

# The Lafayette Newspaper and HIV/AIDS: Narratives around Morality and Sexuality

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Sexuality is a broad term that is most often reduced to being understood as the gender of object choice of one's sexual attraction. However, sexuality is much more than that. Sexuality goes beyond the gender of object choice of one's sexual attraction and includes gender identity, gender role, sexual experiences, and the ways in which media and institutions shape sexual lives. Sexualities are always a product of institutions and must be analyzed with historical, geographical, and cultural lenses. This investigation will focus on the ways in which sexuality is constructed in the context of the HIV/AIDS crisis. The historical context is the time period from 1989 to 1992 and the geographical context is Lafayette College. In order to understand the ways in which the institution of Lafayette College shaped the sexualities of students during this time period, two types of documents were utilized. Columns from the student newspaper called *The Lafayette* and a flyer from the documents regarding the visit of the AIDS Memorial Quilt and Names Project during 1992. Many of the newspaper columns were written by Dr. Alan Johnson, which allows conclusions to be drawn about the medical institution and its role in shaping sexuality. The fact that these columns are almost exclusively digested by students at the college means that these columns and their implications are targeted at students; the ways in which these columns discuss sexuality shaped the sexualities of students at Lafayette College. All in all, these documents discuss HIV/AIDS while constructing narratives about morality. These narratives about morality surround behaviors such as promiscuity and homosexuality and their supposed direct causation of HIV/AIDS infection and how these different modes of infection lead to acceptable and unacceptable cases of HIV/AIDS. These narratives are used to shape sexuality and strengthen institutions such as marriage and heterosexuality by reflecting back the moral frameworks used to construct the narratives as truths revealed by the statistics around HIV/AIDS.

The Lafayette is the oldest college newspaper in Pennsylvania and was first issued in 1870. Due to the fact that all issues are digitized, one can track the history and usage of terms in the newspaper. Student newspapers reflect a very specific area of media because they have a very specific audience. By tracking the term “HIV/AIDS”, one can see how the emergence of the term coincides with the history of HIV/AIDS crisis. It is important to note that cases of HIV existed before the 1980’s but was referred to in different terms and thus the focus of this investigation lies with the emergence of the terms “HIV” and “AIDS” and their uses from the 1980’s and beyond. The first cases of severe immune deficiency were reported in gay men in the United States in 1981. The term AIDS was first coined in the year 1982 by the Center for Disease Control (CDC). By the time 1989 arrived, the United States Congress had created the National Commission on AIDS and the number of reported cases in the United States had reached 100,000. 1989 was also the first year that the words HIV/AIDS were used in The Lafayette and started a trend of usage over the next 7 years, mostly in columns written by Dr. Alan Johnson regarding a variety of topics on AIDS such as history, prevention, and treatment. The other pieces of media that will be analyzed are documents from when the AIDS Memorial Quilt and Names Project came to Lafayette College in 1992. The next portion of this investigation will focus on the content of these columns and documents in addition to the usage of the terms “HIV” and “AIDS” in relation to themes of morality.

The first column on HIV/AIDS was published in the Lafayette in 1989 and was titled “AIDS Statistics a frightening reality”. This column contains a number of statistics and the purpose of the column seems to be to bring awareness to the HIV/AIDS crisis. There also seem to be clear attempts to destigmatize the disease and eliminate the stereotype that the victims of

HIV/AIDS are limited to homosexual individuals and drug users. The author, Dr. Alan Johnson, describes how “Pennsylvania ranks 7<sup>th</sup> in the nation with 7.1 cases/100,000” and that “by 1992, the number of accumulated cases will be 365,000”. By presenting these frightening statistics, I think that the author hopes to make students more aware of the HIV/AIDS crisis. He also does this by making the disease more relevant to students with statements such as “The percentage of college students with AIDS is 0.2%. At Lafayette, this would translate to 5 students.” While there are no discussions of morality, Dr. Johnson does attempt to destigmatize the disease by stating that “one could feel a false sense of security if not gay and not an IV drug user. This could not be further from the truth.” The fact that Dr. Johnson seeks to make the disease relevant to students is what makes this column relevant to the investigation. Even though there are no discussions of morality, this column sets the stage for later ones that do consider morality by presenting Lafayette College students with reasons why they should be concerned with the HIV/AIDS crisis.

The next column that was published only a week later had the same title as the first and was also written by Dr. Alan Johnson. This column discusses how individuals can be exposed to HIV, how to get tested for HIV, and what treatment options existed at the time for those who do test positive for the disease. The theme of morality really comes in with the author’s discussion of what puts an individual at risk to be exposed to HIV. The author starts off by saying that “Being gay or an IV drug user does not in itself cause HIV infection. Participating in unsafe behavior is what puts people at risk.” (Johnson 2). He then goes on to say it is a disease that can be “entirely avoided” and defines risky behavior as “having multiple life partners, . . . , and having homosexual relations” (Johnson 2). These two statements directly contrast each other

because the first message is that being gay does not cause HIV infection but the second message is that risky behavior does cause HIV infection and that being gay counts as a risky behavior. This is the first instance where a column indirectly deals with issues of morality by placing ideas of sexuality such as promiscuity and homosexuality on the same plane as “having sex with a prostitute and sharing needles for ‘street drugs’ or steroids” (Johnson 2). Promiscuity and homosexuality are not innately risky behaviors but by considering them equal to behaviors which most individuals in society would view as immoral, the author is making the case that behaviors such as promiscuity and homosexuality are innately immoral behaviors. This case is strengthened by later columns which make similar points. After the discussion of these later columns, this investigation will focus on why there is commentary on morality and how this relates to the ways in which institutions shape sexuality.

The next column by Dr. Alan Johnson involving morality was published in September of 1990 is all about the sexual behavior of college students and how that relates to the risk of being infected with HIV. This column argues that college students are at a high risk of becoming infected with HIV due to their risky sexual behavior and then theorizes as to why college students practice risky sexual behavior. The author states that “94 percent of men and 98 percent of women who were sexually active admitted to intimate physical contact that they really did not want to have” and goes on to declare that the two biggest reasons for these experiences are “alcohol and difficulty with decision making” (Johnson 3). This follows Johnson’s earlier article which emphasized that promiscuity is a form of immoral behavior that makes one more susceptible to HIV. Here, Johnson is presenting the argument that students’ sexual practices make them more susceptible to AIDS without filling in the gap regarding safe sex practices. It is

possible to be promiscuous or struggle with decision making or be under the influence of alcohol and not be at risk for HIV by performing safe sex practices but the column does not acknowledge that. While those behaviors would increase one's risk if one was not practicing safe sex, the failure to acknowledge safe sexual practices makes the argument that the risk of becoming infected with HIV is directly tied to the morality of students' sexuality and sexual behaviors.

Another column that I found interesting was published in 1991 and was titled "An unhappy birthday for AIDS". Near the end of the article, Dr. Johnson mentions that "In 1990, homosexual/bisexual men and IV-drug users represented three-fourths of all cases" (Johnson 3). This is noteworthy because it is the first column regarding HIV to refer to individuals who are bisexual, even though it lumps them with homosexual men and drug users. This is a trend that I had noticed in previous columns and also is present in later ones. The author often refers to statistics of HIV/AIDS by grouping the cases of homosexual men and drug users into one group as is done here, while mentioning that cases among heterosexual individuals are rising quickly. By separating the groups and making the earlier case that homosexuality and IV drug use are patterns of risky/immoral behavior, the author is differentiating between the HIV cases for each group even though it is the same disease. The addition of the cases of bisexual men to the group of homosexual men and drug users starts to set up a hierarchy of legitimate and illegitimate HIV cases; a hierarchy that reflects how institutions shape sexuality.

The first column that will be analyzed that is not written by Dr. Johnson really cements the connection between morality and the risk of HIV while also demonstrating the influence of

the institution of marriage. This column is titled “Around the Block” by Dave Block and is all about Magic Johnson and his positive HIV test. The article mentions that Johnson contracted HIV by having unprotected sex before going on to chastise him for his promiscuous lifestyle. The author clearly believes that promiscuity is immoral because he refers to it as “Johnson’s chief mistake” and admonishes him for not having “expressed regret for the lifestyle he lived before his marriage” (Block 5). The author then goes on to argue that Johnson should now be using his position as an individual living with HIV to advocate for abstinence and the restriction of sex to within marriage. The author states that “what a shame that Magic Johnson is not warning them to practice abstinence” (Block 5). For the author, “a promiscuous lifestyle leaves sex as a mere pleasurable physical encounter” while “the bond of sexual expression within marriage unites two people in emotional and spiritual ways” (Block 5). These comments are ripe with ideas of morality because it is obvious that the author believes that abstinence is the only moral course of action regarding sex until marriage and also illustrates a hierarchy of sex that happens outside of marriage and sex that happens within marriage. To connect it back to the prevention of HIV, the author makes the argument that abstinence is the only foolproof way to prevent HIV. While he is correct, the author quickly disregards the effectiveness of safe sex practices at preventing HIV because they do not fit the narrative of risky behaviors such as promiscuity causing HIV when more morally correct behaviors such as abstinence would prevent one from contracting the virus.

The next column from the College Archives deals with the showing of the AIDS Memorial Quilt at Lafayette College in 1992. The title of the column is “The AIDS Quilt: Is there a problem gentleman?”. The article raises questions about why “over 80 percent of the

student volunteers are women on a campus where men outnumber women” (Betheil 5). This is where gender starts to intersect morality when looking at HIV/AIDS. The author attempts to dispel stereotypes regarding HIV/AIDS by saying “AIDS is not a gay disease. You aren’t going to catch it by showing some compassion towards those that have lost loved ones to a disease that threatens us all” (Betheil 5). It’s clear that the author believes that many men have negative ideas about HIV/AIDS and that their reasons for this are homophobic in nature. This reminded me of Michael Kimmel’s article on male homophobia in which Kimmel defines homophobia as the “central organizing principle of our cultural definition of manhood” (35). Strength is a tenet of hegemonic masculinity and thus it can be inferred that association with a disease that weakens the body such as HIV made male students uncomfortable and played a role in low volunteer numbers. The stereotype that HIV is a gay disease also probably played a role in low male volunteer numbers, as Kimmel explains that homophobia is also “the irrational fear of gay men” or anything associated with gay men (35). Kimmel also explains how “Violence is often the single most evident marker of manhood” (36). This violence is evident in the newspaper article when the author remarks that he overheard a male student walking by the volunteer table say “Why don’t they just die like men?” (Betheil 5). This quote demonstrates the extreme aversion men on campus had to being associated with HIV/AIDS. While this column may not have the clearest connections to morality, morality may be the means as to which some individuals justify homophobia and this idea can be used to synthesize the information in all columns in order to discuss how institutions shape sexuality through ideas of morality.

The last document that will be presented was a flyer found in the College’s files on the AIDS Memorial Quilt. The flyer is about an 18 year old AIDS patient named Henry Nicols and public appearances to raise awareness for HIV/AIDS. The flyer echoes the narratives of many of

the earlier columns by using morality to justify a separation of HIV/AIDS cases that can be considered acceptable and those that cannot. While other columns establish a narrative that promiscuous individuals and homosexuals have put themselves at risk, this flyer paints Nicols as an innocent victim because he caught the disease via a blood transfusion. In addition to this, it describes Nicols as a “normal in every way teen” in order to continue the narrative that he is undeserving of the disease as opposed if he was not a normal teenager. The flyer even includes endorsements with statements such as “When Boy Scout Henry Nicols got AIDS...”. The description of Nicols as a Boy Scout only reinforces the idea that he has good morals and is deserving of sympathy for being a victim of HIV/AIDS. One can contrast this with the narratives in the column about Magic Johnson, which continuously shamed and admonished him for the way in which he caught HIV and for failing to advocate for abstinence. As we look towards revealing how institutions such as the medical field shape sexuality, we can see that discussions around acceptable and unacceptable cases of HIV/AIDS factor heavily into the narratives of morality used to shape sexuality.

Given this depth of evidence, one can start to see how institutions such as the medical field shape sexuality through narratives of morality around HIV/AIDS. The framework for these ideas comes from Michel Foucault’s “The History of Sexuality”. There are two aspects of Foucault’s writing that apply to these columns. The first aspect of Foucault’s writing is his definition and use of the word power. He defines power as “the moving substrate of force relations” (93). For Foucault, power is not a central source of sovereignty or a general system of domination exerted by one group over another. The characteristics of power are that it is everywhere, that it is complex, invisible, and self-reproducing. Power matters because it

functions through the medical institution, the newspaper, and the student body to shape these narratives around sexuality and HIV/AIDS. The second aspect of Foucault's writing that comes to mind when considering these columns is his discussion of the medical confession. Foucault describes how the medical institution codified the religious confession into scientific terms by "combining confession with examination and the recollection of memories and free association" (65). The most relevant idea of Foucault's about confession is his claim that the effects of confession are medicalized. These ideas of confession are related to themes of morality in the newspaper columns because many of the columns directly correlate so-called immoral behaviors such as promiscuity or homosexuality with the risk of becoming infected with HIV and publicly admonish those who make those choices. It is important to consider who is speaking and who is listening in these situations, because the power relations between students who are reading the columns and individuals who are writing the columns such as doctors in the medical profession dictate how sexuality was shaped in the context of HIV/AIDS at Lafayette College.

These columns reveal that institutions shape sexuality by setting up a dichotomy between acceptable and unacceptable cases of HIV/AIDS based on the morality of sexual behaviors. These columns first set up a dichotomy between moral sexual behaviors and immoral sexual behaviors. This is seen in columns such as the one published in 1989 where Dr. Johnson implies that homosexuality and promiscuity are immoral actions that increase the risk of HIV/AIDS and the column published in 1991 where Dr. Johnson separates cases involving homosexual and bisexual men from the cases involving heterosexual individuals. The justification for this dichotomy is that the immoral behaviors are illustrated as being risky and can automatically lead to HIV infection. This means that the columns appear to make an argument using health factors as

the justification, but the fact that preventative measures can be taken to protect against HIV infection even when engaging in behaviors such as promiscuity or homosexuality demonstrate that the true justification is a moral one. This dichotomy regarding risk factors and sexual behaviors is paralleled in the dichotomy between acceptable and unacceptable cases of HIV/AIDS. The separation between acceptable and unacceptable cases is best seen in the flyer about Henry Nicols and his experiences living with HIV/AIDS. This flyer paints a picture of what an acceptable case of HIV/AIDS is by describing qualities of Nicols such as the way he became infected, the fact that he is a Boy Scout, and the fact that he is a normal teen. These qualities are used by the flyer to encourage sympathy for Nicols, while the reasons behind these qualities are very similar to the justifications used by earlier columns to differentiate between moral and immoral behaviors that could lead to HIV/AIDS. Moving forward, this investigation will examine how this dichotomy is used by institutions to shape sexuality and why these narratives are presented.

The dichotomy between risk factors that can lead to HIV/AIDS and acceptable and unacceptable cases of HIV/AIDS are utilized by institutions such as the medical field to comment on, and thus shape sexuality at Lafayette College. The two columns where one can see these justifications used to shape sexuality are the column written in 1990 by Dr. Johnson about student sexual practices at Lafayette College and the column by Dave Block about Magic Johnson. The first column uses a dichotomy influenced by morality when discussing student sexual practices by declaring that students have risky sexual behavior because of their struggles with decision making and consumption of alcohol. By presenting these behaviors as causes for HIV infection, Dr. Johnson is sending the message that these behaviors are immoral and that

students should change their behaviors. In effect, Dr. Johnson is simply the speaker for the medical field as it seeks to shape student's sexuality by limiting promiscuity. The column written by Dave Block expands on this point by using Magic Johnson and his promiscuous lifestyle as an example for what students should not do. To begin with, Block echoes Dr. Johnson's argument that promiscuity is immoral and directly leads to HIV/AIDS. After this, Block argues that Magic Johnson should now be using his position to advocate for abstinence and the restricting sex to be solely within marriage. The fact that this piece is an opinion piece that was read by many students demonstrate how sexuality on campus was shaped. Just like a number of Dr. Johnson's articles, the purpose of this column is to police sexuality on campus by constructing a narrative against promiscuity and homosexuality. This narrative is constructed on the foundation that there are immoral and moral sexual behaviors which dictate acceptable and unacceptable cases of HIV/AIDS and this dichotomy can be reflected back to attempt to shape sexuality. The reasons for shaping sexuality away from homosexuality and promiscuity is to reinforce the institutions of marriage and strengthen the normativity of heterosexuality.

The unwritten purpose of the numerous columns presented in this investigation is to reinforce marriage and heterosexuality under the guise of advice around HIV/AIDS. The columns appear to give objective information regarding the causes, prevention, and history of HIV/AIDS and often do a good job of presenting relevant factual information about safe sex practices and statistics around the number of individuals who have the disease. However, the columns still present narratives with a moral framework that do more to reinforce heterosexuality and marriage. These columns reinforce the normativity of heterosexuality by implying that homosexual behavior is immoral and can be a direct cause of HIV. Small attempts to break the

stereotype with comments such as “AIDS isn’t a gay disease” are minor when compared to the argument that homosexuality is a risky behavior that can directly lead to HIV without a discussion of safe sex practices. These columns reinforce heterosexuality because institutions such as the medical field reproduce hierarchies of sexuality through power relations. The hierarchy between heterosexuality and homosexuality is strengthened as the institutions discuss HIV/AIDS. These columns strengthen the institution of marriage by implying that promiscuity and abstinence are on opposite sides of morality and that promiscuity directly leads to HIV infections. This argument is most obvious in Dave Block’s column about Magic Johnson where he argues that Magic Johnson should be using his position to advocate for having young people practice abstinence until they’re married. Promiscuity disrupts the institution of marriage because one of the tenets of marriage in our society is that both participants have practiced abstinence before the marriage and that the marriage is monogamous. The fact that promiscuity can affect one’s chances of becoming infected with HIV/AIDS is used by these columns to fuel a narrative in support of the morality and normality of marriage. These columns briefly include the importance of safe sex practices but they focus on bashing promiscuity as the reason for HIV infection because this narrative shapes sexuality by strengthening the institution of marriage. Marriage and heterosexuality are also highly dependent on each other. One of the biggest components of heterosexuality in our society is the romanticizing of marriage and the stereotypical married couple is a heterosexual one. The way that our society constructs sexuality with both marriage and heterosexuality at the foundation is evident in the way that these columns show how other institutions such as the medical field reinforce this foundation.

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