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“A Moral Imperative to Prevent AIDS”: Race and Religion in Atlanta’s AIDS Activism, 1981-1993

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University Honors Thesis
The University of Tennessee at Chattanooga
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Table of Contents

I.	Introduction	pg. 2
II.	Beginnings of AID Atlanta	pg. 12
III.	Declining Influence of AID Atlanta	pg. 19
IV.	Diversification of AIDS Activism in Atlanta	pg. 25
V.	Faith-Based Activism	pg. 36
VI.	Conclusion	pg. 46
VII.	Bibliography	pg. 52

Introduction

The early years of the AIDS epidemic marked a tumultuous period of American history, calling into question the authority of doctors and the ability of scientists to cure disease. Already marginalized groups, such as gay men and intravenous drug users, appeared to be most vulnerable to a deadly virus with no cure or effective treatments. Health officials were unsure how AIDS was transmitted, leading to fears that infection could be caused by casual contact. In the face of discrimination and unfair treatment, activists rose up to provide necessary services for AIDS patients and advocate on their behalf. This activism uniquely characterized the early AIDS epidemic and permanently changed the field of biomedical research. In this thesis, I will investigate AIDS activism in the city of Atlanta and compare it to more well-studied activism in New York and San Francisco.

This thesis makes three interventions into the historiography of AIDS activism, which mainly has emphasized radical political activism, primarily that of the group AIDS Coalition to Unleash Power (ACT UP). While there has been much literature about the membership, challenges, and accomplishments of this type of activism, there is significantly less scholarship on activism that was primarily service-oriented. Most histories of AIDS activism also focus on movements in New York and San Francisco. These coastal cities were initially hit hardest by the epidemic, and the activism that began there undoubtedly influenced the creation of similar groups all across the United States. However, activism that occurred in these locations was not necessarily representative of all American AIDS activism, and it is valuable to look elsewhere to develop a more nuanced perspective. Finally, the activism described in most of the literature was predominantly undertaken by white, gay men. However, women and people of color made

significant contributions to activism that have been overlooked by mainstream depictions of the AIDS epidemic.

Historians initially identified AIDS as a “radical break from the historical trends of the twentieth century,” a plague coming into a world that had considered itself rid of life-threatening infectious disease.¹ The first acknowledgement of the symptoms that would later be defined as AIDS was in 1981, but initial case studies only mentioned men who identified as gay.² This seemed to be the only commonality between the similar cases of mysterious illnesses typically related to a weakened immune system that were appearing in New York, San Francisco, and Los Angeles. Although the disease was soon recognized in heterosexual men and women, early interpretations of AIDS as “gay” impacted its public perception. Homophobia slowed the mobilization of a sufficient response from public health and government officials. Although modern medicine often prides itself on being impartial and unbiased, gay men quickly understood that they could potentially be targeted as the ultimate root of the disease. This led to the creation of an activist movement to provide AIDS patients with the resources they were not receiving elsewhere.

Randy Shilts’s 1987 book *And the Band Played On: Politics, People, and the AIDS Epidemic* was the most influential early narrative of the epidemic.³ Shilts presented AIDS as a conflict between marginalized groups who were dying and an uninterested government, and his focus is mainly on the Gay Men’s Health Crisis (GMHC), an activist organization founded in New York in 1982. Shilts was one of the first authors to write about the epidemic from a “gay”

¹ Elizabeth Fee and Daniel M. Fox, “Introduction: The Contemporary Historiography of AIDS,” in *AIDS: The Making of a Chronic Disease*, (Berkeley, CA: University of California Press, 1992), 1.

² Michael S. Gottlieb, et al., “Pneumocystis Pneumonia -- Los Angeles,” *Morbidity and Mortality Weekly Report* 30, no. 21 (1981).

³ Randy Shilts, *And the Band Played On: Politics, People, and the AIDS Epidemic* (New York: St. Martin’s Press, 1987).

perspective and truly attempt to convey the fear and confusion gay communities were feeling. For this reason, *And the Band Played On* has historically been seen as the pivotal text on AIDS. However, the book has been criticized for its dramatization of the epidemic and its demonization of Gaetan Dugas, the so-called “Patient Zero”.⁴ Historians have found the book’s effects on the historiography of AIDS activism to be limiting, as the book portrays an image of activism that is exclusively white, gay, and male.⁵ Over time, this has promoted a collective memory of AIDS activism that is incomplete.

Another dramatized depiction of the AIDS epidemic, the 2012 documentary and eventual book *How to Survive a Plague* by David France, also prioritized a white, gay, and male view of AIDS activism.⁶ Like Shilts, France dramatized certain factors of the epidemic for entertainment purposes. Furthermore, *How to Survive a Plague* exclusively depicted AIDS activism through the lens of one organization: ACT UP. ACT UP was created as a response to perceived political apathy in AIDS service organizations, especially GMHC. ACT UP’s focus was on direct action and confrontational protests to fight discrimination against those with AIDS.⁷ ACT UP’s founder, Larry Kramer, had helped found GMHC in 1982, but by 1987, he felt that it was too accommodating of the lack of government resources and scientific research. Kramer believed that GMHC’s focus on providing social services to people with AIDS kept them from engaging in serious political activism.⁸ This political advocacy was the main focus of *How to Survive a*

⁴ Richard McKay, *Patient Zero: The Making of the AIDS Epidemic* (Chicago: University of Chicago Press, 2017), 3.

⁵ Jennifer Brier, “Interchange: HIV/AIDS and U.S. History,” *Journal of American History* 104, no. 2 (2017): 442.

⁶ David France, *How to Survive a Plague: The Inside Story of How Citizens and Scientists Tamed AIDS* (New York: Vintage Books, 2016), 13.

⁷ Jennifer Brier, *Infectious Ideas: U.S. Political Responses to the AIDS Crisis* (Chapel Hill: University of North Carolina Press, 2009), 157.

⁸ Jose Antonio Vargas, “The Pessimist,” *Washington Post*, May 9, 2005.

Plague and *And the Band Played On*, which suggested that the work of ACT UP and GMHC was exemplary of all AIDS activism.

Sociologists also took an interest in analyzing AIDS activism, though they approached it through the framework of social movement theory. One of the most recognized analyses was by sociologist Steven Epstein, who asserted that AIDS activists “became genuine participants in the construction of scientific knowledge”, and that activists fundamentally challenged the bureaucracy and hierarchy of typical biomedical research.⁹ In the early years of the epidemic, AIDS patients (especially those who were white and middle-class) often entered into a sort of “partnership” with their physician, no longer blindly accepting their doctor’s treatment recommendations. Instead, patients would do their own research into the field and come into the office prepared to inform physicians about the latest developments.¹⁰ This was unprecedented, and over time, it began to translate from a one-on-one interaction to people with AIDS taking an active role in the creation of knowledge about the disease itself. For example, the work of ACT UP was instrumental in changing the structure of clinical trials permanently in order to get life-saving medications on the market faster. Not only did AIDS activists change the way that AIDS research was conducted, there were implications for research in other fields such as breast cancer and chronic fatigue.¹¹

However, challenges facing those with AIDS went beyond a lack of scientific research and funding: patients faced discrimination based on gender, race, and class. Josh Gamson, a sociologist, refers to this as the “invisible enemy”: discrimination and exclusion by the

⁹ Steven Epstein, “The Construction of Lay Expertise: AIDS Activism and the Forging of Credibility in the Reform of Clinical Trials,” *Science, Technology, and Human Values* 20, no. 4 (1995): 409.

¹⁰ Abraham Verghese, *My Own Country: A Doctor’s Story* (New York: Vintage Books, 1994).

¹¹ Epstein, “Lay Expertise,” 428.

government and other institutions against those who have or are presumed to have AIDS.¹² In responding to these obstacles, AIDS activism drew on the accomplishments and strategies of social movements that came before it, such as the gay liberation, women's health, and civil rights movements. White and middle-class gay communities were already very politically involved and benefitted from their racial and class identities.¹³ Groups like the Gay Activists Alliance (GAA) had been protesting homophobia and discrimination against gays and lesbians since the early 1970s and had the resources necessary to mobilize against AIDS.¹⁴ AIDS activism was also strongly influenced by the women's health movement, as people with AIDS, like many women, were often frustrated by a lack of bodily autonomy and poor understanding by the mainstream medical establishment.¹⁵ Like many feminists, gay activists historically had a fraught relationship with the medical community, as homosexuality's classification as a psychiatric disorder was the subject of much activism.¹⁶

While AIDS activists were inspired in many ways by the civil rights movement, they struggled to be suitably effective in responding to the needs of black communities, especially black gay communities. As most organizations, including ACT UP, were dominated by white men and women, educational materials and outreach efforts often were not specifically aimed at people of color.¹⁷ As the epidemic continued, early AIDS service and advocacy organizations frequently excluded black communities from their programming.¹⁸ Public concern about AIDS

¹² Josh Gamson, "Silence, Death, and the Invisible Enemy: AIDS Activism and Social Movement "Newness"," *Social Problems* 36, no. 4 (1989): 353.

¹³ Epstein, "Lay Expertise," 415.

¹⁴ Gilbert Elbaz, "Beyond Anger: The Activist Construction of the AIDS Crisis," *Social Justice* 22, no. 4 (1995): 48.

¹⁵ Lisa Diedrich, "Doing Queer Love: Feminism, AIDS, and History," *Theoria: A Journal of Social and Political Theory* 58, no. 112 (2007): 39.

¹⁶ Epstein, "Lay Expertise," 415.

¹⁷ Stephen Inrig, *North Carolina and the Problem of AIDS: Advocacy, Politics, and Race in the South* (Chapel Hill: University of North Carolina Press, 2011), 129.

¹⁸ Inrig, *North Carolina*, 13.

was often colored by associations between African Americans and their assumed propensity for sexually transmitted disease.¹⁹ Just a few years before the AIDS epidemic began, the Tuskegee Syphilis Study was exposed to the public, causing long-lasting mistrust of medical and public health professionals within the black community.²⁰ In this study that went on from 1932-1972, black men who were infected with syphilis were intentionally denied treatment in order to study the progression of the disease over time, with up to 100 men eventually dying of tertiary syphilis.²¹ Studies such as this one were based on a long history, especially in the South, of whites assuming that African Americans were impervious to disease.²² These assumptions made physicians more likely to doubt the health problems experienced by black individuals and treat them appropriately. For these and many other reasons, black men and women were less likely to view themselves as at risk for AIDS and therefore receive testing and treatment. Continuing into the present, African Americans are still diagnosed with HIV at the highest rates, with the greatest proportion of diagnoses occurring in the South.²³

Histories of AIDS activism tend to not only focus on one specific type of activism, but also only on a few geographic areas. These are primarily the cities of New York and San Francisco, well-known locations of AIDS activism because of the high proportion of cases that occurred there at the beginning of the epidemic. Since these AIDS service organizations were some of the first created in the country, they undoubtedly inspired activism in other locations.

¹⁹ Evelyn Hammonds, "Race, Sex, AIDS: The Construction of 'Other'," in *Race, Class, and Gender: An Anthology*, ed. M.L. Anderson and P. Hill Collins (Belmont, CA: Wadsworth, 1987), 31.

²⁰ Steven B. Thomas and Sandra Crouse Quinn, "The Tuskegee Syphilis Study, 1932-1972: Implications for HIV Education and AIDS Risk Education Programs in the Black Community," *American Journal of Public Health* 81, no. 11 (1991): 1498.

²¹ Allan M. Brandt, "Racism and Research: The Case of the Tuskegee Syphilis Study," *The Hastings Center Report* 8, no. 6 (1978): 21-29.

²² Todd L. Savitt and James Harvey Young, *Disease and Distinctiveness in the American South* (Knoxville: University of Tennessee Press, 1991): 123.

²³ Centers for Disease Control, *HIV in the United States by Region*, Atlanta, November 2018, <https://www.cdc.gov/hiv/statistics/overview/geographicdistribution.html> (Accessed Feb. 27, 2020).

However, the epidemic affected different places in very different ways, and activism varied to respond to the specific ways AIDS affected communities. One region that has been neglected in the literature is the American South, which now makes up more than half of new HIV diagnoses in the United States.²⁴

The South has long been perceived as especially disease-ridden, discouraging federal investment in the region.²⁵ Continuing into the present, southern states continue to receive less funding than the rest of the United States, even though they have the greatest portion of HIV and AIDS cases.²⁶ However, this has not prevented activism in the region. In *North Carolina and the Problem of AIDS: Advocacy, Politics, and Race in the South*, Stephen Inrig confronted the general perception that the conservatism of the American South kept AIDS activism and advocacy from occurring. Inrig acknowledged that AIDS activism in the South faced unique challenges but managed to be effective, if on a more local scale than activism in New York or San Francisco.²⁷ Another portrayal of AIDS in the South is *My Own Country*, Dr. Abraham Verghese's memoir of his experiences treating AIDS as a doctor in rural East Tennessee.²⁸ This research can contribute the perspective of a large metropolitan area to analyses of AIDS in the South, as that is mostly absent from the current historiography.

In this thesis, I will be examining AIDS activism specifically in the city of Atlanta for a variety of reasons. Atlanta was, and continues to be, a center of AIDS activism in the South, and it was home to many organizations and actors that were relevant to activism on a national scale. Atlanta also has a long history of gay and lesbian occupation, which tends to be a precursor of

²⁴ Ibid.

²⁵ Savitt and Young, *Disease and Distinctiveness*, 8.

²⁶ "Total Federal HIV/AIDS Grant Funding by Program," *KFF*, 2016, <https://www.kff.org/hiv/aids/state-indicator/total-federal-grant-funding> (Accessed Feb. 28, 2020).

²⁷ Inrig, *North Carolina*, 129.

²⁸ Verghese, *My Own Country*, 20.

early AIDS activism. Historian Wesley Chenault established via oral histories that while Atlanta's gay community was not as visible as ones in cities like San Francisco, Atlanta was often a refuge for gays and lesbians from the rural south.²⁹ This gay community was also very politically involved, creating the Atlanta Gay Liberation Front in 1971 and holding the first Gay Pride march in the city on June 27 of that same year.³⁰ While Atlanta might have been more progressive in terms of gay identity, it is important to understand that the black and white gay communities were relatively segregated, continuing into the seventies and eighties.³¹ Atlanta is also especially known for the geographic segregation that still exists in the city, even as it becomes more diverse.³² While the city has often lauded itself as progressive in terms of race relations, this segregation undoubtedly affected the spread of AIDS and the ability of AIDS service organizations to reach all populations equally.³³

My research builds on the strong framework of the historiography of AIDS activism. Understanding and characterizing AIDS activism in Atlanta adds depth to the traditional history of AIDS activism that has been shaped by the stories of a few organizations in New York and California. By establishing what kind of activism was occurring in Atlanta, who was engaging in it, and the challenges that AIDS service organizations faced there, I will compare Atlanta's activism to that of New York and San Francisco.

²⁹ Wesley Chenault, "An Unspoken Past: Atlanta Lesbian and Gay History, 1940-1970," (Ph.D. dissertation, University of New Mexico, 2008), 166.

³⁰ Arnold Fleischmann and Jason Hardman, "Hitting Below the Bible Belt: The Development of the Gay Rights Movement in Atlanta," *Journal of Urban Affairs* 26, no. 4 (2004): 414.

³¹ Chenault, "An Unspoken Past," 141.

³² John Byron Strait and Gang Gong, "The Impact of Increased Diversity on the Residential Landscape of a Sunbelt Metropolis: Racial and Ethnic Segregation Across the Atlanta Metropolitan Region, 1990-2010," *Southeastern Geographer* 55, no. 2 (2015): 121.

³³ Ronald Bayor, *Race and the Shaping of Twentieth Century Atlanta* (Chapel Hill: University of North Carolina Press, 1996), xv.

To answer these research questions, I have used a variety of primary sources. One major source for this project has been oral histories from two collections found at Emory University: the Atlanta AIDS Legacy Project and Remembering AIDS: Collaborative Action Through Community-Based Oral History. The former was created as part of the master's thesis of Sandra L. Thurman, a former executive director of the organization AID Atlanta. Consequently, these interviews prioritized those who were involved with AID Atlanta and who tended to speak positively about the organization's contributions to activism. The latter was created as a project of the Southeast AIDS Training and Education Center, which is an organization that trains clinicians in best practices for HIV/AIDS care. The object of the project was to document the ways that community-based organizations and universities in Atlanta worked together in partnerships during the early years of the AIDS epidemic. This collection includes a broader variety of interviewees, but it is limited to those who partnered with Emory in their activism. Together, the two collections provide insight into the experiences of major actors in Atlanta's activism, especially when combined with other primary sources, including archived records of AIDS service organizations. These include educational materials, meeting minutes, newsletters and correspondence of the activist organizations ACT UP/Atlanta and the Southern Christian Leadership Conference. Another valuable source has been newspaper articles from *The Southern Voice* and *Atlanta Gay News*, LGBT periodicals distributed in Atlanta and throughout the South. I also used articles from *The Atlanta Voice*, a primarily black newspaper, and the *Atlanta Journal-Constitution*, the major regional newspaper in Atlanta. These sources provide several points of view on activism, both from within activist groups and from outsiders.

This thesis is structured into two major parts. The first section describes the genesis and evolution of AIDS activism in Atlanta from 1981-1993. In this section, I show that AID Atlanta,

the first AIDS service organization in Atlanta, dominated AIDS activism for the first six years of the epidemic. As the epidemic began to take a greater toll on women and minorities, new activist groups began to establish themselves, destabilizing the influence of AID Atlanta. AID Atlanta's decline was catalyzed by the organization's internal conflict from 1987-1993, and the overall picture of AIDS activism became more diverse and segmented.

In the second section of my paper, I compare and contrast activism in Atlanta with traditional narratives of activism in New York and San Francisco. As a whole, AIDS activism in Atlanta was not incredibly different from that in other locations. Atlanta experienced a broadening of activism as the epidemic continued, leading to the creation of organizations with very specific goals. Activism also became more political and less service-oriented in Atlanta in the late eighties, ushering in new interpretations of activism. These transitions echo similar changes in AIDS activism elsewhere. However, Atlanta's position as a large metropolitan area in the South presented unique opportunities and challenges. Unlike what has been documented in San Francisco or New York, faith communities played a strong role in activism, advocating for AIDS education and prevention. This suggests that Atlanta had a broader range of actors that were involved in constructing AIDS activism than we might assume. Ultimately, the similarities between activism in Atlanta and that of New York and San Francisco suggest that in terms of AIDS activism, the South was not inherently different from the rest of the country.

Beginnings of AID Atlanta

It would be hard to discuss AIDS activism in Atlanta without beginning with AID Atlanta, the AIDS service organization created in 1982. Their work set a precedent for AIDS activism in Atlanta and in the greater south, but their influence eventually waned as more organizations were created. Unlike in larger cities that had a variety of AIDS service organizations from the onset of the epidemic, Atlanta's activism was dominated by one organization for the first few years. Atlanta had significantly fewer cases of AIDS than many larger cities did, meaning that fewer organizations were necessary to administer to people with AIDS, or PWAs. AID Atlanta also could look to organizations such as GMHC in New York for inspiration. Like GMHC, AID Atlanta was founded by gay men, and benefitted from the legitimacy of already established LGBT groups and communities.³⁴ While AID Atlanta had initial struggles for funding, as all AIDS organizations did, its status as the only AIDS organization in the state meant that it quickly earned respect and trust from public health officials. This meant that when the Georgia AIDS Task Force was created in 1985, the members of the board of AID Atlanta were looked to as experts in providing services to those with AIDS. This relationship with state and local governments and health departments benefitted AID Atlanta in ways that later AIDS organizations in Atlanta did not share.

As in other locations in the South, the AIDS epidemic began slowly in Georgia, with only three cases appearing in 1981.³⁵ Gay men in Atlanta heard about the disease from friends in New York and San Francisco, but its slow progression in the South caused some to assume that it

³⁴ Fleischmann and Hardman, "Bible Belt," 418.

³⁵ Georgia, Department of Human Resources, Division of Public Health, Office of Infectious Disease, *AIDS/HIV in Georgia, 1981-1989*, Atlanta, 1989.

would not spread much farther than the coasts.³⁶ In 1982, Georgia saw a total of 11 cases of AIDS, which increased to 40 cases in 1983 and 106 in 1984.³⁷ Concern about the disease prompted a group of gay men in Atlanta from the Atlanta Business and Professional Guild to host a fundraiser for GMHC. When the men attempted to send the money to GMHC, the organization urged them to keep the funds, as they would soon need it in Atlanta.³⁸ This funding was used to begin AID Atlanta, Georgia's first AIDS service organization. The organization was very dependent on volunteers in its early years, most of whom were gay men and women. Many became involved in activism for the first time when AID Atlanta was created, as they felt like it was the only way to help their friends and acquaintances who were dying.³⁹

One of AID Atlanta's first programs was the Buddy Program, inspired by that of GMHC. Volunteers would help PWAs with various tasks such as cleaning, cooking, grocery shopping, and accompaniment to doctor's appointments. This helped with feelings of isolation, as PWAs were often distant from family members due to their AIDS diagnosis or their sexuality.⁴⁰ Dealing with the diagnosis of a life-threatening disease, especially when lacking a support system, could be devastating. Although little was known about AIDS and the organization did not have much funding, the buddy program was effective in providing practical and emotional support.

Because there were few professional staff at AID Atlanta, board members took a very hands-on role in the organization. Board members were selected based on their professional expertise, as their advice was needed in creating and administering new programs at AID

³⁶ Bruce Garner, Interviewed by Sandra Thurman, June 19, 2009, Atlanta AIDS Legacy Project records, Stuart A. Rose Manuscript, Archives, and Rare Book Library, Emory University.

³⁷ *AIDS/HIV in Georgia, 1981-1989*.

³⁸ Sandra Thurman, Interviewed by Christina White, August 3, 2010, *Remembering AIDS: Collaborative Action Through Community-Based Oral History* interviews, Emory University Archives, Stuart A. Rose Manuscript, Archives, and Rare Book Library, Emory University.

³⁹ Interview with Bruce Garner.

⁴⁰ Jesse Peel, Interviewed by Sandra Thurman, June 21, 2009, Atlanta AIDS Legacy Project records, Stuart A. Rose Manuscript, Archives, and Rare Book Library, Emory University.

Atlanta. For example, Bruce Garner was appointed to the board in 1984, and his employment at the Social Security Administration was helpful in teaching PWAs how to apply for Medicaid.⁴¹ He explained that most early recipients of aid were middle-class, white, gay men who had no experience applying for disability or food stamps. When they were fired or had to leave their jobs because it became too difficult to work, they had no idea how to access social services. Garner's role on the board was to advise these clients. Social workers were eventually hired at AID Atlanta to assist with this role, but not until some years later.

Not only did AID Atlanta aim to provide services to PWAs, they attempted to create a supportive community for those who had just been diagnosed with AIDS. One board member who was especially involved in this cause was Jesse Peel, a psychiatrist who had a primarily gay clientele before the AIDS epidemic began. As a psychiatrist, Peel was often involved in counseling patients who were emotionally distraught by their AIDS diagnosis. He valued his ability to provide this work, but acknowledged that "some of these young men needed a minister more than a psychiatrist."⁴² Peel felt that because of the South's strong Christian tradition, young gay men often saw an AIDS diagnosis as a confirmation from God that their lifestyle was "sinful". In order to encourage ministers to embrace those with AIDS in their community, AID Atlanta hosted a pastoral care workshop with a goal of helping religious leaders to feel more comfortable administering to the needs of PWAs in their congregations.⁴³ This eventually became an organization called the Atlanta Interfaith AIDS Network.

AID Atlanta also became involved in AIDS education early in the epidemic. Since there was not much that could be done for someone who had already become infected, activists sought

⁴¹ Interview with Bruce Garner.

⁴² Interview with Jesse Peel.

⁴³ Billie Cheney Speed, "AIDS Patients Lack Spiritual Support, Ministers Finding," *Atlanta Journal-Constitution*, Oct. 26, 1985.

to prevent the disease. In 1983, AID Atlanta created the AIDS 101 program.⁴⁴ This was a presentation designed to educate anyone interested about the basic facts of AIDS and how to care for family or friends with the disease. The information provided was initially limited by a lack of widespread resources or knowledge about AIDS, so AID Atlanta volunteers were essentially sharing what they had learned on the job. These programs became more comprehensive and effective as more was discovered about the disease. AID Atlanta also distributed educational materials that were mostly aimed at gay men, although as the epidemic continued, heterosexual transmission became an emerging concern. However, hysteria over the possibility of heterosexual transmission was disproportionate to actual numbers of people becoming infected in Atlanta. In an *Atlanta Journal-Constitution* article published December 12, 1985, AID Atlanta executive director Ken South explained that widespread education was necessary because the AIDS hotline was inundated with calls from people who were very afraid of AIDS, but were actually at very low risk for the disease.⁴⁵ This was a challenge experienced by many AIDS activists across the nation: most people were not informed about AIDS or their risk of getting it. AID Atlanta aimed to rectify this by creating educational programming that was effective without stigmatizing individuals who were infected. For example, the organization held forums at Georgia State University and the University of Georgia to answer students' questions about AIDS and correct their misconceptions. In a survey conducted by UGA students, it was found that 45% of students would avoid all contact with someone that they knew to have AIDS.⁴⁶ AID

⁴⁴ "AID Atlanta History Timeline," *AID Atlanta*, <https://www.aidatlanta.org/document.doc?id=527> (Accessed Feb. 28, 2020).

⁴⁵ Celia Sibley, "AIDS Education Needed to Dispel Hysteria, Aid Treatment," *Atlanta Journal-Constitution*, Dec. 12, 1985.

⁴⁶ Keith L. Thomas, "Universities Increase Efforts to Teach Students About AIDS," *Atlanta Journal-Constitution*, Nov. 7, 1985.

Atlanta hoped to end discrimination of this kind by teaching individuals that AIDS could not be transmitted by casual contact.

Initially, the main challenge for AID Atlanta was finding the funding necessary to carry out their programming. On July 28, 1983, the *Atlanta Journal-Constitution* reported that the organization had met with the Fulton County Board of Health to request funding to establish an AIDS hotline, interdepartmental task force, and screening clinic. They also asked the board to officially declare AIDS a public health emergency.⁴⁷ This shows how AID Atlanta truly led Atlanta's early response to the AIDS epidemic because they could not rely on health departments to act swiftly. Since Georgia's state legislature was prohibited from funding anything related to AIDS, money from the board of health had to be funneled through the Visiting Nurse Association then given to AID Atlanta.⁴⁸ Fulton County eventually granted AID Atlanta \$40,000 and acknowledged the crisis of AIDS, but this was only a small portion of the money that they needed.⁴⁹ AID Atlanta also met challenges attempting to receive federal funding. For example, AID Atlanta was denied a \$209,000 grant from the CDC because some of their educational materials were deemed to be too explicit.⁵⁰ These were pamphlets and billboards that used "slang terms for sexual intercourse" whose use had already been approved by the state's Department of Human Resources. Unfortunately, challenges to the content of educational materials were common, and AID Atlanta frequently had to edit or remove terminology that was offensive or seemed to promote sexuality outside of heterosexual marriage. Especially in the first few years of the epidemic, AID Atlanta faced one major struggle: doing all that they could to prevent AIDS

⁴⁷ Nathan McCall, "AIDS Group Appeals to Fulton For Help," *Atlanta Journal-Constitution*, July 28, 1983.

⁴⁸ Interview with Sandra Thurman.

⁴⁹ Scott Thurston, "AIDS Counseling Agency Asking Government Help," *Atlanta Journal-Constitution*, Sept. 30, 1983.

⁵⁰ Jim Galloway, "CDC Ponders Ways to Educate Gay Men About Safe Sex," *Atlanta Journal-Constitution*, Dec. 8, 1985.

even as their attempts were severely limited by lack of funding and disapproval of government officials. This frustration was shared by many AIDS organizations across the country, who felt that federal, state, and local governments were not doing enough to address the problem of AIDS.

However, AID Atlanta's status as the only AIDS organization in Atlanta ultimately meant that as AIDS funding began to appear, they were likely to be the recipient. As more organizations became involved, they deferred to AID Atlanta because they had the most experience. AID Atlanta began to receive grants from organizations such as the Robert Wood Johnson Foundation and the Community Foundation for Greater Atlanta, enabling them to expand their services. Over time, AID Atlanta became more legitimate in the minds of state legislatures and health authorities. Eventually, this led to the creation of the state AIDS task force in September 1985. The goal of the AIDS task force was to have experts in the field advise local and state officials on policies regarding AIDS.⁵¹ It included a variety of individuals from all across the state who were experienced in the treatment and prevention of AIDS. The initial project of the task force was simply to educate lawmakers about the disease, who knew little more than the average citizen.⁵² Although many legislators refused to join the task force or listen to their recommendations, it at least gave AIDS activists a voice. AID Atlanta was essentially the only AIDS service organization represented on the task force, further showing that they were assumed to represent the voices of all those with AIDS.

As government and public health officials began to rely on AID Atlanta, their caseload grew rapidly without proportionally increased funding. It was helpful that AIDS was finally being acknowledged as a serious public health problem, but instead of health departments taking

⁵¹ Jim Galloway, "State Forms Task Force on AIDS," *Atlanta Journal-Constitution*, Sept. 19, 1985.

⁵² Jim Galloway, "AIDS Panel to Tackle Tough Task," *Atlanta Journal-Constitution*, Sept. 22, 1985.

the lead in AIDS service provision, they depended on AID Atlanta to provide many necessary services. This increased pressure on the organization and led to instability and stress within AID Atlanta, eventually causing them to become much less powerful in the overall landscape of Atlanta's AIDS activism.

Declining Influence of AID Atlanta

While AIDS was initially seen mainly in white, gay men, the incidence of cases among black men and women increased rapidly. From 1986-1992, the total percentage of white AIDS patients decreased from 60% to 52%, as the total percentage of blacks increased from 25% to 30%.⁵³ Even as the numbers of gay men becoming infected began to plateau nation-wide, AIDS was more and more prevalent in black communities, especially in women and children. This was also true in Georgia, where African-Americans comprised 26% of the population but 36% of reported cases of AIDS in 1990.⁵⁴ These cases were also more likely to be seen in IV drug users or their partners, as the proportion of AIDS cases in gay or bisexual men decreased from 78% to 68% by 1990.⁵⁵ These changes necessitated alterations in AIDS activism both in Atlanta and in larger cities across the United States. Many new organizations such as SisterLove, Women's Information Service and Exchange (WISE), and ACT UP/Atlanta were created to administer specifically to communities that had been left out of earlier activism. In Atlanta, this came alongside a destabilizing of AID Atlanta and a rising demand for diversity and inclusivity in AIDS service provision. The organization lost its dominance over activism in Atlanta for these reasons.

Although AID Atlanta received much of the state's funding for AIDS service organizations, they began to have financial troubles in 1987, resulting in a budget cut of around \$200,000.⁵⁶ This led to tensions within the organization that eventually culminated in executive

⁵³ Centers for Disease Control, *HIV/AIDS Surveillance Report*, Atlanta, 1986, <https://www.cdc.gov/hiv/pdf/library/reports/surveillance/cdc-hiv-surveillance-report-1986.pdf> (Accessed Feb. 27, 2020); Centers for Disease Control, *HIV/AIDS Surveillance Report*, Atlanta, 1992, <https://www.cdc.gov/hiv/pdf/library/reports/surveillance/cdc-hiv-surveillance-report-1992-vol-5-1.pdf> (Accessed Feb. 27, 2020).

⁵⁴ Steve Sternberg, "AIDS Cases Triple in Two Years," *Atlanta Journal-Constitution*, Jan. 20, 1990.

⁵⁵ *Ibid.*

⁵⁶ "With Income Down, AID Atlanta Cutting Budget," *Atlanta Journal-Constitution*, June 10, 1987.

director Ken South announcing his resignation in July 1987, although he planned to stay until October. His reasoning was that the job had simply become too stressful, and he accused the board of directors of “constantly invading the day-to-day operation” of the organization.⁵⁷ In response, the board voted to make his resignation effective immediately without any prior notification of these intentions.⁵⁸ This was especially controversial because South was widely respected and credited with much of AID Atlanta’s success.⁵⁹ At first, board members refused to explain why South was forced to resign immediately, and president of the board Buren L. Batson Jr. was named interim executive director.⁶⁰ AID Atlanta employees were not happy with this transition of power, and three days after South was voted out, eight other staff members left, including both the director of social services and the director of education.⁶¹ Finally, board chairman Bruce Garner admitted that he felt that AID Atlanta had “outgrown” South as executive director. He further commented that South spent “substantially more time publicizing [the organization] than running it.”⁶² This tension between South and the board of directors seems primarily fueled by a desire for more autonomy within the board. Board members no longer needed to take such an active role in the day-to-day operations of the organization, but many of them wanted to keep the same level of involvement. As AID Atlanta grew and became more successful, it was no longer the small organization run mostly by volunteers. Their caseload had increased to around 400, undoubtedly placing more pressure on the organization

⁵⁷ Ron Taylor, “AID Atlanta Board Removes South as Executive Director,” *Atlanta Journal-Constitution*, July 22, 1987.

⁵⁸ *Ibid.*

⁵⁹ Kevin Sack, “8 AID Atlanta Staffers Resign, Condemn Board,” *Atlanta Journal-Constitution*, July 25, 1987; Richard Swanson, “AID Atlanta Names Interim Executive Director,” *The News* (published by Atlanta Gay Center), Aug. 7, 1987.

⁶⁰ Swanson, “Interim Executive Director.”

⁶¹ Sack, “Staffers Resign.”

⁶² Bill Dedman, “AID Atlanta Outgrew its Executive Director, Agency Chairman Says,” *Atlanta Journal-Constitution*, July 30, 1987.

than the thirty cases managed in 1984.⁶³ By 1987, the staff of AID Atlanta had also increased to around fifteen from two in 1984.⁶⁴ Although this was a significant improvement, it was still fewer employees than needed to properly manage 400 clients. This stress led to instability within the organization, which did not end with the naming of a new executive director.

AID Atlanta was not the only AIDS service organization that experienced stresses as the epidemic continued and patient loads increased. This was a commonality of many of the early organizations that had transformed in order to handle significantly more clients than ever expected. Interorganizational disagreements also rose about how to best conduct AIDS activism. One well-known example was GMHC, which activist Larry Kramer left in 1987, frustrated with their complacency and reluctance to participate in activism that was more political.⁶⁵ He went on to create ACT UP, whose priority was advocacy for PWAs, not service provision. Similarly, former employees and board members of AID Atlanta created new organizations, often with more specific goals in mind.

As AID Atlanta attempted to recover from changes in management, the Robert Wood Johnson Foundation (one of their major funders) questioned whether their money was being put to its best use. In a letter sent to AID Atlanta, Dr. Mervyn Silverman, administrator of the grant, explained that the organization needed to improve its “cooperation and communication” both within AID Atlanta and with other organizations.⁶⁶ He believed that these problems stemmed from lack of morale, which executive director Buren Batson said the agency was attempting to address.⁶⁷ Even with Silverman’s concerns, AID Atlanta continued to receive Robert Wood

⁶³ Dedman, “AID Atlanta Outgrew,”; Interview with Bruce Garner.

⁶⁴ Sack, “Staffers Resign,”; Interview with Bruce Garner.

⁶⁵ Vargas, “The Pessimist.”

⁶⁶ Chris Duncan, “Controversy at AID Atlanta Continues, Letters Fuel Speculation,” *Southern Voice*, Aug. 18, 1988.

⁶⁷ Steve Sternberg, “AID Atlanta is Fighting Low Morale - And Possible Budget Cuts of 25%,” *Atlanta Journal-Constitution*, July 29, 1988.

Johnson funding, including the third installment of a \$4.6 million grant.⁶⁸ Although the organization was not meeting necessary goals and consistently suffered from internal issues, they continued to receive a majority of AIDS-related funding in Atlanta. For funding organizations such as the Robert Wood Johnson Foundation, it was likely easier to continue giving this money to AID Atlanta rather than find many new recipients, as no other organizations were doing nearly the scope of activism that AID Atlanta was.

AID Atlanta's stronghold on AIDS funding was eventually challenged by organizations such as Helping Hands, Inc., an offshoot of AID Atlanta that simply focused on fundraising for AIDS efforts and distributing the money to worthy organizations. Helping Hands created a report detailing why they no longer funded AID Atlanta, and their major concerns were that AID Atlanta spent too much of their budget on administration and that they ostracized black, heterosexual PWAs.⁶⁹ This report was corroborated by a later review of the organization by an outside consultant named Roger Congdon. Congdon conducted the review to determine whether AID Atlanta was still capable of raising the amount of funds it needed to in order to continue functioning. Through many interviews, Congdon found that many staff members, volunteers, and community leaders felt that the organization needed to "shed its gay roots" in order to adapt to a patient population that was increasingly heterosexual and non-white.⁷⁰ These "gay roots" had much to do with the conflation of AIDS and gayness in the media, especially during the early years of the epidemic. As AID Atlanta was created so early in Atlanta's public consciousness of AIDS, it fell victim to this stereotype. While the organization likely did not intend to be portrayed as a "gay organization", it was difficult to change public mindset.

⁶⁸ Steve Sternberg, "Foundation Backs Continuing Grant for AID Atlanta," *Atlanta Journal-Constitution*, Sept. 24, 1988.

⁶⁹ Ibid.

⁷⁰ Alma E. Hill, "Report: AID Atlanta Needs a Housecleaning," *Atlanta Journal-Constitution*, May 16, 1989.

Overwhelmingly, those involved with AID Atlanta spoke negatively about the executive director, board of directors, and its overall provision of services. The consensus was that AID Atlanta needed to move out of the way in order to make room for new organizations that could address more specific patient needs. Activist Dazon Dixon Diallo previously worked on the Women's AIDS Prevention Project at AID Atlanta, but eventually this project dissolved because "all of the women at AID Atlanta walked out", presumably because the project was not receiving necessary funding or efforts from AID Atlanta.⁷¹ This followed the removal of executive director Ken South, who had been the main champion for the Women's AIDS Prevention Project. Although there are few corroborating accounts of the event, Diallo's recollection speaks to her experience of AID Atlanta's failure to become more diverse and respond to the changing epidemic.

Overall, AID Atlanta's identity as a "gay organization" began to be a drawback to their activism. While they did not deliberately adopt that identity members of the board of directors were mostly gay, white men, and so was the executive director. Their efforts were also typically aimed at other gay men, even as they tried to broaden their programming, as with the Women's Health Prevention Project. AID Atlanta's reluctance to fully back projects like that one undermined their efforts to expand to new communities being affected by AIDS. However, it left a space for activists to fill, and this activism was significantly more effective in reaching its target populations.

While AID Atlanta did ultimately become less dominant over activism in Atlanta, the organization shaped Atlanta's activism and set it in motion. AID Atlanta personnel did not just

⁷¹ Dazon Dixon Diallo, Interviewed by Christina White, August 10, 2010, *Remembering AIDS: Collaborative Action Through Community-Based Oral History* interviews, Emory University Archives, Stuart A. Rose Manuscript, Archives, and Rare Book Library, Emory University.

cause change in Atlanta, but also on a national level. For example, President Bill Clinton appointed former executive director of AID Atlanta, Sandra Thurman, director of the Office of National AIDS Policy in 1997. This shows that even as AID Atlanta became weaker, they still garnered much respect, allowing them to remain active into the present. Currently, AID Atlanta operates two clinic locations, one of which is in Atlanta and one in Newnan, Georgia. Their services include primary care for HIV-positive patients, an HIV/AIDS hotline, AIDS 101 education seminars, and other programming. Although AID Atlanta's controversy and internal conflicts allowed other organizations to receive more funding and take on more responsibility, the organization remained a relevant actor in Atlanta's activism throughout the epidemic.

Diversification of AIDS Activism in Atlanta

In the late eighties and early nineties, new activists responded to the way that the epidemic was changing. Organizations were created to serve specific populations that had previously been underserved by mainstream AIDS prevention and education efforts. This fits a narrative in the literature that as the epidemic diversified, activism also diversified. In Atlanta, this included the creation of organizations such as SisterLove, WISE, the National Association of People with AIDS/Atlanta, Atlanta Buyers Club, and AIDS Research Consortium of Atlanta. The kind of activism in Atlanta also began to change, broadening from service-focused activism to include the kind of political activism popularized by ACT UP. An Atlanta chapter of ACT UP formed in 1988, and they engaged in protests in their community promoting fair treatment of people with AIDS. Although their protests might not have had the visibility of those of ACT UP/New York, they were able to enact change on a local level. As treatment for AIDS began to evolve, access to medications became even more important, and research to determine the efficacy of these treatments became more widespread.

This section will demonstrate the ways that activism in Atlanta diversified and responded to changing needs of the epidemic, including how women and people of color became more included in AIDS activism, how activism became more politicized, and how activism affected AIDS research and clinical trials. Individuals with varying knowledge and expertise intervened to address specific problems, such as a lack of information geared towards women or the inaccessibility of clinical drug trials. This was also true in New York and San Francisco, where more actors became involved in AIDS activism as the epidemic continued.

In 1990, only 9.8% of adult AIDS cases in the United States were in women, and in Georgia, women represented only 6.3% of cases.⁷² However, while women only made up a fraction of cases, they were disproportionately women of color, and they died of AIDS at a rate ten times faster than white gay men.⁷³ Women faced delays in getting diagnosed with HIV or AIDS, primarily because many women suffered from opportunistic infections that doctors didn't recognize as AIDS-related, such as pelvic inflammatory disease and yeast infections.⁷⁴ The CDC definition of AIDS in 1987 included a variety of opportunistic infections, but none that were seen exclusively in women.⁷⁵ In 1993, this case definition did change to include all HIV-infected individuals with less than 200 CD4+ T-lymphocytes, allowing 21,582 new cases to be diagnosed with this criteria in three months.⁷⁶ It also included invasive cervical cancer as a possible opportunistic infection.⁷⁷ However, before 1993, many women struggled to receive an official diagnosis of AIDS and because of this were not eligible for AIDS-related government assistance, such as Medicaid. These women desperately needed support from service organizations but often felt excluded by mainstream ones such as AID Atlanta, whose Women's AIDS Prevention Project fell apart in 1988. Educational information about AIDS in women was also lacking. As of 1988, high school sex education in Georgia required lessons about AIDS and other sexually transmitted diseases. However, no official curriculum on AIDS had been developed, and Georgia

⁷² *HIV/AIDS Surveillance Report*, 1990; *AIDS/HIV in Georgia, 1981-1989*.

⁷³ ACT UP/New York Women and AIDS Book Group, *Women, AIDS, and Activism* (Boston: South End Press, 1990), 32; Gilbert Elbaz, "Women, AIDS, and Activism Fighting Invisibility," *Revue Francaise d'Etudes Americaines*, no. 96 (2003): 108.

⁷⁴ ACT UP New York, *Women, AIDS, and Activism*, 32.

⁷⁵ Council of State and Territorial Epidemiologists, "Revision of the CDC Surveillance Case Definition for Acquired Immunodeficiency Syndrome," *Morbidity and Mortality Weekly Report* 36, no. 1S (1987): 3-15.

⁷⁶ Centers for Disease Control, "Impact of the Expanded AIDS Surveillance Case Definition on AIDS Case Reporting -- United States, First Quarter, 1993," *Morbidity and Mortality Weekly Report* 42, no. 16 (1993): 308-310.

⁷⁷ *Ibid.*

reported that no money was spent on AIDS education in the 1987-1988 school year.⁷⁸ Female students were likely not learning much in school about their own risk of AIDS, and even AIDS hotlines such as AID Atlanta's could not answer questions about AIDS in women.⁷⁹ Female activists in Atlanta acknowledged these problems and sought to create education and programming specifically aimed at women.

Dazon Dixon Diallo founded SisterLove in 1989 after leaving the Women's AIDS Prevention Project at AID Atlanta. Diallo had become involved in women's health in 1983 while working at Atlanta's Feminist Women's Health Center (the Center) and after attending the National Black Women's Health Conference at Spelman College.⁸⁰ She became frustrated with the Center's focus on abortion and failure to acknowledge AIDS as a women's health problem. While she was passionate about reproductive justice, she felt that the Center neglected AIDS because it was seen as an issue that affected black women rather than white women, and the Center was led primarily by white women. Diallo created SisterLove to integrate black women's health and AIDS activism. SisterLove pioneered the concept of "healthy love parties", in which a SisterLove representative would come into someone's home to host a party with a goal of educating primarily black women about safe sex and healthy relationships with male partners.⁸¹ The goal of such parties was to prevent transmission of HIV, but also to empower women to make safe decisions about sex and relationships. Research has shown that healthy love parties are effective in increasing condom use and voluntary HIV testing.⁸² In 1989, Diallo asked AID

⁷⁸ Asta M. Kenney, et al., "Sex Education and AIDS Education in the Schools: What States and Large School Districts are Doing," *Family Planning Perspectives* 21, no. 2 (1989): 58-59.

⁷⁹ Interview with Dazon Dixon Diallo.

⁸⁰ Ibid.

⁸¹ Ibid.

⁸² Dazon Dixon Diallo, et al., "Efficacy of a Single-Session HIV Prevention Intervention for Black Women: A Group Randomized Controlled Trial," *AIDS and Behavior* 14, (2010): 518.

Atlanta executive director Sandra Thurman for help funding SisterLove, and she agreed. This assistance was especially necessary because at the time, no national funding was specifically set aside for women's AIDS programs. SisterLove was also active in the movement to change the definition of AIDS to be more inclusive of women's symptoms in 1990-1991 and eventually developed a housing program in 1992. The organization had a major influence on other AIDS service organizations for women in promoting a feminist perspective. SisterLove continues to lead the way in women's health activism and reproductive justice and has expanded their services to South Africa, showing that activism in Atlanta has had international implications.

WISE was created by a treatment activist named Dawn Averitt Bridge in 1995. As a nineteen-year-old, she was diagnosed with HIV after being raped. Her doctor was reluctant to test her for HIV, as he was sure that she could not possibly have become infected. Even after he did the test and told her she was HIV-positive, he urged her not to do any of her own research on the disease, as it would simply overwhelm her and cause her to worry unnecessarily.⁸³ Bridge was frustrated by his comments, and felt that women deserved to have access to information about AIDS. In 1992, Bridge became a treatment resource specialist at the AIDS Survival Project (formerly National Association of People with AIDS Atlanta) and eventually used this experience to create WISE. It was the first organization of its kind to solely focus on providing information about AIDS in women and consolidate varying bodies of knowledge on the disease.⁸⁴ This was particularly revolutionary because it allowed women to take an active role in managing their AIDS diagnosis as men had been doing. WISE also eventually transitioned into a

⁸³ Dawn Averitt Bridge, Interviewed by Christina White, November 18, 2010, *Remembering AIDS: Collaborative Action Through Community-Based Oral History* interviews, Emory University Archives, Stuart A. Rose Manuscript, Archives, and Rare Book Library, Emory University.

⁸⁴ Interview with Dawn Averitt Bridge.

website called The Well Project, making information on AIDS in women (in both English and Spanish) widely available to people outside of Atlanta and even beyond the United States.

Both SisterLove and WISE represented a transition from activism centered around white gay men to activism focused on the needs of women and people of color. These organizations, like similar ones in New York and San Francisco, were created later in the epidemic because they were not seen as necessary when AIDS was presumed to be a disease of gay men. The movement to acknowledge AIDS in women was born out of the feminist women's health movement, although it took some time for AIDS to be considered a women's health issue.⁸⁵

The rise of feminist AIDS activism coincided with a broader politicization of AIDS activism, widely considered to have begun with the creation of ACT UP. ACT UP pioneered a more radical style of activism that consisted of outspoken protesting and civil disobedience. While polarizing, especially to those who had been involved in service provision, ACT UP dramatically changed the field of AIDS activism. Although the organization is overrepresented in the current literature, ACT UP's accomplishments are extremely important to understanding how activism changed over time.

As experimental treatments started to be developed, it was clear to activists that drug therapies would not be accessible for many individuals with AIDS. Any medications that were available were incredibly expensive, and drug trials had very limited enrollment, excluding most PWAs. ACT UP/New York was created in March 1987 with a goal of making treatment accessible to all PWAs and ending discrimination. They worked to accomplish this goal by sustained and dramatic protests at sites such as Wall Street, the headquarters of the CDC, and the White House. This activism was incredibly visible, inspiring the creation of chapters of ACT UP

⁸⁵ Elbaz, "Women, AIDS, and Activism," 105.

all across the nation, including in Atlanta. ACT UP/Atlanta began in August 1988, immediately making their presence known by picketing a board meeting at AID Atlanta to “guarantee that the concerns of PWAs were heard”.⁸⁶ Like in New York, activists were not afraid to be controversial, even protesting AID Atlanta. This was presumably because ACT UP/Atlanta felt that AID Atlanta’s board of directors did not adequately utilize the perspectives of PWAs in running the organization.

ACT UP/Atlanta’s first major project was a series of protests against the Circle K Corporation, headquartered in Phoenix, Arizona. Circle K, a convenience store company, had recently issued a new insurance policy for its employees that would no longer cover illnesses that were the result of “lifestyle choices”, including drug abuse, alcoholism, and HIV/AIDS.⁸⁷ In response, ACT UP/Atlanta made over 300 phone calls to Circle K’s district office. One week later, when Circle K still had not revised the policy, ACT UP/Atlanta began protesting at local Circle K establishments, chanting phrases such as “Circle K sells death!”⁸⁸ On another occasion, ACT UP/Atlanta successfully shut two local Circle K stores down by repeatedly buying twenty-five cents worth of gas with \$20 bills, effectively causing the store to run out of change for other customers.⁸⁹ “Zaps” such as these were the hallmark of ACT UP’s strategy, meant to quickly inconvenience a person or organization who discriminated against PWAs. Eventually, Circle K did change the policy, likely in response to the efforts of ACT UP chapters from Atlanta and around the country.

⁸⁶ “ACT UP/Atlanta Chronology,” N.d., Folder 5, Box 1, David A. Lowe papers, Stuart A. Rose Manuscript, Archives, and Rare Book Library, Emory University.

⁸⁷ Chris Duncan, “Circle K Says No Coverage for ‘Personal Lifestyle’ Illnesses,” *Southern Voice*, Aug. 18, 1988.

⁸⁸ Chris Duncan, “ACT UP: ‘Circle K Sells Death!’” *Southern Voice*, Sept. 15, 1988.

⁸⁹ “ACT UP/Atlanta Chronology,”; Chris Duncan, “ACT UP/ATL Joins Nationwide Protests, ‘Zaps’ Circle K,” *Southern Voice*, Sept. 1, 1988.



Figure 1- A photograph from one such protest against Circle K. Used with permission from *Southern Voice* Vol. 1 No. 14, Sept. 1, 1988.

Another target of ACT UP/Atlanta was the 1991 Family Concerns Conference and Brunch, held by a Southern Baptist organization called Family Concerns Ministry. Activists opposed the organization's promotion of "traditional values", including abstinence-only sex education for high schoolers that omitted any information about preventing AIDS through condom usage. Ten members of ACT UP/Atlanta infiltrated the conference and interrupted its opening remarks to inform conference-goers that the organization was responsible for the deaths of people with AIDS. They then passed out condoms before being dragged out by security guards. Outside on the sidewalk, protestors chanted, held signs, and staged a "die-in". David Lowe, an organizer from ACT UP/Atlanta, explained that the goal of the protest was to let the

Family Concerns Ministry know that “they’re being watched and will be held accountable”.⁹⁰

This quote captures the goal of ACT UP/Atlanta. While the organization could not have as large of an impact as ACT UP/New York, they used direct action to let companies, groups, and individuals know that such discrimination would not be tolerated in Atlanta. They also protested national institutions, including the CDC. One such protest occurred in 1991, with ACT UP/Atlanta blaming the CDC for not properly educating Americans about “the facts of HIV transmission”, allowing hysteria to run rampant.⁹¹ ACT UP/Atlanta was one of the few organizations in Atlanta to oppose the CDC in their activism, possibly because they had the backing of many other chapters of ACT UP, while most other organizations in Atlanta did not have national affiliates. However, most of ACT UP/Atlanta’s efforts were local, where they would have the largest effects on PWAs in Atlanta. Like ACT UP/New York, the organization’s membership was predominantly white and male. They often mobilized around issues of homophobia, but rarely racism. This meant that although their activism was effective in calling attention to AIDS-phobia, it neglected to challenge some other factors of discrimination that affected PWAs.

ACT UP/Atlanta’s efforts were supplemented by other groups of AIDS activists. Like in New York and San Francisco, the advent of azidothymidine (AZT) in 1987 as the first drug to slow disease progression offered hope but also new challenges. Initially sold at a cost of \$8,000 a year, most PWAs could not purchase AZT, and most AIDS service organizations could not afford to supply it for free.⁹² Furthermore, the drug had severe side effects, and many PWAs could not stand to take it for very long in the high doses recommended at the time. Many

⁹⁰ KC Wildmoon, “Protestors Condomize Family Concerns Conference,” *Southern Voice*, Nov. 21. 1991.

⁹¹ “ACT UP/Atlanta Media Alert,” July 25, 1990, Folder 4, Box 1, David A. Lowe papers, Stuart A. Rose Manuscript, Archives, and Rare Book Library, Emory University.

⁹² “AZT’s Inhumane Cost,” *New York Times*, August 28, 1989.

activists began to focus solely on providing alternative drugs to those who needed them, which led to the creation of buyers clubs. These clubs illegally imported non-FDA approved medications into the United States and sold them at a cheaper price to desperate AIDS patients. In 1988, Thomas Blount, a member of ACT UP/Atlanta, began the Atlanta Buyers Club because he felt that it was necessary to help people have access to drugs.⁹³ In an NPR StoryCorps interview, Atlanta Buyers Club volunteer Christopher Harris explained how he became involved with the organization. Though he was taking AZT in 1988, his T cells continued to decrease, and his doctor told him he had twelve to fourteen months to live. Harris's doctor urged him not to give up and passed him a slip of paper with a phone number on it. This was the number of the Atlanta Buyers Club, and Harris was told to bring \$50 and meet other members on Friday at 6:00 PM. There, they sold him dideoxycytidine, or ddC, a drug that was not available in the United States at the time and was not FDA-approved. Harris told founder Thomas Blount that he wished he could help, and Blount informed him that he could and to show up the next week to volunteer.⁹⁴ Eventually, Atlanta Buyers Club became an official organization and was able to create a benevolent fund for those who needed medication but could not afford it.⁹⁵ The business of buyers clubs was impacted greatly by the FDA's decision in July 1988 to allow individuals to "import small quantities of unapproved drugs for their personal use."⁹⁶ Although the FDA's decision was met with opposition from the scientific community, AIDS activists celebrated the

⁹³ Thomas Blount, Interviewed by Christina White, August 24, 2010, *Remembering AIDS: Collaborative Action Through Community-Based Oral History* interviews, Emory University Archives, Stuart A. Rose Manuscript, Archives, and Rare Book Library, Emory University.

⁹⁴ Christopher Harris, *StoryCorps*, Podcast audio, Dec. 1, 2017, <https://storycorps.org/stories/christopher-harris-171201/> (Accessed Feb. 27, 2020).

⁹⁵ Tim Murphy, "Longtime HIV Survivor Reminisces About the Atlanta Buyers Club," *The Body: The HIV/AIDS Resource*, June 28, 2019.

⁹⁶ William Booth, "An Underground Drug for AIDS," *Science* 241, no. 4871 (1988): 1279; "FDA Allows Importation of Foreign AIDS Drugs," *Atlanta Journal-Constitution*, July 24, 1988.

fact that experimental treatments could be more easily accessed. However, the efficacy of these experimental treatments still needed to be evaluated through clinical drug trials.

Initially, there were few clinical trials for AIDS drugs in Atlanta. Although Emory University began an AIDS clinic at Grady Memorial Hospital in 1986, they did not form any sort of large-scale AIDS research program at that time. Dean of Emory School of Medicine, Dr. Jeffery L. Houpt, explained that this was simply because Emory's priorities lay elsewhere, such as their cancer and organ transplant center.⁹⁷ In the words of Thomas Blount, founder of Atlanta Buyers Club, "Emory just did not want to touch HIV with a ten-foot pole."⁹⁸ This forced PWAs in Atlanta to seek clinical trials elsewhere, and one of the most popular locations was the University of Alabama at Birmingham.⁹⁹ However, this required making a two-hour drive for doctor's appointments, which was not feasible for many AIDS patients in Atlanta. The creation of the AIDS Research Consortium of Atlanta, Inc. (ARCA) in 1989 alleviated this problem. This was a coalition of sixty doctors in the city who would test experimental drugs on willing participants in their own practices.¹⁰⁰ This was approved by the office of community research at the National Institute of Allergy and Infectious Diseases, which gave startups such as ARCA up to \$6 million of federal funding. The goal of the group and similar ones across the country was to find out what drugs were effective and quickly share this information with other doctors, without the slow process of publishing studies in scientific journals.¹⁰¹ Doctors at Emory criticized the effort, saying that the science couldn't be as rigorous because it was lacking peer review.¹⁰²

⁹⁷ Steve Sternberg, "AIDS Research Lags at Emory, Critics Say," *Atlanta Journal-Constitution*, May 30, 1989.

⁹⁸ Interview with Thomas Blount.

⁹⁹ Ibid.

¹⁰⁰ Steve Sternberg, "60 Atlanta Physicians Form Group to Test Possible Treatments," *Atlanta Journal-Constitution*, May 30, 1989.

¹⁰¹ Ibid.

¹⁰² Ibid.

While this may have been true, ARCA's priority was putting the patient's needs ahead of bureaucracy. While scientific researchers typically haven't been thought of as activists in the historiography of the AIDS epidemic, ARCA undoubtedly changed AIDS activism in Atlanta. AIDS service organizations in the city could send patients to doctors that partnered with ARCA, knowing that the drugs they provided would not only help the patient, but potentially contribute to doctors' understandings of AIDS treatments.

This section aims to make clear that Atlanta went through many of the same transitions in AIDS activism and accomplished similar goals as those that have been documented in New York and San Francisco. Activism became more political as the epidemic went on and access to treatment became a much more central issue. Institutionalized structures that prioritized a gay and male image of AIDS were questioned by a new generation of activists that saw that the epidemic was rapidly affecting communities of color. Activism in Atlanta also had national implications as the epidemic continued. Fundamentally, Atlanta, New York, San Francisco, and other cities experienced similar epidemics and therefore similar forms of activism. However, Atlanta did differ from the status quo in one major way. Much of its AIDS activism was conducted and supported by religious communities, which does not fit with contemporary literature that suggests that religious groups and individuals rejected those with AIDS.

Faith-Based Activism

Although AIDS activism in Atlanta shared many qualities with activism in other major American cities, there are some key differences that are critical to understanding the landscape of activism in Atlanta. One of the major differences was the presence of faith-based organizations in AIDS activism. Narratives of AIDS activism primarily located in San Francisco and New York tend to suggest that the church either ignored the subject of AIDS or actively promoted AIDS as a divine punishment for sins. While this may have been true in those locations, the ubiquity of faith communities in the South means that historians must consider their effect as an institution in Atlanta. Primary sources indicate that Christian churches, especially black churches, were highly involved in Atlanta's AIDS activism. Organizations such as the Southern Christian Leadership Conference believed, "We have a moral imperative to seek to prevent AIDS when possible."¹⁰³ While black faith-based activism might have been occurring in New York as it was in Atlanta, I argue that it has been left out of the historical narrative because it was not as visible or central to AIDS activism there. Overall, considering faith communities as actors in the AIDS crisis broadens understandings of who took part in activism and why. It also helps historians consider how activism through a religious perspective differs from traditional narratives of AIDS activism.

It is important to understand the variety of religious responses to the AIDS epidemic. Popular opinion tends to be that a majority of Christians believed that AIDS was a natural outcome of sinful behavior. This particular perspective has been described by sociologists Philip M. Kayal and Stephen D. Johnson, and it connects a blaming of AIDS on its victims to political

¹⁰³ Evelyn G. Lowery, "Mission of SCLC/W.O.M.E.N.," N.d., Folder 2, Box 25, SCLC/W.O.M.E.N., Inc. records, Stuart A. Rose Manuscript, Archives, and Rare Book Library, Emory University.

conservatism and homophobic attitudes.¹⁰⁴ Reverend Jerry Falwell was a particularly well-known proponent of this response to AIDS. While this belief was certainly prevalent, it was not the only way that Christians responded to the AIDS epidemic. In 1990, sociologist Mark Kowalewski defined three religious responses to the AIDS crisis: the first, that AIDS is a divine punishment for the sin of homosexuality; the second, that AIDS is a disease which is isolated from sexual morality; and the third, that AIDS patients deserve compassion but their sexuality is still sinful.¹⁰⁵ He reported that churches/denominations with the second or third attitudes were more likely to encourage caring for PWAs or advocate for preventative education, even if the church did not officially condone homosexuality.¹⁰⁶ However, Kowalewski's analysis excluded historically black denominations of Christianity such as African Methodist Episcopal and did not offer any explanation of how black churches might fit into his proposed framework, although they presumably could. To understand the religious response of black churches to the AIDS epidemic, it is necessary to learn about the historical role of black churches in political advocacy and activism.

Scholars have cited the importance of the church to black communities, calling it "a rare center of economic, social, and political independence".¹⁰⁷ Historically, black churches have provided social networks and leadership necessary for political mobilization. This was especially evident in the civil rights movement, when ministers often became outspoken activists because they were less likely to be fired than other professionals.¹⁰⁸ The history of political advocacy in

¹⁰⁴ Philip M. Kayal, "'Morals,' Medicine, and the AIDS Epidemic," *Journal of Religion and Health* 24, no. 3 (1985): 218-238; Stephen D. Johnson, "Factors Related to Intolerance of AIDS Victims," *Journal for the Scientific Study of Religion* 26, no. 1 (1987): 105-110.

¹⁰⁵ Mark Kowalewski, "Religious Constructions of the AIDS Crisis," *Sociological Analysis* 51, no. 1 (1990): 92.

¹⁰⁶ Kowalewski, "Religious Constructions," 95.

¹⁰⁷ Cathy J. Cohen, *The Boundaries of Blackness: AIDS and the Breakdown of Black Politics* (Chicago: University of Chicago Press, 1999), 276.

¹⁰⁸ Adam Fairclough, "The Preachers and the People: The Origins and Early Years of the Southern Christian Leadership Conference, 1955-1959," *Journal of Southern History* 52, no. 3 (1986): 405.

the black church suggests that the institution would have had the experience necessary to mobilize around the issue of AIDS in the black community. However, many scholars argue that the black church failed to respond to HIV and AIDS because leaders did not acknowledge that AIDS was an issue in their own communities.¹⁰⁹ One possible explanation that has been suggested is that the slow response to AIDS is caused by the presence of homophobia in black communities, especially the church.¹¹⁰ Furthermore, black churches have sought to separate themselves from the idea that African-Americans inherently have a “deviant sexuality”, a concept used by whites to justify slavery and other marginalization.¹¹¹ This means that dealing with issues such as AIDS or teen pregnancy could be especially challenging for black religious organizations who struggled to acknowledge sexuality in any form.¹¹² These factors affected how AIDS activism was conducted by black churches and religious organizations. Often, as in other churches, preoccupations with promoting abstinence before marriage limited AIDS prevention efforts. Churches also could be reluctant to acknowledge homosexual transmission, suggesting that all AIDS in black communities was caused by heterosexual transmission or drug use. This complicated faith-based AIDS activism but did not prevent it from occurring.

In Atlanta, the primary religious organization that became involved in AIDS activism was the Southern Christian Leadership Conference, or the SCLC. They were supported by a variety of black and non-black churches, but it was through their affiliation with SCLC that their activism was the most visible and political. This broad coalition enabled SCLC to form partnerships with secular AIDS organizations and advise the Georgia Task Force on AIDS,

¹⁰⁹ Cohen, *Boundaries of Blackness*, 258; Angelique C. Harris, “Sex, Stigma, and the Holy Ghost: The Black Church and the Construction of AIDS in New York City,” *Journal of African American Studies* 14, no. 1 (2010): 39.

¹¹⁰ Hammonds, “Race, Sex, AIDS,” 31; Cohen, *Boundaries of Blackness*, 34; Harris, “Sex, Stigma, and the Holy Ghost,” 33.

¹¹¹ Cohen, *Boundaries of Blackness*, 35.

¹¹² Harris, “Sex, Stigma, and the Holy Ghost,” 33.

though they were subject to certain limits because they were a religious organization. In contrast to other national black organizations, such as the NAACP and Urban League, which faltered in constructing a response to the AIDS epidemic, SCLC was successful in providing a model for black community AIDS education.¹¹³ SCLC's long and rich history as a civil rights organization gave it legitimacy and authority within black communities and was essential to its success.

SCLC was founded in 1957 as a response to the success of the Montgomery bus boycott. Organized by the Montgomery Improvement Association, the boycott lasted 381 days until the city of Montgomery ceded and the bus system was desegregated.¹¹⁴ Civil rights leaders, including Dr. Martin Luther King, Jr., Fred L. Shuttlesworth, and C.K. Steele, determined that an organization needed to be formed to oversee similar protests and continue the momentum gained in Montgomery.¹¹⁵ On January 10-11, 1957, King held the first Southern Leadership Conference on Transportation and Non-Violent Integration at Ebenezer Baptist Church in Atlanta. Participants voted to make the organization official, and at its second meeting, changed the name to the Southern Christian Leadership Conference. Many of the founders were ministers and added "Christian" to the name to reflect these principles.¹¹⁶ SCLC's goal was to oversee civil rights organizations in the South, most commonly groups of ministers and their churches, and encourage nonviolent direct action as a strategy.¹¹⁷ However, after King's assassination in 1968, SCLC faltered in the absence of cohesive leadership.¹¹⁸ The organization continued their efforts, but worked under a reduced budget and staff.

¹¹³ Cohen, *Boundaries of Blackness*, 275.

¹¹⁴ Fairclough, "Preachers and the People," 415.

¹¹⁵ Fairclough, "Preachers and the People," 423.

¹¹⁶ Fairclough, "Preachers and the People," 424.

¹¹⁷ Fairclough, "Preachers and the People," 424.

¹¹⁸ Adam Fairclough, *To Redeem the Soul of America: The Southern Christian Leadership Conference and Martin Luther King, Jr.* (Athens: University of Georgia Press, 1987), 396.

In 1979, SCLC introduced a program called WOMEN (Women's Organizational Movement for Equality Now), with Evelyn G. Lowery serving as its national convener. The goal of this new program was to create workshops and conferences about issues that targeted black families, especially women and children. Some of these early workshops were "The Black Male Child", "Male/Female Relationships", and "Teenage Pregnancy".¹¹⁹ SCLC became more involved in health-related issues in 1984, when they held hearings in eleven cities across the United States to investigate "concerns and health care related issues in black and poor America."¹²⁰ Presumably, these hearings informed SCLC staff about the relatively new issue of AIDS in black communities. This led to SCLC holding their first national conference, "AIDS in the Black Community", in Atlanta in May 1986, featuring speakers such as Ken South, executive director of AID Atlanta and Dr. Carl Perlino, the director of the AIDS clinic at Grady Memorial Hospital.¹²¹ The conference attracted over 150 participants, and its success encouraged SCLC to begin holding regional conferences in early 1987. The goal of these conferences was simply for activists, health professionals, church leaders, and researchers to collaborate and share information with each other. SCLC was also one of the few organizations in Atlanta to conduct significant AIDS outreach outside of Atlanta, with regional conferences in Georgia cities such as Augusta, Macon, and Albany. These conferences appear to have been aimed at a wide audience, with lectures on topics such as how to deal with mass hysteria about AIDS, how to begin an

¹¹⁹ History of SCLC, N.d., Folder 10, Box 38, SCLC/W.O.M.E.N., Inc. records, Stuart A. Rose Manuscript, Archives, and Rare Book Library, Emory University.

¹²⁰ "Introduction - AIDS Education Handbook," N.d., Folder 2, Box 25, SCLC/W.O.M.E.N., Inc. records, Stuart A. Rose Manuscript, Archives, and Rare Book Library, Emory University.

¹²¹ "Run With the R.A.C.E. Project Description," N.d., Folder 13, Box 27, SCLC/W.O.M.E.N. Inc. records, Stuart A. Rose Manuscript, Archives, and Rare Book Library, Emory University; Ernest Quimby and Samuel R. Friedman, "Dynamics of Black Mobilization Against AIDS in New York City," *Social Problems* 36, no. 4 (1989): 408; "National Conference on AIDS," 1986, Folder 13, Box 49, SCLC/W.O.M.E.N. Inc. records, Stuart A. Rose Manuscript, Archives, and Rare Book Library, Emory University.

AIDS education program, and navigating the legal rights of AIDS victims.¹²² Because SCLC was a Christian organization, they also made efforts specifically to reach out to clergy members, holding the first Minister's Conference on AIDS and the Black Community in December 1987.¹²³ SCLC's second National Conference on AIDS and the Black Community, held at Howard University in Washington, D.C. on May 29-30, 1987, garnered national attention and praise. It featured speakers on almost any topic relating to AIDS, including AIDS testing; psychosocial effects of AIDS on the individual and the community; disseminating information through communities, school systems, businesses, and the media; legal rights of PWAs; and current legislation on AIDS.¹²⁴ This conference served as a major turning point for SCLC, proving that although SCLC's activism was focused in Georgia, they could be effective on a national level in leading AIDS activism in black communities. This led to a major increase in funding and a renewed focus on using black churches as a conduit for AIDS education.

In August 1988, the CDC granted funding for SCLC to officially establish their National AIDS Minority Information and Education Program (typically referred to as the National AIDS Program or NAP) in Atlanta, with additional program sites in Charlotte, North Carolina; Dayton, Ohio; Detroit, Michigan; Kansas City, Missouri; and Tuscaloosa, Alabama.¹²⁵ In each city, an AIDS Awareness Committee (sometimes referred to as an advisory board), formed by a coalition of black church leaders, supervised programs to educate community members and other religious leaders.¹²⁶ In 1988-1989, the Atlanta program location primarily engaged with the community

¹²² "Agenda: AIDS/Drug Abuse and the Black Community," 1987, Folder 14, Box 49, SCLC/W.O.M.E.N. Inc. records, Stuart A. Rose Manuscript, Archives, and Rare Book Library, Emory University.

¹²³ "Minister's Conference on AIDS and the Black Community," 1987, Folder 13, Box 49, SCLC/W.O.M.E.N., Inc. records, Stuart A. Rose Manuscript, Archives, and Rare Book Library, Emory University.

¹²⁴ "Agenda: National Conference on AIDS in the Black Community," 1987, Folder 14, Box 49, SCLC/W.O.M.E.N., Inc. records, Stuart A. Rose Manuscript, Archives, and Rare Book Library, Emory University.

¹²⁵ "Run With the R.A.C.E. Project Description."

¹²⁶ Priscilla B. Holman, et al., "Increasing the Involvement of National and Regional Racial and Ethnic Minority Organizations in HIV Information and Education," *Public Health Reports* 106, no. 6 (1991): 690.

through presentations and workshops at community centers; tenant associations; other AIDS organizations; elementary, middle, and high schools; businesses; alcohol/drug rehabilitation programs; and health fairs.¹²⁷ Because the audience at these events varied greatly, the information provided did too. However, an undated handbook on AIDS education created by SCLC illuminates some of the content and purposes of these presentations and workshops. The handbook states that educational efforts should stress a “cue-to-action”, “an event which changes an attitude into behavior”.¹²⁸ SCLC suggests providing statistics about the number of African-Americans who die of AIDS, provoking fear in an audience and possibly causing them to abstain from risky sex. Trying to elicit a fear response, while morally questionable, can be effective in causing behavior change. Most notably, the handbook recommends educators inform audiences about six risk reduction techniques, as follows: “Do not have sex with more than one partner. Do not have sex with persons known or suspected of having AIDS. Do not abuse I-V drugs. Do not have sex with persons who abuse I-V drugs. Health care workers should use extra precautions when handling or disposing of hypodermic needles. Don’t share razors or other instruments that could become contaminated with blood.”¹²⁹ These six guidelines clearly excluded condom use as a possible way to reduce risk, presumably because SCLC is a Christian organization that operates mainly through churches. This presents a difficulty faced in faith-based AIDS activism: how can organizations promote both effective AIDS prevention that acknowledges the inevitability of gay and premarital sex and Christian values that forbid those activities? SCLC chose to fall to the side of promoting abstinence as the only way of reducing AIDS transmission

¹²⁷ “SCLC/WOMEN National AIDS Program Narrative Report -- November 1988,” 1988, Folder 2, Box 39, SCLC/W.O.M.E.N., Inc. records, Stuart A. Rose Manuscript, Archives, and Rare Book Library, Emory University.

¹²⁸ “Methodology - AIDS Education Handbook,” N.d., Folder 2, Box 25, SCLC/W.O.M.E.N., Inc. records, Stuart A. Rose Manuscript, Archives, and Rare Book Library, Emory University.

¹²⁹ “How Can AIDS Be Prevented? - AIDS Education Handbook,” N.d., Folder 2, Box 25, SCLC/W.O.M.E.N., Inc. records, Stuart A. Rose Manuscript, Archives, and Rare Book Library, Emory University.

risk. As historian Cathy J. Cohen put it, “Deference to the moral codes of the black church has limited significantly the educational message that SCLC workers put forth concerning HIV and AIDS.”¹³⁰ Other black AIDS activists criticized the SCLC for this approach, citing the high numbers of black gay and bisexual men infected with AIDS who obviously did not gain anything from an assumption of heterosexuality in black communities.¹³¹ While these criticisms are valid, I argue that the SCLC made its largest contributions to AIDS activism through reducing AIDS-related discrimination and homophobia within black churches and training churches on how to establish their own AIDS ministries. These contributions were made through SCLC’s RACE (Reducing AIDS through Community Education) program, an offshoot of the National AIDS Program that was introduced in February 1990.

SCLC defined the purpose of RACE to be “to provide our community information on HIV/AIDS in a manner that is conducive to members of the church congregation.”¹³² This fits clearly in line with SCLC’s principles of promoting abstinence and “Christian-like” behavior. RACE intended to accomplish this goal by conducting training programs with church leadership that enabled churches to begin their own AIDS ministries. These training sessions consisted of activities such as pre- and post-tests, mediated discussions about values relating to AIDS and sexuality, and participants teaching each other about AIDS.¹³³ The purpose of discussion activities was to help individuals determine exactly what a “sensitive, compassionate, non-judgmental, Christian response to HIV/AIDS” might look like.¹³⁴ Using Scripture, groups

¹³⁰ Cohen, *Boundaries of Blackness*, 272.

¹³¹ Cohen, *Boundaries of Blackness*, 273.

¹³² “Run With the R.A.C.E. Project Description.”

¹³³ “Training Agenda - R.A.C.E.,” N.d., Folder 13, Box 27, SCLC/W.O.M.E.N., Inc. records, Stuart A. Rose Manuscript, Archives, and Rare Book Library, Emory University.

¹³⁴ “Scripture Search - R.A.C.E.,” N.d., Folder 13, Box 27, SCLC/W.O.M.E.N., Inc. records, Stuart A. Rose Manuscript, Archives, and Rare Book Library, Emory University.

answered questions such as, “Can a real Christian catch AIDS? What role should the church play in ministering to those who have AIDS?”¹³⁵ It seems that the overarching answer was that the church’s role in AIDS activism was to comfort and provide support to PWAs but leave frank discussions of sexuality and condom distribution to other organizations. In a sermon entitled, “The Church and the Challenge of AIDS” distributed to churches participating in the RACE program, James M. Childs, Jr. summarized this philosophy: “All issues of morality concerning the transmission of AIDS do not have to be settled before compassion and care begin.”¹³⁶ In other words, churches can care for PWAs without condoning the behaviors that led to their transmission, including drug use and “deviant” sexuality. This mindset, often referred to as “love the sinner, hate the sin”, was particularly challenging in terms of AIDS activism. While RACE’s efforts to help churches provide various services to PWAs might have been effective, their ability to educate others on how to prevent AIDS was likely compromised by this mindset. It also limited their audience, as individuals who participated in risky behaviors that could lead to transmission of AIDS were likely to reject the church as a trustworthy institution. However, outside of education, the RACE program still implemented effective programming, including support groups, meal delivery, and financial support for PWAs. It integrated many churches of a variety of denominations into AIDS activism in some way. This activism was not necessarily like the activism of SisterLove or AID Atlanta, but it filled a “niche” of providing emotional and spiritual support to those with AIDS and their families.

One of the major differences between Atlanta and other cities is the presence of this faith-based activism. It goes against the typical narrative that Christians rejected PWAs and blamed

¹³⁵ Ibid.

¹³⁶ James M. Childs, Jr, “The Church and the Challenge of AIDS,” N.d., Folder 1, Box 36, SCLC/W.O.M.E.N., Inc. records, Stuart A. Rose Manuscript, Archives, and Rare Book Library, Emory University.

them for their disease. While this certainly occurred, many other Christians felt that the methods of transmission could be overlooked in order to provide necessary services to PWAs. This faith-based activism was undertaken by individual churches and religious organizations, and it typically looked like the hosting of support groups, distribution of food, and educational workshops and conferences. While this might have occurred in cities such as New York or San Francisco, it was not on the scale that it was in Atlanta. Atlanta's religious activism was integrated into established AIDS activism in the city, and SCLC and their partners were seen as legitimate actors by other organizations and institutions. This could potentially be because the South as a whole is found to be more religious than other regions of the United States.¹³⁷ The church is a powerful institution in the South, and it makes sense that its influence would also carry into AIDS activism. Understanding the motivations of faith-based activism and how it occurred can offer historians new perspectives on why individuals became involved in AIDS activism and what they aimed to accomplish.

¹³⁷ H. Paul Chalfant and Peter L. Heller, "Rural/Urban Vs. Regional Differences in Religiosity," *Review of Religious Research* 33, no. 1 (1991): 79.

Conclusion

In this thesis, I showed that AIDS activism in Atlanta shared many characteristics of activism that occurred in New York and San Francisco, despite the cities' political and regional differences. In the earliest stage of the epidemic, activism was undertaken primarily by white gay men. This is because the disease was initially identified as gay and male, and these communities benefitted from experience in activism and access to resources. As the epidemic continued, incidence of AIDS in white gay men began to plateau as it increased in black men, women, and children. Primarily gay organizations were largely unsuccessful in reaching communities of color, so activists began to create new organizations with more specific goals and audiences. This broadened activism both in the actors participating in it and the way that it was conducted.

In Atlanta, the earliest stage of activism can be identified with the dominance of AID Atlanta from 1983-1988. AID Atlanta was created by gay community leaders who had experience fundraising and supervising nonprofit organizations. These skills allowed them to exist as essentially the only AIDS organization in Atlanta for several years, receiving state and local funding and advising the Georgia State Task Force on AIDS. However, it became increasingly obvious in the late eighties that the activism that AID Atlanta was engaging in was not effective in communities of color, where incidence of HIV and AIDS was steadily increasing. Conflict within the organization combined with outside criticism weakened AID Atlanta, leaving an opening for new organizations to receive funding and support. In 1988-1989, organizations such as SisterLove, ACT UP/Atlanta, and SCLC's National AIDS Program were created that broadened the scope of activism in Atlanta. These organizations represented a change in both the goals of AIDS activism and the methods in which it was conducted. Like in New York, ACT UP/Atlanta favored outspoken political protesting, the goal of which was to

demand equal treatment for PWAs. SisterLove and the National AIDS Program both were created in response to the AIDS epidemic in black communities, especially in women. By having more specific goals than AID Atlanta, these organizations could reach more specific populations and ultimately enact change on a broader level.

As the cities of Atlanta, New York, and San Francisco are very different from each other, it seems surprising that their AIDS activism would have so many commonalities. They are located in very different regions of the United States and have different populations and political landscapes. However, there are a few reasons why Atlanta's activism might have looked similar to New York's or San Francisco's. The first is that activists in Atlanta were able to look to those in other cities for guidance in responding to their own epidemic. By 1982, activists in New York had created the Gay Men's Health Crisis, and cases in the state totaled 229.¹³⁸ California had 91 cases, and Cleve Jones had co-founded the Kaposi's Sarcoma Foundation (whose name was later changed to San Francisco AIDS Foundation).¹³⁹ At the time, Georgia had six cases, notably less than in locations where significant activism had already begun. Interviews with AIDS activists in Atlanta such as Jesse Peel indicates that when determining how to respond to the problem of AIDS, many activists sought the advice of friends in New York or San Francisco. AID Atlanta's Buddy Program, for example, was directly inspired by the buddy program that existed at GMHC at the time. Activists in Atlanta could see what AIDS activism was beginning to look like in New York and San Francisco, and this undoubtedly influenced their programming and efforts. Furthermore, Atlanta, New York, and San Francisco were all home to established gay and lesbian communities prior to the AIDS epidemic. Historical literature suggests that gay men were

¹³⁸ Centers for Disease Control, *HIV/AIDS Surveillance Report*, Atlanta, 1982, <https://www.cdc.gov/hiv/pdf/library/reports/surveillance/cdc-hiv-surveillance-report-1982.pdf> (Accessed Feb. 27, 2020).

¹³⁹ Ibid.

the first to respond to the epidemic, and gay activism in each of the cities had been going on for a number of years. Even though the gay liberation movement was undeniably smaller in Atlanta, the networks of gay men in the city had the resources and influence to begin an AIDS activist movement as they did in New York or San Francisco.

On a larger level, Atlanta's movement of AIDS activism looked similar to that of other cities simply because they were responding to the same problem. Although the number of cases in Atlanta were significantly less than in other locations, the demographics of those who were infected and how were similar. People with AIDS also faced many of the same challenges no matter where they lived, including access to healthcare, social safety nets if they lost their job or became too ill to work, housing, and emotional support systems. They also faced discrimination, not only for their diagnosis of AIDS but their sexuality, gender, race, and class. In responding to these issues, activists would have often used similar strategies and managed issues of service provision in the same way, even if they were in very different locations.

While my central conclusion is that AIDS activism in Atlanta fit well with previous literature on the topic, it was unique in a few ways. These qualities differentiated Atlanta from other cities but did not entirely suggest that Atlanta had a novel form of AIDS activism. The primary way that Atlanta differed from New York or San Francisco was in the way that faith-based activism, typically conducted by the black church, was a major pathway of activism, especially in 1990 and beyond. The SCLC acknowledged that AIDS was especially affecting black communities and launched an education campaign through predominantly black churches in Atlanta and the surrounding areas. The intention of this campaign was to reduce discrimination towards PWAs in the black church and empower African Americans to prevent AIDS on an individual basis. Because this activism was faith-based, it emphasized AIDS

prevention through abstinence. While their strategies were criticized, SCLC was a major figure in Atlanta's activism at the time, and they partnered with SisterLove, the Atlanta AIDS Interfaith Network, and the Georgia State Task Force on AIDS. Though faith-based activism likely occurred in New York and San Francisco, I argue that it was not as visible or influential to the overall scope of activism in those cities as it was in Atlanta. This is potentially because in other locations, churches generally acted on an individual basis and carried out their own programming. The national status of the SCLC and its ability to influence churches in Atlanta and beyond created a much larger and more cohesive activist movement. Their National AIDS Program and its offshoot, Reducing AIDS Through Community Education, was funded largely by grants from the CDC, further legitimizing SCLC's activism. Historical literature on AIDS activism in New York and San Francisco suggests that nothing like SCLC existed there to unite individual churches in AIDS activism.

This research contributes to previous historical research on activism and the AIDS epidemic in three main ways. First, I intend for this perspective on Atlanta to broaden contemporary understandings of where and how AIDS activism was conducted. While there is a growing body of literature on the accomplishments of AIDS activism in changing the way that medical research is conducted, it almost always structures its analysis on activism either in New York or San Francisco. Considering Atlanta as another important center of AIDS activism adds nuance to these discussions.

The second way that this research can contribute is by adding the perspective of urban activism to depictions of the AIDS epidemic in the South. While the South was initially excluded from many narratives of the epidemic, scholars recently are realizing it as a location worthy of study. However, the major works on AIDS in the South have focused on East Tennessee and

North Carolina, showing that the field could benefit from a wider variety of perspectives. While Atlanta is not necessarily an average Southern city, it is one that has had significant influence on the AIDS epidemic in the South.

Finally, this thesis adds to current research by identifying faith-based activism as one of the major forms of AIDS activism. Although religious AIDS activism has been written about to some extent, this literature tends to take a contemporary perspective rather than a religious one.¹⁴⁰ The historiography of AIDS activism tends to neglect this type of activism, likely because of assumptions that it did not exist or have a significant role in the epidemic. However, Atlanta shows that faith-based activism was influential in communities, even if it is accomplished with methods that are different from mainstream AIDS activism.

Atlanta also complicates discussions of Southern exceptionalism, the idea that the American South is a unified and distinctive entity in a way that other regions are not.¹⁴¹ My own personal conceptions of Southern exceptionalism made my conclusion that Atlanta's activism was similar to other activism very surprising. Like many others, I assumed that activism in the South would be severely limited by the political conservatism and religious convictions that seem to characterize the region. While these were challenges that activists dealt with, they were also present in New York and San Francisco. This thesis contributes to recent historiography that questions the idea of Southern exceptionalism and shows that the South is less unified and more diverse than previously assumed.

¹⁴⁰ For more on contemporary perspectives of religious AIDS activism, see Jerome R. Koch and Robert E. Beckley, "Under the Radar: AIDS Ministry in the Bible Belt," *Review of Religious Research* 47, no. 4 (2006): 393-408; Susan M. Chambre, "The Changing Nature of 'Faith' in Faith-Based Organizations: Secularization and Ecumenicism in Four AIDS Organizations in New York City," *Social Service Review* 75, no. 3 (2001): 434-455.

¹⁴¹ Savitt and Young, *Disease and Distinctiveness*, 2.

Overall, Atlanta's AIDS activism was integral to the national activism that permanently altered the institution of biomedical research and helped to destigmatize HIV. Activists in Atlanta made great strides at achieving equality for PWAs in the South, and their contributions should not be overlooked. Understanding and acknowledging these contributions presents a broader picture of AIDS activism than has previously been depicted.

Bibliography

Published Sources

- ACT UP/New York Women and AIDS Book Group. *Women, AIDS, and Activism*. Boston, MA: South End Press, 1990.
- “AID Atlanta History Timeline.” *AID Atlanta*, <https://www.aidatlanta.org/document.doc?id=527> (Accessed Feb. 24, 2020).
- “AZT’s Inhumane Cost.” *New York Times*, Aug. 28, 1989.
- Bayor, Ronald. *Race and the Shaping of Twentieth Century Atlanta*. Chapel Hill: University of North Carolina Press, 1996.
- Booth, William. “An Underground Drug for AIDS.” *Science* 241, no. 4871 (1988): 1279.
- Brandt, Allan M. “Racism and Research: The Case of the Tuskegee Syphilis Study.” *The Hastings Center Report* 8, no. 6 (1978): 21-29.
- Brier, Jennifer. *Infectious Ideas: U.S. Political Responses to the AIDS Crisis*. Chapel Hill: University of North Carolina Press, 2011.
- Brier, Jennifer. “Interchange: HIV/AIDS and U.S. History.” *Journal of American History* 104, no. 2 (2017): 431-460.
- Chalfant, H. Paul and Peter L. Heller. “Rural/Urban vs. Regional Differences in Religiosity.” *Review of Religious Research* 33, no. 1 (1991): 76-86.
- Chambre, Susan M. “The Changing Nature of “Faith” in Faith-Based Organizations: Secularization and Ecumenicism in Four AIDS Organizations in New York City.” *Social Service Review* 75, no. 3 (2001): 434-455.
- Chenault, Wesley. “An Unspoken Past: Atlanta Lesbian and Gay History, 1940-1970.” Ph.D. diss., University of New Mexico, 2008.
- Centers for Disease Control. *HIV/AIDS Surveillance Report*. Atlanta. 1982. <https://www.cdc.gov/hiv/pdf/library/reports/surveillance/cdc-hiv-surveillance-report-1982.pdf> (Accessed Feb. 27, 2020).
- Centers for Disease Control. *HIV/AIDS Surveillance Report*. Atlanta. 1986. <https://www.cdc.gov/hiv/pdf/library/reports/surveillance/cdc-hiv-surveillance-report-1986.pdf> (Accessed Feb. 27, 2020).
- Centers for Disease Control. *HIV/AIDS Surveillance Report*. Atlanta. 1987. <https://www.cdc.gov/hiv/pdf/library/reports/surveillance/cdc-hiv-surveillance-report-1987.pdf> (Accessed Feb. 27, 2020).

- Centers for Disease Control. *HIV/AIDS Surveillance Report*. Atlanta. 1988.
<https://www.cdc.gov/hiv/pdf/library/reports/surveillance/cdc-hiv-surveillance-report-1988-vol-1.pdf> (Accessed Feb. 27, 2020).
- Centers for Disease Control. *HIV/AIDS Surveillance Report*. Atlanta. 1989.
<https://www.cdc.gov/hiv/pdf/library/reports/surveillance/cdc-hiv-surveillance-report-1989-vol-2.pdf> (Accessed Feb. 27, 2020).
- Centers for Disease Control. *HIV/AIDS Surveillance Report*. Atlanta. 1990.
<https://www.cdc.gov/hiv/pdf/library/reports/surveillance/cdc-hiv-surveillance-report-1990-vol-3.pdf> (Accessed Feb. 27, 2020).
- Centers for Disease Control. *HIV/AIDS Surveillance Report*. Atlanta. 1991.
<https://www.cdc.gov/hiv/pdf/library/reports/surveillance/cdc-hiv-surveillance-report-1991-vol-4.pdf> (Accessed Feb. 27, 2020).
- Centers for Disease Control. *HIV/AIDS Surveillance Report*. Atlanta. 1992.
<https://www.cdc.gov/hiv/pdf/library/reports/surveillance/cdc-hiv-surveillance-report-1992-vol-5-1.pdf> (Accessed Feb. 27, 2020).
- Centers for Disease Control. *HIV in the United States by Region*. Atlanta. November 2018.
<https://www.cdc.gov/hiv/statistics/overview/geographicdistribution.html> (Accessed Feb. 27, 2020).
- Centers for Disease Control. "Impact of the Expanded AIDS Surveillance Case Definition on AIDS Case Reporting -- United States, First Quarter, 1993." *Morbidity and Mortality Weekly Report* 42, no. 16 (1993): 308-310.
- Cohen, Cathy J. *The Boundaries of Blackness: AIDS and the Breakdown of Black Politics*. Chicago: University of Chicago, 1999.
- Council of State and Territorial Epidemiologists. "Revision of the CDC Surveillance Case Definition for Acquired Immunodeficiency Syndrome." *Morbidity and Mortality Weekly Report* 36, no. 1S (1987): 3-15.
- Dedman, Bill. "AID Atlanta Outgrew its Executive Director, Agency Chairman Says." *Atlanta Journal-Constitution*, July 30, 1987.
- Diallo, Dazon Dixon, et al. "Efficacy of a Single-Session HIV Prevention Intervention for Black Women: A Group Randomized Controlled Trial." *AIDS and Behavior* 14, (2010): 518-529.
- Diedrich, Lisa. "Doing Queer Love: Feminism, AIDS, and History." *Theoria: A Journal of Social and Political Theory* 54, no. 112 (2007): 25-50.
- Duncan, Chris. "ACT UP/ATL Joins Nationwide Protests, 'Zaps' Circle K." *Southern Voice*, Sept. 1, 1988.
- Duncan, Chris. "ACT UP: 'Circle K Sells Death!'" *Southern Voice*, Sept. 15, 1988.

- Duncan, Chris. "Circle K Says No Coverage for 'Personal Lifestyle' Illnesses." *Southern Voice*, Aug. 18, 1988.
- Duncan, Chris. "Controversy at AID Atlanta Continues, Letters Fuel Speculation." *Southern Voice*, Aug. 18, 1988.
- Elbaz, Gilbert. "Beyond Anger: The Activist Construction of the AIDS Crisis." *Social Justice* 22, no. 4 (1995): 43-76.
- Elbaz, Gilbert. "Women, AIDS, and Activism Fighting Invisibility." *Revue Francaise d'Etudes Americaines*, no. 96 (2003): 102-113.
- Epstein, Steven. "The Construction of Lay Expertise: AIDS Activism and the Forging of Credibility in the Reform of Clinical Trials." *Science, Technology, and Human Values* 20, no. 4 (1995): 408-437.
- Fairclough, Adam. "The Preachers and the People: The Origins and Early Years of the Southern Christian Leadership Conference, 1955-1959." *Journal of Southern History* 52, no. 3 (1986): 403-440.
- Fairclough, Adam. *To Redeem the Soul of America: The Southern Christian Leadership Conference and Martin Luther King, Jr.* Athens: University of Georgia Press, 1987.
- "FDA Allows Importation of Foreign AIDS Drugs," *Atlanta Journal-Constitution*, July 24, 1988.
- Fee, Elizabeth, and Daniel M. Fox. *AIDS: The Making of a Chronic Disease*. Berkeley: University of California Press, 1992.
- Fleischmann, Arnold and Jason Hardman. "Hitting Below the Bible Belt: The Development of the Gay Rights Movement in Atlanta." *Journal of Urban Affairs* 26, no. 4 (2004): 407-426.
- France, David. *How to Survive a Plague: The Inside Story of How Citizens and Scientists Tamed AIDS*. New York: Knopf, 2016.
- Galloway, Jim. "AIDS Panel to Tackle Tough Task." *Atlanta Journal-Constitution*, Sept. 22, 1985.
- Galloway, Jim. "CDC Ponders Ways to Educate Gay Men About Safe Sex." *Atlanta Journal-Constitution*, Dec. 8, 1985.
- Galloway, Jim. "State Forms Task Force on AIDS," *Atlanta Journal-Constitution*, Sept. 19, 1985.
- Gamson, Josh. "Silence, Death, and the Invisible Enemy: AIDS Activism and Social Movement 'Newness'." *Social Problems* 36, no. 4 (1989): 351-367.
- Georgia. Department of Human Resources. Division of Public Health. Office of Infectious Disease. *AIDS/HIV in Georgia, 1981-1989*. Atlanta. 1989.

- Gottlieb, Michael S, et al. "Pneumocystis Pneumonia -- Los Angeles." *Morbidity and Mortality Weekly Report* 30, no. 21 (1981): 1-3.
- Hammonds, Evelyn. "Race, Sex, AIDS: The Construction of 'Other'." In *Race, Class, and Gender: An Anthology*, edited by M.L. Anderson and P. Hill Collins, 28-36. Belmont, CA: Wadsworth, 1987.
- Harris, Angelique C. "Sex, Stigma, and the Holy Ghost: The Black Church and the Construction of AIDS in New York City." *Journal of African American Studies* 14, no. 1 (2010): 21-43.
- Harris, Christopher. *StoryCorps*. Podcast audio. Dec. 1, 2017. <https://storycorps.org/stories/christopher-harris-171201/> (Accessed Feb. 27, 2020).
- Hill, Alma E. "Report: AID Atlanta Needs a Housecleaning." *Atlanta Journal-Constitution*, May 16, 1989.
- Holman, Priscilla, et al. "Increasing the Involvement of National and Regional Ethnic Minority Organizations in HIV Information and Education." *Public Health Reports* 106, no. 6 (1991): 687-694.
- Inrig, Stephen. *North Carolina & the Problem of AIDS: Advocacy, Politics, & Race in the South*. Chapel Hill: University of North Carolina Press, 2011.
- Johnson, Stephen D. "Factors Related to Intolerance of AIDS Victims." *Journal for the Scientific Study of Religion* 26, no. 1 (1987): 105-110.
- Kayal, Phillip M. "'Morals', Medicine, and the AIDS Epidemic." *Journal of Religion and Health* 24, no. 3 (1985): 218-238.
- Kenney, Asta M, Sandra Guardado and Lisanne Brown. "Sex Education and AIDS Education in the Schools: What States and Large School Districts are Doing." *Family Planning Perspectives* 21, no. 2 (1989): 56-64.
- Koch, Jerome R. and Robert E. Beckley. "Under the Radar: AIDS Ministry in the Bible Belt." *Review of Religious Research* 47, no. 4 (2006): 393-408.
- Kowalewski, Mark. "Religious Constructions of the AIDS Crisis." *Sociological Analysis* 51, no. 1 (1990): 91-96.
- McCall, Nathan. "AIDS Group Appeals to Fulton For Help." *Atlanta Journal-Constitution*, July 28, 1983.
- McKay, Richard. *Patient Zero: The Making of the AIDS Epidemic*. Chicago: University of Chicago Press, 2017.
- Murphy, Tim. "Longtime HIV Survivor Reminisces About the Atlanta Buyers Club." *The Body: The HIV/AIDS Resource*, June 28, 2019.
- Quimby, Ernest and Samuel Friedman. "Dynamics of Black Mobilization Against AIDS in New York City." *Social Problems* 36, no. 4 (1989): 403-415.

- Sack, Kevin. "8 AID Atlanta Staffers Resign, Condemn Board." *Atlanta Journal-Constitution*, July 25, 1987.
- Savitt, Todd L., and James Harvey Young. *Disease and Distinctiveness in the American South*. Knoxville: University of Tennessee Press, 1991.
- Sibley, Celia. "AIDS Education Needed to Dispel Hysteria, Aid Treatment." *Atlanta Journal-Constitution*, Dec. 12, 1985.
- Shilts, Randy. *And the Band Played On: Politics, People, and the AIDS Epidemic*. New York: St. Martin's Press, 1987.
- Speed, Billie Cheney. "AIDS Patients Lack Spiritual Support, Ministers Finding." *Atlanta Journal-Constitution*, Oct. 26, 1985.
- Sternberg, Steve. "60 Atlanta Physicians Form Group to Test Possible Treatments." *Atlanta Journal-Constitution*, May 30, 1989.
- Sternberg, Steve. "AID Atlanta is Fighting Low Morale - And Possible Budget Cuts of 25%." *Atlanta Journal-Constitution*, July 29, 1988.
- Sternberg, Steve. "AIDS Cases Triple in Two Years." *Atlanta Journal-Constitution*, Jan. 20, 1990.
- Sternberg, Steve. "AIDS Research Lags at Emory, Critics Say." *Atlanta Journal-Constitution*, May 30, 1989.
- Sternberg, Steve. "Foundation Backs Continuing Grant for AID Atlanta." *Atlanta Journal-Constitution*, Sept. 24, 1988.
- Strait, John Byron and Gang Gong. "The Impact of Increased Diversity on the Residential Landscape of a Sunbelt Metropolis: Racial and Ethnic Segregation Across the Atlanta Metropolitan Region, 1990-2010." *Southeastern Geographer* 55, no. 2 (2015): 119-142.
- Swanson, Richard. "AID Atlanta Names Interim Executive Director." *The News* (published by Atlanta Gay Center), Aug. 7, 1987.
- Taylor, Ron. "AID Atlanta Board Removes South as Executive Director." *Atlanta Journal-Constitution*, July 22, 1987.
- Thomas, Keith L. "Universities Increase Efforts to Teach Students About AIDS." *Atlanta Journal-Constitution*, Nov. 7, 1985.
- Thomas, Steven B. and Sandra Crouse Quinn. "The Tuskegee Syphilis Study, 1932-1972: Implications for HIV Education and AIDS Risk Education Programs in the Black Community." *American Journal of Public Health* 81, no. 11 (1991): 1498-1505.
- Thurston, Scott. "AIDS Counseling Agency Asking Government Help," *Atlanta Journal-Constitution*, Sept. 30, 1983.

- “Total Federal HIV/AIDS Grant Funding by Program.” *KFF*. 2016.
<https://www.kff.org/hiv/aids/state-indicator/total-federal-grant-funding> (Accessed Feb. 28, 2020).
- Vargas, Jose Antonio. “The Pessimist.” *Washington Post*, May 9, 2005.
- Verghese, Abraham. *My Own Country: A Doctor's Story*. New York, NY: Simon & Schuster, 1994.
- Wildmoon, KC. “Protestors Condomize Family Concerns Conference.” *Southern Voice*, Nov. 21, 1991.
- “With Income Down, AID Atlanta Cutting Budget.” *Atlanta Journal-Constitution*, June 10, 1987.

Unpublished Sources

- “ACT UP/Atlanta Chronology.” N.d. Folder 5. Box 1. David A. Lowe papers. Stuart A. Rose Manuscript, Archives, and Rare Book Library. Emory University.
- “ACT UP/Atlanta Media Alert.” July 25, 1990. Folder 4. Box 1. David A. Lowe papers. Stuart A. Rose Manuscript, Archives, and Rare Book Library. Emory University.
- “Agenda: AIDS/Drug Abuse and the Black Community.” 1987. Folder 14. Box 49. SCLC/W.O.M.E.N., Inc. records. Stuart A. Rose Manuscript, Archives, and Rare Book Library. Emory University.
- “Agenda: National Conference on AIDS and the Black Community.” 1987. Folder 14. Box 49. SCLC/W.O.M.E.N., Inc. records. Stuart A. Rose Manuscript, Archives, and Rare Book Library. Emory University.
- Blount, Thomas. Interviewed by Christina White. August 24, 2010. *Remembering AIDS: Collaborative Action Through Community-Based Oral History* interviews. Emory University Archives. Stuart A. Rose Manuscript, Archives, and Rare Book Library. Emory University.
- Childs, James M., Jr. “The Church and the Challenge of AIDS.” N.d. Folder 1. Box 36. SCLC/W.O.M.E.N., Inc. records. Stuart A. Rose Manuscript, Archives, and Rare Book Library. Emory University.
- Garner, Bruce. Interviewed by Sandra Thurman. June 19, 2009. Atlanta AIDS Legacy Project records. Stuart A. Rose Manuscript, Archives, and Rare Book Library. Emory University.
- History of SCLC. N.d. Folder 10. Box 38. SCLC/W.O.M.E.N., Inc. records. Stuart A. Rose Manuscript, Archives, and Rare Book Library. Emory University.
- “How Can AIDS Be Prevented? - AIDS Education Handbook.” N.d. Folder 2. Box 25. SCLC/W.O.M.E.N., Inc. records. Stuart A. Rose Manuscript, Archives, and Rare Book Library. Emory University.

- “Introduction - AIDS Education Handbook.” N.d. Folder 2. Box 25. SCLC/W.O.M.E.N., Inc. records. Stuart A. Rose Manuscript, Archives, and Rare Books Library. Emory University.
- “Methodology - AIDS Education Handbook.” N.d. Folder 2. Box 25. SCLC/W.O.M.E.N., Inc. records. Stuart A. Rose Manuscript, Archives, and Rare Book Library. Emory University.
- “Minister’s Conference on AIDS and the Black Community.” 1987. Folder 13. Box 49. SCLC/W.O.M.E.N., Inc. records. Stuart A. Rose Manuscript, Archives, and Rare Book Library. Emory University.
- “National Conference on AIDS.” 1986. Folder 13. Box 49. SCLC/W.O.M.E.N., Inc. records. Stuart A. Rose Manuscript, Archives, and Rare Book Library. Emory University.
- Peel, Jesse. Interviewed by Sandra Thurman. June 21, 2009. Atlanta AIDS Legacy Project records. Stuart A. Rose Manuscript, Archives, and Rare Book Library. Emory University.
- “Run With the R.A.C.E. Project Description.” N.d. Folder 13. Box 27. SCLC/W.O.M.E.N., Inc. records. Stuart A. Rose Manuscript, Archives, and Rare Book Library. Emory University.
- “SCLC/WOMEN National AIDS Program Narrative Report -- November 1988.” 1988. Folder 2. Box 39. SCLC/W.O.M.E.N., Inc. records. Stuart A. Rose Manuscript, Archives, and Rare Book Library. Emory University.
- “Scripture Search - R.A.C.E.” N.d. Folder 13. Box 27. SCLC/W.O.M.E.N., Inc. records. Stuart A. Rose Manuscript, Archives, and Rare Book Library. Emory University.
- Thurman, Sandra. Interviewed by Christina White. August 3, 2010. *Remembering AIDS: Collaborative Action Through Community-Based Oral History* interviews. Emory University Archives. Stuart A. Rose Manuscript, Archives, and Rare Book Library. Emory University.
- “Training Agenda - R.A.C.E.” N.d. Folder 13. Box 27. SCLC/W.O.M.E.N., Inc. records. Stuart A. Rose Manuscript, Archives, and Rare Book Library. Emory University.