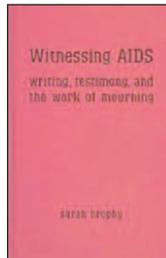


## Reviews



**Witnessing AIDS: Writing, Testimony, and the Work of Mourning.** By Sarah Brophy. Toronto, ON: University of Toronto Press, 2004. 271 pp. ISBN 0802087736

Sarah Brophy's *Witnessing AIDS: Writing, Testimony, and the Work of Mourning* engages a series of testimonial writings to address the question of whether or not it is possible to learn from AIDS. Brophy insists on this question at a time when scholarship on the AIDS epidemic is often frowned upon. AIDS may no longer be a sexy topic of inquiry, but it does remain an important one. The reality that many are still being infected, suffering through AIDS chemotherapy, or dying seems to have been lost in the North American context, particularly since the "Protease Moment" of 1996. Since then, responses to AIDS tend to have taken the form of a series of resistances based on the assumption that the AIDS crisis is over. AIDS is presumed to be "over here," in the sense of no longer being a crisis in North America but part of our difficult history, or "over there," insofar as it is only of concern for those living in Africa and Asia, and definitely not something we need to be concerned about. These resistances, these ways of compartmentalizing the AIDS epidemic by presuming it is either a subject for historical inquiry alone or that it now belongs to an even more distant group of "others," provide barriers to effective risk communication, including AIDS prevention campaigns and education.

As Brophy points out in the introduction to her meditation on the psychical origins and implications of resistances to AIDS information, the idea that the AIDS crisis is over, at least in North America, veils the very real psychical and physical realities of HIV and obscures the wounds the epidemic continues to create. She counters the assumption that AIDS does not affect us, here and now, with a careful reading of a series of texts that explore in minute detail what it means to live with AIDS, both as a personal bodily reality and as a reality to which one bears witness. In looking to the particularities of the experience of AIDS, Brophy challenges her readers to contemplate what it might mean for us, here and now, to be implicated in the information of AIDS. She also challenges what has now become a common assumption in academic circles: that scholarly work on AIDS is passé. The "Cultural Spaces" series from the University of Toronto Press is to be commended for providing a forum for this countervailing voice.

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*Witnessing AIDS* provides a sustained meditation on the interrelations between mourning, pedagogy, and AIDS. Brophy looks at the production of cultural memory through memoirs and diaries to develop a framework for reading around and through AIDS and to consider the significance of our unresolved grief in the face of the AIDS epidemic, perhaps a key source of these resistances. In doing so, she provides a careful reading of memoirs produced by those at close proximity to AIDS, including memoirs written by men and by women, by those who are ill, and by those who have served as caregivers to the ill. She poses the question of whether or not it is possible to learn something from AIDS, interrogating memoirs and testimonies produced by filmmaker and activist Derek Jarman, journalist Amy Hoffman, anthropologist and media theorist Eric Michaels, and writer Jamaica Kincaid. In her engagement with Jarman's *Modern Nature*, Hoffman's *Hospital Time*, Michaels' *Unbecoming*, and Kincaid's *My Brother*, Brophy looks to the particularities of each experience of loss and mourning in order to think about both the source of our resistances to the information of AIDS and their consequences.

For Brophy, the work of these careful readings is directly connected to the work of mourning, but it is not a mourning that one may say is ever complete, "over," or provides any kind of final psychical reparation or consolation. Learning from AIDS simply does not lend itself neatly to this kind of resolution. Instead, the ongoing pandemic challenges us to tolerate questions that remain unanswered, grief that remains unresolved, and the feeling that when we read AIDS memoirs that testify to illness and death, we are trespassing or eavesdropping on the intimate moments of individual decay and disintegration. Brophy does not hesitate to admit that even for her there is simultaneously a desire to look away from these intimate moments and a pressing need to keep watching, to bear witness, and to memorialize. What Brophy offers is a complex and sophisticated engagement with melancholia and our inability or refusal to mourn what we have lost in the "age of AIDS," be it faith in medical and pharmacological models of medicine or the people who once populated the worlds of experience. Brophy also subtly, if at times ploddingly, asks the reader to ponder what it might mean to learn from the information of AIDS, rather than to resist it.

*Witnessing AIDS* is a provocative and rigorous book. Clearly thorough in its research and careful in its writing, this text offers much to those for whom AIDS is an ongoing preoccupation. More generally, it is a significant text for those engaged in health communication, as well as for those who have a more general interest in autobiography, testimony, and memory. While the psychoanalytic framework Brophy brings to bear in her reading may not excite all readers, it is a framework that nonetheless must be addressed in thinking about both the communication of difficult information and the reasons difficult information regarding risks is often overlooked, ignored, or dismissed altogether by those it has been aimed toward. This is the case not only with regard to epidemic disease, but also when it comes to thinking about the mechanisms people use to deny preventative strategies or to ignore information regarding risk aversion. *Witnessing AIDS* is therefore important reading not only for literature scholars, who may seem to be the central audience for this book, but also for communication scholars, especial-

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ly those concerned with communication of risk. For them, Brophy's meditation may well provide a more nuanced consideration of the ways audiences resist implication in risk messages and the related consequences for health communication. As North American HIV infection rates increase both within and outside gay communities, as chemotherapeutic treatments still do not reach all those who need them, and as the human immunodeficiency virus develops resistance to treatment, the question of how to overcome refusals of the information of AIDS still (sadly) needs to be addressed.

*Penelope Ironstone-Catterall*  
*Wilfrid Laurier University*