CENTERING INTERSECTIONAL MOVEMENT BUILDING IN 2020 ELECTION HIV ADVOCACY: GUIDANCE FROM MOVEMENT LEADERS

By Suraj Madoori and Jeremiah Johnson

"So, if I'm dying from anything, I'm dying from homophobia. If I'm dying from anything, I'm dying from racism. If I'm dying from anything, it's from indifference and red tape, because these are the things that are preventing an end to this crisis [...] If I'm dying from anything, I'm dying from the president of the United States. And, especially, if I'm dying from anything, I'm dying from the sensationalism of newspapers and magazines and television shows, which are interested in me, as a human interest story – only as long as I'm willing to be a helpless victim, but not if I'm fighting for my life."

- Vito Russo, ACT UP 1

he 2016 election was a wake-up call for our communities, a time when we saw that a racist, anti-queer, anti-health platform could win the U.S. presidency. Three years later, many of us are still asking, "How did we get here?" Heading toward the 2020 election, we find ourselves desperately looking for meaningful policy change and engaging all presidential candidates, hoping that, having fought the good fight, we will be rewarded with a reprieve from the resurgence of oppression. The history of our movement has proven time and again that we can overcome seemingly insurmountable political conditions (see Lessem and Harrington's editorial).

But nothing is guaranteed unless we fight for it. We must view 2020 as a strategic opportunity to engage all candidates, expand community mobilization, and strengthen the HIV movement base. Here, we speak with

some of our HIV activist role models who are working at the intersection of HIV and the broader social justice movement. Our goal is to understand their priorities and tactics to answer this question: how should we as a community mobilize ahead of the 2020 election?

Centering Racial, Transgender, and Healthcare Justice in Our Movement

He had fallen, and the passing ceremonies marking his death did not stop the war.

-Essex Hemphill²

An excerpt from the poem "When my brother fell" by Essex Hemphill, a black gay poet and activist who died of AIDS-related complications, reminds us that vulnerable communities of color and LGBTQ people are often the invisible victims of racist, discriminatory policies. Essex dedicates the poem to Joseph Beam, a fellow writer and black gay man who also died of AIDS-related complications. The poem reminds us that the loss of black gay men's lives during the AIDS epidemic in 1980s was not enough to end the war on their bodies. The marginalization and racist policies aimed at black gay men and other vulnerable communities of color continue today.

We must bring an end to this war. The past three years of intensified attacks on communities of color, transgender people, people who use drugs, and immigrants have threatened the HIV movement on multiple policy fronts. We have fought back, with activists placing their bodies on the line in Congress to block the dismantling of the Affordable Care Act and blocking rush-hour traffic in New York City to protest expanding a rule to jeopardize the ability of immigrants who access public services to enter and stay in the U.S.^{3,4}

This year's announcement of a federal initiative to end the U.S. HIV epidemic by 2030 poses new opportunities and challenges for our movement. "We have to make sure that we're going to continue to have the Ending the HIV Epidemic plan, but expand it to make sure it reaches all communities, including individuals in U.S. Immigration and Customs Enforcement detention centers," said Arianna Lint, CEO of Arianna's Center and East Coast Board Co-Chair of the TransLatin@ Coalition. "We want to see the candidates talking about HIV and how they're going to be working with all communities—ensuring transled agencies have everything they need to lead and be at the table."

HIV and immigration activist Marco Castro-Bojorquez of HIV Racial Justice Now says there is inherent tension in trying to engage with the presidential administration to secure resources while fighting discriminatory policy initiatives and injustices: "It is extremely ridiculous that this government wants to end HIV but also is trying to take away healthcare. How are you going to achieve the end of the epidemic without healthcare?" Marco cautions that the wedge created by this contradiction can further divide the movement, weakening our ability to work together. We must combat this with a proactive, intersectional approach to building power.

Intersectional Movement Building

Power concedes nothing without a demand. It never did and it never will.

- Frederick Douglass⁸

Building power, as Frederick Douglass unapologetically and eloquently stated in the 1800s, is necessary to ensure that marginalized communities are taken seriously. Our community must use tactics to shape power dynamics as we demand what is necessary to end the HIV

epidemic (see <u>Gaudino and Lovinger</u>). To amass power to achieve our aims, we cannot remain narrowly focused on HIV-specific work and initiatives. Marco names the immigration, racial justice, and women's rights and reproductive justice movements as important partners in HIV advocacy, in keeping with the HIV Racial Justice Now coalition's founding document, A Declaration of Liberation: Building a Racially Just and Strategic Domestic HIV Movement.⁹

Broadening the HIV movement to address a larger set of social and health issues is strategic, as presidential candidates' platforms increasingly recognize the impact of racial inequity and socioeconomic disparities. This requires listening, extrapolating core values among movements, sharing effective tactics, and creating strategic alliances to generate long-term wins for interlocking issues and communities.

Matthew Rose, director of U.S. Policy and Advocacy for Health GAP, offers intersectionality as a solution to sustain activism capacity into 2020 amid administration policies that are an "assault on many vital priorities." 10 He notes that Health GAP has "used this moment to reach outward and deepen our coalition work. We are having the discussions about how we can draw new lines of integration and find new ways to make space for other causes that overlap with our own." This strategy is encompassed by Health GAP's bold new initiative in End Pandemics 2020, integrating infectious diseases and climate change as intertwined, urgent issues and targeting presidential candidates on their policy positions to address both. Merging HIV into the increasingly galvanized environmental justice movement strengthens the HIV movement by bringing in new allies with the shared goal of creating a healthier world.

The TransLatin@ Coalition also has collaborations in the works. "Our members have been working to build a relationship with the National Latina Institute [for Reproductive Health]," Arianna said. She noted that this effort "helps us to share resources, elevate local needs to a national level, and ensure we have representation in broader movements. It also benefits the broader movement; transgender leaders are doing amazing work and building networks."

Acting Up in 2020

"We're so busy putting out fires right now, that we don't have the time to talk to each other and strategize and plan for the next wave, and the next day, and next month and the next week and the next year. And, we're going to have to find the time to do that in the next few months. And, we have to commit ourselves to doing that. And then, after we kick the shit out of this disease, we're all going to be alive to kick the shit out of this system, so that this never happens again."

-Vito Russo, ACT UP11

2020 represents a chance to change the system, and we must take advantage of that to favorably position the HIV movement well beyond the elections, with a specific focus on intersectionality. Community advocates started the process with the 2018 release of Ending the HIV Epidemic in the United States: A Roadmap for Federal Action from Act Now: End AIDS, a document that built and communicates to policymakers the community consensus on a range of policies. In our conversations with activists, we draw a few lessons on how to incorporate intersectionality into our advocacy strategies to ensure that these priority policies become a reality:

- Think macro: Taking a step back and viewing HIV through the lens of overlapping oppressions allows us to identify new allies, tactics, and ways to frame HIV as an issue of human rights and social justice. These frames help us shape the public agenda and influence the policy debates, including HIV in discussions of universal healthcare, housing, poverty reduction, criminalization, drug pricing, and immigration.
- Gather data: Intersectionality demands the inclusion and leadership of marginalized communities, so we must ask: who is missing? This means data that justify and drive policymaking must count historically excluded communities, such as transgender and gender-nonconforming people. Ensuring the inclusion of such communities in data will allow for targeted policymaking in 2020 to address issues that affect HIV vulnerability, such as mental health and housing.
- Take inventory: As Matthew advises, "these efforts will also take introspection about where

we can be useful and what our capabilities are in any given moment." We must leverage our unique capabilities and connections—and repair weaknesses. For example, HIV has long been a bipartisan issue in Congress; our years of engaging on both sides of the aisle position us well to open doors for other movements in 2020. Also, who is leading our movement? Are we ensuring that our organizations and our boards include and represent the communities we purport to serve?

Notes

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