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“Language Is My Second Language”: Dangerous Writing and Hiv-Affected Communities in Tom Spanbauer’s *In the City of Shy Hunters*

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ABSTRACT

This paper aims to analyze the U.S. writer and teacher Tom Spanbauer’s novel *In the City of Shy Hunters* by means of theoretical perspectives that embrace both queer and communitarian epistemologies. The novel, set mainly in New York City in the mid-1980s, is narrated in first person by the protagonist and shows how HIV/AIDS, and the elevated social stigma surrounding it, affects different classes and ethnicities, as well as gender, sexual and corporal diversities. It experiments with a particular writing style and teaching method that Spanbauer calls dangerous writing; that is, how to expose our inner life and secrets, which are often related to social taboos. The main objective of this paper is to demonstrate the connection between *dangerous writing*, queer studies (Judith Butler, Annamarie Jagose) and community theory (Jean-Luc Nancy, Maurice Blanchot and Roberto Esposito) by adopting a multidisciplinary approach to literary critical analysis. The main result of this study demonstrates that the *singularities* represented in the novel, who are mostly queer and affected by HIV/AIDS, can create *inoperative communities* and *communities of lovers*, open to otherness as well as being spontaneous, antisocial and momentary, with a recognition and acceptance of mortality.

KEYWORDS

Community theory; dangerous writing; finitude; HIV/AIDS; immunity; queer theory; singularities

Introduction: “It is the responsibility of the survivor to tell the story”

Tom Spanbauer has published five novels and since 1991 has been teaching a critical writing workshop in Portland, Oregon (U.S.), on dangerous writing, which is a minimalistic writing style as well as a teaching method that I will explain in [Section 2](#). By employing a multidisciplinary approach as methodology, I connect Spanbauer’s writing style with queer studies—in relation to Hiv/Aids¹—and with community theory, applying them to the novel under analysis.

In the City of Shy Hunters (2001), Spanbauer’s third novel, is a clear example of dangerous writing. In fact, from its very first page it reveals the social taboos related to finitude:

There's a couple suicides, a couple sacrifices, a betrayal. An ethical act. A famous movie star. An ancient Indian legend. A journey into the underworld to find a lost lover. There's the greedy king and his evil queen. Vicious Totalitarian Assholes. A virus – an epidemic – thousands of dead. [...] Torch songs forever. It's all drag. (p. 1)

Set in rural Idaho around the 1970s and, especially, in the New York City of the mid-1980s, this graphic story is narrated in the first person by a young white man, Will Parker—“William of Heaven.” Educated in Catholicism and rejected by his father, Will struggles with his sexuality and a stutter: “I am lip-syncing here, so sometimes the words don’t go with my mouth. Language is my second language” (ibid. 2). In his early life in provincial Idaho, Will relates only to his sister Bobbie, his mother and his best friend, turned lover, Charlie 2Moons, a Native-American. During these years the “enemy” is his father, who abuses Will’s mother and repeatedly rapes Bobbie from about the age of eleven (ibid. 289). Will betrays Charlie by telling a lie and keeping a secret. The plot is not linear, as there are flashbacks to Will’s earlier life. We learn that Charlie 2Moons abandons Idaho and Will for a better life in New York City. Seeking to leave his own tragic past behind Will too moves to New York to look for Charlie and ask for his forgiveness. In his “preying” he meets other “shy hunters,” people like him who search for the sore truth within their heart and who have suffered all sorts of traumatic experiences, especially due to Hiv/Aids, which in some way or other affects all of them. Will’s encounters in New York include Rose (or Argwings Khodek),² an “extra lovely” Afro-American drag queen and performer who becomes a key character in his life; True Shot, “crazy eyes” and “extra lovely” native American (or is he not?); Ruby Prestigiacomio, a poignant character and a queer drug user angry with society, who often resorts to a telephone booth to call Will; and Fiona Yet (or Susan Strong or Maffy), Will’s colleague in a restaurant in downtown Manhattan, and later lover.

Although a considerable part of the story is dedicated to Will’s adolescence in Idaho, the main setting of the novel is New York in the mid-1980s, at a time when the city was ravaged by the Hiv/Aids crisis. In the novel we learn that the “gay cancer” was firstly officially named in 1982 as GRID (Gay Related Immunity Deficiency). The Hiv-infection has always been considered a social stigma, and continues to be so to the present day. Since the 1980s, the political and medical sciences have identified specific “risk groups” for Hiv: these were already marginalized communities, including gay men, trans people and drug users, especially those afflicted by poverty, like migrants and different ethnicities, some of whom found refuge in the ballroom culture of New York City, frequented mainly by black and latinx drag queens, queer performers and trans people.³

The title chosen for this paper—“Language is my second language”—as well as representing the protagonist’s stutter and his nerves—serves to call attention to the fear we experience when we have to expose something about

ourselves in public or with a particular person. Sometimes it is difficult to find the right words to convey our thoughts and feelings, like disclosing our gender identity or sexual orientation, or our Hiv status. Tom Spanbauer, through the main characters of *In the City of Shy Hunters* and his dangerous writing style, gives voice to this issue, especially in the case of the protagonist, Will Parker, since for him language often becomes his second language; that is, not his primary source of communication: “Language is my second language. I’m just making it up where I don’t know” (ibid. 2).

Language is nonetheless a form of power.⁴ I believe that this power is used by the world of medical sciences, pharmaceuticals and corporations to define pathologies and diseases, classifying them into a rigid hierarchical (dis)order from more to less, according to what is medically and socially acceptable, or, as in the case of Hiv, what is not acceptable; although many doctors and scientific researchers have been trying, sometimes without sufficient resources, to find a vaccine or a cure for Hiv. By contrast, queer theorists and poststructuralists try to understand language differently, redefining the meanings of words and expressions, and seek to destabilize grammar, pressing on the instability of language, its use and its meanings, as in the case of the misleading definition and interpretation of Aids in the 1980s. Language therefore becomes a key tool under scrutiny in the novel, and will be central for my analysis of the special communication among characters who make up different community models. Queer theory has been widely applied to the field of literary theory and criticism since the 1990s, whilst community theory has more recently found an avenue in the literary field.⁵

Although Spanbauer has not received widespread public or academic attention, approximately forty of his students (up to 2018) have published novels and memoirs (Joshi, 2018, n. p.), including Chuck Palahniuk. Furthermore, Spanbauer’s acclaimed novel *The Man Who Fell in Love with the Moon* (1991) was a finalist for the 1992 Stonewall Book Award, and Ross Bell, producer of the movie *Fight Club* (David Fincher, 1999), considered it the best novel he had ever read—but nevertheless found it hard to adapt into a movie script (Spanbauer, 2015, n. p.). As a matter of fact, the Spanish film director Pedro Almodóvar also had the desire, never fulfilled, to adapt *The Man Who Fell in Love with the Moon* into his first western (as a film genre) queer movie (Grayson Bell, 2006, n. p.). Hence, in an attempt to redress this scarcity of critical attention, the main contribution of this paper is to expand a rather new academic avenue by incorporating Spanbauer’s concept of dangerous writing into the field of literary criticism.⁶ To achieve this, as well as applying queer and community theory to my analysis, the following objectives will be pursued:

- To examine the powerful interconnection between dangerous writing, queer studies and community theory.

- To demonstrate that queer theory is an essential tool in the prevention of the medical and social stigma associated with Hiv.
- To demonstrate that the queer *singularities* of the main characters in the novel fit into the models of the *inoperative community* and the *community of lovers*.
- To explore and apply the notions of *immunity* and *finitude*.

Theoretical premises

“The Shy Hunters search for the sore truth within another human heart”: Tom Spanbauer’s dangerous writing

Tom Spanbauer is the founder of dangerous writing, which is a minimalistic approach to writing as well as a teaching method. It consists of investigating situations that hurt us and that exist but we try to ignore, taboos, “things that won’t leave us alone” (Gutierrez, 2014, n. p.). It is “dangerous” because it forces the writer and the reader to explore past painful experiences, such as fears (ibid.). Although dangerous writing uses the first person singular “I” as narrator (Reeves, 2011, n. p.), it does not involve writing a memoir; it is instead closer to “auto-fiction,” but with its own particular style. In fact, the I-writer and the I-narrator are very close to each other, but the writer can explore parts of the self that are not sufficiently dealt with in their real life, and, most importantly, the writer can lie (Spanbauer, 2014a, n. p.). That is, the situation can be similar to one in real life, and does not have to be outside of it; rather, the I-narrator reinvents it, makes it up, and makes it even more “dangerous” by exploring personal and social taboos. Consequently, through fiction the dangerous writer lies and tells the truth truer (Spanbauer, 2014b, n. p.).⁷ In fact, at the beginning of each workshop, Spanbauer recommends his dangerous writers to accomplish two important tasks: to write about a moment that changed them, and about an event that they do not remember well (Byloos, 2014, n. p.), and then create a fictional story around these issues. Thus, Spanbauer claims that dangerous writing is about dealing with human experiences “by going inside to our own particular battles [. . .]. To talk about being human is to talk about the pain and sorrow in your own heart” (ibid.). Once they reach that personal battle place, dangerous writers must stay there and investigate it as well, trying to understand, and if possible, to forgive.

This process, according to Spanbauer (2014a, n. p.), is a type of therapy, because it allows them to rediscover their experience and take any direction they desire, exaggerating the actual situation as well as dealing with it, even though a different and invented “I” experiences it. It therefore becomes an opening, a disclosure, a space to be filled in with multiple possibilities. As the protagonist of the novel says: “Make it aware, make art out of it” (2001, p. 113).

To sum up, writing dangerously involves abandoning a third-person omniscient narrator and instead allowing the first-person narrator to have a personality, to be vulnerable, to create a voice, to make meaning in their writing, and to take a journey inwards. Spanbauer's dangerous writing style is close to the spoken language, using at times "bad grammar" and cursing, as well as breaking English syntax rules, repeating words (usually adjectives) and, whenever possible, avoiding adverbs; often using a capital letter after a comma or avoiding using commas (see quotes from the novel in [Section 3](#)).

Throughout Spanbauer's novels there are often references to his Catholic upbringing in Idaho, to his repressive parents, and to what it meant for him to grow up as queer with the societal pressure to be straight (he was married to a woman). Anything related to sex was considered a sin and a social taboo, and anything coming from the outside was considered a threat, like native people living in the area or Mexican migrants working on his family's farm. References to Hiv/Aids are to be found not only in the novel under scrutiny but also in his latest one (*I Loved You More*, 2014c). As a survivor of Aids himself, Spanbauer (2014d), discussing the epidemic in New York City in the 1980s, recalls that "[t]he widespread affliction, the calamity, wasn't just death. The epidemic was also the fear of death. Nowhere to run. Nowhere to hide. That's what a plague is" (n. p.).

Queer studies in relation to Hiv/Aids

Queer activism was born as a grassroots movement in the 1980s in the U.S. within social and political associations (such as ACT UP) responding to Hiv/Aids. Queer theory emerged in the early 1990s, mainly from poststructuralism and feminist theorists and writers, such as Judith Butler, Teresa de Lauretis and Eve Kosofsky Sedgwick. According to Jagose, the Hiv/Aids crisis was closely connected to queer theory: "The most frequently cited context for queer [...] is the network of activism and theory generated by the AIDS epidemic, parts of which have found that queer offers a rubric roomy and assertive enough for political intervention" (1996, p. 93). Moreover, this necessary queer political intervention was accelerated also by "the growing homophobia brought about by public response to AIDS" (Creed, 1994, p. 152).

The term *queer* was politically and academically re-appropriated in order to expand lesbian and gay studies by problematizing the idea that gender and sexual identities, including cis⁸ heterosexuality, are culturally constructed: "Heterosexuality, then, is equally a construction whose meaning is dependent on changing cultural models" (Jagose, 1996, p. 17). Furthermore, queer can also be used as an umbrella term to refer to all Lgbtiq+,⁹ including fluid, gender nonbinary (or "genderqueer") and nonconforming people, as I do in this paper. Queer is therefore a problematic term to the point that Judith Butler claims that "normalizing the queer would be, after all, its sad finish" (1994, p. 21).

Queer theorists argue that sexual and gender identities are principally sociocultural products, fluid and changing in time and context, which are perpetuated with a specific purpose, thus taking a more constructivist stance (Jagose, 1996, pp. 16–17). For example, the idea of having risk groups for Hiv has been problematized by queer activists due to its relationship with power, control, social construction and even immunity: if you are a white cis heterosexual person, notably a cis heterosexual man, you are generally considered immune to or protected from contracting Hiv.

Queer theory was first considered as being more like a parody than a scientific theory, born to provoke as a form of antinormative resistance (Sáez, 2004, pp. 126–127). It tries to reconstruct the subject without falling into the “trap” of what it might represent to be an identity. It was in response to this very idea that sexual and gender identities (as well as different ethnicities and social classes) can be used with specific political purposes that queer activism and theory emerged during the Hiv/Aids pandemic from the mid-1980s in the United States.

As previously stated, the stigma attached to Hiv/Aids further reactivated homophobia¹⁰ in the public sphere and produced an identity crisis, which forced the reformulation of the individual (Argüello, 2016, p. 238). Ever since the appearance of Hiv/Aids in the western world, certain types of people have been classified into risk groups; that is, communities of people who were believed to be more at risk of contracting the (retro)virus. The problem is that these communities, more than being “at risk,” and hence in need of protection (or immunity), were first and foremost considered as “risky”—and primarily for the “wellbeing” of our society at large. Initially, in the States it was mainly the four Hs: homosexuals, Haitians, hemophiliacs and heroin addicts (ibid. 240); and then also trans people, migrants, sex workers and “people of color.” These groups of people were in fact already marginalized and stigmatized by the establishment, which saw in Hiv/Aids an opportunity to further destabilize them. However, the focus should have been put, and should still be put, on risk practices and not on risk (or even worse, “risky”) groups. In the sexual sphere, practices and behavior should be prioritized over one’s identity or orientation, as many men who have sex with men (MSM), for example, do not consider themselves gay. The stigma is partially associated to sexual acts, one of the most frequent western taboos; yet it is the mere belonging to a certain community or category that is considered risky for Hiv. Furthermore, heterosexuality is seldom mentioned in Hiv/Aids prevention programs, and heterosexual men in particular have remained a “forgotten group in the pandemic” (Higgins, Hoffman, & Dworkin, 2010, p. 435). As a result of all these questionable practices in the sociopolitical and health spheres, Hiv/Aids started to be taken more seriously into account by the political establishment and by the pharmaceutical companies in the 1990s thanks to grassroots movements, as demonstrated in the film *The Normal Heart* (Ryan Murphy, 2014) in the

U.S. and in France in *120 Beats per Minute* (Robin Campillo, 2017); as well as in the TV series *When We Rise* (Gus Van Sant, 2017) in the U.S., and in Britain in *It's a Sin* (Russell T Davies, 2021).

Gamson (2003) asserts that queer theory should be considered an essential intervention in the health sciences (cited in Argüello, 2016, p. 231). However, health disciplines and social knowledge are largely characterized by cultural discourses, and this is especially true in the case of Hiv. Argüello (2016) criticizes the current logic of medicine as being based on facts and nature, and that by positioning

social matters against naturally fixed phenomena [. . .]. It produces a rational mind-body split in which the mind is the purview of philosophy and the body is the subject of medicine. And, it defines the laws of the body via its clinical gaze. (p. 232)

In addition, he attests that Hiv is “both a biologic reality and a discursive syndrome of historically contingent meanings, situated politics, and marginalized identities” (ibid. 237). Thus, it is also an ontological threat because it represents a social stigma attached to the person who lives with it through discourses aimed at marginalization.

To sum up, citing Argüello’s words (ibid. 242) when discussing Waldby: “a queer perspective works to accommodate death within a positive ideal of life [. . .] and has more potential to bring into focus the intergenerational traumatic effects due to Hiv and its epidemic of signification” (ibid. 238). Furthermore, Argüello argues that our culture has become obsessed with risk: “Risk is evidence of all that professionals and public citizens cannot see or understand. Risk is life” (ibid. 242).

***“Why else do we live, except to be loved and remembered by those we love?”:
An introduction to community theory***

Community theory was potently reconsidered in Europe in the 1980s, around the same time “William of Heaven” was in New York City in the novel. This revision of the community debate was initiated notably by George Bataille during the first half of the 20th century, and continued by Jean-Luc Nancy, Maurice Blanchot and Roberto Esposito, among others.

Operative and inoperative communities: Death and finitude

In *The Inoperative Community* (1991), Nancy describes an “operative community” as a working community: hierarchical, transcendental and usually hetero-patriarchal. It relies on blood ties, on commonality, on sacrifice, and on the sublimation of death. According to Nancy (p. 9), this type of community is often regarded as nostalgic and pastoral, with strong communitarian bonds that we seem to have lost in our modern world.

Nonetheless, he recognizes that this idealized and nostalgic community has never really existed because in order to do so it would need to be completely separated from the rest of the world (ibid. 11) and thus immunized from anything external and from outside threats. The aim of such a community would be absolute immanence (a communal fusion, self-contained) and elimination of difference. In contrast, “the inoperative community” is not associated with work and with the value of production. It is instead based on singularities without a common identity and individual property; it is spontaneous, open to alterity, exposed to vulnerability through communication and secret sharing. Its encounters are momentary and imminent (transience), and it comes to terms with death. The concept of *singularity*, which chimes with the notion in the novel of the “shy hunter,” is explained by Nancy as follows:

A singular being does not emerge or rise up against the background of a chaotic, undifferentiated identity of beings, or against the background of their unitary assumption, or that of a becoming, or that of a will. A singular being appears, as finitude itself: at the end (or at the beginning), with the contact of the skin (or the heart) of another singular being. (ibid. 27-28)

Discussing finitude, a central aspect in community theory and in the inoperative communities analyzed in this paper, Nancy reminds us “that the individual can be the origin and the certainty of nothing but its own death” (ibid. 3) and that “death is indissociable from community, for it is through death that the community reveals itself, and reciprocally” (ibid. 14). He also claims “the impossibility of a communitarian being in the form of a subject” (ibid. 15). Therefore, if we cannot be part of a communitarian “we” or a combined identity, we rely on the individual, which, according to Nancy is a “figure of immanence” (ibid. 3), an indivisible atom. “Still, one cannot make a world with simple atoms. There has to be a *clinamen*. There has to be an inclination or an inclining from one toward the other [. . .]. Community is at least the *clinamen* of the individual” (ibid. 3–4). However, he also reminds us that “[s]ingularity never takes place at the level of atoms, those identifiable if not identical identities; rather it takes place at the level of the *clinamen*, which is unidentifiable” (ibid. 6–7).

The community of lovers

Blanchot confronts and expands Nancy’s communitarian debate in *The Unavowable Community* (1998). Through a close reading of *La Maladie de la Mort* by Marguerite Duras (1982), Blanchot describes the community of lovers, which is “formed by friends or couples” (1998, p. 33), as spontaneous, vulnerable, based on secrecy and revelation. Its encounters are momentary and self-dissolving. In his own words, it is

the affirmation of a relationship so singular between beings that love itself is not necessary for it, as love, which by the way is never a certainty, may impose its requirements on a circle where its obsessions can go so far as taking on the form of the impossibility of loving. (ibid. 34)

Blanchot quotes these significant words from Duras' *récit*, which summarize the essence of a community of lovers, which often occurs within an inoperative community: "I die without having lived, having never done anything but dying while living" (ibid. 37). He then highlights the woman's last words in Duras' *récit*: "Even so you have managed to live that love in the only way possible for you. Losing it before it happened" (ibid. 42). Hence, love is experienced through loss, as so often happens to Will in the novel. Moreover, Blanchot comments that even if the community of lovers does not entirely rely on love, it is not imposed but "elective" (ibid. 46); it is therefore a free choice without an agenda. He also claims that "[t]he community of lovers, no matter if the lovers want it or not [. . .], has as its ultimate goal the destruction of society" (ibid. 48). Ultimately, a community of lovers is formed by chance and by a passion for death, which can in fact be a threat for the society, not on account of its violence, but rather its "virulence," and its capacity for contagion (García López, 2011, p. 227), which idea fits in with Roberto Esposito's concept of *immunitas*.

Community and immunity

Following the subsequent debates on community theory from Nancy and Blanchot, among others, in 1998 Esposito introduced the notions of *communitas* and *immunitas* in *Communitas: Origine e Destino della Comunità* (new version in 2006). Esposito argues that the relationship between community and violence has generated two categories: *communitas*, in reference to the common/public, and immunity, related to the particular/private (as cited in García López, 2011, p. 220). According to Esposito (2006), *immunitas* is the negative or lacking form of *communitas*, where the "immune" person maintains their substance, freedom, and exemption from paying debts (p. XIII). This political strategy aims at avoiding the danger of transmission (or infection) of the "common": the contagion of a relationship (ibid. XXI) or a virus (e.g., Hiv). Esposito believes that the quintessential category of modernity is the *immunitas*.

However, he also reminds us that immunity is interconnected with death. A vaccine—that is, usually the same, or a similar virus injected at very low doses or in an inactive form—exposes the body to the infection and hence to the possibility of death (ibid. 11). This protection cannot be expelled from our body because it is produced by our immune system itself, so the "virus" will always be a part of ourselves (ibid). In the case of Hiv, a vaccine (or a cure) has never been found to date. This fact increases and prolongs its social stigma as the infection must be controlled by antiretrovirals for life, at least in the

western world, often with life-threatening side effects. Moreover, unlike his predecessors, Esposito has contributed to the recovery of the political dimension of community through the paradigm of immunity, in which certain people enjoy diplomatic or parliamentary immunity while the vast majority is subjected to the law:

But it is equally recognizable in the medical and biological meanings of the term, according to which natural or induced immunization implies the ability of the body, by means of its own antibodies, to resist an infection caused by an external virus. (2013, pp. 84-85)

As we can clearly see, the politics behind this reasoning is a form of *biopolitics*, where biology and medicine mingle with law and jurisdiction (ibid. 85). Thus, politics deals with the biological life, which can refer to individuals, “but also to particular communities” (ibid.); and biopolitics discloses two internal possibilities in the immunization paradigm: affirmative/positive (protection) and negative (destruction/negation). This is directly connected to Hiv, which is an autoimmune infection that without the antiretrovirals would become a syndrome (Aids), due to the exposure of “opportunistic diseases or infections,”¹¹ where the immune system of our body, in the fight against the (retro)virus, becomes so strong as to turn against itself. The same occurs when we receive immunity, be it individual, social or political, at higher doses. An example is our globalized neoliberal world, where the demand for protection of our western countries from “the outside” becomes an expression of danger (be it real or not), thus activating defensive and hostile mechanisms against it (ibid.). Esposito’s intent is to employ the potentially affirmative function of biopolitics, instead of using it with threatening purposes. In fact, he argues that there is a strong need for affirmative biopolitics where life would no longer be the object of politics but rather the subject (ibid.). However, I believe that there has always been resistance to use affirmative biopolitics, with its idea that people’s lives should matter more than money. Clear examples of this are the crisis of Hiv/Aids and the current globalized emergency brought about by Covid-19. Governments and corporations all over the world seem reluctant to prioritize the preservation of our health and life over maintaining a globalized neoliberal economic system which, based on massive privatization, clearly prioritizes the economy over life, with the risk of collapsing both. Esposito’s answer to the problem would be to find the balance of power between “common” and “immune”; to separate the immunity protection of life from its destruction by means of the common; and to conceptualize the function of immune systems in a different way, making them into relational filters between inside and outside instead of exclusionary barriers (ibid. 87).

Consequently, he proposes the deactivation of the structures of negative immunization “accompanied by the production of common spaces, spheres, and dimensions” (ibid.). However, he recognizes the immense obstacle to this

represented by the hyper-globalized privatization system, which has increasingly taken over environmental resources, communal areas, cultural assets, health systems, but also spaces for communication and instruments of information (ibid. 89).

Analysis of the novel

“It’s a tale lip-synced by a drag queen”: Queer singularities in the novel

Most of the main characters in the novel could be considered queer singularities: Will, Bobbie, Charlie, Rose, Ruby and Fiona. They all try to escape fixed and hegemonic gender and sexual identities and they are not part of any clear-cut community. They are defined more by what they do, and by what they feel, than by what they are. Will mainly falls in love with Charlie (a boy), but then in New York he also falls for Rose (a drag queen) and Fiona (a woman). In his adolescent time in Idaho Will struggles with his gender, but Charlie is there for him: “It’s always me, I said, Who screams like a girl, I said. When we play Door of the Dead [. . .], No matter how hard I try not to. That’s when Charlie kissed me” (122).¹² Whilst in New York he understands performativity as part of one’s singularity:

Life is an art and art is a game, I said. This is all an illusion, I said. Asobase kotoba. So why not continue playing? I said, I see that you are playing at being a great Susan Strong, I said, And I’m playing at being a great Will Parker. (186)

From the little information we can gather from her brief life, Bobbie does not conform to expected gender stereotypes either. In one instance, Charlie is questioning whether she is a lesbian because she has a stack of magazines full of half-naked women, but to Charlie’s surprise, and ignoring the issue, she instead asks him a question, turning the focus on his identity: “Injuns got straight hair. Where did you get them waves?” (121).

As for Fiona, she questions defined identities or belonging to a community, but she understands the necessity for human rights:

So, us poor orphan American bastards struggle for some kind of belonging – gay, black, feminists, Native Americans. But don’t get me wrong. I love both my two brothers Hunter and Gus and they’re both fags [. . .], And I sleep with women now and then – so how can I not be for gay rights? And women’s rights – I mean I’m a woman, right? How could you be a woman and be against women’s rights? (76)

Rose, as a drag queen who falls in love with Will, is another clear example of a queer singularity. In a conversation with Will, she gives a salient explanation of the imbalance between femininity and masculinity in our world, commenting also on different types of discrimination, and so giving voice to fundamental principles shared by queer theory and transfeminism:

We are living in a time where meaning has been obliterated by an excess of the male [. . .]. We take it as given that the White Paranoid Patriarch [. . .] is our voice, our spokesman. We take it as given that Christianity [. . .] is the only religious truth because some white guy says so [. . .]. We take it as given that women do not make as much money as men. We take it as given that Native Americans are a conquered people and should live on those patches of infertile land we let them live. We take it as given that sex is male penetrating female. We are living in a world of false assumptions, Rose said, bracelets clack-clack. Ergo: that which appears to be is not. (253)

Another aspect that I consider queer in the novel is the dual concept of “crossing over,” that is, reaching Manhattan and changing one’s name. According to Ruby, when you cross over you need a new name, so you change it and with it possibly even your identity, thus claiming your own singularity. Will eventually connects crossing over with fear about accepting one’s gender and sexual identity (305). However, Rose notices how Will is confused with his sexuality and offers to help him to accept himself, to stop hiding (at the Pride Parade) and to say the word: “Gay [. . .]. You can say it. Gay, I said. And proud [. . .]. I smiled” (312).

Community configurations in the novel

“All this family shit! How can you reinvent your life if the original versions won’t leave you alone?”: The inoperative community

The main characters in the novel, notably Will and his encounters in New York, are a good example of an inoperative community and of singularities, where vulnerability serves to expose their mortal truth. In Will’s words:

Five people I know: Ruby, True Shot, Rose, Susan Strong, Harry. One’s a junkie, one’s a spirit schlepper, one’s a Shakespearean drag queen, one’s idiot-savant mother fucked a truck driver, one is New York’s only Irish Catholic homosexual. Two I count as friends, Rose and True Shot. One is just a voice on my answering machine, Ruby. One is attached to the other one, Harry. (186)

During Will’s childhood and adolescence in Idaho, he, Bobbie, and Charlie can be considered as singularities forming an inoperative community because they are social outcasts who need to go toward one another, totally exposing themselves to each other, in an otherwise hostile social and family environment.

Will’s sole purpose in New York is to find Charlie 2Moons. His job in a restaurant is not aimed at production, it is only needed to survive. Therefore, he is on a mission, not for the sake of a community or society, but rather—in line with dangerous writing—to heal his sore heart, which makes him both a singularity and a shy hunter. Furthermore, all the people he meets in New York are likewise survivors, operating not for a community or society at large but on the margins of that society. For example, before coming to New York, Rose, who has a doctorate in Theater Arts, secured a teaching job at

the university in Portland (Oregon), but was rejected for tenure due to her ethnicity: “I figured fuck it. It was best to get out of academia [. . .]. So I moved to New York, Rose said, And became a drag queen” (409).

When Will arrives in New York, he is spotted by Ruby Prestigiacomo and True Shot, who are driving the “Door of the dead van” (17). Back in Idaho, Will, Bobbie and Charlie used to play a game called “door of the dead”; Spanbauer is making a connection here with finitude, with the idea that our lives are just temporary, all synonyms of an inoperative community. Ruby stresses the importance of living for the moment: “What a Talent for Reality is [. . .], Is acknowledging that you’re here and remembering it” (57). Whilst Fiona marks a difference between identity and individuality: “Identity is your role in life, the part you play. Individuality is who you are, and who you are is revealed to you if you can get to complete presence” (74). Thus, forming a thread connecting individuality to singularity, and then to the queer concept of playing a role: “The idea being that you are in such control of your life and your powers that everything is a game [. . .]. The fates lead her who will; who won’t they drag” (75).

Turning to the shy hunters, who could be considered singularities inside an inoperative community, Rose explains that they are terrified that others will destroy the truth within their heart; hence they protect themselves and hunt out the sore truth: “No one surprises a Shy Hunter, Rose said. Not even death [. . .]. It is the best of combinations, Rose said. The Shy and the Hunter” (134). Moreover, Rose argues that darkness is something that we should not reject because in our society there is too much light and “[t]he Shy Hunter knows underneath it all there is nothing, no thing [. . .], The thing is a lie, an illusion. The only thing there is is your concept of the thing. That’s illumination” (256). In addition, Rose criticizes the modern society (of the 1980s) in which there is a return to Christian fundamentalism and family values, as well as an “increase in police forces, emphasis on law and order, construction of more prisons—all these are signs of the White Paranoid Patriarch’s approaching extinction” (286).

Undoubtedly, Will finds comfort in the company of this inoperative community where its singularities depend and lean on each other (*clinamen*) and where they all suffer directly and indirectly from the horrors of Hiv/Aids, forcing them to confront reality, expose their true selves and deal with finitude. These singularities are people who, in concordance with dangerous writing, spontaneously form a family union (an inoperative community in this case), thus positioning themselves outside the “biological” family, which nobody chooses and which at times can be oppressive.

“Doubt thou the stars are fire; Doubt that the sun doth move; Doubt truth to be a liar; But never doubt I love”¹³: The community of lovers

According to the principle of Blanchot’s community of lovers, love can only exist through an antisocial dimension and a death drive, losing itself before it materializes. There are several examples of this type of relationship in the novel. First, Charlie and Will, whose love is, for various reasons, extremely fragile. We learn that Will starts getting intimate with Charlie, who is a little older than him, when he is about twelve. Their ethnicity is another factor to consider: Will being from a white Catholic family with a racist father, and Charlie being a mixed-heritage “Injun.” Theirs is a form of strong passion predestined not to endure. They seek to become blood brothers by cutting their wrists and mingling their blood, swearing an oath to seal their secret blood pact. This is a type of love that vanishes in the blink of an eye, and all that remains for Will is a memory of Charlie: “A photograph. No bigger than the palm of my hand. Things and the meaning of things” (36), and a desperate cry: “Please Charlie, I said, Forgive me. You got to forgive me. I didn’t have a fucking clue what to do” (37). The circumstances that lead up to Bobbie’s death and Will’s subsequent lie to protect a terrible secret are the cataclysm for the destruction of this community of lovers, despite Will’s later attempts in New York to rescue it: Aids gets there before him.

Earlier on in Idaho, Bobbie, Charlie and Will initiate a love and sex triangle, based on the same principle of the fraternity/sorority blood pact explained above. This incestuous situation interconnects the community of lovers with dangerous writing and its social taboos. Bobbie is raped by her father, one of the most difficult taboos to counteract because it happens within a heteropatriarchal family unit, considered to be the most “natural” form of family. On the other hand, the incest between Bobbie, Will and Charlie is voluntary and is not imposed, which chimes with Blanchot’s community of lovers as being an antisocial pact.

Another example of what could be considered a community of lovers is the special relationship between Will and his mother, who sometimes play at being boyfriend and girlfriend, changing roles when necessary. However, this is not a clear case of incest because there is no sexual activity involved. This particular community of lovers is one that is afflicted by threat and finitude: Will’s mother commits suicide as a result of her gruesome life due to her husband’s abuse and her daughter’s tragic death.

Rose is not particularly shocked when Will tells her of the incest acts (the voluntary one). On the contrary, she finds the subject of incest fascinating to explain:

The Greeks, Rose said, Believed that when incest was vertical – that is [. . .], Father with daughter, mother with son – that the child of this union was born a hero [. . .], the child’s task is to restore order to the universe [. . .]. On the other hand, Rose said, If the incest was horizontal – that is, brother with sister - the child of this union was born a monster [. . .]. And your situation [. . .], Is unique because actually you were your mother’s boyfriend – physically speaking, weren’t you? Plus then you fucked your sister [. . .]. Vertical and horizontal [. . .], Ergo, Rose said, You are both the hero and the monster. The hunter and the prey. (294-295)

In New York City, Will engages himself with two types of community of lovers, as represented by Rose and Fiona. His love with them is intense and it happens spontaneously; simultaneously guided by a strong sense of survival and a death drive. Before being a lover, Rose is a guide and a dear friend; she is the person who, in my opinion, best gets to know Will, teaching him how to survive and how to become a shy hunter. In the case of Fiona, she inclines toward Will especially after the death of her best friend Harry and her two brothers (Aids) and ultimately of her mother (suicide). She realizes that her and Will’s lives are worth but a moment, echoing the transient duration of the community of lovers: “Finally, Fiona said, Our lives just come down to moment, don’t they?” (303).

“When you’re thirsty, water is so beautiful”¹⁴: Hiv-related stigma. Immunity and finitude

The novel strips bare the Hiv/Aids reality in several different ways. Will experiences at first hand the suffering caused by Hiv/Aids through the many encounters he has with the people dying of Aids, including Rose, Harry and Ruby. In addition to the physical suffering and psychological trauma, there is the discrimination and stigma attributed to Hiv/Aids by society, and the frustration that this provokes in people like Rose:

The life I am trying to grasp is the me who is trying to grasp it. My task was to not abandon myself, to not confuse the confusion with myself, to not turn into salt, into dust, charcoal, into purple bumps of Karposi’s sarcoma like the rest. (2)

In an intimate moment with Will, Rose reflects on what it means to get Hiv/Aids, saying that you never know when it will hit you: one day you are leading your normal life and the next you end up “in a coma with tubes in your nose and mouth and up your ass” (135). It is also Rose who illustrates the financial problems that come with Hiv/Aids, reflecting that when, or if, you leave the hospital you think you are the lucky one, you have all the hope in the world; meanwhile you have to pay a massive hospital bill and you are terrified (136): “I tell you, I’m not going to do it. I got my jar of Valium or something dramatic—I’m going out with a bang, a big fucking bang, no whimpers here [. . .]. I am going out in style” (ibid.). She, however, as a member of Screen Actors Guild, could at least afford to stay at the hospital thanks to its private health

insurance, but for many other patients it was impossible to sustain the cost, proving once again that immunity (protection) is a privilege that is not available to everyone. I believe that in our recent times, Hiv/Aids serves as one of the clearest examples of how negative biopolitics, based on destruction and/or negation, has been implemented almost all over the world, categorizing certain groups of people as “risky” rather than “at risk,” thus maintaining stigma, discrimination, hate and prejudice against them.

The signs of the deadly syndrome are all around Will: all the young men he sees in the streets or at the gym with their wasted bodies, no muscles anymore, only flesh and bones (154); and the many suicides he hears of, some after parties with friends at home (155). He and Rose even witness one young man dying of Aids throw himself out of an upper-floor window at the hospital: “Death is only a window” (326). The hospital, including dramatic incidents like this, is also the place Spanbauer uses to exemplify the relentless, mundane brutality of Hiv/Aids. The first thing Will notices on visiting Rose is the stench of death among all the patients there and the fear of losing his beloved friend and lover:

I wondered if it even was Rose there, lying so still [. . .]. Rose? I said. You OK, Rose? [. . .].
The horrific whisper: Just a touch of the AIDS, Rose whispered. Rose laughed a little, but I didn't laugh. (323)

Similarly, Will experiences the sight of Harry dying in hospital: “his body just lumps in the bed, his mouth open, a blue tube in his mouth, blue tubes on his nose” (388). Will feels also wounded by the language that surrounds the syndrome. When asking a nurse about Harry's health condition, she utters “the word that hurts”: “Your friend has AIDS, the nurse said. Lletre ferit: AIDS” (390). Harry's suffering is compounded by the rejection of his parents, who do not want to know anything about him. Called on the phone Harry's father says: “My son died years ago, and then hung up. Can you imagine, Will? Fiona said. His own fucking father” (389). Fiona, seeing that Harry is in excruciating pain, gives him a full bottle of morphine to assist his death (413). She also ensures that Harry is buried with her own family: her two brothers and her mother. In this way, Harry, rejected by his biological family, becomes part of Fiona's family, the type of community who has always loved and accepted him.

To deal with the pain provoked by such situations, Spanbauer often has his characters resort to humor and irony. Fiona proclaims: “Let's have a cocktail! [. . .], Cool! And we walked out the door, laughing at Harry's bare pink butt sticking out of his hospital gown. But it's not the truth. Harry's eyes stayed tight” (389–390). And Ruby says, to reassure Will about their¹⁵ “purple bumps” (56) on their arms: “If it's the gay cancer you're worried about, [. . .], we can just hold each other” (28).

Will's internal confrontation with the atrocities of Hiv/Aids is played out in his first participation at the Gay Parade in New York in June 1986: "People with AIDS. Walking wounded. Thousands" (308). He notices young guys who look socially shy and terrified: it is their first time in a gay parade and their first time with Aids (309). "In that moment, my body understood what it was to be brave [. . .]. Brave meant you were afraid, real afraid, but you went ahead with it anyway" (ibid.).

In relation to Rose's suicide, we experience a clear case of autoimmunity, a sacrificial self-destruction as an antisocial act. Dressed in drag as a priest, she takes hostage Cardinal O'Henry (a fictional character based on a real Catholic cardinal who was against the use of condoms), tying him to the main door of St. Patrick's Cathedral. Will arrives at the last minute. When he tries to stop Rose from killing herself, she warns him: "This is the end of my life. And you're not going to fuck it up" (468). These are her last words before her self-immolation:

Now it's time to exit stage left, Rose said. Something dramatic, with a bang, a big fucking bang! No whimpers here! Time to say good-bye, Rose said. The lucid compulsion to act polemically. [. . .] There's no victim here! This is my final act as a Shy Hunter, Rose said, A Shy Hunter always chooses life until he¹⁶ chooses death. (471 - 472)

Conclusions

The main contribution of this paper has been to further introduce Spanbauer's concept of dangerous writing into the field of critical literary analysis, using *In the City of Shy Hunters* as a case study. This has been effectively pursued applying a multidisciplinary methodology that has combined all the necessary ingredients for the analysis in terms of queer studies and community theory. The principal characters from the novel, particularly Will, his sister Bobbie and Charlie 2Moons in Idaho, and the friends that Will makes in New York, notably, Rose, True Shot, Ruby, Fiona and Harry, can all be considered queer singularities. These singularities incline toward each other (*clinamen*) and, in line with queer theory, do not seem to possess a fixed gender and sexual identity. They all share a similar aim in life: shy hunting, and the shy hunters can at the same time be considered both singularities and social outcasts.

Hiv/Aids is the trigger for this inoperative community in New York City. The protagonists of the novel are forced to confront finitude and the inherent social stigmatization of what it means to live with Hiv and die of Aids, and with all the horrendous consequences on the survivors, like Will. Their community is not a project with a specific social aim; on the contrary, it is an antisocial community that tries to survive and fight against the establishment, as well as a common deadly enemy: the retrovirus. In the novel the Hiv/Aids-

stigmatized body has been rendered visible through the very painful and relatively slow death that people with the syndrome must endure. Spanbauer understands the necessity to celebrate the momentary existence of the body:

Whether you fight it, cop an attitude, fuck it, or fall in love with it, you're still going to die. We're all just in our bodies for a moment in our life. Such a brave and lovely act it is to let the body celebrate. (500)

During my research I have found it quite disturbing to realize that discrimination, prejudice, stigma and internalized shame (and “sin”) related to Hiv are still widely present nowadays and that Hiv is considered one of the most dangerous and socially threatening viruses (often confused as a “disease”) among all¹⁷; a fact upon which we should all reflect, since the Hiv-infection can potentially affect each and every one of us. Indeed, its social stigma, together with the efficiency of the antiretrovirals (which are nonetheless a palliative and not a proper cure), has contributed to its being forgotten as an ongoing reality, relegating it to places where people neither want to think about it nor wish to go. Moreover, Will’s inoperative community in New York City is one where him and his friends could find spaces to confront and comfort themselves. Nowadays, physical spaces have been partly supplanted by virtual spaces (e.g., online communities), meaning that the type of inoperative community experienced by Will would now probably work differently or would simply not exist at all. This corroborates the queer perspective that time and place are important factors in defining individual or communal identities. Furthermore, a queer epistemology has been demonstrated as an essential tool in counteracting the stigma and prejudice surrounding the economic, political and health aspects of Hiv, where the most disadvantaged portion of the population is reduced to “risk groups” considered “risky” for the immunity of society at large. This aspect is amply manifested in the novel, where Rose, Ruby, Charlie and Harry all fall victims of the system that has created these discrepancies.

Furthermore, consistent with Nancy’s theory, these singularities form an inoperative community not because they aim at collective production, but because they all have their own task to fulfil; that is, not for the sake of society but for themselves and their “unworking” community. The novel highlights the importance of being part of a family formed by queer singularities inside an inoperative community who decide to form bonds outside biological links, which are instead “imposed” on us.

The unions of some of these singularities have established communities of lovers (in Blanchot’s terms), where love in these ephemeral relationships is based on loss. All the communities of lovers analyzed in this paper are spontaneous, antisocial, alternative, momentary, and directed by death. Finitude appears in different forms in the novel, mostly infringing social

taboos: suicide (including sacrifice), homicide, or caused by Aids. These events exemplify Spanbauer's dangerous writing style and the community configurations that I have applied to the novel.

I shall conclude this paper by quoting Bobbie's words when Will asks her why she always looks so sad, which, in my opinion, summarize the impotence for some of us in changing the life we lead, our "*maladie de la vie*":

The river is going by and the river is beautiful and the day is quiet and warm and green and everything is going by. I can't make the river stop or the day stop and I can't make myself stop. And I am here by the river and I could jump in, but the river would still flow on and I wouldn't be the river, I would still be me. (466)

Notes

1. I prefer to keep just the first letter capitalized in Hiv/Aids because the full uppercase stands out in a text. My intention is to reduce its social stigma. Moreover, in journalistic language in English, Hiv and Aids are sometimes spelt like this, although it is not common. "HIV/AIDS" in full uppercase will be shown only in the abstract and the quotations I mention in this text. My objective is not to change how an acronym should be spelt. Rather, I would like to suggest an alternative way of dealing with certain terms that contain a high social stigma.
2. The concept of "crossing over" (reaching Manhattan) is related to changing one's name and possibly one's identity, as I will briefly explore in connection with queer singularities in [section 3](#).
3. This context is reflected in the milestone documentary *Paris is Burning* (Jennie Livingstone, 1990), as well as in the TV series *Pose* (Ryan Murphy, 2018).
4. This is linked to the ideas of Ronald Barthes (2010, new version) that language is not an innocent tool and Michel Foucault (1972) that language and social discourses are forms of power.
5. (Martín Salván, Rodríguez Salas, & Jiménez Heffernan, 2013; Rodríguez Salas, Martín Salván, & López, 2018).
6. There are very few published academic studies (e.g., Norman, 2010) related to Spanbauer's dangerous writing within the field of literary criticism.
7. Spanbauer (2014b) explains that "truth" must be properly explored to become truer (by lying):
 "It takes balls to make a safe place for yourself where you can tell what is true for you. What is true for you is usually not allowed and is forbidden" (n. p.).
8. A cis person feels comfortable with their gender assigned at birth, unlike trans (the opposite of cis), gender nonbinary or intersex persons (intersexuality is related more to anatomy). In this text, unless otherwise specified, heterosexuality will be always connected to cis people.
9. I prefer to write Lgbtiq+ in lowercase since the capital letters stand out in a text and this acronym is mainly used as an adjective.
10. Homophobia was the most widespread term in those years (inclusive and exclusive at the same time), although all Lgbtiq+ people were affected.
11. For example, tuberculosis and certain types of meningitis, pneumonia or cancer.
12. From now on all the page numbers will be related to the novel.

13. Words (from *Hamlet*) whispered by the Shakespearean drag queen Rose to Will just before dying (473).
14. These words are whispered by Harry on his dying bed, celebrating life while dying (411).
15. I have decided to use “they” for Ruby, as they are a queer character and I am not sure what pronoun they would have used for themselves.
16. This is Spanbauer’s choice (through Rose) to use the generic masculine “he” to refer to a person.
17. It is easier to verbalize that you have, for example, diabetes, hepatitis C or even cancer than it is to admit that you are living with Hiv. For further information, please refer to Turan et al. (2018), who analyze how stigma affects people living with Hiv.

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