

**BUILDING A COMMUNITY OF AFFECTS: A CARTOGRAPHY OF HIV/AIDS
NARRATIVES IN LATIN AMERICA (1982-2018)**

by

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This dissertation examines a corpus of novels, testimonies, letters, and poetry written by LGBTQ writers and activists (i.e. Néstor Perlongher, Caio Fernando Abreu, Herbert Daniel, Pedro Lemebel, Luís Capucho and Pablo Pérez) during the onset and development of the AIDS epidemic. Acknowledging the rich heterogeneity of AIDS writing in Latin America, my dissertation demonstrates how these narratives serve as a generative space to understand key social and medical aspects of the epidemic in the region. AIDS narratives are not solely literary texts, but an archive of memories that resists today's tendency of erasing the traumas and struggles of the past. Although the development of the virus was a permanent wound for many queer people worldwide—it also articulated the creation of communities of solidarity and resilience. In many of the analyzed works, there are configurations of queer kinship; that is, the establishment of alternative emotional attachments when medical and emotional care was provided by friends, lovers and strangers. The narratives also shed light on the ambivalent relationship between infected gay men and a repressive medical apparatus that displayed stigma and biases in the control of the epidemic. In addition, this project delves into an analysis of innovative conceptions of temporality in the context of an illness that caused a major disruption in the teleological perception of the time, life, and death.

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1.0 INTRODUCTION

Vida louca vida, vida breve
Já que eu não posso te levar
Quero que você me leve
Vida louca vida, vida imensa

Cazuza, “Vida louca vida”

In the contemporary Western world, same-sex desire has been linked with death, disease and extermination. Since the inception and coinage of “homosexuality” as a medical and social category at the end of the nineteenth century—used for the first time in 1869 by anti-sodomy laws defender Karl-Maria Kertbeny—same-sex acts have been deemed as unnatural, shameful and a clear representation of moral decay. In Latin American literary historiography, same-sex desire was represented in a negative light as a disgraceful lewdness that encouraged the destruction of those who were trapped by its evil. Sylvia Molloy, in her breakthrough analysis of pose and economies of desire in Latin American modernism, delves into the positivist thought of José Ingenieros (1877-1925) and his eugenic proposal to cleanse society of pathologies including homosexuality that needed to be eliminated to ensure national progress. Gabriel Giorgi, in his study of the representation of same-sex desire in Argentine literature, explains how homosexuality meant not only social but also physical death: “la homosexualidad ha sido tradicionalmente asociada con la extinción de linajes, con el final de las familias y las progenies, la crisis del orden reproductivo, tanto biológico como cultural” (*Sueños de exterminio* 10). By the same token, Giorgi also points out a common premise in homosexual themed novels of most of the late nineteenth century in Latin America: “los homosexuales, además, han sido frecuentemente (mejor

dicho sistemáticamente) representados en muertes violentas, como único final para sus cuerpos y deseos imposibles: *gay bashing*, suicidio, asesinato, [enfermedades letales] son los finales que incontables narrativas han reservado para estos moderados perversos” (17). Under this promise of destruction, the homosexual body has been subject to a recurring representation of inherent decay and unhappiness. Beginning with the positivist discourses of the nineteenth century, homosexuality has also been part of a discourse of medicalization that proved relevant again during the HIV/AIDS epidemic. In other words, if we trace not only a historical but also literary genealogy of gay literature in Latin America, there is a common appearance of the homosexual body as an outsider to the State—an Other marked by an unbearable difference, who suffers not only rejection, but untimely death and impossible happiness. To back up this assertion, I present two foundational texts in the corpus of gay literature in the region.

1.1 LITERARY LEGACIES OF THE DISEASED HOMOSEXUAL BODY

Acknowledged as the first novel in Latin America to develop the story of a same-sex romantic relationship as the central plot, *Bom crioulo*, published by Brazilian author Adolfo Caminha in 1895, is a paradigmatic literary effort to represent homosexuality as disease. Although *Bom Crioulo* is a unique text for its frank representation of same-sex desire between a young cabin boy and a runaway slave turned into a seaman in a time when those kind of relationships were simply unthinkable, Caminha, heavily influenced by the naturalistic writings of Emile Zola and Eça de Queiroz, inscribes homosexuality as a degenerate behavior that inevitably leads to destruction. Fate is inescapable. Amaro, the hefty runaway slave, is described as an insatiable sexual beast who takes advantage of a younger and inexperienced cabin boy. For his misdeeds, his relationship with

the pretty Aleixo not only fails, but his own body suffers a staggering deterioration. The narrator describes with almost clinical exactitude the physical and mental decay of the character who has been secluded into a hospital:

Um desespero surdo, um desespero incrível, aumentado por acidentes patológicos, fomentado por uma espécie de lepra contagiosa que brotara, rápido, em seu corpo, onde sangravam ainda, obstinadamente lívidas marcas de castigo —um desespero fantástico enchia o coração amargurado de Bom-Crioulo. . . . O grumete abandonara-o, esquecera-o, e nem ao menos dera-lhe uma satisfação . . . Parecia uma maldição! Rebentavam-lhe feridas: havia uma grande aberta no joelho esquerdo. Não atinava com aquilo. Talvez alguma praga¹ injusta [...] Era horroroso. (98)

Carrying the double stigma of being a black slave in Imperial Brazil, and a sexual “deviant,” Amaro enables tragedy by killing his estranged lover in the hustle and bustle of the Rio de Janeiro city life. His own “degeneracy” as a racialized sexual object solely moved by unhealthy passions leads to the impossibility of his own love story. The effeminate cabin boy has to pay a high price for his involvement in the most nefarious acts with a social outcast and, for this, is ultimately removed from social life. This effacement of the effeminate homosexual is still relevant in most Latin American societies, where masculinity —despite all its contradictions—has had a pivotal role in the establishment of patriarchy and nation-building projects that have considered homosexuality as an infectious threat to the security and well-being of the national body.

¹ Consider here the use of the phrase “praga injusta” (unjust plague) and its resonance with the modern epidemic of HIV/AIDS to describe the moral and physical state of the runaway slave Bom-Crioulo.

Homosexuality, and particularly the effeminate male body, needed to be suppressed and criminalized.

El ángel de Sodoma (1927), one of the first novels dealing with homosexuality published in the Spanish language, is a relevant example of literary writing depicting same-sex desire as a pathological disorder. However, unlike Caminha's *Bom Crioulo* in which homosexuality is a potential trigger for criminal behavior, Alfonso Hernández Catá focuses his writing on the sacrifice and decorum of an effeminate homosexual man who suffers of unwanted symptoms of sexual deviance. José María, a soft-spoken, home loving man who is the head of a household composed of his orphan siblings, becomes terrified of accepting his recently discovered fondness for other men. He cannot tarnish both the memory of his deceased parents, and the honor of his remaining relatives. Terrified and ashamed of his condition, José Maria tries to make sense of a complex symptomology to find the source of his personal disgrace. For him, his homosexual tendencies can be traced back to this pubertal behavior:

Ya en los primeros recuerdos de pubertad, los indicios se convertían en síntomas. . . . Las mismas virtudes ensalzadas por su voz popular: su minuciosidad, su espíritu de orden, mostraban, alumbradas por vivisectora luz, un revés repugnante. . . . ¿De cuál pasado le venía la degeneración? ¿O habría brotado en él por mal milagro, invistiéndole del funesto deshonor propio del cabeza de una estirpe de sexo espurio, marcada por la Naturaleza con la ambigüedad del hermafrodita? (23)

Based on the previous passage, Daniel Balderston explains that Jose Maria's homosexuality "is couched in the language of genetic degeneration" (115). Certainly, the young man wants to trace his illness back to an unknown ancestral past that can explain a humiliating inversion that will put an end to his family honor. In addition, I would add that for José María his sexual degeneracy is

also mirrored in his very own frail anatomy, which he considers inferior to the strength and sense of masculine plenitude embodied by his brother Jaime. This perception echoes the nineteenth century medical and scientific discourse that deemed homosexuality not only as amoral perversion, but also as an anatomical-pathological dysfunction:

José María se incorporó y, en la luna del armario, vio, con ira cual si se tratara de un personaje desconocido hasta entonces, su faz y su tórax. . . . Un halo ambiguo, de carne y de formas indecisas entre los dos sexos, diferenciaba su torso del velludo de Jaime. Equívoca dejadez afinaba las facciones: la boca participaba de algo de la de sus hermanas; en las violetas de las ojeras, el verde de los ojos tenía una raya anormal, triste. Y por esa tristeza el odio se fue trocando poco a poco en lástima.

(24)

Interestingly, contrary to the work of physicians like Cesare Lombroso that conflated homosexuality with a propensity to criminal activity, Hernández Catá wants to discredit that type of correlation by attaching the opinions of an endocrinologist and a lawyer in his book. The authoritative preface by Gregorio Marañón and the epilogue written by Luis Jiménez de Asúa try to dissuade the readership from a hasty judgment of homosexuality as moral debauchery by explaining that such sexual inversion, as most illnesses, couldn't be controlled by those afflicted. In his epilogue, Jiménez de Asúa cites Marañón's medical work to back up this idea. He writes, "[Marañón] afirma que 'toda forma de inversión sexual corresponde a una inversión orgánica propia' y 'que el invertido es, pues, tan responsable de su anormalidad como pudiera el diabético de su glucosuria'" (81). Asúa's and Marañón's words comparing gay people to diabetics may sound out of place, even comical, by today's standards, but they demonstrate how the legal and medical discourses directly linked same-sex behavior as a disease needed to be controlled and

contained in open society. When homosexuality was not portrayed as a physical illness, it was deemed a moral flaw, an unfortunate psychological vice directly related to artists, prostitutes and foreigners.

In her remarkable research on illness in Latin American *modernista* writing, Gabriela Nouzeilles argues on the centrality of disease in nineteenth century Spanish American literature. Nouzeilles states: “Tanto el naturalismo como el modernismo compartieron la retórica excesiva del siglo XIX: una retórica de la salud y de la enfermedad,² la decadencia y la degeneración, de lo normal y de lo patológico, que contaba con un conjunto de estrategias discursivas con las cuales describir no sólo cuerpos enfermos, sino también clases sociales, posiciones políticas, géneros sexuales e incluso textos literarios” (151). While the genre of the naturalistic novel focuses on the diseased body of the Other (the homosexual, the prostitute, the madman), *modernista* writing narrates illness from the point of view of the diseased. In other words, the intellectual, the artist “invirtiendo la estructura jerárquica del caso clínico, cuenta la historia imprecisa de la experiencia individual de lo mórbido . . . los modernistas se especializaron en formular narraciones autobiográficas de la historia clínica de sus propias experiencias con el mundo impreciso de la convalecencia” (151, 159). Opposed to the normative discourses on social hygiene, morality and respectability, the *modernista* artist decides to fulfill the role of the tormented genius whose artistic talent cannot be separated from his own existential crises, his fondness of frivolity, and his pursuit of atypical sexual pleasures particularly homosexuality. The medical discourse had something to say about this “degenerate” conception of the artist. German physician Max Nordau in his book

² In the configuration of *modernista* writing, tuberculosis had a key literary presence in the works of many different authors. The disease was either the consequence of genius and creativity or related to behaviors deemed as pathological in the nineteenth and early twentieth century such as heightened sexuality and deviant social behaviors. Alfonso Hernández Catá’s *Novela erotica* (1909) and Abraham Valdelomar’s *La ciudad de los tísicos* (1911) are two novels dealing with the topic.

Degeneration (1892) analyzes different case studies of fin-de-siècle European artistic geniuses (i.e. Oscar Wilde, Richard Wagner, Friedrich Nietzsche) affected, according to his ideas, by a heightened disposition to degeneration and hysteria. In his “clinical” analysis the social critic characterizes these individuals as sufferers of a common trait of symptoms: “falta de sentido moral, sensibilidad excesiva, perversiones sexuales, abulia, anarquismo político, esterilidad, gusto por lo inútil, formación de grupos cerrados, imitación compulsiva, y anormalidades faciales y craneales” (Nouzeilles 155). Although not all *modernista* writers focused their literary creation on illness or psychopathic disorders, it is relevant how some of these symptoms, real or imaginary, displayed in the works of these artists have been historically attributed to homosexuality. For instance, we can enumerate the correlation of homosexual tendencies to hedonism, unproductivity, barrenness and the termination of any possibility of genealogical continuation. Homosexuality, for some social scientists of the time, was considered a pursuit of the upper classes that showed the decadence of a new type of individual that emerged as a category in the boom of the medical sciences that sought to study such conduct as a clinical case (with a specific etiology, prognosis, and possibilities of therapeutic treatment).

1.2 A MODERN EPIDEMIC OF GLOBAL PROPORTIONS

Although this dissertation project is a literary and theoretical analysis of HIV/AIDS narratives about homosexual men during the span of four decades in Latin America (1980s to late 2010s), the need to delve into the past of historical representations of homosexuality in our region is straightforward: the writing on homosexuality, as a behavior or as an identity, has been systematically linked to illness and degeneration. The mapping that has been laid out regarding

the leading perceptions of homosexuality in Latin American throughout its history is relevant to understanding how HIV/AIDS discourses affected gay life in most Latin American metropolises, especially during the onset of the epidemic. If our gay past dwells on death, pain and the impossibility of being, the AIDS epidemic that mostly affected and exterminated queer bodies across the Western world—to the extent the virus was first named “Gay Related Immune Deficiency (GRID) in 1982—was the confirmation for many of the alleged negative consequences of homosexuality as an unhealthy lifestyle certainly ending in death.

Even when the virus’s devastating impact for most of the gay communities in the West is undeniable, HIV/AIDS was never an exclusively gay illness. The initial tendency to categorize the disease as a “gay cancer” was not only related to the high number of homosexual men who contracted this virus in the most important cities of the world (Paris, San Francisco, Los Angeles, and New York were the main centers of the epidemic in the “developed” world), but also to a common history of portraying homosexual behavior as abnormal and unhealthy. For the hegemonic medical discourse, for the heterosexual family, for the morally concerned citizen, this mysterious medical condition could only have its origin in the censurable behavior of homosexuals and any type of sexual invert. One of the most unsettling aspects in the initial stages of AIDS historiography was the inability to fully understand the causes and means of transmission which led to fear and discrimination of those social groups that were considered under the highest risk of contagion (the 3H group: homosexuals, hemophiliacs, and Haitians). We also need to include injecting drug users into this category. It was also particularly challenging to delineate a specific symptomatology in HIV/AIDS for a very salient reason. As Alan Whiteside explains, “AIDS results in a deficiency within the immune system; [so AIDS] is a syndrome not a single disease” (2). After acquiring the HIV (Human Immunodeficiency Virus), a systematic attack of the immune

system takes place for a long period; if left undiagnosed or untreated, HIV infection eventually leads to AIDS (Acquired Immunodeficiency Syndrome). In this final stage of infection (AIDS), the human body's immune system is so weakened that the body cannot fight any type of opportunistic infections. For this reason, thousands of people (including a large number of gay men among them) were decimated by a novel virus rendering their bodies vulnerable to a gamut of unusual opportunistic bacteria, fungi and parasites that destroyed their bodies before the syndrome's etiology could even be identified. Highly unusual conditions like Kaposi's sarcoma (an aggressive skin cancer), different types of pneumonia, cryptococcal meningitis, and toxoplasmosis (a parasite infection) undermined the bodies of patients who had no real chances of living for more than few weeks or even days. After a quick process of sudden debilitation and suffering, death will ensue.

Although the US Center for Disease Control (CDC) reported the disease for the first time in 1981, the origin of the virus goes further back. It is believed that HIV originated from Simian immunodeficiency viruses. Whiteside, a recognized South African academic on HIV/AIDS studies, states that

current thinking is the epidemic had its origins through chimpanzee and monkey blood entering people's bodies, probably during butchering of bush meat. The earliest plasma sample, subsequently found to have HIV, was taken in the Democratic Republic of Congo in 1960. This led scientists to calculate the current HIV-1 epidemic originated in a zoonotic [diseases typically found in animals but that can infect humans] event in Cameroon between 1884 and 1924. (21)

Despite its somewhat unclear and remote origin, HIV/AIDS soon became the most important and deadliest global pandemic in modern times. In this age of globalization, no other

illness has been so ubiquitously represented in the arts, sciences and media. In fact, HIV/AIDS made its debut in the most interconnected era in global history. An isolated and slow-paced world suddenly changed to a globalized society that allows all type of connections among people around the world. Thanks to breakthrough innovations in communications and transportation, people and goods were able to travel long distances in a matter of hours, and even sending important messages to the other side of the world was possible to achieve for the first time in just a few minutes. This period of contemporary modernity was also the right instance for the spread of a global epidemic that still continues to affect people in all corners of the globe. We have to consider not only the intensification of human immigration especially to rich, industrialized nations from the Global South, but also the acceleration of international free markets that promoted all kind of human flows and exchanges such as sex tourism, and transnational prostitution. Although certainly a tragic global event, the viral pandemic was remarkably useful for unveiling the inherent inequalities of globalization. It exposed both how an illness reaches “global” status as long as it affects the main centers of global modernity, and the extremely weak networks of health support (medications, therapies, or social awareness) for infected people located in the periphery of the world. Forty years later after its first formal medical appearance, many advances to fight the disease have been possible thanks to science and the fierce activism of many social groups.

However, the benefits of this progress have been localized, and HIV/AIDS social stigma as a non-heterosexual illness is still widespread. In today’s Western social imaginary, AIDS is not only seen as a non-lethal, chronic illness treated with effective medication, but as a distant African problem with no signs of slowing down. By the end of 2015, “an estimated eighty-two million people have been infected with HIV [throughout history], and of them over forty-one million have died from AIDS-related causes”. In addition, “Sub-Saharan Africa has the largest number of

people living with HIV: nearly twenty-six million, just over 70 per cent of the global total” (Whiteside 4, 7). Interestingly, the AIDS epidemic in Africa has been for the most part a heterosexual one. Shawn Smallman explains how “not until 1986 did people realize that there was a widespread heterosexual epidemic in sub-Saharan Africa. Early evidence of this heterosexual epidemic was often disbelieved. People found it difficult to think of HIV as anything but a gay disease” (12). This is a key aspect not only to understand why a disregarded region of the world is still suffering the dire consequences from a “controlled” illness, but also to better grasp the inextricable relationship of the AIDS epidemics to contemporary gay history. Not only justified by the staggering statistics of infected HIV people today in the world, this dissertation project is developed under the premise that this viral epidemic constituted an instance of trauma for gay communities around the Western world that still lingers in our present. The epidemic has been a key concern in the lives of many gay men in the last decades: especially, for those whose lives ended too soon and too suddenly without any clear explanation. There are also survivors who try to find meaning for all the sense of loss and fear that surrounded their lives in the early stages of the epidemic. In addition, newer generations attempt either to understand their role as heirs of a history of mourning and AIDS activism, or move away from a tragic past they may consider an inconvenient burden in a historic moment in which social acceptance of sexual minorities is becoming an increasing reality in different parts of the globe. Even nowadays when we have been living in an era of highly effective antiretroviral therapies (ARTs), it is difficult to deny that HIV/AIDS has been a present force in the lives of gay men either as an ever-present fear, as a memory of the past, or even as a normalized condition devoid of all charges of stigma.

1.3 THE “GAY CANCER” GOES SOUTH. ASPECTS OF THE EPIDEMIC IN LATIN AMERICA

Delving into the specificities of HIV/AIDS in Latin America and the Caribbean, there is a total of 2.1 million people living with HIV in the region nowadays (UNAIDS data 2017). Brazil, Mexico and Chile are the countries with the highest numbers of newly infected people. In addition, gay men and other men who have sex with men are the risk group with the highest distribution of new HIV infections with a 30% percent share of total infections in 2014 (Prevention Gap Report 2016, 145). The region still faces important challenges to reach the UNAIDS 90-90-90 treatment targets to significantly reduce HIV transmission worldwide by 2020. According to this organization, in 2015, 75% of people living with HIV knew about their HIV status, 55% of people living with HIV were on antiretroviral treatment, and 41% of people living with HIV were virally suppressed (Gap Report 2016, 143). It is also important to point out that both the advances and challenges registered in the region on AIDS policy differ greatly from country to country. There are profound disparities in the quality and coverage of public health systems, in the type of vulnerable risk groups, and in the attainment of human rights and social acceptance for sexual minorities. However, the conception of the U.S. as the “epicenter” of the epidemic was a commonality in the historical HIV/AIDS discourse in Latin America. Although this fact has been often overlooked, no understanding of the epidemic was possible without the development of the infection in the United States. According to historian Shawn Smallman, the virus was first recognized in Haiti and the U.S. around the same time in 1978, possibly from direct contacts from Africa and Europe (26). In continental Latin America, the first cases appeared around 1981, when the disease was considered a “gay cancer” due to the high number of infected homosexual men occurring in the major U.S cities. All this was happening under the conservative administration of Ronald Reagan, and his

strong interventionist policies in Central America that fostered strong anti-American sentiments in many left-leaning countries in the region. AIDS was considered a U.S phenomenon that was infiltrating Latin America's local reality. In fact, Fidel Castro's Cuba blamed the U.S. as the locus of the virus due to the capitalistic decadence and lack of morals of American society. Most health and political authorities deduced that since the prevalence of homosexuals and sharers of needles was supposedly lower in most Latin American nations compared with the U.S., the region would not be hit hard by the lethal disease. However, the rampant rise of new cases of the virus clearly showed that the region was about to undergo the beginning of an epidemic that would spread fears of difference and sexual liberation.

The stigma linked to the disease in the region affected gay men, who were seen as the greatest threat. In fact, during the early stages of the dissemination of the virus in the region, AIDS was not a concerning health issue for most government authorities. Historian Shawn Smallman and journalist/activist Tim Frasca demonstrate in their pioneering work (at least in the field of English language scholarship) on HIV/AIDS in Latin America that for most health and political authorities in the region this mysterious illness was a gay, middle-class phenomenon that would not be taken as a priority. AIDS was a "foreign" illness brought to native lands by cosmopolitan men of loose morals during their travels of leisure and excess. There was also the idea that the gay sex tourist from the developed world was responsible for the spread of the infection to local bodies. In recent research on the onset of the epidemic in Chile, Amelia Donoso and Víctor Hugo Robles quote the words of the Minister of Public Health in Pinochet's Chile in the context of the first death of an infected patient in 1984: Edmundo Rodríguez, a gay man from Santiago. The government official was emphatic: "Esto es un caso aislado, somos un país decente, eso no va a llegar aquí" (16). At the onset, the medical authorities rushed to portray gay men as the only social group that

could be affected: “En nuestro país los individuos [homosexual men] que actualmente sufren de este mal —así como los que murieron— pertenecen al estrato socioeconómico alto y se contagiaron en Brasil y en Estados Unidos. Aquí el problema está lejos de inscribirse dentro de las prioridades de la salud pública” (*Revista APSI*, 27).

Similarly, for Cuban authorities, this disease was an external attack on the wellbeing of the Island. Smallman explains that the Cuban government “announced that the first person to die of AIDS in Cuba was a theater designer who became infected on a New York visit, an account that plays on the stereotypes of theater people in Cuba” (39). Even when Cuba’s response to the epidemic has been one of the most successful ones in the region, some of their prevention methods were highly controversial. While local health authorities advocated for meticulous policies of mass testing of the general population and for forced quarantine of those infected, international health experts overseas heavily criticized the program in a country with a complicated record of human rights compliance and a past history of state-sponsored homophobia. Los Cocos, a sanatorium in Santiago de las Vegas outside of Havana, was for many years the main national center for the reclusion of those people living with HIV. Naturally, this caused the separation of families, and the “disappearance” of many citizens from public life to live under the care of a government that wanted to demonstrate its effectiveness and leadership on health policy internationally. On the other hand, Brazil, the country with the largest population and with the highest rates of HIV sufferers in the region’s history, has often been disregarded in most comprehensive literary analyses on HIV/AIDS narratives in Latin America. In order to address this substantial absence, this project dialogues with the social and literary texts emanating from this region, and defends the principle that no comprehensive research on the *escritura seropositiva* in Latin America can be completed without a serious approach to the Brazilian case. Similar to Chile, in Brazil, HIV/AIDS

was deemed as an overseas ailment originating in the major centers of global modernity. In *Global Responses to AIDS*, Cristiana Bastos explains that “the association of AIDS with privilege at the beginning of the epidemic . . . was used as an excuse for the government’s lack of attention to the disease, as the government could claim that AIDS affected a very small minority (the First World Within)” (72). She also cites the words of Brazilian Health Minister in 1985 declaring “that even though his office was taking a series of measures against AIDS, this disease could not really be considered a priority” (72).

This lack of action would change as soon as it became evident that HIV/AIDS was not a segregated medical condition only affecting homosexuals in São Paulo and Rio de Janeiro, but a national threat heavily affecting all kind of groups: sex workers, transvestites, drug users, hemophiliacs, and heterosexual men and women. According to national statistics, “by the mid-1990s most people with HIV were infected through unprotected heterosexual sex, although the homosexual community continued to be heavily affected” (Smallman 79). In a country where a military dictatorship ruled from 1964 to 1985, the initial timid response proved to be highly inadequate in a national reality plagued by serious social inequalities, racism, weak networks of state welfare, and an ever-growing community of people living in the margins of society in a terribly violent country. The nation as a whole had to take drastic measures to avoid an epidemic of unmanageable proportions as in other developing nations in Sub-Saharan Africa and Asia. Since the early years of the epidemic, civil society, especially sexual minorities, established support groups and organizations all over the country to defend the rights of people suffering HIV. Many organizations started to emerge since the mid-80s. Some of the most relevant ones nationally were Grupo Gay da Bahia (GGB), Grupo de Apoio à Prevenção à AIDS (GAPA), Grupo Pela Vida founded by the popular activist Herbert Daniel (his essays will be analyzed in this dissertation

project), and Associação Brasileira Interdisciplinar de AIDS (ABIA). Tim Frasca states that most surviving activists

recall the earliest days of the fight against AIDS in Brazil as a period guided by utopian visions, by dreams of social change coincident with the promise of democracy after two decades of military rule. People were drawn to the AIDS issue out of deep personal motivations . . . or recognition that the social stigma associated with HIV was both dangerous and an opportunity to address social exclusions programmatically and culturally—crucial in a country with one of the worst forms of economic apartheid in the world. (194)

Thanks to the efforts from this network of organizations with chapters in all regions of Brazil and the enactment of a new constitution in 1988 that guaranteed health as a basic right for all, the Brazilian government took the necessary measures, especially after 1996, to provide antiretroviral therapy to all infected patients. A great challenge in a developing country, this coverage (highly effective to control the high rates of contagion and to save the lives of thousands of infected people) was possible due to Brazil's interest in the formulation of generic drugs that could lower the high costs of importing drugs from the US. As Smallman explains, this originated a conflict not only with the most powerful economy in the world, but also with the interests of pharmaceutical companies (70). After a failed enforcement of the international patents, Brazil was successful in providing medications for its citizens, and shared its ability to produce cheaper medications to other developing countries.

In the case of Argentina, early gay organizations had also an important role in the prevention of the disease. The Raúl Alfonsín and Carlos Menem governments' responses were deficient. After all, Argentina had just experienced a long military dictatorship known for

terrorizing tactics targeted to many of its citizens. Gay organizations had no other choice but to face the crisis by themselves. As César Ciglutti, former president of the CHA (Comunidad Homosexual Argentina) states, “We had a meeting and said to each other, If we wait for the government to do something, we’ll be dead. So let’s do it ourselves” (Frasca 168). Also, different from many other countries in the region where gay men were originally the most affected segment of the general population, Argentina’s major risk group was heavily concentrated in IDUs (Intravenous Drug Users). This fact required a combination of drug prevention campaigns and sexual education that did not arrive in a timely way. Other large nations such as Mexico saw the first cases of AIDS in 1983. In that country, the first stage of the epidemic was concentrated in large urban areas and mostly affected homosexual men. Many non-governmental organizations flourished outside of the major cities to provide awareness and in many cases treatment to all kind of risk groups. In Central America, the epidemic and the care conditions were highly contrasting. While Honduras, one of the most violent and poor countries in the region, experienced a “heterosexual” epidemic with the highest rates of transmission in Central America, the largest group of AIDS suffers in Costa Rica were homosexual men. These social groups were able to mobilize and integrate important organizations to fight against the disease. For instance, founded in 1987, the Asociación de Lucha Contra el SIDA was the first gay organization in the country, later turning into ILPES (Instituto Latinoamericano de Prevención y Educación de la Salud). ILPES was a highly successful NGO that contributed to the prevention of the disease, and the later involvement of health government authorities to combat the illness nationwide. In the current Latin American context, Argentina, Chile, Costa Rica, Brazil, and Cuba are some of the countries that have extended affordable, and in many instances, free coverage of antiretroviral therapy to people living with HIV. This “medication cocktail” appeared around 1996 to save the lives of many

infected people. Nonetheless, these advances were possible for the most part thanks to legal action in national high courts, and not to a decided, unilateral action of governments to protect their citizens. Hopeless patients in countries like Argentina (1997), Costa Rica (1997), Brazil (1996) had to recur to legal instances to force their local health authorities to provide lifesaving, yet highly expensive, medication.

In this recounting of the development of AIDS in some regions of Latin America, some facts are salient: in the social imaginary, especially in the early years, the virus was directly linked to homosexual men, the contribution of non-governmental organizations (often founded by sexual minorities) was key for both the defense of human rights for those living with the virus, and for the education of at-risk groups, and the population at large. In addition, HIV/AIDS was synonymous with social death for many gay people not only for the discrimination of ignorant citizenry in homophobic and sexist societies, but also for the inadequate response from a medical community that considered homosexual behavior as a disease, and the AIDS epidemic as a natural outcome for these patients. In our geographical area of study, the definition of homosexual behavior has been difficult to categorize. In many Latino/a cultures, some men who engage in sexual activity with other men do not consider themselves as homosexuals. As long as men assume an active role in a same-sex encounter their masculinity is not to be questioned. On the contrary, the receptive partner is deemed as an effeminate homosexual, and thus cannot accede to the privileges of manhood and heterosexuality. HIV/AIDS social researchers found this quite challenging since patients who got infected via same-sex sexual contact consider their own HIV seropositive status as heterosexual.

As has been stated previously, it was only when the epidemic started to affect general sections of the population (heterosexual men, heterosexual men, children or even famous singers,

and TV or movie stars) that the epidemic became an urgent matter for public health systems worldwide. It also has to be considered that Latin America's social turmoil, its unstable political institutions, and dictatorial pasts worsened the already weak response of many countries without the needed infrastructure and resources to fight against the disease. In the present reality of HIV/AIDS in a post-antiretroviral era, sexual dissident communities are still disproportionately affected. Gay men are not the only ones getting HIV positive. Other sexual minorities like transvestites and transgender people are in situations of extreme social vulnerability (unregulated sex work, poverty, extreme violence, and inability to access comprehensive health services) that not only shorten their life spans dramatically but make them very prone to catch the HIV virus early in their lives. In fact, transgender woman are 49% times more at risk to become infected with HIV than the general population (Prevention Gap Report, 2016). Although Latin America as an entire region has made significant progress to advance human rights protections of their LGBTI citizens (same-sex marriage³ or same-sex unions, legislation for the defense of sexual minorities has been enacted in many cities), there are still many significant challenges to equality. LGBTI people experience a lot of violence in their respective countries, and this is likely to be aggravated depending on your race, HIV status, and gender expression. For instance, Brazil has one of the highest murder rates of sexual minorities in the world. According to the organization Grupo Gay da Bahia (GGB), there were 319 murders of LGBTI people in 2015. In fact, from 2013 to 2016, there were at least 1600 killings (the organization monitors these numbers from the publication of news in all national media and publish a "relatório anual" on its website). In Mexico and Honduras, violence to transvestite and transsexual people is widespread. According to the Trans Murder

³ As of 2020 in Latin America, same-sex marriage is legal in Argentina, Brazil, Colombia, Ecuador, and Uruguay. In Mexico, same-sex marriage is legal and performed in Mexico City and 18 states. Due to a legal decision from the Supreme Court, Costa Rica will legalize same-sex marriage on May 26, 2020.

Monitoring Project from the organization Transgender Europe (TGEU), from early 2008 to late 2015, there were 1575 killing of transvestites and transsexuals in Central and South America which represents 78% of the globally reported murders.

1.4 HIV/AIDS: A BLOW TO THE BOUNDLESS POSSIBILITIES OF A SEXUAL REVOLUTION

In a recent paper on homosexual liberation movements in Latin America from 1967 to 1982, Patricio Simonetto explains that despite of the heterogeneous nature of these political groups, these organizations “se ampararon en un gran marco común: los intentos por suturar el imaginario revolucionario de una izquierda preocupada por la acción obrera con el rastrillaje por una revolución sexual que desatara los cuerpos de sus funciones meramente reproductivas y productivas” (172). In a historical moment when being homosexual was considered taboo, and leftist student movements faced state repression, gay political groups emerged to fight for their ideals of sexual liberation and radical revolution. We cannot overstate the importance of the Mexican Student Movement of 1968 and the protests of May 68 in France for the establishment of these vibrant political organizations in Mexico and Argentina respectively. As José Quiroga and Daniel Balderston state in *Sexualidades en disputa*, the region had already started to question state-sponsored definitions of gender normalcy and sexual behavior when *queer theory* emerged as an Anglophone academic phenomenon. Even before Stonewall in 1969, homosexuals in Argentina were already organizing politically. In 1967, Buenos Aires saw the emergence of *Nuestro Mundo*, considered to be the first group of gay political activists in the region and the precursor of FLH (Frente de Liberación Homosexual), founded in 1971, with a strong affinity for leftist popular

movements such as Peronism. This was ironic though because far-left factions of Peronism such as the radical organization Montoneros disapproved of the “infiltration” of homosexuals in Argentine politics. A known chant of the group that remained for history exposes it: “No somos putos/ no somos faloperos/ somos soldados de FAR y Montoneros.” As mentioned before, Balderston and Quiroga shed light on the *avant-garde* aspects of sexual politics in Latin America and the pioneering reconceptualizations of gay identity, stating: “si las posiciones de [Manuel] Puig y [Néstor] Perlongher al final de sus vidas expresan un cuestionamiento radical de la ‘homosexualidad’ y de la ‘identidad homosexual’ no deja de ser interesante que haya sido justamente en los años posteriores a la desaparición de ambos que la temática *queer* haya comenzado a establecerse de modo serio” (78). In other words, Latin American thought was able to evolve enough to go beyond defined categorizations of gay and lesbian identity. The emergence of the AIDS epidemic halted the potentiality for radical sexual freedom. Some of the first activist groups (including their members) had already disappeared and the remaining ones needed to replace their former ideals with “pragmatic” plans of survival in a moment of crisis. The commitment to repeal the reign of heterosexuality and gender normativity had to be re-focused to an organized mobilization to fight AIDS in a community that was defenseless.

A past of political utopia and sexual experimentation was now a present of medicalization, fear, and shame. One of the pioneers of the first homosexual liberation movements, writer and activist Néstor Perlongher, analyzes these steep changes in his essay writing. In the essays collected in *Prosa plebeya*, he considers AIDS as a dangerous bio-political weapon that completely undermined the continuation of sexual liberation in homosexuality. In his well-known text “La desaparición de la homosexualidad,” Perlongher explains how the control of sexual practices and

bodies during the onset of AIDS was the beginning of a stage of sexual repression and containment.

The Argentine writer explains:

El pánico del Sida radicaliza un reflujo de la revolución sexual que ya se venía insinuando en tendencias como la minoritariamente desarrollada en Estados Unidos que postulaban el retorno a la castidad. El episodio del Sida es el golpe de gracia, porque cambia completamente las líneas de alianza, las divisorias de aguas, las fronteras. Hay sí discriminación y exclusión con respecto a los enfermos de Sida, pero ellos —recuérdese— no son solamente *maricones*. Ese estigma tiene más que ver, parece, con el escándalo de la muerte y su cercanía en una sociedad altamente medicalizada. (89)

Perlongher points out an important detail of the disease that has a direct relationship with the historical conception of homosexuality as inherently tragic. AIDS patients were not only discriminated against for their potential identity as gay people, but also for their status as agents of death, as bodies beyond help. For many, the homosexual man was a focus of infection produced by sexual degeneracy. As Susan Sontag explains, unlike cancer, which was conceived as a feminine disease that unjustly attacked a vulnerable, innocent body, AIDS patients were viewed as gay men who brought on their own destruction due to their reckless sexual promiscuity and drug abuse. This was the narrative employed in the United States during the Reagan and first Bush era that too often ignored the problem at the expense of thousands of deaths of young gay men due to the lack of effective treatment. Gay lives were considered disposable and only the combative activism of groups like ACT UP prompted any kind of response and investment of resources in treatment options. Ronald Reagan did not acknowledge the existence of the epidemic until 1985, which was an unjustifiably late response to the dramatic dimension of the AIDS epidemic.

As has been stated previously, Latin America was not an exception to this delayed action. In many instances, organized activist groups had to force their national health authorities to provide access to treatment and establish prevention policies. In national realities that lacked infrastructure and the means to do it, sexual minority groups had to create their own networks of care to advocate for their very own survival. It is true though that progress has been made. HIV/AIDS is not a death sentence any longer, but a chronic condition requiring regular antiretroviral therapy. Despite all the self-evident positive aspects of living in a post-antiretroviral era, it has also come with a downside. Being a HIV positive gay man/person today means being a person under constant medical vigilance. Dependent on a strict medication regimen, those infected are dependent on the effective responses of their local government to maintain their good health, and other ones need to have hefty resources for astronomical drug prices. Besides all this, HIV/AIDS stigma is still well and alive. In this modern age of Grindr and PrEP (by this I mean an age in which gay men are able to use technology to seek sexual or romantic partners, and diminish their chances to get HIV thanks to a preventive medication), infected gay people still have to “confess” a shameful condition burdened with all the memories of a past filled with grief and terror. Even within the gay communities, infected people with undetectable viral loads are perceived as dangerous, and undesirable despite the chances of contracting HIV from them being negligible. Ignorance about HIV/AIDS remains a common problem in everyday society, especially after the small role it plays nowadays in media and global politics.

1.5 AN EMERGING SUBJECT OF STUDY: HIV/AIDS NARRATIVES IN LATIN AMERICA

Taking into consideration the recurring trope of death and destruction in the development of gay literary manifestations in Latin America,⁴ I intend to study a corpus of novels, testimonies, letters and chronicles depicting the experience of queer lives during the evolution of the AIDS epidemic in Latin America. During the late eighties and early nineties, there was a surge of HIV/AIDS narratives documenting the lives of gay men and women struggling to stay alive in the face of this new “cancer” that promised certain death. Most of the “texts” that cover the first stage of this period of gay history share a basic commonality: a pervasive tragedy of inevitable defeat and extinction. If the first years of activism in the late sixties and seventies were moments of sexual liberation and the affirmation of rights and visibility, the appearance of the virus meant destruction beyond hope, the confirmation that difference in sexuality had no place in society, and that the beginnings of a community were just the confirmation of its early disappearance. In a current environment in which studies of gender and sexual minorities have started to gain traction in the realm of Latin American literary and cultural studies, HIV/AIDS as a literary phenomenon in Latin American writing has recently started to occupy the attention of literary critics. In fact, the scope of HIV/AIDS literary studies in Latin America has a lot of potential due to the vast amount of material (novels, poetry, short stories, testimonies, photography, political essays, graphic art, etc.) that has accumulated throughout the history of the virus. We can even think of these narratives as a genre that has cultivated some key texts thanks to the creation of exceptional late writers such as

⁴ This literary legacy of depiction of gay lives as tragic and bounded to death was reinforced during the early stages of the AIDS epidemic, and the stigma associated to queer existence. For years, the epidemic adversely affected a potential development of sexual liberation in most urban realities in the region.

Reinaldo Arenas, Severo Sarduy and Pedro Lemebel. One of the first analyses of this literary and artistic manifestations was the work of Chilean writer and scholar Lina Meruane, who published *Viajes virales: La crisis del contagio global en la escritura del sida* (2012) with the Fondo de Cultura Económica. In addition, there are some other publications that study specific national cases: Severino Albuquerque's book about AIDS and Brazilian theater entitled *Tentative Transgressions: Homosexuality, AIDS, and the Theater in Brazil* (2004), and Jodie Parys's *Writing AIDS: (Re)Conceptualizing the Individual and the Social Body* (2012) that analyzes selected cases of AIDS fiction in Argentina and Chile. Claudia Castaglioga has recently carried out a study on the HIV/AIDS writing of some of the most widely-known works of the genre, and has laid out, from the studies of queer temporality of José Muñoz and Judith Halberstam, interesting conceptualizations on time in the age of AIDS that will be further explored and problematized. Naturally, this project intends to draw on all these previous contributions and seeks a fruitful dialogue for a more comprehensive analysis of the selected narratives for this study.

Although the value of the scholarship previously mentioned is undeniable, Meruane's *Viajes virales* is the most comprehensive, authoritative project in the subject so far. The book, which seeks to unravel an alleged exclusion of the feminine figure in HIV/AIDS narratives in Latin America, is a good start for the study of AIDS writing in the region as a corpus sharing certain commonalities and differences due to the expansive literary production of such a diverse area of study like Latin America. Although Meruane's analysis of the metaphor of travel and circulation of the male homosexual is quite original for the understanding of the nomadic "histories" of writers Virgilio Piñera, Witold Gombrowicz and Augusto d'Halmar, her far-reaching analysis of AIDS narratives in Latin America can be controversial due to her insistence on a "rivalidad de

representación” among male writers, a lot of them sufferers of the epidemic, and women. Meraune writes:

Hacer suyo el SIDA, saturar la escena de su representación, puede entenderse entonces como una manera necesaria de operar en el lenguaje y en la política en tiempos críticos. Homosexualizarlo será efecto de una urgencia pero será también una maniobra delicada salpicada de contratiempos y de acusaciones de comunidades excluidas. . . . Había otros afectados igualmente inquietos, pero en el SIDA la comunidad más afligida y organizada cerró filas [a reference to gay men] y tomó posesión absoluta de la calamidad. Sus escritores renunciaron a compartir esa trágica circunstancia, a imaginar, acaso más subversiva más literariamente, a toda la nación en el contagio. Sus escrituras diversas compartieron un desinterés por ofrecer a los demás implicados la posibilidad de participar en la crisis como mártires. (96)

Meruane’s efforts on incorporating and analyzing the rare instances of women’s HIV/AIDS writing in the region is extremely beneficial for a more inclusive consideration of all groups affected. However, her arguments become problematic when she argues that this absence is a deliberate “closing of ranks” of male writers to take control of the representation of the epidemic in the region. Meruane draws on very specific authors⁵ and works to state that a general trait of HIV/AIDS literary writing is an attempt to efface feminine representation. This idea, however, cannot be generalized when considering the rich heterogeneity of HIV/AIDS writing in Latin America. As I will develop in this dissertation, important queer male figures in the configuration

⁵ Meruane analyses Fernando Vallejo’s *El desbarrancadero* and Mario Bellatín’s *Salón de Belleza*.

of gender and sexuality such as Néstor Perlongher and Caio Fernando Abreu establish alliances of support and affective attachments with women during most of their lives, and most importantly in the last years of struggling against the epidemic. In another example, Claudio Zeiger's novel *Adiós a la calle* is a necessary literary text that provides a historical account of the lives of gay men and women living with HIV/AIDS in post-dictatorial Argentina. This criticism does not intend to dismiss the reality of misogyny or violence towards women. Meruane does a very sound analysis of her selected narratives to justify her ideas; however, it is debatable to assert that a conflict for representation among genders is a common trait of all HIV writing in Latin America. In addition, one has to consider that many of the men writing about their illness were doing so in a moment of deep personal crisis. The effacement of women in their writing should not necessarily be considered as a deliberate attempt to erode the story of women and their contributions during the epidemic. There is also important to point out that even when *Viaje Virales* is a book that intends to articulate "la singularidad de la experiencia latinoamericana de la epidemia" (Mary Louise Pratt, backcover), it ignores the entire corpus of the country that was hit the hardest by the epidemic in the region: Brazil.

Following the ideas of scholar John D'Emilio in "Capitalism and Gay Identity," Meruane advances another idea that links the emergence of male homosexual identity with the triumph of capitalism in the Global North. The Chilean scholar suggests that male homosexuals were the main target of the virus in the onset of the disease (at least in the global north, as the AIDS epidemic in Africa has always been a primarily heterosexual phenomenon) because, in a way, they were the fittest representation of capitalistic culture. Meruane states:

sin limitaciones matrimoniales, sin hijos que criar o cuidar, jóvenes cuya deriva les dificulta el cálculo del futuro mientras les permite usufructuar de las libertades del

nuevo capitalismo, unos jóvenes radicales como nadie —entonces homosexuales, luego gay . . . esos jóvenes que escapan la norma social son quienes paradójicamente encarnan las expectativas del sistema [neocapitalista]. (28)

The male homosexual adheres to a capitalistic logic of excess and pleasure seeking (promiscuity of bodies). For this reason, “serán culpados después, cuando cunda la peste y el pánico, por ejercer esa libertad, por su supuesta insaciabilidad (cuyo alarde responde a la construcción y celebración de lo más reprimido de su identidad colectiva)” (28). Upholding an imaginary of the gay male as the perfect epitome of the circulation of neoliberal desires is certainly not new. Indeed, gay identity seemed to have thrived in the liberty offered in system based on open markets and niche consumption. Nevertheless, AIDS was prevalent among gay men not only due to a promiscuous circulation of pleasures in relatively small subcultures located within large cities in the developed world, but also due to the unfortunate reality of the routes of contagion. The prevalence of unprotected penetrative anal sex among gay males proved to be one of the riskiest, easiest ways for spreading the virus to other bodies. After reading Meruane’s take on the “escritura seropositiva,” one could conclude that her vision of HIV narratives, especially those written by gay men, is that of a somehow failed and incoherent emancipatory project to build a community of care among those affected in the epidemic. To this vision I respond with the powerful words of Sarah Ahmed when analyzing the expectations of freedom and transgression to queer groups:

queer subjects occupy very different places within the social order. Maintaining an active position of transgression not only takes time, but may not be psychically, socially or materially possible for some individuals and groups given their ongoing and unfinished commitment and histories...Assimilation and transgression are not

choices that are available to individuals, but are effects of how subjects can and cannot inhabit social norms and ideals. (153)

The chronology of this project delves into male AIDS narratives encompassing three different stages of the disease: the initial one that can be summarized as virus as a death sentence (1981-1995), a second stage that was marked by the release of protease inhibitors or drug cocktails (marked by the AIDS conference in Vancouver in 1996 that helped change the disease from lethal to chronic), and a third, final stage that I consider to be the “after-AIDS” generation, whose relation with the virus evolves, both in positive and negative ways, in a political environment in which homosexuality is gradually accepted by the State. Acknowledging the rich diversity of AIDS writing in Latin America, this dissertation project aims to demonstrate how these narratives serve as a generative space to unravel key aspects of the epidemic in the region and how it deeply affected the personal lives of those infected. Some of the most salient commonalities in the selected narratives to be addressed in this project are the following: 1) the establishment of innovative kinds of kinship in a moment of crisis when care was mainly provided by friends, lovers and even strangers; 2) the ambivalent relationship among gay men who were infected and a repressive health care apparatus that attempted to administer their health and possibilities of survival; 3) the appearance of new conceptions of temporality in the context of an illness that causes a major disruption in the perception of life “because one has no more time to live and to die, because one no longer lives and has not yet died” (García Düttmann 2); and 4) the constitution of a unique historical repository giving proof to all the social and personal transformations endured for people living with HIV throughout the development of the epidemic.

Comprehensive research on HIV/AIDS narratives in Latin America I have carried out sought to identify marginal yet valuable voices that have not attracted the attention of literary critics, and its possible dialogues with more widely known authors. Different from previous projects related on the topic, this dissertation compares and contrasts the work of authors that have been rarely studied in conjunction with one another. This project starts with the study of two novels: José Ricardo Chaves's Costa Rican novel *Paisaje de tumbas pintadas en rosa* (1998) and Claudio Zeiger's *Adiós a la calle* (2006). These narratives show how fear—in the first stages of the epidemic—ignites a state of generalized violence and biopolitical control of diseased bodies that are deemed as toxic waste. Set in the cities of San José and Buenos Aires in late 80s, both literary works are fictional accounts in which the configuration of gay social movements develops alongside personal stories of people living with HIV/AIDS. Thanks to the historical documentation offered in both literary texts, the affective lives of a stigmatized community, hit by tragedy and grief, are not lost to oblivion. In spite of the legacies of trauma revolved around the AIDS epidemic, both texts show valuable instances of solidarity and alternative bonds of kinship that proved to be vital for companionship and survival.

The second chapter of this dissertation will delve into the poetry book *Poesida* (written in 1992 but published in 1996) by Mexican writer Abigail Bohórquez, who died in 1995 in Mexico's northern state of Sonora, and the acclaimed novel of late Cuban writer Severo Sarduy (1937-1993) *Pájaros de la playa* (1993). I argue that *Poesida* and *Pájaros de la playa* constitute a deviation from the possibilities of radical freedom and erotic potentiality that both authors initially espoused in their *neobaroque* aesthetics. The celebration of *queer* desire, the insatiable lust for earthly pleasures, the delight in adornment and excess is suddenly transformed into a state of decline, disillusionment, and death. However, in spite of the circulation of negative emotions of defeat and

ever-mounting loss, the entanglements between the fictional/lyrical and non-fictional aspects of HIV/AIDS epidemic in Latin America provide an understanding of important social aspects of the disease such as pervasive stigma, dislocated temporalities and repressive methods of health administration.

On the other hand, there will be an analysis of non-traditional genres such as letters and chronicles. To illustrate, chapter three examines Néstor Perlongher's and Caio Fernando Abreu's private correspondence during their final years. Their letter writing not only shows the difficulties of advancing a literary project while fighting against a death sentence, but sets out disparate systems of autobiographical narration in AIDS writing. Exploring Abreu's and Perlongher's epistolary archive unravels new dimensions in the legacy of their respective literary projects, and demonstrates the complex nature of memory and intimacy.

Acknowledging the importance of political commitment to denounce the crisis of the epidemic is essential for the understanding the AIDS phenomenon in Latin America. I will delve into two modes of political writing by activists and writers Pedro Lemebel and Herbert Daniel. Lemebel's incisive writing is developed as a countercultural discourse built around conceptions of comedy and cynicism. Rather than thinking the virus as utterly tragic, and mortal, Lemebel uses humor and camp as a way of easing the burden of the AIDS stigma in his community of *locas*. Daniel's writing is the most powerful and life-affirming I've encountered in the explored corpus. His political experience as a leader of the Brazilian guerrilla "Vanguarda Popular Revolucionária" influences his texts that seek a possibility of living through AIDS without fear and stigma. Even when he was suffering the illness himself, Daniel vehemently proposes political hope, in an environment of death and defeat, as the only way to dignify those who were discriminated against for their medical condition.

In the context of the post-retroviral narratives, the reflective autobiographical writing of Brazilian author Luís Capucho in his novels *Mamãe me adora* (2012), and *Diário da Piscina* (2017) will be contrasted with the *novella* of Argentine writer Pablo Pérez *Un año sin amor* (1996). Their works provide an interesting view to the re-configurations of temporality, especially to the definition of time after survival. Both authors initially published cult-like novels in the form of diaries, *El mendigo chupapijas* (1998) and *Cinema Orly* (1999), that distill the sexual plenitude of gay cruising in both Buenos Aires and Rio de Janeiro. Their erotic writing evolves then, after their HIV diagnoses, to one of surviving physical and emotional precariousness. As part of a new genre of post-antiretroviral therapies, Luís Capucho's novels deal with the realities of disability and rehabilitation, and sets out new avenues of representation for the virus. In a similar fashion, Pérez's collection of chronicles *Positivo* (2018) delves into the contemporary experiences and challenges of members of the gay community living with HIV. He explores the specificities of serodiscordant couples, new pre-exposure prophylactic therapies such as Truvada, and the challenges of funding adequate medical treatments in neoliberal societies.

1.6 QUEER AFFECTS AND GAY HISTORIOGRAPHY AS CRITICAL TOOLS

Affect, queer theory, and AIDS historiography are some of the critical tools that will be utilized in this dissertation project. The “affective turn” in a vast number of disciplines in the humanities proves productive to study an interesting and exhaustive Latin American literary corpus that has never been studied in the light of emotions. Although “the affective turn” is a phenomenon mostly developed in the Anglophone academic world, its relevance and contemporaneity has been taken

into consideration for many Latin Americanists to advance a vibrant study of affect in the cultural and political realm of Latin America. Studying the applicability and potentialities of affect in Latin American studies, scholars Mabel Moraña and Ignacio Sánchez Prado published *El lenguaje de las emociones: Afecto y cultura en América Latina* (2012). In this fruitful collection of essays, Moraña explains why affect is a valuable critical tool for the study of social and cultural phenomena:

Permeando las relaciones intrasubjetivas, la órbita de la domesticidad y de la intimidad y adentrándose en todos los niveles de la esfera pública el impulso afectivo —en cualquiera de sus manifestaciones pasionales, emocionales, sentimentales, etc.—modela la relación de la comunidad con su pasado, las formas de lectura de su presente y la proyección hacia el futuro posible, deseado e imaginado en concordancia o en oposición a los proyectos dominantes. (315)

Following on the previous thought, the inscription of emotions that are unraveled, that are brought to light, through the reading of deep emotional past experiences can help us comprehend not only the rigid social structures in which the protagonists move, but also why certain states of emotion have the power to move us or stop us. Through the consideration of politics, sexuality and emotion, we ask the following questions: Why did gay writers at the onset of the disease have such a critical need to document what they and their lovers were experiencing? How does the past become relevant in our present, more specifically in a *Latin American* present? What can the importance of narratives that dwell on perpetual failure, shame and tragedy be? Why do these narratives rely on highly personal life experiences to move an audience through autobiographical and testimonial writing?

Following the remarkable scholarship of Heather Love on queer affects and tragedy in gay lives of American modernism, and the establishment of affective archives remembering trauma by Ann Cvetkovich, I contend that the presence of negative emotions (fear, shame, sadness) are not necessarily unproductive sites of mourning. I draw on Lucas Hilderbrand's concept of "intergenerational nostalgia" as the possibility of reading the past not only under a lens of trauma, but as a possible place of "nostalgia that accounts for generative historical fascination, of imagining, feeling and drawing from history" (308). With this I do not imply that all the selected narratives in this project turn their negativity into political mobilization or transformation. Some of them do, but other ones prefer to dwell in its very moment of immobilization and crisis. But we need to consider how negativity has a lot to show us: the deep entrenchment of social injustice, the impossibility of rigid structures of power to feel empathy, the very real consequences of the stigmatization of difference, and a deeper understanding of those aspects of social life that need to be urgently modified. Reading through this historical archive will help us to have a better comprehension of those social configurations that led to previous crisis, and how those structures have changed or continue to remain static. Emotions, even negative ones, are able to transmit memory, which is necessary in a present that wants to forget a past that is too painful and even too shameful to grasp. The AIDS epidemic was a moment in which our difference and vulnerability was evident to a mostly indifferent society. It is an open wound, an instance of trauma that was able to disclose all the destructive aspects of homophobia and discrimination.

In her book *Feeling Backward: Loss and the Politics of Queer History* (2007), Love attempts to connect a painful and seemingly unproductive queer past of negative sentiments such as shame, self-hatred and melancholia with a viable political future still haunted by dark memories. Love states: "we need to pursue a fuller engagement with negative affects and with the intransigent

difficulties of making feeling the basis for politics. Such an approach means engaging with affects that have not been thought of as political and also dealing with the disjunction between the affective and the social” (14). Love’s thought is timely in a political present that seeks normalcy and integration of queer identities into everyday life. The gay subject in the Western world is being integrated into political and social life so long as they are obliging consumers who form stable monogamous partnerships similar to their heterosexual counterparts. A new conception of homonormativity has been created. Even as Latin America faces enormous challenges in a region where homophobia, bashing and assault on sexual minorities are still rampant, there is a tendency to equate activism with marriage equality, and defend all types of policies that could integrate gay people into a life of moral respectability. This erases possibilities of activism that demand social, racial justice or structural modifications on aspects of society that continue support injustice. In a political context where the implementation of neoliberalism in most Latin American economies and the decline of the Left was followed by the implementation of military dictatorships in many countries (Brazil, Argentina, Chile, Uruguay), the AIDS narratives’ hopeless and melancholic tone is clearly symptomatic of the crisis experienced in the region during the entrance of globalization and post-modernity in a neocolonial context. Even when going back to the past to remember the pain, the struggles, the infinite sadness are not easy, as these present a valuable opportunity to acknowledge the resilience and dignity of queer lives who were able to survive or fight for their lives and those of their lovers. Those examples of solidarity, activism and community making are worth studying in a world where the precariousness of life has intensified for those who are more vulnerable. HIV/AIDS is still a relevant disease that carries a racial and social stigma. As Ann Cvetkovich writes about her own personal experience of the AIDS crisis and her participation in the iconic ACT UP movement in the U.S: “returning to history in order to find what remains does

not have to be nostalgic holding onto the past but can instead be a productive resource for the present and future” (165).

How to make sense of these textual accounts of decay and destruction? One of the answers that I propose in this analysis of disease in our queer present is through the recognition of affect as a textual inscription. Since the study of affect has been carried out by an important number of academic disciplines, its definition is unstable and varied. However, I will use to the conception of affect elaborated by Gilles Deleuze and Félix Guattari from a revaluation from Baruch Spinoza’s thinking. Affect is understood as the bodily possibility to have feelings and affect others’ bodies through feelings or intensities as well. In *The Affective Turn: Theorizing the Social*, Patricia Ticineto Clough states: “affect refers generally to bodily capacities to affect and be affected or the augmentation or diminution of a body’s capacity to act, to engage, to connect” (2). Certainly, the experience of the AIDS epidemic is a highly affective phenomenon in which memory plays a central role to process the wide array of negative feelings derived from a traumatic experience is not easy to recall. Maybe this is one of the main reasons why most of the authors in this *corpus seropositivo* feel an urge to write their experiences, their bodily decay, and their loss of hope in texts that will remain for posterity. Affect is a communal concept that is only possible through a direct interaction of bodies, intensities and instinct. Anthony Nucokols elucidates how affect is transported to the literary text to establish a commonality of experiences through shared experience:

La interrelación de cuerpos llevada a la obra literaria, concebida como *práctica cultural*, la convierte en un escenario para los afectos; un espacio en que tanto las relaciones entre personajes como la relación entre el texto y lector se construyen sobre esta interconexión y esta capacidad de afectar el uno al otro. (93)

In other words, I am interested in the intensities of feelings that are produced by the possibility of inscribing not only emotions, but also the affected body, into writing and image. Why is this inscription of feelings (rage, frustration, defeat, humor, pain) necessary to survive a hostile reality that renders your existence as biological waste that has to be eliminated? How can some of these narratives that dwell on the individual experience of pain bring together a community of feelings? What do you do when the illness you suffer aims to destroy you not only physically, but also emotionally triggers endless and chronic depression? In light of this affective turn, I analyze these questions to make sense of the myriad of stories, emotions and contrasting ideas reflected in these texts.

One needs to be aware that these HIV/AIDS narratives have many different historical and national backgrounds, so they differ in the way they conceive illness and political action. This project shows a cartography of feelings that range from authoritarian pasts of terror in Brazil and Argentina, destruction through violence in Colombia, to fears of extermination in small democracies like Costa Rica. Having such a disparate group of narratives can be difficult to assess as a whole homogenous corpus; however, something in common in all these texts is their unabashed reliance on emotions and feelings when facing vulnerable presents and uncertain futures. Affect is an effective tool to understand how sick individuals cope to maintain their dignity through the worst years of the epidemic, and most importantly why a writing that seems to be so intimate and personal is also directed to a general audience to create a personal effect on their emotions and beliefs about the lethal virus. Even when an important number of writers such as Severo Sarduy and Caio Fernando Abreu prefer to make use of metaphors to avoid a direct

reference to the virus, to conceal⁶ it, their narratives will always come around to disclose what is hidden underneath. The very act of releasing a text that tries to avoid an initial disclosure of feelings and truth is in part an act to unravel what remains entangled. Acknowledging the potentiality of intimate queer writing, this project explores epistolary archives to analyze interesting contradictions, change of feelings, and abrupt modifications in their literary projects and lives.

As influential scholars in the field of gay and lesbian literature in Latin American literature such as Daniel Balderston, José Quiroga, David William Foster and Sylvia Molloy have developed a “tradition” of gay and lesbian literature in the region, HIV/AIDS narratives that deal with the lives of *queer* bodies in the region can also represent a part, a sub-genre, in the history of this literary tradition that ranges from the early eighties to the present. In fact, AIDS narratives are not just a phenomenon of Latin American literature. For instance, France saw the emergence of a great deal of autobiographical writing describing the relentless attack of the virus on gay bodies. Maybe one of the most widely known writers of these narratives is Hervé Guibert (1955-1991)—a personal friend of Michel Foucault’s—who published his most acclaimed roman-à-clef *À l’ami qui ne m’a pas sauvé la vie* in 1990. In addition, Cyril Collard, Guillaume Dustan and Vincent Borel are other French writers who explored these themes in the nineties. One of the Latin American writers who is most directly influenced by this generation of French authors is Argentine Pablo Pérez, whose novel *Un año sin amor: Diario del SIDA* could be considered as of Latin American version of Guibert’s novel. He even includes the French author as a fictional character in his memories of the author’s years in France.

⁶ In Mario Bellatín’s novel *Salón de belleza*, the main protagonist—a queer hair stylist—mentions a mysterious illness that closely resembles the HIV/AIDS virus; however, there is not direct reference to the type of condition that is affecting to all the men who have approached his hair salon to die under his care.

A relevant aspect to consider when analyzing this corpus of texts (short stories, novels, poetry, chronicles, correspondence and essays) is not only the rich variety of genres that are used to represent the stigma that society places on infected *queer* bodies, but also to take into consideration that for many of these authors AIDS writing represents a major disruption in their prolific literary creation. For instance, Cuban writers Severo Sarduy and Reinaldo Arenas both had a vast number of novels and solid reputations as writers before they got ill. Arenas had published one of his most remarkable works, *El mundo alucinante*, in 1966, and it wouldn't be until his last writings during his sexual and political exile in the United States that he would write about his terrible despair when facing death due to AIDS. He writes in his farewell letter, published in his autobiography *Antes que anochezca*, about his fragile health to justify his suicide:

debido al estado precario de mi salud y la terrible depresión sentimental que siento al no poder seguir escribiendo y luchando por la libertad de Cuba, pongo fin a mi vida. En los últimos años, aunque me sentía muy enfermo, he podido terminar mi obra literaria, en la cual he trabajado por casi treinta años. Les dejo pues como legado todos mis terrores, pero también la esperanza de que pronto Cuba será libre.

(343)

This is a brief example of a mode of AIDS writing defined by its autobiographic and testimonial nature. Arenas, a highly political writer, writes to a vast audience of potential readers that not only perceive his desperation at being sick, but also his need to state his last political vendetta by blaming dictator Fidel Castro for his untimely death. Although Castro and his regime did impose draconian policies to suppress homosexuality in Cuba that Arenas suffered first hand, accusing Castro of his disgrace is a sly, final political move to place himself as a defender of liberty and link Castro to a disease that the dictator himself had described as a product of the immorality

of the United States. As we know, Arenas did not catch the disease when he left Cuba in the Mariel boatlift in 1980, but during his years in New York City, one of the first metropolises in the Western World to be hit hard in the onset of the eighties. On the other hand, Severo Sarduy will write about disease in two instances: in his posthumous novel *Pájaros de la playa* (1993), and briefly in one of his most popular fictions *Colibrí* (1983). In fact, this latter text should be considered the first Latin American narrative depicting AIDS. Sarduy—making use of his luscious neobaroque style—never addresses the virus directly, but tries to inscribe it in a cryptic way, so the reader can unravel the mystery by recognizing not only the cues of physical decay, but most importantly the affects and emotional intensities that surround young, vigorous bodies trying to desperately hold onto youth and health when their mirrors and destinies say the opposite. In fact, *Pájaros de la playa* is an elaborate metaphor of the disease and Cuba's decaying political reality. The sad destiny of the diseased that are removed from social life to remain in a camp (un moridero) is certainly an echo of the health policies in Cuba during the AIDS epidemics that forced the hospitalization and segregation of all infected people. Not without an initial international outcry, AIDS health policy in Cuba was controversial for being decidedly effective at the expense of segregating the diseased in a country with a problematic past regarding its persecution and incarceration of dissident homosexuals.

1.7 GENERAL TRAITS OF HIV/AIDS LITERARY WRITING IN LATIN AMERICA

HIV/AIDS writing in Latin American follows a wide variety of modes that seem to recur in many of the available texts. Firstly, there is a clear focus on corporality. Since AIDS is not a single

disease, but a manifestation of many opportunistic health conditions, most of these narratives show a meticulously interest of symptoms, bodily sensations, and outer physical appearances. During the AIDS epidemics, symptoms were related to hysterical fears of getting infected from a disease that was debilitating and deadly. A sudden inflammation of lymph nodes, or the manifestation of skin lesions and blemishes and chronic fatigue for weeks, could be the some of the unexpected signs of advanced stages of the disease. Today's gay male mainstream culture focus on physical exercise, healthy wellbeing and its obsession⁷ over body image (chiseled muscular bodies) could be attributed in part to years of health-related concerns over HIV/AIDS. After years of sexual liberation lived in the underground, the sex life of gay bodies became a public matter. In the Western world, AIDS was considered, and still is despite all evidence, a gay male disease. As Lee Edelman pointed out on the first years of the epidemic: "AIDS [...] as a historical phenomenon in the so-called Western democracies has taken shape (has been given shape) as that which writes or articulates another subject altogether: a subject whose content is suggested but not exhausted by reference to male homosexuality" (10). Thus, corporality does not only develop as a narrative of bodily decay, but also a recounting of explicit sex acts and desires, and the fears to act upon them. Latex (condoms) is the new barrier and sexual intimacy between men turn into fear and shame: an abject body performing abject acts. Luis Zapata's Mexican novel *El vampiro de la colonia Roma* is a good example of a pre-AIDS text in which sex and pleasure are still lived without boundaries. The main character—a young male prostitute—named Adonis García enjoys his activity of

⁷ A scholar of queer culture, Jeffrey Iovannone explains the ideological transformation of the gay male body throughout modern history: "Body norms for gay men shifted for the arrival of the HIV/AIDS epidemic in the early 1980s to a further idealized slim, toned, white and able-bodied aesthetic. The amplified masculinity of the rugged "Castro clone" [particularly popular in the U.S in the 70s and early 80s] was replaced by an imperative to be smooth, hairless, and clean shaven. . . . In contrast to prevailing notions that gay men were diseased, the ideal body aesthetic of the time was one that connoted health, cleanliness, and physical fitness in the form of muscularity" (n.p.).

“taloneo” as a hobby, and as a source of personal income. Although he has to deal with abusive or annoying clients and minor, curable STDs, he enjoys seeking pleasure from sex, and his city is still a place of boundless possibilities to experience new bodies, pleasures and personal adventures. A few years later, this reality will change dramatically causing consequences in the habits and conceptions of sex within the gay community and the general public.

This policing of sex practices can be traced back to the emergence of a “patient zero” in North America. In 1984, the CDC (Center of Disease Control) in Atlanta declared Gaëtan Dugas, a Canadian gay flight attendant, as the “introducer” of the virus in North America. His numerous sexual encounters in different cities were painstakingly tracked as the “source” and “main cause” of the dissemination of the illness in big metropolitan cities in the United States and Canada. Naturally, this only reinforced the public opinion of AIDS as a consequence of “deviant” homosexual behavior in a stage of the disease in which you couldn’t even be tested to know if a person was HIV positive. Although Dugas probably did spread the disease to different people during his sexual liaisons as a flight attendant, he was not the main source of the disease. In fact, years later, the myth of the “patient zero” was debunked by the scientific community. Another common topic found in AIDS narratives is the development of highly specific medical language and an extensive conversation on medication and alternative health therapies. Many of these texts show the individual experiences of taking drugs like AZT and other introductory antiretroviral therapies. These drugs—difficult to obtain in the first years—were not effective to prolong life considerably and caused a variety of side effects that would cause more fear and uncertainty in many terminal patients. In many of these Latin American narratives, the medical community is depicted as ignorant and highly unaware of the disease and its possible treatment. For instance, in the Colombian novel *El desbarrancadero* (2001), Fernando Vallejo writes the story of Darío, his

brother and victim of AIDS. In his desperation to find a solution to his brother's unstoppable diarrhea that cannot be solved by conventional doctors, Fernando decides to use a veterinarian medication "salfaguandina" effective in treating livestock. Although the medicine seems to be effective at the beginning, Dario's symptoms cannot be stopped with any type of medication. Vallejo's words are "symptomatic" of the medical writing found in AIDS narratives:

Lo que les controla la criptosporidiosis a las consortes del toro es su sistema inmunitario intacto; la salfaguandina es una ayudita. . . . Para pararle la diarrea de criptosporidiosis a Darío primero había que restaurarle el sistema inmunitario, pero para restaurarle el sistema inmunitario primero había que contrarrestarle el sida, pero para contrarrestarle el sida no había nada, ni la novena de Santa Rita de Casia. En ese punto de su enfermedad y del siglo mi hermano no tenía salvación. Estaba más muerto que el milenio. (164)

Besides this focus on medical language, many of these texts also explore the possibilities of autobiographical and testimonial⁸ writing. As Stuart Hall states when discussing the challenges of political representation of the virus: "The question of AIDS is an extremely important terrain of struggle and contestation. In addition of the people we know who are dying. . . . there are many people dying who are never spoken of. The question of AIDS is also a question of who gets represented and who does not" (285). Testimonial writing is a tool to stand out, to remain alive in a difficult reality in which people would die and be forgotten (while remaining anonymous) all the time.

⁸ Although HIV/AIDS writing in Latin America does not follow all the characteristics of the testimonial genre, it does share a similar purpose: to tell a marginal story in a context of urgency. As John Beverley writes, testimonio is "an urgency to communicate, a problem of repression, poverty, subalternity, imprisonment, struggle for survival" (272).

Nowadays, the need for AIDS representations seems to have waned in a post-antiretroviral stage. Although the world still faces an AIDS epidemic in Africa (amounting to 70% of new cases since 2005), a disease that is chronic but not lethal any longer, especially in the developed world where most people can obtain effective treatment, has relegated this virus to a second place in the world agenda. However, it is still evident that the virus continues to be inscribed within inherent inequalities based on race, gender and sexual orientation. Testimonial and autobiographical writing is important because it makes possible narrating extreme situations (like this epidemic) during a moment of social crisis, representing voices that may be forgotten by society and activism. In most of the texts that share a personal account of pain and melancholia, there is an imperative need to narrate a viral experience that can transcend corporal death. The infected body is inscribed in textual form (and we need to remember that the text is timeless and can be invoked every time is read). In *Facing it: AIDS Diaries and the Death of the Author*, Ross Chambers states, “AIDS [in] the textual form of the diary represents a kind of relay operation that provides an initial model for the scenario of survival —a myth ‘to live by’ as well as to ‘die by’ on which the text itself will rely on its appeal to be read. For the writing of the body will die with the body but survive in the writing of the diary” (12). Chambers’s ideas certainly resonate many of literary examples of *literatura seropositiva* in Latin America. Despite the death of many writers who suffered the disease, their texts have remained as valuable testimonies of the many challenges and uncertainties of living with HIV/AIDS, especially in the first years of the global epidemic.

2.0 FEELING LIKE BIOLOGICAL WASTE: STATE AND FEARS OF EXTERMINATION IN THE ONSET OF THE EPIDEMIC

To understand the global HIV/AIDS epidemic, it is fundamental to recognize the role of the disease not only in the modern field of medicine, but also in the economic and political world. Social and gender theorist Paul Preciado argues that “el sida es la primera enfermedad de la condición neoliberal . . . los grandes debates en torno al sida no tienen lugar como debates puramente científicos, sino como debates de intervención y comercialización farmacológica” (26). To Preciado’s words, I would add that the HIV viral replication cycle has striking similarities to the implantation and circulation of capital. Similar to a virus that infiltrates a host cell, reverses its transcription and directs the infected cell to produce new virus, the logics of expansion in global capitalism inject capital, transform modes of social and economic relationality, and create dependency based on continued flows of production. In the first decade of the epidemic (1980-1990), Latin America underwent profound economic and political changes that led to the implementation of neoliberal policies. For Pedro Brieger, “los años 80 se caracterizaron por el estancamiento económico, la carga agobiadora de una deuda que limitaba el acceso a los mercados financieros internacionales, una reducción del 9% del ingreso per cápita entre 1980 y 1990, y la inflación que sobrepasó en algunos países al 1000%” (341). In the midst of this crisis known as *la década perdida*, local governments in the region joined structural adjustment programs (SAPs) provided by the International Monetary Fund and the World Bank.

These loans had specific conditions aimed at the privatization of public institutions, the reduction of trade barriers and deregulation of most economic activities. These policies paved the way to a period of social unrest and the gradual worsening of living conditions for the most

vulnerable. In addition, the Cold War intensified local political conflicts, especially the undermining of the Sandinista Revolution in Nicaragua that would soon expand into a bloody war in many other countries of Central America. In a global period of Reaganomics and Thatcherism, a mysterious illness ravaged the lives of minority groups that did not fit into the role of the sensible and reproductive citizen.

After significant gains for social and political liberation movements in the 60s and 70s, strengthened right-wing ideologues fulfilled their promise of bringing back values of conservatism and economic liberalism. For instance, just before this period, in the 1970s, authoritarian military regimes overthrew democratically elected governments in Chile and Argentina. Along with economic changes, these countries experienced a gloomy period of state terrorism and political repression that left deep wounds in society. For both democratic and dictatorial governments, the AIDS crisis was taken as proof of a generalized state of moral decay in society, as well as the dangers of social permissiveness. Reflecting their social biases, most official authorities underestimated the magnitude of the epidemic in its first years by implying that the presence of homosexuals in their national territories were not significant enough to produce a massive outbreak of the virus. For them, HIV/AIDS was a rare phenomenon endemic to stigmatized and small social groups, not a public health issue.

In light of this historical and social background, this chapter examines two novels that take place in the cities of San José and Buenos Aires during the first ten years (1980-1990) of the HIV/AIDS pandemic in Latin America: José Ricardo Chaves' *Paisaje con tumbas pintadas en rosa* (1998) and Claudio Zeiger's *Adiós a la calle* (2006). Although the novelists differ in the way they portray this historical period based on the specificities of their national communities, their writings unravel key aspects when considering the impact of AIDS in the region. Fear is a common

emotion in the onset of the epidemic: those who carry the virus or belong to an at-risk group fear the stigma that has been placed on them. On the other hand, an uninformed civil society attempts to legitimize open discrimination by inferring that those who fell ill had to be purged to protect the integrity of the national body. Fear then ignites a state of generalized violence and biopolitical control of diseased bodies that are treated as disposable waste. Medical, political and religious discourses contributed to the stigma and misinformation that permeated all aspects of gay life in the 80s. In societies where the lives of homosexuals and other sexual minorities were invisible, the emergence of HIV/AIDS was a threatening danger not due to an imminent risk of transmission (after all, for most people it was considered an illness exclusive to “antisocial” subjectivities), but because it confirmed the existence of homosexuals in their very own communities. Those who were sick could be neighbors, colleagues and even relatives. Aside from needing an understanding of fear to comprehend the first years of HIV/AIDS, I argue that these literary texts are valuable to study the first stage of the epidemic for the following reasons. In the first place, they describe the formation and visibility of gay/homosexual subjectivities that organize out of their own shared difference to cope with prejudice and discrimination. In the insightful words of Didier Eribon, gay lives have been haunted by a “world of insults” that “shapes not only one’s relationship to the world but also the very being of individuals destined to a stigmatized and inferior standing by the social order, and in this case, by the sexual order” (311). In the narratives selected, the challenges of the epidemic influence the establishment of a community that is not only conscious of their shared affinities, but also rejects the insult and injury historically attached to their existence. Despite the difficult circumstances of a moment of crisis, some of the lovers, friends and protagonists of these stories seek to defend their lives from discourses of state-sponsored homophobia that strip them from their humanity. In fact, love among non-heterosexual bodies

propagated alliances of *queer kinship* to protect those who were sick and ease the emotional burden of those mourning for those who passed away as the epidemic progressed. Furthermore, these works also denounce the systematic use of state violence to control and target the bodies of people who display alternative sexualities. *Paisaje* and *Adiós a la calle* describe the police raids in the meeting places of the gay community in San José and Buenos Aires (e.g. bars and parks) to instill fear, to blackmail or even to incarcerate those who resisted their arbitrary abuses. Another aspect that I analyze is how the fictional characters of these novels re-inhabit urban spaces that have been solely conceived under the dynamics of heterosexism. Wandering through the city as *flâneurs* who narrate their urban spectatorship, the reader strolls vicariously through a re-signified geography invisible to the “straight” eye. The reader witness other ways of feeling and experiencing public spaces that were iconic in the establishment of contemporary homosexual culture in Latin American cities.

2.1 PAISAJE CON TUMBAS PINTADAS EN ROSA

Costa Rican writer José Ricardo Chaves has lived most of his life in Mexico, where he is a professor of comparative literature at Universidad Nacional Autónoma de México (UNAM). His fictional writing, however, has its roots in his native Costa Rica. Published for the first time in 1998 by Editorial de la Universidad Nacional (EUNA), *Paisaje con tumbas pintadas en rosa* is the story of a group of men and the challenges they face during the onset of the AIDS epidemic in the city of San José. Taking place from 1982 to 1988, Chaves writes a novel composed of a wide array of intertextual references to the global and local responses to AIDS. His use of newspaper excerpts, personal letters, and literary references support one of the main objectives of the novel: to give

voice to the personal drama of Costa Rica's emergent gay community in a context of state repression, homophobia and discrimination. In an excerpt of one of the letters found in the book, the fictional author reveals a similar exercise to the one that takes place in the writing of the novel:

Desde hace unos meses que me he dedicado a recortar artículos, reportajes, ensayos periodísticos, que abordan el tema del sida, y por ende, según la mecánica manera de pensar de la mayoría de los autores, de la *homosexualidad*. Con este material que estoy juntando, proyecto hacer un bestiario⁹ del sentimiento humano, en donde –lamentablemente– lo que predomina es el odio, el prejuicio, la saña y, como si esto no bastara, todo ello coronado por la muerte. (99)

Hence, *Paisaje* is a compilation of medical, journalistic and even historical discourses around the AIDS epidemic that display both a deep understanding of the social underpinnings of the illness, and literary mastery to create a piece of fiction that documents the complex relationships between a marginalized community seeking recognition in spite of a state that denies their rights as members of a national community. Javier Guerrero and Nathalie Bouzaglo explain the specificities of contact between the healthy and diseased body in a national context:

la capacidad de contagiar convierte a la enfermedad –cuyo dominio es por naturaleza un cuerpo, es decir, un ámbito privado—en fenómeno colectivo que es todo relacional. El enfermo amenaza el ambiente inmediato ya que su cuerpo está marcado por la promesa de extender su novedad. El miedo radica en devenir Otro, transformarse en un cuerpo ajeno, volverse irreconocible para sí mismo y para la

⁹ Sergio Coto Rivel in his article “Una ‘década pérdida’, noticias del miedo en *Paisaje con tumbas pintadas en rosa* de José Ricardo Chaves” explores the medieval nature of *bestiaries*, and how homosexuality has been described under animalistic terms throughout history.

sociedad . . . las fantasías de aislamiento, las ansiedades de desfiguración y la pérdida de la salud como índice oficial de ciudadanía son sus operaciones centrales, su tecnología. (17)

Drawing from Guerrero's and Bouzaglo's sharp analysis of the logics of contagion and disease, there are two main aspects that resonate in the development of this chapter. First, a contagious illness is always mediated by contact between bodies. Relationality is thus a central aspect of it. This relation, this interaction between bodies also entails a circulation of affects: fear, paranoia, disgust, shame, etc. These emotions are constantly being performed, transmitted and transformed. Second, citizenship has been defined in relation to good health. This becomes apparent when one reflects on all the official institutions created for the isolation of the diseased: the hospital, the isolated island, and the psychiatric institution.¹⁰ Indeed, citizenship is not only defined by physical health, but also by moral and mental soundness. In historical perspective, homosexuals lacked both and were deemed as diseased and perverted; a combination of physical inferiority and lack of moral judgment surrounded most of the public discourse about their lives. In many social instances (especially in the religious discourse), this remains true even today almost forty years after the APA (American Psychiatry Association) removed the diagnosis of homosexuality from its Diagnostic and Statistical Manual (DSM) in 1971.

Living in a small apartment with his cousin Miguel, the first pages of *Paisaje* deal with

¹⁰ Foucault was a pioneering voice in the analysis of repression and power in the context of the clinic and the psychiatric institution. In his book *The Birth of the Clinic* (1963), the philosopher analyzes the transformations of the medical discourse through history, and defines the medical gaze as process that turns the patient into an object to diagnose. Foucault writes, "Facilitated by the medical technologies that frame and focus the physicians' optical grasp of the patient, the medical gaze abstracts the suffering person from her sociological context and reframes her as a 'case' or a 'condition'" (7).

Óscar, a progressive university student, who has fallen in love with Mario. Mario, a young college history professor, met Óscar in 1981 during the celebration of the Anniversary of the Sandinista Revolution in Managua. After their initial infatuation with each other, the relationship does not prosper, leading to Óscar's disillusionment with romantic relationships. In one of his first dates with Mario, the reader is introduced to the most important events of the Central American nation in the early 80s. The narrator says, "Dieron un paseo por las calles céntricas de San José mientras conversaban de temas del momento, como la pasada visita de Reagan y el escándalo que fue la lectura de la carta del diputado de izquierda frente al 'huésped distinguido'. Que iba a pensar el *star-ware*co presidente con respecto a este regimen democráticotropical . . . venido a menos últimamente por La Crisis" (44). These events refer to the visit of U.S president Ronald Reagan on December 3rd, 1982. The Central American nation was a strategic base for the U.S. political intervention in Nicaragua. Under the administration of president Luis Alberto Monge (1982-1986), the country aligned with Reagan's interests of toppling Sandinistas, ending Costa Rica's tradition of political neutrality. In return, the national government received monetary aid to overcome the deep economic crisis under the Caribbean Basin Initiative (CBI) program. In these same years, Costa Rica, a socially conservative society, learned about the first cases of a mysterious and frightening medical condition that overwhelmingly affected homosexuals in the global meccas of modernity. Rooted in religiosity, patriarchy and rigid sexual mores, the national authorities' response to the epidemic was tainted with prejudice, stigma and ignorance on the affective lives of non-hegemonic sexualities. In contrast to countries like Argentina and Mexico that saw the emergence of left-wing homosexual activism seeking sexual liberation and social justice in the late 60s and 70s, Costa Rica didn't articulate a visible community of sexual dissidence until well into the 80s, as a means to fight against AIDS. Causes of this absence could be many: political apathy

in a country where leftist political participation was constitutionally banned from 1948 to 1974, a slower process of industrialization that kept homosexuals closer to their family circles, and the establishment of a discreet culture of “entendidos” who could not live their sexuality openly without paying a high social cost.

In his book *La formación de una contracultura: Homosexualismo y Sida en Costa Rica*, Jacobo Schifter explores the visibility of gay groups¹¹ in the history of the country: “Los intentos de organizar a los gays costarricenses siempre terminaban en un rotundo fracaso. . . . Sin embargo, la situación creada por la epidemia del Sida terminaría con el anonimato gay. La enfermedad se presentó como un ‘acelerador’ para la organización” (263). Schifter’s reliance on the foreign category of *gay* to describe a countercultural national community was a common operation in the activism of non-hegemonic sexualities in Latin America during the AIDS pandemic. Unlike the anti-systemic liberation movements of the 60s and 70s, the articulation of gay activism in the 80s was linked to a modern discourse of human rights and demands of social protection to victims of state terrorism. Amidst the perils of a mortal illness that could potentially wipe out an entire generation, sexual minorities had to organize into a cohesive, representative group to channel their demands in a moment of political, social and medical repression.¹² Héctor Domínguez Ruvalcaba explains that “the modern history of sexual dissidence [in Latin America] departs from the state’s strategies of exclusion and advances toward inclusion of sexual and gender dissidence within

¹¹ Literary critic Uriel Quesada agrees on the fact that the HIV/AIDS epidemic brought Costa Rican homosexualities out of the shadows, but differs with Schifter’s conception of these “gay” groups as homogenous or inexistent in the past. Quesada argues: “El mismo Schifter . . . describe diversas formas de relación homosexual que existían en el país desde los años cincuenta. Hay en sus ideas dos elementos implícitos: por una parte, un modelo de comunidad, el norteamericano, y por otra, la expectativa de una incidencia social y política directa” (221).

¹² This was not an easy negotiation. Many groups were able to articulate significant gains such as the protection and care of those afflicted with the virus, and the establishment of policies against discrimination in public life. Other groups disintegrated, mainly because members did not feel represented, and formed other valuable alliances that could be more oppositional to what they considered the *status quo*.

citizenship” (12). This establishment of citizenship is two-layered: it has the potential to neutralize the emancipatory possibilities of sexual dissidence, or it can, on the opposite, put into crisis conceptions that are central to the foundation of the State such as heterosexism, national identity, the nuclear family and so on.¹³ In *Paisaje*, both worlds are present. There is a generational rift between some illustrious “locas” such as la Cavafis,¹⁴ La Montegay, and La Lozano who identify with a highly secretive underground, yet local culture of “entendidos,” and a contemporary one represented in a character like Óscar who is living his youth during the traumatic years of AIDS. For Óscar, “gay” identity is a viable vehicle for visibility. He explains, “No creo que ser gay signifique una licencia para disfrazarse. Todo lo contrario. Se trata de quemar las máscaras y los antifaces y de poner en duda una supuesta normalidad” (57).

Chaves’s novel is divided in two major parts. The first one deals, as it has been previously mentioned, with the failed romantic relationship between Óscar and Mario. It also provides a valuable account on Costa Rica’s political and social life in the early 80s. Although AIDS is a central aspect of this novel, the first mention of the disease does not occur until halfway through the text. Mario receives a letter from a friend who is living in Chicago in 1983. Adi (a friend absent from the novel) tells Mario that Tommy (possibly a lover) has fallen ill with a new disease afflicting the gay community. As long as he is not chronically ill, Tommy will continue doing

¹³ Although it is undeniable that the conflation of all expressions of Latin American sexual diversity (loca, maricón, joto, puto etc.) into an anglophone agenda of gay and lesbian politics runs the risk of erasing these differences, LGBT politics should not be hastily dismissed as ineffective or invalid for their foreign origins. In his book *Translating the Queer*, Ruvalcaba states that the mixture of acceptance and resistance on the reception of “gayness” in Latin America is especially complex when considering how it “liberated sexual dissidents from nationalistic homophobic culture, which had been especially scathing because of the need to define national profiles through exclusion” (107). This was not only evident during the discourses of criminalization in the nineteenth century, but also in the sustained rejection of revolutionary projects of the Left to integrate homosexuals in their ranks.

¹⁴ The name of this character is a direct reference to the Egyptian-Greek poet Constantine Cavafy (1863-1933). Part of his celebrated poetry deals with sensual love among men.

activism and political advertising on TV and newspapers. Although the mention within the letter is brief, its presence is significant to understand the global aspects of the epidemic. Not only is a member of the “community” in the periphery being informed about an imminent danger that has yet to come,¹⁵ but it also unravels the existence of an organized movement to fight against the disease. Another aspect to consider is how mass media (TV broadcasts, journals, newspapers) plays a central role in the public reception of AIDS. The possibility of major outbreaks of generalized panic and fear in the population were possible due to the visual component of a disfiguring disease.¹⁶ *Paisaje*’s second part focuses on the social history of AIDS in Costa Rica as a whole, and documents the disruption of the pandemic in the character’s lives. Óscar and his friend Javier experience a strong hallucination after eating “magic mushrooms” during a trip to the forests of San José de la Montaña. Their delirium (a colossal male figure made of smoke that devours innocent men) is an omen of the chaos that will soon ensue in the novel.

Paisaje’s second section is a conflation between the fictional continuance of the characters’ story, and newspaper excerpts from all over the world aimed at describing the global hysteria around AIDS and gay lives. These intertexts uncover the rampant ignorance of society, and the injustices committed in the name of prevention. Global and local experiences on AIDS interweave. As Quesada states, “la crónica de Óscar y sus amigos es a la vez la crónica de un país al borde de un cambio social y de una cultura [global] en los inicios de la pandemia” (221). The constant interruption of the narrative thread by tragic news of death, hate and tragedy instill a state of uncertainty and fear that intensifies as the storyline progresses. A selected group of news excerpts

¹⁵ During the first years of the 80s, the few cases of AIDS reported in Costa Rica were found in hemophiliacs. It was not until 1986 that the virus was heavily disseminated among gay men.

¹⁶ Maybe one of the most dramatic images of the epidemic was used, ironically, for commercial advertising. United Colors of Benetton used Therese Frare’s iconic picture. The photograph shows David Kirby lying in a hospital bed while his family sobs next to the debilitated man who is about to die of AIDS.

are reproduced as follow:

22 de Junio en la Prensa Libre: El doctor Abel Pacheco, el miércoles 8 del presente mes en el Canal 6 de T.V. comentó sobre una rara enfermedad mortal que ataca en primer término a homosexuales. Parece que es provocada por un virus relacionado con una forma de leucemia. Esta enfermedad es de reciente aparición en los EE.UU. Grupos de homosexuales norteamericanos acostumbraban a viajar a Haití a donde disfrutaban de un ambiente de libertades a bajo costo. (101)

México. D.F. Temor al cancer lila. Con referencia a los homosexuales, [S.A.] expresó que por sí él fuera, los encerraría en cavernas como a los antiguos leprosos para evitar que perviertan y contagien a la gente inocente (agosto 1985). (124)

Alemania Federal. En diversas partes de la República Federal de Alemania se ha comenzado a recluir en celdas individuales a los pacientes de SIDA y se han distribuido guantes de goma al personal de vigilancia (EFE, agosto de 1985). (125)

Guayaquil, Ecuador. A pesar de las declaraciones del Ministro de Salud V.M., en el sentido de que el SIDA no ha llegado a ese país, la policía emprendió una cacería de homosexuales, al descubrirse a dos personas afectadas por el mal (agosto de 1985). (126)

Aguari, Brasil. Un peluquero bisexual, de 35 años debió escapar de su pueblo mientras la población quemaba todas sus pertenencias aterrorizada por la posibilidad de un contagio de SIDA, reveló la policía. (130)

These interventions confirm most of the social attitudes towards the disease during its onset. As has been stated in this project, AIDS was a condition equated with homosexuality. The origin, according to ill-informed public opinion, was remote and focalized on certain

behaviors (in this case, Abel Pacheco, a psychiatrist and television personality who would later become president of Costa Rica, restates a speculative assumption that tracked the exodus of the virus back to Haiti and the practice of gay sex). The obsessive fear of the communication of the disease from one body to another saw the implementation of politics of containment and isolation. There was a belief that having any type of personal contact with a person living with HIV/AIDS or sharing the same spaces or objects was a serious risk of contagion. Despite today's health advancements, public discourse still defines HIV/AIDS as a contagious condition. Nevertheless, HIV/AIDS is not contagious, but transmissible. There is a fundamental distinction in the employed terminology. A contagious illness can be easily spread in external conditions like air, food, and water. The infection agent is able to survive outside the human body for a long time, and affect other bodies (i.e. the flu, or chicken pox). On the contrary, a transmissible disease can only occur through a direct contact of internal secretions such as blood, semen or human breast milk. For instance, the capacity of the HIV virus to live outside the human body is limited. As has been widely reported, the risk of transmission through indirect contact is negligible. However, sets of inaccurate beliefs and the "transmission" of fear have always been difficult to modify in society.

Around 1987, the reality of AIDS was difficult to ignore any longer among Costa Rica's national authorities. Jacobo Schifter reviews some of the repressive policies implemented during the Óscar Arias administration that are fictionalized in *Paisaje*: "cuando se hizo evidente que el Sida empezaba a cobrar víctimas entre los gays, el Ministro de Salud [Edgar Mohs], en asociación con su colega de Seguridad y el Viceministro de Seguridad Álvaro Ramos, optaron entonces por presionar a los bares y lograr su cierre por medio de una manera tradicional: las redadas" (109). Schifter quotes Mohs's words in an interview published in *La Nación* in March of 1987: "También se coordina con autoridades policiales con el objeto de llevar a cabo detenciones de personas

promiscuas . . . Son muchas las denuncias . . . sobre centros de homosexuales y en todas ellas se actúa” (109). Another policy for the control of the disease was an attempt to legalize mandatory HIV testing for all public employees. In the mid 80s, San José was a city with a substantial number of gay establishments (La Torre, Tharmakos, Julien’s, Antinoo, La Avispa) that built a sense of community for all those who displayed alternative sexualities and lifestyles. In a letter of *Paisaje*, an anonymous writer refers to the violence exercised on these gathering places (ordered by Mohs and other government authorities) that often carry a central importance in the vitality of gay life:

A los bares ya casi no [voy], pues nuestro Viceministro de Gobernación se ha dedicado a cazar brujas digo locas. Con decirte que uno de estos fines de semana detuvieron por varias horas a “250 jóvenes de la alta sociedad” –como dijo Radio Reloj– en el bar La Torre”. Las declaraciones homofóbicas de funcionarios como el Ministro de Salud . . . ¡el presidente de la comisión del SIDA!, hacen que a veces me sienta como un judío en la Alemania nazi. El gobierno, lejos de involucrar a la gente gay en campañas de prevención, la discrimina y persigue. En los hospitales hay discriminación y malos tratos a los enfermos de sida. (145)

Chaves fictionalizes a key event in the collective memory of national gay history. A blow for the community, a popular gay bar in the city was raided by police resulting in the arrest of a large number of people: “250 personas fueron arrestadas y llevadas a la Detención General, ante la presencia de cámaras de television y del Viceministro Ramos. . . . Esta acción provocaría la ira de varios miembros de la comunidad y terminaría sirviendo como el factor que organizaría políticamente a los gays costarricenses” (Schifter 110). Even though the reasons for political organization may be more varied than Schifter’s opinion, it is undeniable that an instance of negativity (surrounded by emotions of shame, pain and humiliation) is transformed into the

possibility of building a community rooted in solidarity and dignity. In a section of the novel, Cavafis, aware of the difficult moments of persecution, calls a friend to invite him to a “community meeting” to start organizing:

con esto del sida más de una fiera está sacando las garras . . . claro que es terrible
está desinformación masiva. . . . Me enteré de la redada en ese bar . . . pero algo
tenemos que hacer, no podemos quedarnos de brazos cruzados mientras nos dan
palos, ni que fuéramos cristianos en el circo . . . sí, me siento como un guerrillero
que se prepara para la batalla, sí, un sandinista del amor . . . ni modo así están las
cosas y tenemos que organizarnos. (126)

Rather than contributing to the control of infection rates and to protection of people living with HIV/AIDS, the government repressive actions did the entire opposite. Risk groups refused to get tested fearing further marginalization, and the misinformation on the specificities of the disease and how to prevent it continued. For José Daniel Jiménez, it was a challenge to curb the epidemic in a context in which “el discurso médico se vio entremezclado con valoraciones personales acerca de la moral, la ética y la normalidad” (431). A direct intervention and organization of those in risk groups was essential to protect those afflicted, and to demand a comprehensive care from the authorities that could be devoid of personal stigma and ignorance. But the importance of solidarity is not only emphasized politically in Chaves’s work. Óscar, whose references to his immediate family are inexistent, is not alone thanks to the support of his cousin Miguel. Also a gay man, Miguel understands the struggles of being different, and feels “solidaridad, ganas de ayudar a que su primo no las pasara tan negras cómo él tuvo que pasarlas, cuando se fuera de la casa de sus padres” (30). Shared affinities and companionship make possible

an alliance of protection to live life with liberty and dignity outside of the traditional notions of the nuclear, heterosexual family.

In this literary work, the centrality of the urban landscape serves to uncover hidden geographies and alternative modes of belonging in gay life. Cities and national geographies have been conceived under the heteronormative lens of reproduction and labor. Monuments, the name of parks and avenues, and national museums often memorialize an official version of nationhood. In this conception, the significance of space for gay people remains invisible. In *Paisaje*, there is a “queer” appropriation of the city through the act of wandering aimlessly. Mario, in a moment of personal crisis due to his precarious health, walks through the streets of San José (Avenida Central, Avenida Segunda, Plaza de la Cultura) until he arrives at the León Cortés monument. There he feels, that the statue “entre leones . . . parece dirigirlos contra un enemigo imaginario, un enemigo que sólo León ve desde lo alto del pedestal, lo señala con el dedo, lo acusa, y contra él lanza sus leones y hace del Paseo Colón, su Coliseo” (162). Cortés was a controversial figure, his fascist leanings and the persecution of Communists and Jewish people under his administration have never been properly condemned. In the novel, León Cortés is a symbol of the shared hatred and ignorance of many Costa Ricans during the epidemic. A revealing passage of *Paisaje* supports this argument: “Habitó en una tierra de leones . . . corteses . . . pero lo cortés no quita lo rugiente. Rugen en risas, rugen en los periódicos, rugen en ascos, rugen las revistas, la television. Rugidos, sí, rugidos y susurros, porque también están los susurros de los enfermos más bien, sus gemidos. Como un nuevo Job te digo: mis hermanos me han decepcionado como un arroyo seco de piedad” (136). Despite the harsh reality of feelings of inadequacy in a transnational context of discrimination, Óscar’s *flânerie* through the city discovers a world of pleasures and possibilities for the flourishing of gay life. An urban explorer at heart, he possesses a heightened awareness of

the city. Strolling through iconic places such as parks (La Sabana, Parque España), bars and cafés, the character captures the *zeitgeist* of gay cruising in the 80s. For Óscar, city life is an essential bodily experience: “A la calle, sí. A la calle por favor. La comezón empieza por los pies . . . y sigue así, pantorillas, rodillas, muslos, testículos, verga, cintura, pecho, espalda, hombros . . . camino, recorreré calles y callejuelas, plazas, parques” (104). At night, the young man visits Chelles and Akelarre (iconic establishments of the city) to have a beer with his cousin Miguel, and to find his next sexual conquest. Later at Julien’s (a dance club), he shares a moment of fun and dancing with another guy. However, the lucky one of the night is Miguel, who finds a prospect with whom to spend the night. In these stories, the readership has an opportunity to witness how a subculture of desire inhabits emblematic spaces in the urban culture of San José. As it has already been stated, during the epidemic, many of these places were directly attacked and scrutinized as a justification for AIDS prevention.

Paisaje incorporates in its second part a groundbreaking document in the history of AIDS representation in Costa Rica: an open letter addressed to members of the Óscar Arias’s government (1986-1990) signed by influential members of society (professors, intellectuals and activists) and published on April 5, 1987 in *La Nación*. The text is a denunciation of the inadequate responses taken by the government to fight the epidemic, and urges the immediate interruption of illegal police raids in gay bars:

Las redadas nocturnas, indiscriminadas, vejatorias e infamantes, no constituyen ninguna medida preventiva del SIDA y sí lesionan garantías constitucionales básicas de los costarricenses. Tampoco los exámenes obligatorios por decreto son medidas preventivas adoptadas en ningún país y también son discriminativas. . . . Empezar a distinguir a los costarricenses con etiquetas infamantes atenta contra

nuestras tradiciones de civismo y democracia y es una peligrosa puerta abierta a la arbitrariedad y al terrorismo de Estado. (150)

Quesada and Schifter highlight the effectiveness of this letter to stop the raids and giving a face to a silenced population. While the letter omits a direct reference to homosexuality, “el sujeto homosexual implícito en la sigla SIDA pasa a ser un sujeto de derecho, y es así como la carta se convierte en un texto radical a pesar de los circunloquios . . . y los paralelismos entre sujeto y muerte” (Quesada 218).

Amidst the fictionalizations of these important events, the life of Óscar and his friends is dramatically transformed. Chaves provides an intimate portrayal of how to make sense of loss and death. The author makes insightful references to different works of literature and art that remind us of the legacies of representation of homosexuality as either an ailment or sinful curse. In one of the letters, a writer states: “Es como si la supuesta apertura que se había dado en los últimos años se hubiera venido abajo [con el SIDA]. Hemos vuelto a ser la *execrabilis familia pathicorum*” (135). Maybe one of the most recognized use of this phrase (execrable family of pathics) was in Sir Richard F. Burton’s “Terminal Essay” in the tenth volume of the translation of *The Arabian Nights*, Section D on “Pederasty.” Burton, in his account of male sex behavior in the Sotadic Zones, mentions the presence of male prostitutes (boys and eunuchs) who “lay for fare” to commit acts of pederasty in the brothels of the city of Karachi around 1845. Burton’s lush orientalist account on anomalous sexual practices follows the Victorian tradition of referring to same-sex sexuality as a “vice,” as a “perversion of the erotic sense” (n.p.). In *Paisaje*, it serves as a reminder of a renewed pathologization of gay life, and all the negative consequences that the community is about to face.

For instance, Óscar experiences two painful events in his life: Mario’s death to AIDS, and the HIV diagnosis of his close friend Javier. These traumatic events are foreshadowed in a

postcard of Gustave Moreau's painting "The Angels of Sodom" (1890) sent to Óscar by his friend Cavafis. A biblical metaphor historically related to the extermination of unnatural sins (among them modern homosexuality), it is condemned in Óscar's description of the painting: "Es el cuadro de la violencia divina una vez satisfecha. Dos ángeles etéreos y vengadores, con la espada levantada, flotan sobre las ciudades derruidas, aún humeantes" (138). In the 80s, the AIDS epidemic was, for religious fundamentalism, a divine punishment, the appropriate retribution to the sinful and perverted. Homosexuality was a catalyst for evil and immorality that needed to be eliminated to ensure society's wellbeing. Óscar is taken aback by the unexpected illness of his friend. Suddenly, a distant reality turns into a highly personal story of mourning. Javier, who feels as if he were a "depositario de muerte," receives the support of his friend: "sintió el abrazo de Óscar, su calidez y pudo llorar tranquilo. . . . Llorar juntos como durante aquella tarde de hongos en San José de la Montaña. Aferrarse a Óscar para no ser llevado por el vendaval" (139). Javier is aware that he is now in a territory of social death. His existence is supposed to be shameful, and his impending end ungrievable. As Sarah Ahmed comments on queer grief: "the failure to recognize queer loss *as* loss is also a failure to recognize queer relationships as significant bonds, or that queer lives are lives worth living, or that queers are more than failed heterosexuals, heterosexuals who have failed 'to be'" (156). These words powerfully resonate back to the epidemic, and how the loss of gay lives were, in most cases, initially ignored or normalized. Óscar's solidarity to Javier shows the construction of deep affective attachments to ease such instance of trauma and unrecognition. In a moment when AIDS was still fatal, a deep sense of mourning was experienced even before the physical extinction of your beloved ones: "A nivel racional Óscar entiende que su amigo está infectado . . . pero el hecho aún no toca fondo, aún no se ha apropiado de cuerpo entero, apenas es el comienzo de un dolor largo y lento, no el de la

propia muerte sino el del testigo de la muerte, la húmeda melancolía del sobreviviente” (141). The use of “melancholia” here to describe the character’s feelings is relevant in Freud’s distinction between mourning and melancholia.¹⁷ This conception of mourning as a healthier way of dealing with loss for the survivor seems at odds with Óscar’s melancholic state. However, departing from Freud’s notion of melancholia as a pathological attachment to a lost object that never really resolves, David Eng and David Kazanjian defend the importance of melancholia to keep valuable memories of the dead. For them, “melancholia is preferable as a way of responding to loss. . . . Melancholia is an enduring devotion of the part of the ego to the lost object, and as such is a way of keeping the other, and with it the past, alive in the present . . . the object is not severed, but can acquire new meanings and possibilities in the present” (cited in Ahmed 159).

The omissions and silences of forgotten lives can be rectified through remembering, and through of the celebration of the lives of those gone. This is Oscar’s outlook during Mario’s death. His former lover’s death is sorrowfully described as “una noche, una noche toda llena de susurros, de remedios y de música de alas” (165). The recognizable literary reference to José Asunción Silva’s “Nocturno III” seems adequate to depict Mario’s sad end. However, Óscar, aware of his friend’s free-spirited nature during his life, decides to remember his friend with love and optimism: “Te celebro, Mario, bailo tu muerte, bailo mi vida. Pintaré tu tumba de rosado, sí, mucho rosa, violeta, escarlata, en el cementerio, en tu tumba, en la de Pedro y la de Juan y la de Vicente y la de Carlos” (167). Mario’s death is the representation of thousands of queer lives truncated too soon; it is the voice of a lost generation. It is not difficult to associate the “pink tomb” as a pink

¹⁷ In his analysis of mourning and militancy in the gay community, Douglas Crimp states: “The violence we encounter is relentless, the violence of silence and omission almost as impossible to endure as the violence of unleashed hatred and outright murder. Because this violence also desecrates the memories of our dead, we rise in anger to vindicate them. For many of us mourning *becomes* militancy” (8-9).

triangle, used first as symbol of shame in Nazi concentration camps to identify gay men but later reclaimed as a symbol of pride and activism. In the same years that the events of *Paisaje* are taking place, the ACT UP organization started to identify with the symbol of an inverted pink triangle next to his slogan SILENCE=DEATH.

2.2 *ADIÓS A LA CALLE*

Carne, sangre, destino, y virus

Claudio Zeiger, *Adiós a la calle*

In contrast with Costa Rica's social history, Argentina saw the emergence of organized political groups led by sexual dissidents in the late 60s. In 1967, the unionist leader Héctor Anabitarte and other left-wing activists founded *Nuestro Mundo* in the neighborhood of Gerli in Buenos Aires. In 1971, *Nuestro Mundo* will join other nascent organizations (Safo, Eros, Profesionales, Bandera Negra among others) that led to the foundation of the Homosexual Liberation Front (FLH). Important intellectuals and writers such as Juan José Sebreli, Manuel Puig, Blas Matamoro and Juan José Hernández will participate during the initial meetings of the organization. Later, the poet and student Néstor Perlongher will have a central role in the further politicization of the group (Bazán 340). The appearance of the front occurred in a moment of political radicalization in Argentina: "aparecen gremios izquierdistas, movimientos estudiantiles antiautoritarios; y se inicia la administración liberal del militar Lanusse, que habría de entregar el poder al Peronismo en las elecciones de 1973" (Perlongher 77). A clandestine organization, the FLH advanced a rhetoric of

anticapitalism and sexual liberation. As Emmanuel Theumer explains: “El FLH no sólo introdujo un nuevo sujeto revolucionario, el homosexual, aunque también la marica, que puso en cuestión la figura del ‘obrero’, la ‘juventud’, el ‘pueblo’ . . . quebró cada una de estas figuraciones a través de la diferencia homosexual” (113). However, as previously mentioned, the relationships of these organizations with the Left were full of conflict. Both the conception of sexual revolution and the idea of liberating one’s body to new pleasures and experiences were antagonistic to *Peronista* ideals of selfless political struggle. In a historic interview with the group titled “Temores y deseos del homosexual argentino,” group members explain how, for them, sexual liberation was linked to social popular struggles: “consideramos que la lucha por la libertad sexual no se libra aisladamente sino que se da en el marco de la lucha de la liberación nacional y social . . . nos hemos identificado con las reivindicaciones de los sectores populares” (8). In 1976, after the military coup that ousted Isabel Martínez de Perón, the FLH and other political groups will soon disband in a context of brutal repression and state terrorism. During the dictatorship (1976-1983) known also as the Proceso de Reorganización Nacional, homosexuals were forced to live in the shadows and conduct their affairs in total secrecy. Members of the community faced the humiliation of being detained in numerous police raids (known as *razzias* policiales). Others were murdered or disappeared during the Dirty War.¹⁸ The return to democracy in 1983 allowed a resurgence of the community in public life. Repression did not disappear though. During the Raúl Alfonsín administration, police raids, and intimidation in gay establishments continued under the justification of enforcing the “edict 2H” (a legacy of the dictatorship) that allowed the incarceration of suspects of inciting

¹⁸ Carlos Jáuregui’s important book *La homosexualidad en la Argentina* shows that around 400 gay men were disappeared during the dictatorship (1976-1983). However, scholar Omar Encarnación believes that there is no possible way to determine the number of victims in an official way since it is “difficult to ascertain if they became a target of the military regime because of their sexual orientation or because of their political activity” (50).

sexual acts in public. As *Paisaje*, in light of the incarceration and illegal detentions, homosexuals decided to organize politically. As Mario Pecheny states: “In response to a police raid on a bar [Contramano], over 150 people attended an assembly in a discotheque, deciding to found the CHA” (260). The CHA (Comunidad Homosexual Argentina) was a crucial organization during the AIDS epidemic in Argentina. Carlos Jáuregui, one of his most prominent leaders, was the public face for the recognition of gay rights and AIDS awareness in the South American nation during the mid 80s and early 90s. After a life of his brave activism, Jáuregui died in 1996 due to AIDS-related complications.

In a similar tone to the open letter published in a Costa Rican newspaper to demand the end of police abuse to gay people, on May 28, 1984, Jáuregui and the CHA published a public ad (una solicitada) in the Argentine newspaper *Clarín*. The document entitled “Con discriminación y represión no hay democracia” urged the end of draconian legislation aimed at the persecution of homosexuals, as well as to stop all type of police raids that jeopardized the integrity and dignity of gay people. “El total restablecimiento de las libertades individuales y la vigencia de los Derechos Humanos garantizados en la Constitución Nacional” was urgently needed to the establishment of a real democracy. For Theumer, CHA’s main concerns were thus focused on being visible to society, and articulate “una política identitaria en torno al Orgullo Gay y la crisis del SIDA . . . el desarrollo político tendrá como característica singular, el uso intensivo del discurso de los derechos humanos” (117). *Adiós a la calle* takes place during these political and social conflictive moments of Argentina’s contemporary history.

Focused on the documentation of the AIDS epidemic in Buenos Aires, “las historias de Horacio, Pablo, Simón, Mario, Raúl y Damián son puertas de acceso a lo que podría considerarse el ‘ambiente gay’ de la segunda mitad de los años ochenta” (Ana Ojeda, *La Nación*). The novel is

divided in five different parts: “Interiores” (Interiors), “La Actriz Fetiche” (The Fetish Actress), “Travesías” (Journeys), “La Novelita del SIDA” (A Little Novel of AIDS) and “Escenas” (Scenes). Each chapter narrates an aspect in the intimate lives of a wide array of urban characters and their experiences with AIDS. Not all of them are suffering from the disease, but some have either a friend, lover or acquaintance who is dealing with the epidemic. *Adiós a la calle* depicts the complexities of grief and violence on the homosexual body in a postdictatorial context. In this analysis, I follow Gabriel Giorgi’s consideration on the tensions that are articulated in the existence of non-hegemonic sexualities:

Los cuerpos de la homosexualidad han sido lugares donde las ambivalencias entre naturaleza y política, entre monstruosidad y humanidad, se exhiben y se diversifican de manera privilegiada; es en esos cuerpos diferenciales donde se pueden leer . . . las batallas y las resistencias, las disciplinas, los controles y los desvíos que tienen lugar entre lo natural y lo artificial, lo humano y lo inhumano, lo “innato” y lo “adquirido.” (27)

Zeiger, who has authored four novels, has mentioned that “la tensión y la ambigüedad son [su] credo en la literatura” (*Página 12*, 2006). In fact, these ambivalences are clear in the emotional lives of two major characters: Horacio and Ana. Horacio, a thirty-something gay man, displays a complex personality with moments of aloofness and empathy. As his only sister describes, “Tuvimos una infancia linda, pero sombría, Horacio, una adolescencia blanca, gris, no sé, como si hubiéramos estado metidos todo el tiempo en una película triste” (24). During his childhood, he has an internal battle to come to terms with his homosexuality. Later in his early youth, the dictatorship reminded him of all the potential dangers of being openly different. It was better to

stick to his ways as a dull man, silent, and prim. Fear prevents him from discovering the life of the streets:

Esos años eran muy peligrosos por las razzias, los malos tratos, quizá algo mucho peor que latía en las calles solitarias. Evitaba las estaciones y los baños de ciertos bares . . . evitaba Lavalle dónde podía ser que los policías de civil tendieran trampas a los hombres para arrestarlos o chantajearlos. No habría soportado que lo pusieran en la cárcel, que le aplicaran un edicto por alterar la moral pública, por ser un pervertido ante la ley. (28)

Later, with the end of the dictatorship “empezó salir más y a visitar los lugares de diversión que iban apareciendo” (29). The emergence of democracy was not, however, a period devoid of arbitrary violence to gay people. In his *Historia de la homosexualidad en la Argentina*, Bazán reveals the response of the Argentine Minister of the Interior, Antonio Troccoli. The government official was questioned about “razzias” that targeted sexual minorities. For the government official, homosexuality was an illness and as such the police was able to use punitive models of containment to prevent manifestations of this conduct publicly (397). Ziegler fictionalizes this moment of disillusionment for a community that expected an improved treatment during the return of democracy. Horacio says:

era evidente que a los más jovencitos o a los más llamativos los seguían cazando de los pelos como si los militares todavía anduvieran patrullando las calles, y esos policías de civil seguían haciendo de las suyas, molestando a la gente, amenazando con llevarlos a las comisarías si no les daban plata, y en ciertas ocasiones reventaban un lugar, un bar, una discoteca y se llevaban a la gente en camiones

enrejados mientras afuera filmaban las cámaras de televisión llamadas de antemano por la propia policía. (29)

Under this particular social scenario, there would be another blow for gay people in Argentina: the appearance of the AIDS epidemic. Despite the establishment of a vibrant cultural nightlife (also denominated as “el *underground* porteño de los ochenta”) in the first years of democracy, AIDS was yet another challenge for a community that was recovering from the repressive times of the dictatorship. In her account of Argentina’s “democratic spring,” Mabel Bellucci confirms that this period “significó la incipiente salida al ruedo de una diversidad de sectores sociales, dentro de los cuales se encontraba una *movida homosexual*. A decir verdad en sus orígenes, tuvo poca tribuna periodística y lo que se recalcaba eran las primeras informaciones sobre el sida” (37). Thus, the visibility of gay life to the general population was directly linked to a lethal epidemic that was making headlines all over the world. In *Adiós a la calle*, Horacio is the character who first mentions how perplexed he feels over this mysterious illness:

Pasarían más de dos años desde la muerte de Rock Hudson en 1985 para que empezara a inquietarse verdaderamente. Hasta ese momento había creído en el prejuicio estúpido de que sólo iba a ocurrir en Estados Unidos o, a lo sumo, en Brasil. . . . Se hablaba de la peste rosa, de una enfermedad extraña de los homosexuales, y él pensaba que todo era tan extraño que no podía ser enteramente cierto. (29)

Horacio’s reaction on the epidemic echoes many of the widely held assumptions during the first years of AIDS. As in *Paisaje*, the influence of media is pervasive for the formation of public opinion. Since the publication of a piece of news in the *New York Times* reporting a “rare cancer” in 41 homosexuals living in the cities of New York and San Francisco on July 3, 1981, the

United States has had a pivotal role in the global awareness of AIDS and on the way the epidemic has been represented in all corners of the world. The Gay Liberation movements in numerous metropolitan areas, the existence of established “gay ghettos,” and the combative activism of the 80s to intervene in the medical and political realm were factors that influenced the discourse on AIDS in the Western world. In addition, the death of Rock Hudson, an international Hollywood figure, shocked the world. A victim of AIDS finally had a recognizable face. It also signified a new paradigm in the epidemic: everybody, even the famous, could be a potential victim.

The spread of AIDS in major global metropolises not only constituted a problem of public health for a vulnerable population; it also dramatically reconfigured the ways in which relationality among gay men was structured. It was not only the barrier of condoms, a necessity to stop transmission, that changed how people interacted with other bodies, it was also the open display of a variety of mixed emotions to survive a moment of crisis. Those could range from extreme fear of becoming another victim, grief from the loss of many friends, to even aloofness to protect oneself from the incidental psychic pain among so much death. Others opted to ignore the crisis because of their keen awareness about the seemingly unstoppable nature of the epidemic, and how they were likely to get hit by it sooner or later. Zeiger reveals that, from 1987 to 1988, Horacio could only think about death, “el presentimiento de la muerte, de la muerte como nunca la había pensando, la muerte suya, la de sus amigos y conocidos, la muerte del cuerpo y del alma, de la memoria y los afectos . . . la muerte del deseo y la carne musculosa, la muerte y el silencio” (30). Both the manifestations of the physical world (sex and the possibilities of cruising), and the intangible aspect of memory, essential to the construction of a self-definition of community, are in risk of dying out. As a response, Horacio writes. Although a part of his psyche tells him to be patient, and to create an emotional shield to protect himself, Horacio decides to pen a recurrent

dream about his external reality. This dream is combined with some real events he has recently experienced. He describes his visit to a hospital to see Sebastián, a good friend of Horacio's best friend Simón. It is there, in his wanderings through a hospital aisle carrying a tube that contains his friend's infected blood that he witnesses the figure of the diseased. Sebastián is drowning while doctors try to figure out if bacteria or a deadly fungus has devastating their patient's lungs. Horacio's inexplicable need to write keeps the memory of Sebastián alive.

Zeiger's novel is also a valuable example of the integration of the feminine experience of AIDS into the literary. The second chapter, "La Actriz Fetiche," focuses on Ana Cabrera's personal story. Ana, a passionate schoolteacher who later becomes an actress, is actually the first major character who gets infected with AIDS in *Adiós a la calle*. Acknowledging the existence of alternative means of transmission (that depart from homosexual contact), Ana's condition has arisen from her romantic involvement with Fabián: an IDU (Intravenous Drug User). Simón, a professional decorator and stage designer, has a close relationship with Ana, and invites Horacio to one of her latest performances. In the basement of a small bookstore in Corrientes and Callao a solo performance takes place in which Ana utters a disjointed avant-garde monologue composed of improvised song lyrics, poems and philosophical thoughts. As her illness advances, she has decided to suppress a phrase of her monologue in each of her representations until her imminent death. She doesn't know, however, if the end of her monologue (the day she won't have more words to cry) will coincide with her physical demise. Horacio feels intrigued with her dramatic exercise, especially when he knows that most of the public is unaware of the woman's condition. Although it seems to have a deep importance for Ana, for Horacio, it was hard to decipher the real meaning and value for her. The intimate representation of disease cannot be easily put into words for her audience. As has been stated, "solo performers are especially vulnerable to charges that

their AIDS performances are either individuated to such a degree that they remain hermetic, that is, the performance is only about the performer's own experience" or the opposite: "the performer's work universalizes AIDS to such a degree that the specific [is] disavowed" (Román 138). Ana's monologue is obscure, mysterious as the character's personality. For Zeiger, it was an opportunity to demonstrate "literariamente hablando, cómo una chica de clase media puede derivar en la vanguardia. Porque parecía que los personajes del under y de cierta élite provenían . . . de un no lugar, que no tenían historia y estaban por encima de lo que socialmente circulaba" (Berlanga, n.p. *Página 12*). With Ana we have a background story, and a mode of representation based on ambiguity. It contrasts with the other characters both in *Paisaje* and *Adiós a la calle* that name the disease bluntly, as was necessary to document it in order to understand it.

Love is fundamental in the narrative development of the characters in this novel. As Ana Ojeda points out: "la mayoría de los *gays* que transitan las páginas de *Adiós a la calle* son hombres solos frente al dilemma de cómo preservar su forma de vida y, al mismo tiempo, estar con otra persona" (*La Nación*, 2006). Horacio, a reserved man who seems incapable to integrate to the new times of democracy, falls in love with Pablo Gándara. There is a generational rift between both men. Pablo is portrayed as a vivacious young man who wants to experience all type of liberties in post-dictatorial Buenos Aires. Conversely, Horacio, according to Zeiger, "[es] casi un desafío porque [su] cierto conservadurismo no es representativo de la mitología de los 80, si es que uno identifica esa época con la apertura, el under . . . el reviente, elementos que si bien pueden ser una faceta, existieron" (*Página 12*, 2006).

Horacio is a character, stuck in the past, who still carries all the fear and dullness of the dictatorship. His bourgeois life, as a property manager, is comfortable and secure for him. Pablo, on the contrary, avoids any type of serious commitment to anything in his life. This carelessness,

this sense of radical freedom is difficult to understand for the older man who considered that “Pablo tenía una vision poco abstracta o inocente de los lazos del ambiente homosexual —el ambiente real o por lo menos él que el conocía desde hacía tantos años—, el del papel decisivo de los amigos, de los vínculos que iban armando una red que sostenía la vida de gente como ellos, si es que ‘ellos’ eran una especie particular de individuos” (172). Those bonds, that Pablo is unable to understand yet, would prove decisive during in the culture of caretaking during the epidemic. As a movement that wanted to break away with a gloomy past, “el reviente” was a period to enjoy all those experiences that had been censored, silenced or forbidden under a military rule obsessed with ideological control and morality. Iconic streets and avenues of the city such as Lavalle, Santa Fe and Corrientes flourished again as places of gathering for the community especially at night when it was filled with taxi boys (male prostitutes), bar-goers, and drugs. Pablo’s notion of this democratic period is one of renewed pleasures and boundless experimentation:

Reviente. Se habla de *eso* como de un valor circulante y una marca de los días que se viven. Con la democracia, con la sensación que la dictadura sobrevolando la vida es algo que empieza a alejarse del horizonte, a desdibujarse porque a pesar de sus bravuconadas los militares ya no van a volver a poder tener el poder, se han ido cultivando otros aspectos. La moral se afloja; hay una sed de probar lo que no se ha probado. Y además él siente esa sed todavía siente (porque más allá de los militares se ha educado con un padre autoritario) el peso de la ley. (201)

But this experience of “reviente,” as in many other cities around the globe, would soon be tarnished with the news of the epidemic. Pablo, then, experiences the hardest blow of his life: he is HIV positive. Even when he suspected (“lo había sentido”) in his dizzy spells, his weakness, and loss of weight, the anxiety of facing death prevents him from knowing his status for a long

time. In both *Paisaje* and *Adiós a la calle*, characters are suddenly diagnosed with the virus, prompting similar reactions: a state of shock and disbelief. No one is prepared to receive the news. The world stops around them, and any possibility of a future feels truncated. Pablo feels disfigured and shameful. When he confesses his status to Horacio, his lover has many questions, many doubts. Zeiger calls this need for answers as “la novelita policial del sida” which is also the title of the fourth chapter. For the writer, “la novelita” is all those insidious questions (who, when, why, where) to a person who reveals his/her positive status, questions that arise ethical dilemmas: “hacer, acompañar, borrarse o aislarse” (*Página 12*, 2006). In *Adiós a la calle*, it is evident that the community decides to stay and serve as a companion to those facing difficult times. This is what Horacio does for Pablo:

Volviendo a Pablo: mi tarea más inmediata es ayudarlo, asistirlo en su recién adquirida desgracia. Ya lo hicimos con otros amigos y no tan amigos. No hay, parece, lugar para las preguntas de la novelita . . . sentí quizá por primera y única vez que Pablo era un hijo mío muy desamparado que venía a confesar algo que en su mente parecía mucho a una culpa, una falta. (238)

A family of choice related not by blood ties but by affective attachments is able to embrace caretaking amidst rejection and stigma. After Ana’s death, the sadness of saying goodbye to more friends becomes heavier. Despite their different outlooks about life, Horacio, Simón and Mario share the same “gestures” and “attitudes” on dealing with grief. To be there for others, to approach those who need them is vital even if it is painful. For them, “no estar podría llegar a ser tan doloroso como no estar” (232). During the burial of their friend Sebastián, they have no option but to fight with the people at the funeral home to keep the casket of his friend open. People were convinced

that his illness will extend its “efluvios mortíferos más allá de la muerte” (232). Even beyond death, the stigma continues.

In her analysis of *queer kinship*, Julianne Piduck states that “in the wake of the AIDS pandemic, a redemptive discourse of families of choice emerged in recognition of generative, alternative kinship . . . [T]hese experiences contest normative accounts of family characterized by affective plenitude, and by teleological blood and property relations of reproduction” (442). Kinship departs from the realm of the biological to become a politics of care. Unfortunately, Horacio has to say goodbye to his relationship with Pablo. The young man is going to France in a desperate attempt to find a cure. Despite the pain and sorrow that characterize this novel, *Adiós a la calle* ends with a hopeful, positive note. We witness a future scene set the last day of 1999. The transformation of the disease from a fatal condition to a chronic illness is a reality now. Medicine, thanks to the persistent activism of the AIDS community, has progressed to create alternatives of survival. An unknown man is taking the last (antiretroviral) pill of that century. He ponders that the very next day, he will take be taking the first one in the new twenty-first century. He has recently started to take the medication, “y su amigo lo llama cuando no están juntos para cerciorarse que la tomó. Dice que a los seis meses dejará de llamarlo” (251).

In the corpus of HIV/AIDS narratives in Latin America, Chaves’s *Paisaje con tumbas pintadas en rosa* (1998), and Zeiger’s *Adiós a la calle* (2006) are texts that share considerable similarities. Both authors attempt to recreate the first stages of the social and political past of the pandemic from a present perspective. Acknowledging the lack of literary representations from a period that left an indelible wound in the gay body politic, Zeiger and Chaves construct narratives about minoritarian communities in a moment of crisis in two distinct urban realities. Although both storylines occur in disparate political backgrounds (a major South American country with a

history of political turmoil and state terrorism, and a tiny Central American nation with a tradition of democracy and the rule of law), the countries' social policies against gay lives unravel similar methods of violence and containment. Thanks to the historical documentation offered in both literary texts, the affective lives of a community, hit by tragedy and grief, are not lost to oblivion. In spite of the legacies of trauma revolved around the AIDS epidemic, *Paisaje* and *Adiós a la calle* show valuable instances of solidarity and alternative bonds of kinship that proved to be vital for companionship and survival. Contrary to other HIV/AIDS literary texts in the corpus of this research in which the representation of illness is often oblique and metaphoric, an open depiction of the epidemic as a catalyst for social and political change is at the heart of Chaves's and Zeiger's novelistic projects.

3.0 LITERARY REPRESENTATIONS OF HIV/AIDS IN ABIGAE BOHÓRQUEZ AND SEVERO SARDUY: AESTHETIC TRANSMUTATIONS OF THE NEO-BAROQUE

This chapter delves into an analysis of the modes of HIV/AIDS representation in the works of Abigael Bohórquez (1936-1995) and Severo Sarduy (1937-1993). Both authors passed away in the 90s: Sarduy in the city of Paris, and Bohórquez in the city of Hermosillo in his native state of Sonora, Mexico. Despite their interventions in AIDS writing, their careers and personal lives were not particularly similar. Until recently, Bohórquez had remained in the shadows as a somewhat unknown, local poet who didn't receive a well-deserved recognition during his lifetime. On the contrary, after leaving Cuba,¹⁹ Sarduy joined a vibrant cultural life in Paris (a fundamental city in the development of modern Latin American literature). Although Sarduy never reached the same level of notoriety and "fame" that some of his contemporaries from the Latin American Boom enjoyed, he gained critical acclaim in certain sectors of academia and published his novels and essays in prestigious publishing houses of his time. Despite their differences, Sarduy and Bohórquez share a prodigious ability to master and subvert classic literary forms and styles. Their potent linguistic ingenuity is able to adapt cultured literary traditions to create personal styles marked by lush eroticism, excess, extravagance and corporal pleasure. An heir of the Cuban neo-baroque,²⁰ Sarduy assiduously cultivated this aesthetic in most of his works. For him, the reconfiguration of the classic style "metaforiza la impugnación de la entidad logocéntrica que . . .

¹⁹ Similar to Bohórquez, Sarduy was originally from a peripheral place in his native island: the city of Camagüey. González Echevarría writes about Sarduy's incipient literary efforts before departing to the city of Havana in his book *La ruta de Severo Sarduy*.

²⁰ In an TV interview in 1976 with Spanish journalist Joaquín Soler Serrano, Sarduy considered Luis de Góngora, Teresa de Ávila and Lezama Lima as the greatest influences on his neo-baroque style.

nos estructur[a] desde su lejanía y autoridad” (“Barroco y neobarroco ” 1404). Through parody, humor, and an opulent display of linguistic skill, both Latin American writers reveal the complexities and metamorphosis of same-sex desire. Literary critic Gerardo Bustamante Bermúdez has commented on Bohórquez’s neo-baroque exploration in one of his best poetry books, *Digo lo que amo* (1976). Bustamante Bermúdez states, “los elementos neobarrocos en Bohórquez sirven para materializar su mundo dionisiaco, corpóreo y dialéctico . . . son la asimilación de un *locus* de los tópicos clásicos españoles llevados al espacio de la homosexualidad textual” (22). Under the consideration of these stylistic and thematic affinities, this chapter is a study of Sarduy’s and Bohórquez’s posthumous literary works: *Pájaros de la playa*, a novel, published for the first time in 1993 by Tusquets Editores, and *Poesida*, a poetry finished in 1992 but that made its publication debut in 1996 in a small publishing house from Tijuana, Baja California. Texts witnessing the dramatic first stages of the HIV/AIDS epidemic, I argue that *Poesida* and *Pájaros de la playa* constitute a deviation from the possibilities of radical freedom and erotic potentiality that both authors initially espoused in their literary worlds. The celebration of *queer* desire, the insatiable lust for earthly pleasures, the delight in adornment and excess is suddenly transformed into a state of decline, disillusionment, and death. Amidst the tragedy of the epidemic, there is a bitter realization about the brevity of life and the inevitability of mourning. However, in spite of the circulation of negative emotions of defeat and ever-mounting loss, the entanglements between the fictional/lyrical and non-fictional aspects of HIV/AIDS epidemic in Latin America provide an understanding of important social aspects of the disease such as pervasive stigma, dislocated temporalities and repressive methods of health administration.

3.1 THE LOSS OF QUEER ARCADIA: *POESIDA* AND THE END OF THE HOMOEROTIC BODY

Dejó sus cabras el zagal y vino.
Qué blanco, qué copioso y dulce vino.

Abigael Bohórquez, *Digo lo que amo*

Porque todo estaba tiempo de la pasión
y convivimos la cintura del canto
y no conocíamos piedras en el camino.

Abigael Bohórquez, *Poesida*

Bohórquez's poetry can be considered as a hidden gem in the homoerotic literary tradition of Mexico and Latin America. A *norteco* poet who worked as a cultural bureaucrat in Mexico City, his poetry is the epitome of stylistic sophistication and linguistic prowess. Satire, wit, intensity and sagacity are words that can describe his poetic mastery of the Spanish language. Bohórquez wrote poetry about many personal aspects: his memories of the arid state of Sonora, his mother (a fundamental figure in his life), and his political convictions in a convoluted Mexican reality. His exploration of homoerotic themes becomes a central preoccupation in his poetry book *Digo lo que amo*, published in 1976, and would intensify during the last years of his life in *B.A. y G. frecuentan los hoteles* (1988), *Country Boy (crónica de Xalco...)* (1988), *Navegación en Yoremito* (1993) and *Poesida* (1996). In one of the few books of literary criticism on the Mexican poet, Miguel Manríquez Durán is accurate in acknowledging the influence of predecessors Xavier Villaurrutia, Salvador Novo and Carlos Pellicer (members of the *Contemporáneos* group) in the development of Bohórquez's poetic voice (14). However, different from the poetry of Villaurrutia, Pellicer and

Novo wherein homosexuality is often obliquely suggested,²¹ Bohórquez makes an unabashed revelation of his object of desire and the joys of gay sexuality, particularly since the publication of *Digo lo que amo*.²² For César Cañedo, the poetry of the Sonoran writer is a change of paradigm in Mexico's male homoerotic poetics in the 70s. He states that in this new model "ciertos valores expresivos toman una postura menos velada y más combativa; los espacios simbólicos de sociabilidad gay son expresados [y] la corporalidad masculina adquiere formas más allá del velo" (2).

In his development of a queer poetic ethos, Bohórquez prioritizes experimentation. His poetry is a conflation of high-brow literary forms (romantic pastoral conventions, Provençal poetry, medieval/baroque themes) and elements of popular culture as well (neologisms of his own creation, references to Sonoran localisms, etc). There is also a cultivation of "formas culteranas" in the use of hyperbaton, alliteration, and circumlocution. In *Digo lo que amo*, Bohórquez reaches great levels of poetic virtuosity in the adaptation of the pastoral. A classic tradition rooted in Theocritus's *Idylls* and Virgil's *Eclogues*, the pastoral was also an important literary convention in the Spanish Golden Age. For instance, some of the major exponents of pastoral are Garcilaso de la Vega who is recognized for his three eclogues, and Miguel de Cervantes for his pastoral romance *La Galatea* (1585). A prestigious genre intended for the urban elites, the pastoral depicts an idyllic life of retreat away from the ills of modernity. In its representation of a bucolic existence of simple pleasures, the pastoral builds a harmonious relationship between human and nature. Life

²¹ Daniel Balderston has published extensively on the importance of the "open secret" as a "foundational gesture" of a homoerotic literary tradition in Latin America. One of his illuminating essays on the topic deals with a Carlos Pellicer poem secretly dedicated to Octavio Paz. See "'Cifro sangre y poesía': el secreto abierto y la tradición homoerótica latinoamericana."

²² In his comprehensive essay "Silence and Celebration: Queer Markings in the Poetry of Abigael Bohórquez," Andrew M. Gordus considers Bohórquez's initial treatment of homosexuality as constrained and influenced by stigma. *Digo lo que amo* is the breaking point that allows him an open acknowledgement of same-sex desire.

is devoid of complications and hard toil, far from the real-life conditions of the rural populace. The rustic arcadian setting is ideal for the development of romance between the shepherd and his shepherdess. Terry Gifford, an expert on the pastoral tradition, has been critical of the escapist nature of the genre. For the British scholar, the pastoral is a conservative modality that creates “a false ideology that served to endorse a comfortable *status quo* for the landowning class who has been the reading public before the nineteenth century” (7). Nevertheless, Bohórquez’s modern version of this literary modality demystifies libidinal conventions (those rooted in heterosexual love) and explores the limits of poetic language to convey erotic passion. Although not as widely acknowledged, there has been a queer pastoral²³ tradition that can be traced back to the origins of the genre. For example, Virgil’s second eclogue *Formosum pastor Corydon ardebat Alexin* (“the shepherd Corydon burned for fair Alexis”) is a pastoral story of homosexual love. Inspired by this work, Bohórquez wrote “Las canciones por Alexis” in 1969. In *Digo lo que amo*, a poetry book whose title was inspired by Luis Cernuda’s poem “Si el hombre pudiera decir,”²⁴ the readership can find one of the finest examples of homoerotic poetry. In “Reincidencia,” a male lover describes the qualities of a beautiful shepherd that he ardently desires:

Dejó sus cabras el zagal y vino.
ah, libertad amada,
qué resplandor de vástago sonoro,
qué sabia oscuridad sus ojos mansos,

²³ In his book *Los caminos del afecto* (2015), Daniel Balderston examines Bohórquez’s exploration of “la cántiga del amor.” He cites the poem “Aquí se dice de cómo Natura algunos hombres han compañía amorosa con otros hombres” and explains, “la reescritura de una tradición poética a que comúnmente se ha atribuido una esencia homoerótica se realiza con cierto humor: se recapitula cierta fórmula del Medioevo tardío, pero desde la modernidad” (67-8).

²⁴ “Si el hombre pudiera decir lo que ama, / si él pudiera levantar su amor por el cielo/ como una nube en la luz” (179). These lines can be read as the emotional restraint to reveal one’s object of affection.

qué ligera y morena su estatura
que galanura enhiesta y turbadora,
qué esbelta desnudez túrbida y sola. (62)

In the previous lines, the shepherd relishes the liberties of leisure. He has left his responsibilities behind. The anaphoric use of “qué” conveys feelings of admiration and contemplation from a desiring gaze. In this bucolic setting, a wide array of pastoral elements are present: “esquila, choza, baladora oveja,/ tecórbito y aceite, paja y lumbré” (62). As the poem develops, erotic passion ensues in a plea for a vigorous sexual encounter between the two males:

soy también tu ganado, ven, congrégame [...]
estallido, mordisco, ávida lengua, montaraz pistilo,
novilúnido semen, dulzorosa penetración, pródigo arquero
plenamar de su espasmo
de su primer licor, abeja de oro.
se me quedó en el pecho, pecho a tierra,
un gemido de manso entre los árboles. (63)

In her analysis of the poem, Christina Karageorgou-Bastea observes, “Bohórquez se regodea desnudando los eufemismos, y evidenciando así, la dulce tiranía de la retórica. Metáforas, sinécdoques, hipérboles multiplican los signos fálicos . . . en tanto que la acción se vuelve más y más explícita” (153). After a moment of passionate sexual union, both men share an intimate moment of blissful rest after the ecstasy of sex: “vencedores vencidos/ acribillados, cómplices sobre las pajas ásperas” (63). With a similar theme, “Primera ceromonia” deals with the powerful exploration of same-sex desire. An infatuated lyric voice addresses his lover: “primaverizo yaces,/ deleital y ternúrico/ silvestreido y leve” (1-3). Bohórquez’s creation of cultured neologisms

(novilúnico, silvestrecido, veranideces, etc) to convey a romantic atmosphere of desire is a common trait of the Baroque. For Bustamente Bermúdez, “más que neologismos son ruptura de lenguaje; pareciera que en ocasiones se trata de códigos que sólo el poeta y el cuerpo de su amante en turno pueden entender” (21). These intimate codes show the centrality of the corporeal in this stage of the poet’s career. His poetry is a proliferation of sensuous images that celebrate the ecstasy of sex:

tus muslos, golpe a golpe, se separan
se encuentran, se encajan, se unifican
se hace una brecha ardiente en el revuelo
de la sábana;
no hay piedad para mí.
tus dientes caen, degüellan,
rindo el sentido.
tómame.²⁵

Bohórquez’s deliberate adaptation of the pastoral is effective to advance a celebration of queer existence in which pleasure and leisure have a potential of freedom. In her theorizations of time, Elizabeth Freeman argues that society lives in straight time. She explains this with the coinage of the term chrononormativity, “or the use of time to organize individual human bodies toward maximum productivity” (3). In a world led by the forces of heterosexism, living in queer time, according to Jack Halberstam, is a renunciation of traditional social scripts: wage labor,

²⁵ The level of intimacy between the lovers reaches moments of sensuous celebration of the flesh: “resplandeciendo en la devoradora oscuridad/ tu sexo,/ húmedo, cálidamente eléctrico, madero victorioso,/ con el recuerdo herido todavía/ de la primera masturbación y el receloso orgasmo,/ y tus labios suntuosos/ temblando un hálito que ya no necesita/ el niño aquel que eras,/ y tu cuello miro que pulsa las cuerdas/ del corazón, no sé si el tuyo, el mío” (36).

reproduction, childbearing and even death (“Theorizing Queer Temporalities” 182). In Bohórquez’s queer pastoral, these logics of productivity are inexistent. Life is a continuous state of *jouissance* freed from stigma and shame. There is something particularly queer in the process of wasting time that would be otherwise used in orderly fashion to construct a narrative of progress. However, there is an abrupt end of this “golden age” that will bring trauma and death. AIDS casts a dark shadow of destruction and fear onto Bohórquez’s crafted paradise. In *Poesida* (1996), the *locus amoenus* turns into a *locus terribilis*. This book of poems is an honest lamentation of all those who felt victim to the tragedy of the epidemic. There is an evident turn from a previous state of idyllic sensuality to a present of decay and mortality. Bohórquez writes a short preamble explaining the reason behind his commitment to portray the harsh reality of those who had already departed from his world:

Traigo este documento cruel pero solidario para pedir comprensión infinita para los ciudadanos del mundo que han muerto víctimas de este cáncer finisecular [SIDA] y bondad para estos poemas del paraíso perdido que algún día que mi imaginación no alcanza a predecir reencontraremos. *Poesida*, poesía testimonial de quien pudo escribirla con todas las palabras de que es capaz un hombre. (18)

In this passage, there is an acknowledgement of irrecoverable loss. Bohórquez grieves about a pastoral past of joy that has been replaced by a somber recognition of the impossibility of a queer utopian space. In addition, he emphasizes the “testimonial” nature of his poetic voice that feels compelled to speak in name of those who can’t in a moment of dire crisis. Similar to the aesthetic sophistication of *Digo lo que amo*, *Poesida* is a refined torrent of words and complex emotions mourning for paradise lost. In the first poem of the collection, there is a direct reference to César Vallejos’s “Poema LXXV Estáis muertos” in *Trilce*.

Estáis muertos. Pero,
¿en verdad estáis muertos,
promiscuos homosexuales?
MUERTOS SIEMPRE DE VIDA
Dice Vallejo,
EL CÉSAR. (23)

In this poem, Vallejo's sardonic invocation unravels a central theme in *Poesida*: to be in a state of living death. In "Poema LXXV", the poetic voice addresses a community of the dead with this message: "Pero, en verdad, vosotros sois los cádaveres de una vida que nunca fue/ Triste destino el no haber sido sino muerte" (292). These lines resonate with the experiences of many gay men during the onslaught of AIDS. The initial fears of a death-bound future, as well as the realization of experiencing a dislocation of time in which impending death presents itself in the very act of living precariously, were significant aspects in the lives of the victims and their mourners. Bruno Ríos Martínez explains that "[*Poesida*] es un ir y venir de argumentos, un testimonio a través del duelo, y en el duelo una negociación con la muerte del otro a través de la nostalgia, que implica la evocación del deseo" (n.p.). In order to express this feeling of nostalgia for a better past that is now gone, Bohórquez departs from the pastoral and cultivates the elegiac genre. For instance, in the poem "Mural," the poetic voice reminisces about previous moments of erotic pleasure, and laments all the senseless death of men who turn into "viejísimos/ esqueletos de aquella primavera/ que de repente se quedó sin hojas" (55). In fact, "Mural" is an AIDS elegy that mourns the end of a queer pastoral paradise that has been desecrated. It is a cry of nostalgia for a springtime of love that is tragically interrupted:

Lo lamento deveras. Me la mento

por los viejos instantes de pureza
que vivimos a lomo de aventura
recolectando frutos de solaz,
bucólica andrajancia
de respirar a pleno mar un sexo
y poseerlo canallamente abril
sobre la playa. (56)

This bucolic wandering (“bucólica andrajancia”) through a pastoral world in which two men are able to love freely, without fears and reservations, fades away as a utopian world, one that in Bohórquez’s poetic world never fully existed. This elegy establishes a direct dialogue with a previous pastoral poem, already analyzed, entitled “Reincidencia”. Two male lovers lie, in full satisfaction, over the hay after an intimate moment of passion. In *Poesida*, “Mural” describes a similar instance: “amarnos entre la hierba,/ porque fuimos de la libertad la flor y dábamos/ de flor la fruta verde” (57). But the lyric voice suddenly reveals the somber disruption of decay in the present time: “Ahora, casca vana la nuez, y a la manzana/, le ha nacido un gusano” (57). In this poetic imagery, an apple, a fruit associated to sensuality, temptation and sin, rots with a worm inside of it. In the Christian myth, the consumption of the forbidden fruit (usually depicted as an apple) casts out Adam and Eve from the paradisiacal garden of Eden. In the case of *Poesida*, there is a banishment from an idyllic place of queer relationality and erotic possibilities.

Bohórquez’s vast knowledge of classic literary culture makes possible his many references to high literary works and forms. Continuing with his turn to the elegiac mode in *Poesida*, the Sonoran poet makes a direct reference to Jorge Manrique’s *Coplas por la muerte de su padre*. There are also allusions to the poetry of Whitman, Darío, and even Mexican bolero singer Pepé

Jara.²⁶ “Tergiversito” is a refashioning of the third stanza of the Manrique poem. Contrary to Manrique’s work in which life is compared to a river that runs to the sea, in Bohórquez’s poem living inexorably leads to a bed, the last destination of the diseased: “Nuestras vidas/ eran ríos que/ fueron dar a encamar que ¿fue el vivir?” (35). It is relevant to point out the use of possessive pronoun in first person plural (nuestras) shows a personal adherence of the necropoetic voice as a sufferer of the epidemic of AIDS. In all its complexity, Bohórquez’s poetry at times makes very intimate references to the poet’s life that demonstrates his understanding of the profound impact of the epidemic in the emotional and physical lives of gay men. This personal inclusion resonates with the analysis of Dagmawi Woubshet in his remarkable research *The Calendar of Loss*. In his considerations on lyrical mourning in the contemporary genre of AIDS elegies, Woubshet states that “AIDS elegists may share inconsolability with other twentieth-century writers, but theirs come from facing their own wasting in addition to others’ deaths, sequencing a timetable of loss for the death-bound poet” (31). For him, “with each passing lover, with the mounting numbers of the dead, the bereaved is provided with yet more evidence of the certain fatality of the virus also at work inside him” (4). Among the different autobiographical hints in *Poesida*, two of the most personal ones can be found in “Carta” and “Cantares.” With elements of the Baroque, the first poem explores mortality through the symbolism of a skull. In the world of literature and culture, the skull has served as a reminder of the vulnerability of life, the transient nature of vanity [vanitas vanitatum et omnia vanitas] and unavoidable mortality. Like the celebrated description of the skull

²⁶ In “Slogan,” there is a reference to “la familia de hierba” alluding to Whitman’s *Leaves of Grass*. In addition, the poem “Cantares” adapts the lyrics of Pepé Jara’s “El andariego” (“yo que fui del amor ave de paso,/ yo que fui mariposa de mil flores”) to portray the various romantic adventures of the poetic voice. Finally, there is also a wink to a Ruben Darío’s poem in *Cantos de vida y esperanza*: “mientras aquí piso con pezuñas de ausencia/ este no sé si soy aquel que ayer nomás decía” (50).

of the beloved in Lope de Vega's "A una calavera," Bohórquez recounts an existence of freedom and enjoyment that will, sooner or later, end in a yellowish skull:

Mi calavera
donde ocurrió la luz
y tremó el corazón y aulló la magia
.....
Mi calavera de dientes desiguales,
a veces dolorida se dolora,
otras se acuerda amor mi calavera
ay huesto de luz
alumbrando desde el doce de marzo
del treinta y siete, esta machaca
que han de comerse los gusanos. (32)

The date in the poem refers to Bohórquez's birthdate (March 12th, 1937), and his own possibilities of mortality. "Cantares" unravels an even more intimate life aspect of the poet: his close relationship with his mother Sofía Bohórquez. Sofía was essential for his son's happiness. During his lifetime, Bohórquez wrote many poems for her such as "Carta a Sofía desde ayer" and "Mamá, ya he crecido." She passed, far away from her native Sonora, in August 1980. Her death was a terrible blow for his artistic son who never really recovered from her absence. "Cantares" is perhaps the most personal poem in *Poesida*. The lyric voice recounts his life, his "tribu bojorquita" in an endearment term to name his family, and those friends gone too soon. In these moments of longing and melancholy, the memories of her mother are revived:

Es ahora cuando me acuerdo más

y también otra vez
de ti, doña Sofía
que por setenta años lástima
cargaste pesadumbre de tu hijo como tú
irguiendo la mirada sufrida de tu dolor
vivimos juntos en tórtolas alturas y
te fuiste a morir
desalentada
de lejos de tu casa
.....
Y ya lo ves, amá
si algo vale la pena,
es la confiesa cruz de ti a mí heredada
que peor hubiera sido quedar sin mí
tú, viva y
en el televisor:
el sida el sida el sida el sida
y otra vez estar muerto. (31)

In these previous lines, a poetic voice (that is most definitely Bohórquez) invokes the presence of his mother who shares, according to him, a common life of suffering, that could have been even more intense if she would have remained alive to see the demise of her offspring. There is also an interesting mention of the media representation of AIDS on TV. Television, in the first stages of the epidemic, was complicit in the spread of terrible fears of public contagion and moral

decay. As Simon Watney writes in his celebrated essay “The Spectacle of AIDS,” this representation “operates as a public masque in which we witness the corporal punishment of the ‘homosexual body,’ identified as the enigmatic and indecent source of an incomprehensible, voluntary resistance to the unquestionable governance of marriage, parenthood, and property” (83).

Poesida is undoubtedly a poetry book full of pain and sadness. There is an acknowledgement of the unfairness of life, and the heavy burden of carrying memories of the dead. However, this poetry book is more than a negative recount of a tragic epidemic. Bohórquez understood that, in the earlier years of AIDS, the possibility of queer mourning was being suppressed. Shame, fears of stigma and ignorance prevented an open recognition of AIDS related deaths. Numerous times, families effaced all the previous life of their beloved ones to keep their sexual orientation from the public eye. In a wide-ranging timeline of the AIDS epidemic in Mexico titled “El sida en México. Etapas del prejuicio,” Carlos Monsiváis states:

la intolerancia y la arbitrariedad acumulan sus efectos a lo largo de la década [90s].
Prosiguen los despidos de los seropositivos y enfermos, los maltratos y vejaciones múltiples en hospitales, las crispaciones familiares ante los enfermos ... el ocultamiento y el silencio en torno a las medidas preventivas, el escamoteo de las cifras de muertos, enfermos y contagiados, cifras de por sí casi imposibles de verificar por las estrategias ante el prejuicio. (6)

In this difficult context, the Sonoran poet places the epidemic at the center of his poetic project. Bohórquez gives visibility to the lives of gay men dying of AIDS. Lives, that in the long history of homophobia have been undervalued and kept into secrecy. *Poesida* recognizes the

existence of these lives, and saves them from oblivion.²⁷ In the present effacement of the epidemic in collective memory, this book of poetry is an effective witness to the complex entanglements of gay life and mourning. As Anne Cvetkovich argues in her analysis of AIDS archives: “trauma puts pressure on conventional forms of documentation, representation, and commemoration, giving rise to new genres of expression, such as testimony, rituals and performances that call into being collective witnesses and publics” (7). In “Duelo,” the poet joins, in urgency and solidarity, an unknown space of death where he expresses his most intimate feelings of grief and memory:

Vengo a estarme de luto por aquéllos
que han muerto a desabasto,
por los rútilos o famélicos
procurando saciar su corazón o su hambre
.....
por aquéllos
que recibieron prematuramente
su funeral de escándalo,
su ración, su camastro, su obituario velado,
pero más por aquéllos
que, desde que nacieron,
son confinados, etiquetados, muertos
en sus propios rediles. (61)

²⁷ In her exploration on Abigael Bohórquez’s poetry, Christina Karageorgou-Bastea agrees with the collective nature and social awareness of the Sonoran writer: “El yo-lírico de hijo-poeta-amante, creado a lo largo de 35 años, es todo menos un ser encerrado en sí mismo. Más bien, contra viento y marea, el poeta mexicano se abre para que otros seres aniden en su palabra” (145).

Bohórquez's presence in this space of mourning is key. He grieves for those lives that have been considered as not worth remembering or celebrating. Despite the destruction and stigma brought by HIV/AIDS, the poet claims that the lives of gay people are at risk since birth, especially in a society that rejects or embraces others based on their ability to perform normative roles of masculinity and femininity. It also a reminder of the attempts to separate gay suffering from human suffering, as if validity of pain would be the prerogative of a certain social group. Judith Butler, in her analysis of suffering in the Iraq War, explains how society creates "hierarchies" of suffering that invalidate certain beings at the expense of others:

The public sphere is constituted in part by what can appear, and the regulation of the sphere of appearance is one way to establish what will count as reality, and what will not. It is also a way of establishing whose lives can be marked as lives, and whose deaths will count as deaths. Our capacity to feel and to apprehend hangs into that balance. (xx-xxi)

Recognizing the existence of divisive opinions that have undermined gay suffering as valid, Bohórquez understands that his poetic voice has power to create a critical memory of the dead. The poet writes:

Vengo a estarme de luto porque puedo.
Porque si no lo digo
Yo
poeta de mi hora y de mi tiempo,
se me vendría abajo el alma, de vergüenza,
por haberme callado. (62)

In his mastery of poetic language, Bohórquez feels an ethical commitment to talk about an emotionally taxing topic that, at least in the time of his writing in 1992, was still considered both taboo and a social threat. He also asserts himself as an artist, a poet who, despite his allegiance to classical traditions, is able to make an intervention in one of the most relevant dilemmas of gay contemporary history. Similar to the main discussions on AIDS activism in the 80s and the 90s, Bohórquez is keen to know that silence is not an option. Silence, in a time of urgency, signifies death.

There is a striking difference between the joys of gay intimacy in Bohórquez's initial poetry and the melancholic and heartbreaking tone that pervades *Poesida*. This, however, does not limit his aesthetic capacity and poetic mastery. The poet is able to craft a language of emotional and physical ruin that has evident similarities with the pessimism and disappointment of the Baroque. For instance, the poem "Desazón" shows the worldview of a Baroque poet in total disillusionment for his lack of fame, prestige, and patronage. Similar to this disgraced man of letters, Bohórquez was hardly ever recognized during his lifetime for his poetic genius and lived as a poetic outcast from the main circles of social prestige. In the poem, a poetic voice reminisces about his experiences as a man of letters who has always lived in the margins:

cuando ya hube salido de
cárceles, burdeles, montepíos, deliquios
.....
elíxeres, destierros, desprestigios, miseria,
extorsiones, poesía, encumbramiento, gracia,
me conformo, me he dicho
Dios asiste y acato

In the development of the poem, the lyric voice still trusts in God despite the struggles and complications of life. In this recollection of the past, memories are relived: his native home, his books, his trees, “la chofi” (a term of endearment Bohórquez used to call his mother). However, there is a point of inflection that worsens the state of precariousness of the unfortunate poet, and that brings the poem to a contemporary setting of destruction:

Y de repente, el Sida
Porqué este mal de muerte en esta playa vieja
ya de sí moridero y desamores,
.....
en esta pobre hombruna
de suyo empobrecida y extenuada
por la raza baldía? Sida.
Que palabra tan honda
que encoge el corazón
y nos los aprieta. (28)

The illness has a central role as a sudden calamity with no solace, with no possibilities of recovery. “Sida” is a word that dramatically transformed all aspects of sociability among many gay communities. It’s still an emotional wound that confirms fears of discrimination and exclusion. *Poesida*, however, also has brief glimpses of hope and renovation. In “Retablos,” a poem that functions as a spectral memorialization of AIDS victims related to the poet’s life, Bohórquez makes a temporal intervention that foresees regeneration and resurrection. There is a turning back to a world of queerness and life that has been lost. There is a promise of futurity:

Cuando el alba aletee otra vez

y vuelva al mundo la claridad,
y quizá ya no exista,
y los jóvenes asuman nuevamente
la fuerza comosea del amor
en el sexo cualquiera,
y el AIDS sea un slogan de los ochentas,
habré de ver qué digo
de donde éste:
Lázaro resucita cada día
Entre los minerales del estiércol,
y la *Paloma de la masacre*
volverá a hacer pichones
bajo el cielo. (77)

Awarded an international prize organized by CONASIDA²⁸ and the World Health Organization (WHO), *Poesida* is a powerful intervention in queer temporality. Not only because it brings to life a pre-AIDS past of gay relationality based on bonds of liberty, pleasure and community, but also because it attempts to modify a present of shame that prefers to “umremember” the tragedy of AIDS for its negative connotations in a period of polical and social assimilation into mainstream society.²⁹ For Christopher Reed and Christopher Castaglia, this process of umremembering a gay past is a “process destructive of both a generation of social

²⁸ CONASIDA (Consejo Nacional para la Prevención y el Control del Sida) is a Mexican government organization founded in 1988 for the control and prevention of HIV/AIDS.

²⁹ Although the recognition of human rights to LGBTQ populations has been extensive in the United States and Europe, Latin America is also a region where neoliberal states have started their inclusion of gay people that could comply with the expectations of the “good” and “productive” citizen.

revolutionaries and the transgenerational bonds that make the transmission of revolutionary projects and cultures across and against time possible. De-generational unremembering is not simply an assault on the past or an attempt at prophylactic protection of the future . . . it is, above all, an aggressive assault on possibilities for the queer present” (9). Bohórquez’s poetics of mourning are then a timely intervention of a present that has forgotten the suffering and the trauma experienced in the community during the onset of the virus. Reed and Castaglia explain how official memories (those set by the State) are easy to forget or lose significance; however, the intimate stories of *Poesida* carry a potent message of remembrance and transformation with its glimpses of hope. It opens a window for a different understanding of time and death, one that departs from the traditional conception of mortality as the end of all things to come. If queer time does not follow the traditional logics of “straight time” as a narrative of progress and decline, death can be an instance that leads to many possible non-linear temporalities. In “Retablos,” the unpending death of the poetic voice is not seen as a total termination of time, but just as one of its many cycles that the potential to renovate future new worlds and alternative forms of queer relationality.

3.2 ILLNESS, NEO-BAROQUE DISILLUSIONMENT AND PHARMACOLOGICAL CONTROL IN PÁJAROS DE LA PLAYA BY SEVERO SARDUY

Tu sexo es el más grande y en él están escritos, como en las hojas de un árbol sagrado del Tíbet, la totalidad de los preceptos búdicos. Sin que nadie los haya cifrado, partiendo en espiral del orificio, alrededor del glande se inscriben los signos de toda posible ciencia.

Severo Sarduy, *Cobra*

Hoy me encuentro enfermo y solo.
Al menos, algo cierto habrá quedado de todo esto: la desilusión.

Severo Sarduy, *Pájaros de la playa*

Published a few months after his untimely death to AIDS, Severo Sarduy's (1937-1993) novel *Pajaros de la playa* is an allegorical text that depicts the sudden onset of an illness that quite resembles the first years of the AIDS epidemic. Sarduy, a Cuban *émigré* and Latin American intellectual, had resided in France since the early 60s after obtaining a scholarship to study art history at the Louvre. During his life in Europe, he would become a prominent voice in the theoretical configurations of the Spanish American neo-baroque. In Paris, besides his career as a writer, poet, essayist and even painter, he developed a close relationship with French intellectuals associated with post-structuralism and both the avant-garde magazine *Tel Quel* and the publishing house Éditions du Seuil.³⁰ A strong admirer of Lezama Lima's legacy in Cuban letters, his literary style is characterized by excess, exuberance of forms, parody and simulation. Sarduy, however, was not the only homosexual writer who explored the boundless possibilities of developing a neo-

³⁰ Sarduy worked for many years in Éditions du Seuil as an editor for Latin American literature.

baroque aesthetic in his work. As Sarduy's artistic projects develop in Europe, Argentine writer Néstor Perlongher states his fascination with a neo-baroque aesthetic that is devoid of a "classic" background. For him, the neobaroque, different from the styles rooted in the Spanish Golden Age tradition, has the potential to synthesize a large number of hybrid aesthetics and disparate cultural conceptions that resist a single definition. For Perlongher, "el neobarroco hispanoamericano . . . no funciona como una estructura unificada, sino que su juego parece dirigido a montar la parodia, la carnavalización y la derisión" (*Prosa plebeya* 115). In contrast to a conception of the Baroque as an art manifestation of the elites in highly stratified societies, Sarduy conceives his queer neo-baroque as an aesthetic project of resistance and *contraconquista* adopting here Lezama Lima's use of the term in his book of essays *La expresión americana* (1957). Defined as a technique of aristocratic/absolutist power, John Beverley in his essay "Sobre Góngora y el gongorismo colonial" quotes Sarduy and his ideas regarding to the emancipatory potential of the neo-baroque:

ser *barroco* hoy significa amenazar, juzgar y parodiar la economía burguesa, basada en la administración tacaña de los bienes, en su centro y fundamento mismo: el espacio de los signos, el lenguaje, soporte simbólico de la sociedad. . . . El barroco subvierte el orden supuestamente normal de las cosas, como la elipse —ese movimiento de valor— subvierte y deforma el trazo, que la tradición idealista supone perfecto entre todos, del círculo. (*Barroco* 104)

Sarduy's ideas clash with José Antonio Maravall's notion of baroque culture as a representation of Iberia's absolutist authority and imperial influence. In the contemporary refashioning of the style, the (neo) baroque reinvents itself as a countercultural force that questions the order of modernity (state, nation, family), and integrates new narratives to Latin American

literature (against the canon).³¹ A reflective thinker of the myriad configurations of the (neo) baroque, Sarduy's literary manifestations echo the influence of the style in a parodic, sensual and subversive writing that shows a rich diversity of pleasures, identities and desires in human nature. In light of these contrasting views, *Pájaros de la playa* can be analyzed as a "symptomatic" text that unravels the ultimate exhaustion/depletion of Sarduy's neo-baroque project and its liberating possibilities during the age of HIV/AIDS.³² The novel takes place in two isolated places: a hospital that is located on an island with striking similarities to the AIDS government-sponsored colonies in Cuba.³³ In these settings, a group of sick people have been removed from public life due to their precarious health, and the imperious need to control a potential hazard for those who are outside. Similar to Beatriz (Paul) Preciado's conception of a "pharmacopornographic" age in the book *Testo Junkie: Sex, Drugs, and Biopolitics*, the AIDS epidemic has been under the surveillance (care), and administration of "biomedical models, advertising campaigns, governmental health organizations. . . pharmacological industries, intellectual property, and so on" (337). In opposition to the activist discourse on AIDS that defends the possibilities of bodily autonomy and self-care in a context of death, *Pájaros de la playa* is an anti-immunitarian fiction in which the capacity of resistance has been constrained by a disciplinarian medical administration of the national body

³¹ Maravall is known for his conception of "barroco de Estado" and the essential role of this aesthetic as an imperial tool in the colonial expansion of the Americas. On the other hand, cultural critic Mabel Moraña has discussed the countercultural elements of the neobaroque. Moraña states: "El Neobarroco diagnostica la crisis de los procesos modernos de subjetivación ...[y] propone una expansión proliferante de la *diferencia*" (*La escritura de límite* 78).

³² *Pájaros de la playa* is not the only exploration on the part of Sarduy in writing about AIDS. Two earlier works do also, the novel *Colibrí* (1987) and the book of personal essays *El cristo de la Rue Jacob* (1987).

³³ Suzanne Jill Levine points out that "other real" islands in Sarduy's mobile life include "Sri Lanka (then Ceylon), and most specifically, volcanic Tenerife" (175-76). In modern history islands have served as forced isolation settlements for patients dealing with incurable infectious diseases. From 1866 to 1969, there were two leper colonies in the island of Molokai'i in the Hawaiian Archipelago: Kalawao and Kalaupapa. Those suffering severe cases of the disease were sent to a life of exile in this isolated peninsula. Authors Robert Louis Stevenson and Jack London wrote personal and fictional accounts about their personal visits to the leprosy settlements in Molokai'i.

that intends to purge the diseased. In fact, the novel can be read as an allegory of the Platonic and Derridean conception of “pharmakos.” Following a logic of sacrifice, the pharmakos expels the evil from the center of the *polis*. Derrida explains that “the character of the *pharmakos* has been compared to a scapegoat . . . the expulsion of the evil, its exclusion out of the body and out of the city” (*Dissemination* 130). A society of control makes atonement for its own social sins by choosing a sacrificial victim to restore the disruption of orderly life.

In the novel, a pentagon-shaped hospital³⁴ accommodates an important number of young, but prematurely aged, men who have been affected by a mysterious illness. According to the narrator: “No eran viejos caquéticos, amarillentos y desdentados, las manos temblorosas y los ojos secos, los que, envueltos en anchas camisolas, estaban sentados en los bancos de hierro adosados a las paredes del pentágono; eran jóvenes prematuramente marchitados por la falta de fuerza, golpeados de repente por el mal” (20). Living in complete reclusion of the outer world, the majority of patients are men. Their lives have lost all sense of meaning. They just wait for their inevitable demise. In first chapter of *Pájaros*, a group of sensuous male runners serve as a striking contrast to the precarious existence of the hospital patients: “en la arena rojiza dejaban un momento sus huellas los pies fuertes de los corredores. Pasaban veloces, concentrados en el ejercicio. . . . Los cuerpos tensos brillaban excesivamente dibujados, casi metálicos, barnizados por el sudor; en mechones mojados, el pelo se les pegaba a la piel” (11).

There are two differentiated types of corporeal existences: the diseased one and another one that experiences the joys of health. The medical reclusion of the diseased depicted in Sarduy’s

³⁴ The pentagon-shaped hospital has certain similarities to the panopticon prisons studied by Foucault. Andrea Musitano explains, “el pentágono dentro de la novela es un tipo de *panóptico*, por ser el sitio de reunión de los enfermos y de examen (en los dos sentidos: en el etimológico, es medida, peso y prueba; en el médico, es control” (139).

novel has evident similarities to the policies of forced quarantine developed by the Cuban authorities at the onset of the epidemic. Shawn Smallman states that the Cuban medical response to HIV/AIDS was ambivalent and contradictory in many aspects. Although the authorities were successful in curbing the spread of the virus and providing treatment to their patients, it was carried out in a way that jeopardized/violated civil liberties and personal rights. As previously stated in the introduction of this project, in the onset of the epidemic, Cuba related the sudden appearance of HIV/AIDS as a threat that stemmed from U.S. moral and social decay. Smallman explains that it was essential for the Cuban government to demonstrate an adequate management and prevention policy from a foreign health threat: “the central metaphor of Cuba’s anti-imperialist struggle . . . is that of health. The health of the individual is a metaphor for and symbol for the health of the ‘body politic,’ and in which the achievement of the status of ‘world medical power’ is synonymous with victory over the imperialists” (111). For the State, it is fundamental to protect the nation from any possibility of further degradation even when this entails the loss of freedom of its own citizens or their demise in banishment from social life. In his essay, Rafeal Saumuel writes about Finca Los Cocos, the first hospital to isolate HIV/AIDS patients in Cuba, and the lack of personal autonomy for those in seclusion:

la estrategia consistió en sacar fuera de la circulación a todas las personas infectadas con el virus en franca violación de sus derechos individuales. Las aislaron en la finca 'Los Cocos', cerca del pueblo Santiago de Las Vegas en La Habana. Por varios años el sitio fue, en una sola pieza, sanatorio y reclusorio. Los derechos económico-sociales chocaron contra los derechos personales. La libertad individual de los pacientes fue sacrificada en aras de la atención médica y de la prevención epidemiológica. El estado se comportó como benefactor en materia de salud y como

carcelero de los enfermos. La finca se convirtió en una alegoría de la sociedad general. (*Otro Lunes* N.13, 2010)

Possibly, for Sarduy, the pentagon-shaped old colonial house where the sick go to die is a fictional representation of Los Cocos and the problems that may arise when liberty is curtailed. Amidst intimate narratives of physical decay, the State assumes a role as the official protector of the national body politic. The State fulfills then a role of protection and prevention of all those elements that attack the stability of the nation. Nevertheless, the HIV/AIDS epidemic is not a health crisis with a predictable resolution. On the contrary, the epidemic, as a condition of a postmodern age, shakes both the trust in the effectiveness of modern medicine and the repressive capacity of the State to eliminate what is deemed as a “social evil.” In fact, the social phenomenon of AIDS undoes an important number of modern conceptions such as the alleged separation between center and periphery and the impermeable nature of corporeal and geographical borders. It also sheds light on the existence of other sexualities and pleasures that do not follow heteronormativity and the sexual logic of reproduction. The revelation of these fissures and vulnerabilities in the national body only intensify the need for the suppression/effacement of difference to guarantee “life.” In his book *Inmunitas: Protección y negación de la vida*, Italian philosopher Roberto Esposito explains:

la superposición entre léxico político y léxico médico a la metáfora del cuerpo y de la consecuencia inmunitaria que inmediatamente resulta de ella: para que ese cuerpo pueda curarse de modo estable, es preciso revelar la potencia del mal que lo aflige y que justo por esto debe ser eliminado drásticamente. Sólo si se lo admite en su total negación será posible combatirlo a fondo. En ese sentido puede afirmar Sieyès que la curación se debe al exceso de enfermedad. Que sólo cuando esta es

llevada a sus extremas consecuencias patógenas se hace posible la regeneración, por ser, sin más, necesaria. (168)

Esposito's words are relevant not only in the way they dialogue with the politics of medical prevention during the development of the epidemic, but also in the articulation of fear and stigma as acceptable behaviors to save people's health from a medical condition that was initially characterized as a lethal plague. In the absence of a cure, the solution was both the complete isolation of the "pathogenic" body from social life, and the suppression of all types of perceived risk. In this context, there is a conflation of both political and medical power to manage the well-being of the body. Undoubtedly, the biopolitical regulation of human life has influenced the medical discourse. For instance, in the evolution of the history of medicine, the field, as any other social activity, has been tainted with a legacy of racism, class inequality and other social stigmas. Initial policies of preventive medicine tackling the HIV/AIDS epidemic replicated many of the historical stigmas associated with homosexuality. After all, AIDS was initially considered a gay related immune disease, which reflected social judgments of homosexual sex. The slow medical progress in the first years of the epidemic was not only a consequence of the challenges posed by an unfamiliar, complex virus, but was also rooted in the prejudice towards gay life.

Is Sarduy's novel a conscious neo-baroque project? It is; however, his aesthetic conception in the novel departs from previous projects in which excess is carnival and life is a celebration of corporeal pleasure. The neobaroque aesthetic of the novel has more similarities with the traditional European Baroque. For instance, there is an overwhelming feeling of crisis and disillusionment (*desengaño*) as well as a recognition of the power of death over human life. In addition, there is a common obsession with the idea of physical decay, anomaly and monstrosity.

A disciplinarian power intervenes and dominates all aspects of the pentagon. There is no possibility of self-affirmation and agency in this dying place. The diseased ones are too weak to move or talk. There is a total absence of spiritual strength and drive. One of the prematurely withered men says, “la luz [del sol] cura, pero no a mí. Mi espíritu ya no habita mi cuerpo; ya me he ido. Lo que ahora come, duerme, habla y excreta en medio de los otros es una pura simulación” (21). In the dying house, everything is already posthumous. Living is just a reflection of a present that is already gone. The men inhabiting this place are compared to birds (in a Spanish, especially Cuban, context the word “pájaro” has been used to name homosexual men) that alight in the central patio of the colonial mansion/hospital “aquejados por el mal, incapaces de levantar el vuelo, rememoran a lo largo del día las hazañas pasadas. Algo, sin embargo, les queda del cuerpo en majestad de ayer: la agudeza de la mirada, vultúrido al acecho, tornada hacia lo alto de la cúpula, como en espera de un signo celeste y diurno” (22-23). As in the previous passage, in *Pájaros de la playa* there is a constant look to a better past. In a present of death and hopelessness, there is a longing for a previous state of full vitality and bodily plenitude. The terminally ill men who inhabit this prison were formerly “atletas eurítmicos y altivos como arqueros, discóbolos o lanzadores de jabalina, a los que envolvía el sol recio del archipiélago” (17). Making reference to sports that had a pivotal importance in Greek civilization, this passage asserts the classical beauty and statuesque strength of all those men who have fallen in disgrace. Beauty, stamina and health are impossible to be regained. Cosmólogo, a character-narrator, is aware of this loss and the sour reality of human fragility. For him, the human body is no more than a “trash heap,” “a bag of farts and excrement” (96). However, for the diseased, the body is still relevant as the central cause of their woes and hopes. In the *End of Temporality*, Fredric Jameson states: “it seems clear enough that when you have nothing left but your temporal present, it follows that you have nothing left but your own

body” (cited in Freeman 11). His analysis of body and time contributes to the understanding of immediacy in the life of people living with AIDS back in the initial stages of the epidemic. Those men afflicted with the illness exist in a present marked by an unrelenting and fateful destruction. There is no future when the annihilation of corporality is foretold. In this literary work, characters worry over the management of their bodies. There is eagerness to restore health and beauty, but it soon proves to be futile. The “jóvenes/ancianos” are obsessed over their weight, “la obsesión del peso, el pánico a descarnar en vida, víctimas de esa irreversible fusión muscular cuya etiología es un enigma: el mal en sí mismo, o los paliativos o placebos con que trata de retardarse su progresión” (74). The sculptural splendor of Greek archers, javelin and discus throwers suddenly transforms into the haunting loneliness and skeletal feebleness of Giacometti’s male statues. To characterize the drama of the first years of AIDS, Sarduy turns to the arts. The scrawny nakedness of Giacometti’s sculptures not only resemble the weakened bodies of the epidemic, but also the sadness and solitude of defeat in modernity: “detestan, los que las conocen, las figuras filiformes y caquíticas de Giacometti, anunciadoras, sin que el maestro tuviera la menor sospecha, de ese hombre de su mañana que es el de nuestro hoy: avanzan, hueso y pellejo, ahuyentadas por el vacío” (75).

Amidst the anonymity of the reclusive men wandering through the sanatorium, a feminine character stands out for her extravagance and youthful demeanor despite old age. Siempre viva, an aristocratic woman, moves to the isolated home of the diseased. She refuses to die alone. Fond of luxury and comfort, she brings her refined furniture, cosmetics and collection of *Harper’s Bazaar* magazines. Siempre viva represents the decline of the exuberant potential of Sarduy’s neobaroque project. Despite her decision to disappear into oblivion, she incarnates an ideal of excess and opulence. Her daily life is a saturation of styles, colors, and gaudy ostentation. Her wardrobe is

eclectic combination of styles and colors, “trajes con galones de oro, turbantes de lentejuelas concéntricas que miraban como ocelos, sarís de seda. Los exhibía en un desfile de moda imperceptible a fuerza de repetición, entre aparatos ortopédicos, estetoscopios, cánulas de lavado y jeringuillas sucias” (34). Despite her flowery speech, and her glamorous life experiences, Siempreviva starts feeling hopeless in the colonial house. She sells her luxurious outfits and costume jewelry feeling “desahuciada, abandonada, postergada y presta a desaparecer” (25). However, this changes when she is unexpectedly visited by Caballo. Caballo,³⁵ a strong and sensuous male nurse with equine corpulence, arrives to take care of the old lady. Because of her sudden infatuation with the male nurse, Siempreviva wants to regain her former beauty, the possibility of recovering the glistening luster of the baroque pearl. Nevertheless, this attempt at rejuvenation fails, and disappointment ensues. She loses her opportunity of reliving a glamorous past next to the hot-blooded horse. In contrast to Siempreviva’s vivaciousness, the cosmologist, a reflection of Sarduy’s final life stages before his death to AIDS, displays a stern outlook on life. With similarities to the highly autobiographical nature of an important part of HIV/AIDS writing in Latin America, the cosmologist writes a diary to reflect on his fatal illness and the inevitable end of his life. His “squirmy scribbles” reveal uneasiness and defeat: “Perdí. Aposté al ser humano. Creí que en él había una parte de Dios. Hoy me encuentro enfermo y solo. Al menos, algo cierto habrá quedado de todo esto: la desilusión” (162). Sarduy’s neobaroque verbal exuberance that generates passion and life changes in much of his well-crafted writing changes into a lifeless

³⁵ Caballo is a direct literary reference to Rafael Arévalo Martínez’s short story “El hombre que parecía un caballo”. Sarduy used the title of this story to name his fourth chapter in *Pájaros de la playa*. Caballo is described in similar terms to “el señor de Aretal”. In addition, Goytisolo’s *Las virtudes del pájaro solitario* (1988) was a source of inspiration for the development of *Pájaros*. In Jill Levine’s and Linda Maier “Translators’ Afterword,” there is detailed commentary on Sarduy’s literary criticism of *Las virtudes* in “El texto devorador,” and the dialogues that arise with the creation of his last novel.

enumeration of the complex medical treatments to combat opportunistic AIDS infections. The cosmologist goes over his routine: “he aquí, el ‘menú’ de cada día: en los pies, Fongamil, entre los dedos, y Diprosone, en la planta; en la rodilla, penicilina; en el testículo, Borysterol. Los tazones diferentes . . . aportan Viskén, Nepresol, Depakine, Malocide, Adiazine, Lederfoline, Retrovir (AZT) o en su lugar Videx (DDI), Immovane. . . Además Cortancyl —en ayunas—, Zovirak, Diffuk y, si es preciso, Atarax” (157). The use of antifungals, antibiotics, antiretrovirals, and even antihistamines becomes an unwanted daily occurrence in a moment when it is best to “precipitar la restitución de la vida; escoger el lugar y el modo para devolverla sin menor agradecimiento, sin el menor teatro” (113). In his analysis of *Pájaros*, Sergio Villalobos Ruminott discusses the pessimistic resignation that pervades all aspects of the novel. He argues:

los fragmentos reunidos en los diarios del cosmólogo, dotan a la narración de una cierta desazón, de una cierta *pasividad radical* que puede ser equiparada al desasosiego...[la situación del cosmólogo] es la sentencia de muerte anticipada que señala, sin equivocación, la fecha precisa del deceso. Se trata de una administración de la muerte en la que se suspende su condición inanticipable. En ese sentido, habitamos el acontecimiento del fin del acontecimiento. (234)

In Sarduy’s literary project, the body is explored to its limits. It is a malleable organism that can be transformed and affected by other bodies and their manifestations of desire. The body is inscribed in the text, and changes in its contact with a linguistic saturation of images and colors that hinders the possibility of a single meaning. In his programmatic texts on the neobaroque, Sarduy describes this process as a “proliferation”:

otro mecanismo de la artificialización del barroco es el que consiste en obliterar el significante de un significado dado pero no reemplazándolo por otro, por distante

que éste se encuentre del primero, sino por una cadena de significantes que regresa metonímicamente y que termina circunscribiéndolo al significante ausente, trazando una órbita alrededor de él, órbita de cuya lectura, que podríamos llamar radial, podemos inferirlo. (1389)

This operation resonates in Sarduy's depiction of the epidemic in *Pájaros de la playa*. In the novel, there is never a direct reference to HIV/AIDS. The condition is repeatedly metaphorized. The reader needs to elucidate a number of symbols and hints to know a central element in the text's storyline. Disease as representation is then constantly evolving and leaving traces in the body that are intimate and, in the case of the first years of AIDS, traumatic and shameful. Proliferation does not lead, however, to Sarduy's traditional masterful display of linguistic exploration and embellishment. In his experience of personal mourning, the cosmologist recognizes that his masterful command of writing has started to falter. Writing is now "[un] borrón, tachonazo incongruente, sanguinaria ballista. Las letras ameboides surgen solas, sin mano que pueda moderar su aceitosa expansión" (135). The lack of energy, the painful realization of death weakens the vitality of language and the potential transformation of desire and self-indulgence. Rafael José Díaz analyzes this final stage in Sarduy's aesthetics:

La obra de Sarduy evoluciona hacia una mostración muda de ciertos elementos estigmatizados como impronunciables. El vacío, la enfermedad, la muerte, van a ir ocupando los intersticios de la dicción, como en la proliferación inversa a la del mundo fenoménico considerada un rasgo definidor de Sarduy. . . . Hay, en efecto, un reverso negativo, una inmovilidad que se opone a la fiesta del lenguaje y al *imperio de los sentidos*. (87-88)

One of most relevant examples of proliferation in the novel can be found in chapter six.

Through imagery, Sarduy depicts the centrality of passion and the body in his literary legacy. In a moment of loneliness, Siempreviva fantasizes about the sensual nature of her male nurse when he is away:

Siempreviva sentía muy cerca su cuerpo de centauro al revés, sus pies tendinosos prestos a arquearse para lanzar una imposible jabalina, su torso de cobre pulido, el peso de su sexo. Luego lo imaginó envuelto en un círculo de animales que se devoraban los unos a otros. Un caimán verdoso y voraz se atragantaba con una cobra, que ondulaba en las manos de un dios indio, ésta se trabajaba a un colibrí ingravido en el aire sobre un terrón de azúcar, y el pájaro a su vez, atraído por la fosforescencia, ingurgitaba de un solo bocado a un cocuyo, El caballo centraba la deglución en cadena de los animales-emblemas: un círculo de ojos saltones, garras, plumas y escamas. (62)

This amalgamation of animals devouring each other has an underlying significance in the recognition of *Pájaros* as the last piece of a creative circle. This violent depredation is an allusion to Sarduy's novelistic works: *Cobra* (1972), (the Indian god a reference) to *Maitreya* (1978), *Colibrí* (1984), *Cocuyo* (1990) and finally *Pájaros de la playa* (1992). Interestingly, Siempreviva's passion is equated with a furious cycle of destruction. Passion consumes itself in a moment in which Sarduy's physical state also withers. In his essay on George Bataille's work on eroticism, Sarduy describes the phenomenon as a "fusión de las antípodas... *mientras más esas imágenes me aterrorizan, más gozo en verlas*" (1127). These words resonate in the imagery of the previous passage that demonstrate a capacity for horror and violence as well as for sensuality and pleasure. The force of sex does not generate life, but death. In a 1976 interview with Spanish journalist Joaquín Soler Serrano, Sarduy expressed how erotic passion permeated most of his oeuvre. For

the Cuban, his writing was not a mere cerebral pursuit but a corporeal sensuous experience. Sex is a dynamo that fuels his creative ability as a writer. He explains: “yo no escribo con la cabeza, yo escribo con la totalidad del cuerpo, y en definitiva lo que pasa a la mano es una energía que viene del sexo...Yo no invito al lector a que me lea, sino a que haga el amor conmigo. Yo escribo enajenado por la furia de la imagen” (n.p.). Two decades later, *Pájaros* constitutes an exhaustion of that artistic model. Siempreviva’s libidinous nature, the colorful writing describing her opulent persona, and her erotic potentiality is interrupted by cosmologist who bitterly “sospecha oscuramente que no le espera porvenir alguno, ni siquiera ése, miserable, de asistir a los hechos, de estar presente, aunque mudo, a su inextricable sucesión” (131).

Caimán and Caballo disrupt the life of the patients in the old colonial mansion. Siempreviva enters into a close relationship with Caimán due to his alleged ability to cure and rejuvenate with the use of plants and herbs. In fact, their presence in the *sanatorio* is fundamental to better comprehend the crisis of the medical apparatus in the novel. As has been previously stated, *Pájaros* is a text in which a prison-like discipline is exercised. The dispirited inhabitants in the pentagon-shaped hospital are completely isolated to avoid the infection of the social community that surrounds them. This segregation is doubly enforced: they live their last days in the isolation of an island, and they are unable to join the social life beyond the walls that enclose them. Despite the advancements of medicine in the treatment of HIV/AIDS, the medical discourse has been criticized for its incapacity both to treat patients in a dignified way and to halt the social stigma that many people living with HIV/AIDS endure.

In the last years of Sarduy’s life, the role of a large part of the medical community was to control, manage, and isolate the source of infection. In his book *The Birth of the Clinic: An Archaeology of Medical Perception*, Michel Foucault explains that the figure of the modern

physician came to replace the role of the medieval cleric/priest as a position of social authority that “saves” bodies and not souls. The physician and his medical gaze constitute the establishment of a genealogy of knowledge about the body that considers itself separated from the patient’s identity. Foucault questions the effectiveness of this medical apparatus and probes: “How can the free gaze that medicine, and, through it, the government, must turn upon the citizens be equipped and competent without being embroiled in the esotericism of knowledge and the rigidity of social privilege?” (45). Despite all shortcomings and fragile points in the history of medicine, the clinic and its enabling of a “constant gaze upon the patient . . . allowed medicine not to disappear entirely with each new speculation, but to preserve itself, to assume little by little the figure of a truth that is definitive” (55). This authoritative point of view considers medical progress as uncontested in its methods to save lives and find cures. In fact, different from other “health therapies,” Western medicine has developed under the premises of scientific rigor and supporting evidence. In *Pájaros*, this vision is represented by the medical personnel of the “clinic” that provides care to the terminally ill. The latter are at complete mercy of these medical personnel who try to keep them alive in a moment when traditional medicine does not have the answers to control the epidemic.

The role of traditional medicine is then not to cure, but to provide palliative care. In this absence of an effective medical therapy, “los debilitados por el mal padecían las intransigentes modas médicas” (55). Chinese cucumber, homeopathy, dosages of vitamin C are some of the remedies to try to stop the progression of the disease. Amidst this health crisis, alternative medicine appears as a contender to destabilize the hegemonic space of traditional medicine. Caimán arrives at the sanatorium to implement his “terrorismo botánico” that provides hope to those that have lost it. The herbalist is able to transform “en una descocada fábrica verde aquel hasta entonces rutinario hospital” (99). Although the takeover is initially a noble pursuit to cure, the gradual depletion of

“green” medical resources leads to a state of “*terrorismo botánico*, en la impostura fitotécnica total” (100). Rejected by the hospital caregivers, Caimán and Caballo deny treatment—traditional or experimental—to all those who seem to be skeptical of their therapies. Their detractors are soon considered “retógrados” and “enganchados a la química” (100). As an ardent believer in this alternative care, Siempreviva receives a wide array of treatments to reverse her aging. During her lengthy sessions with Caimán, the herbalist moves away from the *suite imperial* “todo lo que le recordara a la descreditada medicina tradicional, tóxica y generadora de más dolencias de las que pretendía sanar”³⁶ (118). Concerned about this sudden insurgency and establishment of a naturalist medical utopia, an astronomer, representative of the world of science, urges to stop the hospital surrender to the insanity of an herbalist (102). His adversary, however, is not the cause of Caimán’s failure to extend his shamanic methods to all corners of the hospital. An abrupt fight between Caballo and Caimán over Siempreviva’s romantic attention neutralizes both men after being severely wounded. The nurses Auxilio and Socorro³⁷ take care of the enfeebled men who never fully recover to continue developing their green medicine.

Even though Siempreviva is suddenly looking younger, her mental health starts to deteriorate after the absence of her healers. In fact, despite her recently recovered youth, the woman cannot see anything but a wrinkled body full of imperfections. In the middle of the night, Siempreviva, feeling old and defeated, abandons the colonial house to an unknown fate. The reclusive patients that gather to feel the sunlight under the linden trees notice the departure of the woman and her healers. In their last days, they wonder what will remain of the red-haired woman in their failing memories. They mention a life wherein the essential was the accessory.

³⁶ It is important to note that in the first stages of the AIDS epidemic most medications available (especially AZT) would be ineffective. They produced a wide array of adverse side effects for the patients.

³⁷ These nurses are also present in Severo Sarduy 1967 novel *De dónde son los cantantes*.

Siempreviva is remembered as a dress that “brilla un instante y será, acto seguido, inútil, borroso, ridículo incluso. Un desecho: como el cuerpo que entregamos a la muerte. Los trajes, como las mariposas, deslumbran y caen” (198-199). The voice of the caged men is essential, for it reveals the triumph of death over all elements of life in *Pájaros*. Siempreviva’s passionate nature yields to the cosmologist’s philosophical nihilism, to his desperate final cry to narrate his experience with death. As Leonor and Justo Ulloa state, “la novela toda emite un grito de desesperación ante el paulatino deterioro corporal. . . . La vida per se proyecta como un carnaval irrisorio que tarde o temprano culminará en un pudridero” (1642). In Sarduy’s novel, the intricate narrative detailing Siempreviva’s humorous eccentricities alternates with the painful testimony of the last days of the cosmologist. In an insightful passage, the narrator (possibly Sarduy himself) informs readers that he would probably reveal Siempreviva’s mysterious fate “Si la Pelona, siempre presta a golpear, [le] concede una tregua” (213). Soon enough, this wish is truncated, and the reader has access to the last words of the cosmologist’s diary: a group of dispersed verses, a final goodbye to life. Sarduy fictionalizes a progressive worsening that would lead to his death and thus to the termination of his writing. *Pájaros de la playa* is a novel that ends abruptly. The last chapter is composed of a fragmented cluster of poems linked to themes of mortality that inform the reader of the physical disappearance of the narrator:

Cerrar los ojos
a la luz, a toda imagen posible.
Observar en silencio
sin aprobación o condena
cómo se desvanecen
asentimientos, recuerdos

representaciones mentales,
oscuridades, afectos. (223)

Different from Bohórquez's glimpses of hope in *Poesida* (we need to remember that the Mexican poet thinks that the *lost paradise* would be someday restored), Sarduy's narrator is skeptical of any possibility of regeneration or futurity: "[el] presente es el dolor del cuerpo, la imposibilidad de marginarlo, de olvidarlo en un rincón oscuro como un mueble destartado, como un viejo instrumento cuyo disfrute agotamos. . . . el futuro, por definición, no existe" (97).

Heirs to a rich tradition of homoerotic writing in Latin America, Abigael Bohórquez and Severo Sarduy share a sophisticated ability to master the complexities of literary writing and experiment with different classical traditions. In the history of contemporary gay literature in the region, the neo-baroque has caught the attention of important authors such as Néstor Perlongher, Osvaldo Lamborghini and Pedro Lemebel. There could be many reasons for this *queer* affinity of the style: for instance, the potential of these aesthetics to represent lavish pleasures, kitsch opulence and camp theatricality, all aspects historically related to gay culture. In the case of Sarduy and Bohórquez, both artists embrace a neobaroque style of verbal excess, erotism, and transgression. Sarduy's devotion to the neo-baroque can be traced even in his early interviews. In 1976, in a conversation with Jean Michel Fossey, Sarduy conceives the neo-baroque as a "máquina barroca revolucionaria que impide a la sociedad represiva su propósito (apenas) oculto: capitalizar bienes y cuerpos" (19). Many of Sarduy's novels are complex experiments that depict desiring bodies, ardent pleasures and constant transformations. In *Cobra*, a transvestite, who hates his big feet, yearns for his complete metamorphosis. Cobra³⁸ is able to inhabit many different bodies,

³⁸ Alejandro Varderí has noted that "Cobra deviene un personaje dable de transformar su vida en una obra de arte y objeto de placer, al interior de una ciudad fantástica constituida por alusiones y citas tanto a las ciudades clásicas como a las megalópolis contemporáneas" (n.p).

identities and temporalities. In *Colibrí*, an attractive gay dancer is the object of desire of all people around him in *la casona* (a dingy gay nightclub). There is a constant pursue to possess his body that, like one of the hummingbirds, is mostly unattainable. However, this very inability to satisfy the fantasy of possession makes possible an ever-growing articulation of desire in the text. In the case of Bohórquez, his genius derives from a capacity to refashion classical literary traditions. He adopts and queers high genres such as the pastoral and the elegy, all this in a refined neo-baroque language. The disruption of the HIV/AIDS epidemic creates a marked transmutation in both authors' literary projects. In the work of the Sonoran poet, the plenitude of the male body, constantly desired, possessed and admired, is suddenly remembered with nostalgia and solidarity. Bohórquez's poetic talent, as sharp as in his previous poetry books, is now focused on defying silence and document the emotional injury his community is experiencing. For Sarduy, the epidemic is a profound reconfiguration of his neo-baroque project. Unlike Bohórquez, *Pájaros de la playa* is a more hermetic text. The visibilization of AIDS is not directly stated, but implied in its various metaphors. Although there are feelings of nostalgia for the past, solidarity is almost inexistent among all different characters. In a horizon of decay and impermanence, the novel describes an environment of human repression (medical, pharmacological, social) that is unescapable at least for the men who dwell in the pentagon (the old colonial house). Although both narratives make an affective turn to themes rooted in the "classic" conception of the Baroque (disillusionment, pessimism, ephemerality), Bohórquez anticipates an end to this age of tragedy to recover those days "donde fu[eron].../ presuntos dueños del amor intemporal" (40). A marginalized poet in the Mexican cultural circles, Bohórquez didn't have an easy life. Until recently, his oeuvre was seldom recognized or included in the official canon of his country. One of the poet's major achievements is not only his mastery of prestigious literary forms, but his

capacity to transform them and create a truly hybrid aesthetic that gives a voice to difference. His inclusion of homoerotic themes in his literary writing was a brave decision that certainly cost him detractors and enemies. However, Bohórquez's poetic project is one of vitality and poignancy. He is able to explore social themes without losing his literary sophistication.

Bohórquez's and Sarduy's works re-elaborate and queer formal traditions to create a queer neobaroque aesthetic that provides a deeper understanding of the modern condition of the HIV/AIDS epidemic. As Bolívar Echeverría states in his analysis of queerness and the neobaroque: "si consideramos el comportamiento [de lo queer y lo barroco] vemos que implica una incomodidad y un desacato radicales frente a la legalidad y el canon establecidos. . . . Se desenvuelve en una transgresión sistemática que anula esa legalidad y ese canon; pero que lo hace paradójicamente para asumirlos o respetarlos a su manera" (6).

4.0 INTIMACY, MEMORY AND REVELATION: HIV/AIDS REPRESENTATIONS IN NÉSTOR PERLONGHER'S AND CAIO FERNANDO ABREU'S EPISTOLARY WRITING

The intimacy of epistolary writing allows authors to reveal their desires, fears and uttermost secrets. Nora Bouvet, in her exploration of this modality of communication, explains that writing letters is a relationship between ghosts—those of the sender and the addressee—that seek to communicate despite distance and solitude (28). Love confessions, revealed secrets and descriptions of everyday life in the form of letters are able to transmit a variety of messages and feelings. In his analysis of queer writing in Spanish literature, Patrick Paul Garlinger explains that “as an autobiographical form of writing, letters are considered a potent tool for examining the evolution of subjectivity and sexuality, texts whose intimate and confidential nature ostensibly provides a unique insight into the lives of the authors” (xvi). In fact, celebrated figures in the history of literature and the arts (e.g. Kafka, Goethe, Emily Dickinson and Virginia Woolf) exchanged letter correspondence with writers, family members and lovers during their lifetimes. Until the nineteenth century, letter writing was an activity among the literate class that was expected to follow rigid norms of decorum and formality. However, an examination of epistolary archives from the past shows many instances of eccentric writing in which taboo topics—such as queer sexuality—are openly discussed thanks to the privacy that the closed envelope offers.³⁹

³⁹ Some examples of this type of epistolary exchanges are Oscar Wilde's letters to his lover Lord Alfred “Bosie” Douglas and Virginia Woolf's exchanges with Vita Sackville-West.

This chapter explores the correspondence of two authors of a more recent time period—the end of the twentieth century in Latin America, which is a time marked by the steep decline of epistolary writing due to technological advances such as the Internet. Néstor Perlongher and Caio Fernando Abreu—avid letter writers—lived at the edge of this transition, and their epistolary archives have been published in recent years. For instance, Italo Moriconi edited a volume of Abreu’s letters in Editora Aeroplano in 2006. In the case of Néstor Perlongher, Adrián Cangi and Reynaldo Jiménez published *Papeles insumisos* (2004) in Santiago Arcos Editor, a remarkable compilation of lesser-known documents by Perlongher that contain the letters addressed to his intimate friend Sara Torres from 1981 to 1992. Most recently, Cecilia Palmeiro edited a new volume of letters entitled *Néstor Perlongher, Correspondencia* (2016) that was published by Argentine publishing house Mansalva. The editorial and critical interest in the private correspondence of both authors is understandable when considering their posthumous status as exemplary figures of the intersection of queer sexualities and literature. In the context of this chapter, Perlongher’s and Abreu’s letters constitute a valuable resource to delve into two different modalities of HIV/AIDS writing in Latin America. Despite being authors who followed different paths to develop their literary interests, Perlongher and Abreu left for posterity an archive that provides a comprehensive understanding of the social, medical and political aspects of living with HIV/AIDS in South America. Both writers lived during an important part of their careers in São Paulo—Perlongher as an Argentine exile who established ties with the Brazilian public university⁴⁰—and Abreu, a talented, well-traveled, and ambitious writer and journalist who moved away from the restrictive reality of his small hometown in Rio Grande do Sul. Reading through

⁴⁰ Perlongher studied anthropology at the University of Campinas. He also taught courses in this institution during his years of residence in Brazil.

these affective archives, there is evidence that Perlongher and Abreu had contrasting systems of writing about HIV/AIDS. After his untimely diagnosis, Perlongher—known for his dedicated political activism and his conviction that a revolution was not possible without sex—hesitates about some of these early ideals and seeks refuge in the syncretic religion of Santo Daime.⁴¹ In one of his letters, Perlongher writes, “ahora que me veo en la proximidad de la muerte, me cuestiono todo lo que pensaba y escribía y me aferro a la religión del Santo Daime” (*Correspondencia* 132).⁴² Adrian Cangi, in his analysis of Perlongher’s writing, explains that “el punto cúlmine de la enfermedad supone un fuerte viraje y olvido de la deriva libidinal, para desarrollar el que sería su proyecto más ambicioso: el viaje extático . . . su metamorfosis consiste en la trascendencia del cuerpo singular y el abandono de la deriva erótica” (17-18). For instance, Perlongher’s early concerns with physicality and eroticism (i.e. his anthropological research on male prostitution in São Paulo) mature, at least in his letter writing and poetry, into a deep interest in the mystical to reach a superior state of ecstasy through *Santo Daime*. However, as it is later revealed in his epistolary exchanges, this mystical conception is in direct conflict with the advance of the viral disease within his body. The author and his writing retreat into a deep state of individuality and intimate confession that departs from his earlier political radicalism.⁴³ On the

⁴¹ Brad Epps has defined Perlongher’s early radicalism as an “ethics of promiscuity.” In *Un militante del deseo* (a militant of desire), the Argentine writer focuses many of his early political writings in the intersection of desire and politics. However, Adrian Cangi states that this stage undergoes a transformation: “Del imaginario de Genet al de Santa Teresa, Perlongher produce un cambio en la disposición del cuerpo, que va del terreno de la orgía como pulsión voluptuosa y festividad erótico-sensorial al de los brebajes para celebrar la nada, desde la poesía como liturgia cantada” (18).

⁴² Founded in 1930 by Mestre Ireneu (Raimundo Ireneu Serra) in the western state of Acre, Santo Daime is a syncretic religion that mixes elements of Catholicism, Afro-Brazilian traditions (Candomblé), and Amazonian Shamanism, among others. Their members promote the consumption of Ayahuasca in their rituals to create states of trance and mystic revelation.

⁴³ Interested in the configurations of the HIV/AIDS epidemic since its very beginnings, Perlongher publishes a book related to the topic entitled *El fantasma del SIDA* (1988). The book was originally published in Portuguese under the title *O que é AIDS* (1987). His book starts: “Un fantasma recorre los lechos, los flirts, los callejeos: el fantasma del SIDA. La sola mención de la fatídica sigla . . . basta para provocar una mezcla morbosa de

other hand, Caio Fernando Abreu, a writer known for the metaphorization of the virus in his literary writing, turns to disclosure when he is diagnosed in 1994. As one of the first Brazilian writers to address the epidemic, in the last years of his life, Abreu reaches a recognizable status as a public figure living with HIV: “together with Brazilian pop star Cazuza, and writer and political activist Herbert Daniel, Abreu was one of the earliest and most outspoken cultural figures to address the general public in Brazil concerning the AIDS experience” (Fernando Arenas 238). Maybe the most important public disclosure of his HIV positive status took place in his three chronicles entitled “Cartas para além dos muros” published in *O Estado de São Paulo* between August and September of 1994. Despite their differences in dealing with the HIV diagnosis in their writing, Perlongher’s and Abreu’s correspondence gives intimate portraits of the joys of friendship, the fears of solitude and the recognition of mortality. Reading their epistolary archive reveals a myriad of affective relationships, including those rooted in queer attachments. This is especially powerful in the case of Abreu who feels compelled to memorialize a community of gay men (e.g. friends, lovers, writers and artists) that had already succumbed to the virus.

curiosidad y miedo” (5). In this witty appropriation of the Marxist Manifesto, Perlongher compares the epidemic as a specter that haunts the urban cartographies of desire.

4.1 ECSTASY, *DAIME* AND AIDS: NÉSTOR PERLONGHER'S CORRESPONDENCE

Me llaman el padre del movimiento gay
argentino cuando todos saben que soy la tía.

Néstor Perlongher, Carta a Sara Torres

En saudades extensas anegada, rauda en
noche de domingo (en casa, siempre en
casa) invoco el afecto del recuerdo.

Néstor Perlongher, *Correspondencia*

Néstor Perlongher is a key figure to understand the configurations of early gay activism in Latin America. A non-conformist, the Argentine writer defied notions of normalcy and morality in moments of political turmoil in his native Argentina and later in his “deterritorialization” in Brazil. Perlongher’s personal correspondence sheds light on many of the challenges he faced during his life: “la anacrónica moralina de las dictaduras y su penalización de toda disidencia, la normalización y estabilización de la identidad gay en el contexto de las transiciones democráticas, y la crisis del Sida” (Palmeiro 13).⁴⁴ Although this personal archive covers different stages of life—his early activism in Argentina, his relocation to São Paulo, the onset of the disease in Paris,

⁴⁴ Besides his themes on sexuality, Perlongher discusses Argentine and Brazilian politics in his epistolary exchanges. In a letter dated in May 1982, Perlongher is quite critical of the imminent war of Argentina with the United Kingdom over the Falkland Islands (Islas Malvinas). He points out: “los milicos no pueden soportar que una parte del territorio del Estado no est[é] sembrada de cadáveres . . . la guerra es el deporte masculino (cada muerto es un gol!). Describing here the hegemonic masculine values of the dictatorship, the war is compared to the most popular sport in Argentina: soccer. In other political discussions, Perlongher is constantly writing about the diverse feminist groups in that he has joined in Argentina and Brazil: SOS Mulher (a pioneering feminist Brazilian group), SOMOS (the main organization of gay liberation in São Paulo), Asociación Civil Feminista (an organization based in Buenos Aires), and his FLH (Frente de Liberación Homosexual, one of the first gay organizations in Latin American history, founded in Buenos Aires in 1971). He also mentions all the different feminist publications available in Buenos Aires and São Paulo (*Chanaconhãna*, *Mulherio*, *Alfonsina*, *Persona*) and the ideological disputes within the groups.

and the return to the Brazilian metropolis where he died in 1992—this chapter explores the author’s epistolary writing related to his experience with HIV/AIDS. During his untimely diagnosis in France in 1990, he writes constantly to his intimate friends Sara Torres and Beba Eguía. This epistolary exchange continued until the end of his life.

Written in his opulent *neobarroso* style, Perlongher sends many letters to his dear friend Sara. She is not only a *confidant*, but also a familiar bond to the reality of Argentina. His letter writing is campy, and in some letters, Perlongher’s voice assumes the alter ego of a woman named Rosa L. de Grossman. He signs his letter closings as Rosa, Rose and Rose La Lujanera, and addresses Sara as Sarette, Soul Sister, compatriota, Ginger and Diosa Sariana (Goddess Sara) to express his endearment to his beloved friend. Néstor tells her all: his latest literary and academic projects, his everyday life in São Paulo, his latest romantic affairs, and his innermost fears and hopes regarding his HIV infection. As readers, we do not have access to Sara’s responses, but we can infer that those were not as often as Perlongher wanted them. In December 1984, Nestor writes, “Nena y a vos cómo te van las cosas? Sé que esperar que me escribas es tan insensato como mi necesidad de quedar embarazada para obtener la ciudadanía brasileña y poder llamarme Janira dos Santos y haber nacido en Caraguatetubapeipiringa” (72). Through the years, he demands Sara write back and more often, to reciprocate his affection and confidence. As Bouvet states, “la práctica epistolar amorosa [in this case based on friendship] se reduce al verbo intransitivo ‘escribirse’ o ‘cartearse’ ; expresiones como ‘te escribo’ y ‘escribime’ . . . introducen a los interlocutores en un universo discursivo que pone a prueba el poder dialógico del lenguaje” (94). Perlongher’s letter writing had many interlocutors over the years: Osvaldo Baigorria, Tamara

Kamenszain, Roberto Echavarren and even Cuban writer Reinaldo Arenas.⁴⁵ But there is no doubt that the most intimate revelations of Perlongher's psyche are found in his epistolary exchanges with Sara Torres and Beba Eguía. Some specific aspects stand out in these communications, such as a rather complicated relationship with the traditional medical discourse on HIV/AIDS, a clear positionality of difference and foreignness in the metropole (Perlongher's stay in Paris), and a fixation on the description of the flesh and its transformation with the advance of the illness.

In November 1989—thanks to a scholarship—Perlongher moves to Paris to study a doctorate of anthropology under the guidance of Michel Maffesoli. He leaves his city of São Paulo, his home university, and his dear lover “Luizmar.” In February 1990, he soon writes to Sara confessing the bad news of his recent HIV diagnosis:

Sara del Alma. Divina hermana: Qué situación! Qué lejos estamos! Adónde me ha llevado esta desterritorialización insensata. En el 1er y único llamado te largo esta noticia terrible. La situación es la siguiente. Todo comenzó con unas manchas blancas en la lengua. Era la temible candida (un hongo típico del virus). Fui a un hospital donde me hicieron el test y dio positivo. El 5 de febrero Luizmar llegó y me está ayudando mucho. Pero la depresión corre por abajo. En un típico acto de

⁴⁵ Palmeiro's edition of Perlongher's correspondence includes two interesting letters that reveal an affable epistolary exchange between Néstor Perlongher and Reinaldo Arenas. Perlongher writes to the Cuban author: “Te admiro como espejo que se unta . . . siento en tus textos cierta disolución de lo social, como si los dicharacheros manierismos migrasen, sin perder el nacarado translúcido (Caribe platinado, un matiz de esmalte para zarpes?) . . . ¿Porqué no nos ponemos de acuerdo (tenemos que vernos, que conocernos, que curtirnos) a organizar un periplo tuyo por el Brasil? Casa donde quedarte tienes (la casa de la hada de Jorge Schwartz)” (76-77). In Arenas's response to a different letter, probably lost, the Cuban writer also reciprocates Perlongher's camaraderie: “Tenme al tanto de todo por allá, sabes que aquí tienes gente que te idolatra, yo entre ellos. Así que espero nos demos un baño de saopaulismo y sardanapalesco en el bello Brasil. . . . Lo de la ‘falaz Retamar’ es excelente. Ella es un policía cubano que traicionó a sus amigos más íntimos y los que la ayudaron al principio, desde Lezama hasta el pipisgallo [. . .] Una bruja. Pero ya está liquidada, por fea y mediocre” (77-78). In perspective, Arenas's invective against Roberto Fernández Retamar is very similar to his critiques of other public Cuban figures in *Antes que anochezca* (*Before Night Falls*).

boicot destruí la máquina de escribir....Todo entre brumas: un mar de culpas y arrepentimientos. Muy confuso. (131)

It is evident that the news of the disease was devastating for Néstor in a time when the diagnosis of the illness was equated with certain death. Since the onset of his symptoms in France, Perlongher is specific about one aspect: he wants to keep his condition a private matter. He is emphatic to Sara: “Nena, te pido por favor que no comentes nada porque quiero evitar que se cree una atmósfera negativa que parezca y llame a la catástrofe” (131).⁴⁶ He is also wary about the use of allopathic medicine to treat HIV. In the development of Perlongher’s political writing, there is a denunciation of the power of medicalization to control queer sexual conducts: “Pienso que hay un proyecto abierto para modificar comportamientos. Hay una medicalización de la existencia y hay una medicalización de la sexualidad. Esta medicalización implica una discusión del valor de la vida. La vida es medida por su extensión, por la cantidad de años vividos aún si son en agonía, y no por un criterio, un valor intensivo” (*Papeles insumisos* 362). This opposition to traditional medicine had also its roots in Nestor’s personal discovery of *Santo Daime* in Brazil. In his communication with his friend Sara, there are vivid anthropological-like accounts of his travels to Acre to immerse himself in the world of this religion. *Santo Daime* is a syncretic faith founded in the Brazilian state of Acre with teachings centered on the consumption of ayahuasca, a brew made of the yagé plant with hallucinogenic properties leading to a trance-like and spiritual ecstasy known as *mirações*. Perlongher’s interest in this religious group is documented long before the

⁴⁶ This is not the only instance in which Perlongher seems worried about the revelation of his HIV positive diagnosis to people outside his circle. He writes to Beba Eguía: “Veo que la noticia de mi enfermedad se ha expandido más de lo debido. Me dicen que en la Argentina todo el mundo lo sabe. Un horror. Cómo enfrentar eso? Me muero de miedo” (167). In October 1990, he writes to Sara Torres: “Deseo preguntarte y que me respondas con sinceridad: cuál es la difusión de mi estado de salud? Hay mucha gente enterada? No me gustaría que se esparciese la noticia pero si se ha desparramado mejor saberlo” (166).

onset of the disease. For instance, he describes to Sara one of his excursions to visit members of Daime in 1989: “Tras cinco o seis horas por el río enorme, se entra en un arroyo, el Igrapé Mapía . . . son campesinos metafísicos todo el tiempo hablando de la luz, el cosmos, las estrellas, dios, en fin, filosofías teológicas. Y todos reciben himnos por inspiración divina, poetas muchos de ellos analfabetos, eso es impresionante” (125). Influenced by his involvement in the religion’s teachings, Perlongher initially refuses to take the AZT medication prescribed by his doctors in France. In his epistolary confession to Beba Eguía, he explains, “Mi entrevista con la médica que me trata no fue muy tranquilizadora que digamos... Al mismo tiempo me quiero volver (lo he decidido haciendo el pedido de un pasaje) para hacer un trabajo de cura en el Santo Daime y también ir con vos a ver la Padre Mario al Bajo Flores” (133).

Perlongher resists AZT, believing instead that his devotion to Santo Daime would help him with his illness; however, after a rapid advancement of symptoms, he acquiesces and takes the drug. One of his main concerns was the side effects he was feeling in his body. He writes, “Tomo AZT a título preventivo. También me han dado antibióticos. Todo ello me cae como una patada en el estómago y en la conciencia, pues mi resistencia a la medicina alopática es considerable. Ese cansancio ojeroso; no se sabe si es la enfermedad, la depresión o ambas cosas. . . . La sensación de derrumbe” (141). He also comments about the change of his intellectual pursuits in the same letter: “mi cambio de tema [referring to his doctoral research] ha sido demasiado abrupto: de la sexualidad a la religión. De un tema en el que era especialista a otro en el que no sé nada” (141). One can argue that the reality of the disease was transformative in many aspects of his life. In a 2014 television documentary aired in Argentina, Sara Torres comments about this stage of her friend’s life: “la época que más discutimos fue cuando decidió dejar el tratamiento e incorporarse al tema del Santo Daime...ya a esa altura él tenía una cosa mucho más mística que era rara para

mí por su formación marxista. Yo no lo podía entender” (n.p.). Although this analysis does not attempt to rebuke Perlongher’s personal turn to the mystical, current scholarship has argued that this exploration should not be deemed a passive embrace of religious spirituality—at odds with the author’s political and ideological legacy. For instance, Jorge Ignacio Cid Alarcón explains that “Perlongher se acerca al *Daime* no sólo por una curiosidad dogmática, sino más bien porque vio en él una nueva lengua en constante desvanecimiento capaz de reflejar el cuerpo en trance sexual, fronterizo, de enfermedad y místico que se constituye a lo largo de su poética” (379). This can certainly be argued in the aesthetic choices that infuse Perlongher’s penultimate poetry book *Aguas aéreas* (1991). In this work, ecstatic neobaroque language describes the experience of consuming the “sacred” brew of ayahuasca. In a revealing interview with Edward Mac Rae, Perlongher expounds that the liturgical language of *Santo Daime* is a syncretic combination of marginal elements of aboriginal and African cultures. This *caboclo-Amazonian* language is alluring because it echoes the potentiality of Perlongher’s *neobarroso* that, in this case, is created with the muddy waters of both the Amazon and the sacred libation. The writer’s devotion to *Santo Daime* was not, however, devoid of criticism. Perlongher says, “Para mi es difícil mantener la creencia, creer. Y acá viene otro problema: hay toda una moda esotérica, que es muy oportunista, y el Daime en las ciudades entra dentro de esa corriente...quedé muy despersonalizado y excesivamente autocrítico. . . . Creo también que ese viaje a Francia fue muy destructivo” (393).

Perlongher’s period in Paris was a difficult time marked by constant outbursts of desperation and sadness. Luizmar, Sara and Beba Eguía are his immediate network of support. In his correspondence with the two women, he complains of his inability to adapt to Paris. In this European venture, he is confronted with his own radical difference (as a gay man, as a person

living with HIV, and as a Latin American who does not master the local language and culture).⁴⁷ In a letter dated May 1990, he tells Sara: “Sara, amada, entré en terror y llanto, y en el hospital no querían atenderme por falta de turno....El problema es que pocos médicos entienden de SIDA. [Francia] es el paraíso de la más cruel alopátia. Lo cual mi extranjería complica, pues me tratan cual a un fugitivo otomano. Y mi francés sigue pésimo!” (138). In a similar fashion, he communicates to Beba Eguía his disdain for Paris: “Ya no aguanto más estar aquí. Parte considerable de mi depre, la achaco a esta ciudad hostil, donde impera una ética del maltrato y una estética del disimulo” (135). Paris was an epicenter for HIV research in the 80s and 90s; however, Perlongher is highly critical of contemporary French society. He writes a chronicle titled “Nueve meses en Paris.” It is an illuminating text that reveals Perlongher’s opinion on French scholarship and society. He considers French intellectualism as an isolated world of “fiefdoms” unable to dialogue with each other. France is also a place full of racial tensions. Paris is described as an inhospitable city, especially for the Arab diaspora, despite their strong historical connections to France. During this time, Brazil is idealized as a better place to live as it is closer to friends and, most importantly, closer to Argentina.

After his return to Brazil, Perlongher has a rush of professional productivity. He writes poetry and publishes his anthropological thesis *O negócio do michê* in Spanish. In addition, in April 1992, he travels to New York as an invited participant in a poetry symposium organized by Roberto Echavarren at New York University. Just few months before his death, he is awarded a Guggenheim Fellowship thanks to the support of writers: Tamara Kamenszain, Ricardo Piglia and Josefina Ludmer. His correspondence at this stage shows periods of emotional and physical

⁴⁷ In November 1989, Perlongher writes about his inability to adapt to his student life in Paris: “[El] desastre de esta desterritorialización que no resarce castigándonos duramente por el mito de la ciudad eléctrica y luz y pagamos en tristezas saudosas el atroz precio de este mito tan distante y ajeno” (126).

stability that would suddenly be interrupted by intense anxiety and bodily deterioration. In Brazil, he is able to reconnect with the practices of *Santo Daime* and even try new healing methods based on shamanism. In a letter to Sara, he explains his experience: “he hecho este final de semana una experiencia de iniciación chamánica.... Con la ayuda de un tamborcillo, y varias danzas, se entra en un trance leve, durante el cual los más felices vislumbran un túnel subterráneo que da acceso al mundo profundo, de donde se rescatan los animales de poder que nos protegen” (146). But shamanism is not the only experimental practice he sought for the possibilities of healing. In the 90s, most of Perlongher’s epistolary communication with Beba Eguía has references to *El padre Mario*. In one of the editor’s notes, Palmeiro explains that this religious figure was famous for his alleged abilities to heal through his hand’s touch (128). Believers from all over the country went in pilgrimage to his charity foundation in González Catán, province of Buenos Aires, seeking to benefit from his miraculous abilities. On many occasions, he writes to Eguía: “Por favor pedí por mí en tus peregrinaciones al milagrero Padre Mario. Te lo agradezco de alma” (153). In a letter dated September 1991, Perlongher is content due to the stabilization and improvement of his medical condition. He writes:

Gracias a Dios, al Padre Mario y al AZT, estoy bastante bien. No tengo en este momento ninguna infección ni enfermedad oportunista....Mi conteo de células de células T4 (aquellas que el virus invade) subió espectacularmente de 100 a 500 (lo normal es 1000). Yo te juro que estoy optimista y esperanzado como te acordás no lo estaba. Pienso que el Padre Mario me dio una nueva y maravillosa vida. Vamos a ir con mi amiga Beba a verlo todos los viernes a González Catán. (185)

One of the reasons for Perlongher’s renewed enthusiasm has to do with his amalgamation of healing traditions in a moment of crisis. He combines allopathic medicine (AZT) with Santo

Daime, Shamanism and even a type of pseudo-Catholic mysticism. In contrast with his stay in Paris, where he felt that his only option was to take AZT, he was able now to experiment with a wide array of possibilities integrating many worldviews. Although here I have no interest in vouching or rebuking Perlongher's choices of belief, I do argue that his move of combining all these "irreconcilable" elements echoes, in part, the author's interest with the "baroquization" of existence. It follows Perlongher's common operation of "bastardizing" established systems of thought, of undermining fixation with nomadic multiplicity. It can be argued that these integrations were made out of a moment of personal crisis undermining Perlongher's past of sexual radicalism, but still they need to be acknowledged, in concordance with Ben Bollig's argument that "[Perlongher] exhibited an awareness of the radical way that the virus had changed the possibilities of sex as a form of political resistance" (78).

In one of Perlongher's last essays, entitled "La desaparición de la homosexualidad," Perlongher is certainly less enthusiastic about the political potentiality of sexuality, but his criticisms and warnings about AIDS remain sharp. In the context of his writing, the author explains how the epidemic has paved the way for a repressive planning of all aspects of gay sexuality (87). Gay people are under the scrutiny of modern medicine and vulnerable to the social changes brought about by the intensification of neoliberal projects around the world. Although Perlongher is aware of the overwhelming medicalization of life and the advancement of a sterilized sexuality without risks and using lots of latex, "esto no quier[e] decir (confies[a] que no es fácil) estar contra los médicos, ya que la medicina evidentemente desempeña, en el combate contra la amenaza morbosa, un papel central" (88). This is one of the dilemmas in the history of AIDS and medicine: the difficult task of developing a system of medical cure devoid of social, sexual and economic biases. In an epistolary exchange with Sara Torres in March 1991, Perlongher makes an insightful

comment about his relationship with medicine and medication: “[E]stoy un poco más optimista (ligeramente sin exagerar) con relación a mi salud.... Pero completamente entregado a la medicina y tomando como 15 comprimidos diarios, no soy yo, es una combinación química que deambula” (153). He recognizes the effect of pharmacological substances in his body, and the dependence of a strict medical regimen to keep his life afloat. The problem does not lie in the consumption of “drugs” altering his internal chemical composition, but how these regimens of health are based on the “industrialization and privatization of the body as a product” (Preciado 342). In 1991, Perlongher complains about the cost of paying for medical treatment and his inability to look for other options to access it: “Tengo que pagar un convenio de salud carísimo, pero no me animo a abandonarlo pues, en caso de internamiento, la red pública sólo cubre 25% de los gastos. Un verdadero horror. Con el AZT no hubo caso, hay que pagarlo nomás. Carísimo y aumenta todos los meses . . . no hay otra alternativa que pagar” (193). This position of precarity during a moment of social crisis allowed, in many cities around the world, a unique and necessary intervention in the medical discourses of medicine. Enraged by the lack of social and political action to fight against HIV/AIDS,

los enfermos de SIDA, en el sentido clínico de término, rechazan la posición de enfermos y reclaman ser considerados como usuarios del sistema de salud, expertos en el proceso de toma de decisiones, piden intervenir en la producción de conocimiento científico Los activistas del SIDA son los primeros que están entendiendo que el aparato de verificación que produce lo normal y lo patológico con respecto al SIDA está desplazándose desde la clínica al mercado farmacológico. (Preciado *Muerte* 28-29)

In Perlongher’s case, the author also questions the authoritative discourses of traditional

medicine. In a moment of scientific and medical uncertainty with fighting the HIV/AIDS epidemic, the Argentine author intervenes in his own processes of cure by combining a wide array of alternative knowledges and systems of belief. Although Perlongher's incursions to alternative therapies can be controversial from the standpoint of modern scientific evidence, his willingness to destabilize the spheres of action and authority of contemporary medicine echoes the experience of many infected patients in the first years of the epidemic. Terminally ill people around the globe sought for their own solutions to reclaim life and health due to the limited efficacy of AZT.⁴⁸

Although Perlongher's latest years were characterized by episodes of productivity in his literary and academic projects, the advance of the disease seriously undermined his physical state and his emotional life in the last months of 1991. In one of the few analyses of Perlongher's correspondence, Javier Gasparri writes about the emotions that pervade the author's final letters: "[...] la escritura de la angustia y de la soledad son el 'dolor de abandono' cuya percepción recorre estas cartas (abandono de los otros, abandono de la poesía, abandono de los proyectos y tal vez de la idea de futuro a largo plazo)" (126). Perlongher is aware of his diminished physical capabilities and fears the possibility of solitude in his apartment of São Paulo. In many instances, he invites Sara to come over to Brazil, so they do not rely only on letters to communicate with each other. Though it is not completely clear due to the absence of Sara's epistolary responses, there do seem to be periods of disagreement and silence among them. During his last trip to Argentina [at least the one last documented in the correspondence], Perlongher writes to many people back in Buenos Aires looking to stay a few weeks with them. He has difficulty finding a host. In the past, he would

⁴⁸ It is important to point out that azidothymidine (AZT) was a medication more effective than a placebo. However, it was highly toxic, and unable to prolong the life of the patients to a considerable extent.

always stay with his dear Sara, who would open the doors of her place to her exiled friend Néstor. In one of his letters to Beba Eguía in July 1991, he writes in good spirits about having his first computer—“un Toshiba portátil milagro de la japonesería ya que no de la chinoiserie” —and mentions his concern for Sara and her possible anger towards him: “temo que [Sara] no haya aguantado mis críticas y decida no recibirme [en Argentina], será?” (161). It is not clear the main reason for their disagreements (if any), but in a letter dated August 31, 1992 (roughly three months before his death) a reconciliation is suggested. He writes, “Enorme alegría me causó tu llamado, conmovedor. . . . En tu llamado sentí que nos habíamos del todo reencontrado, después de ese furioso brote que padecí, que ahora lo sé responde al nombre de la manía” (234). Perlongher is also emphatic about his feelings of solitude and his need for companionship and support: “Preciso un poco de mimo, porque en general me siento solo. Esta enfermedad provoca un aislamiento progresivo porque uno no consigue acompañar el ritmo de los otros y uno va quedando rezagado” (234).

His final epistolary exchange with Sara is perhaps one of his most dramatic ones and constitutes a representative example of HIV/AIDS intimate writing. One of the major features of this modality of writing is the focus on the somatic and the medical. There is an obsession on expressing the progression of the disease in all the crevices of the body and making use of medical terminology to make sense of the experience of decay and precariousness. In Perlongher’s final letter to Sara Torres, he makes a recount of his precarious condition. His enumeration of symptoms is similar to those of a medical report: cytomegalovirus, microbacterium, constant diarrhea, sarcoma, T4 as 14 out of 1000, and cryptosporidium are just some of his latest conditions (234). Perlongher also writes a heartfelt letter to his father dated on August 1992. The document is dramatic. His father, an old man, is sick, and Perlongher responds telling him all about his state.

Both seem to be dealing with cancer: “Perdoname que no te escribí, pero estoy tan mal que a veces no tengo fuerzas para sentarme ante el computador. La mayor parte de los días no consigo hacer nada. . . . Siento mucho que no estés bien. Yo también empecé a hacer quimioterapia, pero tuve que pararla por mi estado de debilidad” (231). The Argentine writer dies in São Paulo a few months later, in late November 1992.

4.2 LIVING WITH THE REVENANTS OF THE PAST: ABREU’S EPISTOLARY WRITING AND THE POLITICS OF HOPE

Descubro todo o prazer exaustivo de lutar
pela propia vida.

Eu só quero escrever. Tenho uns quatro/cinco libros a parir
Ainda, che. Surto criativo tipo Derek Jarman, Cazusa,
Hervé Guibert, Cyril Collard.

Caio Fernando Abreu, *Cartas*

In Latin America, another writer also developed a significative epistolary writing until his death due to AIDS-related complications in 1996. Caio Fernando Abreu was a novelist, short story writer, chronicler and playwright. Born in 1948, Abreu was a nomadic artist who spent periods of his life in his native Rio Grande do Sul, São Paulo, Rio de Janeiro, London and Paris. His literary oeuvre is known for his combination of pop culture elements (e.g. music, film and literature) and urban Brazilian settings. Also known for his writing on alternative sexualities, Fernando Arenas explains that “Abreu’s textual space is populated by subjectivities representing a wide and fluid spectrum of genders and sexualities that escape facile containment within easy binaries” (243). In the first years of his career, Abreu worked as a journalist and embraced a bohemian lifestyle

defying the repressive environment of the military dictatorship. In the mid 70s, he lived for a prolonged period of time in Casa Sol—Hilda Hilst’s isolated country residence in Campinas — which served as a haven for creative inspiration to Hilst’s closest circle of friends and boosted Abreu’s career in Brazil’s local circuits. Although Abreu’s writing is eccentric and anti-establishment, it is also influenced by strong feelings of disillusionment and discontent. The utopian enthusiasm and liberating possibilities of the 60s were short-lived after a military regime that ruled Brazil for more than two decades came to power. Part of the *post-mortem* recognition of Abreu’s works comes from both “[his] introspective and profoundly lyrical prose . . . certainly an heir to Clarice Lispector’s resplendent writing” (Arenas 238), and his ability to convey the social changes and political challenges experienced in Brazil’s post dictatorial society.

Using Perlongher’s epistolary experience as reference, this is an analysis of Abreu’s letter writing during the twilight of his life. Similar to the Argentine writer, Abreu enjoyed writing letters to his closest friends even during the hardest years of his illness. The collection of letters published by Aeroplano provides a detailed look into the author’s personal and artistic evolution over many decades. In contrast with Perlongher, Abreu is predominantly recognized for his literary works and not necessarily for a legacy of political or sexual activism. Even though the *gaúcho* writer did include HIV/AIDS representations in his work (perhaps the first ones in Brazilian literature), Abreu’s first period of AIDS writing is dominated by a conscious metaphorization of the illness. Many of his short stories, plays and his last novel are marked by the overwhelming presence of a symbology of decay created by the use of rich allusion (e.g. skin lesions, urban deterioration and stained walls) and highly figurative language. There is an evil that has not been yet named, but lurks within the lives of many of his characters. For instance, in his 1990 novel *Onde andaré Dulce*

Veiga?,⁴⁹ readers are gradually introduced to an urban world of destruction that is stricken by disease and fear. In the first pages of the novel, one of the main characters, a journalist, describes the state of his apartment building and the city of São Paulo: “it was a sick, contaminated building, almost terminal. But it was still in its place, it hadn’t collapsed yet. Even though, judging from the cracks in the concrete, by the ever-widening gaps in the indefinably colored tile facing, like wounds spreading little by little on the skin, it was only a matter of months” (25). This “bodily” description of a place is provided early in the novel when we are still unaware of the infected status of most characters. The building is, however, a telling description of a “contaminated” human body that is not only suffering a lethal illness as AIDS was in the late 80s and early 90s, but also endures the typical symptoms of the malaise. We are able to perceive that the wounds spreading in the “skin” (walls) of the apartment are a representation of the feared Kaposi sarcoma that invades the skin of the sick. There is a poignant sense of defeat and decay that surrounds most spaces of the story. As Letícia Gonçalves states in her analysis of the Abreu’s autobiographical aspects in his literary writing, “Caio Fernando Abreu . . . demonstrou por diversas vezes, em sua carreira de escritor, o interesse por uma escrita mais confessional e, mesmo nesse contexto delicado, Caio não abdicou de sua preferência por textos intimistas, embora neles tenha tratado o assunto da AIDS, na maioria das vezes, de forma implícita” (133). In fact, it can be argued that many of Abreu’s readers were unaware of the dramatic social phenomenon that he was trying to depict in his writing. One may wonder if the stigma related to the virus and the widespread misinformation among the

⁴⁹ At the end of Abreu’s novel, the main character (an urban journalist) takes a trip to the northern state of Goiás. There, he finally finds Dulce Veiga. The singer is living in a Santo Daime community. There, she offers him a “tea” that is obviously ayahuasca. In Abreu’s autobiographical book, Paul Dip states that Abreu participated in activities related to *Santo Daime*. Although there is no epistolary evidence to affirm that this also took place during the last years of his life, Dip explains, “A beleza dos rituais o fascinava, talvez mais que a fé, crença em algo maior. E assim, pela beleza do ritual, ele chegou a freqüentar também o Santo Daime, que virou moda entre os intelectuais e artistas do Rio e de São Paulo no final dos anos 80” (144).

public prevented Abreu from portraying a franker portrait of the illness in his literature.

Similar to Perlongher, Abreu exchanges correspondence with a close circle of intimate friends: Maria Lidia Migliani, Jacqueline Cantore, Gerd Hilger, Luiz Arthur Nunes, Luciano Albrase and Hilda Hilst, among others. Sometimes, in his epistolary writing, he creates a campy feminine persona named Marilene and relates his life to the melodramatic experiences of artistic divas such as Carmen Miranda and Marlene Dietrich. In his letters, he addresses himself as Linda Lamar, Santa Tereza d' Avila and Marilene Fraga. His most intimate letter writing is usually addressed to three important women in his life: Maria Lúdia (a painter from Rio Grande do Sul), Jacqueline (a young woman who was Caio's roommate in São Paulo during the 80s), and his German translator, Gerd Hilger. When he writes, Abreu uses a myriad of names (Magli Magoo, Maglim, menina-loba, Levíssima, Jackie C and Jacqueline Bisset) to address these friends showing fondness and familiarity. Letters are an effective means of communication to make all types of private confessions: new lovers, gossip about their circles of friends, and comment on their travels and latest personal projects.

In 1988, Abreu is aware of the devastation caused by the epidemic, and describes his encounter with Brazilian singer Cazuza during a concert in São Paulo. The singer was one of the first public figures to openly disclose his HIV positive status to bring attention to the reality of the disease and hopefully find a cure. He writes, "Aí fui dar uns amassinhos [a Cazuza], no final. Luciano, Cazuzinha está com no máximo 50 quilos. Lindo, vital, sereno. Mas você olha a cara dele e vê a cara da morte . . . Ritual da vida e morte, naquele menino definhando en cima de um palco" (162). In this letter, a concerned Caio expresses his admiration for Cazuza's resilience; however, the public media could not be more different when in 1989, *A Veja*, one of Brazil's most important magazines, "aterrorizou os leitores ao apresentar, numa capa, o rosto desfigurado do cantor

Cazuza, já muito doente, com a manchete ‘Uma vítima da Aids agoniza em praça pública’” (Trevisan 451-52). As in many countries around the globe, the public discourse on HIV/AIDS in Brazil was often mediated by the dissemination of sensationalistic news and misinformation that only stoked public fears of the disease. As a queer person at the onset of the epidemic, Abreu also feared the virus, and his letter writing in the early 90s is a reflection of that. His hesitancy with disclosing the harsh reality of HIV/AIDS and his “reading between the lines” approach to representing the epidemic in his literary writing mirrors his own hesitation with knowing his status. In many of his epistolary exchanges, Abreu complains of sudden infections that are difficult to cure. Fearing a fatal diagnosis, he postpones his own HIV test for years. In August 1990, he writes, “[A] Sandra-médica está começando a idéia . . . de fazer O Teste. Eu não sei se quero. Seria como querer um papel timbrado, firma reconhecida, dizendo que vou ser atropelado (‘por esse trem da morte’, como dizia Cazuza) daqui a algum tempo” (224). This passage reveals the official formality of a positive HIV test as an inescapable death sentence. It conveys the fear of receiving a piece of news that can modify the individual perception of time, death and self-worth. In 1992, Abreu writes again to Maria Lúcia to tell her about a new episode of illness. He is taking multiple antibiotics to tackle yet another infection; however, Caio confesses the underlying cause of his physical debilitation: “Mas continuo achando que o problema é que definitivamente NÃO SUPORTO OUVIR A REALIDADE. Acho que não tem cura” (232).

After the publication of his second novel *Onde andara Dulce Veiga?*, the Brazilian author gains recognition abroad. His novels are published in French, German, English and Dutch. Abreu travels often to Europe to attend conferences and book releasing events, as well as meet with translators. Sadly enough, it is during this moment of literary recognition that his HIV diagnosis becomes inevitable. In 1994, Abreu sends a letter to his German translator, Gerd Hilger, and their

epistolary exchanges were often marked by hilarity and queer camaraderie. In this exchange, after describing his flirtations in a dingy gay bar, he comments on being bedridden again: “De volta a São Paulo me aguardava uma gripe enorme que durou três semanas (positiva!), conhecida como CPI, que derrobou meio país, depois uma crise de otite (velha!), depois um surto depressivo (neurótica!)” (283). In the words that were written before his official diagnosis, Abreu uses feminine adjectives to describe himself as “positive,” “old,” and “neurotic.” This self-deprecating description provides more evidence of Caio’s recognition that something with his health was amiss, but his attempt to make a campy moment out of it are an effort to delay the truth of his state a little longer. The following months after the writing of this letter, Abreu travels to Paris, Lisbon, Stockholm and Skejeberg, Norway. During this time, he often sends letters to his friends back to Brazil. Contrary to Perlongher, Caio loves Paris, where he receives much public recognition for his translated work. His books were reviewed in the local newspapers, and he even receives invitations to be interviewed on French TV. Almost 50 years old, Caio believes he is finally receiving the overdue recognition that he had not been offered back in his native country. Nevertheless, once he returns to São Paulo in the month of June, his health seriously deteriorates. In a matter of weeks, he loses eight kilos, and cannot get better despite treatment. In a letter sent to Maria Lídia in August, he confirms what he had delayed for so many years: he has been diagnosed HIV positive. He writes, “Pois, é, amiga. Aconteceu—estou com AIDS—ou pelo menos sou HIV+ (o que parece + chique...), te escrevo de minha suíte no hospital Emílio Ribas, onde estou internado há uma semana” (311). In this epistolary exchange, he also reveals that according to his doctors he probably has been living with HIV for the past ten years. Now in these crucial moments of his life, he wants to write: “Eu só quero escrever. Tenho uns quatro/ cinco livros a parir ainda, chê. Surto criativo tipo Derek Jarman, Cazuzu, Hervé Guibert, Cyril Collard” (312).

As has been already argued in this dissertation, the horizon of inevitable mortality triggered a need for writing for a lot of writers with HIV/AIDS. There is a need to document and narrate their own personal experiences for posterity. But Abreu does not only want to write privately—he goes public with his HIV positive status. Whereas Perlongher is initially concerned about any rumors or public disclosure of his affliction, Abreu does not have any worries about revealing his recent diagnosis: “Nada disso [Abreu’s HIV status] é segredo de Estado, se alguém quiser saber, diga. Quero ajudar a tirar o véu de hipocrisia que encobre este vírus assassino” (313). The purpose of pointing out these contrasting views is not to judge or assess Perlongher’s legitimate choice of confidentiality or Abreu’s lack thereof, but to track dramatic changes in the representation of the epidemic in their own writing projects, and the possible tensions that arise between their public personas and their intimate selves. As Alberto Giordano insightfully points out:

el interés crítico de los “actos autobiográficos” depende de las formas en que su textura manifiesta la tensión entre procesos autofigurativos y experiencias íntimas, es decir, de las formas en que las experiencias de algo íntimamente desconocido de quien escribe su vida presionan indirectamente y desdoblan la instancia de la enunciación, provocando el desvío . . . la suspensión de los juegos de autofiguración en los que se sostiene el diálogo de los escritores con las expectativas culturales que orientan la valoración social de sus obras autobiográficas. (3)

In his confessional letter to Maria Lúcia, Abreu mentions that he has been admitted to the Emílio Ribas hospital in São Paulo. It is in this place of seclusion where he writes three letters for his readership in his weekly column in *Estado de São Paulo* between August and December 1994. These letters, posthumously published in a collection of chronicles, constitute an original way to make a difficult and intimate revelation to a large audience. In the first letter titled “Primeira carta

para além dos muros,” the author wants to transmit a sense of confusion and perplexity. He pens: “Alguma coisa aconteceu connigo, alguma coisa tão estranha que ainda não aprendi o jeito de falar claramente sobre ela. Quando souber finalmente o que foi, essa coisa estranha, saberei também esse jeito. Então serei claro, prometo. Para você, para mim mesmo” (106). Although there is no direct reference to his diagnosis yet, one can infer that the writer is secluded in a hospital and desires to communicate a message that transcends the imprisoning walls of his reality. The writer is in pain after being pricked with syringes and writes while tied to a bed after having suffered what seems to be a nervous breakdown. Reading this letter in the light of Caio’s epistolary conversation with Maria Lídia, it is evident that he is writing about his difficult time when he first learned that he had contracted HIV. According to Abreu, he was able to keep serene after receiving his test results, but during his third day in the hospital he was on brink of madness. Some weeks later, Caio releases his “Segunda carta além dos muros.” In the analysis of the representation of HIV/AIDS in his literary project, this text may be one of his most valuable ones. Full of nostalgia and melancholia, Abreu positions himself within a genealogy of queer men who experienced the most difficult years of the epidemic and left behind an artistic or social legacy of queer worldmaking. In this second letter, Abreu is a patient isolated in the hospital nostalgically recollecting all the angels that he encountered along his difficult passage to hell. These angels are not celestial, but rather carnal and worldly. Their wings protect him from his very own fall. He evokes their memory:

Reconheço um por um [os anjos da noite]. Contra o fondo blue de Derek Jarman, ao som de uma canção de Freddy Mercury, coreografados por Nureiev, identifico os passos bailarinos –nô de Paulo Yutaka . . . Wagner Serra pedala bicicleta ao lado de Cyril Collard, enquanto Wilson Barros esbraveja contra Peter Greenaway,

apoiado por Néstor Perlongher. Ao som de Lóri Finokiao, Hervé Guibert continua sua interminável carta para o amigo que não lhe salvou a vida. Reinaldo Arenas passa a mão devagar em seus cabelos claros. Tantos, meu Deus, os que se foram. Acordo com a voz safada de Cazuza repetindo na minha orelha fria: “Quem tem um sonho, não dança, meu amor”. (110)

In the previous passage, Abreu exposes the HIV/AIDS epidemic as a truly transnational phenomenon that fosters the creation of a community of remembrance. In this period of personal hardship for Abreu, he reaches out to the memories of “fallen angels” who lived and died among the most dramatic years of the epidemic. For a general audience, some of these figures may not be easily recognizable, but they are certainly important for the Brazilian author and for the queer historiography of AIDS. Like Caio Fernando Abreu, most of these men were salient figures in their respective cultural worlds: British filmmaker Derek Jarman, whose last film *Blue* was a narration set on a blue background commenting on his own mortality; the French writers Cyril Collard and Hervé Guibert, important public voices for AIDS awareness in their own country; and the Russian dancer Rudolf Nureyev, one of the most important ballet dancers of the 20th century, who died in 1993. There is also a mention of Néstor Perlongher and Cuban writer Reinaldo Arenas, whose autobiography *Antes que anocheza* is a widely known piece of gay literature in Latin America. Finally, Cazuza, one of the most famous singers of contemporary Brazilian rock, who died in 1990, is also evoked in his pages.

For Abreu, there is a significance in the power of evocation. After the devastation and death left by the epidemic, remembrance is necessary to bring back memories of those gone. As was stated before in this dissertation, the HIV/AIDS epidemic left a traumatic wound in the core of the queer community that still lingers in the present day. Dealing with the specters of the past—in

Abreu's case, a recent one—proved to be a way of celebrating lives soon to be forgotten and recognizing that he was not alone in trying to deal with the hardships of his diagnosis. The past can be useful for identifying moments of resistance, shared dignity and community building. For instance, in Abreu's and Perlongher's correspondence, there are many evident moments of solidarity and queer remembrance amidst adversity. The fact that their affective archive is worthwhile to study in the present reveals the potentiality of thinking under *queer* time. If one would endorse a teleological order of progress in which the past of HIV/AIDS is forgettable, many of the identities and struggles that shaped progress in the dignity of queer people would be relegated to oblivion. Living and thriving in *queer* time echoes directly Walter Benjamin's disavowal of a traditional conception of history as a successive linearity of progress. Benjamin evokes the figure of Klee's Angelus Novus as the best depiction of the "angel of history." He writes,

[the angel] is turned toward the past. Where we perceive a chain of events, he sees a single catastrophe which keep piling wreckage upon wreckage and hurls it in front of his feet. The angel would like to stay, awaken the dead, and make whole what has been smashed. But a storm is blowing from Paradise . . . This storm irresistibly propels him into the future to which his back is turned, while the pile of debris before him grows skyward. This storm is what we call progress. (257-58)

Interestingly, Benjamin's reference to the "angel of history" mirrors Abreu's representation of his *queer* family of "anjos." An angel can be understood as ephemera—as a type of specter that comes to inhabit the physical world to disrupt the idealizations of normativity and progress. As María del Pilar Blanco and Esther Peeren argue, "spectrality is used as a conceptual metaphor to effect revisions of history and/or reimaginings of the future in order to expose and

address the way certain subjectivities have been marginalized and disavowed in order to establish and uphold a particular norm, as well as the way such subjectivities can never be completely erased but insist on reappearing to trouble the norm” (309-10).⁵⁰ In the last letter sent to his intimate friend Jacqueline Cantore, Abreu reveals a poignant awareness of learning to live with those specters of the past that insist on reappearing in his own life. In the letter, the Brazilian author writes: “em quem está com AIDS o que mais dói é a morte antecipada que os outros nos conferem . . . Sei disso porque assim me comporteí, por exemplo, com o Wilson Barros, de quem fugi como diabo da cruz. Como o Paulo Yutaka, sem ir vê-lo no hospital. Não respondi as cartas do Wagner e só telefonei um dia depois que ele tinha morido, por saudade intuitiva. E tardia” (330). All these men, despite their physical disappearance, have lingered in Abreu’s memory and influenced his take on acknowledging a queer past that ought to be recognized. In September 1994, in his last letter to his readership in *O Estado de São Paulo*, Abreu reveals that he has just recently being diagnosed with HIV, but assures that his life is far from over. For him, “a luta continua.” Abreu’s writing not only adds visibility on the phenomenon of AIDS, but also creates a sense of resilience and self-confidence.

Caio Fernando Abreu’s writing reveals unique moments of *queer* relationality that can transcend death and time. Despite their disparate origins and distinctive linguistic traditions, the Brazilian writer establishes a dialogue with the ghostly presence of Cuban writer Reinaldo Arenas—one of the most recognizable Latin American figures in the literary representations of the

⁵⁰ In his book *Specters of Marx*, Derrida develops a reflection about spectrality and temporality. According to Stef Craps, “[Derrida] argues that the possibility of a just future depends on the readiness ‘to learn to live with ghosts.’ He insists on an obligation to live not solely on the present but ‘beyond all living present,’ aware of and attentive to those already dead or not yet born. Being neither fully present or absent, ghosts do not have a determinate ontological status but belong to a liminal ‘hauntological’ domain which allows for an ongoing politics of memory and a concern for justice” (467).

epidemic. In 1992, Abreu is in France as an invited writer at the Maison des Écrivains Étrangers et de Traducteurs in the city of Saint Nazaire. He writes to Portuguese-Brazilian playwright Maria Adelaide Amaral about his latest activities in Europe, and mentions that writers such as Ricardo Piglia and Juan Goytisolo also lived in the French city as guest writers in previous years. He also mentions Reinaldo Arenas' participation in this program, and his interrupted stay at the *Maison*. According to Abreu, Reinaldo leaves due to his suicidal ideations that will finally materialize six months later in New York (Arenas dies in December 1990). In November 1994, some months after knowing he was living with the virus, Abreu wrote a short chronicle entitled “Um uivo em memória de Reinaldo Arenas” [A Howl in Memory of Reinaldo Arenas]. In this text, there is a fictionalization of Abreu's residence as a guest writer in Saint Nazaire. Maybe the most salient aspect of this work is the spectral encounter he has with Arenas. He writes,

Encontrei Reinaldo Arenas numa madrugada de novembro de 1992 em Saint-Nazaire . . . Insone fiquei lendo *Méditations de Saint-Nazaire*, de Arenas, que só vagamente conhecia. Impresionado com o texto, decorei suas últimas palavras: ‘Aún no sé si es este el sitio donde yo pueda vivir. Tal vez para un desterrado—como la palabra lo indica—no haya sitio en la Tierra. Sólo quisiera pedirle a este cielo resplandeciente y a este mar, que por unos días aún podré contemplar que acojan mi terror’. Repeti feito oração, e dormi. Acordei ouvindo o ruído da máquina de escrever do escritório. Fui até o corredor, espiei. En frente à janela, um homem moreno contemplava a tempestade enquanto escrevia. Estemeci, ele desapareceu. Tô pirando, pensei. E voltei a dormir. (128)

Later in the morning, Abreu describes his eerie experience to French poet Christian Bouthemy, who believes he has seen a man similar to the late Reinaldo Arenas. Despite all the

possible fictional elements that pervade in this chronicle, there are many valuable moments of queer identification and anticipatory revelation. Abreu's fascination with Arenas's literary passage is telling especially in its references of feeling out of place, of being exiled of one's home. This nomadic spirit, this feeling of not fitting within a national context is a shared experience among many queer Latin American writers including Abreu, Perlongher, and most certainly Arenas. Writing in 1994 about a past experience, the Brazilian writer re-inhabits a place of memory, and establishes an affective bond with a writer that also lived the experience of AIDS in his own skin. In this chronicle, Abreu wants to transmit his admiration and appreciation for Arenas, to recognize the Cuban's powerful writing that he feels compelled to translate, and to howl "para o infinito em memória desse cubano lindo, desventurado, heróico" (129).

Based on Perlongher's and Abreu's final correspondence, their emotional outlook on the advancement of the disease differs significantly. As has been already stated, Perlongher suffered bouts of high emotional distress during his last years and there is much pain and solitude depicted in many of his epistolary conversations. Abreu's outlook after his traumatic diagnosis is far more optimistic and transformational. For instance, in a letter dated on September 1994, he writes "[eu] consegui transmutar o HIV numa coisa boa dentro de mim" (316). In the face of death, Abreu feels enthusiastic about continuing to live and battle the disease. In the first months following his diagnosis, Abreu is still relatively healthy and travels to Germany to present public lectures at Frankfurt's book fair. Upon his return, Caio moves back to Porto Alegre to be close to his family. Many of his letters during this time follow a pattern. He is content with his life in Rio Grande do Sul, and the possibility of being close to his family and friends. He pens, "Adoro Porto Alegre... sempre quis ter um jardim; sempre quis escrever o dia inteiro; sempre quis, bem tia, acompanhar o crescimento de meus sobrinos" (319). In another letter, he describes his daily routine in his new

home—he writes and takes care of a garden, practices yoga, and reads Nádia Gotlib’s biography of Clarice Lispector (*Cartas* 326). Abreu, however, is aware of the transient state of his recently acquired sense of happiness. He insightfully states: “Ando com uma felicidade doida, consciente do fugaz, do frágil” (327). This comparison does not intend to legitimize one way of dealing with illness over another one. As previously explained, Perlongher experiences his most precarious moments away from his native Argentina. At least, in the evidence of the epistolary archive, his network of support in these last years seems to have been more fragile than Abreu’s due to the geographical separation of loved ones and the nostalgic nature of the exile. Perhaps one of most valuable aspects of exploring these intimate archives it is to recognize the multiplicity of life stories and emotional attitudes dealing with the diagnosis of HIV/AIDS in the late 80s and early 90s.

As physical health starts to deteriorate, writing becomes an ideal tool to expose the suffering of the flesh. Similar to Perlongher’s painstaking accounts of his somatic state, Abreu provides many details of his physical evolution to his closest friends. In mid-1994, he writes to Maria Lúcia to tell her about his blood tests after starting AZT: “Hoje peguei o resultado do primeiro exame de sangue pós AZT e plaquetas leucócitos e Tês-4 e todas aquelas coisas sanguíneas, segundo a médica, estão maravilhosos” (314). In a postcard sent to a friend just before his last European trip, Caio complains about a sarcoma appearing in his nose and his next steps to treat it (317). With echoes to Perlongher’s last letter to Sara Torres, Abreu’s final letter addressed to his German translator Gerd Hilger in early January 1996 can be read as a type of medical report: “Andei mal: duas semanas no hospital para extirpar a vesícula. 3 cirurgias, oito transfusões de sangue, pressão a três . . . Fraco fisicamente, fortíssimo no espírito. Hoje recomecei a combinação AZT-3TC. Vamos lá, tenho fe” (347). Abreu’s passage reveals important details like his relentless optimism to continue fighting for his life, as well as the significance of the historical moment in

which he lives. According to the letter, he had just started to take one of the early combination therapies that will transform the landscape of AIDS in 1996. By the time Caio is penning this letter, protease inhibitors will soon become a reality prolonging the lives of many, creating an even more complex conception of temporality in the lives of survivors that will be analyzed later in this dissertation. Unfortunately, Abreu dies on February 24, 1996, just a few weeks after writing this letter, so he didn't benefit from these new breakthroughs. In this correspondence, Abreu writes a beautiful last message, his year of 1995 has been a complete dedication to his "saúde, o jardim e a literatura" [his health, his garden, and his writing] and he wishes in the first day of 1996 a wonderful new year "cheio de *Axé!*" to his dear Gerd (347).

In his *Exercices d'admiration*, philosopher Emile Cioran makes a piercing argument about epistolary writing: "the letter, a conversation with an absent one, constitutes a capital event of loneliness. The truth about an author should be sought in his/her correspondence, and not in his/her oeuvre. The oeuvre is often a mask" (my translation, 125). Although there can be a refutation of Cioran's idea of an essential "truth" in any artist's literary project, private correspondence can be valuable to understand writers' evolutions throughout the years, their intimate changes of heart, their explorations in new aesthetic modalities, their allegiances to literary circles and even the origins of a specific piece of writing. It can also be argued that epistolary writing should not be considered as a separate aspect of an author's work. Both Caio Fernando Abreu and Néstor Perlongher were prolific letter writers throughout their lives. They exchanged correspondence with intimate friends, fellow writers, artists and family members. With their current posthumous status as crucial figures to understand the configurations of gender and sexuality in the contemporary literature of Brazil and Argentina, Abreu's and Perlongher's epistolary writing is a window of opportunity to establish a critical comparison of representations of HIV/AIDS in modern Latin

America.

After delving into their epistolary archive, it becomes clear that both authors share a fair number of similarities: both men spent important periods of their lives in the metropolis of São Paulo. (It would be indeed fascinating to have evidence of any interactions between them in this period.) Sharing a similar queer sensibility, their epistolary writing is highly confessional, campy at times, melodramatic and literary, and conscious of its role of narrating a dramatic experience of illness. Interestingly, their respective HIV diagnoses don't stall their writing; on the contrary, it triggers an urgent need to narrate their viral experiences, to tell their own stories maybe as an antidote to transcend oblivion and corporal death. On the other hand, the intimate experience of the epidemic is transformative in their approaches to representing their conceptions of queer sexuality and stigma. Perlongher's early defense of alternative sexualities and pleasures as key elements to any possible liberation, his "ethics of promiscuity" as defined by Brad Epps, wanes or at least transmutes into a preference for the mystical, for a syncretic combination of cultural elements that could ease his desperation of living with a terminal illness that at least initially he prefers to experience privately. In Abreu's case, his veiled representations of the disease in his literary writing, and his personal fears to name and face the reality of the virus, change after his diagnosis in 1994, when he becomes a public figure for a national discussion of the epidemic. Their approaches, their epistolary writing, their unique life stories constitute a space where memory and intimacy co-exist. Both are valuable voices that still resonate in the present and foster an intergenerational dialogue to better understand the transformations of the epidemic through its history. This analysis of intimate letter writing is also an exercise at unearthing memories of the past. Memory is a valuable tool to discuss the importance of talking about the epidemic even in the current post-antiretroviral era.

As authors Christopher Castaglia and Christopher Reed explain: “[while] memory can help us create better presents, it cannot be expected to eliminate the sorrows and losses of the past, which must remain part of our memories. Memory is neither clean nor comforting, but is messy business . . . [it] produces ambivalence, uncertainty and impatience alongside admiration, clarity and joy” (25). Exploring Abreu’s and Perlongher’s epistolary archive is a worthwhile enterprise that unravels new dimensions in the legacy of their respective literary projects and demonstrates the complex nature of memory and intimacy.

5.0 HERBERT DANIEL AND PEDRO LEMEBEL: SOLIDARITY, COMMUNITY AND ACTIVISM

Há uma coisa dentro de mim,
contagiosa e mortal, perigossíssima, chamada
vida, lateja como desafio.

Herbert Daniel, *Vida antes da morte*

Rompi tratados
Traí os ritos
Quebrei a lança
Lancei no espaço
Um grito, um desabafo...
E o que me importa é não estar vencido
Minha vida, meus mortos
Meus caminhos tortos
Meu sangue latino

Ney Matogrosso, “Sangue Latino”

In the analytical and chronological progression of this dissertation, the HIV/AIDS epidemic has been described as a period of social marginalization, and personal hardship in the lives of many queer subjectivities in Latin America. Tragedy, pain and vulnerability are common emotions displayed in the many pages that compose the narratives developed in previous chapters. Caio Fernando Abreu is maybe one of the first writers—in this project—who starts deviating from tragedy, and starts thinking about the possibility of thriving and finding hope despite the cruel instances of illness. To explore those changes further, this chapter analyzes the literary and political legacies of two key figures in the intersection of sexuality and politics in the South America: Herbert Daniel and Pedro Lemebel.

Like Herbert Daniel, Lemebel is an eloquent writer and activist who radically transformed the modes of representation of the epidemic in Latin American writing. The Chilean writer—an incisive *cronista* of *marica* life in Santiago and Valparaíso—crafts a countercultural discourse built around conceptions of comedy and cynicism. Rather than thinking the virus as tragic, and mortal, Lemebel employs humor and irony as a way of easing the burden of AIDS stigma in his communities. The myriad of characters in his *Loco afán: crónicas del sidario* has the rare ability of laughing about themselves and their disgraces in a historical moment saturated with negativity and tragedy. Although mortality is still not possible to overcome, Lemebel’s characters celebrate the lives of their “sisters,” divas who have fallen in disgrace after their untimely diagnosis. As Lemebel explains in his chronicle “Los mil nombres de María Camaleón,” “existen mil formas de hacer reír a la amiga cero positiva expuesta a la baja de defensas si cae en depresión. Existen mil ocurrencias para conseguir que se ría de sí misma, que se burle de su drama. Empezando por el nombre” (58). Lemebel is not advocating for an insensitive amusement of his sisters’ vicissitudes, but seeks to keep alive their original vivaciousness and campy excess fading now due to the hardships and discrimination brought by epidemic.

In a similar context of marginalization, Herbert Daniel—one of the most innovative and courageous HIV/AIDS activists in Brazil and former guerilla fighter during the military dictatorship—refused to accept a second-class citizen status as an HIV positive person. Fully aware of the devastating consequences of stigma and discrimination for those living with the virus, Daniel urged for a new approach: “instead of becoming victims of the disease, people should be active agents, insisting they have the same human rights as any other person. Daniel offered a mobilizing slogan that affirmed life over death . . . His words, simple as they may have been, offered hope, dignity, and a positive approach to confronting the disease” (Green 243). Despite

their shared political convictions, Herbert Daniel and Pedro Lemebel expressed their sexuality and ideals in different ways. For most of his earliest years in Brazil, Daniel suppressed his homosexuality because, according to him, it was incompatible with his active role in the armed struggle to overthrow the dictatorship. It is only during his years of European exile when he is able to live his life more openly and fully comprehends the inseparability of sexuality and politics. On the contrary, Lemebel disavows traditional elements of hegemonic masculinity to fully embrace the identity of *la loca mala*. In his analysis of the Chilean writer's identity in his literary work, Efraín Barradas explains, "la loca mala asume su identidad sexual como rasgo esencial de su persona y reta a la sociedad que lo oprime con esa autodefinición . . . puebla abundantemente la intimidad del inframundo gay hispanoamericano. Quizás para crear un contrapunto y contrapeso a la imagen de víctima débil, la loca se declara mala y fuerte" (74).

Unlike Herbert Daniel, Lemebel did not write from the perspective of a HIV-infected person, but his writing strives for the creation of a community of support and understanding to tackle the epidemic. The *santiaguino* chronicler contributes to the visibility of different dimensions of the HIV/AIDS crisis. For instance, in *Loco afán* the reader is introduced to a myriad of stories about urban transvestites who are not only stigmatized for their illness, but also for their sexual difference, their socioeconomic status, and their political identification. Despite their life contrasts, this chapter attempts to demonstrate how Lemebel's and Daniel's writing is a valuable change of paradigm on HIV/AIDS representation in Latin America. Both writers refuse to be part of a culture of fear marked by stigma and neglect. In the early stages of the epidemic, they position themselves as sharp cultural critics. Daniel and Lemebel explore aspects such as the impact of external social and political interests in the lives of the infected, the gradual dehumanization of those struggling to survive to the illness, as well as the need of local networks of support and intervention that can

diverge from the traditional North American and European medical models. Rather than lingering on perpetual mourn and grief, these activists make use of their powerful writing to propose new avenues of understanding in which the rights of HIV-positive people are defended and endorsed. Heirs of a legacy of military dictatorships, Daniel's and Lemebel's voices are transitional. That is, they represent a change from a period of uncertainty and death to a moment of life celebration and resilience. For them, the epidemic should serve as an opportunity to gain rights, build solidarity, and acknowledge the daily victories of survival in a world that has conferred social death to those living with the virus.

5.1 HERBERT DANIEL: “A GRANDE VACINA CONTRA A AIDS É A SOLIDARIDADE”

Born in the small village of Bom Despacho in the state of Minas Gerais, Herbert Daniel (1946-1992) was raised in a working-class home. In 1965, he moved to Belo Horizonte to study medicine at the Federal University of Minas Gerais. Influenced by local student movements reacting to the 1964 coup d'état, Daniel joins POLOP, a left-wing organization, that would later transform into VPR (Vanguarda Popular Revolucionária). VPR—a Marxist guerrilla group—was also joined by figures that would play an important role in contemporary Brazil such as Dilma Rousseff (later president of the country), Alfredo Sirkis and Inês Etienne Romeu. In a recent book-length study on Herbert Daniel, US historian James Green explains that the young Brazilian man was really conflicted about his homosexuality interfering with his commitment to revolutionary armed struggle. In an interview with Dilma Rouseff, the politician reminisces about her friendship with

Herbert Daniel during her years in the clandestine organization and mentions his comrade's hesitation to be open about his sexuality in the homophobic Brazilian Left (43).

Daniel's preoccupations are certainly understandable. In his memoirs entitled *Passagem para o próximo sonho* (1981), he writes: "Ever since I began to engage in political activities, I felt as I had to make a choice: either I would lead a regular sexual life . . . or I would make the revolution. I wanted to make the revolution. Conclusion: I had to 'forget' my sexuality" (cited in Green 45). In Latin America, leftist organizations often deemed homosexuality as a bourgeois pursuit that would bring decadence to their ranks. In late 1969, Daniel went underground to start guerilla operations led by Comandante Carlos Lamarca. His group stationed in Vale do Ribeira in the state of São Paulo. In 1970, VPR was determined to free comrades who had been detained and, in some cases, tortured by the dictatorship. Seeking leverage to negotiate with the Brazilian government, the clandestine organization, including Herbert Daniel, plotted and carried out the kidnapping of the Swiss ambassador in Rio de Janeiro, Giovanni Bucher. In the same year, they also abducted German ambassador Ehrenfried Von Holleben. In exchange for their release, VPR demanded the liberation of political prisoners who were later exiled to Chile and Algeria. After more than two years in hiding, Herbert Daniel and his future life partner (Claudio Mesquita) abandoned Brazil with fake passports. They move to Portugal soon after the Carnation Revolution in 1974. During the next seven years, Daniel lives in Europe, mainly Paris, as a political exile. In France, he finds a job in a gay sauna, and he is able to live his sexuality more freely. He is also able to be frank about his homosexuality to former guerrilla comrades who are also living in Europe. After a long battle to receive a pardon from the Brazilian government, Herbert Daniel returns to Brazil in 1981. This chapter delves into this specific period in the life of the author that coincides with the first appearances of HIV/AIDS in the South American country. In these years,

Daniel cultivates a powerful and compelling political writing that mainly focuses in the HIV/AIDS epidemic in Brazil, and lays out a new model of activism and social support to fight against the deadly illness. João Nemi Neto, one of the few academics who has written about Daniel's works, claims that "Daniel procurava humanizar os doentes de AIDS evitando a vitimização, dando-lhes agência . . . ou seja, evitando o que Daniel chamava de morte civil, ou a perda do direito à vida mesmo vivos" (196).

But before exploring some of the author's political essays, there should be a reflection on the exceptionality of his life: a gay guerrilla fighter who lives in exile and struggles to come into terms with his sexuality in an environment dominated by rigid patriarchal hierarchies. In his analysis of the relationship between homosexuality and revolutionary projects of the Left in Latin America, Luciano Martínez argues that:

el sujeto homosexual ocupa un lugar paradójico, articulado por un doble rechazo: el del poder autoritario y el de la izquierda revolucionaria. No obstante, el sujeto establece una relación móvil con la izquierda; sabiéndose de antemano excluido, trata de reconfigurar su subjetividad, en especial a través del diseño de una nueva política de género, que bien mitigue cualquier desborde de feminidad, o por el contrario cuyo eje subversivo sea la acentuación de lo femenino. (1-2)

Both Herbert Daniel's and Pedro Lemebel's life and work are good examples of these contrasting views of inhabiting gender and sexuality. During his years as a revolutionary rebel in Brazil, Daniel adheres to a life of abnegation, discipline, and sexual constraint to fit into a required masculinist script—that of the Latin American *guerrillero*. On the contrary, Lemebel's rebellion is rooted in his feminine sensitivity (su mirada *coliza*) that disavows dogmatic conceptions of manliness. Despite Lemebel's allegiance to revolutionary political projects in Chilean history, his writing

serves an effective tool to criticize the narrow-mindedness of Left to accept and recognize sexualities differing from the heterosexual norm.⁵¹ His intelligent humor, his deft use of language to communicate sexual transgression, and his camp sensibility are effective tools to fight against the forces of stifling heterosexism and exclusionary ideals of masculinity.

During his European exile, Daniel embraces his homosexuality, and is able to maintain a romantic relationship with Cláudio Mesquita. It is indeed a radical change from his years in the “closet” during his involvement in Brazilian radical politics. He is living in Lisbon and Paris in the 70s, a period marked by sexual liberation and second-wave feminism. These aspects would prove essential during Daniel’s return back to Brazil in the early 80s. Due to his involvement in the kidnapping of the ambassadors in the late 60s, Daniel was one of the last exiles to be granted a pardon to return to his country. Upon his return to South America, he lives in Rio de Janeiro where he writes and works as an editor in different publishing houses. In those same years, Daniel joins the PT (Partido dos Trabalhadores), and becomes a founding member of the Green Party (Partido Verde) in 1986. In that same year, he would be the first openly gay political candidate to run for a seat in the Rio de Janeiro State Assembly, with an agenda focused on environmentalism and the advocacy of civil rights for minority groups. Daniel is not able to get elected, but he soon joins one of the organizations that was fundamental for his most powerful political writing: ABIA (Associação Brasileira Interdisciplinar da AIDS). This chapter studies Daniel’s essays published under the bilingual title *Vida antes da morte/ Life Before Death* in 1989 by Editorial Jaboti. US

⁵¹ Lemebel writes about this legacy of injury the sexually diverse groups in his celebrated poem “Manifiesto, hablo por mi diferencia”: “Hablo por mi diferencia” presents a powerful recrimination to his local revolutionary left: “mi hombría espera paciente/ que los machos se hagan viejos/ Yo no voy a cambiar por el marxismo/ que me rechazó tantas veces” (83-84).

anthropologist Richard Parker, a close collaborator of Daniel's, completed the English translations located in the second half of the book.

Herbert Daniel's activism and writing on HIV/AIDS started before he himself was diagnosed with the virus in January 1989. His collection of essays *Vida antes da morte* contains an introduction, four essays, and a foreword written by Daniel's partner Cláudio Mesquita. James Green in his recently published biography of the Brazilian author states that "his background experience as a medical student, underground activist, guerrilla fighter, political exile, and left-wing candidate . . . all seem to have converged to create a fresh and innovative strategic approach to tackling the disease" (240). This line also influenced Daniel's writing on HIV/AIDS. In fact, when comparing his political and social analysis of the epidemic to the light of previous narratives analyzed in this dissertation, it can be stated that Daniel represents a renewed take on advancing the civil rights and dignity of people living with HIV/AIDS. Although the activist writes during a period of uncertainty and fear, he passionately believes that the focus of the epidemic should not focus on its alleged incurability, but on how to work in solidarity to improve the dignity and life conditions of infected people. For Herbert Daniel, "effective measures against the HIV epidemic must begin with concrete measures to combat the ideological virus. This means correct information, efficient action, demystification of fear, removal of prejudice and permanent exercise of solidarity" (52). In light of blatant discrimination and inaction of national governments to tackle the epidemic, Daniel proposes the establishment of informed communities aware of their rights, unafraid of revealing their status, prepared to educate ignorant minds, and to make decisions about their own lives.

In the first essay of *Vida antes da morte* entitled "News from Another Life," Herbert Daniel writes about his own experience about living with HIV. A highly intimate voice in his writing sets

the combative tone of urgency that permeates his entire collection of essays. For Daniel, the biggest challenge for a HIV-positive person is not attempting to postpone mortality despite failing health, but dealing with the negative consequences of stigma and social death. He writes,

Ever since I found out that I had AIDS, I constantly repeat that I am alive and that I am a citizen. I have no deficiency that makes me immune to civil rights—in spite of abundant propaganda to the contrary . . . I know that AIDS can kill, but I also know that prejudice and discrimination are much more deadly. May death be easy for me when it comes, but I won't let myself be killed by prejudice. Prejudice kills during life, causing civil death, which is the worst kind. (39)

In this passage, Daniel asserts his humanity and explains how the epidemic has been subject to a myriad of speculation and misinformation that has harmed the lives of many. Paula Treichler argues that “the AIDS epidemic—with its genuine potential for global devastation—is simultaneously an epidemic of a transmissible . . . disease and an epidemic of signification” (32). Herbert Daniel is aware of the many layers of meanings “loaded with taboos and prejudices” that society has decided to “confer” to those living with the virus. For this reason, he encourages others “not to ask for easier conditions of death but to demand a better quality of life” (40). In the late 80s, Daniel's ideas are ahead of his time at least for the reality of post-dictatorial Brazil. He understands that demanding better life conditions for vulnerable Brazilians and denouncing the negligence of the local authorities to tackle the epidemic are inseparable actions of solidarity especially if one considers how the virus disproportionately affected marginal social groups. In addition, the activist points out that HIV/AIDS is a biological epidemic like many other ones in the history of medicine. However, it has been surrounded by myths, biases, and misinformation spread by religion, health discourses, and the State. He explains, “unlike doctors, the virus doesn't

have a code of ethics and it does not struggle to make a fortune on tests, vaccines, and treatments. Unlike illustrious prelates, the virus is innocent; it really doesn't believe in a god of vengeance, and its function is not to punish 'sinners'" (44).⁵²

In his expository writing, Daniel also exposes a challenging barrier to curb the AIDS epidemic: fear. The Brazilian author states that health authorities and federal governments are responsible for creating inadequate prevention campaigns based on panic and stigma which hurts and delays a real action to fight against the spread of the epidemic. Despite writing in the late 80s when an effective treatment or cure to the epidemic was not even elucidated, Daniel believes that the virus will eventually have a cure or solution: "To insist on the incurability of AIDS is, above all, a strategy to induce fear. And that is the worst possible strategy for providing health information. The most it achieves is to frighten people and drive them away from real information, which aims to provide prevention methods and to teach that AIDS can be avoided (41-42). Daniel's words are relevant even today. Prevention campaigns based on fear are not effective and create a disconnection between health authorities and communities in risk. To people living with HIV/AIDS, the first campaigns were successful declaring them "dead while still alive" (53). They were terminal patients whose lives were beyond repair. Daniel argues that this assurance of incurability "often leads the person with AIDS or the HIV seropositive to obsessively seek impossible cures. He ends up living under the 'dictatorship of therapeutics'" (42). Herbert's words resonate with the development relationship patient-medicine in some of the previous chapters of

⁵² Herbert Daniel writes more extensively about the problematic biases attached to the virus: "Despite allegations to the contrary, the virus is not a scoundrel at the service of the ruling classes; it never took a political stand. Nor should one think that the virus is homosexual. Its lover is a white blood cell and it will be satisfied with any old lymphocyte. The sexual activities of the client doesn't matter at all. To say that the virus prefers sinners and catches some unaware just to demoralize them is pure slander. HIV made no preferential choices based on guilt; it has no morals, it is just a virus devoid of second intentions" (44).

this dissertation. For instance, remember the tense relationship of Néstor Perlongher with both allopathic medicine and non-traditional cures (ayahuasca, Padre Mario), and Severo Sarduy's fictional characters in *Pájaros de la playa*, such as Siempreviva and the viejos-jóvenes that are subject to the clashes between Caimán and Caballo's "terrorismo botánico" and the allopathic order of the "sanatorio."

Passionate about defending the dignity and health of people living with HIV/AIDS, Herbert Daniel writes about his own HIV diagnosis to condemn the biases and misinformation of some medical practitioners when treating infected patients, and the importance that HIV seropositive people are able to take decisions about their own health. As Melissa Fitch states: "In *Vida antes da morte* . . . we find a heartfelt call to action. Daniel rallies against the prevalent homophobia in Brazil towards those afflicted by AIDS, starting by telling the story of his own diagnosis, a meeting with a doctor that lasted all of forty seconds" (113). His essay "Forty Seconds of AIDS" is an intimate portrayal of Daniel's unexpected diagnosis in 1989. He describes the cold interaction with a physician who informed him about his new disease. Daniel writes:

Forty Seconds. That was the amount of time that he [the doctor] gave me to absorb the news. It was sufficient time, above all, to give me the horror of seeing, in that clinical indifference, perhaps a certain touch of cruelty Horror —that was exactly what I felt. I had before me a diagnostic device, a dehumanized medical apparatus that could suddenly entangle me in its machinery and lead me to something more terrible than AIDS: in the place of death as a vital experience, I faced the indignity of an empty, hospitalized bed. (49)

In his own voice, Daniel expresses a common concern among people living with HIV: how to find a humanized version of medicine that disseminates correct information, compassion and

prevention that doesn't demonize sexuality. There is a plea for a medical model that serves as an advocate and companion of the patient in a difficult moment of uncertainty. As Daniel emphasizes, "the technical competence of a doctor should be measured by his humanism, not by how well he has been trained to respond with conditioned reflexes" (47-48).

Following on this analysis on the complex historical relationship between HIV/AIDS and medicine, Daniel is highly critical of the local importation of foreign medical models⁵³—mostly the US and European—to tackle the epidemic in Brazil. Aware of the social and political problems in his country, Herbert Daniel sees two major problems in these type of adaptations: "to disseminate the idea of an elite disease, coming to our privileged classes from the 'developed world' (an idea which those who actually work with the disease have proven untrue), and to disguise characteristics of the disease that are unique to Brazil, such as the question of transmission through contaminated blood transfusion" (53). The unethical trade of contaminated blood transfusions that infected hemophiliacs was particularly severe in the state of Rio de Janeiro where Daniel lived after his exile in Europe. In "The Bankruptcy of the Models: Myth and Realities of AIDS in Brazil," the activist explains that "at least one in five (20 percent) of AIDS cases recorded in the first five months of the epidemic [in Brazil] had been caused by the use of contaminated blood or blood products" (38-39).

Maybe foreseeing the power asymmetries and the difficulties of translating a foreign model to a local peripheric reality, Daniel thinks that the epidemic varies "according to our specific cultural characteristics—our sexual culture, our material symbolic resources for dealing with health and disease, and our prejudices and capacity to exercise solidarity" (54). At least in the

⁵³ Interestingly, similar to Herbert Daniel, Pedro Lemebel was also distrustful of AIDS foreign models, especially the North American one, and their disconnection from his local reality in Santiago.

reality of Latin America, this is really manifest. The development of HIV/AIDS prevention measures and resources is unequal, and it usually responded to specific political and social realities. In the case of Brazil, the courageous activism of people like Herbert Daniel and the involvement of many sectors of society in the process of democratization were important, especially after 1985.

One of Daniel's most uplifting interventions is his opinion on the widespread conception of HIV/AIDS as a terminal illness. He writes: "an AIDS sufferer tends to be referred to as a terminal patient with a short survival period. I'm as terminal as a bus station, full of hopeful arrivals and departures to the most incredible and exciting roads that lead to the living" (54-55). Despite the hardships that many people living with the virus encountered in the late 80s, Daniel believes that "maintaining hope is fundamental, as a therapeutic method" (42). Nevertheless, the author's take on embracing hope is not naïve or based on false assumptions of immediate change. After a lifetime of political struggle, Daniel is aware that political hope is a fundamental catalyst for social advancement.⁵⁴ Death does not consume his life. He emphatically says, "I will not accept a predetermined death. AIDS is no more than an illness of our time like any other, and I cannot agree . . . making it a synonym for the final day. AIDS is no more than a viral infection [that] . . . we will defeat" (54). Herbert Daniel does not intend to downplay the negative effects of the epidemic in thousands of Brazilians, but to emphasize how hope can be productive to foster change. The South American activist does not rely solely on his writing to fight against stigma and discrimination. For instance, Green's latest research on Herbert Daniel reveals that in 1989 Daniel participated in

⁵⁴ Daniel's reliance on hope is particular, his deployment of "educated hope is the enactment of a critique function. It is not announcing the ways things *ought to be*, but instead imagining what things *could be*. It is thinking beyond the narrative of what stands for the world today by seeing it as not enough (Muñoz and Duggan 278).

the Fifth International Conference on AIDS in Montreal, and in the Global Program on AIDS in Geneva, Switzerland (244). But the one of Herbert Daniel's most perdurable legacies on HIV/AIDS activism was the foundation of the non-governmental organization Grupo Pela Vidda (Grupo pela Valorização e Integração de Pessoas Vivendo com AIDS). Established in May 1989 in Rio de Janeiro and still active 29 years later, "Grupo Pela Vidda has sought to develop a sense of community between its membership and . . . the wider community. The group has gone about this work in several ways: through weekly meetings of the Tribuna Livre, a self-help group where people discuss issues related to HIV and AIDS; through community-based prevention activities, and through legal work and advocacy" (Aggleton and Pedrosa 343). During the last period of his life, Herbert Daniel dedicated a lot of his time to the development of his NGO, as well as fostering valuable relationships with other HIV/AIDS advocate groups in Brazil.

In "News for Another Life," Daniel states that for many HIV-positive people "the most frequent choice is to go undercover—a way of fleeing in order to die, since death is the only kind of life that society offers" (41). Although Daniel is aware of the many challenges to prevent the tragic deaths of so many in his community in the late 80s, he ardently believes that breaking the silence about HIV/AIDS is key to promote life. Ignorance only begets more ignorance. To interrupt this damaging cycle, those afflicted with the virus should be able to openly discuss their fears, demand their civil rights, become visible and resist injustice. Doubtful about the capacity of government and health authorities to fight against the epidemic, Daniel defends a model in which people living with the virus take part in the national conversation about HIV/AIDS (similar demands took place, for instance, in the United States thanks to the activism of the ACT-UP organization). Despite the generalization that portrays HIV as a gay illness, Daniel's conception of an active political community includes all members of society living with the virus. He explains,

“I learned that one can’t fight for half-liberties, and that there is not freedom without sexual freedom . . . I came to understand that living my sexuality openly meant demanding citizenship for everyone, not just those who are, or are said to be, homosexual” (55-56). In a moment of re-democratization of Brazilian society, AIDS activism intersected with a myriad of local social battles to advance social, racial and environmental justice after nearly two decades of military rule.

In 1989, Rio television station Rede Manchete broadcasted a documentary about Daniel’s efforts to provide education and support to HIV-positive people. Journalist Mônica Texeira interviewed both Herbert Daniel and his partner of 18 years Cláudio Mesquita. In this pioneering portrayal of a gay couple directly facing the many challenges of the epidemic, Daniel reiterates that “o preconceito mata mais que o vírus, a clandestinação mata mais que o vírus, porque as pessoas [no Brasil] não têm nem recursos materiais nem simbólicos para afrontar a doença” (n.p.). Concerned of the many challenges ahead to overcome stigma and prejudice in his country, Daniel considers it essential to overcome fears of mortality and rejection, and choose life, hope, and optimism despite the tragedy of epidemic: “I have spoken unceasingly of life with unfounded optimism. In the end, my well-founded pessimism says that life is no good and never has been . . . Yet there is no other way to found pleasure; we must not only tolerate life but sustain it . . . We haven’t been too fortunate in this venture. But I do think that one day we will succeed” (58).

Besides his hope and optimism, Daniel made a great contribution to the configuration of a local historiography of the AIDS epidemic in Brazil. In a moment of overwhelming silence and ignorance, his voice had an enduring impact in the development of effective national policies to tackle the epidemic well beyond his death. In an analysis of the epidemic during the last almost forty years, Galvão, Bastos and Nunn argue that “the most notable characteristic of the Brazilian response to HIV/AIDS has been the integration of prevention, treatment, and the defense of the

rights of HIV infected individuals” (3). They also explain that these successful policies were “strongly influenced by the interaction of civil society with nascent democratic institutions that stemmed from Brazil’s two decades long process of democratization” (2). In fact, in 1996, Brazil took a pioneering step by providing free access to antiretroviral medication to all those who needed it. The federal government has waged important disputes with pharmaceutical companies to break restrictive patents that could prevent the production of affordable generic drugs. Although Herbert Daniel died before seeing the implementation of these transformational measures, his activism was indeed a model of the type of policies that would change the social and medical landscape of the HIV/AIDS epidemic in the region. In *Vida Antes da Morte*, the last piece of writing is a postface written by Cláudio Mesquita, Daniel’s longtime partner. Mesquita died in 1994 just two years after Daniel’s passing. Mesquita finishes this collection of essays with the reminder of solidarity as an essential aspect of surviving the epidemic. He accompanied Daniel the last years of his life, providing support and love. Although Cláudio probably was not HIV positive during his relationship, he writes, “we have together in everything we do; even in AIDS. It couldn’t be no other way. We certainly won’t be anything but together in the face of death . . . now more than ever, we must continue to share life (60-61).

5.2 PEDRO LEMEBEL: *MARICONAJE GUERRERO*, AIDS AND MILITANCY

Four years after the death of Herbert Daniel, Santiago publishing house LOM Editores releases a remarkable collection of literary chronicles titled *Loco afán: crónicas del sidario* (1996) by Pedro Lemebel. In the book, the Chilean writer and activist narrates the urban stories of his transvestite friends (*locas proletarias*) who experience the scourge of HIV/AIDS in dictatorial and post-

dictatorial Chile. Characterized by his witty and campy style, Lemebel is a deft writer of urban chronicles. During many years, he would read them in his radio program “Cancionero” on Radio Tierra. From proletarian origins, Lemebel writes from the margins of society to assert his sexual and political difference in a country that still grapples with a traumatic past of violence and authoritarianism. Known for his many collections of chronicles such as *La esquina es mi corazón* (1994) and *De perlas y cicatrices* (1988), Lemebel, in an interview published in 2000, states that his preference for writing chronicles is rooted in their capacity to describe reality effectively, and to denounce injustice (El cronista de los márgenes 78). Distrustful of other prestigious literary genres (i.e. the novel—he only wrote one in his literary career—and the short story), the Chilean author crafted a remarkable number of chronicles written under his sharp queer lens. Strongly influenced by the popular jargon of the streets, Lemebel’s stories reveal the lavish diversity of Santiago’s and Valparaíso’s gay communities, their local culture and the challenges many face in conservative Chile. For Carlos Monsiváis, the Chilean writer’s work is part of a rich homoerotic tradition: “[a la que] pertenecen . . . el argentino Néstor Perlongher, el mexicano Joaquín Hurtado, el puertorriqueño Manuel Ramos Otero, el cubano Reinaldo Arenas y un tanto más a la distancia Severo Sarduy y Manuel Puig” (42). Lemebel’s work certainly establishes a dialogue with the literary works of these authors. For instance, the author’s only novel titled *Tengo miedo torero* (2001) shares a similar love story between an effeminate homosexual and a leftist, heterosexual guerrilla member; certainly, an inspiration of Puig’s novel *El beso de la mujer araña*.⁵⁵

However, Lemebel’s master genre is the chronicle. In the configuration of a Latin American literary corpus, chronicles have been adapted and developed to understand the complex

⁵⁵ In their book *Sexualidades en disputa*, Balderston and Quiroga discuss extensively the similarities of Lemebel’s literary project to Puig’s original model in *El beso de la mujer araña* (1976).

realities of the region. For instance, *crónicas coloniales* served as a domination tool of the Spanish Empire to map the vast conquered lands and stir fascination about the boundless possibilities of exploration in an exotic New World. For Monsaváis, Lemebel is a direct heir of the nineteenth century chronicle written by *modernistas* such as Amado Nervo and Enrique Gómez Carrillo (42). Although Lemebel may not share the sophisticated exoticism and aristocratic tendencies of the *modernista* writers, his chronicles reveal important tensions between Chile's marginal homosexual culture and the gay meccas of modernity. In *Loco afán*, for instance, Lemebel emphasizes these geographical asymmetries in the book's epigraph: "La plaga nos llegó como una nueva forma de colonización por el contagio. Reemplazó nuestras plumas por jeringas, y el sol por la gota congelada de la luna en el sidario" (2). Following the global circuits of the epidemic, HIV/AIDS is depicted as a new form of invasion from the colonial powers that wreak havoc on the lives of many in the Global South, including Lemebel's community of *locas* and *travestis* of Santiago's underground world. But besides this relevant critique that will be further discussed, *Loco afán* is also a groundbreaking text in the canon of *escritura seropositiva* in Latin America. Different from previous narratives that describe the epidemic in terms of tragedy, decay and even forced clinical seclusion (i.e. Bellatin's *Salón de Belleza* and Sarduy's *Pájaros de la playa*), this collection of chronicles relies on Lemebel's piercing humor and irony to endure the vicissitudes brought by the epidemic to his close-knit community. The Chilean writer and performer states, "Yo trabajo la enfermedad desde los cuerpos, con un gesto de desacato a la mirada cristiana que hay sobre la enfermedad a través de una mirada sarcástica del tercer mundo que no tiene otra opción que reírse para no asumir nunca el tatuaje del dolor" (7).

In *Loco afán*, Lemebel starts his narration with a chronicle about a holiday party in December 1972. In this gathering of *locas* and transvestites of different social classes and political

leanings in Santiago's UNCTAD, several critics (i.e. Poe Lang, Costagliola) have interpreted this celebration as the *last supper* before the tragic years of the military dictatorship and the HIV/AIDS epidemic. One of the most striking images in this narration is the pile of bones left out after their final banquet that serves as an omen of the devastation to come in the lives of those who attend the festivity. This chapter analyzes different chronicles that have remained understudied but are highly revealing of Lemebel's narrative project. Although Lemebel's urban chronicle writing is influenced by Perlongher's powerful voice, the Chilean's work is less theoretical. Rather than employing a highly academic jargon, Lemebel describes the daily experiences of a socially stigmatized community that keeps afloat through the strength, humor and resilience of its members. *Loco afán* gives a human face to those people who are afflicted with the virus, and whose struggles have often remained unknown or unrecognized. In fact, Lemebel offers a glimpse into Santiago's vibrant underground culture of non-hegemonic sexualities. His capacity to tell a good story and provide details about his friends' bustling urban life contributes to create empathy and social understanding in his readership. His clever prose does not follow the conventions of a typical medical gaze describing the tragic aftermath of the epidemic; on the contrary, Lemebel uncovers the *local* stories and social codes that reign his community showing resilience and a good sense of humor amidst personal and political disarray.

Analyzing Lemebel's work, Fernando Blanco states that "sus relatos hilan una etnografía poética del margen chileno de la ciudad" (57). Serving as an urban chronicler, Lemebel presents the stories of a variety of characters who inhabit poor areas of Santiago such as Barrio San Camilo and Zanjón de la Aguada. His work is also a re-examination of national history and political memory. As Vek Lewis explains, "Lemebel's texts . . . excavate and reanimate from the entombment of memory-long buried artifacts of popular culture from the era before Pinochet's

aggressive wresting of power from Allende's *Unidad Popular*, right through the period of the regime with its techniques of *olvido* (forgetfulness) and *desaparición* (disappearance), to the so called years of transition" (182). In *Loco afán*, these personal and political memories intersect; they serve as a valuable complement to understand the particularities of the HIV/AIDS epidemic in Latin America and Chile. For instance, in most of his literary work, Lemebel acknowledges the pervasive influence of global popular culture in his local community. His chronicles often portray the tensions that arise when forces of gay cosmopolitanism are emulated or set as the standard despite the historical and social singularities of his region. The chronicle "La muerte de Madonna" is a good example of these international exchanges in the age of AIDS. The story portrays the life and demise of one of the *locas travestis* living and working in *Barrio San Camilo*: Madonna. Adopting the name due to her devoted admiration to the US artist, Madonna is entering into a stage of decadence after being diagnosed with HIV. Her physical beauty is rapidly fading. The woman/man's only desire is to listen to music of her idol, and hold a picture of her favorite star in her chest (35). Lemebel transforms a traumatic event—the progressive debilitation of one of their own—into an amusing account of the extraordinary life of his friend, and the unity of his community to ease the grief of death.

But how is Lemebel able to create a humorous/ironic atmosphere out of such a painful event in the gay community? I contend that Lemebel does this by mastering the art of "throwing shade." Throwing shade is a term with roots in the Black and Latino communities in the US, especially in the drag-ball culture of the 80s. Although Lemebel obviously writes in and responds to a different social background, "throwing shade" often makes a subtle or stark presence in his writing. In gay culture, the term refers to the capacity of complementing or insulting another member of the community without being utterly confrontational or blatantly mean. It can be done

by the use of puns, sarcasm, double-entendres, and even libel that is not necessarily directed to hurt others, but to show the inventive and irreverent nature of queerness. As member of a social group historically discriminated against and scorned for its very existence, Lemebel's invective language does more than just being insulting. His mockery and his snide comments on the shortcoming of some of his "sisters" are able to solidify the identity of a community who is able to laugh and resist the social judgment directed to their difference in a time of crisis.⁵⁶ Captivated by the stardom and beauty of the American singer, the Chilean "Madonna" is a Mapuche transvestite who sings the English lyrics of the queen of pop without knowing what they really mean: "Repetía como lora las frases en inglés, poniéndole el encanto de su cosecha analfabeta . . . Su boca de cereza modulaba también los tuyú, los *miplís*, los *rimember lovmi*. Cerrando los ojos, ella era la Madonna, y no bastaba tener mucha imaginación para ver el duplicado mapuche casi perfecto" (34). Like many of the characters that populate the pages of *Loco afán*, the Madonna of San Camilo has to reconcile two different worlds: her local reality as a marginalized member of Chilean society, and her peripheral standing in comparison to the global circuits of gay culture she attempts to emulate. However, despite her personal fascination with foreign culture, the Mapuche Madonna is also remembered for her strength and political ideals despite being the victim of police violence: "Nunca les tuvo miedo a los pacos. Se les paraba bien altanera la loca, les

⁵⁶ Lemebel's chronicle "Los mil nombres de María Camaleón" shows how invective humor is used in his community. For the Chilean author, "de esto nadie se escapa, menos las hermanas sidadas que también se catalogan en un listado paralelo que requiere triple inventiva para mantener el antídoto del humor, el eterno buen ánimo, la talla sobre la marcha que permite al virus opacar su siempre viva sonrisa" (58). "El listado de chapas para renombrarse incluy[e]n un denso humor, un ácido acercamiento a 'esos detalles y anomalías' que el cuerpo debe sobrellevar resignado . . . En este caso el apodo alivia el peso, subrayando de luminaria un defecto que más duele al tratar de esconderse . . . De esa nariz hacha. . . De esa obesa calamidad. . . De esa boca de buzón. En fin, para todo existe una metáfora que ridiculiza embelleciendo la falla, la hace propia, única. Así la sobreexposición de esa negrura que se grita y llama y se nombra incansable, ese apodo que al comienzo duele, pero después hace reír a la afectada, a la larga se mimetiza con el verdadero nombre en un rebautismo de *ghetto*. Una reconversión familiar que hace de la caricatura una relación de afecto" (59).

gritaba que era una artista y no una asesina como ellos. Entonces le daban duro, la apaleaban hasta dejarla tirada en la vereda y [ella] . . . seguía gritándoles hasta que desaparecía el furgón” (33-34). Violence is directed to her non-normative body that defies rigid social and gender norms. This state of marginalization is reified due to her HIV-positive status in a historical period marked by the Chilean dictatorship. In an analysis on the conflation of the global and local in Lemebel’s writing project, Juan Poblete states that “la crónica emerge . . . como una forma global de reflexión local, [siendo lo] local asociad[o] a la conexión cuerpo/diferencia” (145). However, the “global” is read as an inevitable condition of the neoliberal age that puts in evidence the social asymmetries of those *locas sudacas* of the Global South. Their marginal position in the social ladder situate them in positions of vulnerability and social exclusion. Not only do most of the infected characters in *Loco afán* rely exclusively on their “chosen family” to stay alive, but their public personas are excluded from the circuits of power and influence. This, nevertheless, does not prevent them from creating alternative forms of sociality that parody dreams of splendor and fame. In this chronicle, Lemebel describes one of his early performances of *Las Yeguas del Apocalipsis* as a Hollywood, red carpet event: “Así el barrio pobre [de San Camilo], por una noche se soñó teatro chino y vereda tropical del set cinematográfico. Un Malibú de latas donde el universo de las divas se espejeaba en el cotidiano tercermundista. Calle de espejos rotos, donde el espejismo enmarcado por las estrellas del suelo recogía la mascarada errante del puterío anal santiaguino” (35-36). The Madonna of San Camilo suffers a gradual deterioration that is exacerbated after the real American singer cancels her concert in Chile during her South American tour: “La Madonna . . . nunca se repuso del dolor causado por esta frustración, y la sombra del SIDA se apoderó de sus orejas enterrándola en un agujero de fracasos” (39). For Lemebel, the social figure of the *loca* has to negotiate between an open dissidence to state violence and her “vulnerabil[ity] . . . to the seductions

of status that much of what comes from abroad—including AIDS—can bring her, thanks to the neoliberal-market regime that defeated Allende. . . . For Lemebel, AIDS represents the dark side of Chile’s idealization of, and orientation toward, the imported” (Fischer 201-02).

One of Lemebel’s chronicles in which he makes a masterful combination of humor and the macabre is “El ultimo beso de Loba Lámar.” Loba is a black *travesti* exotically described as a “lágrima de lamé negro . . . un brillo opaco entre las luces del puerto” (41). Despite being another victim of the epidemic, Loba Lámar “nunca se dejó estropear por el demacre de la plaga; entre más amarillenta, mas colorete; entre más ojera, más tornasol de ojos” (42). However, after the end of the fall season, her deterioration is more evident. All her friends (other *locas porteñas*⁵⁷) stay by her side, and offer to take her to a doctor or a hospice for AIDS patients. For Loba, a hospice is like a concentration camp for the lepers (43). Out of a situation of grief and mortality, Lemebel is able to spark amusement in his community. Afraid of a possible reclusion, Lámar can only think of the Hollywood classic *Ben Hur*, and the sad fate of the character’s mother and sister succumbing to leprosy. Bedridden and feverish, La Loba imagines herself in a Roman galley with Ben Hur, and orders her brothel girlfriends “remar . . . encaramadas en el catre que amenazaba hundirse, cuando las olas calientes de la temperatura la hacían gritar: ¡Atención, ramera del remo! ¡Adelante maracas del mambo!” (43). This is one of the striking characteristics of Lemebel’s chronicle writing on the topic of HIV/AIDS: his ability to create a humoristic and riotous atmosphere in a moment that would be otherwise characterized by solemnity and grief. Jerome Zolten states that “the intent of black humor seems to subvert pain through joking. It is the forced injection of jokes into tragic situations, and a perverse cause-effect reaction seems to be the goal. If happiness

⁵⁷ In his *Loco Afán*, Lemebel includes stories of a group of “locas porteñas.” These gay communities are from the major port city of Valparaíso.

provokes laughter, then perhaps laughter can provoke happiness” (347). In the last paragraphs of “El último beso de Loba Lámar,” black humor intensifies. After demanding non-seasonal fruits (peaches, melons) and orange ice cream of her generous friends and suffering from hallucinations, Loba dies with her mouth open: “La Loba quiso decir algo . . . modular un aullido en el gesto tenso de sus labios . . . todas la vimos con desespero para no ser tragada por la sombra . . . la Lobita quedó con las fauces tan abiertas sin poder sacar el grito” (45). Upset about the final countenance (facial gesture) of their lovely Lobita, all the *locas* gather to ensure that her friend dies with style and glamour: “no p[odía] quedar con ese hocico de rana hambrienta, ella tan divina, tan preocupada del gesto y de la pose” (46). First, they tightly tie a head scarf around Loba’s face to close her mouth shut. However, after waiting for a while, her open mouth turned into a *post mortis* macabre-smile (47). Angered by this setback, Loba’s friends decide to use really hot towels to correct the smile mishap. Soon enough, they realize that Loba’s smile has now turned into a “carcajada siniestra” (47). In unexpected twist, Tora, a transvestite who was a *luchadora* in her youth, “se encaramó sobre el cadáver agarrándolo a charchazos. Paf, paf sonaban los bofetones de la Tora hasta dejarle la cara como puré de papás . . . apretó fuerte los cachetes a la Loba hasta ponerle la boquita como un rosón silbando.” One of the aspects that could be potentially criticized about Lemebel’s sardonic and humorous accounts about people experiencing the harsh consequences of AIDS is placing the political considerations of the epidemic in the background. In a personal interview published in the book *Desde el infortunio*, Fernando Blanco criticizes a reading of *Loco afán* that “anula el padecimiento por medio del humor” (281). In response, Lemebel explains that the HIV/AIDS epidemic certainly has had a myriad of representations, including a humoristic one that has been adopted in his book of chronicles with a goal in mind:

se puede mirar el SIDA como un objeto análisis, como una metáfora . . . pero también como un chiste. Un chiste como le dicen aquí los travestis pobres acá en Latinoamérica: te pegaste el chiste, te pegaste la *gracia*. Eso tiene que ver con una construcción de contención local a la enfermedad. Tiene que ver con puestas en escena de estrategias, también tercermundistas, como formas de salvataje frente a una agresión que en primer término fue colonizadora. Colonizadora del deseo homosexual en los ochenta navegando hacia una dignificación de la poluta, de la mancha. La mancha de la plaga. (281-82)

Lemebel's use of humor and irony in his chronicle writing is not an attempt to deliberately erase memories of the epidemic. One can say that, on the contrary, it constitutes a political tool to voice the concerns and fears of the *loca proletaria* who encounters many layers of discrimination not only directed at her HIV/AIDS status, but also at her socioeconomic, sexual expression, and political standing. As Lina Meruane states: "Lemebel ve deteriorarse el lugar de la loca sudaca, malnutrida, amariconada, en abierta contradicción con un modelo masculino que se fortalece, codificando la diferencia y aunándola en un modelo aceptable" (181). This masculine model certainly is reinforced in the context of a military dictatorship rooted in deep conceptions of economic liberalism and hegemonic patriarchy.

In *Loco afan*'s "Carta a Liz Taylor (o esmeraldas egipcias para AZT)," a HIV-positive narrator from the deep corners of the Global South writes a letter to Hollywood diva Elizabeth Taylor. During the 80s and early 90s, the actress was a visible face of the HIV/AIDS human rights movement. Taylor did philanthropic work to support scientific research and supported the passing of the Ryan White Care Act in the United States Congress. Lemebel writes a chronicle in which the narrator—a *loca* suffering from AIDS—requests to the Star one of the Egyptian emeralds that

shone on her Cleopatra's crown. The narrator says, “. . . querida Liz, sin saber si esta carta irá a ser leída por el calipso de tus ojos . . . me suscribo a la gran cantidad de sidosos que te escriben para pedirte algo . . . no quiero morir, ni recibir un autógrafo impreso . . . solamente una esmeralda de tu corona de Cleopatra, que usaste en el film, que según supe eran verdaderas. Tan auténticas, que una sola podría alargarme la vida unos años más, a puro AZT” (55). This ironic request evidences the deep divide between the glamour of the philanthropic activism represented by famous global figures, and the fragile reality for the Chilean *loca* unable to benefit from the first timid social and medical advances from the North to tackle the epidemic. The narrator even teases the actress and questions Taylor's selfless intentions: “No quiero presionarte con lágrimas de maricocodrilo moribundo . . . [pero dicen] que los cheques para la causa AIDS, que tú regalas con tanta devoción, se quedan enredados en los dedos que trafican la plaga. Y dicen que tu piedad es pura pantalla, nada más que promoción fijate, como el símbolo de la campaña” (55).

Lemebel is aware of the inseparable nature of the epidemic and a politics of aggressive economical liberalism determined to profit in a moment of social unrest. Despite the courageous activism in many parts of the United States and Europe, the development of progressive policies to improve the lives of people living with HIV and AIDS faced significant obstacles ranging from state violence to strong economic interests. “Carta a Liz Taylor” is then part of a “programa poético . . . [que] consiste en subrayar los estragos sufridos por la comunidad local atrapada en un sistema capitalista que se ha tomado Chile” (Meruane 178). Lemebel's words reinforce this “poetic program”: “El SIDA vende y se consume en la oferta solidaria de la chapita, el póster, el desfile de modas a beneficio, la adhesión a las estrellas, los número de rifa y el super concert de homenaje *post-mortem*, donde el rockero se viste un rato de niño bueno, luciendo la polerita estampada con el logo fatal” (65).

In her analysis of Lemebel's writing, Andrea Kottow states: "la irrupción de la crisis del SIDA aparece, según Lemebel, como resultado del capitalismo neoliberal y es leído como síntoma de una transformación de las coordenadas . . . el SIDA . . . hace desaparecer a las locas con su estética local . . . e instala el ideal de belleza homosexual rubio y musculoso importado de EE.UU." (254). To a certain extent, for Lemebel, the AIDS epidemic is an invasion from the United States—a shared idea in the Latin America imaginary about the disease—a form of neo-colonization that would end the "habitat" of the *loca local*. As a direct response to this imperial disruption, the Chilean author writes "Crónicas de Nueva York (El Bar Stonewall)" describing his visit to the U.S. city in the 90s. In this urban exploration, he participates in the local gay parade displaying a little poster that read "Chile returns AIDS." "Crónicas de Nueva York" can be considered as the response of the Latin American *loca/marica* to the U.S. gay ideal of whiteness and virility still dominant in gay global culture. In his pilgrimage to the "Lourdes gay" of Stonewall, Lemebel describes the presence of muscular and fashionable gay men who overlook his presence: "Y cómo te van a ver si una es tan re fea y arrastra por el mundo su desnutrición de loca tercermundista. Cómo te van a dar pelota si uno lleva esta cara chilena asombrada frente a este Olimpo de homosexuales potentes y bien comidos que te miran con asco, como diciéndote: 'Te hacemos el favor de traerte, indiecita, a la catedral del orgullo gay'" (n.p). As an sharp observer of the city, Lemebel is critical of the pervasive commercialization of gay culture in New York that has neutralized the political potential of the community: "En este sector de Manhattan, la zona rosa de Nueva York donde las cosas valen un ojo de la cara, el epicentro del tour comercial para los homosexuales con dólares que vistan la ciudad . . . en esta fiesta mundial en que la isla de Manhattan luce abanderada con los colores del arco-iris gay. Que más bien es uno solo, el blanco" (n.p). As a way to reconnect to his local community, the *loca tercermundista* explores "otros

recovecos donde no sentirse tan extraño, otros bares más contaminados donde el alma latina salsea su canción territorial” (n.p).

Lemebel recognizes that this “masculine” homogenization of sexual dissidence is also taking place in his native Chile. His concern of the “extinction” of the *loca* is described in his chronicle “Nalgas Lycra, Sodoma Disco.” In this text, Lemebel describes the nocturnal environment of the gay bar in Santiago. It is almost an anthropological account of the male-dominant culture of contemporary gay culture.

El bar de la disco es para cruzar miradas y exhibir la oferta erótica en las marcas de la ropa favorita . . . Si no fuera por esa densa nube del perfume coliza; la adicción por el Paloma Picasso, el Obsession for men de Calvin Klein, el Orfeo Rosa de Paco Colibrí. Si no fuera por todos estos nombres que emanan del aérobico sopor, pasarían por hombres heterosexuales demasiado amigos . . . Si no fuera por el “Ay” que encabeza y decapita cada frase, podrían verse sumados a la masa social de cualquier discotheque, que viste mezclilla y polera blanca con el caimancito mordiendo la tetilla. (52)

The previous passage reveals the influence of global fads in a community that has decided to embrace a masculine model of identity. This embracing of virility allows them to pass as heterosexual men who enjoy the benefits of passing as a heterosexual individual: “los templos homo-*dance* reúnen el *ghetto* con más éxito que la militancia política, imponiendo estilos de vida y una filosofía de camuflaje viril que va uniformando, a través de la moda, la diversidad de las homosexualidades locales” (53). For Lemebel, this display of toxic masculinity is a frontal challenge to the well-being of the *loca*. He explains that despite the coaptation of homonormativity, “aún sobrevive un folclor mariposón que decora la cultura homo, delirios de

faraonas que aletean en los espejos de la disco [un] *last dance* que estrella los últimos suspiros de una loca sombreada por el SIDA” (53). In *Loco afán*, there is certainly an acknowledgement of the hardships and stigma directed to sexual diversities that do not live up to the ideals of homonormativity and social status. However, this collection of chronicles also shows another face of the epidemic mediated by feelings of resilience and solidarity. In the chronicle “Los diamantes son eternos,” a narrator interviews a gay man living with the disease who expresses hope despite the serious difficulties of living with epidemic in the 80s and early 90s. He says, “El mismo SIDA es una razón para vivir. Yo tengo SIDA y eso es una razón para amar la vida. La gente sana no tiene por qué amar la vida, y cada minuto se les escapa como una cañería rota” (69). These words resonate with Herbert Daniel’s take on HIV/AIDS. Lemebel, like the Brazilian author, is aware of the destructive effects of social death and discrimination, and the need of activism, humor and optimism for a more dignified life of those living with the disease.

As activists and public intellectuals of Brazil and Chile, Lemebel and Daniel have to face not only the challenges of a deadly epidemic, but also the pervasive negative effects of dictatorial rule in the attainment of an inclusive society with a heightened capacity to react to the tragedy of AIDS. How to recover from a traumatic past in societies where memory is fragile and partial? When Lemebel writes about the U.S. quilt project to remember the lives of those who left too soon due to the epidemic, he also emphasizes the complexity of recreating memory in Chile’s conflicted political history. He compares the local version of this quilt “archive” to the remembrance of the disappeared victims of the dictatorship. One of the AIDS victims named Víctor is compared to the Chilean folk singer Víctor Jara: “la primera lectura de este tapiz lo relaciona con Víctor Jara y su memoria de mártir en la dictadura. Otras connotaciones proclaman estas expresiones locales, un cruce político inevitable, las succiona en una marea de nombres sidados o desaparecidos, que

deletrean sin ecos el mismo desamparo” (95). In contemporary Chilean history, the social and political role of those who disappeared during in the Pinochet’s dictatorship is still complex and unresolved. Lemebel sees a correlation between the mourning for the death of those *locas* gone too young because of the epidemic and seldom remembered in society, and those who disappeared for having different political ideals. The Chilean author defies contemporary conventions through his mastery of popular language. As Juan Pablo Sutherland states, “Lemebel podría inscribirse como uno de los mayores exponentes del habla marica en la literatura chilena. Por ello, la crónica como medio privilegiado, se vuelve una señal certera de su opción por trabajar por géneros menores, géneros despreciados por el canon de la alta literatura . . . Lemebel inculca la lengua marica en el habla cultural, en la calle, en los medios torciendo la idea de lo políticamente correcto” (25). His *marica* writing opens a door to understand the complexities of sexual diversity in Latin American culture, and documents the capacity of community-building in a moment of social tribulation. Critical of the global networks of AIDS activism, Lemebel believe in the capacity of solidarity of his own local community despite their marginal social standing: “Así como existe la garra comercial del mercado AIDS, también sobreviven pequeños esfuerzos, cadenas de solidaridad y colectas chaucha a chaucha que algunos grupos de homosexuales organizan para paliar el flagelo. Podría decirse que estos precarios gestos brillan con luz propia. Se traducen en un mano a mano que hermana, que ayuda a parchar con nuestras propias hilachas la rajadura del dolor” (66).

Pedro Lemebel and Herbert Daniel are key figures in the history of literary representations of HIV/AIDS in Latin America. Despite their different life stories, Lemebel and Daniel share a history of activism and political dissidence that has influenced the modern discourse on HIV/AIDS in the region. Through their powerful writing, both authors show not only the evolution of the

epidemic in the late 80s and early 90s, but also the possibility of re-thinking the epidemic beyond the typical associations of death, decay and tragedy. A man with strong political convictions, Herbert Daniel makes a unique personal journey from his years as an outlaw guerrilla member to running for elected office during the reestablishment of democracy. Optimism and hope permeate his political writing, and reminds us of the importance of questioning the structures of power conferring meaning to other people's lives. Daniel is particularly effective in showing how HIV/AIDS is an illness that has been artificially attached to discourses of fear, exclusion and homophobia. Even today, his writing has not only political and social relevance, but an honest sense of positivity to fight against stigma and ignorance. In the case of Pedro Lemebel, the originality of his colloquial neo-baroque style in his *crónicas* serves as an original contestation over social control, heterosexism and negativity. Lemebel is aware of the dramatic situation of the HIV/AIDS epidemic and the sense of hopeless ruination that has left over an entire generation of gay men. The Chilean artist is able to create humor among desperation, and laughter among cries of lamentation. Both writers, from their specific national realities and worldviews, are able to create a movement of solidarity and queer/kin attachments to ease the traumas of the present and the past.

6.0 LUÍS CAPUCHO AND PABLO PÉREZ: AN EXPLORATION OF POST- ANTIRETROVIRAL NARRATIVES IN THE SOUTHERN CONE

In his analysis on the HIV/AIDS epidemic in Latin American writing, Alberto Giordano states that the virus has two stages of representation: “como enfermedad mortal o como enfermedad que podía volverse crónica, y, en consecuencia, a dos modos de representación y autorrepresentación de los enfermos como condenados a muerte o como portadores de un virus que les impone un cuidado continuo de sí mismos pero que no les fija . . . un término a sus existencias” (42). This chapter explores the transformation of the AIDS epidemic into a chronic illness subject to the advances of medicine, and the access of effective antiretroviral therapies. To study this period in the history of AIDS literary representation in Latin America, I delve into the works of Luís Capucho and Pablo Pérez. Both writers share a wide array of commonalities: both men are HIV positive and write about their personal experiences of surviving the epidemic after the introduction of effective combination antiretroviral therapies (ARTs) at the 11th International AIDS conference in Vancouver, Canada. The commonalities in their literary projects are not restricted to a depiction of the post-antiretroviral age, but also to a reliance on autobiography, erotic writing and bodily rehabilitation. Departing from the previous chapters developed in this dissertation project, the works of Luís Capucho and Pablo Pérez align to the temporality of the “survivor” that Gabriel Giorgi describes as a “nueva conciencia del ‘vivir con’ el virus” (49). After the untimely death of an entire generation of gay writers, Capucho and Pérez are the new bearers of a post-cocktail literature that interrogates aspects of health management, time and the new possibilities of rehabilitation and survival.

6.1 SENSUAL LIAISONS: EROTIC WRITING IN THE STREETS OF RIO AND BUENOS AIRES

From Niterói, Rio de Janeiro, Luís Capucho (b. 1962) is a Brazilian musician⁵⁸ and writer who published his first novel *Cinema Orly* in 1999. Illustrated by artist César Lobo, *Cinema Orly* is an erotic novel that tells the story of a gay man and his sexual adventures in an adult movie theater—Cinema Orly—in Rio de Janeiro. Located in the emblematic district of Cinelândia⁵⁹ in downtown Rio, this area of the city “transformou-se numa grande praça democrática, onde se encontra[vam] putas, travestis, trabalhadores, desempregados, e executivos atravessados pelas manifestações políticas e culturais ao redor” (6). Luís, a young Carioca man, engages in sex with many men in this movie theater, and enjoys a carefree culture of desire and short-lived erotic relationships. Capucho wrote the novel in 1997 after he contracted toxoplasmosis—associated with his HIV positive status—a condition that resulted in serious motor and speech deficits. In a interview with the author, he states his decision to write *Cinema Orly* was therapeutic: “quando eu escrevi o livro eu estava quase entrevado, não andava direito, não falava direito . . . eu tinha acabado de sair do coma então escrever era uma celebração da vida, de prazer” (n.p.). The protagonist of *Cinema Orly* is a man who relates to this movie theater in a deep intimate way. As he describes, “eu era apaixonado pelo Orly, pelo seu cheiro de homem, pela sua luminosidade, pelo seu jeito de cabaré, pelo seu encanto. . . Acalentava-me aquele monte de homens decididos a estarem juntos na penumbra fechada do cinema” (103).

⁵⁸ Capucho is a singer and songwriter of MPB (Música Popular Brasileira). His songs have been interpreted by famous stars such as Cássia Eller and Ney Matogrosso.

⁵⁹ Situated in the surroundings of the Floriano Square, Cinelândia housed many movie theaters in the last century. Currently, it is an important public place for political demonstrations in the city.

Similar to the erotic celebration of gay life in Rio de Janeiro, Pablo Pérez (b. 1966) is an Argentine writer from Buenos Aires who has explored erotic writing in his work. One of his novels *El mendigo chupapijas* (1999) was originally published as a series of pamphlets in Ediciones Belleza y Felicidad. In this “historia por entregas,” a young gay man named Pablo roams the streets of Buenos Aires in search of new romantic companionships and fast sex. *El mendigo* is also an exploration of BDSM⁶⁰ culture in Buenos Aires. An underground part of gay culture in the city, Pablo describes his incursions into a “leather tribe” with vivid visual imagery that resembles the homoerotic illustrations of Tom of Finland:⁶¹ “vuelvo mis pasos y me siento en un bar, frente a la plaza, al lado de tres franceses. Uno de ellos, de piel oscura está en cueros. Es grandote y musculoso, de cuarenta años con un piercing en la tetilla izquierda. Se me para la pija de solo verlo” (6). In the novel, Pablo establishes a sadomasochist/submissive relationship with two men Comisario Báez and José who attempt to fulfill their fantasies of domination over Pablo. The narrator always feels tempted to visit Baéz and describes his highly sexualized interactions: “Me recibió uniformado. Pantalón, campera, botas, gorra y guantes. Apenas llegué me arrinconó en el hall. Había sacado todo para tener una sesión” (4). Whips, ring gags, leather belts are all used in these pleasurable encounters that inform readers about the underpinnings of leather culture. Pérez’s novel has also been analyzed as a work intersected by a kitsch aesthetic. Juan Francisco Marguch has written extensively about this topic: “En pleno fulgor del delirio amoroso, las imágenes kitsch invaden el texto para describir la experiencia de ‘la media naranja’” (233). This search for a real

⁶⁰ BDSM is an acronym that refers to erotic activities involving bondage and discipline, dominance and submission, and sadism and masochism. Pérez often writes about BDSM and leather subcultures in the city of Buenos Aires.

⁶¹ Touko Valio Laaksonen best known as Tom of Finland (1920–1991) was a Finnish illustrator known for his homoerotic drawings usually depicting strong men in uniforms or biking outfits (leather jackets, pants and boots). His work is considered a staple art form for contemporary gay male communities. Most of his provocative illustrations have been published by the prestigious publisher of art books, Taschen.

romantic attachment amidst fast love, however, is often unrequited or unfulfilled for the main protagonist of the author's novels. Interestingly, *Cinema Orly* and *El mendigo chupapijas* were books published in 1999, depicting the gay sexual cultures of two major Latin American cities: Rio de Janeiro and Buenos Aires.⁶² Both literary projects focus their efforts in describing the urgency of fulfilling desire and gratifying sensorial experiences in the hustle and bustle of city life.

6.2 A TURNING POINT IN THE EPIDEMIC: AUTOFICTIONAL WRITING IN PABLO

PÉREZ'S *UN AÑO SIN AMOR: DIARIO DEL SIDA*

Sospecho que en caso de enamorarme no podría
seguir escribiendo esto que intenta ante todo ser un
diario sobre la búsqueda del amor, de la pérdida del
amor, del deseo y del miedo ante la muerte.

Pablo Pérez, *Un año sin amor*

Pablo Pérez and Luís Capucho, however, will move to a discussion of the HIV/AIDS experience in their novels *Un año sin amor* (1998) and *Mamãe me adora* (2012). In these literary texts, both authors combine highly autobiographical details with literary fiction to create alluring stories about living with HIV. Pablo Pérez's *Un año sin amor: Diario del SIDA* takes place from February to December of 1996. The main protagonist—Pablo—is a poor writer who lives in the house of his “mentally deranged” aunt Nefertiti. A narrative action that starts *in medias res*, the readership

⁶² In his essay “Literatura y sida: los nuevos monstruos,” Adrián Melo proposes a suggestive metaphor to represent the sexual voraciousness depicted in some gay narratives: “la metáfora del vampiro [es usada] como metáfora reivindicativa de aquel ser maldecido y discriminado por la sociedad . . . El vampiro es una de las figuras que expresan el carácter monstruoso, excesivo e ingobernable de la carne de la multitud. La peligrosidad del vampiro deriva, en primer lugar, de su desmesurada sexualidad. Su deseo de carne es insaciable . . . transgrediendo el orden de la unión heterosexual” (98).

doesn't know important details about Pablo's life. The preliminary details that we do know is that he is HIV positive and has been fighting lately to feel happy and healthy. Aware of his worrisome clinical diagnosis, the protagonist feels an urge to write in his diary to give some sense or meaning to the difficult times he is experiencing. Pablo Pérez, a HIV positive man, is given the task of writing the diary of a fictional alter ego that faces the disease in Buenos Aires during a transformative year for the epidemic. In the novel, later adapted to film by the moviemaker Anahi Bernieri,⁶³ Pablo lives an initial period of loneliness and resentment waiting for death as a simple process that will come to his life sooner rather than later. Worried about his inability to write as fast as he wants, he pens: "lo peor de todo esto no es lo que pueda escribir, sino el veneno que mi cuerpo destila, el veneno de la infelicidad" (13). Upset about his current condition, he will constantly document his physical and emotional transformation as the months go by. Argentine literary critic Alberto Giordano has situated Pérez's work as part a genre of "escrituras de yo" that also include other popular contemporary authors in Argentina such as Daniel Link and Raúl Escari. In fact, *Un año sin amor* starts with a direct reference to the process of writing: "Tengo que escribir. Hace tiempo que nadie me llama, hace tiempo que no escribo y cuando me siento a escribir siempre interrumpe algún inoportuno" (11). In the development of the novel, Pablo will also feel this need of nurturing his writing despite the constant interruptions related to his illness and his search for love. Writing is the possibility of personal confession. For instance, countless times the young man sense his approaching death: "Ahora recuerdo una de las cosas sobre las que quería escribir. Se trata de un presentimiento que me invade desde hace varios días: no pasará de este año" (41).

⁶³ The release date of the movie was 2005. The filmmaker won the Best Feature Film prize in the Berlin International Film Festival.

In March 1996, this is still a reality for many of HIV-positive patients, despite the presence of some medicines such as AZT that were able to prolong lives, but not at the level that the “cocktail” therapy would do later that year. In fact, Pablo writes at a landmark moment for the arrival of new effective medications that were not yet known to the narrator or his doctors. Writing then becomes an exercise to register reality before this is taken away. In Pablo’s case, his words serve as a testimony of an array of bodily symptoms: asphyxiation, skin diseases, fever, dizziness, and pain that he needs to describe as a way of understanding his inherent state of mortality. As Ross Chambers states discussing some of the characteristics of the HIV-positive journal genre: “for AIDS diaries... the need to construct significance through discursive ordering is far less urgent than a need to answer the question: how does it feel to be dying of AIDS? and a desire to make available to others, with some directness, the sense of disintegration the experience entails” (6). This is to some extent one of the main objectives of Pablo’s journal writing. He feels like a caged lion every time the disease prevents him from continuing his writing. His writing is a powerful tool to keep memories alive. Through the different entries that Pablo writes in his diary, the reader knows more about the protagonist’s past: his time in Paris, where his beloved sister would commit suicide, and where a man named Hervé,⁶⁴ who is a former lover of Pablo, also suffers the last stages of the viral disease. Alberto Giordano explains that “Pérez escribe porque desearía no estar enfermo, para quejarse del dolor y del miedo, para levantar testimonio contra la ineficacia de los tratamientos . . . y la falta de un buen médico capaz de tomar ‘las riendas de [su] asunto’” (45).

⁶⁴ Pérez here makes a fictional reference to the celebrated French writer Hervé Guibert (1955-1992). Guibert wrote about his experience of suffering of HIV/AIDS in Paris during the late 80s. A close friend of Michel Foucault, Guibert wrote the novels *À l'ami qui ne m'a pas sauvé la vie* (*To the Friend Who Didn't Save My Life*) 1990, *Le Protocol compassionel* (1991) and *Cytomégalo virus, journal d'hospitalisation* (1992).

Similar to authors such Néstor Perlongher and Severo Sarduy who question the systems of allopathic medicine, Pablo uses “alternative” therapies to feel better: “volvía a tomar las flores de Bach y de Bush que había dejado de tomar el año pasado . . . En agosto del 95, empecé el tratamiento homeopático con Yabhes y decidí dejar las flores” (58). Since his preferred “alternative” treatments do not improve his condition, Pablo decides to take AZT following the recommendation of his doctor after finding out that he has an extremely low CD4 count that is affecting both his respiratory health and his skin.

His diary entry on July 12th foreshadows the landmark transformation of a mortal epidemic to a chronic health condition. The young man writes: “Desde el congreso de Vancouver llegan esperanzas, pero tengo miedo de no llegar, otra vez mi presentimiento de muerte me invade. El doctor Rizzo me dijo que comenzaría el tratamiento con AZT, DDI y un inhibidor de proteasas, en agosto cuando le entreguen en el hospital esta última droga, de la que, aparentemente se hará cargo la Municipalidad” (83). Pablo is still unable to understand the transformative repercussions of these medical breakthroughs. His opportunity to live with/along the virus, and not die from it, transforms the conception of one of the deadliest epidemics of the twentieth century. Pablo’s life has been affected by the death of loved ones: “La muerte de Marcelo es otra herida, como lo fueron las muertes de Paula, de RV, de Vladimir de Bela. Estas muertes imprimen un carácter de sobreviviente que detesto. La sensación agotadora de estar luchando por vivir, cuando lo que quiero es disfrutar la vida, sin cuestionamientos” (82). Amidst an aura of depression and melancholia, Pablo wants to translate the diary of his former French lover RV (Hervé). He also writes to be remembered and—despite his illness—he explores the streets of Buenos Aires in search of sexual adventures to feel less alone. In *Un año sin amor*, pleasure, like writing, has a function of liberation or support in the face of loneliness and death. In a visit to his psychologist, Pablo

discovers that “el orgasmo lo remite a una sensación de vida” in the midst of a bleak reality marked by his near death. He then justifies his many sexual liaisons as a way to feel more alive in a moment of crisis. However, after his medical conversation with Dr. Rizzo in July, Pablo’s health slowly starts to improve despite his fears of not getting his protease inhibitors in time for his recovery. Despite initial fears of health deterioration, Pablo writes, “fui a buscar [mis] resultado[s] el otro día y el doctor Rizzo se mostró muy optimista con el tratamiento porque tengo menos de 10,0 KEq/ml (1,0 KEq es aproximadamente 1000 moléculas de HIV- 1 RNA)” (113).

This paradigmatic change paves the way for a new genre roughly defined as post-cocktail literature. In this “genre” death is not fundamental to the development of the stories. On the contrary, themes of survival, rehabilitation, and temporality transform the traditional discourses attached to the epidemic. For instance, Pablo goes through a personal transformation. After living in the shadows of unhappiness and fear, he seems hopeful about his now available future. The protagonist writes: “esta noche vamos a recibir 1997 en la casa de Gustavo, un amigo con el que después de muchos años de no vernos la amistad vuelve como una ola y empieza a recobrar intensidad . . . Todo sigue igual, ninguno de mis presentimientos se cumplirá este año, ni siquiera el acontecimiento extraño, de no ser que tome seguir viviendo como algo exótico” (131-32). Even the medical discourse seems to acquire new dimensions of hope and possibility. Pablo describes a lively celebration of HIV positive patients—including himself—with their physician: Doctor Rizzo: “cenamos juntos todos los pacientes con HIV del doctor Rizzo, convocado por él. Una demostración de amor que necesitábamos. Entre risas y vinos . . . nunca pensé que nos divertiríamos tanto, sobre todo con la nueva patente del auto del doctor Rizzo cuyas letras forman la palabra SEX” (132). Different from the attitudes of stigma and discrimination exposed in the

first years of the epidemic, the medical community has the potential to contribute to a positive transformation of those living with HIV, and work for their well-being and dignity.

6.3 NARRATIVES OF DISABILITY AND REHABILITATION IN POST-COCKTAIL LITERATURES: LUÍS CAPUCHO'S *MAMÃE ME ADORA* AND *DIÁRIO DA PISCINA*

Life writing about illness and disability promises to illuminate the relations among body, mind and soul.

G. Thomas Courser, *The Body and Life Writing*

Following this trend of post-cocktail literatures, Luís Capucho's *Mamãe me adora* is a creative representation of a road trip book. The novel is a journey of self-discovery, family attachments, and physical rehabilitation. The beginning of the story takes place in an impoverished area of the city of Niterói in Rio de Janeiro. After suffering the effects of being in a coma due to toxoplasmosis, Luís works on his recovery alongside his mother who supports him in every step of the rehabilitation. A middle-aged man, Luís not only faces the challenges of being HIV positive, but also other serious physical effects that have affected his speech and his mobility. In the birthday celebration of his mother who is turning seventy-five, Luís explains his path to recovery: "Usei bengala até o ano de 2000. Assim que comecei com as aulas de nataç o, meu equil brio se restabeleceu de tal maneira . . . que abandonei seu uso e comecei a sair da casa sem ela" (17). In the last years, his mother has been working in the recovery of his son helping him to walk again. Luís

understands that his disabilities put him in a disadvantage. He can face stigma and social rejection: “sabia que minhas sequelas tinham me deslocado, definitivamente . . . para um outro mundo fora, um outro mundo em que não participava com o resto das pessoas, senão como expectador” (19). As Debra Connors explains, “society commonly considers disabled people the embodiment of trauma, personal disaster or failure; ignoring the profound ways in which we are all interdependent, Western culture individualism stigmatizes or blames those who fail to be ‘self-sufficient’” (cited in Couser 177). It is indirectly implied that Luís is aware of this type of societal attitudes and has embraced many types of therapies to improve his physical capacities. Soon after her mother’s birthday celebration, they decide to go on a pilgrimage to the city of Aparecida do Norte in the state of São Paulo. Aparecida is a landmark destination for Brazilian Catholics. Thousands of devotees come every year from all over the country to visit the Basilica of the National Shrine of Our Lady of Aparecida; the second largest church in the world. This religious temple is dedicated to the principal patroness of Brazil: Nossa Senhora da Conceição Aparecida.

Both Luís and his mother want to visit during the Carnival celebrations in the city. They take the *ônibus* in Rio de Janeiro. During the long trip to the city, the protagonist narrates the vast landscape that he admires through the bus window. He starts with his own city: “Veio aquela sensação de voo, quando o ônibus pegou velocidade sobre a ponte e comecei a voar olhando para o mar da Baía de Guanabara . . . Olhando para o monstro suntuoso de pedra que é o Pão de Açúcar e para a rica cidade de Rio de Janeiro erguida nos baixos entre as montanhas à beira do mar” (33). As the bus continues its journey, Luís feels nostalgia for the poor villages of the interior of Brazil. His childhood was spent in one of those little towns: “Eu que vivi minha infância em pequenas cidades do interior, sou um conhecedor de pastos e hoje, com as sequelas da lesão cerebral que tive em 1996, devido à neurotoxoplasmose, sequelas das quais estou, contínua e lentamente, a me

safar, não poderia vencer-lhes as dificuldades . . . Sinto-me, sim, familiar à paisagem ensolarada, descampada, pobre” (37-38). The description of the landscape brings many memories to Luis’s life, recognizing the therapeutic capacity of traveling. In real life, Luís Capúcho visited the religious city of Aparecida with his mother (who later died), but many other details are fictional to enhance the lyric and narrative action of the novel. When interviewed about the centrality of the landscape in *Mamãe me adora*, Capucho stated that his inspiration can be traced to the importance of geographic description in Brazil’s foundational novels of the nineteenth century. His novel is, after all, an attempt to portray a core national tradition such as the pilgrimage to the city of Aparecida.

If Pérez’s *Un año sin amor* can be considered a transitional work in the corpus of Latin American literature about HIV/AIDS, I argue that Capucho’s *Mamãe me adora* is a post-cocktail literary narrative. When assessing what could be possible characteristics of this stage of HIV/AIDS representation, one could think of narratives in which the virus is not necessarily the central theme of the action. In addition, the focus is no longer on mortality, but on living and thriving despite the presence of the virus. In a post-cocktail narrative, there is no tragic revelation of a mortal diagnosis, but a coming to terms with a chronic ailment that needs care. Furthermore, disability is a factor that needs to be accounted for in this stage. The introduction of protease inhibitors changed the treatment of HIV/AIDS and has extended the lives of millions of people. During the worst years of the epidemic, cognitive or physical impairments caused by the virus were temporary due to the mortal nature of the disease. However, many of those who survived the epidemic also had to deal with permanent health problems. In his book, *Recovering Bodies: Illness, Disability and Life Writing*, G. Thomas Couser states:

as a physical and existential condition disability is both related to and distinct from illness. The two are often related causally—illness may cause disability and vice versa—yet the two conditions are different conceptual entities. The common sense of the difference is that illness is temporary and can be moderated by treatment, if not cured, whereas disability is permanent and can only be moderated by rehabilitation. (177)

During his road trip to Aparecida, Luís reveals he got into a coma the very year of the introduction of effective anti-AIDS medication. After he woke up, he required the support of his closest friends and his mother. Most importantly, rehabilitation was an essential step to recover part of his mobility and speech. In the novel, he talks about this personal journey:

depois que comecei a nadar, motivo pelo qual recibi alta da fisioterapia e da fonoaudiologia, sinto que meu corpo melhor se apruma quando estou de pé . . . Além de ter ganho músculos mais fortes em minhas costas e pernas, o meu tórax e o meu abdômen ficaram com músculos melhores definidos e isso faz que eu respire melhor. É por isso que minha voz, modificada após o coma, por conta da destruição dos neurônios responsáveis por sua mecânica, tem melhorado a cada dia . . . Acho que tenho conseguido que ela vá ficando melhor, fortalecendo a musculatura dos peitos e costas com os exercícios físicos, nadando. (62)

In the novel, Luís's detailed accounts of his rehabilitation should be considered as major milestones for a singer who lost his capacity to coordinate his speech permanently. In *Mamãe*, the main character says, “Minha voz é muito estranha, por causa da minha incoordenação motora . . . as palavras ficam lentas, explicadas, com a pronuncia exagerada pelo esforço em dizê-las . . .

Essa minha vagarosidade para falar, faz parecer que eu seja um débil mental, alguém que custasse a achar as ideias” (69-70). After his close encounter with death, Luís Capucho was unable to sing MBP (Música Popular Brasileira) for a long period of time. Frustrated for this new development of his life, he starts writing novels, the first one *Cinéma Orly*, published in 1999.

Post-cocktail narratives shouldn't be equated with a post-AIDS discourse. After the arrival of effective antiretroviral therapies, HIV/AIDS representation, especially in developed countries, has been deemed as no longer an issue despite the global challenges that the virus still poses in many international communities. As Paul Butler writes in his essay “Embracing AIDS: History, Identity, and Post-AIDS discourse,” “through a process of normalization [post-AIDS] discourse has worked to separate gay men and women from a crucial part of their past and ongoing history, treating AIDS at times as though it never actually happened” (95). In *Mamãe me adora*, the protagonist let us know that even when his life span has been extended thanks to the medical breakthroughs that came his way; his daily existence is constantly determined by a methodical consumption of medications: “Desde que comecei a tomar os terríveis rémedios do coquetel para AIDS, ouço dizer que a tecnologia médica é rápida . . . mas engulo, todos os dias, nos memos horários, há annos, essas ratanazas nojentas. E, desde entonces, tenho sido terrivelmente domesticado por elas, por seus horários” (80). The possibilities of survival are a reality, but they entail a coordinating regimen to take all the required medication despite any possibility of secondary effects or personal discomfort.

Asha Persson has analyzed this matter extensively, the researcher explains that “drugs, as is the case with antiretroviral therapy, have the capacity to be beneficial and detrimental to the same person at the same time. Yet the obscure pole of pharmakon is largely obscured by the scientific achievements and restorative paradigm of modern medicine, made possible of course,

by pharmakon itself in its antipodal guise” (49). This is certainly not an indictment on the important advances in the medical profession, but a reminder of patients’ fragility when considering effects of the epidemic. It is true that “the notion of HIV drugs as toxic and harmful has always been part of the HIV discourses at the community level . . . At the heart of this notion are the paradoxes of health engendered by the need to control the virus versus the life of the body” (59). Despite his personal traumas related to living with HIV, Capucho, following what could be a feature of a post-cocktail narrative, says: “não tenho medo do vírus HIV. Tenho medo é de não saber administrar o meu tempo e medo de perder em sua grandeza” (80). Although medicine has paved the way to help HIV patients to become undetectable, the social and economic meanings attached to HIV medication still show barriers of access deeply rooted in social and geographical differences. However, Luís wants to keep a sense of optimism, maybe the evolution of medicine will not require his taking all those “remédios” essential to his current survival. The author goes on to say: “me alegra o tesão que levo comigo. Esse tesão que me dá a condição de um morto-vivo é tesão que me libera de ser um cara mórbido” (96). The last passage shows a character who is able to embrace life and liberate himself from the fears of mortality and health administration. *Mamãe me adora* is a novel with a heightened affective dimension. Luís’s relationship with his mother is really close, and it is based on strong attachments of love and tenderness. During the duration of their journey to Aparecida, the protagonist reminisces about his struggles as a child living with his mother—a single woman—in a poor Brazilian village.

He also describes his mother’s patience when taking care of him during his worst physical state after the HIV diagnosis. His mother bathed him when he couldn’t and helped him walk around when he was too sick to do it on his own. The son describes his mother as a woman with a “maravilhosa ternura como norte . . . sua sabedoria e coração dadivoso fazem com que sintam

privilegiado em ter-lhe a companhia” (72). But this life of companionship ends with the narrative action. In the last pages of *Mamãe me adora*, mother and son arrive to the city of Aparecida do Norte in the middle of Carnival celebration. In a plot twist, Luís’s mother dies suddenly while visiting the Cathedral of Nossa Senhora de Aparecida. For the author, this novel is in part a farewell to his mother in a journey of love and faith.

In 2017, É selo da língua—a publishing house of São Paulo— released Capucho’s latest novel *Diário da piscina*. *Diário* is an experimental narrative. The book is a personal diary that starts in July 2000 and ends in April 2001. The writer of this diary is a gay man named “Cláudio” who writes about his weekly swimming lessons in a municipal pool in Rio de Janeiro. It is soon evident that this literary project focuses on the rehabilitation of the main protagonist in *Mamãe me adora*, now bearing a different name. In this novel, Luís talks about his predilection for swimming, “minhas sequelas ficam minimizadas na gravidade da água e porque consigo movimentar-me normalmente dentro de seu peso, nadar me melhora tanto” (63). As was noted previously, disability was a life-changing event for an artist who was a singer and a performer. When thinking about Luís Capucho’s writing, one has to consider that “when illness and disability are seen not so much as inevitable natural phenomena but as unexpected and perhaps disastrous events, they become noteworthy (and potentially) narratable. Bodily disfunction is perhaps the most common threat to the appealing belief that one’s controls one’s destiny” (Couser 9). In light of this life-changing event, Capucho (Cláudio) writes his emotional and physical progress while following the recommendations of his physiotherapist and swimming instructors. In a recent interview, the *Carioca* author explained that the highly objective style of the diary—lacking descriptions and focusing on repetitive daily actions in the municipal pool—was somehow inspired on his reading

of Graciliano Ramos's *Memórias do Cárcere*.⁶⁵ This 1953 autobiographical novel is an account of Ramos' imprisonment as a political enemy of the Estado Novo or Vargas Era. Although *Diário* does not have a direct political motivation, Capucho felt an attraction to Ramos's laconic writing style. For the author, Ramos's writing style in *Memórias* is simple, yet highly confessional. For Capúcho, one can feel the solitude and confinement of Ramos's cell in his writing. The author goes onto say, "como a minha situação física . . . eu acabava de sair da cadeira de rodas, andava de muleta, de bengala, falava como discordante, era uma situação assim quase de entrevado, então eu quis fazer um diário em que a escrita fosse de descrições simples, não muito aéreas" (n.p. interview). He wanted to create a concrete writing that could express his sensations of immobility and restriction.

Diário da piscina is a therapeutic narrative. The narrator tells his story of physical recovery through the act of swimming. In the first entries of the diary, one can perceive a character who needs the help of his instructors who closely guide him "exatamente como um passarinho que ensinasse ao filhote as primeiras tentativas de voar" (5). In one of the few reviews of *Diário*, José María Martínez accurately points out that "es evidente la preferencia de Capucho—como narrador—por los espacios cerrados, tan perfectamente acotados que el lector puede dibujar en su mente un plano de cada uno de ellos. Así la sala porno propicia al sexo anónimo de *Cinéma Orly* [y] el autobús [para la] peregrinación al Santuario de Aparecida de *Mamãe me adora*" (n.p). Now, in Capucho's latest work, we have the enclosed space of the pool. The place is a microcosm gathering all types of bodies: young and athletic or old and disabled. After removing the name of the real people who meet in the municipal pool, Capucho replaces those names with other ones

⁶⁵ Graciliano Ramos de Oliveira (1892-1953) was a Brazilian modernist writer and journalist. His novel *Vidas Secas* (*Barren Lives*) about the cycle of poverty of a *sertaneja* family in the Brazilian northeast is one of the most recognized books of the twentieth century in Brazil.

rooted in Roman nobility: Germanicus (Germano), Marcelina, Titus (Tito), Gaius (Caio), and the narrator of the story, Claudius (Cláudio) who, similar to the writer of the diary, had motor and speech impediments.

In the diary, there are two type of people: those who possess full health and physical ability—named after Roman nobility—, and other swimmers who deal with physical disabilities that they try to overcome in the pool. As the weeks go by, Cláudio feels a strong attraction to the healthy and masculine bodies of his swimming instructors. He wishes to improve his physical endurance through daily swimming exercises that he completes diligently. Only a month after he starts writing his diary, he describes his first signs of recovery: “Estou ganhando condicionamento, força, equilíbrio, um poquinho de músculos e minha fisionomia que estava uma fisionomia apática começa a ganhar expressão” (23). Month after month, he is able to complete even more laps and get better at swimming. For instance, on August 18th, Cláudio/Luís writes that he completed twenty-six laps, close a total of 780 meters (29). Also, as he follows his recovery, his interest in his male instructors grows more profoundly. He admires Lúcio’s beauty while he swims in the pool with a “sungá vermelha.” He considers him a “Deus tranquilo” (44). To a certain extent, it can be said that both his desire for recovery, and his attraction to the strength and virility of the male bodies in the pool, keep his interest in the community of the municipal pool. In August 2000, Cláudio writes that he is not using a cane to walk any longer, and in October 2000, he is able to complete thirty laps. By November, he is swimming 900 meters every day. He writes his exchanges with Marcelina, one of his instructors: “Estou nadando muito bem . . . Ao terminar a aula, Marcelina disse que nunca viu, entre seus alunos, alguém que tivesse os progressos que tive em tão pouco tempo. Isso entre os alunos que não têm os limites que você tem” (79-80). By the end of the diary, Cláudio is learning butterfly stroke, and his number of laps only increases day by

day. Reflecting on his own literary work, Luís Capucho states: “Sim, eu acho que *Cinema Orly* foi uma reabilitação interior o *Diário da piscina* foi uma reabilitação física do corpo” (n.p.). In fact, for the narrator, the moving waters of the pool provide a sense of lightness and security that he is unable to feel on the terrestrial ground. This was also considered during the binding process of the book: *Diário* is a book that invites the reader to dive into it as a pool. The first page of the book is a large blue rectangle that resembles a pool ready to swim into. In addition, the stitch binding of the book is blue and quite resembles the pool lanes where Cláudio swims. As a post-cocktail narrative, *Diário* is a novel of recovery that reveals how “personal narrative is an increasingly popular way of resisting or reversing the process of depersonalization that often accompanies illness—the expropriation of experience by an alien and alienating discourse” (Couser 29).

6.4 PABLO PÉREZ’S *POSITIVO CRÓNICAS CON VIH*: LIVING WITH HIV/AIDS IN THE NEW MILLENIUM

Pablo Pérez’s *Positivo: Crónicas con VIH* is the last narrative covered in this dissertation project. Published in 2018 by De Parado publishing house, *Positivo* is a collection of chronicles that were originally part of Pérez’s column “Soy Positivo” in the Argentine newspaper *Página 12*. *Positivo* treats a myriad of topics related to the post-antiretroviral age such as people living with undetectable viral loads, side effects from newer medication therapies, serodiscordant couples, and the clash between bareback sex and the use of condoms, among others. Nicolas Artusi explains, “a través de estas crónicas con VIH puede trazarse una elipsis del sida, desde aquel año 1990 en que Pablo fue diagnosticado mientras vivía en París, cuando la noticia era casi una sentencia de muerte, hasta hoy, el día en que el cóctel se redujo a una sola pastillita” (*La Nación*). Some of

Pérez's chronicles can be deemed as serialized fiction insofar as the readership could follow the continuation of some events or topics in his columns. Two years before the publication of *Positivo*, Blatt & Ríos published *Querido Nicolás* (2016). This book is a collection of letters written to his friend Nicolás that serves as a prequel to the events developed in *Un año sin amor*. This book covers the years of the author in Madrid and Paris during the 90s. *Positivo*, on the other hand, not only has fictional value, but an educational one as well. In many of the chronicles, Pérez addresses a gay audience about the importance of safe sex practices, the development of more effective antiretrovirals such as Truvada and Efavirenz, as well as the functioning of the Argentine medical system for those suffering from infectious diseases. The book comprises a total of 87 undated newspaper columns and an interview with the author's personal doctor, Dr. Rizzo. Each column is similar to a vignette giving life to a specific image, ideas or events. Pérez goes on to say, "me gustó la edición sin fechas, como si fueran todos cuentitos de la misma extensión, decisión que tomaron Mariano Blatt y Francisco Visconti de Editorial De Parado" (*Presentes*). These "short stories" show a contemporary portrait of the HIV/AIDS epidemic in a Latin American context. In one of the book reviews, it is stated: "las columnas, tan breves como contundentes, a la vez que funcionan como la mejor ficción, informan, barren con prejuicios, crean conciencia y, sobre todo, generan empatía con la población portadora de HIV" (*Página 12*). One of the most remarkable features of post-cocktail narratives is their capacity to show the everyday lives of people living and co-existing with the virus. Different from previous narratives that dealt with tragedy and death, this stage of the HIV/AIDS writing poses many interesting questions about love, sex, identity and health. Furthermore, the consolidation of antiretroviral therapies was a major intervention on the notions of temporality in the historiography of HIV/AIDS. The possibility of living longer was

transformational and paved the way for a new generation of survivors who deal with a myriad of aspects such as trauma, disability and rehabilitation.

There cannot be accurate information about human sexuality without a frank conversation about sex. In these chronicles, there is such a conversation from the very beginning. One of the first chronicles is entitled “El gusto de los forros.” It features the story of two gay men who have a sexual encounter in an adult movie theater. After they perform oral sex on each other, one of the men realizes that his sexual partner is HIV positive. Following a conversation complaining about the alleged concealment of partner’s status, the accused man explains that he has an undetectable viral load and that it is almost impossible for him to expose someone to the virus: “T . . . le contestó que no se preocupara que estaba tomando el cóctel y que tenía la carga viral indetectable. T nunca avisa en un encuentro casual que es portador de VIH, no le gusta presentarse así, entiende que el que quiere cuidarse debería tomar los recaudos . . . siempre” (15). T always uses a condom when he has sex with someone and doesn’t believe that skipping a condom during oral sex can carry any considerable risk of transmission—as long as seminal fluids are not shared. In a continuation of this story, Pérez writes “P en nuestra piel.” This column introduces the topic of serodiscordant couples—which refers to relationships in which one partner is living with HIV and the other is not. After developing a closer romantic relationship, “P” has a proposal for “T.” He would like to have bareback sex with his HIV positive partner since he is aware of the low risk of HIV transmission from this activity for those people who have no significant viral load. However, “T” seems to disagree with the idea. He says, “Mirá, P, vos sos seronegativo, tenés que cuidarte. ¿Te imaginás cómo me sentiría si te contagiabas algo? . . . Si querés, la próxima vez que vayas al hospital te aviso y me acompañás, así lo consultamos con mi médico” (20-21). “T” is interested in the well-being of his sexual partner. He also has had hepatitis B and C and is concerned about

possible transmission. Pérez brings to the table an important conversation that is still sometimes taboo due to lack of information.

Despite the stigma that still lingers on people living with HIV, serodiscordant couples who have a partner with an undetectable viral load have an extremely low risk of transmission. In 2017, the CDC (Center of Disease for Control and Prevention) in the United States informed that “across three different studies, including thousands of couples and many thousands acts of sex without a condom or pre-exposure prophylaxis (PrEP), no HIV transmission to an HIV negative partner were observed when the HIV positive person was virally suppressed. This means that people who take ARTs daily as prescribed and achieve and maintain an undetectable viral load have effectively no risk of sexually transmitting the virus to an HIV negative partner” (CDC, “National Gay Men’s HIV/AIDS Awareness Day”). However, in his writing about the virus, Pérez, for the most part, advocates the use of condoms to practice safer sex and avoid other STDs (Sexually Transmitted Diseases) besides HIV. Even today, the use of condoms is an effective tool to avoid common diseases such as syphilis, gonorrhea and HPV (Human Papillomavirus). This matter is further developed in Pérez’s chronicles “Con suero indoloro” and “Experto en pinchazos.” “P” has been having bareback sex with other men due to the refusal by his partner to do it until he suddenly gets sick with syphilis, forcing him to get an antibiotic injection after his partner gets ill with the STD as well. Although these chronicles have fictional elements of the difficulties of a romantic relationship, it also tries to provide information about sex to its diverse readership.

Following his style based on autofiction, *Positivo* also presents stories based on Pérez’s personal experience with HIV. In the first chronicle of the book entitled “Soy Positivo,” the Argentine author talks about the common experience of an HIV diagnosis for many gay men. Similar to Luís Capucho’s HIV-positive status to survive the virus, Pérez is emphatic on how good

emotions were central for his own well-being: “Es gracioso, porque al referirnos a nuestra condición de portador de VIH decimos ‘soy positivo’ y, a mi entender después de veinte años de convivir con el virus, puedo decir que esa fue la actitud que me salvó” (12). But even when a good outlook at life is essential for Pérez’s writing in his last book, he also writes about real challenges of living in a post-retroviral age. “Diario de la hepatitis” and “Diario de la hepatitis II” are writings about his diagnosis of hepatitis B and C in his treatment from 2009 to 2011. Due to his hepatic condition, Pérez has to use newer and more effective antiretrovirals (Truvada and Efavirenz). For a person who has such a closer daily relationship to taking medications, it is a difficult decision to go ahead with a “new cocktail.” Australian researcher Asha Persson writes about the role of medications in the historical development of HIV/AIDS: “taking medicines involves more than physical ingestion of pharmaceutical substances for remedial purposes. Embedded in and embedded through this act are cultural ideas about self and body, about illness and health, efficacy and responsibility” (46). This certainly resonates with Pérez’s relationship with the newer ARTs therapies. He fears the possibility of harmful secondary effects that could affect his health: “llego a mi casa y busco Efavirenz en Google para ver los efectos secundarios: sarpullido, vertigo, ansiedad . . . depresión, alucinaciones, paranoia y síntomas parecidos a los de la psicosis. Solo la idea de tomarlo me hace entrar en pánico” (74). Following the advice he gives his readers about HIV, telling them to do research and take control of their illness, Pablo asks questions, and most importantly weighs the experiences of his friends taking the medication. Some of them are in favor and some of them are against helping to feed his fear about adverse effects; however, he finally decides to give a try to this new therapy: “después de haberle dado todas las vueltas al asunto, de haber escuchado las experiencias —algunas terroríficas y otras alentadoras— de mis amigos y lectores con sus respectivos cócteles, después de los habituales malabarismos con los palos en la

rueda burocrática, empecé a tomar Efavirenz-Truvada” (85). In the history of HIV/AIDS, medications are known for their “ambiguous capacity, namely, how the sometimes unintended effects of their intracellular activity [which] can have profound corporeal and social implications” (Persson 46).

In *Positivo*, these social implications are further analyzed in the chronicle “Truvada y las 4 P del mercado.” Truvada is the commercial name of Emtricitabine/tenofovir which is a medication to treat and prevent HIV transmission. The drug was developed by the US pharmaceutical company Gilead Sciences which holds the patent in the United States until 2020. For this reason, the medication has a higher price in this country in comparison to other places of the world. When used as directed, Truvada is supposed to lower the risk of contracting HIV (in more than 90%). The drug, also known as PrEP (Pre-Exposure Prophylaxis), signified a cultural and social shift in gay communities especially in developed countries. It brought back to life sexual behaviors that were popular in a pre-AIDS time, namely bareback sex, despite the inability of the medication to prevent any other type of sexually transmitted infection besides HIV. Groups at risk (including gay men who are HIV negative) are able to take a daily dose of this medication as a preventive measure. In most Latin American countries, the medication has not been approved for use yet—as a prevention method—with the exception of Brazil, Chile and Peru. As an HIV positive man who has been forced to take medications for many years of his adult life, Pablo Pérez’s writing about the use of PrEP by HIV negative individuals distills cynicism and disapproval. He cannot understand why those who have been spared from the epidemic would willingly take a medication that could have so many different side effects: “Parece un chiste el tratamiento consiste en tomar Truvada todos los días . . . por ahora a la lista de potenciales clientes podemos agregar . . . [a los que] estén dispuestos a bancarse los efectos secundarios equivalentes

a la mitad de un seropositivo. La noticia tiene un lado bueno, seronegativos y seropositivos estaríamos casi en las mismas” (144-45).

The author is also critical of the evident economic interests of pharmaceutical developers that have control of a medication that could save lives. Pérez is critical of the marketing of a medication that, according to him, possesses the 4 Ps of the market: “si consideramos las cuatro 4 p del mercado las tienen todas a favor: el Producto ya existe desde hace años; la Promoción la están obteniendo gracias a la aprobación de la FDA, que fue noticia en todo el mundo; el Precio del tratamiento es de dieciséis mil dólares al año, en cuanto a la Plaza habrá que ver qué canal, sitio, distribución . . . o cobertura tendrá” (145). Critical of the high prices of a medication whose use was originally intended for people living with HIV, Pérez proposes the idea of donating the medicine to people who “actually need it” such as his Uruguayan brothers—who don’t have access to it—, serodiscordant couples and HIV positive people in general. Pérez’s voice is particularly valuable because it represents the opinion of an infected gay man who lives outside of the central networks of medical power and knows the challenges of democratic access to therapies.

Another important aspect developed in *Positivo* is described in the column “Todos somos positivos.” In this piece of writing, the author focuses on the theme of solidarity between those living with the virus and those who are not physically affected by it. Pérez acknowledges the stigma carried by the disease even in the present times: “En agosto . . . ONUSIDA y la Fundación Huésped [en Argentina] dieron a conocer el primer índice de estigma en personas que viven con VIH, según el cual, nueve de cada diez personas se sienten discriminadas” (105). Although his experience has been a positive one after revealing his status—he started publishing novels and became a public voice of the illness in Argentina—, Pérez is aware that knowledge and solidarity from those who are not infected is a most helpful tool to fight against stigma and discrimination.

In a public event to commemorate World AIDS Day, he listens to the words of an activist who explains: “la acción que esa misma tarde con un grupo de amigos, algunos seropositivos y otros no, que consistía en utilizar una remera con la leyenda tengo SIDA y compartir mates y besos con la gente” (106). They received all type of reactions from the public, love and rejection. But what stands out is the solidarity of those friends who support and understand the challenges for those living with HIV even in the present. Using a literary reference to Lope de Vega’s play⁶⁶ *Fuenteovejuna*, the author emphasizes the public support for a just cause in light of injustice.

During the administration of former president Mauricio Macri (2015–2019), Argentina suffered major cuts in social services including medicine. For instance, the Dirección Nacional del SIDA’s budget suffered a loss of more of \$1700 million pesos that created a risk to provide antiretroviral medications to 15.000 patients (*Página 12*, sociedad). In *Positivo*, Pérez writes about his personal navigation on the Argentine medical system. During many years, he had access to free HIV medication, and a small pension granted by the government due to limited personal resources. He later explains that these advantages stop after he is fully employed and is able to contribute to his own personal insurance. He mentions the importance of the Infectious Diseases Hospital “Dr. Francisco Javier Muñiz” in the maintaining of his health throughout the years. Pérez also fears the cuts and discuss about this matter in “Crónica de un recorte anunciado.” The writer comments on the importance of public health services to find a cure for his HIV/AIDS related conditions: “El doctor Rizzo fue quien encontró el diagnóstico y el tratamiento adecuado para mi enfermedad pulmonar obstructiva crónica (EPOC), que por más de diez años ningún médico había sabido diagnosticar, y me convenció además de empezar a tomar la medicación antiretroviral” (202).

⁶⁶ Pérez makes a reference to Lope’s celebrated verses: “¿Quién mató al Comendador? / Fuenteovejuna, Señor/ ¿Quién es Fuenteovejuna?/ Todo el pueblo, Señor.”

Pérez denounces a controversial government plan of closing down four Buenos Aires hospitals and move all units to Hospital Muñiz, a change that will create personnel cuts and less coverage for patients. Despite his obvious support for public health, Pablo Pérez is also aware of the effects of public bureaucracy in the health of patient. He quotes the words of Dr. Piovano: “Hay gente que llega al Muñiz con VIH y ahí muere, porque cuando van a buscar su medicación a su obra social le dicen este papel está mal hecho o esto se venció o esto tiene que ser firmado por no se quién” (205). Continuing his conversation on public health, Pérez interviews his doctor of many years. Two aspects are salient in this interview: the importance of establishing a close relationship between patient and doctor, as well as the negative effects of bureaucracy often caused by a lack of appropriate budget or medical personnel. Rizzo believes that in an age of democratization of medical information in many sources including the Internet, “[e]s bueno que el paciente esté informado, eso genera también en el médico la necesidad de explicar las cosas como son . . . la relación médico-paciente puede llegar a acercar las partes, que el médico tenga tiempo para poder generar la confianza” (210–11). This ideal, however, is difficult to attain in a current system with limited resources: “tanto en el sistema público como en el privado hay una cantidad desmedida de pacientes para la cantidad de médicos que hay en los consultorios. Es decir, un médico tiene una cantidad muy alta de pacientes que asistir y un tiempo muy limitado” (214).

As has been previously analyzed in this chapter, sex is a common theme in Pérez’s writing. His accounts about sexual aspects of gay life are frank and even informative. In an interview in the daily newspaper *Los Andes*, Pérez talks about the close relationship of sex to his own literary project. He says, “El sexo en la literatura me encanta, me divierte, tanto cuando escribo como cuando leo. Supongo que el sexo explícito a llamar las cosas por su nombre es para muchos autores un límite asociado a caer en el mal gusto o al pudor. En todo caso, hoy lo veo más asociado a la

autocensura que a la censura” (n.p.). This interest in sex is also reflected in the introduction of controversial themes in his writings. In *Positivo: Crónicas con VIH*, Pérez publishes a column entitled “¿Es un Bug Chaser?” He comments about a personal pick-up experience with a gay man who has sex with others without protection and wants to have bareback sex despite knowing his HIV positive status.

Pérez compares his personal posture to *bug chasers*—a controversial practice among some gay men who purposefully seek to become HIV positive through unprotected sex from a positive partner. The column is certainly informative, not only to gay men, but to the general public. Probably knowing the negative effects of demonizing a group, we know that—despite his advocacy for the practice of safe sex—Pérez doesn’t want to vilify a specific group. He writes: “siempre opiné que los que cogen a pelo tienen un comportamiento autodestructivo, y es sobre todo esto lo que me distancia de ellos. ¿Pero si soy sincero conmigo mismo si teniendo hepatitis B y C sigo tomando alcohol, y con una EPOC sigo fumando? No soy el único que recurre a la frase ‘de algo hay que morir’ para justificarme y hacer lo que me da la gana” (165). Even when “bug chasing” is a risky way of HIV transmission, the author understands that demonizing specific sexual behaviors is an ineffective way to prevent the spread of infectious diseases in the most vulnerable communities. Pérez’s columns in *Página/12* are not only a glimpse into a personal experience of living with the virus, but also an informational resource to better understand the social and medical complexities of a virus that has vexed contemporary society for almost four decades. I close this analysis with a positive passage of Pérez’s book that reminds us of the continuation of life and the myriad of personal possibilities during the antiretroviral age:

Un amigo solía decir que sí tenía que convivir con el virus toda la vida, prefería hacerse amigo y aceptarlo. . . .aunque dudo que puedo hacerme amigo de un virus

que me obliga a tomar medicamentos de por vida, no me queda otra que aceptar la realidad con la que vivo hace ya 22 años. Algunas de mis estrategias son . . . tomar los medicamentos, aceptar la ayuda de mis amigos cuando me la ofrecen, escaparme cada vez que puedo a un lugar dónde respirar aire puro. . . y seguir disfrutando del sexo. (175)

After all, living with the virus is not a dead end any longer, but a possibility for growth, change and personal transformation.

This dissertation project is an exploration of the transformations of the HIV/AIDS epidemic throughout the last forty years. Literature has been a valuable medium to depict many different personal and public experiences of living with HIV/AIDS in Latin America. This chapter analyzed a turning point event in the historiography of the virus: the arrival of highly effective antiretroviral medications in 1996. As a region connected to the rapid changes of a globalized world, Latin Americans also benefited from new medical breakthroughs that would change the face of the virus permanently. Undoubtedly, gay literature was directly influenced by the harsh realities of an epidemic that caused traumatic wounds in queer communities. The first chapters of this project showed how different literary genres were used to write about mortality, trauma, and melancholia. The 80s and 90s were decades of international transformation that were exacerbated by social and political crises during the implementation of the foundations of the current neoliberal age. The last chapter of this dissertation project is an analysis of two South American writers with similar literary projects: Pablo Pérez and Luís Capucho. Both writers identify as HIV positive gay men who had the chance to live during the antiretroviral transition. Different from most of the authors covered in the first chapters of this thesis, Pérez and Capucho are still alive, creating their own artistic projects that are indubitably related to the progression of the disease in their lives. As

was mentioned, post antiretroviral narratives are an exploration of contemporary health systems, mental and physical rehabilitation and the social and temporal consequences of extended survival. Rather than focusing on a past of mortality and trauma, this new literary age poses exciting questions around sexuality, identity and second chances. In the case of Luís Capucho, the author gives a voice to the reality of disability affecting to those who suffered permanent bodily damages after an HIV/AIDS diagnosis. His story is one of resilience and rehabilitation. His motor and speech disabilities were all too harsh to face for a man who was a singer and a voracious lover. His autofictional writing provides a path to understand a lengthy process of physical and mental recovery. In the case of Pablo Pérez, his courage to tell his personal story turned him into a recognized leader and speaker on the evolution of the epidemic in his country. Written during the controversial period of *Menemismo* in Argentina, *Un año sin amor* is maybe one of the most widely known pieces of literature related to HIV/AIDS in the region. Its importance, however, is not only linked to the landmark moments that take place during the narrative action, but also to the possibility of ending stigmas related to sexual behaviors and desires. Pérez's writing project does not follow chronological order but a queer temporality that attempts to cover the personal and fictional gaps of his story. Taking advantage of his participation in one of the most popular newspapers in Buenos Aires, Pérez pens a vibrant series of columns that were later published as *Positivo: Crónicas con VIH*. Exploring contemporary concerns for most gay men such as HIV prevention, serodiscordant couples, bareback sex in the age of Truvada, and the modern possibility of undetectable viral loads, his chronicle writing addresses current debates that have dramatically transformed the way people think about HIV/AIDS.

7.0 CONCLUSION

For groups constituted by historical injury, the challenge is to engage with the past without being destroyed by it.

Heather Love, *Feeling Backward*

This dissertation is a transnational cartography of one of the most dramatic epidemics of modern history: HIV/AIDS. The project delves into a wide variety of narratives representing different stages of the epidemic. In the 1980s, queer and other marginalized communities around the world faced insurmountable death and loss. In mid 90s, the development of antiretroviral therapies contributed to tackle the stigma of mortality and loss previously conferred to the disease. Nowadays, despite social and medical progress, contemporary society still places stigma upon those living with the virus in an antiretroviral age of prevention and medicalization of life. Writing about HIV/AIDS is not a simple thing to do. The epidemic is a politically charged social phenomenon that has modified the relationality of gay communities of the past and the present. Not only have queer communities learned to face the injury of hate and rejection, but also make sense of a past in ruins. In his analysis of the current neoliberal order, Korean contemporary theorist Byung-Chul Han states that our current present is not an immunological age seeking to discipline abject bodies cursed by disease and shame. On the contrary, for him, “from a pathological standpoint, the incipient twentieth first century is determined neither by bacteria not by viruses, but by neurons [depression, burnout syndrome]. They are not infections, but infarctions; they don’t follow from the *negativity* of what is immunologically foreign, but from an excess of *positivity*” (1). Although the challenges of the immunological age are far from over, we

indeed live in a world full of ideas of self-actualization and positivity. The political potentiality of queerness has been neutralized by this trend of consumerism and endless social progress—an advancement that despite its symbolical importance often ostracizes those who carry an additional stigma of difference: for instance, queer lives who resist gender normativity, who are poor, foreign or disabled.

Acknowledging the reality of a queer present bounded with greater acceptance and positivity—usually taken for granted or moderating the many challenges still ahead, this dissertation was an exploration of an affective archive from queer men who decided to represent a moment of trauma and injury in their lives. This project contends that in order to understand and better face the challenges of the present, we need to face the revenants of the past. The genre of *escritura seropositiva* in Latin America helps us to understand the complexity of the political and social configuration of an epidemic that was initially not only seen as a “pink cancer,” but also an invasion from the main centers of modernity. A generation of gay writers wrote about their viral experiences or those who live them, and left a powerful testimony for the future. Starting from this illusive conception of futurity, this project turns back to the past to memorialize the death and wander through the ruins of what has been lost. The diaries, testimonies, poetry, correspondence and novels analyzed in this thesis help us to make sense of how politics and emotion are intertwined when trying to understand the consequences of the epidemic in the region. Exploring an archive of AIDS is a highly emotional task. It is an exploration of the traces of the past often surrounded by feelings of pain, sadness, shame and defeat. It is the bodily experience of reading a moment of personal impasse and downfall. But amidst the ruin, negativity can also serve as a generative force of change and dignity. In the progression of this dissertation, *negativity* has also the potential for political transformation and queer community-making. We cannot fully

understand the progression of our political future without taking into consideration the struggles, idealizations, disillusionments and traumas of the past.

Seeking to build innovative critical points of view, this thesis examined the archive in a comparatist way. This integration of writers and literary projects contributed to interesting readings of the similarities and differences in which writers face the epidemic. For instance, in the first chapter, José Ricardo Chaves and Claudio Zeiger write about the social and political crisis of the onset of the epidemic in Costa Rica and Argentina. We learn how similar were the tactics of containment, ignorance and violence that affected the lives of many gay people in Latin America living in a historical moment of personal and social crisis. Despite the challenges and rampant homophobia, *Paisaje de tumbas pintadas en rosa* and *Adiós a la calle* are two literary projects that reveal how alternative communities of care (*queer kinship*) and political activism can be built out of the overwhelming challenges for gay people in the 80s and early 90s.

The analysis of Abigail Bohórquez's and Severo Sarduy's literary works in the second chapter exemplified the collapse of an aesthetic of desire and the inability to overcome the impasse of the epidemic. Bohórquez's playful eroticism of the neo-pastoral turns into a tragic encounter with the genre of the elegy in *Poesida*. While, Sarduy's cosmologist in *Pájaros de la Playa* witnesses the cruel deterioration of life, passion and vitality in the *casona colonial* now resembles a panoptic center of pharmacological control. The third chapter was an intimate journey to the power of memory and evocation. The exploration of Néstor Perlongher's and Caio Fernando Abreu's personal letters was a worthwhile endeavor to explore the artistic and political ideas of both writers in a moment of crisis. This chapter revealed how emotion plays a central role in the process of letter writing, and how communities of care and communication were essential for those who were on the verge of death. Delving into both epistolary archives helped us to better

comprehend the diverging ways of representing AIDS by both authors in the last stages of their lives. Perlongher engages in a close spiritual relation with *Santo Daime*, and other mystical manifestations that seemed to diverge from his previous “activisms,” and Abreu’s politics of hope and evocation in the last months of his life foreshadow a more combative, political writing that turns rage, shame, and mourning into political action.

In fact, the fifth chapter was a powerful exploration of political writers and activists Herbert Daniel and Pedro Lemebel. Despite their contrasting representations of homosexuality and same-sex desire, Daniel and Lemebel build emancipatory practices of resistance from a world in ruins. Daniel’s political commitment as a former guerilla fighter in Brazil permeates his inspiring writing, brimming with a sense of self-dignity and hope to free us from the ever-mounting influence of fear, discrimination and despair. His writing serves as an example of social vindication and restoration of rights. By the same token, Lemebel’s *mariconaje guerrero* serves as antidote to the discourses of hate and reminds us of the strength and autonomy of Latin American *homosexualities* to narrate their own history of the epidemic.

The last chapter of this dissertation intended to be a bridge between past and present. Setting the analysis in the transition moment of the arrival of antiretroviral therapies in 1996, the narratives of Brazilian Luís Capucho and Argentine Pablo Pérez serve as contemporary reminder of the importance of the social and political struggles of the past for their present. Capucho’s autofictional work is an exploration of the obstacles of disability and the efforts of rehabilitation after suffering the most adverse effects of AIDS. His writing is confessional and brave, and help us to understand what does it mean to live in a temporality of survival after the worst years of the epidemic. In Pérez’s case, his centrality as a public voice for the rights and education of people living with HIV in his country allows us to include a contemporary witness sharing, not only the

period of antiretroviral transition in 1996, but the current pressing challenges of living with the virus. The author brings to the table important discussions on the democratic access to medication in today's crumbling networks of care in many Latin American countries, as well as the timely introduction of current debates and life experiences in HIV-positive communities such as being part of a serodiscordant relationship, the surge of bareback sex in gay men, and the importance of building communities of affect and resilience to thrive despite the crises and impasses of the present.

This dissertation is a complementary intervention in the existing bibliography of HIV/AIDS literary studies in Latin America. Building from a rich genealogy of queer writers in the region, the thesis makes a meaningful exploration of lesser-known authors— José Ricardo Chaves, Abigael Bohórquez, Herbert Daniel and Luís Capucho—whose works are read and analyzed in light of popular authors in the gay canon such as Pedro Lemebel and Severo Sarduy. This project is both a recognition of their alternative voices for a more inclusive definition of *escritura seropositiva* in Latin America, and a temporal and transnational effort to think critically about the potentiality of the past in our queer presents and futures.

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