in getting the Senate to prevent federal dollars from being spent on safe sex information for gay men -- the hardest hit "risk group" in the US, and the only group in which reported transmission of the virus has declined... due to safe sex education by gay men themselves -- makes clear the social and political as opposed to epidemiological, functions of the risk group concept: to isolate and condemn people rather than to contact and protect them."

Altman (1988, p. 301) concurs, but more directly challenges spatial science’s will to control when he traces scientific ontologies in the public sphere and the consequences of their itinerant relocations:

"This distinction between behaviour and identity, which often seems academic, is in fact vital to a rational understanding of AIDS. Because the media and the public generally do not make these distinctions, "gay" and "AIDS" have become conflated, so that public perception of homosexuality becomes largely indistinguishable from its perceptions of AIDS. This, in turn, has two consequences: (1) It causes unnecessary discrimination against all those who are identified as gay (including, in some cases, lesbians), and (2) it also means that people who are not perceived (and do not perceive themselves) as engaging in high risk behaviours can deny they are at risk of HIV infection."

d. private bodies/public virus

While the stigmatized relation between gay men and HIV diffusion has not eluded geography, it is hardly taken up critically. The distancing of gay men’s bodies takes yet another form in the contradictions over the private sphere. Deconstructing images of people living with AIDS, Crimp (1992a, p. 120) notes the irony that:

"...the privacy of the people portrayed is both brutally invaded and brutally maintained. Invaded, in the obvious sense that these people’s difficult personal circumstances have been exploited for public spectacle, their most private thoughts and emotions exposed. But at the same time, maintained: The portrayal of these people’s personal circumstances never includes an articulation of the public dimension of the crisis, the social conditions that made AIDS a crisis and continue to perpetuate it as a crisis. People with AIDS are
kept safely within the boundaries of their private tragedies."

Geography too, I would argue, is highly susceptible to this critique. At least two examples of geographic scholarship (Gardner et al., 1989; Loyotonnen, 1991) use data that have been collected through an invasion of privacy: through state policies of mandatory testing and/or reporting. The authors do not reflect on the ethics of these data collections (cf. Gould, 1993 pp. 168-177; Last, 1990). Only Gould takes up the issue in a discussion of confidentiality. Yet he has been bothered by what he sees as an over-concern with confidentiality in surveillance data. Indeed, he offers a map of people living with AIDS in Los Angeles and challenges the reader to actually locate any of these people (1993 p. 173). He states (1991b, p. 31):

"It is argued that the geographic location of people with AIDS, specified by a very fine coordinate system or street address could become an identifier. I believe this to be wrong for perfectly understood ethical reasons. In all mathematical modelling, geographers have not identified anyone.... The loss of confidentiality is a genuine fear, but it has been taken to absurd lengths..., so extreme and absurd that a vital component of our understanding is now in total disarray."

The concern for more precise and reliable data sets appear to trump the very real social issues confronting gay men (Patton, 1985). Gould reads the issue of confidentiality far too narrowly. Again, spatial science fails to consider the social discerning of these bodies generally. The issue is not so much the identification of particular persons with

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5 Gardner et. al. rely on data collected from the U.S. military applicant screening program. While they acknowledge the potential for self selection out of the sample, they nonetheless maintain its reliability. It is not clear if applicants know they are being tested for HIV antibodies. Loyotonnen's Finland data are based on mandatory reporting to the National Board of Health. Again, the virtue of the data set's reliability is pressed, while the ethics behind collection are not considered.
AIDS (though that does remain!^6), but rather the overall ignorance of their social situatedness. For instance, not only are the major risk activities for HIV infection illegal in many U.S. states, simply being gay or lesbian—that is, the gay or lesbian body—can be inscribed as illegal and pathological in specific areas (Wallis, 1989; Signorile, 1993).^7 How are we to reconcile these stigmas with spatial science’s quest for precise data and representations of the gay body? The social stigma of the gay body or acts associated with it has been completely ignored by spatial science’s discussion of data sets. Accordingly, the location and antibody status of the body—its raison d’être for this scientific endeavour—is knowledge more important than the social construction of the body, its social geography.

e. bodies threatening the body politic

The distancing of gay men’s bodies proceeds in geography in another fashion, appearing when we look across its audience. Gay men are conspicuous by their absence. Grover (1992, p. 231) sums up this orientation when she writes,

"This, it seems to me, is a central dilemma in much American writing and broadcasting on AIDS: it ignores the communities with the greatest stake in AIDS as subjects, as viewers or readers, and uses them only as objects of its discourses."

It is widely acknowledged that control over the virus by geographic modelling and

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^6 For instance Kansas Reverend Fred Phelps and his followers have made it a point to protest homosexuality at the funerals of people who have died of AIDS, carrying signs that read, "God Hates Fags!" and "Praise God for AIDS!". See (Bull, 1993).

^7 For instance, the British law that forbids ‘promotion’ of homosexuality, the Citizen’s Alliances in Oregon, Washington, and Idaho (as well as the recent campaigns in Colorado) to prevent or overturn gay rights ordinances, which legally incorporate the lesbian or gay subject into the law’s definition of the citizen.
predictive mapping means control for people who are not infected. These have been
textualized as "the general population", which presumably gays do not constitute
(Beauchamp, 1991). Gays are well aware of the proximity of HIV and AIDS in their
lives, their communities. To constantly stress "prevention" of diffusion can set up an
us/them dichotomy socially founded on fear and homophobia. Gay bodies threaten the
public body; "they" are seen to threaten "us" (again, in ways that often only science can
allow us to actually see, like electron microscopy or GIS). Indeed, Gould's book (1993)
has a running "we" through it. Given that he does not specifically discuss gay men or
gay space, who could "they" be, but not-"us"? Juxtapose, for instance, this explicit "we"
in Gould's book with the arch conservative account of "the gay plague" proffered by
Gairdner (1992), where he insistently refers to gays and lesbians as "they". It details the
allegedly direct threats to the Canadian family (and by implication to Canadian society)
from gays and lesbians (one of which is AIDS). Additively these different social
discourses- detached science and the religious right community, combine to remove the
geography of AIDS from where "we" are. If we are not they, and they are elsewhere,
where must AIDS be? The geography of AIDS, to date, has not been a geography
written for gay men. They are the object- not the subject- of research. The discipline
distances them by default since it does not speak to them, or their experience, all the
while claiming an all-encompassing perspective by writing 'the geography of AIDS'
erasure of gay men helps to explain the rise of a vehement cultural critique of scientific
representations of AIDS and HIV.
Such critiques have just begun around geographic representations of AIDS. Consider, for instance, the angry, confrontational tone of Geltmaker’s (1992) recent urban political geography of ACT UP Los Angeles that stresses the violence done to the gay body through institutional responses to AIDS. Newman (1990) and Watts and Okello (1990) have both criticized spatial science’s extremely awkward encounters with African culture. Even within the spatial science discussion there are repeated calls for further, more detailed study of cultural practices among risk groups that facilitate transmission—but a simultaneous absence of the undertaking by any medical geographer or diffusionist to date (e.g. Shannon, Pyle and Bashshur, 1991). It can hardly be argued that gay men are ignored by the geography of AIDS. Rather, when they are considered, they are drawn as bodies that carry the disease. In this way, their social geographies are so distanced that they are erased.

To date, then, gay men with AIDS inter alia seem to be important to geography only as data points or modes by which the virus spreads across space. Geography’s gaze reproduces a threatening image of the gay male body (especially ones that carry HIV); the us/them dichotomy is fuelled by the spectre of contamination. There is a social distance, then, between spatial science and gay men/space. Challengers to scientific, medical authority have been at pains to claim their lives and experiences— their knowledge—as valid, reliable ways of knowing about the AIDS crisis to which more powerful discourses must listen. This point has been most forcefully made through the rallying cry of ACT UP: "Silence = Death", empowering lesbians and gay men to transgress social distance, as well as the persons with AIDS invective, "Stop looking at us! Start listening.
to us!" (Crimp, 1992a, p. 118).

III. Distant Spaces
a. straight space

Persistent debates about HIV’s global origins and diffusions subsume the significance of the local responses to AIDS in places. Moreover, when local effects have been charted, the spaces are largely heterosexual ones; specifically gay spaces are not closely investigated. Shannon and Pyle, for instance take us on a global tour, but especially focus on Africa. Gould zones in on Thailand, and the Bronx. Loyotonnen takes Finland as his area of study. Geographers note the decline in seropositivity rates in San Francisco or New York gay men (e.g. Gould, 1991b), but say nothing about the incredible responses launched there (Kuklin, 1989; Fernandez, 1991; Kayal, 1993). If we take an inventory of the places that are discussed in the geography of AIDS, the absence of gay spaces is ironic, given the risk-group approach of spatial science. A certain heterosexism and homophobia underlies the absence to date of any geography written about an urban gay neighbourhood’s experience with AIDS. That lacuna is all the more striking considering the history of such locales. For instance, by the late 1980s, it was estimated that one out of every two gay San Franciscans was HIV positive (Perrow and Guillen, 1990)! Yet there is no in depth investigation of the Castro district- the well known gay neighborhood in that city. Likewise there is no mention of Greenwich Village in the geography of AIDS. Instead, the section of New York City we are likely brought to is the Bronx (Wallace and Fullilove, 1991; Gould, 1993). That heterosexual inner city is a familiar, and hence closer terrain to geographers compared to the terra incognita of the gay ghetto, in spite of Lauria and Knopp’s (1985) call for research into such places
ten years ago. Indeed, as recently as 1992 gay and lesbian spaces had to remain anonymously concealed in geographic writing, reflecting structures of homophobia as much as an ethic of confidentiality (Adler and Brenner, 1992). Ignoring gay neighbourhoods while focusing on the AIDS crisis creates an ironic distance for geography, both in its concern to accurately trace diffusion, and its concern for changing facets of urban space. It denies the recent work on the intensely heterosexual structurings of the city, as well as the historic concealment or "closeting" gay and lesbians have undergone (Valentine, 1993).

While gay spaces are not completely ignored by the geographies of AIDS, they are heavily coded in scientific metaphors that deny their social geography. This mode of representation further distances gay space from geographers. Spaces like New York and San Francisco are cartographically described- literally- as "epicenters" (Gould, 1993 p. 124). In another passage, places exhibiting high infection rates are labelled "incubators", signifying birth ironically in the location of so much death (Shannon and Pyle, 1989, p.13). The invasion/ground-zero metaphors surely contribute to the us/them distancing as they decontextualize what are often gay neighborhoods or districts. As incubators on a metropolitan scale, gay men's bodies and spaces become distanced, serving as biological hosts to the natal virus.

b. straight from space

The social and political limitations of AIDS geography are nowhere better illustrated than in its cartography. Armed with a will to represent the virus in an exclusive scientific focus, geographers portray HIV and AIDS like weather systems
passing across a place (Shannon and Pyle, 1989, Figure 5, pp. 14-15). Likewise choropleth maps of the United States are deployed (Dutt et al., 1987, Figures 1-2, pp. 44-45; Gardner et al., 1991, Figures 2-8, pp. 30-36; Shannon, Pyle and Bashshur, 1991, Figures 6.1-6.6, pp. 115-117). Distance-decay lines extend away from metropolitan areas (Gardner et al., 1989, Figures 9-10, p. 37; Gould, 1993, Figures 9.2 and 9.3, pp 112-113). How do these representations help us to understand directly the social and cultural contexts of places which have been irrevocably, thoroughly changed by the crisis? As space is represented from a satellite, orbital (and hence scientifically augmented) position outside of where the virus is, its position reinforces distance while establishing science’s authority to reveal the truth (Cosgrove, 1985). Again, geography’s lacunae speak louder than its contributions. The geography of AIDS hardly ever takes us into these places (cf. Gould, 1993). Very little is actually conveyed about what these places are like. There is no "obtrusive" or ethnographic research that could convey these knowledges, in spite of considerable work done in other disciplines (Kotarba, 1990; Perrow and Guillen, 1990; Gamson, 1991) and the merits of ethnography argued from within geography (Jackson, 1985). Even where specific locations are discussed, the orientation of the geographer is Archimedean. Place is brought forward to us, rather than us being brought to that place. For example, Gould takes us on a world-wide tour of the AIDS pandemic: from Thailand to the South Bronx. While surely the comparative method is useful in stressing the unique experiences of places with a common problem, a rich context must be sacrificed. Furthermore, it is difficult to understand the point of such cartographies. Unlike cholera or smallpox, HIV is not spread through casual
contact, and transmission modes do not always hinge on residential proximity. Maps illustrating HIV like 'a wine stain spreading across a tablecloth' (Gould, 1993, p. 67) decontextualize how it is spread. Would it not make more sense to map people's sexual contacts across space? Would these not be more precise and accurate renderings of the geography of AIDS?

If geography connotatively or denotatively reduces gay men- or others- to mere bodily carriers of HIV and AIDS, it distances these people and compromises our potential to understand their struggles. Moreover, if the discipline only understands places like this scientifically- as an epicentre of a virus- it will ironically upstage a social process of distancing that goes on there. People and places are simply not passive conduits for the virus- even "promiscuous gay men" in "epicenters" like New York, San Francisco or (according to Figures 2-1,2) Vancouver. The virus' travels are not the only geographies to be chronicled. In turn, these people and places are not simply webbed together by viral trials. Spatial science, then, potentially does not serve its own professed ends of controlling the virus. Lacking a cultural understanding of either gay men or their spaces, spatial science (as a discourse) neglects the social construction of disease and identity, which are key elements to revealing the hidden geographies of AIDS. Textualizing gay men as biological carriers and their spaces as epicenters, while deflecting social attention away from them and towards "risk groups" will not control the spread of the virus. It will only augment the erasure of gay men's histories and geographies.

IV. Against Erasure: Ethnography

Moved by the often erased efforts of one very special AIDS activist, I began a
year and a half long research project into the local responses to AIDS in Vancouver, Canada in 1991. My research has been informed by poststructuralism, and I took an ethnographic approach to the fieldwork. It culminated in the collection of 120 oral histories of people involved in the city’s AIDS politics. Ethnography overcame the social distance of spatial science in several obvious ways. As a method it was self evidently more intimate and social than unobtrusive methods; hence richer, more contextual data were collected. Experiential authority-- "You are there...because I was there" (Clifford, 1988; p. 22)--, however problematic, decisively overcame the distances written into current geographies of AIDS. Most broadly, it revealed a complex, articulated set of responses to HIV and AIDS across the state, the voluntary sector and the family. Here, however, I want to draw out the implications for the erasures that spatial science perpetuates by conversely discussing the way ethnographic proximity revealed geographies of AIDS. I show below how gay men’s bodies and their spaces act socially and contextually to prevent the diffusion of AIDS and HIV, emphasizing how important it is to broaden the scope of 'the geography of AIDS' beyond viral diffusion.

a. gay bodies block HIV

In spite of a concern for prevention, no geographer has detailed gay men’s roles in educating themselves, each other, and others about safer sex. Should this not be a facet to the story of how AIDS- through gay men’s bodies- passes across or is prohibited from- places? For example, Figure 2-3 reports on a 1993 Canadian survey of gay and bisexual men’s AIDS awareness. It demonstrates that a majority of gay men across

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Figure 2-3 Survey of Gay Canadians Sexual Habits Since AIDS.
Question Posed: "Have you changed your sexual practices since hearing about AIDS?"
(Myers, Godin, Calzavara, Lambert, and Locker, 1993)
The Choices We Share Can Keep Us Healthy

Choices for Anal Sex

- Fucking or getting fucked without a condom is high risk for the transmission of HIV (the virus believed to cause AIDS). Use a condom.
- Pulling out before you cum is high risk for HIV because HIV can be found in pre-cum.
- Sharing sex toys without washing them thoroughly with soap and water is also high risk.

The safer sex choice for anal sex? Use latex condoms when fucking or getting fucked.

Choices for Oral Sex

Sucking someone’s cock without a condom is risky if your mouth has:

- Open sores
- Recent dental work or injury to the mouth
- Recently brushed teeth or flossed gums

Oral Sex is also risky with:

- Swallowing cum
- Tongue to vagina/clitoris contact
- Rimming (licking and sucking someone’s asshole)

Remember other Sexually Transmitted Diseases may be contacted through oral sex. This is especially risky for someone with HIV.

The safer sex choice for oral sex? Use latex condoms or shields when sucking or licking someone’s cock, asshole, or vagina.

Making Choices Together

- Talking about safer sex with your partner(s) guarantees that we make choices that are right for us.
- Consider how drugs, alcohol and poppers may lead to bad decisions. Know your limits.
- Stay Informed. Find a doctor who knows about AIDS. You and your friends can learn more about safer sex by hosting a RubberWear party through the Man To Man program at AIDS Vancouver.
- If you already know about safer sex but feel guilty because you have unsafe sex, call AIDS Vancouver and ask about the Sexual Safety Support Group.

Together we can stop AIDS. We can make choices that will keep us all healthy.
Figure 2-5 "Pride" Man-to-Man's 1993 Summer Education Campaign
(Reprinted with permission)
Canada have modified their sexual practices considerably since (or because of) AIDS (Meyers et. al., 1993, p. 38). Figure 2-4 is taken from an AIDS Vancouver’s brochure. Along with Figures 2-5 it explicitly links the gay body to safe sex practices, visibility, and self-esteem. In these examples gay bodies are precisely not vectors for HIV’s diffusion, yet more distanced geographies fail to convey that inhibitive role for the gay body. By failing to relate spatial science’s social distance with the stigmatized context of the gay body, geographic discussion potentially perpetuates a discourse of threat and contagion. These examples are supplemented by the fact that during my interviews, gay men were forthright in labelling themselves as gay. Many even insisted I use their names explicitly. To them, confidentiality was a means of erasure. They were emphatic about being gay men who were involved in the fight against AIDS. They were reacting to representations like Figures 2-1 and 2-2 that portray gay men simply as a vector of illness. Through ethnography a very different geography of the gay body emerges. Even the importance of the fluidity of sexual categories we use to describe the body was also revealed to me through ethnographic interviews. Several Man-to-Man (the gay education arm of AIDS Vancouver) volunteers described the dangers in explicitly targeting education materials at "gay men". They had found that certain men who had sex with other men did not necessarily self identify as "gay". Consequently, offering them gay-oriented education materials would not work because these men rejected that label, yet still engaged in high-risk sex with other men. The Vancouver ethnography revealed a group of gay men committed to overcoming the educational obstacle that the stigmatized gay body presented. Here, the gay body also blocks the virus, but in a far more complex
way than spatial science could ever map.

b. gay spaces block HIV

As Figure 2-4 illustrates, innovative, culturally sensitive educational programs have been extensively deployed in (and by) the gay community. These practices are often intensely spatial: safe sex (or 'rubberwear') parties in the home, condom and literature distributions, media campaigns, and metropolitan hotlines. Safe sex education and materials were also ubiquitous at lesbian and gay events in Vancouver like the Stonewall Festival in June, or the Pride Parade in August. As well, there are several AIDS Vancouver Information Centres in Vancouver’s gay bars, bookstores, bathhouses, even restaurants (see figure 2-6). Thus, like the body, gay spaces do not merely exhibit the diffusion of HIV, but also its blocking. Figures 2-5 through 2-7 are frequent images across Vancouver’s gay neighborhoods. They are part of Man-to-Man’s annual safe sex campaigns. These public images link gay bodies and space by stressing their role in preventing the spread of HIV. Consequently, these figures potentially better control the spread of the virus than figures 2-1 and 2-2, the representations of spatial science. Here, ethnography shows that there are significant diffusions within a place, aside from viral transmissions, that are part of 'the geography of AIDS'. Again, these diffusions are so important because they block the spread of HIV.

Ethnographic interviews also revealed the diffusion of information and resources that link Vancouver to other places. Because of the rapid onset of the crisis just after the emergence in the 1970s of gay subcultures and neighbourhoods, there were few historical resources to cope with AIDS (Crimp, 1992b; Kramer, 1989; Shilts, 1987). Most
Figure 2-6 AIDS Vancouver Info Centre,
Stairwell of Little Sister's Bookshop,
West End, Vancouver
Figure 2-7 AIDS Vancouver affiliates march in the 1994 Lesbian and Gay Pride Parade, West End, Vancouver
responses were fashioned from scratch. Consequently, information networks and exchanges quickly developed between and within locales. Places become linked together not simply by HIV's diffusion but also by information and resources. These connections are made in various ways. Vancouver is a source of information and materials for many rural communities across British Columbia. Members of ACT UP Vancouver attended the San Francisco and Montreal International AIDS Conferences to aid local protesters (the former in violation of U.S. immigration law). The relatively easy access to AZT in Canada created informal smuggling routes down to the U.S. These spatial connections represent links within the international and intranational gay communities, as well as other affected communities. They demand that there is more to the geography of AIDS than the virus' diffusion. Connections can also span and link identities and struggles as they connect places globally. John Gates (1992, p. 4), a keynote speaker at the 1992 Canadian AIDS Society's general meeting, made this point poignantly:

"My proposal is this: we have over the last ten years lobbied successfully for the early release of drugs. Tonight I'm asking you to change tactics and reverse that process. I am asking that people living with AIDS and with HIV and their organizations call on governments and multinational organizations to delay the release of any new vaccine or cure for AIDS until three conditions can be met: that the drug or vaccine be affordable worldwide, that it be accessible worldwide, and that it be available worldwide. Without these conditions being met, we would make it clear that we would not be in favour of the release of those drugs or vaccines."²


So far I have shown how ethnographic proximity reveals other diffusions that would significantly affect spatial science's narratives. Ethnographic proximity also
stresses the horrific impacts of HIV on people and their places. The scientific vision employed by geographers surely fails to capture and convey—hence they misrepresent—the pain, suffering, and struggles that have certainly altered places where AIDS has struck (cf. Kuklin 1989). Reflect on the alternate, almost claustrophobic geography one gay man sketched, as his anger at people’s social distancing of gays’ experience with AIDS came through:

"The whole thing is a sort of smouldering power keg of people who are just so angry at having lost. You know, you’re not just talking about losing one friend. You’re talking about losing dozens. Here in Vancouver, in the West End, there’s nobody I could meet that doesn’t know somebody who’s got it or who hasn’t had somebody die of it. Everybody’s been touched by this thing. And it’s a Goddamn nightmare that people want to run away from, but there’s nowhere to run!"

This narrative portrays an urban neighborhood that has been irrevocably changed because of AIDS and the responses of gay men to it. It insists that there are alternate geographies of AIDS to tell, beyond the travels of a virus, which—after over a decade—geographers have yet to discuss.

A final example of the significant implications ethnographic research has for the geographies of AIDS: while volunteering at the Vancouver display of the Canadian NAMES Project AIDS Memorial Quilt in May of 1993, I heard the name of the man quoted directly above being read out, indicating that he had died. He was quite sick when I had interviewed him the previous summer; a nurse hastily arranged our meeting because she did not think he would live much longer. His was a rich and candid interview. His work in the local response to AIDS was often quiet and behind the scenes, yet it had considerable efficacy. He was the first person to die from my roster of informants. In December of 1993, one other interviewee died; no doubt more will
follow. As data points on the figures that opened this paper, these two people will always reveal a geography. Without ethnography, however, the other geographies they helped construct are lost.

V. Rectifications

While my research agenda is primarily a conversation with political theory and urban politics, it is also a necessary challenge to the way geographers have framed and studied the AIDS crisis to date. Guided by an epidemiological model, geographers have been acutely interested in the diffusion of HIV and mapping AIDS cases at a variety of spatial scales across the globe. The resulting geographies, however, occlude an understanding to the responses to AIDS and HIV in places irrevocably changed by the plague. Spatial science has focused nearly exclusively on the virus’ travels across space, rather than the social and political restructurings consequent to that diffusion. Gay men and their relations, who have been primarily (though hardly exclusively!) affected by AIDS in North America, are reduced down to a-social vectors and biological hosts, exacerbating an already scientific critique of the gay body and geographer’s lack of knowledge about gay spaces in general. Geographies of AIDS to date, have therefore missed the ways that the gay body blocks the spread of AIDS, and the way gay space has been transformed by that process. Clearly a more social- and political- geography of the local responses to AIDS is needed.

This chapter has introduced the motivations for recasting the geography of AIDS as an exploration of citizenship. Without this reorientation, the power of science to frame AIDS as principally, ultimately, or especially a medical phenomenon draws our
interest in certain directions and not others (Latour, 1987), since it refuses the social
collection of the gay body, and the responses to AIDS by that body and the spaces it
inhabits. That body becomes interesting as a nodal point in HIV's spatial diffusion rather
than as a nodal point in social relations through which struggles of rights, duties, and
membership in political community are waged— the same is true of spaces. The
consequence is that those struggles—citizenship—are never revealed because we are guided
away from them by spatial science. Ironically, that erasure is what citizens struggle
against: the denial of rights, the lack of others' obligations, and their exclusion from
political community.
Chapter 3
Radical Citizenship In Civil Society?
The Curious Case of ACT UP Vancouver

I. Radical Citizenship in Civil Society

With the advent of new social movements, civil society has become recognized by scholars as a new site of politics (e.g. Castells, 1983; Offe, 1985). Refocusing scholars' attention away from state-centered politics, the concept captures the public sphere of private individuals engaged in voluntary association. Spaces of civil society, Mouffe would argue, hold a potential for radical democratic citizenship; civil society is, according to her, a "new space" of radical democratic citizenship. During the AIDS crisis, the AIDS Coalition to Unleash Power, or ACT UP, has been touted as the most radical organization dedicated to social change because of its penchant for disruptive public acts of civil disobedience, so much so that when I began my research in January of 1992, the first organization I contacted in Vancouver was ACT UP. Years previously I had heard about its demonstrations in the local media. And while I knew that it scheduled monthly meetings at the Gay and Lesbian Centre in the West End, I had not heard of any recent ACT UP actions in Vancouver. Nonetheless, I began my research with ACT UP Vancouver because it seemed to be precisely the form (radically democratic) and location (in civil society) of radical democracy that Mouffe was charting.

1 While Castells (1983) has written exhaustively on urban social movements, I have not taken up his work explicitly in this research. Castells was attempting to escape the economic determinism of structural Marxism, yet he did not have the poststructural vocabulary in the early 1980s to completely break out of that framework. I find his tendency to view urban politics as a process of consumption and social movements as struggles over spatial meaning to be limiting.
After 120 interviews, however, my first interviewee remained the only person who acknowledged membership in ACT UP. Other members had either died, left the city, or were no longer politically active.\(^2\) There never was another ACT UP demonstration during my two years of fieldwork, and the lone ACT UP member himself hinted at the folding of the organization during my very first interview:

"I don’t know what the problem is these days. ACT UP is going through a difficult period where we aren’t getting the people turning up. I think actually that ACT UP could be folding on a certain level. It just might not be necessary right now."

This activist’s suspicions about ACT UP Vancouver’s necessity were reiterated across my interviews with other people involved in AIDS politics across the city. The emerging theme was that ACT UP Vancouver had been only modestly successful at focusing public attention on the Social Credit government’s neglect of AIDS issues. Voluntary sector groups that were incorporated into the state apparatus were more effective in getting the needs of people living with AIDS met (see Chapter 4).

How are we to understand the failures (and success) of ACT UP Vancouver in the context of a quest for ‘new spaces’ of radical citizenship? In a site where theoretically we precisely ought to expect transformative politics, the familiar form of civil disobedience and media spectacle proved ineffective. The simple answer to this query is that ACT UP failed in Vancouver because Canadian cities lack a civil disobedience tradition more salient in American cities. Indeed, as I illustrate below, many locals drew on imagery of Canadians’ political quiescence in explaining ACT UP’s failures. But the

\(^2\)Since I used a network sampling strategy in collecting oral histories, members of ACT UP were made aware of my study. None of them who remained in the city came forward for an interview.
case also raises theoretical questions beyond issues of radical democracy’s empirical
generalizability. While ACT UP movements incorporate the elements of radical
democratic citizenship (which I detail below), its failure in Vancouver highlights the
need to understand the structuration between citizenship and space. ACT UP Vancouver
partially failed because it misunderstood and misrepresented the shifting, increasingly
overlapping relations between state and civil society that were already ongoing in
Vancouver. That misunderstanding of spatial arrangements (between locations associated
with civil society and the state) also explains ACT UP Vancouver’s failure. Unlike
Mouffe’s spatial metaphors, in Vancouver there was no "pure" space of state or civil
society, making ACT UP’s oppositional stance in civil society seem oddly out of place.
This chapter argues that such a misunderstanding demonstrates how fixed and static
notions of space in a radical theory of citizenship fail to capture the ongoing shifts
between actual spaces of state and civil society.

II. ACT UP as radical democratic citizenship

ACT UP seemed to exemplify Mouffe’s notion of citizenship in at least four ways.
Foremost, ACT UP has become so well known for its alternative, and transgressive
approach to the political (Berkart and Freeman, 1993; Crimp, 1993; Kramer, 1989;
Geltmaker, 1992). ACT UP’s premiere chapter, in New York, began on March 10, 1987,
out of a speech given at the Gay and Lesbian Community Center by noted gay activist
and playwright Larry Kramer.3 It was part of a stinging critique of the political
quiescence in the AIDS community. He noted the lack of progress in drug availability,

3 A transcript of the speech can be found in (Kramer, 1989, pp. 127-139).
the profit-mongering of drug companies, and the weakness and bureaucratization of
GMHC. Two days after the meeting, ACT UP was formed—specifically with the
mandate to accelerate drug release in the U.S. Its mandate quickly broadened, as did its
chapters. Its official definition is, "a diverse, nonpartisan group united in anger and
committed to direct action to end the AIDS crisis," (Crimp and Rolston, 1990, p.13).
ACT UP provided a radicalizing opportunity for many who joined. Kramer's invectives
were often directed at the political apathy of gay men. He insisted they must rethink the
hegemony around AIDS. Rather than ignoring it or viewing it as a punishment, they
must see it as an attack on the very existence of gay men. Crimp and Rolston (1990, p.
22) specifically state that it is committed to 'radical democratic change'. ACT UP does
not seek to 'change the system from within', but rather attacks the very assumptions and
premises that underlie the practices of actually-existing relations of democracy and
capitalism (Callen, Grover, and Maggenti, 1991; Olander, 1991; Saalfield and Navarro,

Second, like Mouffe's notion of citizenship, its goal is to challenge existing
hegemonies around AIDS. ACT UP has striven to provide a counter-hegemony to the
social understanding of AIDS. For instance, one ACT UP New York member described
how this oppositional discourse inspired her towards civil disobedience against the
Catholic Church because of its clear logic:

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4 Chapters have been formed in (inter alia): Atlanta, Boston, Chicago, Cleveland, Dallas,
Denver, Halifax, Kansas City, London, Los Angeles, Milwaukee, Montreal, New Orleans,
Paris, Philadelphia, Portland ME, San Francisco (also Golden Gate), Seattle, St. Louis,
Toronto, and Washington. See (Sword, 1991; Crimp and Rolston, 1991; Rayside and
Lindquist, 1992; Chew, 1993).
"And Cardinal O'Connor, especially at that time, was telling the general public that monogamy would protect them from HIV infection and that condoms didn't work. As far as I was concerned, those were both major lies. And while people were certainly entitled to make their own decisions about their lives--and far be it from me to tell them what to do--I would not sit by silently while they were being lied to. So when the group decided to target St. Patrick's, it just made absolute perfect sense to because it is an extremely important target in this epidemic." (Northrop, 1992, pp. 484-485)

Similarly, Gamson (1991) has centred the coalition's purpose on the creation of an alternate way of seeing AIDS: one that uses spectacle to resist media, bureaucratic, and scientific tropes that normalize AIDS (see also S J Gould, 1991). It on these grounds that theatrical and cultural activism is used so fervently by ACT UP, in order to displace meanings. The media are thus manipulated explicitly by ACT UP for their attraction to spectacle (Browning, 1993).

Thirdly, ACT UP is committed to radical democratic principles (Gamson, 1991; Northrop, 1992). There tends to be no hierarchy in decisionmaking. As well, the chapters are notoriously lacking any formal organizational structure. The coalition in Vancouver, for instance, operated primarily through a telephone tree of 80 people, any of whom could call a meeting if they thought an action was warranted. There are no formal membership requirements; anyone can attend ACT UP meetings, or participate in their rallies. People participate to varying extents. No one is obliged to perform acts of civil disobedience at any given demonstration. Modes of actions are decided upon by consensus. Fervent discussion and debate are the rules at ACT UP meetings. ACT UP also tries to suture alternate struggles around AIDS, a key component for the radical

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5 An ACT UP Seattle member noted that law enforcement officials were not denied access to meetings; they were, however, asked to identify themselves as such.
democratic project. For instance, in 1991, ACT UP Seattle used that city’s Space Needle as a demonstration site to demand a needle exchange program. The ignorance around women and AIDS has also been a key target for ACT UP campaigns (Banzhat, 1990). The group strives to suture social struggles in order to create a new hegemony. Many sympathetic critics have derided ACT UP’s failure to link AIDS struggles across identities more successfully or thoroughly (Crimp, 1993 p. 315-16; Gamson, 1991).

Nonetheless, Russo (1992, p. 415) has been more forgiving in his oral history:

"This is a new kind of activism. It’s a coalition that we were never able to achieve in the 1970’s. Back then the ideal and the dream were that gay people would come together with other oppressed groups like blacks and Asians and women to form a coalition. That didn’t happen because we had too many differences. Lesbians were fighting with gay men, the black community didn’t want to admit that was a gay community in their midst and blah, blah, blah. Now AIDS has brought us together in ways that we could not have foreseen. ACT UP is composed of gay people and straight people, women and men, black and white. And all these people have one thing in common: They want to put an end to the AIDS crisis by any means possible."

Finally, ACT UP works at these aims decidedly in the venue of civil society. Typically, actions are highly theatrical disruptions of public spaces.\(^6\) Thus ACT UP, as Berkart and Freeman (1993, p. 224) praise, take on heretofore hegemonic spaces of meaning. The will to disrupt hegemony draws a strong parallel with the Situationist International Movement of the 1960s (Ball, 1987). ACT UP spatially hijacks cultural codes (around AIDS, disease, welfare, and sexuality) with irony and places them into heavily coded, unfamiliar contexts.\(^7\) So, for instance, dozens of couples kissing in

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\(^6\) Sorkin (1992) would argue that this usurpation is appropriate given the theatricalized spaces of late 20th century cities.

\(^7\) The situationists referred to this process as detournement.
public becomes transgressive when it is done by same-sex couples insisting on accurate safe sex education. Both rely heavily on what Kaplan and Ross (1987, p. 24) call "acts of cultural sabotage" that critique mainstream society; Gamson has said ACT UP (p. 35) "trespassed the bounds of good taste". Both have taken symbols used to oppress and subverted their meanings. In addition to the graphics, acts of civil disobedience and spectacle confront "heterosexed" space (Valentine, 1993) with gay and lesbian realities: alternate sexualities exist, and they exist in a context of an epidemic that has been killing gay men. ACT UP’s affrontive, provocative graphics (in New York, these are designed primarily by the artist group Gran Fury) target a wide array of issues and public figures, which ACT UP argues, block progress against AIDS. (See for instance, ACT UP New York’s 'Target City Hall' campaign of March, 1989.) Gran Fury’s advertisement was part of its 'New York Crimes' attack on the New York Times for its downplaying and ignorance of AIDS. ACT UP’s 'Stop the Church’ campaign in 1989, aimed at Cardinal O’Connor’s persistent attempts at blocking AIDS education and prevention materials in the New York public school system.

ACT UP’s most well-known actions illustrate the use of civil society to disrupt hegemony radically. A banner reading "Sell Wellcome" was unfurled by activists posing as bond traders, actually interrupting the global shifts of capital on the floor of the New York Stock Exchange for a full five minutes on September 14, 1989, to protest the profits made by the drug company on AZT. Several months earlier, on April 25, 1989, Burroughs Wellcome’s headquarters in North Carolina were infiltrated by four ACT UP members, dressed as businessmen, who talked their way past security points and sealed
themselves in the building, demanding the reduction of AZT’s price, which it eventually won. ACT UP demonstrations appropriated locations in civil society—confronting strangers deliberately—in order to make the AIDS crisis visible to them, to press rights claims and to demand some forms of political obligation on the part of fellow citizens’.

Indeed, Gamson’s (1991, p. 38) insistence that ACT UP be sociologically defined as a ’new social movement’ hinges exactly on Offe’s (1985) definition of the term: a group whose politics occur within civil society. Here, Laclau and Mouffe’s argument that we must look beyond typical locations in the welfare state as sites of politics is substantiated.

III. ACT UP Vancouver origins

While ACT UP itself did not officially form until July of 1990, its disruptive tactics were employed by activists at least three years earlier. According to its lone member, ACT UP Vancouver replaced a vague organization known as the Coalition for Responsible Health Care (CoRHL), which was formed specifically to combat Bill 34, the so-called ’Quarantine bill’ that grants sweeping powers to the state to confine people suspected of transmitting HIV. CoRHL drew heavily from the Vancouver Persons With AIDS Coalition (which later became a formal non-profit society), that had recently broken away from AIDS Vancouver to be ’more political’ in 1986. CoRHL also lobbied Victoria for an anti-viral testing lab in March of 1986, and protested at a Socred fundraiser at the Queen Elizabeth Theatre in downtown Vancouver on December 3, 1987 (Flather, 1987). Vancouver activists joined in the ACT UP protests held at the International AIDS Conference in Montreal in June of 1989. My lone ACT UP
informant recalled the assault with pride:

"I have this flag from the Republic of China here. The '89 Montreal AIDS Conference opened on June third. And it was a surprise that we did make international news given that Tiananmen Square happened that day. The flags of all the nations were on the podium and I was quite incensed that they would have the People's Republic flag up after this massacre had occurred. So I stole it. Right under the gaze of Mulroney. That conference was disrupted by members of ACT UP. We delayed his speech for like an hour and a half. He was quite disturbed by the time he finally did speak. It was a coalition of groups: individual activists as well as ACT UP New York, ACT UP Montreal, and Toronto organizations."

In early September of 1989, AIDS activists targeted Premier Vander Zalm, holding an elaborate protest at Fantasy Gardens theme park in Richmond (an inner suburb), which the Premier and his wife owned. There were die-ins held, mock graves and coffins with tombstones reading, "He Died On A Placebo Study" and "I Died In Poverty Paying For AZT". Protesters picketed the park, which was at the time sponsoring a fundraiser for the Lions Club Timmy Telethon, with signs reading, "HIV Is NOT a Gay Disease" and "Homophobia is a Sickness". Not surprisingly, there were many members of the PWA Society on hand. Indeed, a PWA spokesperson was quoted in The Vancouver Sun's story on the Fantasy-AIDS Rally (Rebalski, 1989, p. D-12).

With the notoriety of groups in the U.S., and with the increasing conservativism of the PWA Society because of state funding, an ACT UP group officially coalesced almost a year later (see Wilson, 1990, p.A-8 for a discussion). On July 21, 1990, ACT UP Vancouver officially formed (Shariff, 1990). The group's first meeting attracted 35 people, most between the ages of 18-25, and was spearheaded by a gay lawyer, Kevin Robb, and David Lewis, an outspoken, former leader of the PWA Society. At the meeting, the chapter was officially designated, and a mission statement was drafted. In
"We demonstrate and protest; we challenge and demand governments and health institutions take positive action; we research, act on, and make available the latest medical information." (quoted in Buttle, 1990, p.A-17).

Apparently there were people there from across the different AIDS groups in the city.

One former AIDS Vancouver employee recalls the meeting, stressing the tensions between social action and civil society and personal employment in the state apparatus:

"I was at the meeting that David Lewis called. He called a meeting of people that would be interested in the formation of ACT UP. That would have been four or five [weeks] before he died. That would have been the summer of 1990. And we had it in the back yard at his place. It was quite interesting, you know. This would have been before the ["Les Miserables"] episode. I was working at AIDS Vancouver at the time. So a co-worker and I went to this thing. We were curious and had heard about ACT UP and read about ACT UP and seen things in the media and so on. And thought, well maybe this is something we can be involved with. But we were sort of walking a fine line because we were also employees of AIDS Vancouver. And so we have to be careful about— you know we were really caught between a rock and a hard place at that point because some things that would reflect negatively on the organization."

ACT UP Vancouver's first official action attracted media attention across Canada. 150 people held a die-in during rush hour at Robson Square (see Figure 1-5) less than a month after the group's inception (Wilson, 1990, p. A-1). At a Sored fundraiser (ironically a performance of "Les Miserables") at the Queen Elizabeth Theatre on August 24, 1990, Premier Vander Zalm was spat on, and his wife Lillian knocked to the ground by ACT UP protesters ("AIDS protesters..", 1990). Five protesters were arrested and later released.

After the confrontational summer of 1990, however, ACT UP began to wane on Vancouver's political scene. The only recorded action of that year took place in December, when ACT UP occupied then Provincial Health Minister John Jansen's
Vancouver office to demand British Columbia provide better AIDS services and funding ("Seven AIDS Protesters Arrested", 1990, p. A-2). By 1991, the group had only three press-recorded actions. In the most notable one, on January 29, an ACT UP member was arrested for allegedly spilling ketchup on and denting Premier Vander Zalm’s limousine in front of the U-TV television studio, where he was scheduled to give the State-of-the-Province address. A moving die-in was held along Vancouver’s upscale-retail Robson Street during AIDS Awareness week in October. Another "0" was added by ACT UP to the city’s centennial monument, a cement "100" at the south foot of the Cambie Street Bridge at West 6th Ave, denoting the 1,000th case of AIDS in B.C. It then took its demands to Progressive Conservative MP Kim Campbell’s local office (Buttle, 1991). By early 1992, its bi-monthly meetings at the Gay and Lesbian Centre were drawing no one. ACT UP never held another media event afterwards.

ACT UP Vancouver’s purpose was always to attack the Socreds, taking a much narrower tack than some of its counterpart chapters elsewhere. Providing information about drugs remained the mandate of the Persons With AIDS Society’s Treatments Committee. Lobbying was done by PWA’s Advocacy Committee, or occasionally by Intake Department at AIDS Vancouver. This left ACT UP only staging protests, specifically against the provincial government. As the ACT UP member put it explicitly:

"In ACT UP’s history most of the actions have been taken against the provincial government because of, well, who they were: the Socreds, who had ignored AIDS."

"I feel that ACT UP Vancouver was a localized response to what was happening here. We were dealing with the Social Credit government. There was Bill 34. I mean, we were dealing with local issues."

Evidence from Vancouver fuelled my expectations that ACT UP was an accurate
expression of radical citizenship, primarily because of its geography. Seven out of nine recorded demonstrations in Vancouver took place in spaces of civil society (see Figure 3-1). While all were directed against the provincial government, only two took place at state-defined sites. Moreover, none of these spaces lay inside the gay community (the West End, Yaletown, etc.); instead, they were in visible yet neutral spaces, especially concentrated in the downtown core. Thus when ACT UP directed action against the state (i.e. the Socreds), it did so in spaces of civil society, for example in front of the Queen Elizabeth Theatre, or during lunchtime at Robson Square (a concrete open space right in the heart of Vancouver’s busy downtown retail and office district). If the state was ACT UP Vancouver’s target, civil society was its audience.

What are we to make of this geography? One might argue that ACT UP was attempting to educate the public. Yet that function was already being carried out quite effectively by AIDS Vancouver. Alternately, one might suggest that ACT UP Vancouver was fighting for the rights of persons living with AIDS. But, as noted above, the Vancouver Persons With AIDS Society (PWA) had already been doing this with considerable success. One might then suggest that ACT UP was voicing a dissatisfaction with AIDS Vancouver or PWA, but again, these organizations were never criticized, nor was St. Paul’s Hospital or other local agencies. The state, however, was always ACT UP’s target. The theoretical point I would draw from this narrative is that ACT UP’s strategy was premised on a distinction between civil society and the state, which was expressed geographically. The state was rarely engaged on its own turf; rather it was challenged in disruptive public spectacles. I demonstrate this point below by discussing
Figure 3-1 Map of ACT UP Vancouver Protests
Across State and Civil Society

- State
  5. Health Minister's Office
  8. MP's Office

- Civil Society
  1,4 Q.E. Theater
  2. Fantasy Gardens (off map)
  3. Robson Square
  6. U-TV Studio
  7. Retail Strip
  9. Monument
how the presumed distinction between state and civil society worked through ACT UP’s (limited) successes and its (broader) failures.

b. why ACT UP worked

i. anger

Perhaps the most effective function ACT UP served was as a very public outlet for people’s anger, directed against the virus and the Socsreds, enemies to be sure. Civil society (as a space) enabled ACT UP members to vent publicly their enormous anger over the amount of death and government inaction vis-a-vis AIDS (see Kubler-Ross, 1970 on this point). That function of public spaces helps explain the location of protest within civil society, rather than in more state-centered sites. By drawing the attention of fellow citizens in public spaces of Robson Square, ACT UP Vancouver allowed for a very public, cathartic exercise of activists’ anger over the tremendous losses they suffered, as well as the broader context of homophobia and indifference. At several points, Kramer’s tirade above was substantiated in Vancouver. One local writer’s description of the group in a local paper defined the group precisely by its anger:

"To join ACT UP, you don’t have to be gay or have HIV (the virus widely believed to cause AIDS). You just have to be angry-- full of bilious rage in fact-- about the government’s response to the AIDS epidemic, and be ready for countless bouts of civil disobedience...." (Shariff, 1990, p. A-11)

One of the founders of ACT UP here, recalling his participation at a demonstration, illustrated ACT UP’s angry release of emotion:

"Nothing else has worked. We’ve been dealing with this for ten years and people are still dying."

"What goes on in the backs of the minds (of protesters) is the face of a friend we have lost. That’s what happened to me-- it was a peaceful demonstration until I saw those
smug Socreds. Then I saw Billy’s (Vander Zalm’s) face and I saw black." (Buttle, 1990, p. A-17)

Several people were quite critical of ACT UP’s tactics, but acknowledged its need as an emotional outlet given the context of Socred indifference:

"And I’ve never been interested in the politics. It’s just hot air. … I mean, knocking down the Premier’s wife and spitting on the Premier and so on. Well, they both deserve to be strung up. My fantasy would be to see Bill and Lillian strapped to the windmill, spinning around. But we can’t all have our fantasy. But, I mean, that doesn’t play well."

One man living with AIDS tried to describe the context of anger in his life at the fate of having a terminal illness:

"Sometimes you can get very frustrated and very angry. You’ve got to be able to let that out. It’s always been very difficult to explain to people that this is a very high-stress lifestyle. You cannot walk away from it. If [an HIV-negative person] starts to get burned out, you go take a vacation and sit on a beach. I can’t do that! No matter where I go, or whatever, I have this thing and, you know, it’s the first thing I think of in the morning and the last thing I think of at night. And I’m immersed in it. Constantly."  

Later, he was more specific about how ACT UP serves as a tactic to vent the incredible anger people feel around AIDS:

"It also serves as an outlet for those people who have gone beyond anger- who are not just frustrated, who are not just irritated. These people are damn Goddamn angry!"

It is important to recall that by the summer of 1990, when ACT UP Vancouver exploded onto the local scene, Bill 34 had been passed (it remains on the books to this day), and British Columbia remained the only province in Canada not to fully reimburse people for AZT (Baldrey, 1988). These policies, combined with the callous public remarks made by

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8 Fantasy Gardens houses a replica of a windmill, evoking Premier Vander Zalm’s Dutch heritage.

9 This person died in 1992.
Social Credit ministers a year before, and the government’s ongoing neglect of AIDS go some distance in explaining the anger some activists felt, beyond coping with the disease itself.

If ACT UP successfully vented anger we begin to see the importance of the distinction between state and civil society that ACT UP Vancouver presumed. Recall that, for instance, many members of ACT UP were also involved in the Vancouver Persons With AIDS Society (PWA) or AIDS Vancouver. Yet because of the emerging links between these community organizations and the state, they could not "be political"; they could not as The PWA Society express anger with the Socreds. Once it began to receive state funding the society had to remain careful not to engage in political activities. Indeed, it began to work with the state to augment services, quietly and outside the public space of civil society. The importance of this apolitical stance cannot be over-emphasized, as it is a persistent concern throughout the Society. As ACT UP was distinctly located within civil society individual PWA members (and their allies) under the guise of "ACT UP", however, could angrily agitate the state to press for better funding and services without jeopardizing PWA’s state funding. Here we see how Mouffe’s quest for a de-centered subjectivity amongst radical citizens is enabled by "new spaces" of politics. In this way, ACT UP broadened the tactics employed in citizenship across

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10 It was especially pertinent in the summer that ACT UP Vancouver formed, since one of the founding members of ACT UP (and a former director of the PWA Society) announced that he would kill himself in late August. His death coincided with an ACT UP demonstration, in fact (see Kines, 1990). His suicide created an acute and very political problem for PWA, since it was feared that his action would be interpreted as the Society’s condoning of euthanasia. In other words, fear hinged on the confusion over whether he was acting as an individual or as a member of PWA.
AIDS issues in Vancouver. An executive director at AIDS Vancouver explained:

"I would say that probably AIDS organizations don’t feel that they are completely represented by ACT UP either. That said, I think that that kind of activism is very important. And it’s not necessarily something that AIDS Vancouver, as an organization, might get involved in. But I think it’s important that there be that, sort of, radical-activist element out there to rattle-rouse. I mean, I think it’s very important because it makes it easier for us (as a mainstream group) to then develop our programs because people are concerned. People are scared of ACT UP. It’s quite ironic. I’m not scared by them And I really understand why that organization needs to exist. And, I mean, we all know each other. It’s not that big a group of people that you don’t know each other."

In the press, another former director at AIDS Vancouver was very careful to distance his organization from ACT UP:

"AIDS Vancouver completely understands the frustrations and the anger that was expressed (at the Socred protest). We welcome an organization that gives vent to those feelings of frustration and anger. Beyond that, we'll take a look at each political action they take." (Buttle, 1990, p. A-17)

The member of ACT UP, who was also a member of the PWA Society reiterated the theme that ACT UP could take the radical position that incorporated local ASO's could not:

"We already had groups like AIDS Vancouver and PWA Society. At that stage, PWA could not take drastic actions because of their funding. They would feel repercussions. Their aims are to meet the needs of the infected. And that’s what they have been doing. I mean they’ve been working very hard. They can go to the proper agency or department and request that needs be met, although they can’t demand them. ACT UP can demand them. And it’s obvious that if PWA isn’t going to be listened to, the next stop will be an AIDS activist organization taking that responsibility on. That means that there is a position for ACT UP to take a more radical stand. I mean, most people you talk to individually at AV or PWA will agree that there’s a place for us: when, you know, polite gladhanding doesn’t work any more then there is a need to take action. We’re all working on the same issues. I think the institutions see this relationship existing. If they’re not going to deal with PWA on a polite level, right, actually sitting across the table and discussing issues and having those needs met that way, then I think they recognize that there will be activism because the needs still exist and if they’re not dealt
with, then there's only one option we have."¹¹

ii. ACT UP Vancouver as a disciplinary force

A second theme underscoring the utility of ACT UP also highlights the significance of the presumed state-civil society distinction on which the group hinged. It was used as a potential, immanent threat against the state or medical authority, from the gay community— even when the actual local chapter had no efficacy! ACT UP was credited for its ability to bring important ethical and moral issues to civil society in a very public and immediate way. That threat, it seemed, could be enough to challenge the medical authority around HIV and AIDS. The man quoted above also explained the need for ACT UP by the utility of its potential threat:

"It's like having the IRA on your doorstep. If somebody gives us a hard time and we're not getting through by talking, then we sic ACT UP on them."

Here, it seems, ACT UP Vancouver's cultural capital in civil society is emphasized. Located within civil society, with strong roots in the gay community, ACT UP could be used to threaten the state apparatus without the fear of hurting existing funding or service delivery arrangements. ACT UP signalled that it could strike at any time, should some future injustice warrant retaliation. One HIV positive person who dealt with St. Paul's hospital often recalled an instance where the threat of ACT UP was enough to change a hospital policy¹² almost immediately:

"And they have to listen to us. An example: the hospital board of directors was being a

¹¹This person died in August of 1994.

¹²The interviewee did not specify the policy in question. He merely indicated that the issue was resolved with the threat of demonstration.
bunch of jerks, so ACT UP had said that they were considering picketing the individual doctors— not only at the hospital but at their homes. Well, they freaked out all over the place. The knee-jerk response reaction was to say that if that happens they wouldn’t treat any more AIDS patients. And I went and saw them and said, ’Guys, you are living on the edge of a gay ghetto! There are gay people stacked up one on the other in this neighborhood. You want to do a scene from Frankenstein where you’re in the castle and the mob’s out front? You’re going to tell these people that you’re not going to deal with their brothers and sisters? Don’t be a Goddamn bunch of assholes!’"

This role as a potential, immanent threat of escalating political force allowed ACT UP Vancouver to discipline institutions like the state and medical authority. Here ACT UP’s assumption of a clearcut distinction between state and civil society was crucial to its effectiveness. It enabled ACT UP to work as a disciplinary exercise of power in the local response to AIDS.

c. The Failures of ACT UP Vancouver

i. misunderstanding political culture

If ACT UP Vancouver’s successes were worked on an assumed state-civil society distinction, its failures can be directly tied to the fallacy of that assumption in the city. People involved in AIDS issues in the city argued that ACT UP’s demise could be traced to two broad and related factors: it did not fit the local political culture, and the Vancouver Persons With AIDS Society did a better job at advocating for AIDS issues. For instance, many members of the gay community saw ACT UP as no more than the AIDS front of the Gay and Lesbian Centre and Angles, which have been criticized by gays for being too left-wing and antagonistic than need be in Vancouver. Even the Vancouver media did not take to ACT UP the way it did in other cities. For instance, at least two of the demonstrations held in Vancouver were not reported locally, but instead in Toronto and Winnipeg papers (Wilson, 1990; "AIDS protesters…1990). Coverage of
ACT UP demonstrations remained sparse when written up in the local press. The city’s tabloid, known for its attraction to sensational media events, even chastized the group’s tactics as unproductive:

"The violence at the theatre was not justified and did nothing to elevate the AIDS cause the way a more reasoned and intelligent approach would. ACT UP should smarten up before it acts again." ("Acting stupid", 1990)

During my interviews the issue of political culture was described in a number of ways, at a variety of geographic scales, from the nation to western Canada to the city. Some people drew a strong national distinction, with Canada being described as a much more quiescent place than the U.S., where ACT UP originated. This alleged culture of complacency was often tied to the different structures of rights available in Canada, universal health care being paramount. The greater accessibility of drugs, for instance was noted even by ACT UP’s lone member, who offered the example of cross-border smuggling to illustrate plainly the political-cultural differences between the U.S. and Canada:

"There’s a glut of AZT in Vancouver. There’s a huge surplus of it. And there are a lot of individuals in the United States who are forced to pay for their AZT. So what’s happening is that it’s being shipped across the border from Canada illegally and being given to people who have made the decision to take it."

A more generous welfare-state combined with a political culture that allegedly lacks an activist flavor, meant that ACT UP was awkwardly transplanted from a U.S. model into a Canadian urban context. As one woman half-jokingly asserted:

"I mean, the relatively small role ACT UP played here: this is Canada! There’s your

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13 On measures of difference between the U.S. and Canada see (Goldberg and Mercer, 1986).
answer! There’s nothing else to say. [laughs] I’m being a little sarcastic."

"I mean, think of the Lion’s Gate Bridge. If that were New York, do you think people would politely braid one car at a time? They do that here! [In the states its] 'shoot out the tires! Me first!'"

Later, she acknowledged the limited, state-centered targets the Vancouver group could aim for, noting the availability of universal health care in Canada left Socratic homophobia as the only one:

"Other than getting rid of Vander Zalm, what would ACT UP here do? That was basically its moment. Basically here it was just people who wanted to be radical and copy what was happening in the States."

A member of the Advocacy committee at PWA also drew on the distinction in political cultures between the U.S. and Canada in his explanation for why ACT UP seemed so out of place in a Canadian context. He drew the distinction over the better protected private sphere for gays and lesbians in Canada. Being from Toronto originally, he also emphasized that ACT UP was especially out of place in Western Canada:

"There’s always been a sort of Canadian complacency, I think. You know, when Trudeau uttered those historic words about the government having no rights in the bedrooms of the nation, or whatever. Everybody took it to mean-- and incorrectly so-- that in Canada it’s legal to be gay. Well, it is slowly in that all the old laws have been repealed. But there’s always been this complacency in this country for most people. They haven’t had to get out there and fight. ... I think the problem with ACT UP here was that they tried to use the same strategies that had been used in other places, and while it’s appropriate in New York for everyone to chain themselves to some building, or in Washington, or go to the Center for Disease Control in Atlanta and pour red paint over everything, it’s appropriate there, but it isn’t here, in Canada, especially in the West it’s not. That’s not how you do things."

Another member of the PWA Advocacy committee concurred:

"ACT UP, well it doesn’t exist. There is an ACT UP Vancouver, but there is a completely different political dynamic in Canada than in the United States. I don’t believe ACT UP ever had been or ever will be successful in Canada because Canadians find that type of political activism to be 'not appropriate'. And this sort of extends to
how you lobby in Canada, which is entirely different than in the United States. Canadians do not generally like public outbursts or messy-type confrontations. And if they’re presented with that they tend to tune out the issue and the people involved. That’s why by and far environmental activism has not had the same effect in Canada as it has elsewhere. The same with ACT UP: it has not had the same effect. We have had demonstrations. We have had die-ins. We have had the appropriate stopping of political figures. And it has had little or no effect on the political dynamic of this country. British sensibilities sort of play a very big role in our structure of government. And in order or get to square one, you have to walk the walk, talk the talk, look the look, and as you walk across that threshold you may be incredibly radical. You may have an ACT UP heart, but to get to square one, you have to present yourself in an appropriate fashion to the political dynamo that you’re talking to. Once you’re there, you can effect change.”

Seeing the cultural politics in ACT UP, one reflective AIDS Vancouver volunteer stressed that AIDS events need to be safe and inclusive to affect significant change. He cited events like the annual Walk for AIDS, Dr. Peter’s CBC Diaries, or Joe Average’s local artwork as examples of cultural politics that have been successful because they do not use confrontational tactics. Hence he claimed that ACT UP Vancouver only served to alienate the public. Below he contrasts the success of other political-cultural events in the city with ACT UP’s failure by stressing how out of place it was. His comments anticipate my treatment of the Quilt as an (alternately) successful site of political engagement in civil society in Chapter 8.

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14 Dr. Peter Jepson-Young, (who died in November, 1992 at 35) held a weekly series of public education ‘diaries’ broadcast on the CBC evening news in British Columbia from 1990-1992 about his life with HIV and AIDS (see Gawthrop, 1994). Through his intensely personal and riveting segments, viewers could watch the progression of illnesses and his ability to cope with them. He received far more press than ACT UP ever did locally. See, for instance, (Wigwood, 1992b; Fraser, 1992; Easton, 1992; Parton, 1993). Joe Average is a popular Vancouver artist living with HIV, whose colorful paintings is locally associated with AIDS issues and charities. See (Smith, 1993b).

15 In fact, later on this respondent compared the cultural politics of the Quilt with ACT UP explicitly by saying, "You know what I think? I think the Quilt is the smartest piece of art
"Things like the Walk for AIDS, AIDS Awareness Week, Joe Average: they're a lot softer, basically [than ACT UP]. ... And I think that the Walk for AIDS is very effective, but it's also very generic. And they make a big deal of inviting the whole political spectrum, which I think is wise politically. But for more radical cultural institutions like ACT UP to be effective there has to be— you can't just impose ACT UP in Vancouver. For those kinds of organizations to be effective they have to grow out of a community that's already quite sophisticated and quite diverse, and quite politicized. I just don't think there's a whole lot of interest in radical analysis, or more fundamental analysis of power structures around gay issues in Vancouver."

As a tactic of resistance, ACT UP did not work because of its lack of fit with local political context of Vancouver, and Canada more generally, according to locals. This point was emphasised further by interviewees who would contrast ACT UP Vancouver with the Vancouver Persons With AIDS Society. Their point, discussed below, shows how ACT UP was out of step with the city's political structure, while PWA has come to articulate with it.

ii. Misunderstanding political structure

If ACT UP Vancouver failed to grasp the cultural sensibilities of civil society, it also misinterpreted and misrepresented the structural relations between civil society and the state. For example, recall from Chapter 1 that the provincial government was secretly funding AIDS Vancouver and the Persons With AIDS Society. In other words, by attacking the state from civil society, ACT UP failed to acknowledge the laundering arrangement the province had with the city, which was common knowledge in AIDS circles.

As well, ACT UP never seemed to acknowledge the quite effective advocacy work done by the Vancouver Persons With AIDS Society. By 1990, PWA had a large

that's ever happened."
membership and had developed successful programs and advocacy work with the
government and medical system, which had been effective. Several members of the
society stressed the overlap of function between the two groups, all the while favoring
PWA:

"ACT UP has not been the force of change in Vancouver. I mean, we used those kinds
of tactics for a while. We used to do demonstrations at Fantasy Gardens, and we'd
generate a lot of public opinion through the media. Certain people in our organization
have always been eloquent spokespeople, so we’ve always given those people that rein
for as long as the group was satisfied. But then you have the issue of accountable
representation. In some sense, PWA was ACT UP at that time, but we were everything
to everybody. We’ve been quite militant in the past."

Another PWA affiliate member drew the contrast between PWA and ACT UP as follows:

"To get back to the issue of ACT UP and the PWA Society, the activism is different here
between the two. I don't think that that's universally true. I don't think ACT UP here is
a movement. I think ACT UP came out of a number of very well intentioned people who
wanted to hit the streets more than it was prudent for the PWA Society to do at that
point. I think that's really laudable, and I'm not sure it won't resurface at some point.
But I think the particular group that got together...didn't know their stuff. ... And
whereas I think ACT UP in the states there's a very strong advocacy arm that stayed with
the Society in Vancouver, and it has never left the Society here. So without that strong,
fundamental base, ACT UP Vancouver just ended up being kind of demonstrations. I
mean, if you look at AIDS Action Now! in Toronto, for example, where AAN is a strong
force, AIDS Action Now is very much along the lines of advocacy that the Vancouver
PWA Society does—with more of an activist overtone. The Toronto PWA Foundation is
like the service arm of the PWA Society here. So the organizational structures are
different here."

Another member of PWA, noted that the society used to be radical, but has changed the
definition of radical by its very existence in the city:

"And the PWA Coalition [which preceded the Society] was a group of men who said,
'No! I'm not going to take your opinion and your bent on what's happening, because you
have no idea how it is to be me. I am a person with AIDS. I'm taking your drug. I'm
doing your treatment. And I have a right to the same things as every other Canadian,
even though I am a person with AIDS.' So that was what was radical; that was the thing
that started it all. And as the years progressed, those ideas didn't seem so radical
anymore. That was the difference. We have evolved beyond thinking that's so radical,
because things have changed in our medical system. Things have changed in our social services structure. And those are directly attributable to people with AIDS speaking up for their rights. So that’s how it was perceived by the gay community. But it hasn’t been anymore. That’s why you had ACT UP creating that thing here, thinking that PWA had become less political and less advocating."

These examples highlight ACT UP’s failure to grasp the shifting relations between state and civil society in Vancouver, evinced by shadow-state organizations like PWA.\(^{16}\) Instead, its relentless public attacks on the Socreds in spaces of civil society erroneously assumed a clear, structural distinction that highlighted civil society as the favored site for radical citizenship.

ACT UP’s efficacy in Vancouver was due to its capacity to vent anger in public, as well as to serve as a potential threat to powerful social institutions. Its failure was that it did refuse to grasp the changes in (shadow) state structure and culture that blurred the distinction between state and civil society. It could effect little actual change when contrasted with the shadow state. It also threatened to jeopardize the tenuous links that were being forged between the state and the voluntary sector. The Vancouver case suggests not only the significance of political and cultural context in locating new spaces of citizenship, but also for the static ways geographic terms like "state" and "civil society" are used uncritically in political theory.

IV. ACT UP Vancouver’s Implications for Poststructural Citizenship in Civil Society

\(^{16}\) Here again we see the importance in stressing Mouffe’s decentered subjectivity for citizens. Contradictory processes were going on that allowed some PWA members to see themselves as opposed to the state (especially drawing on PWA’s grassroots, gay-community heritage), while organizationally the society was moving towards a closer relation to the state. Members could thus position themselves in a number of ways. As well, bear in mind that individual PWA members would have varying levels of commitment and allegiance to the organization at any given time.
One might argue that ACT UP Vancouver was at least radical in that it refused to be incorporated. Unlike the city’s AIDS organization, it stayed squarely within civil society. Admittedly many members of the shadow state lament the increasing ties with the state in local AIDS organizations. Overall, though, I am not sympathetic to this critique because ACT UP failed to achieve any of the cultural or material gains made by the shadow state. We must be wary of committing exactly the error that Laclau and Mouffe try to resist: insisting on an a priori form or location for what counts as ‘radical citizenship’. As Laclau and Mouffe argue:

"This has led to a failure to understand the constant displacement of the nodal points structuring a social formation, and to an organization of discourse in terms of a logical of 'a priori privileged points’ which seriously limits the Left’s capacity for action and political analysis. This logic of privileged points has operated in a variety of different directions. From the point of view of the determining of fundamental antagonisms, the basic obstacle, as we have seen, has been classism…. From the point of view of social levels at which the possibility of implementing changes is concentrated, the fundamental obstacles have been statism-- the idea that the expansion of the role of the state is the panacea for all problems…. (Laclau and Mouffe, 1985, p. 177).

AIDS politics in Vancouver cannot be judged solely or primarily as exercises in theoretical consistency; they were about educating the public and meeting people’s needs in very immediate, tangible ways during a crisis. Thus one PWA Advocacy volunteer concedes:

"I know that PWA had to publicly distance itself from ACT UP out here. … It was when [ACT UP] was at the height of [its] disruptiveness, shall we say. And they had to distance themselves because people were starting to question PWA and our sponsor dollars were being affected by that. And in a way it was a bit of a sellout, but I think it was the correct sellout, because ACT UP had antagonized everybody."

We might further question ACT UP’s radical potential by its misplaced and exclusive focus on the state. Mohr (1993), for instance has recently argued that ACT UP
does not challenge the modern state, but actually worships its power and reproduces it, by demanding the state extend its responsibility through right claims. ACT UP Vancouver’s failure compared with the PWA Society’s success substantiates this point. It worked from the an anachronistic assumption that state action would solve or abate problems. One may counter that the state was not guaranteeing rights-claims that already existed; in other words, that there was no extension of rights being pressed by ACT UP Vancouver. Clearly, the state could have (and eventually did) do more around AIDS issues. However, because the provincial government was ACT UP’s only target, it failed in the context of a relatively effective shadow state that was providing (at least at some minimal level) the needs of people living with AIDS. In turn, ACT UP’s tactic led not to the augmentation of state services, but rather to increasing strains between the state and the local ASOs. A deputy minister of health under the Socreds recalled that ACT UP only served to alienate the Socreds further into indifference. Many ASO employees and volunteers acknowledged ACT UP’s utility as an outlet for anger, but wondered about the cost of its venting for already tenuous links between state and shadow state. Here again, ACT UP Vancouver’s misreading of the state-civil society distinction is significant.

V. Conclusions

ACT UP Vancouver clearly had a unique origin and trajectory, and imposing the radical successes of its chapters in other cities onto this local context is fraught with difficulties. But I think the more interesting point is a warning against poststructuralism’s tendency to hold state and civil society apart from each other, as it leaves the former to pinpoint the latter as a ‘new space of citizenship’. When we consider the geographies of
such (potentially) political locations, we find Mouffe’s characterization ironically static and fixed. In focusing more on the radically de-centered subject positions of citizens, Mouffe has essentialized the spaces where these new citizens can be found. In doing so she fails to take on board the implications of the restructurings of state and civil society that did enable a successful politics of AIDS (through the shadow state) to emerge.

Canel (1992, p. 37) has recently levied just such a criticism:

"Laclau and Mouffe... insist that every social conflict is political, as politics expand to civil society, but they fail to discuss the institutional aspects of politics, the relationship between new social movements and political parties through which the democratization of the state can be achieved. Such a separation between social movements and the political system can potentially contribute to a depoliticization of social movements. This is most ironic given that the purpose of the argument is to demonstrate the expansion of the political."

ACT UP Vancouver directed its actions against the state from civil society. Like Laclau and Mouffe, it presumed a rather clearcut distinction between state and civil society. Its failure to recognize that state and civil society overlapped in actual locations like PWA and AIDS Vancouver, however, limited its efficacy as a mode of radical citizenship.

ACT UP Vancouver was out of place because the division between state and civil society that it assumed had been remapped - both culturally and structurally - by a different political culture and an effective shadow state.

There is a theoretical lesson to be learned about the effects of political spaces on citizens’ struggles. Poststructuralism’s quest for new locations of political engagement should not blind us to changes in the way that ‘old’ and ‘new’ locations relate to each other, and in turn re-situate citizenship. Here, the geographic context of these sites becomes crucial to political theory’s often all too abstract spatial categories. ACT UP
Vancouver members assumed that the state was only located in places like figures 1-1 through 1-3, and that civil society was a pure position from which to attack the state. As the following chapter points out (and as many local commentators in this chapter indicate) there was considerable spatial overlap between these heuristically fixed categories. Politics contained within the state or civil society were far less effective than those that redefined relations between state and civil society. Consequently, I began to look closely at the ways Vancouver’s two central AIDS volunteer organizations negotiated this amorphous location between state and civil society. Chapter 4 details those cartographies.
Chapter 4
From Civil Society to State Apparatus:
Shifting Spaces In the Voluntary Sector

I. Introduction

Reflecting on how urban political relations are theorized presently, Elkin (1987, p. 163) laments,

"Although citizens as bearers of interests is probably the dominant form of relation, the picture so far given of how city political institutions help to constitute the citizenry is far from complete. Citizens stand in relation to each other as clients mediated by bureaucratic experts. The question implicitly posed by this form is something like, In what category are you?"

His concern, shared by many, is over the ways that citizenship is reduced to a mere client status through the power of modern state bureaucracy (Ferguson, 1984; Fraser, 1989). Bureaucratization and clientization remain constant threats to the critical potential of radical democratic citizenship. These processes strip citizens of their equal standing before the state and each other, leaving them in a position of inequality and dependency.

Yet in arguing for more formative democratic bearings in city politics, such a sketch itself can obscure citizenship by reproducing rather stationary categorical distinctions among the citizen, the client and the bureaucrat. Their identities rest on familiar, well defined characterizations. In the citizens we imagine the voters, the grassroots volunteers and the clients are recipients of urban services; while the bureaucrats are the paid employees, professionals and the experts inside of the state. Further, each identity is typically located in and around the state, and is mutually exclusive to the others. The rise of grassroots organizations that provide services for people living with AIDS and HIV, as I noted in Chapters 1 and 3, demands a rethinking of the positions and
orientations within city politics.

The imbricated position of the bureaucrat and the client in Vancouver's AIDS politics is navigated in this chapter through a discussion of citizenship across the city's principal volunteer AIDS organizations. These organizations lie between discourses of the state and civil society. The spaces that these organizations occupy, then, contradict the fixed, simplistic spatial metaphors that Mouffe uses to describe new forms of politics.

This chapter details the spatial overlap between state and civil society at these organizations by showing their to-and-fro tack between grassroots community coalitions and large formal bureaucracies in their offices. Here I show how bureaucrats (service deliverers) in the shadow state resist bureaucratization by exercising their politics through their work. The resistances to clientization by members of the self-help group the Vancouver Persons With AIDS Society (PWA), demonstrate how service-recipients preserve their citizenship. As organizations that began as grassroots groups, we would theoretically locate these voluntary sector activities within civil society. Yet as Chapter 3 hinted, local AIDS organizations have grown at phenomenal rates and are rapidly bureaucratizing. They have always maintained contractual ties with the state itself. In the third section of this chapter, then, I show how Vancouver's shadow state also reproduces social relations of bureaucratization and clientization, anathemas to radical democracy. My point is not to argue these organizations completely inhibit citizens' radical democratic potential. Rather, it is to show how awkward and essential spatial metaphors of state and civil society can be for radical democratic theory. Organizations like AIDS Vancouver and the PWA Society have evolved in contradictory ways because
of their awkward position: pushed and pulled between the state and civil society.

II. Resistances in the Shadow State

In her thorough account of the American and British shadow states, Wolch (1989) acknowledged the critical potential for voluntary-sector service provision. De-centering service delivery is thought to counter the large scale bureaucratization endemic to modern state social service and welfare offices. By moving the point of service delivery away from the state and towards civil society, or the community in which service-users exist, it is argued that the needs of the clients are better understood, services can be fine tuned to meet those needs, or more quickly adapted should needs change. Similarly, such moves toward decentralization also can involve service-recipients in the actual delivery of services. By drawing the client into the delivery mechanism, the argument goes, the clientization resulting from modern state-welfare provision so often critiqued (e.g. Ferguson, 1984; Fraser, 1989) can be countered. The hierarchy of the bureaucrat-client relationship, with its unequal power relations, control over information, and intrusion into private lives, is undercut by voluntary-sector service provision.

a. bureaucrats as citizens: the work of city politics

Wolch is, of course, sceptical of these rosey outcomes, and I follow her criticisms later in this chapter. Here, however, I want to show how this potential for the shadow state is illustrated by Vancouver’s AIDS organizations. Recall from the introduction in Chapter 1 that these are organizations that began in the gay community, specifically the West End. They began to provide services because the state was unwilling, or because it was unable to meet needs quickly enough. Through my interviews with paid employees
across the shadow state, I came to question the categorical distinction between citizen and bureaucrat, noting the ambiguous position organizations hold between state and civil society. Below I trace four themes that convey the ways citizenship gets expressed through people's paid work in AIDS service delivery.

There is a striking, self-conscious reflexivity between gay politics and AIDS service delivery in Vancouver. The very location of the services, clustered around the West End and Yaletown (a rapidly gentrifying warehouse district noted for street-involved youth and sex-trade workers), bears out that mutual relation (recall figure 1-13). This geography reflects and reinforces the point that many people working within the state or shadow state on AIDS issues are gay or lesbian. For example, there is a gay man who is a provincial outreach nurse to the gay community- and who particularly targets male sex-trade workers. The province pays his salary and rents space for a testing facility in the Gay and Lesbian Centre. The duality of identities and cultures he draws on (state bureaucrat versus member of the gay community) is meant to calibrate the service the state provides through him. For instance he confided:

"My fear is that in gay men next year we’re going to start to go up [in HIV infection rates] again because the gay population has been inundated with information and considers itself well educated. Again, we watched our friends drop like flies and we’re tired of it. It’s not logical or reasonable- it’s a rationalization and it’s risk-taking. And people are taking risks again, which is frightening."

Positioning himself as part of both the state and civil society he also confronts the state with inequities in service delivery to different kinds of citizens (Wolch, 1990):

"My anger hasn’t gone away. It’s been modified. Redirected. I still get really angry from time to time about the injustices and the things I see. Nobody is perfect. No facility is perfect. There’s a bad apple wherever you go. I’ve stood and screeched at the top of my lungs in emergency rooms bringing in an HIV-infected youth who’s sick. And
they’re sitting in the waiting room for two hours when they need to be on a stretcher and on oxygen. Because it’s a street kid or an IV drug user they’ll triage them. That’s when I really let loose with my anger. And it tends to be helpful. I can tack on my nametag too. ’Look! I have a nametag too!’"

A lesbian who also works with street-involved gay youth in Yaletown mirrored the nurse’s position between state and community:

"I work on a contract with the Ministry of Health. The place that we’re in is rented by Family Services of Greater Vancouver. The mandate of Street Youth Services is to connect with new kids on the street and basically get them to more traditional services: social workers, medical attention, etc."

She is employed on a contract from the province and is located in a drop-in center that has few of the trappings of a social service office. Besides identifying as a lesbian, she has had strong ties to the gay community and in her own youth had dealt with social services. Her concurrent position among these identities allows her to do her job and advocate for gay youth. This came up when she noted her dissonance with the Yaletown punks who are less street-involved than her clients (young gay homeless men, many who are HIV positive or have AIDS):

"I shouldn’t say too much about [the punkers] because I really don’t know much about them. But the young people I see here are- they’re reflective on their experience. Their circumstances are different. I suppose I just have more empathy. I don’t work down here by some kind of accident. I have history here. And they’re gay. I’m gay. They’re softer somehow. I don’t know. They touch me. They’re my kids. I find the punkers amusing, but I can’t take them seriously, really."

Likewise, St. Paul’s Hospital is an intense locus of identity politics and service delivery. Located on the edge of the West End, it has been deluged by people living with AIDS and HIV. Many members of the staff had to deal rapidly with their own issues of homophobia or heterosexism in order to provide proper care. One nurse recalled her own realization of this overlap between identity politics and service delivery,
when she was troubled and confused by a married man (who was bisexual) with AIDS:

"But when I saw the patients I could not understand. I just could not put together from my life experience this upcountry businessman and his teenage children and the evangelical Christian outlook, and this guy had AIDS. There was absolutely no question. Then it became, if I couldn't understand it, how could I help my nurses nurse my patients? Nothing in nursing taught us anything about this that would help us put it together."

But these issues were not merely centered around anonymous patients. As a major neighborhood employer, many of St. Paul's staff were also HIV positive and eventually died of AIDS. Colleagues who were quietly suspected of being gay by homophobic coworkers suddenly became gay patients with AIDS who needed care and service from their fellow employees. Additionally, gay doctors at the hospital had to come to the fore of treatment as well as advocacy.

The braid of identity politics with service delivery does not simply improve accessibility. In many ways it is absolutely crucial to actually impart the service. People have to see HIV as a risk to themselves before they can access education and modify their behavior accordingly (Osborn, 1991). To make that link less threatening, education is typically imparted along lines of identity. For example, AIDS Vancouver's Man-to-Man Program aims education and prevention directly at gay men through outreach programs in bars, bath houses, private homes and cruising areas in Stanley Park. Similarly, the Women and AIDS Project (adjunct to AIDS Vancouver) attempts to educate women precisely along the lines of their gender identity because AIDS has been stereotyped in North America as a threat to gay men (Shaw, 1991; Banzhat, 1990). The complexities of identity and position in city politics were underscored by a Project employee who noted that she spoke at the Ministry of Social Services not merely because
of its many women clients, but also because of its large numbers of female employees.

"Usually when people want us to come in for a speak¹ then they're really clear that this information is for the women in the room. But what they're not clear about is the way they, too, need that information because they are women, too, usually. I went in and did a speak at the Ministry of Social Services (mainly women there). And they wanted this information for their clients. These women were very clear about that. But when we start doing the work or the exercises and they start talking, they talk from personal places. Many of them do. Or they'll say something happened to a friend of theirs. Well, that's a lot closer than a client that they're paid to service. So we work from the premise that the personal is the political. You need to personalize this, and explore your own attitudes and values and know where you are about it before you can share the information."

There appear to be limits to effective service delivery, however, which reflect the limits of identity politics (Phelan, 1989; Cohen, 1991; Annetts and Thompson, 1992). The reduction of AIDS Vancouver to a gay identity and political agenda in city culture had sensitized its gay complement to presenting more diverse identities- especially during its early years. One woman's job in the early eighties involved doing AIDS education seminars in settings that were not gay-specific or friendly. She recalled the ironic role her gender played against gay-identity politics in favor of service delivery to "the general population":

"My sense of what was going on when I was hired at AIDS Vancouver is that when people called AIDS Vancouver for more information and they wanted a speaker, they were very concerned that that speaker was going to be a gay man. And that the people who would be attending that speak would not want to come if they knew a gay man was there because he would be perceived as having AIDS and people were afraid that somehow this person would make them sick. I think that that was a valid perception for AIDS Vancouver to make at the time. The perception at the time, by not just the straight population but also a lot of gay men, was that anybody who was perceived to have AIDS was a threat. Anyone who was gay was perceived to have AIDS at that time. But I

¹ A "speak" is an education seminar on AIDS and HIV for a specific group of people conducted by AIDS Vancouver volunteers. It is also sometimes referred to as an "AIDS 101".
don't particularly agree with the way that was dealt with, in other words, feeding into that fear so you give them a woman."

b. Ambiguities Between Volunteer and Paid Work

People's own work and volunteer commitments have changed over time while they remain in place. Simultaneously Vancouver ASOs have grown rapidly in the past decade. These two processes locally reinforce each other to produce an often blurry distinction in the shadow state between paid and volunteer work (although attempts are persistently made to sharpen the distinction as ASO's continue to bureaucratize [see Patton, 1989]). The ambiguities are found in the context of individuals' own histories, as well as the more general local culture of AIDS work. For instance, at least half of the 23 employees at AIDS Vancouver began as volunteers or maintain a volunteer commitment to the organization. Similarly, most people who work directly on AIDS issues in the state itself had previously worked or volunteered at AIDS Vancouver. Many factors explain these bridges. People acquire skills or specialized information while volunteering that make them appropriate candidates to hire. Often by volunteering they more readily hear about job openings. The increasing willingness of the state to fund projects or contracts means more people can be paid to do work that either had not been done before, or had been done by volunteers. Most importantly, there is an increasing demand for shadow state services, which has translated (in Vancouver) into calls for greater consistency and reliability of paid positions. Finally, it is common for people to speak of a personal need to "do more" around AIDS (Fernandez, 1991). They fulfil this need by either working and volunteering simultaneously, or at different points in their lives.

The complements and tensions between paid employment and volunteering in
people's own lives were noted in a number of different ways.

"My work at AIDS Vancouver is pretty distinct from my being a buddy\(^2\), because my buddy is like my friend, right? I mean, to speak quite honestly, he's not someone I would have chosen to be my friend. He's not someone I would ordinarily hang out with. But when we do spend time together, we're like friends. So I don't talk to him about [my job at AIDS Vancouver]. It's pretty separate because I don't see my time with my buddy as a job. I see him as someone who's like a family member, you know?"

Thus some people stress a need to bracket work relations from volunteer relations in their own minds along a public-private divide. Discrepancies between motivations for volunteering and working are sometimes marked in this way. The work has to get done to meet needs, it is thought, but volunteering is necessary for people to participate, to heal. Frustrated, a man who both works and volunteers at AIDS Vancouver reflected:

"[Volunteering] creates a nice balance between my anger at the paper-pushing and my wanting to know that what I'm doing is making a difference.... I want to be doing work that matters to me, to other people. This week I don't feel that at all on the work side. Not at all."

He went on to describe a recent scene in his organization:

"There are a lot of times that I don't make a distinction between the work side and the volunteer side. For time sheet purposes, I guess I have to. But like I took all of yesterday off and I'm trying to take Mondays off throughout the summer to maintain a thirty hour work week. And I came in for a meeting last night at 5:30. [My boss] saw me and looked really surprised, as though he wanted to give me this whole long list of things to do. And I said, 'Hi! I'm here as a volunteer, for the meeting.' And he just shut right up. Because I didn't even want to get into work mode. I didn't even check my message box."

Nonetheless he maintains both forms of commitment because the paid work allows him to do more overall, whereas the volunteer work gives him a greater sense of personal

\(^2\) A buddy is a volunteer position at AIDS Vancouver, common to most ASOs. It is a one-on-one personal relationship between a volunteer and a person who is HIV positive or has AIDS. It is an undefined relationship that can entail both practical and emotional support. Buddies are discussed at length in Chapter 5.
efficacy.

People also emphasize the perceived automatic virtue and feelings of efficacy garnered by volunteering, which is thought to be precluded from waged work.\(^3\) This point came from a variety of different corners. One volunteer declared:

"I get a feeling of satisfaction from volunteering. You're not getting paid for it. You're doing it because you want to do it."

One provincial bureaucrat struck the same distinction, but resented the pretence of superiority volunteering had over paid work in AIDS issues:

"So this has always been a sore point for my people that are out there burning out and working their tails off and getting no real acknowledgement from [the community]. If you collect a salary for what you do, you ain’t worth it. You ain’t committed. And you ain’t doing the job as well as if you’re a volunteer.... Volunteers are always better than people working in the area."

Ambiguities were detailed not only through individuals' lives, but in local political culture and structure. The rapidly changing form of organizations is most recently an issue. People lament the growth in service organizations from small grassroots offices to large bureaucracies that shifts work away from volunteers (Patton, 1989; Arno, 1991). Reliance on paid staff to complete tasks can mean greater continuity and reliability. It nevertheless challenges the history and spirit of voluntarism and self-help around AIDS and HIV. One man who both works and volunteers noted a trend away from volunteers towards employees:

"I see the role of volunteers as doing the work. And the staff members should be delegating the work and, in conjunction with volunteers, deciding on the directions that the organization should go. The paid staff should be the coordinators of the volunteers.

\(^3\)For a discussion of the "moral narcissism" associated with being a citizen, see (Ignatieff, 1989).
But I see volunteers as the people doing the actual work: speaking, buddying, answering the phones. I'm seeing a move away from that here and I'm really, really worried about that.... If there's too much work to be done why don't we call in more volunteers instead of creating another half-time position?"

In a single place over time, as personal commitments change and the shadow state grows, tensions between different kinds of responses to AIDS erupt. These tensions appear structurally in Vancouver's shadow state and are located between volunteers and bureaucrats, in bureaucrats who used to be volunteers, and in people who are both volunteers and employees.

c. Work as a Means to Citizenship

While I have discussed the ways that identity and position in the state apparatus are being negotiated in Vancouver AIDS politics, it is important to underscore the shifting perception of paid positions themselves. Waged work sometimes can be the only, or the best way for some individuals to respond to the AIDS crisis locally, that is, to be a citizen. One woman described her work in deeply political tones, emphasizing her own responsibility as a citizen to others:

"It's something about working in AIDS. You get this information and you realize that-it's quite a process to be able to find your voice to be able to talk about this stuff. I had this information and I felt like there was no turning back. Somehow I had this responsibility that I wanted to pursue."

Work further becomes a means to citizenship as a greater amount of time can be spent working rather than volunteering in AIDS organizations. The need to "do something" is negotiated with the need to earn a wage. Working in AIDS helps ameliorate this tension in people's lives. For instance, one man whose partner was HIV positive chose to work in an ASO for the understanding environment as well as his own desire to affect change:
"I moved to Vancouver to join my late partner who I met while I was living in Manitoba. And when I moved here it was important to me to do something tangible. And this job was offered to me. And I took it because I knew that if my partner were to become ill and he wasn’t ill at the time. But I knew that when he would get ill this job would give me the time I needed to be with him. And that was the single most significant reason why I actually got involved in the paid-work end of things. It was something very tangible to do in the face of not being able to do very much for him."

Still others stressed their ability to offer much-needed professional skills in a context of crisis that politicizes service delivery:

"I didn’t just take the job because it was a job. It was very much the issue at the time and there was a personal sense that I had a lot to bring to that work, having both experience in sexuality education and- you might think this is odd but- the threat of nuclear war, because that work was around issues of death and dying. So the two really came together in my work in AIDS education."

Shklar (1990) argues that citizenship is a matter of social status actually premised on the right to vote and earn a decent wage. The latter condition manifests itself interestingly in the Vancouver case study. The capacity of work to be purposeful, meaningful and offer a living wage is often affected structurally by class location. Note that the response to AIDS in Vancouver has largely come from the middle class (see also Patton, 1989). The secure economic position many of these individuals enjoy enable them to be employed in situations where they literally can work for social change. As I have noted above, this process is partially subverted by the virtue bestowed on volunteers, yet I would maintain that the point demonstrates the contradictory ways that citizenship is being structured in Vancouver. One man reflected that his employment flexibility freed him to use work to explore his efficacy in society, and acknowledged this privilege:

"I’ve been pretty fortunate. To earn my way I had to find things I could do that did not demand long term commitment from me…. I guess what I’m saying is that I’ve always
been really lucky in the sense that I've always been able to pick things that I wanted to do. And when I picked something I really tried to pick something that was going to keep me whole. In other words I did not want to see, 'This is my work. And this is my life.' I really wanted something integrated. [The work around AIDS] is intense and engaging but also quite fulfilling. [Jobs where I did not feel like that have made me say], 'If I'm going to do something, I want to be- to some degree- in control over it.' And I realize I'm really fortunate. Truly, I've been very fortunate."

d. Changing Orientation Towards Work

Alternately, AIDS has changed the meaning and nature of work people have always done towards more poststructural understandings of citizenship. As one nurse at St. Paul’s summed up her job since AIDS, "I have been known to say it’s a shitty way to get your life enriched." A common theme- not just in Vancouver- has been the rise of a culture of obsession around AIDS work because the crisis is so constantly at hand (Fernandez, 1991; Grover, 1992). Through their work, people come into immediate contact for the first time with gay men, and people who are living with AIDS and HIV. That closeness can resignify an otherwise ordinary job in the state apparatus and link it squarely to identity politics. A straight person working as a librarian for an AIDS organization spoke about the politicization her work has brought to her life:

"My attitude’s changed since I’ve been here. I mean, I went from knowing nothing to knowing quite a bit. And being very moved by- oh, you go through so many emotions. I am moved by the people that I work with, their dedication. I’m moved by the people who are HIV+ and some of their concerns. I could always imagine, but I couldn’t really empathize quite as well with them as I do now. And the frustrations of being a small community organization. Watching where some of the money goes, well, you feel the inequities of a lot of things, and the prejudices. You get frustrated by people for their ignorance, who don’t understand or accept or try to learn. Sometimes you get irritated and other times you feel hopeful…. I like the freedom I have here, where I can develop my own ideas and people let me go with it. But I find I have to take a lot of time and stop and be with some of the people who come in here. It’s that that gives me more satisfaction than other jobs might. I’ve always liked working with people, but I mean, I take it slower with them now, which is nice. Because that’s what it’s all about for me now. And stuff comes back to me better. I think I give a little more than I used to."
There's a certain sincerity around this work that I've noticed. Maybe it's my own growth and I just haven't noticed it before, but it's very prevalent around here."

She went on to discuss how she has become an advocate in her personal life, not merely for people with AIDS but also for gay men because of her work situation:

"I seem to have become an AIDS educator in my own way- and actually a 'gay community' educator. I mean, educating people who are somewhat homophobic. I'm amazed at how little a lot of people know about the gay community. And the statement, 'I don't care what people do. I just don't want to hear about it.' And so, of course, I have to take that one on. I tell them that people have to show who they are so that a lot of the inequities that they've experienced are wiped away. And so they're not trying to flaunt something to offend you, they're just trying to be accepted, to live a life that in my mind is just as normal as our lives. 'Oh no! You can't say that!' You know, that kind of thing in response. So you go into the whole thing about sexuality and all that. And I find I spend more time on those issues than on AIDS issues, but that could just be the people I know. My father has learned a lot and he's a far better man for it! [laughs] He's changed."

III. Resistances to Clientization

One of the most important facets of the AIDS movement has been the demands of people living with AIDS that they themselves have a voice, that they claim a certain expertise, in relation to state and medical authorities (Patton, 1989; Crimp, 1989). In so doing, they decidedly reject the label "AIDS victims", and seek to empower themselves in the contexts of a terminal illness and often overpowering medical and political discourse. In October, 1984 the first self-help group began, floating amongst people's homes. Over the next two years, the coalition grew and became the Vancouver Persons With AIDS Society. In November 1986, it officially opened its office at the Gay and Lesbian Centre on Bute Street (recall figure 1-6). The Society grew out of people's frustrations that AIDS Vancouver's non-profit status prevented it from taking a more explicitly political stance against the provincial government. It also developed out of a
frustration with AIDS Vancouver’s lack of a PWA voice. During my fieldwork, PWA had approximately 1,200 members. While no member is required to participate, the Society is run by volunteers, with continuity provided by a small staff. There are five standing committees, each in charge of a specific portfolio (see figure 4-1).

a. citizenship and self-empowerment

It has long been recognized that the process of clientization is a distinctly modern form of state power that has threatened the citizen’s position. Clientization refers to the processes whereby bureaucrats claim to expertise and control over information and resources place citizens in positions of dependency and need vis-a-vis the state. Since citizens in liberal theory are abstractly defined as a position of equality (viz. other citizens) and rather autonomous from the state, clientization processes have challenged liberal’s de facto characterizations of citizenship in modern democracies. Weber (1968) was perhaps the first theorist to note the relation between bureaucrats’ knowledge claims and state power over the citizen, and Habermas (1984) has drawn heavily on his analysis to trace the disempowerment of the citizen through bureaucratization and juridification of the state apparatus (see White, 1988). Feminists like Ferguson (1984) and Fraser (1989) have paid particular attention to the way clientization has been gendered through the welfare state, place women who receive state aid in an unequal, disempowered position of clients of the state.

In Vancouver the PWA Society is explicitly mandated to resist the clientization of people living with HIV, and hence promote their citizenship. Its mission statement expresses this goal clearly:
Figure 4-1 Vancouver Persons With AIDS Society Organizational Structure

Board of Directors

Executive Committee

Finance Committee

Advocacy Committee

External Affairs Networking

Medical Information

Fundraising

Walkathon

Casino

Other Events

Program Committee

Complimentary Health Panel

Newsletter

Program Coordination

Office Functions

Daily Operations

Financial Administration

Support Groups

Volunteer Services

Other Programs

Networking Information

Treatment Information

External Affairs Networking Information

Other Events
"The Vancouver Persons With AIDS Society exists to enable persons living with Acquired Immune Deficiency Syndrome and Human Immunodeficiency Virus to empower themselves through mutual support and collective action. From our personal struggles and challenges come our courage and strength."

PWA members resist clientization in two ways. The first is through self-empowerment dealing with external organizations, such as hospitals, the Ministry of Social Services, and insurance companies. Ferguson (1984, p. 143) notes that a key strategy in creating dependency amongst clients is bureaucrats' control over information immediately relevant to the citizen. PWA challenges this in several ways. With its Treatment Information Project, the Society provides up to date information on drug treatments and therapies (both conventional and alternative). It keeps tabs on experimental drug trials as well. Here, the traditional paternalism of Western medicine is explicitly challenged. One man recounted his first contact with PWA:

"...the self-empowerment mandate really worked for me. Heavens, yes! I didn't know a thing about self-help organization before I came here. I came in, and a [member] read the riot act to me. Told me that I had to go and get my blood tested. Here was this passionately speaking, really hunky 40 year old man talking to a total stranger. I'd never experienced that before! And there was my doctor; 'No. You've only been HIV+ for six months. There's no reason in the world to test your blood!' I yelled at him, 'I want it tested!' [laughs] I'd never yelled at my doctor before in my life! He started muttering something about patients' rights and so on. But it didn't change the test results. I should have been on prophylaxis for PCP, and I should have been on AZT. He had been neglecting my treatment! So that was my first taste of this organization."

By providing members with information, they in turn, can 'speak for themselves' and resist depending on others as authorities about their well being.

b. the citizen as advocate

Clientization is further resisted through what's known as "advocacy". PWA's Advocacy Committee works against clientization on both collective and individual bases.
On a collective level, it lobbies government to protect the rights of people living with AIDS and HIV. One Advocacy member detailed recent lobbying efforts:

"I write a lot of letters and send a lot of faxes to the federal government. We have an ongoing dialogue- sort of- with Kim Campbell and her administrative assistants. An example is that we met with Kim Campbell about three weeks ago now. And we spent an hour and a half and we were talking about funding of the National AIDS Strategy and how the government has yet to make a commitment. So we go to Ottawa. [One member] just got back from Ottawa. He was there for five days at the national income security thing. And that's the kind of thing we do. We travel more. We go to Victoria. We go and bug them."

By way of contrast, another Advocacy volunteer sketched out the individual advocacy work:

"We do the pick-up-the-phone-to-the-social-worker-and-say, 'You can’t cut this guy off of his benefits!' With the landlord we do the, 'You can’t throw this person out of their home because it’s against the law!' We advocate for people to get their Canada Pension Plan benefits, or their UIC benefits, or their disability insurance."

Advocating for members not only empowers them, it is argued, but also empowers the advocate (Katz and Bender, 1990). By becoming a resource to other people living with AIDS, they themselves gain a significant measure of control over their lives. One member put it as follows:

"We do not have a client/service-provider relationship. We are members helping each other, sort of, cope in the world with AIDS right now. And by that I mean, we use our collective skills to help each other, to have the ability to advocate for ourselves. We provide each other with the information to manage our treatment by having the treatment information here; by managing our Canada Pension Plans by checking it out for each other, providing that information here. So in essence, we are advocating for ourselves and we are taking control of our lives. And the old adage 'knowledge equals power', that's the center of the way it is here. But it’s mutual support here."

Clearly, then, PWA empowers citizens and resists their client-status. Yet during my

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4 At the time Kim Campbell was the Prime Minister of Canada.
interviews, it rapidly became clear that clientization was occurring within the organization itself. The self-help philosophy links these strategies with a focus on collective resistance to disempowerment. In their reader Katz and Bender (1990, pp. 5-6) introduce that resistance as a defining feature of the self-help movement:

"As professionals and other human service workers become involved with self-help groups, they must undergo (and many do) a role change, shifting from that of the impersonal expert, assumed by self and others to know best, to that of listener, teacher and guide. Both governmental departments and voluntary human service agencies with programs targeted towards specific human needs have an interest in adapting philosophy and practices to the concept that people should help themselves to the greatest extent possible."

An emerging theme in social work texts is the concession of authority to clients (Chesler, 1990; Adams, 1990). Certainly the Vancouver PWA Society has forced bureaucratic authority to shift their authoritative stance towards people living with AIDS. For instance, a woman whose infant son was HIV positive recounted how PWA helped her resist the dependency on medical authority she felt:

"And that first phone call with [the peer counsellor], he was just wonderful. He was very supportive, gave me very practical information to go to the hospital with, what to ask about, that sort of thing. He really, really helped me with the hospital. I didn’t feel so victimized, because if you don’t know even what to ask then you’re totally dependent on the medical people to explain everything to you, and you just feel powerless. They’re in total control and you’re in no control, and especially when there’s such an internal fear that you feel totally out of control of."

This challenge to the traditional medical authority has even been conceded by doctors themselves in Vancouver. Locally for example, in a discussion with a doctor at St. Paul’s Hospital, he noted the change in his own profession:

"…but there’s no question that when you look at the activist groups that they’ve had a profound effect on us questioning almost everything we do in this disease and other diseases. Particularly, the issue of what is the right of the individual, and what is the individual’s debt to society? And those cut across many diseases. Quite clearly man-
andatory testing may have some important social benefits. On the other hand, there’s no question it compromises individuals’ rights because of the prejudice. Access to drugs: surely it should be everybody’s right to take anything they want-- particularly if they’re dying. Yet if every individual chose that, then that compromises the individual’s responsibility to society to be an experimental animal. So the issue of the balance between individual rights and the responsibility of the individual to society in patient care has been a predominant one. And it’s attacked the traditional paternalism of medicine."

IV. Against Citizenship: Reproductions of bureaucrats and clients

a. service provision

In spite of these strong resistances to clientization and dependency, the AIDS organizations nonetheless reproduce relations of inequality that threaten citizenship.

Since all AIDS organizations in the city provide some manner of service, the potential for clientization and bureaucratization are always present. For instance a restructuring of AIDS Vancouver’s intake department to make it more efficient, led to a handful of volunteers quitting. One former intake volunteer voiced her frustrations as follows:

"They changed the whole format. They changed so many things about it, that it was coming out of their heads, and I work out of my heart. And I just said no way! When I did it, Intake was [a group of us] on Fridays. And the fellows came in and there was real need. Sure some of it you had to sift through maybe. Some were on drugs. Well, it was very seldom that somebody went out of there that didn’t get some kind of money. I mean, many times I had a check to go and pay somebody’s rent. You wouldn’t give them the money, but they still got the need met. And I’d go over to Granville Street and pay it to the St. Helen’s Hotel or whatever. I’d take food to people rather than giving them the money. I don’t know how to explain it really. [The former coordinator] worked out of the heart. And we did too. He’s a wonderful man. And then staff changed, and [he] was no longer in that area, and it [became] all paperwork, paperwork, paperwork. And you have to know this. And you have to know that. Well, I just couldn’t go up to one of these guys that I’d gotten to know and they’re really in need for some reason or other, and say, 'Well, you know John, you just got to do this. You’ve got to give me this paper and that paper. And I’m sorry but until this is all done I can’t do anything.’ I can’t work like that. So I left. I told them. I told them why. I just can’t work that way."

Perhaps most ironically, the Vancouver Persons With AIDS Society also repro-
duces clientization. Foremost, the organization does deliver services to its members. Consequently despite self-help philosophy an inherent structure of service-provider and client-recipient is structured through PWA. In other words, its members become de facto clients. Services include: personal advocacy work; housing subsidies; personal referrals; a complimentary health fund for medicines not covered by B.C. Medical; hospital visits; free haircuts; a tax consultant; a lending library; a drop-in lounge; a monthly newsletter; free lunches to members on site. Some of these services can be valuable enough to structure significant dependency. A case in point is the housing subsidies. The PWA Society is under contract from the B.C. Housing Management Commission to grant approximately 60 housing subsidy vouchers to deserving members, who are decided on by the Housing Committee. This arrangement is more than just an exercise in decentralization. These subsidies can be quite dear to a PWA living on a handicap pension or long-term disability. Monthly income on GAIN would hover around $755.00. Moreover, consider the PWA’s housing market. Many PWAs try to locate in the West End, close as possible to St. Paul’s Hospital, B.C’s 'Centre for Excellence' in AIDS Treatment. Given the high West End rents, access to care might very well depend on a member getting a housing subsidy to live close to AIDS resources.

"I resigned from the Housing Committee just because I was getting phone calls late at night. In fact, our whole board quit at the same time because we felt that we were making decisions and they were being overturned by these people. And we were getting extremely harassed, on the basis of, 'My friend needs one. And I want him to have one."

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2 The subsidy ensures that recipients will not spend more than 30% of their income on housing.

6 The handicap welfare program from the B.C. Ministry of Social Services.
And I’m a board member and he’s going to get one.’ Right, even if he doesn’t qualify. And I was going nuts.”

The move towards clientization was acknowledged frequently- and often with resignation- by members I interviewed. The increasing size of the organization, they felt, made the clientization process nearly inevitable at PWA. One man made the point explicitly:

"I think right now the Society is in a transition mode from the brokerage paradigm to the client paradigm. The client paradigm says, 'We're going to do this for you. And we're going to tell you to do this.' The brokerage model says, 'Here are the tools. You do it.' The brokerage model is the self-help paradigm. That’s the other problem, the increase in bureaucracy, getting things done. The epitome of the client model in the AIDS community is AIDS Vancouver. We run on the brokerage thing: the self-help mandate; although that is changing. We send out a demographic survey to the voting membership, the results of which are in our current newsletter. One of the questions was, 'service or support?' The vote was fairly evenly split. Part of that was I think people didn’t understand the question. But there’s also an ambivalence. We’re at a focus point where it can go either way. There are some who think we should be doing more in the way of services; there are some who think we should be doing less in the way of services. It’s one of these things where time is going to work it out."

b. growth

Whenever I asked interviewees to described how things had changed since they’d been involved in AIDS issues in Vancouver, consistently they mentioned how much their organizations had grown. Concomitantly, the spread of bureaucratization was acknowledged along with the increase in paid staff and volunteers at organizations. During my fieldwork for instance, the number of paid staff at AIDS Vancouver doubled from 12 to 24. The move from small, cramped offices by AV and PWA together into the bright, refurbished Pacific AIDS Resource Centre also signalled a certain maturity of AIDS organizations in the city (see figures 4-2 through 4-5). The costs of this growth, however, has been the loss of a grassroots atmosphere. Repeatedly- at both AIDS Vancouver and the Persons With AIDS Society- I was told that the camaraderie, the
Figure 4-2 Former Vancouver PWA Office on Hornby Street
1988-1992
Figure 4-3 Former AIDS Vancouver Office on Davie Street
1983-1988
Figure 4-4 Former AIDS Vancouver office on Richards Street
1988-1992
Figure 4-5 Pacific AIDS Resource Centre (PARC)
Helmcken and Seymour Streets, Yaletown
family atmosphere, and the informality were vanishing. These shifts have made PWA seem more like an arm of the shadow state, than a community-based organization in civil society, or a surrogate family. For instance, one former employee described the changes he had seen since the mid 1980’s:

"The thing that I think I notice most is that the interpersonal relations amongst the guys that work here doesn’t seem to be like it was before. I mean there was always slamming and crap like that going on in the past, but I mean they’d hug each other at the end of the meeting. And then they’d come back and do the same thing the next day, but at least they’d hug each other at the end of the meeting. And now, I don’t see that kind of personal concern any more. The organization has gotten too big. And people don’t know each other well enough, and they’re not prepared to put that much emotion out and all this sort of stuff. And the result is that I think we’ve lost a lot of the sort of moral leadership quality that existed in the past. I think in part that’s just due to the growth of the organization."

While I was not able to obtain membership figures, the enormous growth of the organization is not difficult to believe. In 1986 there were 15 members, and their Walk For AIDS raised $8,000. A mere eight years later there were just over 1,200 members who work with a million dollar budget. The Society has had no choice but to bureaucratize. The spirit of participation is difficult to inculcate across such an enormous organization. Inevitably, members fall out into those who provide the services and those who only take them. Most often, this division was described resentfully:

"Ideally the situation in this Society should be 'each according to their needs, from each according to their talents. The problem is there are many, many people out there who just want to take, take, take rather than give something back. I mean, so goes the way of the world in general."

So, in a telling slip, an Advocacy volunteer surreptitiously placed fellow members as clients while describing the necessity to agitate the state bureaucracy:

"I’m here to be adversarial, because I’m not the one being denied benefits. I’m not the one who’s going to get penalized. I can just sit back and be a real bitch. If the client— I
hate to use that term- but the member who’s come to me for help- so then I perceive them as a client (but that’s my own social work background partially)- doesn’t have to deal with the results of me being a real bitch. Social services either deals with this mess or we go to the media."

Several long-term members noted the decline in a family-like atmosphere, which corresponded with the Society’s two moves to larger offices over the past four years:

"By like 89-90….the small, family atmosphere was breaking down- not breaking down, that sounds negative. But it was disappearing. I don’t mean that in a negative way. but there were more strange faces coming in. People didn’t know each other so much."

"But anyway, the old office was really fun [in the Gay and Lesbian Centre] You used to walk in and everybody, eventually you knew everybody who came in. And you’d sit around and joke and carry on, cavort around. You name it. Give each other a hard time. We used to sit around in the afternoons and play games. Scattergories and crap like that. And people brought their lovers and friends and parents to the office. I can’t recall how many hundreds of brothers and sisters and mothers and aunts and uncles and grandmas and everything else that I’d meet. Yeah, sure. Kevin Brown’s mom would come trotting in there. She was just like a member of the family. You know, come in the door and smile and the eyes would light up and the big smile and the big hug. It was more-- people cared more for each other. It was more intimate. There was less people, you know."

PWA is also witnessing a shift in its membership that contributes to its internal clientization. Members noted the rise in the number of street-involved or IV drug using members, and claimed there had been a change in the social class of the membership generally. Consequently, to many new members PWA has become just another local service organization to which members presented themselves as clients because the self-help model was so foreign to them:

"I think the definition of support has changed. I think now 'support' is more basic needs like food, shelter. I mean, if we even thought about giving out food bags in 1988 people would have been offended that came to the door. There was no way they were going to leave with a food bag. And now AIDS Vancouver runs a food bank. So food is an issue. Housing: people needed help paying their rent in those days, but they didn’t need help finding housing if they could present themselves to a landlord. Now we have families on welfare with children, so that’s changed a lot. Sometimes I feel like a
financial-aid worker. Sometimes I feel like a social worker. A lot of the people I see probably see me as another service provider that they probably have been dealing with their entire adult life. Sometimes I feel that way."

One of the most ironic outcomes of this dichotomy is that many persons living with AIDS in the city stay away from the shadow state organizations that were meant to be so attuned to their needs. Typically, they cite the "internal power politics" and disorganization for the reluctance to be active in the Society. As one person reflected:

"For me, I would rather make use of an institution or a Society like PWA as a client. I would rather make intelligent choices, do my research, say they can do this for me; I will go in and get that. If I don't know enough about something, I'll go in and investigate it. I would rather do it that way than sort of be co-opted by the whole thing."

In other words to resist dependency and the internal politics of the organization, some persons living with AIDS find a certain degree of empowerment by acting as occasional clients.

c. the shadow state as facilitating state clientization

Vancouver’s shadow state not only facilitates bureaucratic structures and clientization with itself, it also "cerns" clients for the central state as well. Bear in mind that despite both organizations’ gay-grassroots ties, AIDS Vancouver and PWA both are linked to the state through financial and contract ties (e.g. figures 4-6 and 4-7). These linkages facilitate clientization. AIDS Vancouver, for instance, has developed increasingly close ties with the Ministry of Social Services. During its intake process, AV makes it easier for clients to present themselves to the Ministry in order to access benefits

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7 "Cerned" is a term coined by Paul Smith (1988) to denote how individuals are constituted by multiple social relations simultaneously. The word highlights the lack of fixity and often contradictory make up of social subjects’ identities.
Figure 4-6 AIDS Vancouver Revenues by Source 1987-1990
(source: AIDS Vancouver)
Figure 4-7 Breakdown of Vancouver PWA Society Revenues 1987-1990
quicker. While the intake process at AIDS Vancouver allows clients to get more of what they deserve from the welfare state, it does this by clientizing them before they even get to the state itself. One AIDS Vancouver intake worker put it this way:

"I think the Ministry is starting to recognize that AV is certainly a help to them as opposed to a hindrance. I think in the past they’ve always considered us as being, you know, 'Get out of our way! We’re here to look after these people!’ Now the Ministry is phoning us when they’re finding out about a client who’s ill. They will phone us and find out if we’ve had any contact with the individual. It’s certainly becoming a two-way street."

Ironically, the Persons With AIDS Society also reproduces state clientization. This point was made clearly to me by a peer counsellor at PWA. He asked me what I was specifically interested in, and I described the clientization process and how it often made the democratic citizen unequal and dependent. He nodded knowingly. Tweaking on my theoretical ruminations, he told the following story. I quote him at length because it illustrates the difficult position between citizen and client a member of the Vancouver Person With AIDS Society faces to maintain an adequate standard of living:

"You talk about citizenship. I guess every day I talk to at least one person who is struggling to make decisions between his responsibilities as a citizen and his ability to demand rights, which perhaps he doesn’t feel quite right demanding. And I have to say to him, ‘You have a life-threatening illness. You must survive. Will you be able to survive without this help?’ This is a major problem for our members. And I would never, in my wildest dreams, have thought that a major part of my life was talking about that question. I can sure give you an example. But I want to be somewhat non-committal. How can I express it? I guess the easiest one to talk about is this form here. It gives you a tax advantage. It’s called the "disability certificate" [disability tax-credit certificate]. And if a doctor signs it, it means that you pay about $1,200 dollars less in income tax than if he hasn’t signed it. Now in order to sign that, the doctor has to say that you have a severe, marked, permanent disability. Look at me. Do I? 'Severe'? 'Marked'? 'Permanent'? Those are strong words. I ride a motorcycle. I go skiing. I can work in this office reasonably long hours and still be mostly with it ([laughs] this is the end of a long day for me). I can do 40 push-ups. I go jogging. What’s the doctor supposed to say to me? My T-4 count has been hovering around the 110 level for over a year now. My immune system is severely compromised. I cannot stand stress. I can’t
hold a job. It's totally out of the question. People wonder about whether or not I have a severe disability? I asked my doctor to sign that form and he did., on the basis of the amount of fatigue that I feel, and on the basis of the fact that my ability to deal with life-threatening situations has been severely compromised. But people have problems with that. We've got doctors who have problems with signing the form for people that should have it, because they don't have to sign it. What is one's responsibility as a citizen and to pay that $1,200 in taxes because this illness has progressed? I think that's probably a good example you can use. There are other examples, but they're not as nice. That's a classic. I was going up the chairlift. The guy beside me said, 'What do you do for a living?' I said, 'I don't. I'm disabled.' He just about threw me off the chair. He wasn't upset that I was disabled, just didn't believe me. This illness is not like other illnesses. I mean, if I were blind, there would be no problem getting that form signed, even though I would be capable of holding down a full-time job, having a wife and a houseful of kids. I guess I couldn't coach the baseball team, but I could sure coach something or other. This example with the form, it's one of the great layers of this onion. Where you sign that you are disabled, and that you're no longer to be a functioning member of society that you've been. You are talking about a huge decisionmaking process, and it's affecting men who are relatively young in large numbers. Their concept of themselves as givers and providers changes to one who must take. And we all loathe the thought of the day where all we can do is lie in our hospital bed and have our tubes fed and our messes cleaned up. Yeah. We face quite a citizenship problem, alright! I hand out those disability forms by the dozen. I went into the tax office the other day and told the woman I needed sixty more."

V. Conclusion

What are the implications of this shift from civil society to the state, from citizenship to bureaucracy and clientization? As a geographer, I stress the need to recognize the shifting social space on which Vancouver's shadow state rests. How are we to represent the offices of AIDS Vancouver and the Persons With AIDS Society? The meaningfulness of their offices is being constantly redrawn by changes in the relations between state and civil society/community. Organizations like PWA and AIDS Vancouver denote the restructuring of the capitalist welfare state. They provide services
for the state, derive portions of their funds from the state and maintain lines of communications with it. Yet they are also a highly visible part of the gay community that spawned them (e.g. figure 4-8). They derive great portions of their funds from grassroots fundraising within the gay community. They recruit their staff and volunteers through the gay community. And, as noted in Chapter two, a large proportion of the people who use their services are gay. Through this chapter I have tried to convey the restructurings of civil society and the state around AIDS issues in Vancouver. The concept of citizenship was employed not from its preconceived identity in liberal democratic theory, nor from the virtues of civic republicanism, but rather contextualized poststructurally via the issues it points up: rights, duties, responsibilities and membership in a political community. By relaying how these issues were signified (and by whom) at AIDS Vancouver and PWA, it was argued that the categorical distinction between citizen and bureaucrat proved unhelpful in the political context of AIDS issues. This point was understood through the rise of a shadow state, an effective state bureaucracy, and a mobilized gay community’s politics that worked through those structures. I have attempted to show that work has become a means of citizenship not merely because of its results, but also because of attitudes towards work itself that have politicized it.

There are important limitations, however to the reading of citizenship offered here. The absence of steady categorical distinctions between citizen and client, between state and civil society may very well augment struggles to meet the needs of people living with AIDS and HIV. That fluidity, however, means that it also becomes unclear when and how to draw the distinctions at all- yet such markers were necessary to write this
Figure 4-8 AIDS Vancouver Volunteers at 1994 Lesbian and Gay Pride Parade, West End
chapter! Smith (1991) has made a similar criticism against Laclau and Mouffe more generally when he argued that their poststructural subjects are too radically indeterminate.

This chapter's central argument has been to show how the voluntary sector (as a space of citizenship) takes place in locations that are constituted by a hybrid set of relations containing elements of both state and civil society. In a sense that spatial duality allows citizens' struggles to succeed: by drawing on its grassroots character, volunteer organizations can better identify with the needs that the state had failed to acknowledge; yet by drawing on their state-like qualities, they can meet the level of demand that has come with the increase in need.

In Vancouver, political opportunities have been widened by these hybrid spaces of citizenship in which AIDS service organizations exist. This is the case not only around AIDS and HIV, but also gay and lesbian issues as well. In turn, however, the possibilities for grassroots or direct-action campaigns, especially those with a radical flavor, have largely been eclipsed by an increasingly legitimized and incorporated shadow state that lies between the state and the community most affected by HIV and AIDS. Locating a restructured citizenship in voluntary-sector spaces nonetheless reveals forms and expressions of political engagement that have been missed by the more rigid categorizations of urban political inquiry. As a spate of recent works in the AIDS literature have shown, AIDS has challenged city politics fundamentally (Shilts, 1987; Kramer, 1989; Perrow and Guillen, 1990; Fernandez, 1991). I would insist that the categories through which we capture those politics must adapt in turn. That adaptation must be one of flexibility and constant rethinking of where citizenship occurs, rather than a jettisoning
of well-worn political-spatial categories like "state" and "civil society".
Chapter 5
From State to Family:
'Just Being There' as a Buddy

I. State or Family?

The AIDS crisis affects gay men and their communities at a time when the forms of both the capitalist state and the North American family are in considerable flux. The retrenchment of the welfare state and the rise of the voluntary sector, or "shadow state" illustrate the fragmented nature of state organization; we can no longer theorize the state as a singular, unified institution. From the private sphere, the decline of the traditional nuclear family, and the rise of the "postmodern" family also point up the lack of a uniform model of family structure (Koontz, 1992; Stacey, 1991). Within gay and lesbian life there has been an ongoing experimentation with and forging of what Weston (1991) calls "families we choose". Her argument is that, far from being antithetical to the family, gay people’s relationships should be viewed as an alternate form of kinship in contemporary life (see figure 5-1). These structural changes intersect in calls (most recently in Ontario) for extending the legal definition of family to include gay and lesbian partnerships.

The stigma of AIDS, it must be remembered, has played no small role in the re-negotiation of state and family responsibility for support. Some have chosen not to tell their families, out of shame and fears of rejection; they rely instead on alternate forms of kinship for support. For many gay men, their seropositivity creates or exacerbates tensions between themselves and their partners or their biological families at the very time when support is needed most. Gay, HIV positive couples have to face the reality
Figure 5-1 Family Diversity as an issue at the 1994 Lesbian and Gay Pride Parade, West End.
of each partner having to care for the other while they themselves are ill, and wonder about caregiving once their partner had died. Adults who are HIV positive might not live close to biological families, making familial support difficult across the miles. The distinction between kinship and biological families, however, is not necessarily so sharply drawn. Often some mixture of both is drawn upon in building support networks. While some relatives might be resentful at the extension of the HIV-positive person's private sphere, others welcome the relief, finding the burden of supporting a person living with AIDS to be overwhelming at times.

Through the local response to AIDS, between these shifting spaces of state and family, we find the fascinating position of the buddy. As I explained in Chapter 4, a buddy is a volunteer at AIDS Vancouver who provides one-on-one practical and emotional support to a person living with AIDS or HIV. Libraries' wide mandate and links to both the state apparatus and the family further complicate any static geography of the citizen by simultaneously occupying spaces of both the family and the shadow state. They may be the only family a person with AIDS has, while at the same time enabling a probing state-surveillance into a client's private life. I demonstrate this duality in this chapter by considering the myriad ways that "support" gets defined in buddy-client relations in Vancouver, while making the case that buddying is a form of citizenship defined partially by locations where elements of family and state relations are combined in place. The family is typically located within the home, and indeed that site is

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1 The roles are typically referred to as "the buddy-volunteer" and "the buddy-client" for the sake of clarity.
discussed below as enabling citizenship. However, kinship relations need not only be confined to the home; they can also take place privately in public space, and these locations are highlighted as well in this chapter.

II. The Buddies

a. origins

Buddying was started at the Gay Men's Health Crisis (GMHC) in New York (Kuklin, 1989), and the Shanti Project in San Francisco. In Vancouver, these early programs served as models for the buddy program. The open-ended definition of support stems from the variegated and diverse needs any particular person living with AIDS might have, at any given stage of the illness' progression. This open-endedness also denotes the widespread failures of both state and family structures to provide adequate support immediately during early years of the crisis. One of AIDS Vancouver's earliest buddy coordinators recalled the program circa 1984:

"The needs in those days were in some respects pretty comprehensive. And there's been various attempts over time to combine and to separate the various aspects of need. The buddy program initially covered everything and anything. And then we tried to get a little more specific where the buddy program was more emotional support, under particular guidelines; and practical support, transportation, food, financial assistance, information about medication, being separated from the emotional support but still being handled by AIDS Vancouver but by different volunteers. You know, there are some volunteers who'd be very happy to drive a person with AIDS to and from doctors' appointments, but not being so confident or willing to get involved at an emotional level and be there for them on an ongoing basis."

Chapter 1 detailed the province's negligence in supporting people living with AIDS. Recall that in his public refusal to fund AIDS Vancouver, the Provincial Health Minister was quoted in 1987 as saying AIDS Vancouver could "take care of their own kind" [sic]. The claim was popularly interpreted as homophobic: gays were not citizens,
and thus beyond the entitlement to care and welfare that is a fundamental feature provided to the citizen by her/his state/community. Neoconservative ideals legitimized the state’s sluggish reaction to AIDS: the state could not afford, nor was it really its job to provide for, the needs of HIV positive people.

The family, of course, is the favored site for the provision of care for the individual in a capitalist state, according to conservative political philosophy (Gardinier, 1991). Yet recall the graph in Chapter 2 that demonstrates the overwhelming number of gay men who embody British Columbia’s AIDS crisis. The enormous alienation, tension, and even geographic distance between gay men and their families was another factor that generated buddying (e.g. Preston, 1992). Ironically, even within neoconservative discourse, gays are decidedly portrayed as a threat to the family. As a threat, they stand outside, beyond the family structure. Outside a certain compassion of pity, gays with AIDS do not merit family welfare, according to certain strains of conservative political theory.

To further trace out the origins of the need for buddies, we must recall that AIDS has been a holocaust for gay men’s social worlds. The AIDS literature is simply replete with stories of friend, after friend, becoming sick and then dying— all out of the popular field of vision (Shilts, 1987; Kramer, 1989; Russo, 1990; Monette, 1990; Brown, 1992). In other words, it is likely that even if gay men turned to their own social networks for help, to their own "families we choose", their gay friends or partners might also be sick, dying, or already dead. One buddy, for instance, insisted that he had only one buddy, when in fact, as our interview progressed, he acceded that he really had two, but that
they were partners. After his first client died, that client’s partner became ill and requested this individual become his buddy as well; with his partner dead, he had no one else to care for him. For all these reasons then, buddies- as formal volunteers- stepped in and began to offer support.

b. buddying at AIDS Vancouver

The actual number of buddies can vary at any given time, due to ebbs and flows of volunteers, but there were roughly 93 during my research. Across that time period, AIDS Vancouver’s client base ranged from about 1,150-1,200 (not every client needs or requests a buddy). The length of the relationship typically lasts about a year, and ends with the client’s death, although the buddy coordinator estimated that about 10% of her matches did not work out. As figure 5-2 indicates, buddies usually have only one or two clients over their volunteer career.\(^2\) There are simply no firm statistics on who buddies. In discussions with employees in Support Services, the estimates were fairly reliable: at any given time half of the buddies are self-identified gay men, and half are straight women, hardly our society’s image of "the citizen". There is a wide range of ages, but modally, most buddies are in their thirties. Most are "middle class" and white. This rough sketch is confirmed by a quantitative study by Letts (1992 p. 27) in Vancouver.

c. the buddy as a de-centered subject

What makes buddying so fascinating is that it defies fixed definition. People I interviewed had a difficult time trying to give an overarching, or comprehensive

\(^2\) This sample is not necessarily random. It is developed from the buddies who were willing to speak with me.
Figure 5-2 Number of Clients Per Buddy
(source: Author's interviews)
definition. Likewise, I had a difficult time at first trying to conceptualize buddying as citizenship both before and during my interviews with buddies, because my categories told me that a buddy was something of a social worker - the welfare function of traditional city politics being appropriated by the emerging shadow state (And this characterization is hardly inaccurate; see below). Almost immediately I had to rethink (and eventually leave open) my ideas about what buddying was. The multifaceted, often shifting nature of support underlies this chapter’s argument: that citizenship can be located in both public and private spheres (since it can be a component of any social relation) - but more precisely, its actual locations (that is, where buddying takes place) enable citizenship that is simultaneously a component of relations of both the state and the family. Clarifying my original confusion, a Buddy Coordinator gave a concise, introductory definition of a buddy:

"A buddy’s role can be any number of things. It’s a very difficult role to define because it has so many aspects. There’s a practical aspect in terms of, if someone needs a buddy to go in and change the cat litter because they need to stay away from it because of toxo⁴, or just someone who needs someone to walk their dog or drive them to a doctor’s appointment or around the park, or help them negotiate the system to get their needs met. Or, do they need someone to talk to who’s outside their realm of friends, or perhaps there are no friends, and they’re isolated. So it’s a fairly difficult role to define and each situation is different."

Typically, however, support falls into the two categories: emotional and practical. It is important to stress that these are not mutually exclusive categories; they almost always overlap. One buddy recalled her client in such a way that this overlap was made all too clear in private spaces like the home or the hospital room -- places we would more readily associate with familial relations (see figures 5-3 through 5-5):

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⁴ Toxoplasmosis is an opportunistic infection common to AIDS. It is a disease of the central nervous system.
Figure 5-3 "Home" in the West End, Davie Street
Because of the intimate nature of support, buddying often takes place in private locations like the clients' home.
Figure 5-4 Helmcken House, social housing for people living with AIDS in Vancouver. Buddies will spend time at their clients’ homes, which would include places like this building.
Many buddies spend time with their clients while they are in hospital. Here again, the public space of private, familial relations becomes significant as a space of citizenship for buddies.
"For my first buddy, it started out while she was healthy, she wanted somebody with the same interests to be social with. She did need some physical support, in that she tired easily. She didn’t drive. So she wanted somebody to be social with, that also understood the disease, her physical limitations, and also she was a recovering alcoholic, so she wanted somebody that understood a 12 step program and was comfortable with that and the jargon. So when we first started we would go out for a lunch, a walk on the beach, a couple of plays, that type of thing. As she got more ill, I would visit her. She had family as well, but as a support, what I would do is that when there was nobody available I would visit. I took over food. I made sure the apartment was clean, made sure she was okay. I would check in by phone. And when she went to the hospital, I took a fairly regular shift at the hospital. I was there almost every morning to make sure she ate, because before she- whatever they call it when they stick the feeding tube into your stomach … while she was still on solids she wasn’t able to eat, or chose not to (there was a little bit of both there). So I was there for psychological and physical support, in that I fed her. I gave her back rubs and leg rubs. I trimmed her nails, that kind of thing. I helped keep her clean. When she got very, very ill and the tube was inserted I just spent time there, just a physical presence: so her family could get a rest, and her friends. I was just one of the people there."

Practical support can involve anything from shopping for the client, driving her/him to the hospital, dealing with social services if the client is too weak or agitated. It might also entail cooking, cleaning, changing diapers or doing laundry, though these forms of support are more systematically taken care of by the City Health Department’s Long-term Care team, or other departments at AIDS Vancouver.

Emotional support tends to be very basic. Buddy training stresses listening skills, for example. Thus talking, listening, spending time with the client, helping them cope with the various illnesses all fall under the rubric of emotional support. One buddy alluded to the significance of emotional support as he summarized his relationships with all five of his clients:

"So I’ve had five buddies in five years, sort of thing. They’ve all been great in their own ways. Some you get closer to than others, which is only natural. You have friends, you know, and sometimes you feel some of your friends are closer than others. And there’s reasons, of course, for that. I felt that in practically all instances their needs were completely different. And I think that, on the whole I was able to fulfill these needs and
change as it was required. In most cases, I would say that they really wanted— and I'll use the word "spiritual support", and I'm not indicating by that that any of them were particularly over-religious. Some believed stronger than others. But they all wanted— I think the main thing was to learn and listen and not be judgemental. And it taught me a great, great deal."

The refrain of "just being there" clearly underscores the emotional-support component of the buddy relationship. The woman buddy, above, for instance, noted the significance of her own physical presence to the well-being of her aphasic client. Being there as an emotional support, however, takes on even more significance when buddies acknowledge that they may well have to be there for their clients' deaths. The buddy quoted immediately above went on to recount a particularly special instance of his "just being there":

"It'll be two years on the nineteenth of this month that he died. And again, I was fortunate enough to be with him. Again, it was sort of a funny thing because I was going out for dinner that evening and the day before I had said to one of the nurses..., 'Here's the phone number. If there are any drastic changes, please call me.' And all evening long we were sitting there and I thought, 'Oh isn’t this nice, no phone calls.' And I got home and there was a message from the nurse. I phoned and he said, 'You better come.' And I got there and he’d been comatose for hours. His family and friends were around. And [the nurse] said to me, 'He needs changing.' And I would help the nurses if they asked me. So we shooed everybody out, and I spoke to [my buddy]. And I said, '[The nurse] and I are going to change you.' And he opened his eyes and he sort of squeezed my hand and he said, 'You’re here!' He shut his eyes and he died. And I don’t know if this is true or not, of course, and I never will, but I have a feeling he was waiting until I got there."

The clients' needs seem to be the defining element of the buddy relationship. Those needs dictate the form that support takes. There are limits imposed by the organization and the buddies themselves that also structure support, which I will discuss in more detail later. As Fraser (1989) argues, welfare policies directed by human needs rather than bureaucratic structures of the public sphere offer a more satisfactory form of politics that
need not be entirely hemmed in by the public-private divides in liberal democracies. From the accounts and description above, it appears that new forms of citizenship complicate a solely public reading of political obligation. When we begin to consider the saliency of where those needs are being met, and understand the context that makes meeting those needs a rather political act, this point becomes clear. To substantiate, I will sketch out how buddying is found in the private sphere in the following section.

III. Modes of Citizenship in the Private Sphere

a. the buddy as a member of the families we choose

As the former coordinator quoted above hints, the content of buddies' responsibilities has shifted as other facets of the shadow state and the state itself have come on-line to provide elements of care. Presently, buddies tend to offer more emotional support because practical support is explicitly handled by the City Health Department (for instance, long term home care and housekeeping), or other branches of Support Services at AIDS Vancouver (for instance the food bank). From their start, however, buddies were meant to provide both practical and emotional support to their clients, and often some mixture of both remains across each buddy relationship.

The private nature of buddying, associated with kin and family, is evident when we consider the actual locations of interaction between buddy and client. Buddying does not take place at AIDS Vancouver. This point was made repeatedly by buddies who confessed that they were unable to follow the ongoing AIDS Vancouver scuttlebutt, since they hardly ever came into the office. Their volunteering took place elsewhere. Buddying occurs across the city, but often in private locations, or privately in public
locations. To put it more precisely, buddying happens where the client needs it to. To demonstrate this point, I have culled the locations specifically discussed in the buddy interviews, and plotted them in Figure 5-6. While by no means a representative sample, the table conveys to a great degree, the private locations of interactions. At first this claim may appear misleading, given the predominance of public spaces along the y axis. And yet that disqualification is too easy: as buddies described those scenes, they stressed how private and one-on-one they were (figures 5-7 through 5-10). For instance:

"We walk miles! Just miles and miles and miles. I have walked from Spanish Banks over the Burrard Bridge back to Stanley Park. And we went to Lighthouse Park... And oh, man did we climb! We found a nice, quiet little cove and we talked... And if he’s extra tired, we just stay home and talk or watch videos. Once in a while- I don’t know what it is- but I say something and it triggers a very large disclosure. I mean, I feel very privileged that he talks to me about these things. He is one of these people who has absolutely no family support. He has only told one other person that he tested positive. And he no longer sees that person after telling them- after knowing them twenty years. Personally I think that’s bloody shameful."

"And my very first meeting with him was very awkward because my first buddy was very healthy [and this one was not]. But I went to meet him at this scuzzy little east side hotel. It was disgusting: this little, tiny room. And I walked in, trying not to act disgusted, and he sat down with me, and we had some coffee. And then he said, 'Will you help me make out my will?' And I was like, 'Okay, nice to meet you, too.' And we worked out his will because he was going through chemotherapy at the time for skin cancer."

"We go to the beach. We talk. We sit around and have coffee."

"So I would drive him to his doctors’ appointments. I drove him to his treatments at the hospital. I drove him for his blood work. He loved gardens, of course with all his plants. And of course I met him in the June of that year, so we visited practically every garden in Vancouver, sort of thing. We went out to Vander Zalm’s place. And we were over in North Vancouver. He was a very good photographer. Actually there’s a picture that he took on one of our trips that he had enlarged and framed for me, which is over there. So we did that. And we socialized also. He was here [in my apartment] quite a bit of the time."

"And he was out at UBC Hospital, and he and his lover lived in the West End, and his
Figure 5-6 Buddies' Situations
(source: Author's interviews)
Figure 5-7 Out for coffee:
This coffee shop in the West End serves as a site for buddying.
Figure 5-8 Out for dinner:
This popular West End restaurant also serves as a location for buddies to support their clients.
Figure 5-0 Sea Wall, English Bay
Many buddies recalled spending time with their clients here.
Figure 5-10 Stanley Park
Another location of buddying, given its proximity to the West End.
Figure 5-11
Supermarket, Davie Street.
Buddying can also entail practical support like shopping for the client.
In this way, public spaces like this one can also be considered a space of citizenship.
One buddy coordinator emphasized the importance of practical support alongside the emotional support buddies are meant to offer: "...you're not a failure if you're not listening all the time, or if you don't click. We're still playing a really, really important role in someone's life if we're running to the grocery store and picking up prescriptions for [the client] because they may not have anyone else to do that for them."
lover had a full time job and it was very hard for him to take time off. So he would end up only seeing him in the evenings and on weekends. And all his friends worked. So he felt really isolated. And as I said at the time I was doing shift work so I had a lot of hours. I could go out during the day and do lunch or get together in mid afternoon. At a certain point he was able to go out for a day pass. I’d borrow a friend’s car and we’d go out for a drive to Spanish Banks and walk along the sand or we’d go to the Dairy Queen if he had a craving for ice cream. So a lot of it was just a matter of being a companion."

The settings, however, public, provided private space to talk or (again) "just be there".

So buddying takes place in private spaces often, like the buddy’s or the client’ home, or the hospital room, or it can take place privately in public space. These private spaces, nonetheless are typically associated with family or friends.

The ineffable quality of buddying often led buddies to talk about their relationships through more common social relations that we typically think of as private. It was common for them to draw upon the discourses of friendship or family in numerous ways to capture the relationship they had with their client. While it is important to stress these are only partial readings (direct challenges will be detailed in the following section), there remains a fair degree of accuracy in these very private characterizations. Buddies often spoke of their clients as private parts of their lives. Compare the following quotes that equate buddy ing with friendship:

"The term 'buddy', I think, is just sort of synonymous with 'friend' in that you have a commitment with that person to, well, be there for them."

"I see that the volunteering is almost a private part of my life. I don’t really even think about it. I don’t even submit hours. So it’s like my buddy is one of my friends. He might drop by the office and we might go out for a coffee together. And so the whole thing is- it’s really difficult to see it now as 'volunteering'. It’s more like friendship, even though it’s not like my other friendships."

"The relationship is sort of a combination of everything- of just being there for them. I mean, I know too you have to act as a resource person, because you’re probably going to
see needs that they have (like home care or extra help with meals). And as a resource person you can come back here and arrange for a lot of the things they may need. But it is a friendship, if you’re lucky. Like, I guess everybody’s relationship is different, but it’s a friendship also, hopefully."

Several volunteers at AIDS Vancouver have also "buddied" informally for friends and relatives living with AIDS. The fluidity of public-private divides in buddying were made all too clear to me when I would ask respondents how many times they buddied. Six respondents interjected, 'That depends on how you count.’. In other words, their public role as volunteers in the shadow state became somewhat blurred in their own minds with their private roles of support for friends and family members.

Similarly, clients were also mapped- often quite directly- into buddies’ families. Many buddies mentioned extreme alienation between clients and their biological families. This came up a number of times in my interviews:

"And that was where I found out that people turn their backs on their children. I don’t care if your child is gay or lesbian. I don’t care whatever they are-- they are your child! How can you turn your back? I just couldn’t understand that. I was absolutely horrified."

"[My most recent buddy’s] mom and father had a great deal of difficulty over his illness. So the illness was a great source of friction there. I think it’s fair to say that of all those four guys I’ve buddied, the one thing that they did have in common was that none of them- none of them- wanted to go home. So even the ones who knew nobody in Vancouver, preferred Vancouver to home. Home was always somewhere else."

"When he got really sick, he decided to move back to Port Alberni from Toronto to live with his family. And that didn’t work out too well. He stayed there for a few months but part of the reason he wanted to be with them was that they had never gotten along really well, and he thought that they could come to some better relationship. But it didn’t happen. It got a lot worse. And be basically got thrown out on his head when he was extremely sick during that cold weather that we had just around Christmas time. He had to find an apartment then. He was on his own: he had no furniture, no money. He was sleeping on the floor and, like he’s- you know how they get thin, eh- unusually thin, even for a person with AIDS. They just tipped him out. They brought him over here to Vancouver. Dumped him. And then his family went on vacation for a month."
Usually the fact that the client was gay and had AIDS served to compound the distance between him and his family. Furthermore, as adult men, links of care between them and their families had disappeared with adulthood. Geographic distance also played a crucial role. It is typical for gay men across Canada to migrate to larger urban centers. Thus in many client cases, biological family was literally elsewhere, making ongoing support difficult. As well, it is important to note the negotiated, constructed nature of "family" in gay and lesbian life. As Weston (1991) illustrates, new patterns of kinship ties are being formed in gay subculture that do not necessarily mimic the traditional heterosexual family. Current and former partners, friends, co-workers, etc. all can be considered family. From all these points, then, situating the buddy in a familial discourse reinforces and reflects the new forms of family:

"You have death, but you also have life, you know. When my [buddy] died- that's the one I'm having trouble getting over- he died on February 24th. And the funny thing was that in the Fall, before he got dementia, he sent me into his bedroom to pick up something. And there's this big dozen, long stemmed red roses for me. So I said, 'Well, what have I done?', you know. And he says, 'Well I might not be here when you become a grandmother.' (I just found out I was going to be a grandmother.) 'I might not be here,' he says. So he gave me these flowers And we used to talk about it and everything. Anyway, he died on the 24th of February. And on the 25th my little grandson was born in Edmonton. And they named him [after my buddy]. You know, that was just wonderful."

"I guess I've introduced my buddy to, like my kids and their friends. I have two sort of late teenage girls. And their friends, their boyfriends, the people I work with, my relatives- I've introduced him to them all. He just has a really strong taste for lots and lots of new people. He's just a very outgoing person. It's difficult for him, physically, to get around, so it's just easier if somebody can bring all these people to him. Even if I don't physically bring them to him, I get like, my sister to write him letters."

Another woman drew her buddy into her family more explicitly:

"And I had a little blanket that somebody had made me, which was his blanket. He knew where it was [in my apartment]. And he used to put the blanket over him. And he used
to put his head on my lap. And he used to lie there and sleep for about two hours before it was time to go back again. But I think I was just-- an anchor-- was all I could say I really was. I was a haven he could go to, even if it was just on the telephone. He was like family with me."

A gay man noted the pliancy of the term family for him and his client, who’s also gay:

"My buddy doesn’t really have a family. When I mean ‘family’ I mean mother, father, brothers and sisters. He does have a foster sister who lives in the city here that he keeps in touch with. And she’s a lot of support to him when he’s in the hospital. His parents he’s never met before. His father, I believe, is in prison and his mother’s in a mental institution. And he does have his foster parents in another province, but they never write to him or anything. So there’s really not a lot of communication happening there. And that could probably be his fault too, of not keeping in touch with them. But as for his family and friends, there’s myself and his foster sister, and then there’s another friend who’s moving in in a few days, and probably one other person. We are his family, really. We care a lot for him. We’re there for him. We’re not like his other friends who sort of disappear when he’s in the hospital or whatever. Like many gay people, that’s really their family- not their blood family- but friends. And I think probably in the last two years he knows about this now. He knows that he does have this family and friends that he can trust, and he knows that they’ll be there for him."

Besides becoming part of a renegotiated family structure, the buddy also augments the client’s private sphere by alternately supporting the existing family in situ. One buddy coordinator emphasized this point to me during her interview:

"I can think of one buddy right now who is much more support to the partner than the person who is quite ill right now. In that, he’ll go and hang out at the house when his client is asleep, so the partner can leave. You know? He may not even have that much contact with the person, but it’s really important in the whole scheme of things. If you think about it, the client’s getting supported because his partner’s being helped out, you know. The partner is more able to be there."

Somewhat conversely, the client’s private sphere can be sustained by the buddy relationship because the buddy is close, but yet still maintains a distance, s/he can do things for the client that the family simply cannot. One veteran buddy recalled this point with tragic poignancy:

"In another buddy’s case what happened was that-- this was the one whose mom used to
come out once a month and stay for basically a week. The last time she came, he didn’t recognize her. And she couldn’t face it. So she never came back, which I understand. I mean, I’m not judging her for that. But it is simply a fact. And it’s why, in the end, I did end up being a sole support for him. So I’m the person he said goodbye to when he died. Actually, when people ask me, ’What do you do? What can you do that nobody else can do?’ , the answer I usually come up with is that it’s often easier for a buddy to tell the person that it’s okay to die. And I’ve done that for a number of my buddies. It’s a very important part of the process. And it’s one that many, many family members, and even close friends, find very difficult. And I’ve known some who did do it. But there were others who there was no way that could be forthcoming from those people who were close to them.”

The sheer intimacy of these relationships, I think, reflects its remapping of new forms of kinship. The intense emotions buddies felt when they talked about their clients is, unfortunately, impossible to convey in written text, yet it cannot be ignored. The buddy quoted immediately above went on to describe another client, choking back tears:

"Asking me how to define support makes for a rather impossible question to answer. And this case is a very good example of why because the CNS [central nervous system] involvement started very early in that one. Dementia is the unkind word; the hard word. And there came a point when that, together with the morphine, which was for internal KS lesions, "support" in its conventional sense was no longer possible. He ended up in palliative care at St. Paul’s. Most of the time he was aphasic and unresponsive, because of the dementia. So what that meant was that at that point "support" becomes very, very difficult. I mean, there were times when I would go to the hospital and go away without going in. We all did that at points-- just couldn’t cope."

Buddies, as I have noted earlier, must deal often directly- with the client’s death. They grieve; it is part of the volunteer work. Death and grief are culturally quite private experiences. That privacy and intimacy can be intensified for people surrounded by AIDS, such as gay men in Vancouver. While it is not common for buddies themselves to be self-disclosed as HIV positive, one buddy I spoke to was. Like the interviewee above,

\[4\] Kaposi Sarcoma is a cancer that causes purple-black lesions on the skin. It is a common AIDS-related condition for gay men.
he also highlighted the intensely private, emotional bonds that buddying forged for him.

Confronting his client's death from AIDS necessarily meant anticipating his own:

"I'll stay as a buddy certainly as long as my buddy will have me, and as long as he's alive. And I'll really have to see. It's going to be very important if my buddy were to die that I be there for him and take a break after. But then I really don't know. A lot of people take breaks because it's their first or second time that they experience someone dying with AIDS, but I've experienced it so much it's become a bit of a routine. And death to me is not an ending; it's a beginning, a freedom that we all need in our lives. So I really don't know what will happen. But I think it's important, too, that I consider my own health at the time."

A final mode through which we can see buddying located in the private spheres of home and family is by its concealed nature. Buddies are under strict confidentiality guidelines by AIDS Vancouver. They cannot divulge their client's name or describe them in such a way as to identify them. The concealed, hidden nature of buddies' politics stressed that it is a form of citizenship that must be difficult to see from the public sphere of shadow-state service delivery. I interviewed a former AIDS Vancouver volunteer who, though not a buddy herself, wrote a master's thesis on buddying. She concluded that one of her most interesting findings was that she was profusely thanked for her interviews. As her quote below demonstrates, buddying can often be so private and concealed as to frustrate the volunteer:

"...at the end of these interviews people were very gratified, and very thankful that I did it, because it was- for many of them- the first time anybody has ever asked them about their experiences, and had some concern about them as human beings. And for a couple of them, at least, it was like this big weight had been lifted off of them. And one of them actually said that doing the interview sort of brought him back to his commitment to the organization, because he'd been thinking about quitting. He'd felt unsupported. So for him to sit down and talk about his feelings, his buddy, or the organization- or life in general- it sort of refocused him and gave him a sense of re-commitment."

I would substantiate this point, reflecting on my own research experiences. Interestingly,
however, both volunteers and staff across all facets of the local response to AIDS thanked me for bearing witness to their citizenship. The concealed nature of AIDS beguiled them.

In this section I have argued that buddying illustrates how citizenship can be a component of kinship or familial relations. It takes place in situations typically associated with the family, or intimate relations— even when those locations are in public space. Citizens work through these spaces differently than they do in other public spaces they are associated with. They are often interested in the private capacity of those spaces to enable the client to talk freely and share emotions. Alternately, they use these public spaces to compensate for their client’s lack of relations in his/her own private sphere, where they may be constantly alone.

b. Buddies as arms of the (shadow) state apparatus

As intensely private as buddy relations can be, they simultaneously exhibit quite public dimensions that position them within the context of an increasingly bureaucratic system of shadow-state service delivery. The term "client" is the most blatant example.

5 "Bearing witness" is a recurring theme in the writing on AIDS. It is taken from Quaker philosophy and imparts the feeling that, even if one cannot readily solve the injustice at hand, they acknowledge it publicly, so that it does not go completely unnoticed or ignored. The persistent stigma and erasure surrounding AIDS makes the concept pertinent here.

6 One might argue that citizenship has no bearing on the intimate relations between buddy and client. The following section challenges that criticism indirectly, and I take it up explicitly at the close of this chapter.

7 As Ursel (1990) has demonstrated, the reach of the state into the Canadian family is hardly new. I would suggest, however, that with buddies the reach is more concealed and subtle since it is via the shadow state, which retains components of the gay-grassroots milieu, and private social relations of kinship.
A client denotes a formal recipient of a service. It is one side of a bureaucratic relationship. Citizens become clients when a relationship of public dependency is struck between the citizenry and the bureaucracy. Not every buddy referred to their match as "my client". More frequently the client was simply called "my buddy", and the shift in taxonomy became a matter of clarification as much as bureaucrative rationalization.

While at times buddies spoke of their clients through discourses of family and friendship, some used social work as a simile to describe their relations. One buddy in particular recalled a client whose needs were tightly focused on practical issues. And even though the client also had an actual social worker, his buddy came to be one as well in his life:

"Almost always my client was somebody that was very needy. He’d recently moved back from Toronto after having lived here in illness for a length of time. He abruptly left the city for Toronto without telling anybody; whilst in Toronto he got sick (sicker), and out of fear and no income and so forth he moved back to Vancouver. When I met him he was sleeping on the sofa of his only two- what he considered to be- friends. He’s just been discharged from St. Paul’s. He’d had a bout of PCP. And he needed an apartment, furniture, sheets, towels, food, his bearings: everything. So I helped him set up himself. He was able to negotiate the rent of an apartment where he used to live. That was done through an associate of his and a social worker. I helped him set up his apartment. I got him on Easter’s Meals. I helped with the assessment for extended care or home care from the Health Department. I’d go over and make meals. I’d go over and do laundry. Talk with him a bit; lot of tv with him. I contacted people he knew because he had lost contact with all of them on purpose, and helped to reestablish some of that. I just basically helped to facilitate in his life, which at that point was very focused: tv and his bed (that was about the extent of what he wanted to do.

I suppose there was an element of social work in all of that, in terms of access to resources. It was very much resource management: just trying to figure out what is available from where. For example, he was isolated in his apartment. He could not get telephone service because he’d skipped on a significant amount of money owing to B.C. Tel. So through trying to negotiate with the collection agency, which was quite an

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8Pneumocistis Carinii Pneumonia, a common AIDS-related pneumonia.
experience (I had never had that experience before), and through the assistance of people at AIDS Vancouver and some very helpful people at B.C. Tel we were able to apply an Emergency Assistance grant to pay down his phone bill. And on the basis of there being a toll restriction on his line, they gave him a phone. And that way at least he could use the interphone to let people into his building, because you couldn’t get into the building!"

That buddies and coordinators at AIDS Vancouver interpreted the buddy role as a rather formal one is another example of buddies’ positioning vis-a-vis the state apparatus. They stressed buddying entailed a formal responsibility, likening it to employment. One buddy made this point—contra the more ‘friendly’ buddies quoted above—by delineating buddying from friendship explicitly:

"...but it’s hard to explain the nature of the relationship because, like I said before, it’s not pals. I mean, it’s called the buddy program but it is quite a specific kind of thing. It is structured and there’s an element of duty to it. And that’s foreign to real social friendship. And there’s that element of duty to it because it is a volunteer-work commitment. Most clearly, it’s a duty in that I don’t really allow myself the luxury of, 'Do I feel like calling my buddy this week?’ I call my buddy this week."

Likewise, an AIDS Vancouver Buddy Coordinator substantiated his point as she described her own orientation towards the buddies, reminding us that support can take a variety of forms, and occur in a variety of locations that political theory does not tend to identify as spaces of citizenship (e.g. figures 5-1 through 5-12):

"A lot of people have the idea that being a buddy is being a friend. And I really shy away from that. And I try to stay away from that for a lot of reasons. Specifically, because it would set up expectations and there’d be a lot of room for failure. If you’re not good friends with someone, are you not a buddy? 'Am I doing a bad job?' [In some cases being a buddy is about practical support, so] if a friendship develops from that, fine. So what I try and really stress is that, yes, you are an emotional support as much as the person wants or needs you. But you’re not a failure if you’re not listening all the time, or if you don’t click. We’re still playing a really, really important role in someone’s life if we’re running to the grocery store and picking up prescriptions for them
because they may not have have anyone else to do that for them."9

As well, there are limits and conditions bracketing the buddy relationship explicitly, placed by AIDS Vancouver or the buddies themselves, which denote the state-defined dimensions of the relationship as well. For instance, AV insists that money not be exchanged between buddy and client. Should a client need money on short notice, s/he can make a formal application to AIDS Vancouver's Emergency Assistance Fund. One of the first buddy coordinators recalled that he would insist that there be no sex between buddy and client, since it would complicate the relationship and make it 'less professional'. Further, the buddies themselves often had their own limits. One client begged to move in with his buddy, into her apartment, because his homelife was so abusive. His family would say things like, "This is what God has done to you!" or "Are you going to die in my fucking bed?". While this buddy considered her client family, and acknowledged that his home life exacerbated his illness, she would not allow him to move in. That simply went beyond the call of duty. Another example was noted by a coordinator who recalled a buddy working with a severe drug addict. She ironically noted that the relationship worked because of the buddy's limited support role. He was not there to get his client into recovery. He was not there to rescue him, as it were. His role was to accept the client as he was, and provide support to him in that limited context.

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9 One reviewer questioned whether this quote implied a sense of duty or obligation on the buddy-volunteer's part as a citizen instead of an example of the state apparatus structuring of social relations. The dichotomy implicit in his query misses Mouffe's fundamental point about her idea of citizenship: that it can be a part of any social relation. Presumably this would include state relations too.
As one interview has already hinted, a buddy also allows AIDS Vancouver to monitor a client’s life, to augment or maintain service delivery. By this reading, one of the buddies’ duties is a kind of public surveillance on the private lives of clients. AIDS Vancouver emphasizes this role as an integral part of its support services:

"[A buddy] is what’s called a resource broker. You walk into the place. You look around. Is there food in the cupboards? Do they need home care? Maybe they don’t know about the resources and the services available to them. Because [AIDS Vancouver] doesn’t have contact with the client at their home, we don’t know what their needs are…. It’s a point of contact. Buddies are the eyes and ears, very much, of AIDS Vancouver because they are frequently in the home."

"I see us as a state-like resource in that we provide services. Intake, in particular, does not want to be a part of someone’s friendship network or a part of their family network. We can’t get the job done, be objective, and move onto the next client if we start getting involved in the way we were before- in the client’s personal networks. And that’s the role of the buddy. So I almost see it as this large organism where the buddy is in the network and they are the eyes and the ears for Support Services. And Support Services is almost the brain of the structure. The brain tells the buddy, 'Well go into the house and have a look.' And the buddy comes back and says, 'The person has no food.' So the brain tells the foodbank people to make up a food bag to take over to this person’s house to drop off. Then the foodbank person comes back and says, 'Well, also they can’t get around because they need a scooter.' Then the brain….So I see it in that way, as an organism. The buddy is definitely in that unique position where they are part of the person’s support network. They may not be a part of the friendship network, or they may. But they are definitely part of the support network. "Support network" is a term that includes a family network, a friendship network, an enemy network, all the people that are involved in your life in some capacity."

Were buddies solely positioned in either state or familial locations, this capacity could not be maintained. Indeed, it is precisely the voluntary sector’s concealed form of statization that troubles Wolch in her outline of the voluntary sector overall. Because the shadow state mediates between state and family with buddies, its information on its clients can eviscerate personal privacy and further the (shadow) state’s role in people’s lives.

A final instance of how buddies operate in the state sphere was stressed when
buddies discussed how unique their relationships were with their clients. They simply
were not like other relationships they had ever experienced. A common theme that
emerged was that the buddy-client interaction is basically (at least at first) a relationship
between two complete strangers. Buddies and clients are matched according to interests
and the buddies’ needs, but nonetheless the catalyst between volunteer and client is a public
one between two strangers, facilitated by a public service agency.\(^{10}\) Thus for example,
many buddies confessed that they never would have known someone like their client had
it not been for their volunteering. Straight women noted they had never known anyone
who was self-identified as gay. Gay middle class men acknowledged that they had never
before dealt with working class people, even if they, too, were gay. As well, middle
class gay men and straight women are increasingly having to deal with "dual diagnosed
clients". This is a person who is HIV positive and also has some form of addiction. As
my fieldwork progressed, this type of client became increasingly common in Vancouver
as "the face of AIDS" changed away from predominantly middle class gay men in the
West End. In other words, social worlds are made to collide because of the public
dimension of the relationship.

Recall the quote above, elucidating how buddies could often do things that family
could not (like giving permission to die). While that function can sustain the client’s
private sphere, it works because the buddy relationship begins between complete
strangers brought together by an arm of the state. One buddy went so far as to say that

\(^{10}\) As a voluntary relationship entered into by strangers, one might argue that buddies
also occupy a position within civil society as well.
being strangers who lacked a common history was precisely what made the support
relationship successful:

"...I think I disagree with a lot of buddies. I think the thing that makes a buddy
relationship work is that there is no history. So the buddy comes unencumbered. There
are things that when you are [already] in a relationship you can't let pass, that you can
just let kind of roll of your back when you're a buddy. So you come without whatever
the encumbrances of the past are. And there's a certain kind of freedom in that that I
don't think exists in other kinds of relationships. And, you know, with my friends I will
have a history. And in my sense, the absence of a history is quite important. That's
where many buddies would disagree with me. They say, 'Well, we make our history as
we go.'; to which I would say, it's not the same thing."

IV. Conclusion: from State to Family?

At least two criticisms can be tendered against the points I have made in this
chapter. The first is that citizenship is not an appropriate depiction of the buddy
relationship. Recall however, that a poststructural notion of citizenship begins not from
anticipated locations of politics, but rather from where elements of struggles (over rights,
obligations, and membership in political community) are found. Buddies represent a
particular form of those struggles in the contexts of state and familial neglect of many
people living with AIDS, during a crisis where so many have died so quickly that even
existing caregiving support systems (both state and familial) often break down. If we fail
to acknowledge buddying as a social relation embued with citizenship (for the volunteer
as well as the client), we risk isolating the political away from the family and home- a
point that not only has been rejected for decades by feminists (Elshtain, 1983; Siltanen
and Stanworth, 1984; Pateman, 1989; Rose, 1990), but also insists on a fixing of the
political in certain spaces and not others.

The second criticism I would anticipate is that family or "kinship" is not a spatial
category, and that the spaces I have pointed out share no commonality. The diversity of spaces, across public and private spheres, suggests that spatial context is irrelevant. This objection can be countered on a number of fronts. Foremost, geographers have been insisting for over a decade that all social relations are spatial (e.g. Massey, 1984).

Kinship relations, forging new forms of family, occur through buddies in many different locations. Those sites, however, do share a common theme: (as I have argued) they take place where the buddy-client needs them to. The diversity of buddy locations enable citizenship to emerge in the buddy relationship: in the home, the volunteer can make sure the client is receiving the welfare services to which s/he is entitled by right. We may simplistically spatialize the family exclusively with the home, yet that static location might make little sense to a terminally ill person stuck "at home" all day; it may be enormously supportive for the buddy to take her/him out, in public. Alternately, if the client is dying in hospital, that location dictates where citizenship ought to take place. For the buddy (as a radical citizen) to meet his/her obligation to the client, "support" has to be salient; it cannot take place 'just anywhere'.

Through the previous section I have underscored some of the ways buddying can be said to fall within state structures. Yet I have also shown that buddies are an entrenched and valuable component of kinship and family for people living with AIDS. Buddying is located in both locations of state and family. It points these aspects up in the flexible ways "support" meets clients' needs where often orthodox structures of state and family cannot or will not. Were we only to read buddying as private: "friendship" or "family"; or public: service delivery, social work, I think we run the risk of denying the
empirical variability of buddy relations. Forcing buddying into pre-existing dichotomous categories of democratic theory augments the concealment of the very political struggles of marginalized people. If we read buddying as private friendship, we miss the politics of need and care, and ignore broader changes in state and family structures concurrent to the AIDS crisis. If we read it as public social work, we miss the necessary point that those needs are being met in innovative, flexible, caring, and compassionate approaches, which work, in part, precisely because of the intimate form they take.

The pliancy between state and familial dimensions of buddying has a geography that enables citizenship in these contexts. Mouffe’s theory of radical citizenship has not considered the effects of this "new space" on political engagement. Buddies can readily be understood as de-centered subjects: sometimes family, but also they act as modes of state surveillance. That hybrid of state and family is facilitated by the spaces where buddying actually occurs. Buddying takes place in locations that enable volunteers to support their clients in different ways simultaneously. The overlap of state and familial relations in particular locations highlights the ongoing restructuring of those institutions, but it also enables the variability in types of "support" that clients require. Buddies interactions with their clients took place where they needed to occur. They are very much like state social workers. They are also very much like family. "Just being there" is the spatial metaphor used by buddies to explain their role in clients’ lives. The actual geography of their citizenship, however, shows the importance of space in enabling their political interventions to succeed, and the limitations confronted with political theory’s static and aspatial conceptualizations of "state" and "family".
Chapter 6
From Family to Civil Society
Citizenship at the Quilt Display

"The politics of AIDS is inextricably bound up with our grieving."¹

I. The Canadian AIDS Quilt Display; May, 1993

One of my volunteer tasks was to greet visitors at the entrance of the exhibition hall where the Quilt was on display. I stood and silently watched as the families and friends of people who have died of AIDS walked into the hall. They were strangers to me; and yet when our eyes dared to meet we would exchange these knowing looks! During the display, I watched more forms of grieving and remembering than I had ever seen before in a single place: from howls of laughter, to quiet reflection, to uncontrollable sobbing, to utter shock. The connection I felt with all these strangers and their emotional reactions to the Quilt can only be described as understanding. Indeed, the slogan for the Vancouver display was, "See it and Understand". The Quilt display was at once a political space of civil society, where a group of strangers gathered to make the AIDS crisis visible, to share experiences, and to raise funds. It was also a space of grief for family and friends, a place for them to remember their dead publicly.

Grieving plays an integral cultural role in forming aspects of both family and civil society where AIDS is discussed, in spite of society’s traditional placement of grief and personal loss in the private sphere alone (Weinberg, 1992; Crimp, 1989). The quote that opens this chapter highlights the need to understand the cultural context of AIDS citizenship. But this is no straightforward task, and it has important implications for the

¹ (Froman, 1992, p. 3)
way radical democracy conceptualizes politics. As the vignette above cautions, we miss an important cultural context of citizenship if we only examine its politics in social relations that are antagonistic, as Mouffe does (see below). This advice is especially pertinent given the task at hand: to uncover the multiple locations of citizenship around AIDS. It is simply incomplete to situate radical democratic citizens in the AIDS crisis without looking at their collective public expressions of grief and remembrance. These memorials occur in civil society for several reasons: to raise money for local groups, to educate and make the crisis visible in the city, and to link different social identities in struggles that always surround AIDS. Yet as friends and families of the dead come together publicly, these are familial spaces as well. These themes emerged through the most salient and powerful cultural geography of citizenship I witnessed during my fieldwork: the Vancouver NAMES Project exhibit of the Canadian AIDS Memorial Quilt in late May of 1993. The purpose of this chapter is to show the overlap between familial and civil society spaces at the Quilt Display. By noting this concurrency, I critique Mouffe’s limiting conception of the political. She defines the political as any relation that takes on a "friend versus enemy" dynamic (drawn from Carl Schmitt [1976]). It imposes a singular definition of politics that ultimately negates the familial import of the event, which ignores the political culture of the memorial space.

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2 In Vancouver there are numerous sites that link AIDS' politics with grief and collective memory across civil society: World AIDS Day (December 1), AIDS Awareness Week (in mid-October), and the Walk for AIDS around Stanley Park (in September). The Quilt display, however, made the most powerful connection. As well, the events above are coordinated through the shadow state itself; the NAMES Project (as I argue below) is further removed from the influence of the institutional nature of the shadow state in Vancouver; it better reflects the import of "civil society".
Citizenship— that is, social relations that exhibit 'the political'— emerged at the display but it did so in a way that signified the pain of personal loss of family and friends; not antagonism. Here, the Display was a familial space of the political where "friend versus enemy" fails to convey collective memory's political dynamics.

II. The NAMES Project Quilt

a. background

The NAMES Project Quilt is a moveable memorial that commemorates people who have died of AIDS-related causes. It is not a whole quilt itself, rather it is a series of 12' by 12' patchworks of 8 individual panels onto which a white border has been sewn and grommets fastened at the corners. The individual panels are each 3' by 6'. A panel can be made by anyone: lover, family, friend, coworker, caregiver, even a complete stranger (Brown, 1992). There is no limit to the number of panels dedicated to an individual. Most importantly, however, there is no set rule about how to make a panel (other than the general dimensions). Neither is it required that the person's name be explicitly mentioned on the panel (though names are registered when the panels are turned into the Project.). An awesome diversity in designs results, which is displayed in public space (e.g. figures 6-1 through 6-4). At the Vancouver displays, a blank 12' by 12' panel was left in the center of the display with felt markers. This 'Signature Square' allows visitors to remember the dead in their own private, yet public way (figure 6-5). As well, names of people who have had panels made for them are read out loud by volunteers during the display.

The concept of an AIDS quilt began in San Francisco in 1987. At a tribute to
Figure 6-1 Panel Turned in at the Vancouver Display by Judy Weiser, 1993. Reprinted with permission.
Figure 6-2 Panel Turned in at the Vancouver Display

The Lord is my Shepherd... I shall not want!

IN MEMORIAM
GILBERTO

MENNONITE CENTRAL COMMITTEE
Figure 6-3 Panel Turned in at the Vancouver Display
Figure 6-4 Panel Turned in at the Vancouver Display
Figure 6-5 12x 12's Surrounding the Signature Panel
Harvey Milk, placards were publicly displayed listing the names of people who had died of AIDS in the city. A political activist and Quaker, Cleve Jones, was struck by the power of the display’s simplicity. Racked with grief, Jones was anxious to recreate this memorial in order to work through his pain and anger at the AIDS deaths of people he knew. He came up with the idea to make a quilt for his friend Marvin Feldman, who had died four months previously (Ruskin, 1988). That was the first panel. From there, the idea caught on locally, nationally, then internationally. The NAMES project started in Canada in 1988. In the summer of 1989 the NAMES Project Foundation-Canada sponsored a seven city display. 50,000 Canadians saw the Quilt and over $80,000 was raised during the tour. To date there are seven local affiliates which have hosted a Quilt display: Halifax, Montreal, Ottawa, Toronto, Winnipeg, Calgary, and Vancouver. Displays have also been hosted in Kingston, London, Sudbury, Edmonton, and Victoria. Several other national affiliates have begun, and in June of 1994 the first global display of the national quilts was held in Hyde Park in London. The Canadian AIDS Memorial Quilt was part of that display.

The Quilt was shown in Vancouver first in July, 1989 at the city’s art gallery. Several volunteers at that display, along with others who were involved in the local response to AIDS struck a 9 person steering committee in the Fall of 1991 to bring the Quilt back to Vancouver by May of 1993 (see Table 6-1). 172 volunteers were recruited through local ASOs, hospitals, and gay community venues to staff the event. The display

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3 Harvey Milk was the first openly gay San Francisco city Supervisor, who was assassinated along with Mayor George Moscone in 1978 by fellow supervisor Dan White. See (Shilts, 1982).
<table>
<thead>
<tr>
<th>Affiliation</th>
<th>Count</th>
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<tbody>
<tr>
<td>AIDS Vancouver</td>
<td>1</td>
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<tr>
<td>Healing Our Spirit</td>
<td>2</td>
</tr>
<tr>
<td>Names Project Canada</td>
<td>2</td>
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<tr>
<td>Names Project (U.K.)</td>
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<tr>
<td>Positive Women’s Network</td>
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<tr>
<td>St. Paul’s Hospital Palliative Care Ward</td>
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<tr>
<td>Vancouver Meals Society</td>
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<td>Vancouver Persons With AIDS Society</td>
<td>2</td>
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took place at the British Columbia Enterprise Hall, on the former Expo '86 cite, from May 20-23 (figure 6-6). During those four days in May more than 4,200 people saw the Quilt, and over $5,000 was raised for local organizations that provided direct service to people living with AIDS (see Table 6-2). Fifty-four new panels were turned in at the display, bringing the total number of panels to 414 for the Canadian Quilt.

b. grief or politics?

A debate has emerged around the Quilt, almost since the first 12' by 12' squares were sewn, about whether or not it is political. Allied against a political reading are two very separate interpretations. Most vocal is the activist stance, which argues that collective memorial events like the Quilt sap important energy that is best directed towards explicit, confrontational political action (Kramer, 1989). Along Freudian lines, mourning and melancholia signify a turning away and denial of reality, which activists would argue de-politicizes the AIDS crisis (Crimp, 1989; Freud, 1937). Mourning, then, is seen as anti-political, at odds with activism as it saps precious energy into narrow, selfish and collectively unproductive channels. This criticism rests on an interpretation that stresses the sole function of the Quilt as a venue to express grief and mourning. If one reads letters enclosed with panels when they are turned in, they are not full of political manifestos or arguments for social justice (see Brown, 1992). Instead, they are celebrations of the individual memorialized. They explain who that person was, why s/he was important. Their functions as expressions of grief and mourning are certainly impossible to ignore.

Others refuse to locate politics at the display. It as irrelevant and inappropriate to
Table 6-2: Affiliations of Names’ Readers at the Opening Ceremony of the Quilt Display

<table>
<thead>
<tr>
<th>Position</th>
<th>Organization/Role</th>
</tr>
</thead>
<tbody>
<tr>
<td>President</td>
<td>Healing Our Spirit/B.C. First Nations AIDS Society</td>
</tr>
<tr>
<td>Director</td>
<td>Ballet British Columbia</td>
</tr>
<tr>
<td>Member</td>
<td>British Columbia Legislative Assembly, Vancouver-Burrard</td>
</tr>
<tr>
<td>New Democrat Federal Candidate for Vancouver Centre</td>
<td></td>
</tr>
<tr>
<td>Canadian Airlines International</td>
<td></td>
</tr>
<tr>
<td>Minister of Health</td>
<td>Province of British Columbia</td>
</tr>
<tr>
<td>Councilors</td>
<td>City of Vancouver (2)</td>
</tr>
<tr>
<td>Canadian Mezzo-Soprano</td>
<td></td>
</tr>
<tr>
<td>Liberal Federal Candidate for Vancouver Centre</td>
<td></td>
</tr>
<tr>
<td>Artistic Director</td>
<td>Vancouver Playhouse</td>
</tr>
<tr>
<td>Chairperson</td>
<td>Coquitlam British Columbia School Board</td>
</tr>
<tr>
<td>Impresario</td>
<td></td>
</tr>
<tr>
<td>Director</td>
<td>British Columbia Centre for Disease Control, B.C. Ministry of Health</td>
</tr>
<tr>
<td>Member</td>
<td>Parliament, Burnaby-Kingsway</td>
</tr>
<tr>
<td>Director</td>
<td>Vancouver Meals Society</td>
</tr>
<tr>
<td>Vice President</td>
<td>Vancouver Persons With AIDS Society</td>
</tr>
<tr>
<td>Chair</td>
<td>Board of Directors, AIDS Vancouver</td>
</tr>
<tr>
<td>Director</td>
<td>Healing Our Spirit/B.C. First Nations AIDS Society</td>
</tr>
<tr>
<td>Manager</td>
<td>Positive Women’s Network</td>
</tr>
<tr>
<td>President Emeritus</td>
<td>Vancouver Persons With AIDS Society</td>
</tr>
<tr>
<td>Mayor</td>
<td>City of Vancouver, British Columbia</td>
</tr>
</tbody>
</table>
Figure 6-6 The British Columbia Enterprise Hall
the Quilt display. In Vancouver during World AIDS Day in 1992, a downtown storefront exhibited AIDS prevention art, much of it quite political (Miller, 1992). In the signature book at the exhibit, one person complained with bitter irony that it seemed strange to be in a room talking about "discourse" while so many of his friends were dying. By this interpretation politics is thought to diminish the personal pain of loss of a loved one because it de-focuses attention from the love that linked these people together. These critics bridle against coding citizenship into the experiences of making or viewing the Quilt. Mohr (1992), for instance, argues a political reading corrupts the celebration of an individual's life taking place in civil society.4 Politics and grief must be kept segregated. Here, politics interferes with mourning as well and is discouraged by mourners, though for very different reasons than those activists would stress. This attitude was stressed during my volunteer training. During the final training session volunteers were told that the NAMES Project had invited representatives from the Ministry of Health to read names at the display (see Table 6-2). Volunteers loudly booed and sneered this invitation because, they argued, the Ministry has not been seen as doing enough for people living with AIDS. We were told in extremely uncharacteristic officious tones, that, "This is not a political event."

Others insist that the focus on the individual-- inherent in the panels themselves-- does not negate the Quilt's political potential. Directly counter to Mohr's liberal individualism, Hawkins (1993, p.772) argues that it through a strong focus on the

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4Mohr is an avid liberal; he draws a sharp spatial distinction between what ought to occur in private and public spheres.
individual that the politics of the Quilt actually becomes manifest:

"Contrary to the common NAMES Project disclaimer, 'politics' is by no means foreign to the AIDS Quilt. In any event, what characterizes the overt political witness of the NAMES Project is the degree to which social or political statements are not only personalized but actually personified."

The political nature of the Quilt, proponents argue, stems precisely from the ignorance and erasure of mourning and grief that needs to be witnessed- this witnessing must take place in a supportive environment because grief cannot be worked through under hostile circumstances spawned by AIDS' stigma. Several panels on the Quilt have only first names, nicknames, or initials, because relatives refuse to divulge that their loved one died of AIDS. One letter to the American NAMES Project conveys that context poignantly:

"I made this quilt piece for C.J. The Quilt does not bear his name because his family does not want anyone to know their son died of AIDS. I met C.J. a month before he died. I visited him every day until he died. He struggled a great deal and knew of his family's struggle to accept him and the fact that he had AIDS. The saying on the quilt piece, 'I love you a skyful' is one his mother chose when I told her I wanted to do a piece for the Quilt. It is what she used to say to him from the time he was a little boy.

It was my hope that seeing this as part of the NAMES Quilt she would be able to grieve openly with others who have had loved ones [who have] died of AIDS. This has not happened yet. I have hope it will. Until then, I celebrate the life of this wonderful gay man with this panel sewn in love."

-- Kay. (Brown, 1992, p. 211)

This letter contextualizes the need for a space of collective memory and memorial for family and friends, which the Quilt enables (see Section IIIa below). Sturken has been the most forthright in pressing for an explicitly political reading of the displays:

"Cultural memory generated by this memorial to a controversial epidemic can be seen as inherently political; it defiantly marks the human toll of the epidemic and says: We must mourn these lives lost, challenge the homophobia that worsens the AIDS epidemic, and fight the policies that make prevention and treatment so difficult. Yet cultural memory is
by no means a simple, liberatory act of negating official history or creating a 'united front'. The AIDS Quilt is the locus of a clash of identity politics, where issues of race, gender, sexuality, and class are in conflict. The cultural memory generated by the quilt is often subsumed into historical and national narratives, and becomes part of the controversial marketing of the quilt. The quilt raises fundamental issues around the politics of public commemoration, such as for whom memorials are created and to whom they belong, and how a memorial defines who is forgotten." (Sturken, 1992, p. 66)

For her, politics seems to expand and become the defining feature of the Quilt, losing the dead in the process. Perhaps a more balanced perspective is offered by Crimp (1989).

In a now classic essay, he stresses the need for both mourning and militancy in the AIDS crisis. The implication that he draws for the Quilt is that militancy can occur through mourning. It is useful to quote him at length (pp. 8-9):

"'We look upon any interference with [mourning] as inadvisable or harmful,' warns Freud [1937, p. 125]. But for anyone living daily with the AIDS crisis, ruthless interference with our bereavement is as ordinary an occurrence as reading the New York Times. The violence we encounter is relentless, the violence of silence and omission almost as impossible to endure as the violence of unleashed hatred and outright murder. Because this violence also desecrates the memories of our dead, we rise in anger to vindicate them. For many of us, mourning becomes militancy."

Certainly for this reading of the Quilt we could adopt Mouffe and Schmitt's theoretical cartography on which they locate citizenship: the friend and enemy duality.

Recall that Mouffe draws on Schmitt to underscore the conflictual nature of modern democracy, against Oakeshott's conservative definition of society as a public cooperative enterprise of citizens (the res publica). In Mouffe's (1993, p. 69) own words:

"Political life concerns collective, public action; it aims at the construction of a 'we' in a context of diversity and conflict. But to construct a 'we' it must be distinguished from a 'them', and that means establishing a frontier, defining an 'enemy'. Therefore, while politics aims at constructing a political community and creating a unity, a final unity can never be realized since there will permanently be a 'constitutive outside', an exterior to the community that makes its existence possible. Antagonistic forces will never disappear and politics is characterized by conflict and division."
Mouffe draws on his definition because it is at once open enough to capture a spate of social relations that would enable new spaces of citizenship to be recognized as political. Simultaneously, it points to the modern character of democracy: the absence of common good producing conflict and division (Lefort, 1986). Schmitt's definition of politics as a friend-or-enemy relation can be applied to the politics of AIDS generally. During the AIDS epidemic, the enemies have included the state, a broader homophobic society, those who do not understand, even the virus itself.6 Previous chapters have noted antagonisms amid Vancouver’s spaces of citizenship. As a space where elements of citizenship are struggled for, however, Quilt displays do not pivot on antagonism yet are new spaces of citizenship nonetheless. I trace how the elements of citizenship emerged at the Vancouver display below, before taking up the implications of this empirical challenge to Mouffe’s theoretical project.

III. Emergent Citizenship in Civil Society

a. Visibility

The location of the Quilt display was hardly a neutral decision politically or culturally. The British Columbia Enterprise Hall is a glass-enclosed public area overlooking False Creek (figures 6-6 and 6-7). It was built by the Social Credit Government as part of the 1986 Expo site (it was in fact the British Columbia pavilion),

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5 Indeed, Sturken (1992 p. 77) states explicitly, "...one could argue that through its construction of an enemy, the quilt is inevitably an accusation, and hence an object of anger."

6 Patton’s (1991) chapter that contrasts discourses within immunology and virology make the virus-as-enemy reading startlingly clear through their espionage and warfare tropes used to explain the workings of HIV in the body.
Figure 6-7 The Location of the Quilt Display in Downtown Vancouver on the edge of Yaletown.
and remains the only standing complex from that event. As Ley and Olds (1988) have suggested, popular local imagery of the Vancouver World Expo is complicated and contradictory; a straightforward hegemonic reading of mass culture will not do. The Enterprise Hall, as a remnant of Expo, and a symbol of the Social Credit government's preference for 'free enterprise' over government solutions to public problems, had stirred up antipathy in the gay community—especially in light of that government's antagonistic attitude toward gays and lesbians. That animosity, however, took the form of spatial appropriation rather than avoidance of the hall. In 1990, for example, the Hall and surrounding Plaza of Nations (a glass-roofed, open air amphitheater alongside the hall) were rented by the Gay Games Committee, and renamed "Celebration Centre" (MVAAA, 1990). Just beside it, the hall housed an artisans' market by day, and parties for the athletes and visitors by night. Similarly, when the steering committee for the Quilt was deciding on a venue for the Quilt—looking for indoor spaces in downtown Vancouver hotels—the director of AIDS Vancouver in an informal chat with the Quilt's chair suggested the Enterprise Hall, because its association with the Gay Games and the Social Credit party would have resonance within the gay community precisely over the issue of erasure and stigma. It was, in a sense, gay appropriation not merely of public space, but a public space in civil society that had been built and feted by neoconservative cultural politics in British Columbia.

Further, the location of the Hall itself is culturally significant as a political

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7 The connection is more direct than the text implies. The Executive Director of AIDS Vancouver at the time had been the Executive Director of the Games. Interestingly, he is also an urban geographer by training.
appropriation of urban space. The Hall is located at the very edge of the downtown peninsula just the other side of Yaletown from the West End (figure 6-7). As I have discussed in previous chapters, Yaletown is the location of the Pacific AIDS Resource Centre\(^8\) (PARC), and many other AIDS service organizations. While never a node of gay culture in the city, Yaletown is certainly an edge (Brown, 1995). To have a Quilt display on the very edge of Yaletown represents a presence, if not an encroachment, of gay visibility in Vancouver; an extension of what is considered safe space for gays and lesbians in the city. Visitors to the Quilt from the West End and downtown would often walk through Yaletown to get to the hall, many visibly overcome with grief and sorrow; a less gay-friendly neighborhood (such as around hotels in the downtown core) would not have been as safe. For these reasons the use of the Hall, itself, was a space of citizenship in city politics, insofar as it stressed cultural appropriation and resistance to erasure of the AIDS crisis and homophobia in local culture and the former government especially. Citizenship, in this way, articulates with historical relations between the gay and straight communities in Vancouver.

In talking with a member of the steering committee just after the Quilt display finished, the extent of erasure- and its links to grief and mourning- were made painfully clear to me in an anecdote she shared with me. I quote her paraphrasing of the conversation below at length, because it emphasizes the extent of erasure that makes Quilt displays both emotionally- and politically- necessary:

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\(^8\) As noted in Chapter 4, PARC houses AIDS Vancouver, The Vancouver Persons With AIDS Society, The Positive Women’s Network, and the Women and AIDS Project all under one roof.
"And I answered the phone and I got, 'I want to know how somebody's name gets on the Quilt.'

And I gave them this whole speech about how if you want to make a panel, and if you want to do this, and etc. Gave her the whole speech.

And she said, 'No. No. You don't understand. I'm afraid someone's going to put my son's name on a panel.'

And I said, 'Well did your son die of AIDS?'

'Yes.'

'Well, then they're perfectly welcome to do that.'

'Well, how do I keep them from doing that?'

And I said, 'Why would you want to?'

And she said, 'Don't give me any lectures!'

And I said, 'Ma'am, I think I'm probably going to completely disagree with you, but let's stay on the phone and let's talk. You don't have to listen to me if you don't want to. You can always hang up. But let's see if we can talk first. Why wouldn't you want your son's name to be on the Quilt?'

'Well, someone will find out that he had AIDS.'

'Well, you just told me that he did.'

And she said, almost in tears, 'There are some very cruel people out there.'

And I said, 'You mean people who would know that your son died of AIDS?'

She said, 'Yes. You have no idea what they could do.'

'No,' I said, 'but I do have an idea what fear can do. And I don't mean to lecture you; and I don't mean to make it sound like your fear isn't real, because you sound very frightened. But what would be the worst that would happen if they knew?'

'I can't begin to tell you,' she said.

'Well, what would be worse than living with what you're living with now?' And it wasn't my place to lecture her, nor to say, 'Lady, you're full of it! There's nothing
wrong with dying of AIDS! You should get over it!'.... But I said, 'Tell me his name. I have the master list. I can tell you if there is already a panel made for him. But I'll also tell you that if there is, we're showing it.'

'Well, I'll have to get a court order!'

'Well you go right ahead. This stuff belongs to the NAMES Project Canada. It's on public display on a contract. And if you want to make a scene in the press, you just go right ahead. We'd love it. We could use the publicity. It'd be great.' Well, she told me his name, and I looked, and there was no quilt panel for him then. I had no idea if someone was making one for him though [who would turn it in at the display.] [So I told her there was no panel for him,] 'and the people that you're afraid of wouldn't go to a Quilt display anyway! So why don't you come down this weekend and see what the Quilt is, and see if it changes your mind anyway?'

Well, [when I mentioned this story to people on my steering committee] two of the nurses from St. Paul's went, 'Oh yeah. We know her! She's really, really, really rich. And she's really, really, really ashamed.' And there was a collective panel, with like fifteen names on it. And his name is one of those names. So his name is now registered. And I don't know if his mother saw the display or not. But you talk about phobias and the need for change! And I just thought this story should be taped."

The visibility that functioned at the display can be understood as a component of citizenship because it presses the question of membership in a political community (figures 6-8 and 6-9). By imploring fellow citizens to take notice, and to provide a context where mourners-citizens themselves could be witnessed, the Quilt forces participants to consider their relationship to others affected more directly by the crisis.

b. suturing social identities

However agile a refashioned concept of citizenship will be, Mouffe argues that to be truly radical it must be able to connect different social identities formed around struggles such that a new "democratic imaginary" becomes hegemonic in opposition to the current power of liberal democracy (Laclau and Mouffe, 1985). While the Quilt display did not explicitly link different social struggles (say, of sexuality, race, class and
Figure 6-8 Visitors at the Display
Figure 6-9 Visitors at the Display
gender), it did work at connecting different social identities around the AIDS crisis itself; in this way, it became more than just a 'gay disease'. A teacher from a reform school in Burnaby brought his class to see the Quilt. They arrived joking, loud, and cocky; with a decidedly detached 'cool' attitude towards the experience. As they walked out the door, none of the boys would look at me, keeping their heads bowed. A few whispered, 'thank you', but mostly they were silent. Their teacher took them outside where they sat in the Plaza of Nations and discussed what they had just seen. Here, I suspect, the Quilt worked to link them to the AIDS epidemic, and the losses it has caused. This explicit pluralism of the Quilt nourishes our concept of civil society, though not in simplistic ways to which communitarians aspire. As Weinberg (1992) has argued, the democratic principle of completely open participation is a strong theme around the Quilt. It is open to anyone - regardless of their proximity or distance to the AIDS crisis. Moreover, the manner in which participation can occur is open as well: one can make a panel for a complete stranger or a loved one, one can attend or volunteer (figure 6-10). Yet as community was formed through the participatory ideal, the strong theme of difference negated any simple axis of community. A plurality of social identities was certainly evident at the Quilt (see figures 6-11 through 6-15). Foremost, the emotions at the Quilt were varied; in other words, different people had different reactions to it. There are simply no rules on who to be, or how to be at the Quilt, as Hawkins (1993, p.755) describes:

"Aside from the grommeting together of panels in twelve-foot squares for major displays, there is no larger principle of organization at work: no hierarchy, subordination, or ranking; no "metanarrative" that tells a single story or even settles on a particular tone. The Quilt is the ultimate collage, one that is constantly being reformed, reinvented. Its
Figure 6-10 Volunteers and Visitor at the Opening Ceremony of the Quilt Display.
Figure 6.11 Visitors at the Display
© Judy Weiser, 1993. Reprinted with permission
Figure 6-12 Visitors at the Display
© Judy Weiser, 1993. Reprinted with permission
Figure 6-13 Visitors at the Display
© Judy Weiser, 1993. Reprinted with permission
Figure 6-14 Visitors at the Display
© Judy Weiser, 1993. Reprinted with permission
Figure 6-15 Visitors
at the Display
© Judy Weiser, 1993. Reprinted with permission
center is wherever you find it; no one tells the viewer where to start, finish, or pay particular attention. Nor does it require of the viewer anything like an "appropriate" response."

This is an important contextual point to make, since the media focus on representations of sadness around the Quilt. Figures 6-16 through 6-19 highlight the varying emotions witnesses by one photographer at the Quilt. Images from Ruskin’s (1988) book make the same point.

Another way the Quilt works so effectively to evoke politics by linking different social identities is in its juxtaposition of scales. As Mohr would argue, the Quilt is an intensive celebration of the individual who had died from AIDS. Clearly people attend the display to remember specific loved ones. The discourse of the individual and her/his (lost) contribution to the mourner’s lives is hardly disguised. Yet such a reading is wholly incomplete, for the Quilt is a collection of panels, and is constantly growing. So literally difference is sewn together. In an interview I did with another Quilt volunteer, she brought up this tension between individual and societal loss by speaking about her buddy, who had died the previous Winter:

"It doesn’t know any boundaries! And I think that the other thing that gets me so passionate about it is that it’s young people. We’re losing a whole generation. Look at the Quilt! Look at the ages on it! They’re all in their early thirties! I’m 36. And my buddy was 35 in November. So he’s just so young! It’s just so sad. God, he did everything! He was a world champion figure skater. He was a designer. His stuff sold on Rodeo Drive. And that’s lost! And that’s not to diminish the other people that have died of AIDS."

In this way, one need only scan across the arena to witness the extent of loss. One need only look at the dates on early panels - 1983, 1984- to see the emerging history of the Quilt, and then walk over to where the new panels have just turned in to see it stretch
Figure 6-16
Emotions at the Quilt
Figure 6-17
Emotions at the Quilt
Figure 6-18
Emotions at the Quilt
Figure 6-19
Emotions at the Quilt
across time (figure 6-20). I spoke briefly with one of my interviewees who walked between the squares, limping with a cane because of his peripheral neuropathy. Though we hardly knew each other, he confided in me about all the people represented by panels there that he had known. He then openly wondered- as a founding member of Vancouver PWA Society- why he had survived all the others.9

These foci on individuals who have died are also held in tension at a display, with the wide spatial array of AIDS' deaths. Names from across Canada are named side by side on the Quilt. The Canadian Quilt constantly called to mind the American Quilt, and other national affiliates. In other words, it became impossible to only think about one loss, or one person. Rather, that loss was- by the size, the spatiality, and the temporality of the Quilt- situated in an epidemic of loss. As Sturken (1992, p. 69) has argued,

"The tensions between these two levels- the quilt as a massive project versus the quilt as a product of intimate, local communities- is a major part of the quilt's complex effect."

Later, her reading is more precise (p. 79):

"While an individual panel carries a particular power in its intimate way of speaking to the dead and the viewer, that same panel carries the weight of a collective message of a community and of a nation when it is part of a vast display."

The display then, was a space that functionally brought together a wide variety of social subjects, with no simple axis of community, nor an overarching identity of "citizenship". Diversity and difference were witnessed by several volunteers at the Vancouver display (including myself). One woman in particular discussed it at length in the context of the range of emotions she experienced:

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9 This person died in December, 1993.
Figure 6-20 Quilt references across time and space.
"I really liked the people at the Quilt, especially because I didn’t know ten billion other people who were working on the Quilt, or even ten! But once, going after the first night, I really felt the rest of the people- and it was a very warm, warm feeling. I liked that a lot. And what else? Oh, I cried a lot. Yeah. It was very sad. I found it very sad. But not always. You know, sometimes I would just be there, and I’d be talking with friends and seeing people, and we’d be laughing [remembering someone they had lost]. Or I’d see funny panels and laugh. Or I’d see really beautiful panels and admire them. It wasn’t like there was no sadness at all. It was just that there were times when I wasn’t so totally sad. You just think, ‘This is so unbelievable!’ And also, of course, I thought, none of us would be doing this- none of us would be spending hours and being here and doing all this stuff if it wasn’t for all these people that had died. And was just- like in a way it was just sickening, really. Like, the Quilt is a really beautiful thing, but it’s such a paradox because this thing has been created that’s so beautiful, but it’s so fucking unnecessary! You know? And then I saw these people on Sunday, who I don’t know very well. I just met them all once. But one of the guys, he and his lover were there. And he was wheeling his lover around in a wheelchair. And he looked really, really, really sick. Most everybody else who was coming, you know, they looked like they were friends or relatives or people who were pretty healthy. But that man in the wheelchair staring at the panels just hit home to me. This is who it is, and here he is looking at panels. And he will- possibly quite soon- be in the position of having a panel for himself. So that was very sad. I had to go home shortly after that. Yeah.

"The other thing I did like about the Quilt is that it was very- the people who worked on it, you could tell- it was very inclusive in terms of- representational- in terms of who really is affected by AIDS. Like, it wasn’t just gay men. I mean, there were lots of gay men, but it was mothers and sisters and friends and brothers. The minister who works at St. Paul’s [hospital] was there. It was just- everybody was there! And I liked that a lot, because that’s the truth of it. So, I liked that."

Through a variety of means, different social identities and emotional responses were linked together by the Quilt display into a united opposition to the AIDS crisis. The different social identities ranged across not only visitors and volunteers, but the dead themselves in a space of civil society. The ranges spanned both time and space, yet were in a process of constant juxtaposition at this single event. Moreover, this democratic community, because of its many axes of difference, could not be reduced down to simplistic notions of community, as communitarians would have it. Across time and space, the Quilt display brought together a wide variety of social subjects- both living and
dead- with an emphasis on individuality and difference. Just as Mouffe would have it, then, citizenship emerged through an explicit pluralism.

c. Fundraising

Finally, the most explicit means by which we can see citizenship at the Quilt display is through its function as a fundraiser. Donation bins were located at the entrances and exits of the Hall, and visitors tended to contribute on their way out, rather than on their way into, the display. The Quilt leaves not only an emotional impression, but a political understanding of the need to contribute- in a financially direct way- to the delivery of services by the AIDS shadow state. This point can be sharpened further. It was explicitly stated at the display that all contributions would go directly to people living with AIDS and HIV; this point is borne out in Table 6-3, which lists the organizations that received Quilt proceeds. Each recipient was given a check of approximately $1,000 from the display. It is noteworthy, however, to stress where the money did not go. The unifying theme of these specific programs (or organizations) is that they provide direct support services to people living with AIDS, rather than education or prevention services aimed at people who are HIV negative. This is a common-- and with the bureaucratization of ASOs, an increasingly frequent-- point of contention for those reflecting on the local response to AIDS in Vancouver. The implication here is that the money would not go to salaries within local ASOs. To direct funds towards salaries is likely to invoke the cynical "PLOA" charge (person living off of AIDS). As a fundraising venture in civil society, the object of the display was not only to pay tribute to a person who has died, but also to financially assist someone- likely a complete
<table>
<thead>
<tr>
<th>Program</th>
<th>Organization</th>
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<tbody>
<tr>
<td>Complimentary Health Fund</td>
<td>Vancouver Persons With AIDS Society</td>
</tr>
<tr>
<td>Emergency Assistance Fund</td>
<td>AIDS Vancouver</td>
</tr>
<tr>
<td>Positive Women’s Network</td>
<td>(same)</td>
</tr>
<tr>
<td>Healing Our Spirit</td>
<td>First Nations AIDS Project</td>
</tr>
<tr>
<td>Vancouver Meals Society</td>
<td>(same)</td>
</tr>
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</table>
stranger-who continues to live with the virus and its effects. That form of citizenship is rendered all the more powerful in the context of attempting to meet the needs of people with AIDS directly, in the local context of a rapidly increasing bureaucratic shadow-state apparatus.

In sum, three themes capture the elements of citizenship with social relations at the Quilt display in Vancouver. As a mode of education and visibility, the Quilt made the AIDS crisis understandable and tangible for a wide variety of people. This, in turn, caused a certain pluralism and linking of diverse social identities around the tragedy of the pandemic. As a fundraiser, the Quilt also provided an opportunity to give to organizations that deal directly with PWA support, rather than education or prevention. These elements of citizenship, however, must be understood in their cultural context of kinship, which I take up below.

IV. Familial Space

a. the political as 'friend-or-enemy'? 

It is possible to locate an "antagonistic moment" around the Quilt display: friends were inside the Quilt, they were represented in the panels, in the visitors, in the volunteers. "Enemies" (if they had any presence at all during the display) were outside; they were the ones who did not understand. Their (in)actions fuelled the need for the Quilt itself; the reason fundraising was even necessary was because of state inactivity. The display venue itself was chosen in bold opposition to an anti-gay neoconservative government and its lack of action on AIDS issues. The theoretical reasons for Mouffe's definition of the political are telling, here. Schmitt was seeking to do several things with
his concept. First, he was attempting to unhitch the political from its geographic basis in a nation state. Thus he was looking for a more theoretical essence to what makes a phenomenon political.¹⁰ Second, he wanted to move away from a substantive definition of the political (a goal Mouffe shares), to one that would provide a framework across a variety of social situations. The key, then, for Schmitt was an "antagonistic moment" that potentially could manifest itself across all manner of social interactions, including those not necessarily state-centered (1976, p. 30).

Mouffe, then, relies on Schmitt because he draws out the conflict in modern democracy, and (allegedly) rejects a definition of politics exclusive to certain social relations/spaces. She therefore instructs us to look for citizenship where these antagonistic moments occur. I reject this characterization of the politics of the Quilt. Citizenship at the Quilt display did not emerge as an antagonistic moment pitting friends against enemies. The danger here is that a profoundly anti-democratic reading is tendered by abstract political theory that squelches the geographic context of memorial space. It imposes a theoretical meaning of politics onto the display space that was not salient there. Here, I suspect, is a major failing of political theory's tendency to remain autonomous from the empirical work done in urban inquiry. Antagonism was not so culturally salient at the Vancouver display; grief, mourning, and cultural memory were. I am drawn to this conclusion by both theoretical and ethnographic sources. In the

¹⁰ It is interesting that Mouffe does not seem to notice how Schmitt's essentializing practice has spread into her own work by borrowing his definition of the political. She seems to pay more attention to his second stated goal of finding a less substantive, more (empirically) flexible definition of politics.
sections below I consider the literature on postmodern memorials, and the cultural meaning the event had for visitors, while empirically stressing that the Quilt was a space for family and friends to come together. My point is to demonstrate that actual locations of citizenship can reject pre-ordained definitions of the political (like Mouffe’s use of Schmitt) precisely because those spaces exhibit 'radical democratic' qualities than their theoretical representations would allow with a singular, imposed definition of politics.

b. family and friends: memorial strategies

I have already noted the openness of the Quilt tradition, lacking rules, hierarchy, membership, or style. The Vancouver Affiliate’s Volunteer Training Handbook, (1993, p. 3) for instance, gives the following advice:

"During the course of this display you will encounter visitors from all walks of life, all ages, races, etc. Many of these visitors will have some personal connection with the Quilt, either because someone they know is represented by a panel, or maybe they or someone they know is dealing with HIV in his/her own life. Viewing the Quilt can have a strong emotional impact, whether it is the first time or the tenth visit to this or other displays. It is not our role to intrude on visitors’ experience of the Quilt, but rather to give them the physical as well as the emotional space they may need." (emphasis original)

This flexible and pluralistic orientation to sites of collective memory has been recently recognized by historians and cultural critics alike as an important challenge to simplistic political orientations to memorials. Moreover, it opens up the need to recognize the way the meanings placed on such events by family, kin, friends, etc. should not be subsumed by political renderings. Bodnar (1992) most recently has investigated the intersections of personal, individual meanings and broader hegemonic framings historically in American public memorials. He concludes with an emphasis on the negotiations that occur at the site of a memorial (p. 245):
"Citizens drew upon the past and present to invest public commemorations and memorials in America with meaning. This public expression of memory was entirely dependent upon a process of symbolic communication that simultaneously allowed for a diversity of expression and privileged some expressions over others. To the degree that these expressions were official and abstract, their pluralist dimensions were obscured. On the other hand, their multivocal and pluralistic quality tended to constrain both their ideal restatements of reality and the political objectives of officials. Public memory was never clearly or permanently defined but, rather, it was continually constructed in a realm where the small- and large-scale structures of society intersected."

The Vietnam Veterans Memorial is perhaps the best contemporary acknowledgement and expression of the complexities in trying to fix public memory in a monument. Interestingly, parallels between the AIDS Quilt and the Vietnam Memorial are often made on the basis of this radical indeterminacy, as well as the strength of the emotional responses to it (Blair et al., 1991; Hawkins, 1993). Scruggs and Swerdlow’s (1985) account of the struggle to build the wall traces out the multiple meanings (from family and friends) that collided unexpectedly with the memorial’s function, design, and even its placement. They argue that the design of the monument - in naming names of the dead (over 58,000 of them) - while simultaneously reflecting the families and friends back to themselves on the black granite - was politically neutral, but signified personal remembrance, education, and the extent of loss. The Quilt works in a similar way. By ‘naming names’, it insists we never forget people who have died of AIDS (figure 6-21); by providing kin the opportunity to contribute to the expansion of the monument (by creating panels, putting on the display, even visiting) they are reflected in this public memorial as well (Hawkins, 1993) (figures 6-22 through 6-24). Blair et al. (1992) have argued that these strategies must be seen as postmodern markers of collective memory: its ‘multiple authorship’, its textuality. Moreover, they insist that the monument’s rhetorical
Figure 6-21 Naming Names
These friends and relatives each made a portion of their quilt in different parts of Canada. The Vancouver Display was the first opportunity they had to meet each other and see the finished panel.
Figure 6-23
Volunteers hoisting at 12' x 12'.
© Judy Weiser, 1993. Reprinted with permission
Figure 6-24
Unfurling a 12' x 12' at the Opening Ceremony
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strategy is clearly postmodern insofar as it exhibits a "both-and" approach to its signified. In other words, the memorial encompasses not just multiple, but contradictory readings. Perhaps the most insightful remark on this paradox is that this postmodern attitude is augmented by the placement of the Vietnam Veterans Memorial Statue nearby (a decision that nearly thwarted the project overall). This spatial juxtaposition, when combined with the lack of a singular voice to the monument, conveys an ultimately political tone through which those voices speak:

"The dual and dialectical expressions of the two 'parts' of the Memorial add difficulty to any reading. Most important, they intensify the sense that the Memorial speaks politically. The two components oppose one another in what they say about the war. This opposition denies synthesis." (Blair, et. al., 1992, p. 281)

While the literatures on collective memory and postmodern memorial treat the political in the conventional state-centered way, they are nonetheless helpful in identifying the potential for multiple interpretations and resistances to political readings at memorials like the Quilt. In this way, they do not necessarily deny the emergence of citizenship, or their salience in civil society, but rather they stress the cultural significance of public memorials as sites where family and friends' grieving can occur as well.

c. 'antagonistic moments': beside the point at the Quilt

While the section above raised theoretical objections to imposing a predefined (and inaccurate) definition of the political in interpretations of postmodern memorials, here I want to bring moments from the Vancouver display itself to reject the fixed, incorrect definition of "friends versus enemies" as the political dynamic there. Consider a random

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11 The distinction is made between "both-and" interpretations and what the authors see as the more modernist, "either-or" approach to architectural practices.
sample of the messages left by visitors to the Quilt on the Vancouver display’s signature square (see figure 6-25). They do not highlight an antagonistic citizenship of AIDS politics. Rather, like the panels themselves they are expressions of grief, loss, and mourning, whose need for visibility makes them political, makes them citizenship. These private messages are written publicly, in a space full of strangers. Notice that they often address the dead directly, as much as pay tribute to them. As bystanders, we are left to wonder about the specifics raised in these messages, but we are always certain of the importance of the messages themselves:

"Dearest Janet Murphy:
We love and miss you dearly and wish you were here.

"Gary:
I miss you. 12 years together just wasn’t enough time. I will always love you.
Tom xxx"

"To my son:
We had so little time together, but I always loved you."
Dad

"Dear Richard:
You were my beloved brother, but you were so much more, my friend. You taught me to see the beauty in all things. You taught me that we are all created equal. You listened when no one else would. You were my bastion of strength. No one understood me like you did. You gave so much and in the end, left nothing for yourself. You were unselfish to the end. I miss you Rick, sometimes I feel so alone. Remember the things we planned to do together? I did them all, but it wasn’t the same without you.

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12 One reviewer has questioned my use of these messages, asking, "Is it entirely appropriate to use the entries [on the signature panel]? While powerful, could it be seen as invasive? Or are these public statements?" This question ignores the reason the Quilt display was held in a space of civil society and not some more secluded 'private' location. Its public collection of strangers allowed for a visibility of mourning, grief, and remembrance that has been almost impossible during the AIDS crisis; that visibility is the entire point behind 'naming names' through the Quilt.
Figure 6-25
Visitors write on the Signature Square
© Judy Weiser, 1993. Reprinted with permission
I never did get to feel your arms around my waist on my motorcycle. I got the X-mas tree alone this year. God, I miss you. I'm so sorry I couldn't be there for you in the end like you were always there for me. I think of you everyday and want you to know you're the best brother I could ever ask for. I will love you always, Richard.

'Don't let the bastards get you down!'

Your proud brother, Nathan xoxox

"Dad:

I never thought things would be so tough without you. Wish we could have had more time together. You have enriched my life more than I could have ever told you. I am proud to be able to call you my dad. You changed more lives than you'll ever know.

Love, Steph (Teppy)"

"To Dan Cotton:

By the time I met you you were so sick. They had you on so many painkillers that I don't know if you really recognized me. I hope holding your hand helped. You fought so hard. You said you could give your own injections but you could hardly see. You wanted to walk when you couldn't stand up. You were so stubborn-- you drove us up the wall-- but you were being human-- even when we wanted you to be more than human. I love and care for you because you were a real person who wasn't perfect. I could see how much you hurt, how brave you were.

Love, Rivka"

"To my big brother:

I miss you."

Love, your little sister, Charlotte"

"Gregg Dagg--

Love from the Dagg Family. We miss you. xxxooo"

"To all the many loving friends:

Godspeed and keep them.

Bob"

"Serge:

I'll never forget the times we flew together. Now you're flying free! I miss you, so do the people and friends at Air Canada.

God bless, Love, Jacqueline." 

"Anre:

I'm sorry I couldn't say goodbye. Did you know we came to visit you? Always remembered, even across 3,000 miles.

Bill"
"Bill:
I will always love you.
Vincent"

"To all my friends:
I shall let go but never forget.
Olivia"

"Uncle Don:
I loved you ever since I was born. I love you!
Ashley"

Politics as some sort of "antagonistic moment" simply does not convey the cultural saliency of the Quilt display. That does not mean that politics was absent; it does mean that citizenship emerged from social relations of grief, mourning, and love; not antagonism at the display.

V. Conclusion: citizenship, space, and cultural form

These alternate vignettes illustrate how Schmitt’s notion of the political is not a reliable signpost for the spatiality of citizenship. Being political was enabled by an overlap of civil society and familial social relations, where grief and mourning were publicly evident. This failure threatens the project of radical democracy overall because insisting on the friend-versus-enemy pivot is an ironically antidemocratic reading of an actual location of citizenship. It is a coding of the political that squelches the meaningfulness of that space for the Quilt’s participants. I do not, however, think we need to jettison Mouffe’s overall theoretical apparatus. I do think we need to reject her definition of the political, which is more substantive than she would wish, because it can blind us to locations of citizenship that do not evince an antagonistic moment. We need a more flexible, empirically sensitive understanding of the political. That understanding
(always perpetually interrogated) must begin from where struggles over the elements of citizenship—rights, duties, and membership/exclusion from political community—take place. This framework keeps within Mouffe’s original aim of working through the pros and cons of both liberal and communitarian theory.

As a space of civil society, the Quilt Display allowed a group of strangers to come together and augment visibility, understanding, and fundraising for AIDS issues. This reading can be readily seen through Mouffe’s theory of radical democracy. Yet as a space of family as well, those politics hinged not on a rigid categorization of politics, as a friend-or-enemy duality, but rather on a safe space where relatives, friends—all manner of kin—could grieve and allow their loss to be witnessed. That dynamic was hardly separate from the political themes of the display. Rather, it was how those politics were constructed by participants as culturally salient. Mouffe insists on non-essentialized forms of politics yet her definition of the political sabotages her project. When we examine actual spaces of radical citizenship, like the Quilt display, we can see how antagonistic moments fail to describe the political culture of citizenship in spaces. The conclusion, then, is that if we are to concede that there are now "new spaces of the political" beyond the state, these 'new spaces' can be hybrids—combining elements of (in the case of the Quilt Display) family and civil society. Acknowledging that social relations can have simultaneously multiple forms in a single location illustrates that pre-defined ways of defining 'the political' might either ignore politics occurring in particular parts of the city, or else resignify them as friend/enemy relations when that characterization has little empirical saliency. Imposing that meaning theoretically onto an
empirical case study is profoundly anti-democratic since it denies the cultural form
citizenship can take in particular locations.
Chapter 7
Conclusion:
Where Has The Citizen Gone?

I. Spaces Enabling Citizenship

The ambiguity of the geographic categories political theory employs to locate political engagement has been the consistent theme throughout this study. Political theorists distinguish the state, the family, and civil society as distinct arenas of social life, yet fail to consider that these relations are always spatial; they connotatively point to distinct locations in the city. The distinctive sets of social relations, state, civil society, and family, lose their cogency as boundaries often blur in material spaces across the city politics of AIDS. Moreover, that cloudiness enables citizenship to emerge in locations across the city where it makes contextual sense to be: at sites where those relations were hybrid combinations. City politics no longer takes place only in clearcut state-defined locations like the city hall or the voting booth. The contextual saliency of state-civil society, state-family, and family-civil society permutations of social spheres at particular sites across the city (the volunteer organization, the home, the city park, the fundraising event at a civic hall) has a number of implications for Mouffe’s theory of radical democratic citizenship, which hinges on a search for new spaces of citizenship. Below, I discuss these implications for Mouffe’s project, as well as poststructuralism more generally; I also temper my conclusions with some important limitations to this study.

The difficulty in employing a tri-partite spatial map of political life is caused in part by ongoing restructurings of these fields, but keep in mind that these processes are also augmented by the ways citizens have responded to the AIDS crisis in the city. I
have tried to flag this structuration of citizenship through material spaces by organizing
the chapters of this thesis to capture the hybrid structurings and meanings of those places.

Chapters 3 and 4 focused on the state-civil society connection. Chapter 5 showed the
nexus of state and family; while Chapter 6 treated the overlap of social relations
associated with family and civil society. I began my search for new spaces of citizenship in civil society because voluntary groups in public spaces of the city (self-recognized as standing beyond the state’s traditional locus of politics) have already been noted for their novel political location across many theoretical traditions. Spaces of civil society are pulled in opposite directions of state and family. As Chapter 3 detailed, a
direct-action group like ACT UP failed because it misunderstood the political incorporation of AIDS services into the state.¹ Events like the Quilt Display (Chapter 6)
reveal not just a political civil society, but also a space of mourning and grief for family
and friends of the dead. Thus in Chapter 4, gay volunteer organizations that began in
civil society, as outlets for people’s charity, have grown away from the grassroots,
towards arms of the shadow-state apparatus. The actual spaces they occupy (e.g. AIDS
Vancouver and PWA, PARC) have changed in the tugs between discourses. And citizens
who joined together in self-help groups to resist state and medical authority, now find
that some results of that authority, clientization, are working through their own as-

¹ "Fail" is a loaded word here. ACT UP "failed" in Vancouver to the extent that it never
got the state to change its policies around AIDS, which was its original aim. But it also 'failed'
in other cities in a theoretical sense, by failing to remain in civil society, and becoming
incorporated into the state regime. A good example of this would be New York’s chapter,
where ACT UP has been involved in advocacy for treatment issues to the extent that it is now
consulted by state and medical authorities in policy decisions.
sociations. These changes reflect and reinforce the welfare state's ongoing shift, as well as its reluctance to take on board AIDS and/or gay and lesbian issues through the 1980s. Also at work is the growth in needs: as the AIDS crisis expands in the city, it makes more sense to bureaucratize and develop closer links to the state in order to meet those needs.

The restructuring of the family is another broad undercurrent enabling citizenship in 'private' spaces where discourses of the family loom large. The de-centered quality of buddy relationships (Chapter 5) demonstrate that it is not merely the rise of the shadow state that affects where new spaces of citizenship in the city are found. While buddies did often act as "eyes and ears" of state surveillance in the clients' home, they were also creating family spaces by forging intimate relations in a context where new forms of gay and lesbian kinship were already being reworked. The lack of biological family ties (or the enormous strains placed upon them by AIDS) was (at least partially) compensated for by buddies' support. In turn, these shadow state volunteers were weaved into the kinship networks of people living with AIDS, and vice versa. Situations like the grocery store, Stanley Park Sea Wall, the hospital bed were all locations where familial relations were forged in place between buddies. Family space also was remapped with civil society at the Quilt display (Chapter 6). Here, kin's need for open, public grief and mourning (caused by the stigma of AIDS) melded with the need for fundraising and public education. Consequently a space of kin and strangers was forged on the floor of the display. Debates over the relative salience of politics and grief, which surround the Quilt, I argued, miss the point of the Quilt's success: that it is (in Crimp's words) both mourning
and militancy.

In a sense, such categorical fuzziness harkens back to a longstanding point of social geography: that space and place often have multiple, contradictory meaning across different social worlds (Ley and Samuels, 1978). The critique of political theory's geographies, however, extends that basic point considerably. My argument is less that particular spaces in the city have different meanings across social groups, and more that it was the overlap of structures and meanings associated with separate spheres in material spaces that constrained and enabled radical citizenship across the city of Vancouver. So there is a danger in assuming, as Mouffe's spatial metaphors imply, a fixed definition to those spaces by not considering how their restructurings enable or inhibit political engagement. Her poststructural quest for de-centered subjects fails to take into account the ways spatial contexts contribute to subjects' lack of fixity. What makes that gap both ironic and problematic is that these spaces enabled citizenship to articulate with a variety of social relations. So much of radical citizenship's theoretical purchase comes from its insistence that social subjects not be essentialized. Avoiding geographic metaphor and paying close attention to the spatiality of social relations would bolster the general argument considerably. To this end, I outline the reasons why poststructural political theory must come to grips with the geography below.

II. Geography Lessons

There are, I think, three points to be brought back to a theory of radical democratic citizenship from this ethnography of AIDS politics in Vancouver. First, it has shown that it makes little sense to emphasize de-centered subjectivity in agents, while
keeping the political spaces they occupy fixed or static. By spatializing those sets of
social relations in a particular context, I have tried to show that Mouffe’s larger project
cannot meet its stated ends unless her treatment of "new spaces" incorporates the actual
shifts in material space that are integral to new forms of politics. This point hinges on
the acknowledgement that all social relations are spatial, a point geographers have been
stressing for at least a decade (Gregory and Urry, 1985; Massey, 1984). Even with
reference to the current attraction of spatial metaphors in poststructuralism, geographers
have warned against only deploying spatial vocabulary to emphasize fixity and stasis
(Massey, 1993). Place and situation are sets of social relations that are perpetually
"becoming" and contingent (Pred, 1984; Keith and Pile, 1993); that contingency is not
only historical (as Pred 1992 argued), but also geographical: occupying and referring to
many spatial scales at once (Brown, 1995b). In other words, particular locations in the
city can be structured by a wide set of social relations simultaneously, or through a
period in time. Without taking these fuzzy geographies on board, poststructural political
theory runs the risk of allowing its abstractions to fix its decentered subjects in ways that
at best misrepresent politics (e.g. the friend-versus-enemy dynamic forced onto the Quilt
display) in the city and at worst conceal them (by theoretically favoring ACT UP’s
demonstrations over the work undertaken by organizations like AIDS Vancouver and
PWA). The consequences could be an inability to link different struggles together, and
to privilege certain struggles more easily seen with a fixed spatial context; more occluded
politics would be ignored or misrepresented. These consequences are exactly the pitfalls
that the radical democratic project is trying to avoid!
Contrasting Chapters 3 and 6 demonstrates this point. In Chapter 3 I argued that ACT UP Vancouver should have been the prime example of radical democratic citizenship according to Mouffe's theory. Conversely, the Quilt display (lacking a friend-versus-enemy dynamic) should not have allowed citizenship to emerge at the B.C. Enterprise Hall. ACT UP Vancouver, however, did not enable citizenship in spaces of civil society because it misunderstood and misrepresented changes in local political culture and structures. Conversely, the Quilt enabled citizenship because there politics grew from the convergence of family and civil society, as elements of citizenship (rights, duties, community) were made salient in a context of grief and mourning.

Second, radical democracy must acknowledge the ways spaces change over time, and that those changes are not necessarily linear nor absolute transformations, because it is these changes that enabled radical citizenship to emerge in Vancouver's AIDS politics. Struggles over rights, duties, and responsibilities did not only take place in conventional areas of the state because the state was unwilling and/or unable to accommodate those struggles. Nor did they only take place in the family or civil society because the scale of the AIDS crisis in Vancouver demanded state intervention. These reasons do contribute to an explanation of citizenship's geographies in Vancouver. Still, the statization that has resulted is, in turn, resisted by elements of family and civil society. In other words, the changes in these spaces and the hybrid combinations they produce are constantly being remade and challenged. Changes in the structures and meanings associated with the PWA Society, for instance, are not only a simplistic linear progression from grassroots, self-help coalition to a social service bureaucratic arm of the state. The PWA Society,
like other AIDS organizations in the city, evinced a hybrid of those two extremes as it grew. Here is where radical democracy's refusal to fix citizen's identities can acknowledge the shifting spaces of politics. In the same way that Mouffe refuses to fix identities of social subjects, so too must she reject fixing assumptions about the content of the spaces they inhabit. By extending this flexibility, radical democracy can more accurately reflect the shifts and fluidity not only of identity, but social institutions as well. Terms like state, family, and civil society refer to very different kinds of places at the end of the twentieth century than they did at its midpoint. These changes structure-and are structured by- the capacity for politics to exist through them.

It is not enough, in other words, to look for "new" spaces of citizenship, leaving the old ones behind. We must look at how new spaces and old spaces are being resig-nified. Searching for new forms of politics in actual locations, I found political theory's spatial vocabulary awkward and inhibiting. It was more accurate to map the simultaneous spaces: where state and civil society overlapped, where civil society and family overlapped, and where family and state overlapped. Employing these hybrids did not mean completely rejecting "old" spaces like the state for "new" spaces like the family. Simultaneous spaces provided evolving contexts that allow citizenship not merely to emerge, but to do so in ways that were efficacious and made sense in Vancouver's political culture.

The third implication for radical democracy is to implore its theorists to veer away from high levels of abstraction traditional in political theory, and move towards an engaging tension between theory and empirics. This move would not only lead to more
agile theory, but perhaps allow subjects themselves to see their own citizenship emerge in unorthodox places, beyond the voting booth or city hall. A conversation needs to emerge between scholarship in political science and political theory around urban politics. Certainly these intradisciplinary traditions have never been held completely apart (e.g. Syed, 1966; Wickwar, 1970; Frug, 1980; Saunders, 1979). They have, however, rarely engaged each other (Ricci, 1984). Urban political inquiry has lacked any extensive theoretical engagement, leaving it largely descriptive and limited in its insightfulness (Elkin, 1987). Radical democracy can, I think, play a pivotal role here because the study of local politics has long been understood as the best embodiment of democratic practice, even during Modernity (Mill, 1958; Dahl, 1968; Hill, 1974; Young, 1989). Even critics of modern urban politics acknowledge its participatory potential (Cox, 1981; Harvey, 1986). Radical democratic theory could open up the content and meaning of what passes for city politics beyond narrow issues of service delivery and urban redevelopment, which have been its mainstays (Brown, 1995b).

III. Limitations

Despite these implications, there are several limitations of this research that I would like to discuss. The first is the difficulty in talking about all the potential spaces in any given politics. For instance, in this study, the "older" spaces of the state were largely ignored. And yet they have hardly been abandoned as sites of citizenship in fairly conventional ways. This point was hinted at, for instance, in the funding arrangements and contracts of the shadow state. AIDS organizations and activists do continue to lobby government. Legislatures do continue to decide on increasing or decreasing public funds
for people living with AIDS. In our haste to remap citizenship, we should not leave the assumption behind that older forms of citizenship have been whisked away. The voting booth, the Parliament, the nation: these are still locations of citizenship. Likewise, as Canada's ongoing constitutional debacle and a recent series of essays demonstrate, debates over what Canadian citizenship means still occur even within the traditional national definition of "the citizen" (Kaplan, 1993).

A second problem falls under the issue of representation. In this thesis, I have described citizenship emerging in hybrid, simultaneous spaces. Nonetheless the axes of those combinations were faulted for their inflexibility. While these hybrids better capture the geographies of citizenship across the restructuring of social institutions, the argument could certainly be pushed that they, too, ultimately fix political spaces. How then, are we to ever describe spaces of citizenship without introducing elements of fixity and closure? This criticism, of course, is lodged against deconstruction more generally. It confronted me while writing up this study on occasions when I returned to "the field". On several occasions I have explained my conclusions to people presently involved in Vancouver's response to AIDS. Some worry that I have misrepresented the local context, offering several current examples. I remind them that the study is based on research conducted in 1992-93. Since I left the field, citizens and their spaces have changed. Writing fixes spaces and citizens in a way that makes its representations static. Critiques of these representations, then, must be perpetual.

An associated criticism deals with the specific categories I have used (state, civil society, and family). If these categories are so limiting, how can I justify using them at
tome. Yet once my project was explained to potential-subjects by fellow PWA members, some became eager to speak with me because they wanted to make sure their stories were recorded too. They saw refusing to participate as a distancing by erasure. My distance, then, was trusted as a vehicle of balance. For instance if I only talked to AIDS Vancouver affiliates, the PWA voice would be erased or drowned out, it was thought.

My social position vis-a-vis the interviewees also gave them a distance on their experiences, which we shared in the interviews. My distance gave interviewees the chance to step back and substantially reflect on what they had done. I had not anticipated this opportunity as a benefit of my research, yet repeatedly people thanked me for it. They thanked me for giving them the opportunity to sit down for an hour and simply tell someone else what they had done comprehensively. This sort of critical reflection is a rare opportunity because of the all-encompassing and never-ending qualities of AIDS, the constant grieving, and intensity of emotion. Its absence can be noted in the high degree of burnout and turnover in AIDS work. As one person confided in me after an interview, 'You can't have a good day around here. You can never feel good about your work, because people are dying. How can I be doing a good job if people are still dying? How can I have a good day?' It was my distance- my lack of affiliation coupled with a genuine interest in their experiences- that gave employees and volunteers the opportunity to grasp some distance of their own, alleviating some of their frustrations. It was clear to me that many people had not realized how much they had done locally, because they never had the opportunity in the middle of the crisis to stop and think about it. To do so would risk an alleged selfishness; AIDS work is self-consciously directed
towards another’s pain. In a very real way, then, the distance working in the ethno
graphic interview allowed me to bear witness as well as achieve a fair degree of
contextual breadth and understanding.

Social distance also fostered a strong desire to make sure I understood local
culture and context. Once I explained that I was from another place they were at pains to
ensure that I completely understood what they had done and its context. We could share
instances of homophobia and oppression in AIDS politics, I could identify with them
along the lines of sexuality and grieving, but I was still an outsider, and therefore needed
to be let in on the details of this place to ground my understandings of the Vancouver
context. Gaps in my understanding hardly raised suspicions about my dedication or
abilities as a researcher. If anything, they were accepted, anticipated, but always to be
filled in through our conversations. Distance allowed a conversation about the local
responses to AIDS in Vancouver, about new forms and locations of local politics, and
about lesbian and gay lives to emerge.

If, as I have argued in Chapter 2, distance can augment geographic knowledge, it
is incumbent on me to hone the critique of distance advanced at the front of this thesis
(Marcus, 1992). The critique of spatial science is radically incomplete because ethno
graphy does not entirely mitigate the span, even if it did provide a corrective to some
of its consequences (see Katz, 1993; Brown, 1995a). While I remain critical of spatial
science’s geography of AIDS, I must insist as well that distance can work to reveal in
crucial ways. It is important to know, to the best we can, about where HIV is on the
globe, especially as it varies across permutations of HIV. Spatial-scientific Archimedean
perspectives do enable us to see the globalness of the crisis, the *pandemic*. Further, it is important to track the movements of HIV across space. The AIDS crisis, as activists intone, is *not* over; spatial science can illustrate this quite convincingly. Predictive models are helpful, especially with respect to state funding and preventative measures. In these ways spatial science’s investigative role cannot be denied, and Gould’s (1991a) pedagogy is hardly without merit. Spatial science can play a (limited) role in AIDS education and prevention in each of these ways. Precisely because of the social power of scientific discourse, there is critical potential for spatial-scientific geographies.

One might argue that I have overextended the concept of distance in juxtaposing my ethnography with spatial science, that essentially I have juxtaposed two completely different and incomparable processes. The scientific distance is epistemological, founded upon a subject-object dualism endemic to the objective stance of the researcher. By contrast, ethnographers hold a more social distance from their subjects, along apertures of class, race, gender, sexuality; but also geography. The ethnographer physically enters a space; the spatial scientist does not. Ethnographic distance is therefore one that derives from the researcher’s presence inside of a situation but outside of its context. Accepting these separate definitions, the two forms of distance would be incomparable, having actually little to do with each other. I believe this potential criticism is misplaced for two reasons. Foremost, both spans hold true to Eyles’ (1986) definition cited in Chapter 2, which is a substantial one. In both cases I am referring to the separation of scholars from research subjects and spaces.

Alcoff (1991) provides a means to maintain a critical stance on spatial science’s
erasures, while acknowledging the inevitability of social distance in the research process. Concerned about the widespread reluctance of academics and activists to 'speak for the other', she argues that while scholars can no longer pretend to transcend their own social locations, and that certain locations are socially privileged, she reminds us that truth claims are not wholly dependent on social location or distance. As she puts it (1991, p. 16):

"To say that location bears on meaning and truth is not the same as saying that location determines truth."

Concomitantly, she maintains that there are situations where not speaking for the other is quite dangerous and irresponsible. Besides, she insists, speaking only from a distanced location will always implicate and affect others because of the very connectedness of social life. Alcoff concludes that if speaking for the other is inevitable, we must be vigilant in limiting its dangers. The issue of speaking for others is intensely related to the gaps and distances I have noted above: both refer to the power relations that define the relationships between researcher and researched. Her argument substantiates the critical points against spatial science developed in this paper by stressing the irresponsibility and dangers of erasing gay men and their spaces in current geographies of AIDS, while honestly acknowledging the inevitability of social distance. She suggests that we must be constantly reflexive, always considering the potential damage done by speaking for the other. Alcoff's point, to my mind, focuses the edge of a critique of distance. Social distance is inevitable in the research process. It is therefore not so much its manifestations that need to be rejected, but rather we must constantly (re)consider its damages and erasures if we are to provide critical geographies of AIDS.
V. The Citizen is *Here*

I have given a number of talks and classroom lectures on radical citizenship in Vancouver’s AIDS politics. I find a recurring scepticism about the idea of citizenship to convey the processes I describe. The common theme to these criticisms asks what are the stakes in calling the people I describe "citizens". Most broadly, using the term "citizenship" joins the disparate, often disjointed and contradictory, responses to AIDS in an explicitly political way. By doing this, I have tried to show that issues about individuals’ rights, duties to others, and membership in a community of equals do take place through the AIDS crisis. This point is necessary within geography given the apolitical representation of the pandemic as a story of viral diffusion. Reading radical citizenship through AIDS issues also conveys a sense of how significant people’s efforts are, and the often overwhelming extent of sickness and death; and a context of erasure, concealment, and stigma. In such an extreme context "just being there" as a buddy, or attending a quilt display are extraordinary, political actions. I know of no better way to convey a sense of these "stakes" than quoting from Vito Russo’s (1992 pp. 301-2 emphasis mine) eloquent ACT UP speech, given in Albany, New York in 1988:

"AIDS is not what it appears to be at this moment in history. It is more than just a disease that ignorant people have turned into an excuse to exercise bigotry they already feel. It is more than a horror story to be exploited by the tabloids.

AIDS is a test of who we are as a people. When future generations ask what we did in the war we have to be able to tell them that we were out here fighting. And we have to leave a legacy to the generations of people who will come after us. Remember that someday the AIDS crisis will be over. And when that day has come and gone there will be people alive on this earth-- gay people and straight people-- black people and white people-- men and women-- who will hear the story that once there was a terrible disease-- and that a brave group of people stood up and fought and in some cases died so that others might live and be free. I’m proud to be out here today with the people I love and
to see the faces of those heroes who are fighting this war and to be part of that fight. To
steal a phrase from Mike Callen’s\(^2\) song, 'Love is all we have for now-- what we don’t
have is time.'

Like the unsung, anonymous doctors who are fighting this disease and are so busy putting
out the fires that they don’t have time to strategize, AIDS activists are stretched to the
limits of their time and energy, putting out the fires of bigotry and hatred and misinfor-
mation when they need to be fighting for drugs and money. We need luxury time to
strategize the next year of this battle and we need our friends to join us so we can buy
that time. And after we kick the shit out of this disease I intend to be alive to kick the
shit out of this system so that this will never happen again."

Russo’s challenge-- to see AIDS as "a test of who we are as a people" -- can be met by
tracing radical democracy through the shifting spaces where the local responses to AIDS
take place.

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\(^2\) Michael Callen was a singer and a founder of the PWA self-empowerment movement
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