

## The Girl in the Bubble: An Essay on Containment

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### Abstract

In this essay, we offer a prehistory of contemporary bubbles used in the mitigation of viruses, told through the late 1980s case of Eliana Martínez, an HIV-positive (HIV+) and developmentally disabled Puerto Rican child who was ordered to be confined to a glass chamber within her Florida classroom. Eliana's mother, Rosa, challenged the use of this chamber as a reasonable disability accommodation in a high-profile lawsuit. We draw on disability studies, critical access studies, and a postcolonial critique to put forward a theory of the bubble as a "structure-within-a-structure"—a zone of limited, restricted, or filtered interaction with the broader social world. Eliana's bubble demonstrates how institutional practices of accommodation can easily transform into techniques of containment, sanctioned to manage the "infectious subject" within institutions and systems. The bubble is a gathering of social forces and bodily relations. In Eliana's case, it gathers the necropolitical arrangements of different populations, the coloniality of Puerto Rico, the innocence of childhood, the fatality of an AIDS diagnosis, and the politics of design and disability.

### Keywords

HIV/AIDS history, disability studies, viruses, postcoloniality, materiality, access and inclusion

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## The Glass Chamber

It's a glass chamber in the middle of a room (Figure 1). The room has three doors and a subchamber with its own toilet, a sink, and a drain in the middle of the floor. A speaker–receiver on the wall of the chamber allows sound to be piped in and out. The glass walls are covered in crafts: six collaged umbrellas, a mouse face made from a paper plate, and the word *BEST* on a piece of poster board. The outward-facing edges of the chamber are bordered by a colorful alphabet.



Figure 1. Eliana Martínez's glass chamber at Manhattan Elementary in Tampa, Florida. Source: ABC News.

These artifacts—the umbrellas, the crafts, the alphabet —mark the chamber as a space of early childhood education in the late twentieth century. It would be a mundane collection of objects except for the fact that they are taped to the outside of a glass chamber in the middle of a classroom. The container conjures other, familiar cultural references: “the boy in the bubble”—immune-compromised David Vetter (played by John Travolta in a 1976 made-for-TV movie), or the (often broken) hermetic seals of labs in epidemic cinema (think *Outbreak* or *Contagion*), or the glassy prison cell used by Hollywood to quarantine

and contain the most terrifying of prisoners (see “Glassy Prison,” n.d.). But the classroom chamber was not made to house a prisoner. Instead, the chamber sits in the so-called Trainably Mentally Handicapped (TMH) classroom of Manhattan Elementary School and was built in 1989 by the School Board of Hillsborough County in Tampa, Florida for \$8,000 (Mason 1991). The chamber was installed to contain Eliana Martínez during school hours. Eliana was an HIV+, six-year-old child born in Puerto Rico and raised in the Tampa area by her adopted mother, Rosa Martínez.

Eliana’s chamber is a kind of bubble: it is both a material structure and a social tool of containment designed to accommodate her difference and vulnerability while moderating their effects on the world outside. Bubbles, we know from our experiences with COVID-19, can be useful in mitigating the spread of a virus. But bubbles also evoke structures, memories, and discourses of abandonment and debility, as they can transform practices of accommodation into acts of containment. In this essay, we offer a prehistory of our contemporary bubbles told through the late 1980s case of Eliana Martínez, whose mother, Rosa, challenged the use of a bubble in a high-profile lawsuit against her local school board. We tell this history to understand the material and discursive construction of bubbles, basing our analysis on legal rulings and policy documents, news coverage, and primary archival sources. This work is based in a conceptual framework drawn from disability studies, critical access studies, and a postcolonial critique aimed at understanding the social formation of the bubble as both a filtering technology and a “structure-within-a-structure”—a zone of limited, restricted, or processed interaction with the broader social world. We begin our analysis with the court case, and then introduce a theory of bubbles as social containers that materialize wider beliefs about disability and accommodation. We situate this theory in the history of US–Puerto Rico relations, arguing that bubbles extend racialized, colonial regimes of debilitation. Finally, we conclude with a close, material analysis of how and why Eliana’s bubble was designed and constructed, to show that our social bubbles can be reverse-engineered to understand the beliefs about bodies, difference, and “inclusion” that inform the boundaries we strike between the “inside” and “outside.”

## What Happened to Eliana

Rosa Martínez did not seek a bubble for her daughter when she placed Eliana in special education at Manhattan Elementary, near her home in Tampa. But the Hillsborough School Board refused to allow the six-year-old to be in a classroom with other children because of her HIV status. The conflict between Eliana’s special needs and her viral status produced a spectacular and protracted legal battle. The disagreement centered on an interpretation of the Fourteenth Amendment’s equal protection clause, and more practically, of section 504 of the Rehabilitation Act of 1973, under which all disabled people are entitled to the “least restrictive environment” for pursuing education and employment. The

conflict centered on a question: Did positive HIV status constitute a disability and, if it did, did transmissibility nonetheless provide a reasonable cause to restrict Eliana's attendance in a classroom with her peers? The glass chamber was a response to this question. While scholars such as Chris Bell (2012) and Marty Fink (2020) have argued that a disability framing of HIV enhances understandings of risk, care, and access (a model we apply to Eliana's bubble), the court was more interested in sorting and distinguishing between Eliana's virus, her developmental disability, and the impairments they each caused.

The conflict between Rosa Martínez and the school board made its way through the courts, eventually ending up in US federal court in 1988. The case was heard by District Court Judge Elizabeth Kovachevich. In her decision, Kovachevich ruled that yes, Eliana could attend Manhattan Elementary, but her HIV status would require that she be kept apart—quarantined—from her classmates. Kovachevich created and dictated the exact shape and form of Eliana's glass chamber, arguing throughout that she could be *in* the classroom, but not *with* other students. Eliana's glass chamber is a quintessential bubble: a structure-within-a-structure, meant to uphold the broader social setting outside of its membrane through a targeted act of containment. Though the federal-court decision was eventually overturned by the Eleventh Circuit US Court of Appeals, and Eliana never attended class in the chamber, the structure remained in the classroom. The bubble persisted as an artifact of the incapacity of American society to incorporate HIV+ people into existing social structures, and as a monument to the state's attitude to vulnerability. Namely, that vulnerability marks the body as something to be, at best, contained and, at worst, eliminated.

Throughout the federal-court trial, Eliana's body and behaviors were characterized as threats to those around her. In her decision, Judge Kovachevich enumerates how and in what ways Eliana *leaks*. Kovachevich remarks that "Eliana had skin lesions...but without notation of oozing," that she "had a problem with chronic diarrhea," that she is "not toilet trained," and "does not drool, per se. However, she does mouth her thumb and forefinger frequently, resulting in saliva on the digits." She notes that Eliana has never "bitten or spit at anyone," and that she, like many AIDS patients, suffers from thrush, and while Eliana's thrush is persistent, "there are no open lesions" (*Martinez v. School Board* 1988a). This inventory is meant to serve as a foundation for the legal decision, evaluating the risk of her classmates contracting HIV by mapping the potential escape of the virus in her fluids. The list infers a route between blood, saliva, bacterial infection, and the chronic diarrhea of a non-toilet user. Kovachevich's ruling connects all of these relationships: because of Eliana's behaviors and her HIV status, her "bodily secretions" presented, Kovachevich argues, "a remote possibility of being a route of transmission to the children of the TMH classroom that she desires to attend" (*Martinez v. School Board* 1988a). Let's be clear: the glass chamber was built because of the (mistaken) belief that Eliana's blood would end up in her spit or

excrement and infect another child with HIV.<sup>1</sup> What we see here is how a theory of imagined infection materializes in a new kind of structure, a bubble, meant to contain and mediate the vulnerability of children.

When Eliana's case was tried in 1988, infection with HIV was widely viewed as a death sentence, transmission was poorly understood by the general public, and casual contact with the bodily fluids of others was heavily stigmatized (Brier 2009).<sup>2</sup> In the legal decision, Kovachevich states, "The severity of the harm if transmission [of HIV] occurs is clear, *it is most likely fatal*" (*Martinez v. School Board* 1988a, emphasis added). This was a mindset that informed state responses to HIV and led many policymakers to try to control even incidental contact between HIV-negative and -positive individuals. Infamously, the failed 1990 Chapman Amendment to the Americans with Disabilities Act (ADA) would have carved out an exception to the ADA allowing employers to deny anyone with HIV employment if their job involved handling food. Crucially, Eliana's case was being tried before passage of the ADA, but within the same political and discursive context. In hearings surrounding the Chapman Amendment, US senators and representatives debated the categorization of HIV as a disability while imagining routes of infection through food and food service (Colker 2004). The Chapman Amendment became a hotly contested policy proposal and an artifact of misperception and fantasy.

Eliana's case also elicited imagined narratives of how the virus could make its way out of one body and into another. Kovachevich writes three times of the "remote theoretical possibility" of HIV being transmitted through tears, saliva, or urine (*Martinez v. School Board*, 1988a). When she points to a Center for Disease Control (CDC) guideline that states children without control of their bodily fluids might need greater restrictions on their educational placement, she transitions, incredibly, to a passage from the CDC on the risks of "deep, open-mouth (i.e., French) kissing." This is one of the more incongruous parts of the decision, one that filters a description of a kindergarten-age child through a panic about teenage sex.

Reporting on the court case used visual cues to frame the cruelty of this ruling for the general public. An ABC news segment shows a reporter, Mark Potter, standing in the empty glass chamber for a piece-to-camera segment, wearing a suit and tie, hands crossed in front of him (Figures 2 and 3). The shot begins close on Potter's face, and slowly zooms out to reveal that he is standing in the chamber, a process of gradual orientation designed to shock the viewer: "The reason Eliana isn't in school today is that a federal judge ruled the only way she could attend class would be to sit inside this eight by ten-foot glass enclosure in the back of the room, isolated from the other students." Potter's voice echoes in the chamber—since it's all hard surfaces of tile and glass. A series of quick close-ups on objects in the chamber are punctuated by Potter's description of how a

judge's ruling shaped the space: "Following the judge's order, the school board built the cubicle with its own toilet, intercom system, and a separate entrance, so Eliana would never walk through the classroom."



Figure 2. Shot of ABC's Mark Potter reporting from inside the chamber. Source: ABC News.



Figure 3. Reverse shot of the view out on the main classroom from within the chamber. Source: ABC News.

Eliana appears in B-roll footage too, smiling, playing with toys, sitting with her care worker at home, and walking in front of her school. Eliana often wore her hair in tight pigtails, liked colorful dresses, and used non-standard hand signs to communicate. The report cuts to an interview with Rosa Martínez sitting on a sofa to explain her objection to the glass room: “Years ago they would put monkeys behind glass cages. That’s what this reminds me of: a monkey behind a glass cage. My daughter’s not going to be anyone’s monkey or anyone’s freak show” (*ABC Evening News* 1988). Rosa is not redefining how she would like Eliana to be perceived in the room; rather, she is refusing the room’s lines of sight and promises of containment all together. As such, Rosa is also refusing the court’s optimism about the bubble as a solution to the problem of Eliana’s inclusion.

This legal ruling summoned Eliana’s bubble to reconcile a fantasy of infection and the tragedy of the unschooled child. The images we have of this space come from national news coverage and they’re meant to highlight the injustice of HIV’s “innocent” victims. The glass chamber was a manifestation of a fear that the virus could harm anyone, and it performed this role in contrast to adult queers and drug users, whose lives had already marked them as worthy of exclusion and beyond care. While policymakers may have been all too ready to allow these victims of

HIV to die, Eliana's infection was not morally stigmatized in the same way. It's precisely this incongruence that leads to the bubble as an exceptional, architectural response to life lived with and alongside HIV.

## A Theory of Bubbles

Eliana Martínez's story shows that bubbles are responses to threats of vulnerability and the porousness and leakiness of bodies (Chun and Friedland 2015; Agostina and Thylstrup 2019). The glass chamber built for Eliana is a materialized fantasy offered as a prophylactic against an imagined route of infection; it's a translucent but impenetrable barrier that severed Eliana's bodily fluids from the orifices of her classmates; but it is also a durable edifice built against the "remote" and "theoretical" (in Judge Kovachevich's terms) possibility of innocent children dying of AIDS. Eliana's chamber is a concrete manifestation of the social control promised by "the bubble" as a structure (either built or lived) meant to reorganize social life through the sorting of wanted and unwanted contact. Eliana's status as living with both HIV and developmental disabilities irritated the unsettled legal, educational, and cultural understandings of people living with HIV and the forms of accommodation they might require to live a flourishing life. The chamber emerged as an infrastructure for negotiating proximity and isolation, while also serving as an illustrative history of the social arrangements that transparent barriers promise to produce (Mattern 2020). As long as we live in a society structured by viruses, we will need ways of talking about bubbles and their promises of containment. Our bubble theory offers a means of reading backwards from bubbles to the social arrangements that create and maintain them.

Glass partitions have a long history in civil infrastructures of containment, used to protect employees from bullets, projectiles, and spit in subway stations, gas stations, or government service counters, beginning in the early 1970s (Bamberger 1970). Judge Kovachevich's decision dictated precise instructions on the size, materials, and functions of Eliana's chamber: for instance, like the plexiglass barriers of the liquor store or the welfare office, Eliana's chamber had to be transparent and equipped with a two-way speaker system but impenetrable to attempts by other children to get in, or Eliana to get out. In both these civil cases of plexiglass bubbles and Eliana's bubble, there is an explicit attachment to the desire to maintain some kinds of social relations at the expense of others: sound and vision at the expense of touch and co-presence. Placing Eliana in a chamber is not the same thing as excluding her completely from school (as the school board had wanted); bubbling is not the same as removal. We need a theory of bubbles not only because of the concrete situation of our present virus-mediated world but because we need language to understand and respond to social techniques that exclude without outright removal.



Bubbles appear as a response to situations where complete social removal or extraction is not possible or desirable. Oftentimes bubbles appear precisely when institutions claim they are seeking a policy of “inclusion,” “access,” or “accommodation.” The bubble is related to, but different from, special education segregation strategies, and carceral institutionalization for developmental disabilities, because it keeps the contained subject within view and ready for interaction (Ben-Moshe 2020; Erevelles 2000). The bubble, then, is a means of containment, where the structure-within-the-structure mediates between layers of the social in an attempt to control wanted and unwanted forms of contact and communication. Of course, in practice, bubbles may lead to the effective or complete exclusion of those bubbled (this may even be a desired side effect by the bubblers), but this cannot be the stated goal of their use.

Bubbles are spatial but also temporal. We write this history of Eliana’s glass chamber from the perspective of our moment, when the bubble has once again emerged as a response to viral life. For many of us, recent years have been lived in care bubbles, where we share our vulnerability with bubblemates while attempting to control and limit the exchange of air, fluids, and illness with those beyond our network. Plexiglass partitions became a widespread and ordinary addition to the architectures of shared space—offices, shops, grocery checkout lines, taxis, restaurant counters, classrooms—creating a sense of separation from the wet breath of others, even while their actual efficacy in controlling the spread of COVID-19 is dubious. In fact, it is the coexistence of these physical barriers, *with the knowledge that they do not achieve their stated goal*, that speaks to the bubble’s cultural resonance as a response to illness. Contemporary, physical bubbles limit the occasions in which we share air, can physically touch, or reach across space, while social bubbles restructure our social networks. The idea of the COVID-era childcare bubble is not reliant on plexiglass, but does represent a shared commitment (or legal requirement) to restrict interactions to a limited group of people. By the time you read this, many of these bubbles will have vanished. The 2020 NBA “bubble” isolated professional basketball players at Disney World in Orlando, with fans appearing on video monitors in place of the stands, but today stadiums are once again full of in-person supporters. This is to say, bubbles have a temporality—they represent a response to uncertainty, discomfort, and a lack of either information or other mitigation techniques. Bubbles may also “disappear” in both the case of HIV and COVID, as a signifier of “progressing” through the social stages of virus mitigation.

We don’t want to collapse the viral and epidemiological specificity of HIV and COVID. But each of these techniques of bubbling merits investigation as a historically rooted and specifically materialized use of containment in response to the threat of bodily vulnerability. When we talk about containment we usually miss the container: the boxes, jugs, cisterns, reservoirs, and organs that hold, protect, and courier the things we care about. Zoë Sofia (2000) once called for a

correction to the overemphasis on supply and creation, to focus instead on the politics and materiality of containment as a dynamic and interactive process. In an essay on Tupperware and media theory, Brooke Erin Duffy and Jeremy Packer argue that containment is always an active strategy producing spatial arrangement and boundaries that process the world and are implicated in broader structures of power (2022, 112–15). Containment, as such, “should compel us to interrogate who contains, and to what ends” (116). Within our own viral crisis, and the reckoning it has forced with already-failed policies of accommodation, we believe that the politics of containment are as urgent as ever.

Returning to the Martínez case from our present moment, we find it still animates ongoing necropolitical and eugenic responses to illness and vulnerability. Eliana’s bubble shows how spatial arrangements, including those named as accommodation, can allow for the slow suffering of some so that others might thrive. It most clearly demonstrates this in the use of transparent, glass partitions. Current bubbles may abet sustained social life and employment in pandemic conditions while historical precedents of the bubble—in the form of the quarantine, colony, and the prison—have frequently validated the state’s power to isolate and eradicate some bodies for the convenience of others.

## The Bubble as Misfit

As bubbles isolate and contain, they surface harsh misalignments with institutional spaces, a familiar site of analysis in disability studies that enriches this theory of bubbles. Perhaps the most remarkable thing about Eliana’s bubble is how out of place it looks in the surrounding environment of a cheerful classroom for young children with disabilities. The chamber does not *fit*. It is awkwardly placed in the room and cuts in at hard angles across the carpeted area where children in classrooms often gather. This awkwardness was underscored by the admixture of the chamber covered in crafts, implanted in the center of a classroom—a space of social innocence, and a domain of care. Had Eliana Martínez ever occupied the chamber, the scene would seem an absurd disjuncture: it is not a reasonable place for children, for learning, or for care. Its absurdity meant that TV journalists reporting on the story often stood in the chamber to illustrate how odd a space it was—the same way they might stand beside a fire or a hurricane, their bodily presence vicariously attesting to the site of an exceptional tragedy.

The misalignment of Eliana and the classroom are an artifact of a legal and educational system that couldn’t figure out what to do with her body. Or to put it more precisely: the relationship of Eliana to her classroom produced, in the object of her glass chamber, a misfit. Or, to try again, Rosa Martínez’s battle to get her (disabled, HIV+) daughter in school with other children, surfaced a misfit—that is, a misalignment of bodies, policy, and built environment in the object of the glass chamber.

Rosemarie Garland-Thomson describes the misfit as a critical concept that is attuned to “how the particularities of embodiment interact with the environment in its broadest sense, to include both its spatial and temporal aspects” (2011, 591). Garland-Thomson invokes two senses of misfit: as both an entity or a person who misfits, and/or a situation of misfitting: Eliana and her bubble comprise both senses. The misfit can serve as an analytic perspective for thinking *from* but *beyond* identity to understand larger social systems and the frictions and incongruities they produce; here, *from* Eliana’s identity as a disabled, HIV+, Puerto Rican child, and *beyond* to the education system’s tacit understanding of inclusion’s limits. In the case of Eliana, we read the placement of the glass chamber as an occasion of misfitting to understand the material–discursive construction of bubbling.

Mapping our surroundings through misfitting elevates vulnerability as a common condition of humanity (Turner 2006) while simultaneously throwing into relief the ways some forms of bodily vulnerability create fractures, open rifts and chasms, or, yes, eruptions of bubbles in the built environment. Locating when, how, and in what forms a moment of misfitting occurs is an impetus for rethinking the hegemonic and “middle-class” concerns of a majority culture, by seeing across the intersectional experiences of disability, race, nationality, and age (Alper, Katz, and Clark 2016; Bailey and Mobley 2019). When Eliana is sentenced to learn within conditions that are not life-giving, her bubble is a “zone of exception” devoid of care, enrichment, or interactive play fundamental to early childhood education (Mbembe 2019). The bubble also captures Eliana’s brownness, further containing her disabilities within a special education classroom used to organize social difference by warehousing non-white and poor students at higher rates (Erevelles 2000, 43; 2011, 6). The school board’s and court’s willingness to bubble Eliana in service of other children’s imagined needs is a trade-off materialized in the glass chamber as both a container and an accommodation policy adjusted to the shortened horizon of Eliana’s life. In other words, this child must be contained because she is a threat and she can be bubbled because she is abandonable (Povinelli 2011)—the bubble coheres because of the recognition of these facts.

For Rosa, the eugenic intent of the school board was obvious and related to Eliana’s misfit as an occasion that would end. Rosa saw the school board making a careful calculation about the glacial pace of court proceedings against the speed of Eliana’s decline. Rosa told the *St. Petersburg Times* (now the *Tampa Bay Times*), “*They were waiting for Eliana to die. She had a strong will to live. I had a strong will not to give up. We made a great team. So I had to concentrate on keeping her alive. She understood that I was very determined. I said, you fight the disease and I’ll fight the school*” (Mason 1991, 1F, emphasis added). Liberal approaches to accommodation can introduce new, subtle techniques of governance that arrest

communities in carceral processes and conditions of slow death (Haritaworn, Kuntsman, and Posocco 2014). Liat Ben-Moshe (2020) grounds these reform measures in *race-ability*, or the inseparability of disability “accommodation” from racial capitalism’s carceral techniques, while Tanya Titchkosky argues that schools produce hierarchies of inclusion, marking disabilities that can’t be “overcome” quickly enough or in the right ways as irreconcilable with institutional spaces (2011, 12, 34–35). Reflecting an insider understanding of these contexts, Rosa’s refusals to accede to the school board exposed the board’s assumptions that her daughter was as good as dead and framed the classroom chamber as a technique of governance through containment.

Eliana’s specific embodiment became an occasion for the school board to create an exception to their existing policies of inclusion. By treating Eliana’s glass chamber as an historically rooted and materially specific misfit, we can see how vulnerability is managed in the world. Here we build on Nirmala Erevelles’s argument that disability must be central to “explaining how and why racial, gendered, and sexual subjects are oppressively constituted within educational settings” (2000, 27). While we may begin with the glass chamber as an eruption, we locate Eliana’s case within the context of the AIDS epidemic, her emigration from Puerto Rico, and the politics of disability accommodation, in which inclusion strategies are often barometers for the limits of state and institutional capacity to embrace complex arrangements of difference.

## The Coloniality of Bubbling

To think beyond the occasion of Eliana’s misfitting in the classroom to her misfitting in the continental United States, we situate her case in the context of colonial relations defining life and death in Puerto Rico and the Puerto Rican diaspora. This context shows how Eliana’s subjectivity as an exceptional citizen was also being bubbled when she was tapped for the glass chamber. Eliana’s connections to Puerto Rico and the Puerto Rican diaspora in South Florida inflected the soft forms of isolation that public institutions tested upon her as means of “accommodating” her HIV+ status. If we approach Eliana’s bubble as a misfit, her migration from Puerto Rico had already marked her body as a particular occasion of misfitting with the continental US. As Erevelles, Jasbir Puar, and others have shown, disability must be examined through postcolonial frames and transnational circuits of capital in order to understand the constitutive relationship between disability, race, gender, sexuality, and class, and begin to decolonize the concept of disability itself (Erevelles 2011, 6; Puar 2017; Senier and Miranda-Galarza 2016).

Eliana’s movement from Puerto Rico to Tampa took place within the broader arrangements of exchange, movement, and debt that structure Puerto Rico’s relationship to the US. As Rocío Zambrana explains, debt relations structure the territory’s economic ties to the US and shape a coloniality of power that shores up

and exacerbates hierarchies of gender, race, and class, unequally distributing precariousness along these lines in the territory (2021, 8). Debt relations are always social, biological, and necropolitical, organizing “the very reproduction of life” (12). Zambrana outlines how these debt relations were produced, in part, through the territory’s exemptions from corporate taxation and US labor laws, where Puerto Ricans labor for generations toward repaying insurmountable debts. René Esparza (2021) argues that these economic-social relations defining gender, sexuality, race, and class in Puerto Rico and the Puerto Rican diaspora must also be considered in the context of HIV. Colonial economics turned Puerto Rico into a major manufacturing and testing center for the pharmaceutical industry, drawn there for tax breaks and inexpensive labor, even as regular Puerto Ricans with HIV suffered from a lack of access to health care (Esparza 2021, 117–18).

Eliana’s birth, adoption, migration, and classroom bubbling took place over a brutal decade for people living with HIV in Puerto Rico. By 1990 Puerto Rico had the highest number of AIDS cases per capita of any US state or territory, and rates amongst Puerto Ricans living on the mainland were similarly high (National Commission 1990). Frequent air travel between Puerto Rico and New York, New Jersey, and Florida contributed to an underserved HIV crisis in Puerto Rico. On the other hand, these lines of migration and exchange also supported the flourishing of a diasporic worldview affording Puerto Rican AIDS activists “an understanding of the virus as a product of overlapping ‘structural vulnerability’ anchored in colonial subjugation and predatory economics” (Esparza 2021, 108). Just as Puerto Rican AIDS activists “theorized the health crisis from a position of colonial alterity” (111), the framing of Eliana’s case, her migration via adoption, her disability, and her bubbling must be understood through a colonial reading of pediatric AIDS.

Colonial relations in Puerto Rico shaped AIDS amongst children in the US as well. In the 1980s the Martínez case presented an image of pediatric AIDS that stood in stark contrast to the white, middle-class victims of the tainted blood supply, whose lives were made spectacular by mainstream news coverage. HIV+ teenager Ryan White, who lived in Indiana, achieved celebrity status, and posed on the cover of *People Magazine* twice (first in 1988, the same year as the first Martínez case) as part of his successful fight to attend public school. In contrast to Eliana, this boy-next-door hemophiliac, who contracted HIV through blood products, stood in for all white American children as potential (innocent) victims of AIDS. The less famous Ray brothers were banned from attending their Central Florida school and won a federal-court battle to return to the classroom in 1987. Their ruling, also decided by Judge Kovachevich, required the three HIV+, hemophiliac boys, some of whom had learning disabilities, to have “an elevated standard of hygiene,” abstain from contact sports and fighting, and receive explicit sex education “despite the age of these boys” (they were eight, nine, ten) (*Ray v.*

*School Dist. of Desoto County* 1987). One week after their return to school, the Ray home was burned down in an arson attack. These white, middle-class children experienced marginalization and exclusion but were understood as innocent victims who could be set in opposition to homosexuals, drug users, Haitians and Hispanics, and others constructed as culpable for their illness (Patton 1996).

As a Puerto Rican adoptee with complex disabilities, Eliana did not fit the same template as Ryan White or the Ray brothers. By the late 1980s, intravenous drug use was the primary mode of HIV transmission for Puerto Ricans on the island and the mainland (Esparza 2021, 109), but the assumption that Eliana contracted HIV via blood transfusion rather than vertical, or “mother-to-child,” transmission is often conspicuously noted in reports on her case. Children are messy and leaky, and they already represent less reliable containers than adults; this is part of the reason why accommodating children with HIV/AIDS in public schools became a matter of concern in the 1980s (much as the leakiness of children shaped some COVID policies). In contrast to the ways Ryan White was valorized, Eliana’s brownness and her disabilities made her available for an experiment in “accommodation” premised on carceral arrangements through the construction of a bubble (Ben-Moshe 2020).

Eliana represented a more common, if less discussed, demographic profile of pediatric AIDS in the US in the late 1980s—where cases like Ryan White’s were actually exceptional. At the time of the Martínez case, 72 percent of pediatric AIDS cases were concentrated in New York, New Jersey, and Florida, hubs for Puerto Rican migration, which Judge Kovachevich noted in her decision.<sup>3</sup> Eliana and the bubble designed to contain her are spatial extensions of the misfitting between colonizer and colonized, in which Puerto Rican children were structurally at greater risk for HIV yet did not register as vulnerable American children within the national imaginary of pediatric AIDS.

The geographies of coloniality shaping pediatric AIDS also informed access to drug trials, another focus of Rosa Martínez’s activism. Drug trials for lifesaving antiretroviral drugs (e.g., AZT, DDI) in children tended to take place in well-funded hubs such as Washington, DC, and North Carolina’s research triangle. Rosa fought to make these trials accessible not just to Eliana but to all children living with HIV/AIDS in South Florida, who were predominantly brown and Black. In an open letter to the National Commission on AIDS written in 1990 for their hearings on research initiatives, Rosa outlined the barriers to access she faced getting Eliana into an AZT trial for children, which involved frequent travel to the National Institutes of Health (NIH) in Maryland, partly at her own expense: “Just like all the other families, who had children participate in the trials, I confronted daily hardships in trying to balance the requirements of my job, the needs of my sick child, and of my family. As a single parent, I was the sole support at home. I was not able to keep full-time employment because of our monthly, and at times

bi-weekly, trips to NIH” (Martínez 1989–1990, 3). Rosa Martínez goes on to argue for the elimination of economic barriers to accessing drug trials for parents and children in South Florida, a geographic proxy for her implicit argument that these drug trials were not designed to meet the needs of brown and Black children who needed them most.

Though many AIDS medications were manufactured in Puerto Rico because of federal tax incentives to the industry, Puerto Ricans had to leave the island for the continental States to qualify for Medicaid to pay for them (Esparza 2021, 117). Put another way, leaving Puerto Rico was the only chance at life, even if it compromised living in other ways. After entering the drug trial, Eliana wore, at all times, a child-size backpack filled with AZT, which was administered slowly through a catheter as she went about her day. In news coverage of the case, she looks like any school kid wearing a backpack: she is small, the backpack is made of pink and purple nylon, and it fits a bit awkwardly. The backpack resonates differently if you think about the life-extending AZT inside it, and the biopolitical regimes of migration it evokes. These are the conditions of alterity and coloniality in which Eliana appears as a different kind of kid with AIDS, one who is available to be placed in a glass box.

## Accommodation as Containment

We have so far discussed attempts to contain Eliana’s body in the glass bubble as they erupted from existing school board policy, Eliana’s specific embodiment, and fears of viral contagion. We want to focus then on the work of accommodation (what our British colleagues call “adjustment”), as itself a form of containment. When journalists described Eliana’s classroom, they employed a varied vocabulary for the bubble. In doing so, they described not just its form but the kinds of containment that the space promised to perform. It was variously called a glass enclosure, a glass cage, and a plexiglass cubicle (Sharp 1988); an encasement, glass walls, and a plexiglass isolation booth (*Record* 1988); a partition (Leisner 1988); a glass-and-wood chamber (McKinnon and Stevenson 1988); a glass booth (Stevenson 1988a); a glass box (Melone 1988); a small, glass enclosed room (Stevenson 1988b); and a special classroom chamber (Port 1988). Coverage sympathetic to Rosa Martínez’s fight described horror at the idea the school board would “cage a child behind glass” (Melone 1988, 6B) where she would be “banned or confined in the booth” (Stevenson 1988a, 1B). To reconsider this vocabulary through the resonant figure of the bubble is to emphasize how the glass form was meant to function not only as a container but as a filter meant to allow some forms of sociality to persist while severing or blocking others.

The Eliana Martínez case centers on a bubble that was built but never used. The chamber stood in the classroom but was never animated through her containment. On December 1, 1988, the United States Court of Appeals for the Eleventh Circuit vacated and remanded Judge Kovachevich’s decision, returning

the case to the District Court. The following year, on April 26, 1989, Judge Kovachevich overturned her original decision and ordered the school board to admit Eliana to the TMH classroom (*Martinez v. School Board of Hillsborough County* 1989). In other words, eight months after ordering the glass chamber be built, Judge Kovachevich was forced to reverse her ruling, and Eliana finally entered class at Manhattan Elementary.

In the United States, the concept of accommodation developed out of racial and religious contexts and was connected with civil rights discourses. The idea of *mere* accommodation had carried a negative connotation referring to both “gradualism and compromise” (Emens 2015, 18). In the context of disability, accommodation has had a different legacy: often referring to a process of “changing society in response to disability” (18). Departing from this frame, Aimi Hamraie outlines a critical access studies framework that “centers the intersections of disability with race, gender, class, and aging in its historical study of how concepts of spatial access materialized in the twentieth-century United States” (2017, 13; Bell 2012; Kafer 2013). Critical access studies intervenes in the existing frameworks of disability studies that scholars such as Chris Bell (2006) have argued are implicitly racialized. Following this method, we work our way backwards from the empty glass room to the understandings of personhood and access that enabled such a structure to be imagined and built. We take further guidance from Bell’s (2012) argument that state policies regulating HIV do not reflect accurate understandings of transmission or community-specific meanings of risk. Eliana’s chamber is formed through carceral state responses to developmental disability and HIV, aligned with the special education approach to accommodation-as-segregation (Ben-Moshe 2020; Bell 2012; Erevelles 2000). This means Eliana’s status as a developmentally disabled, HIV+, Puerto Rican child, who was understood to be dying, was the unwritten design brief informing the chamber’s materialization.

In their decision, the appeals-court justices are keen to note the difficulty of fitting Eliana into a classroom. They focus on the fact of her compounding disabilities, and the nest of statutes that the district judge had to navigate, including the Education for All Handicapped Children Act (EHA) and section 504 of the Rehabilitation Act. In essence, these statutes concern the requirement to give children who live with a disability an educational placement and special provisions for the placement of children with communicable disease. As the court notes, following the EHA requires a school to make every effort to educate all children together, without removal or separation (*Martinez v. School Board* 1988b).

But where a child has an infectious disease, and a school seeks to exclude that child through an exception to section 504 of the Rehabilitation Act, the judge must investigate the nature, duration, severity, and probabilities of the child infecting others. For the Appeals Court, Eliana’s case was, on its face, a misfit. In



the blunt, unpleasant, and outdated terminology of their decision, “She suffers from two handicaps...she is mentally retarded and has AIDS” (*Martinez v. School Board* 1988b). As if Eliana’s life could be broken into separate challenges to the statutory regime, these two “facts” surfaced a conflict. Since the state’s aim to isolate and quarantine those living with disease bruised the fantasy of accommodation set out in statutes like the EHA, it transformed the sacred space of the early childhood classroom—that creche of enculturation—into a manifest misfit. The glass chamber erupted into the TMH classroom like a carbuncle and a rank marker of the limits of empathy and inclusion.

It is rare to have a bubble that is as detailed and reasoned in its composition as Eliana’s glass chamber. It is worth considering then, the material specificities of Eliana’s bubble, as dictated in the original ruling, to better understand the connections between the court’s imagined routes of infection and attempts at simultaneous control and accommodation. Here we break the chamber into its component parts, though it remains crucial to understand that these dictates were meant to work in concert to provide the compromised conditions of containment and glassed-in participation that Kovachevich imagined as the carceral conditions of Eliana’s inclusion.

## Eliana’s Bubble

\* Italicized quotes come from the first US District Court ruling, *Martinez v. School Board of Hillsborough County* (1988a)

**Size:** *“The room shall comprise at least five percent (5%) of the total square footage of the classroom; but shall be no less than six (6) feet by eight (8) feet in floor area.”* The scale of the room is expressed as a function of the size of the classroom that contains it. Bubbles are units within larger structures (structures-within-structures). In this case, the relative size of the chamber reflects an agreement about a minimum size that is humane (six by eight). The relative size sets expectations on the reasonable consumption of resources “for other students” that ought to be dedicated to accommodation (Titchkosky 2011, 36).

**Doors:** *“A wall of the room which faces the inside of the classroom shall have a door, which can be securely locked against intrusion...The wall need not extend to the ceiling; however, it must be high enough to prevent any child from scaling it to gain access to the other side. The room must contain a door giving access to the outside corridor, without going through the main classroom.”* The guidelines for the door are conditioned by the anticipation of normal child behavior—climbing things—but in a context in which one classmate must be contained, while remaining accessible to her teachers. The membrane of the bubble must be penetrable but not collapsible. Living in architectures structured by partition-relations means learning to navigate their limited apertures, where the “fear of breach” must give

way to practical exchanges, like the slot for passing money and packages in a shop (Kallipoliti 2020).

**Transparency:** One wall facing the classroom must include *“a large, picture window which provides a clear view of the main classroom from the inside. The window must start no more than two (2) feet from the floor and must comprise at least forty percent (40%) of the area of the wall.”* The term “picture window” is an operative one, denoting a view onto another, separate scene. Shannon Mattern (2020) argues that clear plexiglass creates “zones of immunity” that facilitate the possibility of mediated proximity. Through the picture window, Eliana could see her classmates, and be close to them, nearly sitting alongside them on the rug for story time, but she remains removed from shared surfaces and touch.

**Waste:** *“The room must contain a potty chair for use in toilet training concealed behind a partition, either stationary or movable.”* The problem with Eliana’s presence in the classroom was traceable to the “remote theoretical possibility” of her infecting other children with HIV, which was directly tied to the leaking of her bodily fluids and the contamination of the surrounding classroom. The management of Eliana’s waste was a central purpose of the bubble, part of the school toilet’s status as a “civilizing technology” for unruly bodies (Slater, Jones, and Procter 2018, 955). The TMH classroom went above and beyond the judge’s guidelines: instead of a potty chair, they constructed an enclosed restroom with its own sink, toilet, and floor-drain. The waste room, in its final realization, was a bubble-within-a-bubble, where the vector of disease transmission could be washed away, beyond view (Douglas [1966] 2003).

**Communication:** *“The room must contain an adequate sound system, so that if occupied with the door closed, the occupant can hear, as well as see through the window, everything that is occurring in the main classroom.”* Though Eliana would be confined apart from her classmates, educational information must move freely between the classroom and the chamber. The provision of a communication system for sound, severed from shared air, is a prophylactic technique that organizes bodies through the distinction between dirty and clean media of communication (Mulvin 2018). Specifically, educational content is distinguished from the channels through which it is accessed. Elizabeth Ellcessor argues that these distinctions between form and content are rich sites for the analysis of access, surfacing links between technologies, material conditions, and relationships of power (2016, 127). The sound system shores up an otherwise cruel and carceral form of accommodation by ensuring some content still moves through the glass.

**Shared objects:** *“Additionally, the room should contain appropriate work area, such as table and chair, for a child and an adult; appropriate books and toys; and any other necessary item of furniture or equipment. By the outside of the window, in the*

*main classroom, there must be placed a low table on which the occupants of the main classroom can place objects and at which they can play within view of the occupant of the room.*" Early childhood education is organized around parallel play: spaces where children play alongside if not with each other. These provisions for "appropriate" furnishing promise to distance the chamber aesthetically from a prison cell. They smooth the acceptance of the bubble through the routines of early childhood education, allowing for a sense of shared social space. Glass and plexiglass promise to maintain some relations (those of visual presence, sometimes auditory) while severing others (those of touch, smell, and shared air). The fantasy of the shared objects is one of "being with" without "becoming" the infected.

**Duration:** *"Eliana Martinez is required to attend school in this constructed room as long as she remains incontinent and continues to mouth her fingers, despite instruction to the contrary."* Eliana's occupation of the bubble was dictated by the imagined routes of infection, and the ways her waste and saliva were anticipated to move from her body to others'. Eliana's case was always one of colliding disablements and dangers in which her developmental delay was cast as the reason her HIV was more likely to travel. Judge Kovachevich's declaration on the duration of the bubble explicates that dynamic, and makes the severing of Eliana's disability from her viral illness a condition of her exit.

## Conclusion

Bubbles erupt where interdependence is seen to be risky. Eliana's bubble demonstrates how institutional practices of accommodation can easily transform into techniques of containment when vulnerability is rewritten as a threat to social order. In systems of networked interdependence, the "infectious subject" becomes a threat to the entire system. Techniques of containment then become a sanctioned form of control to manage the potential of infection. Considered here as both a bubble and as a misfit, the glass chamber, we have suggested, is a gathering of social forces and bodily relations: the necropolitical arrangements of different populations, the coloniality of Puerto Rico as its own zone of exception, the innocence of childhood, the fatality of an AIDS diagnosis in the 1980s, and the politics of design and disability.

The contemporary prevalence of neo-eugenic discourses in the face of epidemiological catastrophe has driven us to dwell with this glass chamber as a crucial moment in the history of bubbles. Throughout the COVID-19 crisis, there have been waves of different prophylactic measures and new choreographies of safety. Metaphorical bubbles, in the form of limited contact groups, and ubiquitous, plexiglass barriers are just two examples. When, initially, it appeared that COVID-19 was transmitted through surface contact, we were encouraged to frequently wash our hands, avoid touching our faces, and disinfect shared surfaces. As evidence grew that the disease was spread through airborne

particles, a new set of techniques and technologies was prescribed. Barrier and filter technologies, like masks, plexiglass, and ventilation systems were used as sufficient grounds to permit socialization or compel non-remote work. There were also many lampooned safety measures, including inadequate plexiglass that barely shielded people. Some teachers were instructed to lecture from behind clear shower curtains repurposed as barriers. Soon people were decrying a kind of “hygiene theater”: rituals and performances of sanitization that, at best, provided a false sense of security, and at worst, put people in life-endangering situations.

COVID-19 and HIV are different illnesses, socially and pathologically, and these differences shape their respective bubbles. Eliana’s bubble was a response to fear and stigma: it was a surrender to bad information about HIV transmission that the school board, court, and scientists knew to be untrue. Some kinds of COVID-19 bubbles can be quite effective at reducing virus transmission, but they also reduce heterogeneity, casting out those deemed “high risk” from our social and professional lives. Even when bubbles “work,” they have social costs, and Eliana’s story helps to name the calculations about social difference behind bubbling practices.

In their histories and present-day materializations, bubbles are technologies for containing forms of vulnerability that threaten social order. They can also be useful epidemiological technologies, which is why they are persistent features of state response to illness, and for this reason they merit close scrutiny. Eliana’s abandoned chamber and the life she led outside it call for the bubble to be considered as a major social form.

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## Notes

<sup>1</sup> To a lesser extent—lesser based on the weight of the discussion in the ruling—Eliana was being protected from the germs of her classmates, to which her compromised immune system would be vulnerable.

<sup>2</sup> For contemporary readers encountering the Kovachevich decision from a position in the Global North, HIV/AIDS occupies a very different cultural position than it did in the late 1980s. A full generation has come of age since the clinical introduction of protease inhibitors in the 1990s, which allowed many people to survive an AIDS diagnosis. Those with the resources to manage their disease can

maintain undetectable viral loads that eliminate the possibility of transmission. In 2020 the patent ended for the drug combination emtricitabine/tenofovir, commonly known as PrEP (Pre-Exposure Prophylaxis), which is now available, in most of the world, as a generic pharmaceutical that can prevent infection. Yet HIV continues to devastate marginalized and racialized populations everywhere. While for some HIV is distant, and its treatment closer to that of a chronic illness, for many others HIV is prevalent, treatment is inaccessible, and it persists among other “injuries of inequality” (Watkins-Hayes 2019).

<sup>3</sup> Eighty-eight percent of perinatal HIV infections were amongst Black or Latinx children, who generally acquired the virus through vertical transmission (formerly called mother-to-child transmission) (US Department of Health & Human Services 1987).

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