

DAVID LEVITHAN AND GABRIEL DUCKELS

IT SEEMED LIKE AIDS WAS ALWAYS COMING FOR ONE OF MY MOMS FRIENDS AS A STRANGER GETTING HER BACK TOGETHER

THEY I THOUGHT WERE GOING TO STAY HERE HOPE THAT ONE DAY WE WOULD VIEW THE VIRUS AS THE CULPRIT AND NOT THE PEOPLE IT STRIKES

BY THE TIME I TURNED FOUR I HAD LOST FOUR PEOPLE IN MY LIFE TO THE EPIDEMIC

THE LIES AT LAST WERE GONE THEY WERE REPLACED BY PAIN BUT THAT PAIN WAS HONEST AND THE HONESTY FELT GOOD AND RIGHT

IMAGINE LOSING SO MANY FRIENDS SO MUCH OF YOUR COMMUNITY. IMAGINE WONDERING WHY. IT'S NOT LIKE WE ASKED TO BE STRONG WE JUST HAVE TO DO IT. THIS ALL HAPPENED BEFORE WE HAD ANY REAL QUEER HERSES

IT IS A STORY DEFINED BY DOOM AND DEATH. SUDDENLY IT FEELS LIKE ALL THESE PEOPLE WHO HAD DIED OF AIDS WERE ANGELS AT MY SIDE THEY HAD MY BACK. BULLGANE ME A HUNGER TO LIVE

THE ONLY REASON SO MANY SURVIVED WAS BECAUSE PEOPLE WITH THE QUEER refused to roll over and DIE. WHEN PEOPLE SPOKE ABOUT AIDS THEY NEVER THOUGHT ABOUT WOMEN WITH AIDS WHO GET MARRIED MUCH LESS

IT WAS JUST AS THERE WAS NO OTHER WORLD SHE WAS FIGHTING DIFFERENT AND INTERSECTING FORMS OF DISCRIMINATION. ALL THE FEAR I'D PUT BEHIND TO BE REPLACED BY A BOTHER FEELING.

WE WERE JUST GAY MEN, AND WE WERE JUST FOR WHITE FOLKS LIVING IN LARGE AND/OR COASTAL CITIES. WE HAD BEEN BOWDED BECAUSE WE CHANGED THE WORLD

THAT MASS DEATH EXPERIENCE AND THE INDIFFERENCE WE FACED IS SO IMPOSSIBLE TO IMAGINE. FIND YOUR VOICE SO FAR GREATER. THERE WERE HUMOROUS TIMES, BUT MOSTLY? IT WAS LIKE BEING IN THE ARMY

WE'VE BEEN PART OF A MOVEMENT THAT ACTUALLY MADE THINGS BETTER. HEARING THAT YOU ARE GOING TO DIE BY THE TIME YOU ARE SIXTEEN, YOU CHANGE FOREVER

WE ALL THOUGHT WE WERE GOING TO DIE. SOME OF US DID. WE STARTED TREATMENT / RESULTS WERE FINE AND WE WERE FINE

QUEER PEOPLE HAVE ALWAYS BEEN ON THE FRONT LINE OF THE CRISIS. WE HAD NOTHING. NOBODY CARED.

FOR ME, THE CHOSEN FAMILY WAS SOLIDIFIED THROUGH HER. IT GIVES YOU THE KNOWLEDGE THAT IS POSSIBLE.

ALL OF US MATTERED EVERY ONE

WE ALL GOT TO GO ABOUT US. WE HAD DEFINED A PURPOSE AND HAD TO STAY DEAD. LIFE IN THE FRAGMENTS OF THEIR LIVES ARE BROKEN THAT OUR OWN BACKS TO U.S.

I STARTED TO FEEL BLESSED TO HAVE BEEN BORN IN A TIME WHEN HIV COULD HAPPEN TO ME AND I COULD KEEP LIVING. I REMEMBER LAUGHING I REMEMBER FEELING LIKE I COULD TRUST HIM. WE'VE BEEN TOGETHER EVER SINCE.

YOU ARE FAMOUS FOR HAVING A DISEASE THAT SCARES A LOT OF PEOPLE AND WILL LIKELY KILL YOU BEFORE YOU GRADUATE. THERE WAS STILL NO HOPE UNTIL 1995.

HIV GIVES US AN ACTUAL MATERIAL REASON TO VALUE THE CONNECTIONS WE HAVE WITH EACH OTHER. EVERYBODY DIED BUT SOME OF US LIVED.

IT'S HARD FOR PEOPLE TO UNDERSTAND HOW WE SURVIVE HOW WE THRIVE. WE JUST CALLED HER MOTHER. WE HAD TO DO IT OURSELVES

I HURT BECAUSE OF HER ABSENCE. THE OPPOSITE OF HURT IS HOPE. I CONTRACTED HIV AFTER MY FIRST SEXUAL EXPERIENCE. IT WAS 1986. NO HOPE MEANT NO FUTURE. A STORY OF WHAT COMPASSION AND RESISTANCE CAN DO.

AIDS IN AMERICA

RHCBSchoolLibrarians.com

DISCUSSION GUIDE



Alfred A. Knopf

ABOUT THE BOOK

The AIDS crisis in America is complex and composed of countless individual stories of grief, love, and advocacy. Its history shows the power of youth activism, how creativity and community can be vehicles for social change, and how bigotry and misinformation can lead to inequality in care.

The early days of the AIDS crisis saw LGBTQ+ and other marginalized communities making strides in the fight for equality. As many people in positions of power were slow to act or actively didn't pay attention until their own communities were affected, the fight for equality turned into a fight for their lives. Grassroots efforts filled in gaps where mainstream medicine and politics failed, and over time, a cultural shift of awareness emerged, which led to more research and more treatments. Amazing medical breakthroughs have changed the disease from a death sentence to one that people can live full lives with, but there are still people dying because of HIV/AIDS today because they can't access the care they need. The fight may have begun decades ago, but it is not yet over.

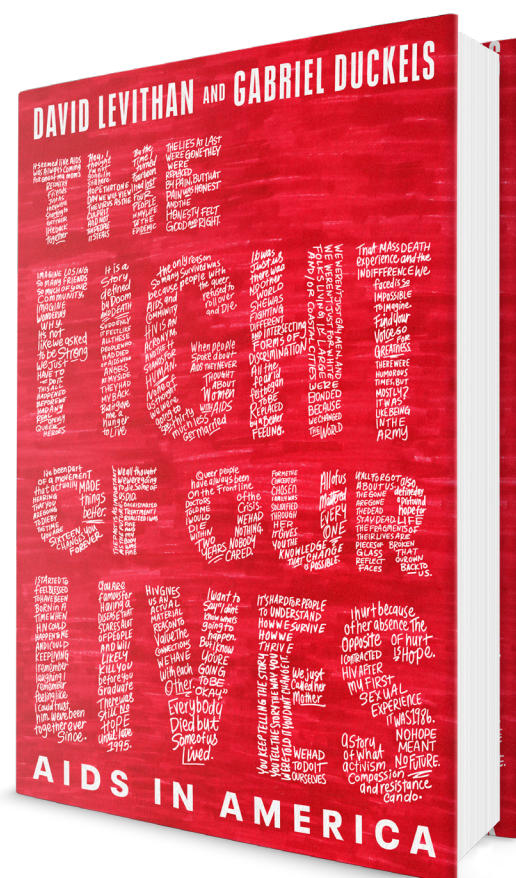
Award-winning author David Levithan and University of Cambridge PhD Gabriel Duckels present a history of the epidemic for people who were not alive at its start, touching on key moments and figures as well as providing an oral history from everyday people whose lives were deeply affected by HIV/AIDS. Threaded throughout are poems, essays, and other creative works in addition to first-person interviews and narratives.

ABOUT THE AUTHORS

THIS SHOULD SAY:

DAVID LEVITHAN is the author of several books for young adults, including Lambda Literary Award winner *Two Boys Kissing*, *Every Day*, and *Boy Meets Boy*. In 2016, David received the Margaret A. Edwards Award for his significant and lasting contribution to young adult literature.

GABRIEL DUCKELS is a writer and scholar based in Texas. He holds a PhD in education from the University of Cambridge and teaches at Texas State University.



PRE-READING

This is a story of what fear, ignorance, and prejudice can do.

It is also a story of what activism, compassion, and resistance can do.

It is a story defined by doom and death.

It is also defined by a profound hope for life. (p.1)

We are going to ask you to start here:

Imagine losing so many friends, so much of your community.

Imagine wondering why.

Imagine finding a way to fight back. (p. 2)

The authors ask you to put yourself into a certain mindset before reading the rest of the text. Take a moment now and consider how you would respond to these prompts.

What emotions, feelings, and thoughts come up for you? Write down your answers or make some notes. Try to be aware of your feelings and emotions as you read. Are they changing? What details, stories, or primary source materials affect you? Do some chapters affect you more than others? Think about why.

DISCUSSION QUESTIONS

FACTS AND FIGURES

One of the scariest parts of the HIV/AIDS epidemic was that for years doctors didn't know what the disease was or how it worked. Now, decades later, we have a better (but still not perfect) way of defining HIV and AIDS and understanding how HIV works within our bodies. (p. 27)

1. In "A Brief Overview of the AIDS Epidemic, in Facts and Figures" (p. 9), the authors lay out a brief timeline with a summary of milestones. What did you already know before reading this section? Did any of the information or statistics surprise you? Did you have any kind of emotional reaction to any of the information? What do you think made you react to those details?
2. In the section "Complications," the authors discuss all the other infections and illnesses that were more often the cause of death for people with AIDS. How did these other complications and symptoms impact people beyond the physical? What was the social and personal effect? How did the visible symptoms impact how people with AIDS were treated? What challenges did this pose for their treatment? What about the impact on government and healthcare interventions?
3. *Sex doesn't make you sick, diseases do.* (p. 138) Many gay, trans, and bi people found themselves stigmatized by others defining their queer identities in terms of sex and disease. How did people and groups attempt to reshape that way of thinking? How is that work continuing today? Do you think the stigma around sex and disease has shifted, or is it still problematic? What could be done to change that?

MORE THAN NUMBERS

Empathy should transcend the fear of 'the other,' but in America that doesn't occur often enough. When AIDS was primarily seen as affecting gay men, drug users, and Black immigrants, it was easy for the population at large (including the media, including the government) to turn a blind eye. (p. 43)

4. The authors reframe statistics through a more focused and personal lens throughout the book. Early on, they look at the AIDS timeline through the singular story of Robert Levithan. How does this framing change the impact of the same facts and figures in the previous section? Why do you think the authors chose to put these sections back-to-back?
5. In "A Boy, Lost in History: Robert Rayford," the authors shift from facts and figures to a narrative style of talking about the history and origins of the AIDS epidemic. Why do you think they changed the form for this chapter? How does this kind of storytelling impact how people understand and approach the subject matter?
6. *The gone are gone; the dead stay dead. The fragments of their lives are pieces of broken glass that reflect our own faces back at us. (p. 25)* What does this mean? Does this sentiment impact how you understand the content of the overall book? Do you see your face reflected back at you through any of the stories, poems, primary sources, or art?
7. Why do you think the way a person's story is told changes the impact for other people? How can storytelling change the way that society reacts to things that they may previously have felt disconnected from?
8. How do you think storytelling and personal narratives changed the ways that broader society, governments, and other institutions treated people living with HIV/AIDS? Why do you think the facts and figures alone could not persuade people that AIDS was (and is) something to take seriously?
9. *Did portraying [Ryan White] as an 'innocent victim' implicate those who became HIV+ through sex or drug use as being somehow guilty of their own sickness? (p. 43)* As you read Ryan White's story, think about this quote. In what other ways were stories used strategically throughout the history of the AIDS epidemic? Find evidence in the text to support your answers.

VISIBILITY

In order for AIDS to be taken seriously as a threat, it had to strike some very famous people. Because of this, it landed on the front pages of newspapers around the world. (p. 246)

10. "1983-1986" (p. 105) Larry Kramer published an article in the *New York Native*, fifteen thousand people attended demonstrations in San Francisco and New York, and Michael Callen, Roger Lyon, and Anthony Ferrara testified in front of Congress. How did these events and other increased visibility over time affect public perception of the disease and those who were living with AIDS? What improved? What didn't? Find evidence in the text to support your answers.
11. Over the course of the epidemic, artists and public figures worked to bring visibility and attention to HIV/AIDS and the experiences of those affected by the disease. What examples of people or art stood out for you? Did you recognize any names of artists or public figures? What about examples of art—musicals, plays, TV shows, movies, photographs, books, poems, paintings, etc.? How does art make the experiences of others more real, approachable, or impactful?

VISIBILITY (CONTINUED)

12. The authors include poems throughout the book, each reflecting on the experience of HIV/AIDS in its own way. What do you feel the poems could convey that other forms couldn't? Did you have a favorite poem? What do you think made it appeal to you? What emotions and thoughts did it bring up for you?
13. One section of the book focuses on "The Names." (p. 328) This section includes the history of the AIDS Memorial Quilt, highlighting some of the panels in text, followed by a series of illustrations by Brian Selznick. Did you have a different reaction to the text and the illustrations? How do you think illustrations and text work differently to "show" various fragments of this memorial?

CARE AND COMMUNITY

For gay men in America, San Francisco was supposed to be the promised land—the place where you could live and love freely, where people came from far and wide to be part of an actual gay community. (p. 270)

14. What does community mean to you? How does community affect how you live your life and grow and develop as a person? What about how you or others deal with hardship and trauma
15. In "Deaths in the Neighborhood" (p. 270), the authors show the massive impact of AIDS on the LGBTQ+ community, particularly in San Francisco. What was your reaction to the pages of obituaries? How do you think having such a large queer community in San Francisco helped people mourning so much loss and processing their grief? In what ways did people work to support one another? Find evidence in the text to support your answers.
16. Health care settings were fraught with prejudice and ignorance, especially in the early days of the crisis. This is highlighted in "Health Care" (p. 71) and "June 25" (p. 73). What effects did this prejudice and mistreatment have on people who were sick? What about the people who supported them? In what ways did people push back or turn to community for support? How did this eventually change some of the health care landscape?
17. What other insights about patient care do you see in throughout the book? How did people find community even in this horrific context? Read the account of Ed Wolf (p. 278) and think about how people from the queer community across America were able to affect change. Cite evidence from the text.
18. Focus on the source materials on Luna Luis Ortiz, Derinthia Williams, and Kalee Garland (starting on p. 79), and others throughout the book. How were they affected by stigma and prejudice? Consider the similarities and differences in their stories. How did they each find community? How did community impact how they learned to live with HIV/AIDS?
19. Traditionally underserved and ignored communities have been hit hardest in the epidemic. How does the governmental and societal response to HIV/AIDS within BIPOC communities underscore histories of bias against these communities. Consider Todd Theringer's story (p. 312) and the history he sets it within.

SILENCE = DEATH

Any activist faces a fundamental question when working to get the government to change: They can fight the system, calling it out from the outside, making enough noise to force change. Or they can work within the system, using diplomacy and personal collateral to convince other people within the system to improve it.
(p. 190)

20. In the early days of the epidemic, many of those affected by HIV/AIDS could not imagine a future for themselves once they discovered they were sick. As treatments changed and public perception started to shift, activists began to think about what that future would hold for future generations and others impacted by the disease. In what ways did people choose to fight back? How did different groups approach the idea of activism? Provide specific examples of tactics and outcomes, using the quote above as a starting point.
21. The creation of ACT UP was a major turning point in the fight for visibility, attention, and government action. What made their actions and protests so effective? Why do you think some people were concerned about the kind of attention that that ACT UP was receiving?
22. Consider the quote at the beginning of this section. Which of the two methods would you use? Can you understand the perspectives of those who might lean in the other direction? How do you see both strategies working together to achieve change? Find evidence in the book to support your answers.
23. The authors highlight many individuals and their experiences throughout the book. Some of them became larger-than-life public figures and were subject to abuse and attacks. Others did what they could at a much smaller scale within their communities or even just within their homes. What types of activism and advocacy spoke to you the most? What is it about those approaches that appeals to you?

EXTENSION QUESTIONS AND ACTIVITIES

1. Now that you've read the whole book, pick a person or event that has stuck with you or that you were particularly interested in learning about in more detail. Either by yourself or with a group, do an in-depth study to better understand your chosen topic, including the impact on queer history and/or the AIDS crisis. What was the impact in a larger context, within politics, health care, the arts, etc.? Share your findings with a larger group and see what other perspectives you hear about your chosen person or event.
2. As mentioned in the discussion questions, HIV/AIDS had a massive impact on the arts, especially as a space for activism and critique. Using *The Fight of Our Lives* as inspiration, choose a play, musical, movie, or TV show (the original or an adaptation) that was created in response to the epidemic, preferably one that you don't already know. Either on your own or with a small group, watch and analyze the piece. Using the book and other secondary sources, explore the piece's creation in more detail. What was the specific inspiration? Is the link to HIV/AIDS obvious or abstract? Why do you think the creator approached the subject in the way they did? What was your experience while watching? What did you like? Did you dislike any aspect? Did anything make you uncomfortable? What and why? Did you learn anything new through this experience?

EXTENSION QUESTIONS AND ACTIVITIES (CONTINUED)

3. One of the ways that people spread information, debated ideas, and processed their feelings and trauma was through zines. Think about a current event, historical event, or topic that you are passionate about or that makes you ask a lot of questions. Use your creative side to develop a short zine that covers your event or topic. Think about how your zine might bring awareness to others. What questions do you want people to think about? What do you want people to know that they might not? Consider how you will approach the subject using images and words. Will you use comic-style narrative? Or poetry? What about abstract art or collage? Share your zine with a larger group and talk through your choices while listening to how others respond to what you've created.
4. Take some time to look at the [AIDS Memorial Quilt](#) in more detail. Using your experience reading the book and learning about different people and events, imagine that you have been asked to create a square for the quilt. Take some time to discuss your ideas and begin the design process. You can draw, paint, digitally design, or even make an actual quilt piece. Share your piece with the group and talk through your design choices. Think about how you processed what you learned from the book and channeled it into the artistic process.
5. The *Fight of Our Lives* provides numerous short biographical narratives that are important in their own right but also serve as a primer of sorts. Longer texts provide more opportunity to explore motivations, context, and development. Do some exploring and find a young adult novel that explores historical or contemporary experiences with HIV/AIDS or is influenced by the experiences of people from the height of the epidemic. For example, David Levithan's novel *Two Boys Kissing* is narrated by a Greek chorus of men who died because of AIDS. You can choose different novels individually or do a group study of a single novel. Consider how HIV/AIDS is discussed or who is impacted. Why do you think the author chose to approach the subject from that particular perspective? How are historical events worked into the narrative, if at all? Consider how your newfound knowledge impacts your experience of reading the novel. Hold a group discussion to hear about different texts and the perspectives they bring.

BIO

Robert Bittner is a children's and young adult literature enthusiast with a PhD in gender, sexuality, and women's studies. He spent over a decade teaching courses on youth literature and has written numerous articles and educator guides in that time. He has also served on over a dozen literature award committees and recently served as president of the Association for Library Service to Children (2024-2025).



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