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Conducting a linguistic analysis of the filmic image, Roland Barthes found something traumatic about his object of study. His semiological methodology required a comparison between cinematic units of signification and language. The analogy brought forth an important distinction: “language doesn’t use supports. . . . The word doesn’t support the meaning: it is the meaning” (1985, 52). In other words, the word unequivocally declares what it is that it signifies. This one-to-one semantic relationship between signifier and signified does not hold for film. The dissimilarity between word and image is what, for Barthes, affords the image its traumatic element, its inclination toward semantic ambiguity. A picture is worth a thousand words and pictures in motion are worth more yet. In conventional films, the traumatic kernel of the image is managed and bound by meticulously plotted narrative practices. The film is constructed in such a way that the spectator understands, moment to moment, what the images presented before him or her mean. And so, films typically reassure instead of traumatize. One formal technique to attune our comprehension toward a stable end is voice-over. The device, though not limited to such, is most famously linked with the documentary. The voice-over is an additional stratum of signification layered upon the image. Yet instead of enlarging the semantic field of the film, it contains it. Most often voice-over directs the spectator’s manner of engagement with the image, allaying its trauma. But what is the voice-over without the images it’s meant to accompany? Might words then solicit the variety of trauma Barthes locates in the filmic image?

What follows is the voice-over text from my experimental documen-

tary *Red Red Red*. The project had many false starts, unsatisfactory interviews, and ultimately uninspiring filmed tableaux. It was only when I wrote the voice-over that the film began to take shape. Instead of recording “reality” and molding my film from the patchwork of fragments I had collected, I wove its images, its rhetoric, and its world around words. *Red Red Red* is an essay film, a text that takes shape through a mediation of my subjective and often esoteric thoughts and sounds and images recorded in the world around me. In its early phases, I too confronted my “film” in the version you are about to encounter. It is not so much that the words of my voice-over wrangle and corral the logic of the images they accompany; rather it is from these words that the images are summoned, produced. As I reread my voice-over after the film’s completion, I find myself nostalgic for a time when the image track wasn’t finalized and the possibilities of my film were not, in a sense, foreclosed. Perhaps Barthes wasn’t completely correct. Maybe words don’t instantly and finally point to what it is they mean. Within the words of my film’s narration there was always another substrate, one of images. Their possible incarnations left me frazzled, excited and, yes, perhaps a bit traumatized. You can watch my film online at the following link: <http://www.imdb.com/video/wab/vi2632097049>. Yet with respect to the incarnation of *Red Red Red* before you, please read my “film” first—that is, my film’s bare bones. As you read, imagine a film, imagine the words opening unto an imagistic field and in-and-of themselves incomplete. The series of words that form this text call for and render something beyond them. They are in such a context, traumatic, empathetically uncertain and saturated with a stubborn potentiality. Then again, was Barthes right? Are these words, despite the context from which they were pulled, quite simply enough?

To begin teaching someone: “That looks Red,” makes no sense, for he must say that spontaneously, once he has learned what Red means, i.e. learnt the technique of using that word. For if someone has mastered the use of what looks red—or indeed what looks red to me—he must also be capable of answering the question, “And what is Red like?” and ‘What does something look like when it turns to Red?’

—Ludwig Wittgenstein<sup>1</sup>

*There is a story about a boy: he is afraid of the color red. He does not trust men in red shirts, sit in red chairs, or drink from red cups. Still, he exists in a world in which red is, so he exists cautiously, on edge. One day, the boy experiences a*

*decay of sensitivity to color; at the beginning all colors are not affected, their basic color remaining the same, but their saturation decreases until one day the spectrum is simplified to four colors: yellow, green, blue, and red. Finally a monochromatic stage of gray is reached. The boy cannot see red, but still red is. At first, the boy trembles to imagine red everywhere: After all, it could be there or even there. . . . By the story's end . . . the boy is calm.*

1. I should tell you this is a film about the criminalization of HIV in the midwestern state of Iowa. Next, I should tell you that I live in Iowa, am HIV positive, and do not like the law, but, it seems to me, neither should you. I wanted to make a film about something, about this thing, about this law that is unfair. Yet making a film about something suggests a separateness between the filmmaker and his or her topic. Is this a documentary? Is this an autobiography? Or is it merely some kind of assertion? I do not know.

I do know that when you test HIV positive in the state of Iowa, or if you are HIV positive and move to the state of Iowa, the Department of Health finds you, calls you in, sits you down, and tells you about the law, gives you a printout on which the law is written, gives you condoms, lots of condoms, a few issues of *POZ* magazine, and informs you about services for people with HIV, of which there are truly none. They find you and inform you of your now criminalized body, criminalized being, criminalized sex. Is this how it is? I worry that I'm exaggerating . . . Here is the law according to the Iowa Code:

A person commits criminal transmission of HIV, if a person knows of his or her HIV positive status: engages in intimate contact with another person; transfers, donates or provides blood, tissue, semen, organs, or other potentially infectious bodily fluids for administration (e.g., transfusion) to another person; or in any way transfers to another person any non-sterile intravenous or intramuscular drug paraphernalia previously used by the person infected with HIV. "Intimate contact" means the intentional exposure of the body of one person to a bodily fluid of another person in a manner that could result in the transmission of HIV. Actual transmission of HIV is not a necessary element of this crime. It is an affirmative defense that the person exposed to HIV knew of the other person's HIV positive status, knew that the action of exposure could result in transmission of HIV, and consented to the action of the exposure with that knowledge.

2. In April 2009, Iowa became the third state to legalize gay marriage. I met the decision somewhat uneasily, with great ambivalence; not because I'm against gay marriage, all people should have the right to wed, though it's somewhat dispiriting that so many gay people should want to. I was irritated because the passing of this law allowed the world to look upon Iowa as a progressive state. In Iowa City, where I live, a gathering took place to celebrate the law, and as I walked by I wondered how many people even knew about the HIV criminalization law. Most of the people I spoke to, from my college professors to acquaintances at the city's one gay bar, had no idea that the law existed. Nobody fucking cares about HIV/AIDS anymore and much of my everyday experience fortifies this curmudgeonly perspective. Insofar as the contemporary gay agenda, HIV/AIDS is invisible. On the docket is a process of integration, normalization, of proclaiming a desire for lives more ordinary and essentially composed of heteronormative values. *Become like me and I will respect your difference*. Gay marriage laws effectively expedite this process. I'm nostalgic for a time of queer politics when multiple practices of sex, sexuality, kinship, and world-making were of foremost priority; wherein people would know of and rally against HIV criminalization laws, laws that made people with HIV legally accountable pariahs, demonstrably put upon, othered, and certainly not a member of the wedding.

3. I was never about gay pride. I thought, and I suppose I still do, that gay pride presupposes shame, that somewhere in the discursive spool that constitutes gay pride lurks an element of homophobia and ultimately self-hatred. Yet I find myself wanting to somehow exercise (I suppose embody) a sort of HIV pride. Is this different from gay pride; is it more understandable, more defensible to want to somehow proclaim HIV pride than gay pride . . . or less? Listen, I'm hungry for a collective mode of self-assertion. Shame is the inability to identify with others, a self-lacerating mode of loneliness. Pride is a step in the other direction, but, to be honest, it seems to me to be something less than acceptance. The law, this law wants to make scarlet letters from the tongues of those of us who are HIV positive. A stands for AIDS, which I do not have, but you might think I do, when I tell you that I'm positive. Within the vigilant articulation compelled by these laws is a nefarious sort of policed pride, though one that perversely begets the removal of the self from others . . . shame.

4. And now for some facts: HIV criminalization laws fall under state jurisdiction and so vary from state to state. At the present moment, thirty-two states have laws specific to HIV criminalization on the books. Yet each of the fifty states is said to have some sort of law applicable to criminalizing HIV, even if the law is not specific to the virus. Although it is no longer the case, throughout the 1990s it was required that each state possess some variation of such a law if that state wished to be eligible for federal monies aimed to curb HIV infections. Iowa, for instance, did not officially ratify its law until 1998.

Each state and indeed each county within that state prosecutes people with varying degrees of frequency and voracity. Many of the states, like California, include “intentionality” within the wording. Hence, one can be prosecuted only if intent to transmit HIV was part of the criminalized act. Such a thing, of course, is difficult to prove and so the states that include intentionality as part of the criminalized activity rarely prosecute. The state of Florida seldom deploys its law; however, recently it was compelled to do so when a man, an Olympic medal-winning equestrian, failed to inform a regular partner of his HIV status. Articles detailing the case did not state whether the equestrian barebacked, that is had anal sex sans protection, or whether the equestrian transmitted the HIV virus to his (riding) partner. The defense attorney’s office did go on record as stating that the equestrian was thought suitable for prosecution because the criminalized act occurred repeatedly. Hence, the frequency of the act seems to come into play. Nothing, however, in the wording of the Florida law states as much. The arbitrary nature of the enforcement as well as the pliancy of the legalese are part of what makes the laws so unsettling . . . unwieldy gavels and precariously balanced scales of justice coming down on Lord knows who or when?

5. The most prevalent grocery chain in Iowa is called Hy-Vee, though I call it HIV, as the name seems to demand it. Can you imagine a grocery store called Hy-Vee in New York City or San Francisco? The local convenience store chain meanwhile is called Kum ’n Go . . . No need to unpack the alternate meanings at play in that one; might as well call the place Nut ’n Bolt. Within these names, I read a highly visible form of disavowal. The names, in remaining adamantly as they are, suggest an imperviousness to innuendo, a willful naïveté. Of course, they cannot in the end hope to maintain this, yet they (and their designations) nonetheless persist in

a phantasmic sphere immune to ribald significations. The public face of Iowa presents itself as if entirely wholesome, not to mention free of sexually transmitted diseases. Perhaps this is why it forcibly compels those of us who are HIV positive to identify ourselves without equivocation. Iowa would like to present itself and its citizens as “clean.” A recent issue of *POZ* magazine advised its HIV positive readers who lived in a state known to actively enforce such a law to not only disclose their HIV status to prospective sexual partners but also to record that conversation or alternately to have one’s partner sign a document attesting to his or her knowledge of one’s HIV status.

6. The Iowa law is worded so loosely that experts said it might cover an HIV positive person’s kissing another without disclosure of the person’s serostatus. Of course, it’s impossible to get HIV from kissing. It’s also highly implausible to get HIV from oral sex. A doctor I had while living in New York assured me that the acquisition of HIV through oral sex was a panic-inducing myth and that if one was really worried about such a prospect one should not take a partner’s ejaculate into one’s mouth. The partner could, for instance, cum on your face (what if it gets in my eye; what if it gets in my ear; one of my friends asked me . . .). People have also been prosecuted by these laws for spitting and biting during an assault. For example, a HIV positive Michigan man bit his neighbor during a dispute and was charged with bioterrorism, even though, as with oral sex, the risk of transmitting the virus during such a variety of contact is near infinitesimal. I am talking about the irrational fear of People with HIV/AIDS Who Bite.

To have HIV entails narrating assurances to those who do not; I say, this is okay and this and also this, this too, while the other nods his head not quite believing me. Thirty-six Iowans have been charged under the law and twenty-five have been convicted. The numbers may seem low, but with approximately twenty-two hundred documented persons living in Iowa with HIV, nearly 2 percent of this population has been charged with the law and over 1 percent have or are serving prison sentences. This is to say nothing of the exacerbated sense of social, psychic, and legal stigmatization experienced by those of us living in Iowa with HIV under the law on a day-to-day basis.

7. I’m not quite sure what to show you. During the 1980s and 1990s HIV/

AIDS was hypervisual; we were saturated with mythologized and pathologized bodies equated with AIDS. The final days in the life of a person with AIDS somehow became synonymous both for the entirety of that person's life living with the virus and for the disease itself. These persons were depicted as wasted, alone, abject, skeletal, and as if undead or always already dying. This has changed, but I still think such iconography, however grossly inaccurate and moralizing, constitutes the optical unconscious of the trauma of AIDS, like people falling from the Twin Towers, like the photographs of the concentration camps after liberation. Though associations linger like an afterimage of AIDS, the present visual field of the epidemic is blanched in a stillness of polite optimism. Strangely, the HIV criminalization laws have mostly sprung up in the past ten to fifteen years, an era referred to by many, at least in the terms of the West, as one of post-AIDS.

The epidemic of AIDS had once upon a time played out in an ecstasy of visibility, wherein one was encouraged to imagine the disease as it showcased itself in gaunt faces and whirls of deep purple upon bodies sagging downward toward the inevitable. Because of antiretroviral treatment, such monstrous iconographies now rarely surface; hence the law compels those who are HIV positive to name themselves upon nearing the edge of desire's fulfillment. We are not allowed to pass, to assimilate. I'm not sure what to show you because there's nothing to see, nothing to recognize in the visual field . . . and that's what frightening for so many. This is a film with nothing to show you, though it wants to.

8. I thought I would make a film founded upon voices . . . that I would meet people, Iowans who were prosecuted by the law and they would tell their stories, but, for the most part, they don't want to. In Bremer County, Iowa, Nick Rhodes was sentenced to twenty-five years in prison for sleeping with a man, only once, to whom he did not disclose his status. Rhodes also did not transmit the virus. After I heard about the sentencing I decided that I would make this film and that Rhodes should be in it. I approached Rhodes about my project, saying we could collaborate about the nature of his contribution to and inclusion in the film. Rhodes kindly considered this and a bit later very sweetly commended the nature of my project, said he wished he could be a part of it, but given the conditions of his parole, he couldn't agree. Bradley Harris, the judge who initially sentenced Rhodes to twenty-five years said to the defendant, "*One thing that makes this case dif-*

*ficult is that you don't look dangerous; you don't look like most of our criminals that sit here. But the risk is still there, just like if you would have shot a gun."* A few months later the sentence was drastically reduced, although lifetime probation and registration as a sex offender was part of the sentence. Still, I couldn't get over the initial sentencing, the trail of Rhodes, even if it was mitigated. I suppose I can't get over the law in the general or that I live the land in which such things are carried out . . . quietly, discreetly.

9. During the crisis era in the United States, that is, during the time before successful treatments of the virus, communities, like the activist coalition ACT UP, passionately fought for rights and accessible treatments for people with HIV/AIDS, as well as more just modes of representation. They constituted another mode of visibility, one that was righteous and hard won, ultimately resulting in countless victories and the most successful grassroots movement in American during the twentieth century. These people, who came a generation before me and whom I tremendously admire, were vigilant and militant in making themselves and their cause seen and listened to. But they are gone. Gone, not meaning deceased, though some are, but the vibrant movement that they championed and ignited is a thing of the past. This is understandable. AIDS is different now. In the United States, the virus, when treated, oftentimes does not progress to AIDS at all. We might say we are no longer living in the era of AIDS but that of HIV. The cause is less dire, the stakes less high. But for those of us who are positive, perhaps particularly for those of us who were recently diagnosed, it is difficult to parse what exactly being HIV positive means. Compared to the early days of the epidemic, we are lucky, fortunate to be the bearers of a hopeful and healthy forecast, no doubt. But this does not mean that the virus doesn't change us. With it, we inherit a history; one of pride and shame, activism and defeat. Identifications with most of these things, however, entail a reckoning with histories now past, one complicated by assurances of a long hold on futurity. But what of the present? What does it mean to be living with HIV now? I do not know. I don't see anything. I have heard it said that this felt feeling of nothingness, this absence of a secure identification with what it means to be HIV positive is a luxury. I can't entirely accept this, though I'm sympathetic to both the sentiment and manner of thinking. It does mean something to be HIV positive. But what? I long for this; long to see it. To orient myself, not to it, but toward it—whatever this it may be.

10. In nearly all the cases I read about, around the United States, willful transmission rarely seems the impetus behind not disclosing one's serostatus. What is it then? Can't you figure it out? That it's a fear of rejection, alienation, a willful, if negligent, attempt to be as if unmarked. There is real power in remaining unmarked and there are serious limitations to visual representation as a political goal. Is visibility a trap? I suppose it's assumed that if we couldn't keep ourselves safe from the virus we aren't able to guard others from the same, nor that we'd want to. This is wrong.

Also wrong is legally mandating HIV positive people with the sole responsibility of prevention. The logic of the law encourages HIV negative people not to concern themselves about HIV; that is, if their partner isn't forthcoming about a positive serostatus. While the law compels HIV positive people toward speech, it compels HIV negative people toward passivity and silence. In other words, why actively ask after your partner's serostatus or practice safer sex or use clean works, if your partner, legally bound to come forward if he or she is HIV positive, does not do so?

Wrong as well is prospectively discouraging people to get tested or seek medical attention. If one believes oneself to be at risk for HIV infection, yet nonetheless values these risk-bearing experiences as an integral part of one's quality of life, one might not want to learn of one's possible serostatus. Such knowledge would demand this person disclose their infection, which might decidedly limit access to sexual relations with a variety of partners; a situation he or she might wish to avoid. One alternately might get tested anonymously, test positive, but delay medical attention and perhaps treatment, as such recourse would necessitate that the person be on record as HIV positive and so interpolated by the law.

Finally wrong is a law thought to encourage candor that in many cases promotes deceit. Again, hypothetically, say an HIV positive person (maybe you or me) liked another person and performed oral or protected sex with that person, but was unable as yet to disclose his or her status. Now, say these persons continued to like each other with growing intensity over time. But the HIV positive person is now in an impossible situation. He or she obviously must tell the object of his or her affection about the object of his or her infection. But, how can the person do so? How can you, I do so? There is the worry of the partner's response, but then there is the conundrum of the law. If the object of affection takes the news very, very badly he or she might, under the law, seek the prosecution, the persecution of you or me. How might you or I confront this risk . . . one of

imprisonment, public shame, and essentially the end of a life as it is presently known?

11. And then there is my appetite for change. But it's like the itch and spasm of a phantom limb; how to even *begin* to change this nasty situation? I think about ACT UP, I think about them a lot actually, and their strategy of forcefully bringing attention to just how bad, how unfair and fucked up, things were in relation to AIDS. Fostering awareness promises the collectivizing of concern necessary to get the ball rolling. And then there is the nature of the broadened attention, of being attended to, which in and of itself can mollify dispossession. To such an end, I might parasitically use the public interest story of a gay wedding. After all, liberals adore looking with approval upon homosexual nuptials. I would storm the wedding, ruin the wedding, covering its members in sticky streamers of artificial blood. I would be asked why I did this and I would tell them . . . Or I would seek out perhaps the most dastardly villain in the saga of Iowa's HIV criminalization law, Judge Bradley Harris, ring his doorbell, wait, introduce myself, and shoot him with my cock . . . all this because my penis is not a concealed firearm and my body does not make of me a bioterrorist. Are these proposed actions hysterical, too far in excess of ACT UP's mandate of nonviolence? Perhaps, but I am at a loss.

Or I could make a film, about this thing, about this law that is unfair.

*We began with a fearful boy whose story ended quite well. But what happened after his calmly ever after? I imagine the boy, perhaps now a color-blind young man, missing but not seeing red. What was outside him has vanished, residing now internally as a memory, if not a certain shade of knowledge. So perhaps red was no longer of the world but his. Still, there was loneliness about red's lack of reflection. He longed to perceive that this and that are red; that it and they are red; he and she? Red. To see himself . . . in red.*

**David Oscar Harvey** is a PhD candidate in the Department of Cinema and Comparative Literature, at the University of Iowa. His pieces in *Discourse* and *LGBT Transnational Identity and the Media: Post Colonial—Post Queer* address issues surrounding HIV/AIDS, as does his essay film, *Red Red Red*, which has recently screened at a number of film festivals. He is presently completing his dissertation, "Cinematic Assemblages: An Anatomy of the Essay Film in Interwar Europe."

## Notes

1. Quoted in Jarman 2010.

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