

## THE CLINICAL STAGE: THEATRICAL RESISTANCE AND THE REDEFINITION OF STIGMATIZED SUBJECTIVITY IN THE AIDS CRISIS, NEW YORK (1980–2000)

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### ABSTRACT

The emergence of Acquired Immune Deficiency Syndrome (AIDS) in the 1980s triggered a profound crisis of public health and social identity, particularly within New York City's gay male community. The failure of state and medical institutions to acknowledge or adequately address the epidemic created a vacuum of information and compassion, which the theatre immediately filled. This paper propose that performance, specifically AIDS-themed theatre in New York from 1980 to 2000, did not merely raise awareness; it fundamentally served as a radical form of resistance to the institutional and disciplinary practices of the medical establishment. Applying the theoretical framework of Michel Foucault's *The Birth of the Clinic*, the stage became a counter-clinic, a space where playwrights, performers, and activists deconstructed the "medical gaze" and rejected the pathologizing of homosexual identity. Through works by Robert Chesley and Larry Kramer, and the later integration into mainstream platforms, the theatre actively challenged the power/knowledge structures that labeled AIDS the "gay plague." This theatrical movement ultimately forced a crucial societal repositioning of homosexuality, transitioning from a marginalized, clinically suspect identity to a visible, politically engaged, and tragic, yet resilient, fixture within the national imaginary. This analysis suggests the stage was the necessary crucible for the community's political and cultural survival against institutional negligence.

KEYWORDS: HIV/AIDS, Theatre, Awareness, LGBT, Foucault

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The sudden appearance of the Acquired Immune Deficiency Syndrome (AIDS) in the early 1980s marked a pivotal moment in American social and public health history. What began as a terrifying, unnamed illness afflicting gay men in New York City and San Francisco quickly escalated into a full-blown epidemic, challenging institutional competencies and exposing deep-seated social prejudices (Altman 1982, 1). The initial governmental and media silence surrounding the crisis functioned not as a lack of knowledge, but as an active political performance—a disciplinary act that marginalized the afflicted and framed the disease as a moral issue rather than a medical one. This profound neglect created a crisis of representation, demanding an immediate, visceral, and public response. The theatre, with its inherent capacity for immediacy and collective experience, became the singular, most powerful site of resistance against this institutionalized silence.

The theatrical response that emerged was not a passive reflection of the times, but an assertive, politically charged intervention. Playwrights, directors, and actors, many of whom were directly impacted by the loss, turned the stage into an arena for truth-telling, grief, and fierce accusation (Thompson 2001, 644). They used storytelling, not just to communicate the experiences, anxieties, and hopes of those living through the turmoil, but to actively dismantle the preconceived notions that defined the epidemic. In this setting, the theatre became a counter-narrative engine, directly challenging the state's apathy and the medical establishment's tendency to categorize and control. I assert that this theatrical intervention successfully resisted the dominant narrative of pathology and,

crucially, aided homosexuality in achieving a necessary societal repositioning by dismantling harmful stereotypes.

This research paper proceeds by first establishing the historical context of theatre as a tool for social commentary and resistance, followed by a detailed examination of the theoretical framework that informs my analysis. I then explore the foundational works of first-generation AIDS playwrights, particularly Robert Chesley and Larry Kramer, analyzing their distinct strategies of cultural and political activism. Finally, I will analyze the impact of mainstreaming AIDS narratives, arguing that while it facilitated broader visibility, it also introduced a complex dynamic of normalization, forcing the gay community into a regulated space within the national imaginary. My core argument is that the stage provided the essential space—the clinical stage—where the battle for dignity and recognition was fought and won.

The established scholarship on theatre's engagement with societal crises reveals a long tradition of the stage functioning as a crucial instrument for civic education and public health awareness. Thomas Dekker's engagement with the bubonic plague and contemporary works addressing issues from the Ebola outbreak to dementia underscore the performance medium's historical role in communicating essential information and promoting prophylactic measures (Dekker 1977, 12; Stillman 2014, 8; Kontos 2018, 92). This historical precedent provides a vital context, yet the AIDS crisis uniquely transformed this tradition. The early AIDS plays were driven less by epidemiological didacticism and more by the raw urgency of a marginalized community articulating its existence in the face of erasure.

The existing body of AIDS theatre scholarship, as reviewed by David Román, often differentiates between early, off-mainstream performances and later commercial hits (Roman 1998, 20). Early plays like William Hoffman's *As Is* and Larry Kramer's *The Normal Heart* are rightfully recognized as seminal works that pushed the crisis into public consciousness (Hoffman 1985, 5; Kramer 1985, 31). However, the critical discussion highlights a tension: while these works were essential for visibility and fundraising, some scholars argue they risked diluting the radical politics of earlier, more confrontational expressions (Roman 1998, 82). I propose to engage with this tension directly, analyzing how the move from guerilla performance to the Public Theater stage exemplifies Foucault's power dynamics—where visibility itself becomes a double-edged sword, offering both resistance and co-option.

I propose to examine the theatrical response to the AIDS crisis through the theoretical lens of Michel Foucault's *The Birth of the Clinic: An Archaeology of Medical Perception* (Foucault 2012, 12). This methodology is not merely a philosophical overlay; it is a vital tool for deconstructing the power relations inherent in the epidemic's initial framing. Foucault argues that medical discourse is not neutral but constitutes a structure of "power/knowledge" where the doctor's "gaze" transforms the patient's body into an object of authoritative, disciplinary scrutiny (Schmidt 1999, 45). The classification of AIDS as Gay-Related Immune Deficiency (GRID) and the subsequent governmental neglect exemplify this clinical gaze operating on a societal scale, rendering the gay community's suffering a pathological curiosity rather than a national tragedy.

AIDS theatre functioned as a deliberate, organized subversion of this medical-societal gaze. By bringing the dying, the activists, and the lovers directly onto the stage, playwrights inverted the power dynamic—the patient refused to be merely a silent object of surveillance and instead became the speaking subject, the author of a new, resistant knowledge. My analysis will apply Foucault's concepts of disciplinary practices and the creation of "spaces of visibility" to determine how the stage, as an alternative institutional space, challenged established narratives (Patel 2020, 112). Specifically, I will investigate how the theatrical medium—through its immediacy and ability to generate empathy—deconstructed the clinic's authority and forced the public to recognize the full human complexity of the crisis, thereby paving the way for the community's societal repositioning.

## THE THEATRICAL EMERGENCE AND EARLY RESISTANCE

The initial state response to AIDS, characterized by silence from the Reagan administration and a lack of funding for research and public education, necessitated an immediate form of communal self-help and cultural resistance (Foster 2007, 21). This deliberate political void created an environment where the theatre, already a cultural hub for the LGBT community in New York, became the inevitable, albeit precarious, platform for collective articulation. The initial designation of the illness as 'Gay-Related Immune Deficiency' (GRID) by the Centers for Disease Control and Prevention transformed the medical diagnosis into a social condemnation, effectively exiling the afflicted into a realm of public moral judgment (Brooks 1988, 56). The theatrical stage, in opposition to this

exile, became the space of urgent, unapologetic self-assertion.

The institutional failure to address the growing body count compelled artists to create their own structures of knowledge and documentation. Playwrights, often drawing on personal interviews, hastily gathered information, and shared grief, produced scripts that bypassed traditional, slow-moving publishing channels (Sokol 2003, 78). This process was inherently resistant, establishing a community-centric "archive of feeling" that prioritized the emotional reality of living with the disease over the cold, detached statistics favored by the government (Chen 2012, 45). The urgency and decentralized nature of this early theatrical production directly countered the centralized, indifferent authority of the medical and governmental apparatus.

The earliest performances were often ephemeral, small-scale, and highly localized interventions, functioning as immediate civic education and emotional triage within the communities most affected. Jeff Hagedorn's thirty-minute monologue *One* (1983) and Rebecca Ranson's *Warren* (1984) immediately placed the perspective of the afflicted at the center, humanizing the disease before official channels had even acknowledged its existence (Roman 1998, 51). I assert that these performances established the stage as a 'counter-clinic,' a place where the patient was granted narrative authority, and the audience was implicated as co-sufferer and co-activist.

The *A.I.D.S. Show*, presented by Theatre Rhinoceros in San Francisco in 1984, epitomizes this model of performative intervention. It utilized a flexible, vignette-based structure that allowed for continuous updates to reflect the latest, often grim,

epidemiological data (MacDonald 1989, 82). This act of perpetually updating the script was a direct form of resistance to the slow, bureaucratic dissemination of information, turning the performance into a living document. This commitment to disseminating up-to-date, scientifically accurate information, presented within a supportive, 'gay-affirming' context, directly undermined the misinformation and moral panic propagated by many mainstream news outlets (Roman 1998, 21).

Foucault's concept of the "medical gaze" relies on the institutional separation between the observer (doctor) and the observed (patient), a separation that grants the former power over the latter (Schmidt 1999, 101). Early AIDS plays deliberately shattered this separation. In William Hoffman's *As Is*, the character Rich's emotional and physical deterioration is witnessed by his former lover, Saul, and by extension, the audience (Hoffman 1985, 5). This intimate, empathetic exposure transforms clinical observation into shared experience. This forced intimacy on stage became a political statement, demanding that the heterosexual, non-afflicted public look without judgment and recognize the shared humanity of the victims.

The staging of illness became a tactical move, not a surrender to spectacle. Playwrights often avoided romanticizing death, instead presenting the brutal realities of Kaposi's sarcoma, wasting syndrome, and social ostracization with unvarnished honesty (Taylor 2009, 16). This radical transparency directly confronted the dominant culture's attempt to render the victims invisible or palatable. I suggest that by showing the full scope of the ravages—the physical decline alongside the emotional resilience—the theatre refused to allow the

disease to be abstracted into a simple cautionary tale or a statistic.

### THE ACTIVIST PLAYWRIGHTS: CHESLEY AND KRAMER

Robert Chesley's work, preceding the more widely publicized Broadway hits, represents a distinct and profoundly radical strand of AIDS theatrical activism. His play, *Night Sweat: A Romantic Comedy in Two Acts* (1984), dared to frame the subject of AIDS within the genre of romantic comedy, a shocking juxtaposition intended to normalize and humanize the experience of gay men facing death (Roman 1998, 10). This artistic choice was a brilliant, subversive maneuver, demanding that society view the AIDS crisis not as a pathology, but as a crisis of love, romance, and shared community.

Chesley's insistence on incorporating sexual affirmation into his work, most controversially in *Jerker or the Helping Hand* (1986), was a direct resistance against the moralizing forces that sought to police gay sexuality in the wake of the epidemic (Morales 2005, 78). *Jerker*, an elegy conducted solely through telephone calls, celebrated the erotic connection between men even as the body was being ravaged. This work became a political statement of profound defiance, arguing that the body, even when sick, remained a site of pleasure, connection, and identity, thereby rejecting the idea that the disease nullified their right to desire.

The ensuing backlash and attempted censorship of *Jerker*, as evidenced by the FCC's involvement, underscore the power of Chesley's theatrical intervention (Long 2003, 231). His work exposed the nexus of political, religious, and media power that

attempted to define acceptable gay public expression. I propose that Chesley, by making gay eroticism and relationship complexity central to his drama, forced a public conversation on censorship and sexuality that transcended the simple discussion of the disease itself, effectively linking the fight against AIDS to the broader fight for sexual freedom.

Larry Kramer's *The Normal Heart* (1985) introduced a different, equally vital form of theatrical resistance: the historical polemic rooted in unvarnished rage and confrontation (Evans 2006, 33). Focused on the early, formative years of the crisis in New York City (1981–1984), the play uses its protagonist, Ned Weeks, as a mouthpiece to accuse, by name, the government officials, medical institutions, and even segments of the gay community that Kramer felt had failed in their duty (Kramer 1985, 31). The play's power lies in its theatricalization of accusation, transforming bureaucratic inertia into dramatic betrayal.

The play's central conflict is not just between man and disease, but between the activist and the apparatus of power. Weeks's struggle to found the Gay Men's Health Crisis (GMHC) and his subsequent alienation highlights the political complexities of organizing resistance within a marginalized, divided community (Kaur 2014, 115). Kramer used the stage to perform a 'data dump' of facts and historical failures, leveraging the emotional intensity of the theatrical medium to make a dense political argument undeniably palpable to a mainstream audience (Doser 2017, 96).

Kramer's complex critique extended to the issue of promiscuity, challenging the sexual ethos of the gay liberation movement by advocating for safer sexual practices and, controversially, monogamy (Kramer 1985,

45). This internal debate, staged through Ned Weeks's tirades, reflects the community's own painful, disciplinary negotiation under the shadow of Foucault's gaze. The play thus acted as an internal corrective, prompting a debate about sexual responsibility that, while divisive, was necessary for the community's immediate survival and long-term political organizing (Valdez 1990, 7).

The intense emotional landscape of *The Normal Heart* allowed Kramer to explore the profound personal costs of being an activist. Weeks's personal relationship with his partner, Felix Turner, provides the necessary human counterpoint to the relentless political maneuvering (Merla 1997, 23). The coupling of bureaucratic rage with personal elegy—culminating in the deathbed marriage—was Kramer's masterstroke, compelling the audience to recognize that the political fight was fundamentally a fight for the simplest of human dignities: love, commitment, and recognition.

The sheer volume of global productions of *The Normal Heart* (over 600 by 1988) fundamentally altered the public discourse on AIDS (Holden 1988, 3). This widespread staging achieved Kramer's original goal of moving the debate from the margins to the mainstream, forcing newspaper critics, politicians, and the general public to confront the crisis in a way that mere journalism had failed to do (Papp 1997, 256). The play successfully generated the emotional intensity required to catalyze the formation of groups like ACT UP, thereby translating theatrical rage into street-level political action (Chen 2012, 105).

#### MAINSTREAM ABSORPTION AND SOCIETAL REPOSITIONING

As the AIDS crisis moved into the late 1980s and early 1990s, the focus of theatrical response shifted, moving away from the polemical fury of the first generation toward more fantastical, allegorical, and ultimately, mainstream forms (Pacheco 1998, 57). Tony Kushner's monumental two-part epic, *Angels in America: A Gay Fantasia on National Themes* (1993), exemplifies this transition, utilizing a blend of wit, magic realism, and historical critique to situate the crisis within a much larger American political and spiritual narrative (Kushner 1993, 89). I propose that this shift was crucial because it repositioned the gay identity from a pathologized, isolated subject to a subject central to the nation's destiny and redemption.

*Angels in America* brought the AIDS narrative into the 'national imaginary' by weaving in figures like Roy Cohn and grappling with themes of institutional failure, racism, and spiritual collapse (O'Connell 1995, 23). I suggest that by using fantasy and the epic scale, Kushner made the gay experience universal, arguing that the crisis of AIDS was merely the most acute symptom of a much deeper, pervasive sickness within American society. This act of universalization was a strategic move that fundamentally altered how the mainstream media and critics engaged with gay themes on stage.

The commercial success of plays like *As Is* and *The Normal Heart* on the Off-Broadway and, in the case of *As Is*, Broadway stage, introduced a complex dynamic that scholars like David Román critically examined (Roman 1998, 82). I assert that mainstream acceptance, while generating critical visibility and necessary financial resources for AIDS organizations, risked making the radical palatable, thereby inadvertently subjecting

the narrative to the disciplinary gaze of mass culture (Kim 2018, 150). The urgency and raw politics of the community's earlier, decentralized performances risked being sterilized for mass consumption.

Foucault's theory becomes critically relevant here: the mainstream theatre's acceptance of gay characters, provided they conformed to certain sympathetic, non-threatening narratives of love and loss, can be seen as a form of disciplinary normalization (Schmidt 1999, 180). I propose that while the stage forced visibility, the market dictated the *terms* of that visibility—preferring the story of the monogamous, dying partner over the story of the fiercely political, sexually free activist. This process of narrative filtering was an unintentional mechanism of societal control.

The debut of Jonathan Larson's rock musical *Rent* in 1996 marked the beginning of a third generation of AIDS theatre, set against the backdrop of the post-AZT, post-protease inhibitor era (Larson 1996, 15). I suggest that *Rent* completed the theatrical repositioning of the gay subject by fully integrating the HIV-positive status into a broader youth narrative of economic struggle and artistic striving. The disease was no longer the sole dramatic engine of the plot but a condition of the characters' existence, fully normalized within the Bohemian fantasy of New York life (Lee 2016, 75).

The commercial power of *Rent*—its Pulitzer Prize and subsequent long run—demonstrated the final, definitive move of the AIDS narrative into the American cultural heartland (Thompson 2001, 645). I propose that this mainstreaming solidified the gay community's societal repositioning, transitioning it from an invisible, pathologized group to a visible, diverse, and

commercially viable subject (Chen 2012, 198). The musical's themes of 'no day but today' encouraged viewers to see the characters not through the lens of their disease, but through their shared humanity and creative resilience.

The theatrical movement also served as a crucial space for interrogating the internal politics of identity within the crisis. While early plays often centered the experience of white, middle-class gay men, later works, including specific moments within *Angels in America*, began to address the intersectional experiences of people of color and intravenous drug users (Harris 2001, 45). The theatre became the only institutional space actively working to counteract the mainstream media's narrow focus on the 'white gay male' narrative, compelling the audience to acknowledge the diverse, disproportionate impact of the disease.

The portrayal of the character Belize in *Angels in America*, for instance, allowed Kushner to introduce a narrative that critiqued both institutional racism and the internal homophobia within the medical profession (Kushner 1993, 91). This expansion of identity on the stage was a vital step in the community's political development, pushing for an inclusive representation that resisted the simple, monolithic identity often demanded by the mainstream gaze. The stage thus served as both a mirror of internal complexity and a demand for external recognition.

Ultimately, the theatre's role in the AIDS crisis exemplifies a complex Foucauldian dynamic. The stage began as a place of pure, anti-disciplinary resistance, shouting against the silence of the state and the pathologizing gaze of the clinic. I propose that as the movement gained momentum and visibility, it entered a new phase—one of

'normalization'—where the terms of acceptance were subtly dictated by the mainstream's capacity for comfort (Schmidt 1999, 210). The gay subject was repositioned, but often only as the tragic victim, the resilient lover, or the politically-engaged, monogamous individual.

However, this normalization was a necessary, strategic victory. By forcing the theatricalization of the crisis, activists and playwrights replaced the institutional narrative of shame with a powerful counter-narrative of resilience, love, and political agency (Evans 2006, 88). The theatre became the enduring public forum where the pain was processed, the rage was articulated, and the demand for civil rights was inextricably linked to the fight for life itself (Green 2015, 210).

The theatrical movement was fundamentally a spatial politics, rooted in the specific geography and cultural dynamism of New York City (Wong 2017, 10). I assert that the physical act of gathering in a theater—a shared, intentional space—became an act of communal defiance and self-affirmation that the government was attempting to suppress (Taylor 2009, 28). The early AIDS plays, staged in small, often dilapidated venues, leveraged the intimacy of the space to create a collective experience of grief and solidarity, transforming the audience from passive observers into active participants in the community's struggle (Blumberg 1997, 157).

The stage, in direct contrast to the sterile, isolating environment of the clinic, provided a space for the validation of alternative knowledge and emotional truth. Playwrights prioritized lived experience—the conversations between lovers, the despair of caregiving, the political fury—over the objective, distant authority of medical

reports (Sokol 2003, 110). I propose that this elevation of subjective, communal knowledge was the most radical counter-Foucauldian move of the entire movement, undermining the state's monopoly on defining the crisis (Patel 2020, 155).

The aesthetic choices of AIDS theatre were themselves acts of resistance, reflecting the urgency and the precariousness of life during the plague years (Williams 2011, 45). The early, raw productions often utilized minimal sets, focusing instead on the power of the testimonial and the emotional force of the actors' bodies (Dosey 2017, 97). This stripped-down aesthetic was a deliberate rejection of theatrical spectacle, arguing that the mere presence of the afflicted body and the telling of its truth were sufficient, indeed necessary, forms of dramatic power.

The shift towards more elaborate productions, such as *Angels in America*, did not abandon this urgency but channeled it into allegory and fantasy, allowing the audience to process the magnitude of the tragedy through a veil of unreality (O'Connell 1995, 89). I assert that Kushner's use of fantasy—angels descending, historical figures appearing—was a necessary artistic strategy to articulate the scale of a catastrophe that simple realism could no longer contain (Kushner 1993, 91). This use of the surreal, I suggest, allowed for a deeper, more enduring emotional and intellectual engagement with the crisis.

The theatre served a profound function as a site of collective elegy and remembrance, essential for a community that was rapidly losing its institutional memory due to the massive loss of life (Navarro 1993, 10). Every performance, particularly those dealing with the death of a character, became a memorial service for

the thousands who had died in silence or anonymity. The applause at the end of a play like *The Normal Heart* was not just for the performance, but an affirmation of the lives lost and a commitment to continue the political struggle.

The preservation of this narrative through theatrical archives, continued revivals, and subsequent academic study ensures that the memory of the plague years remains a living, performative history (Zhou 2022, 12). This enduring theatrical legacy is the community's final, most powerful victory over the initial political indifference that sought to erase the victims. The stage has made it impossible for the AIDS crisis to be forgotten, securing it permanently as a central tragedy in the modern American narrative.

#### THEATRE AS A VEHICLE FOR INTERSECTIONAL DIALOGUE

The later developments in AIDS theatre demonstrated its increasing capacity to function as a vehicle for intersectional dialogue, broadening the narrative beyond the white male experience (Harris 2001, 89). The focus expanded to address the disproportionate impact of HIV/AIDS on communities of color and the systemic failures exacerbated by poverty and racism (Pastore 1993, 66). This crucial widening of the narrative forced an internal reckoning within the gay community itself, ensuring that the movement for awareness and civil rights was inclusive of all who were affected.

The theatrical medium's capacity for representing multiple, conflicting voices on a single stage made it uniquely suited for this intersectional work (Iacobute 2019, 223). I propose that by staging these complex, layered realities, playwrights effectively resisted the disciplinary impulse to simplify

the crisis into a single, homogenous narrative. This dedication to complexity ensured that the community's societal repositioning was built on a foundation of diverse experiences and shared vulnerability, thereby strengthening its long-term political resilience.

#### CONCLUSION

The theatrical response to the AIDS epidemic in New York City from 1980 to 2000 transcended mere awareness campaigns, establishing itself as a radical, life-affirming resistance movement against institutionalized indifference. By applying the analytical rigor of Michel Foucault's *The Birth of the Clinic*, the stage became the quintessential 'counter-clinic,' a democratic space where playwrights like Robert Chesley and Larry Kramer inverted the medical gaze, replaced bureaucratic silence with visceral accusation, and established a system of communal knowledge that opposed the state's narrative of shame and pathology. The immediate, emotionally charged nature of this theatre did not simply report the crisis; it actively shaped the cultural and political discourse surrounding it, forcing a recalcitrant nation to acknowledge the profound human cost.

The ultimate achievement of this theatrical activism lies in its success in orchestrating a crucial societal repositioning of the gay community. Through the evolution from first-generation polemics to the mainstream visibility of works like *Angels in America* and *Rent*, the gay subject was transformed from a marginalized, pathologized figure into a central, resilient, and enduring component of the national imaginary. While this journey into the mainstream introduced a complex tension of normalization, the stage effectively

leveraged visibility to demand dignity and civil rights, permanently embedding the crisis into the cultural memory of the nation. I suggest that the legacy of AIDS theatre is not just in the plays themselves, but in the precedent it set for marginalized communities to weaponize art as the ultimate tool for resistance and self-determination.

The enduring relevance of this period demands continued scholarly investigation, particularly into the performance history of ACT UP and other activist organizations that seamlessly blended street theatre with political action (Chen 2012, 230). Future studies must further explore the subtle disciplinary effects of the 'palatability' demanded by the mainstream, investigating how normalization may have excluded or silenced the more radical expressions of gender and racial identity that were present in the off-off-Broadway circuit. The stage remains a critical historical archive, and I assert that by continuing to analyze its content and context, we not only honor the resilience of those who fought the plague years but also secure a powerful model for how art can be deployed as the ultimate, necessary tool in the struggle against systemic injustice and indifference.

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