(in the organization case defined by technology). This shift might have little effect on the restaurant or newspaper populations studied in Organizational Ecology (ignoring the obvious complications of corporate chains and franchising), but has implications for populations in the stronghold of the market approaches—manufacturing where large firms typically operate many establishments in several markets (i.e., in several population niches). The beginnings of this can be seen in the strong results reported in Organizational Ecology when ecological models are applied to independent semiconductor firms versus the poor results obtained when the models are applied to plants owned by larger firms. Work on these issues will no doubt appear over the next few years as population-ecology insights are integrated with more established approaches.

The future will look back to the late 1970s through the 1980s as the period when theory emerged to formalize the temporal component in the relationship between competition and formal organization. The key book in that long look back will be Hannan and Freeman's Organizational Ecology. This is a book in which we can all take pride as sociologists.


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Ten years have passed since AIDS was first recognized by the Centers for Disease Control. In this short period, 160,000 Americans have been diagnosed with AIDS, and 110,000 have already died. At current rates, 30 people die from AIDS every day, and, every 15 minutes, somebody is diagnosed as having AIDS. Somewhere between 1.5 and 2.5 million Americans now carry the HIV virus that leads to AIDS. The AIDS cases we see now are the result of risks people took five or 10 years ago. The AIDS cases we will see in the year 2000 will be a result of risks people have taken (i.e., having unprotected sex and sharing needles) over the past couple of years. These are the basic facts, and it is in this context that Charles Perrow and Mauro F. Guillen have written The AIDS Disaster.

The transmission of the HIV virus can be prevented simply—by using latex condoms during sex and by using clean needles for the injection of intravenous (IV) drugs. And as the authors note, condoms and bleach (to sterilize needles) are available in most drug stores at marginal cost. Thus the fact that the HIV virus continues to spread reflects a profound failure—the failure of organizations responsible for education and for outreach, but also the failure of individuals. Since it is reasonable to believe that if organizations had responded quickly and appropriately to AIDS in the first years of the epidemic (1981—84), the crisis we confront today would be significantly less severe, Perrow and Guillen argue that
we must understand why organizations failed in order to respond to the challenges of AIDS today.

There is sufficient evidence to show that organizations failed to deal with AIDS. For three years, bloodbanks refused to take the steps necessary to protect the blood supply. As a result, 95% of factor VIII hemophiliacs are now HIV positive. Later, the blood industry stalled on look-back programs, thereby preventing recipients of HIV-contaminated blood from learning of their potential HIV status. The government failed as well—across all levels—from the cities to the federal government. The history of the response to AIDS is not pretty. Part of this book presents this story and Perrow and Guillen do a good job here, but more compelling is Randy Shilts’s *And the Band Played On* (New York: St. Martin’s, 1987).

Where Shilts is weakest—making sense of organizational failure beyond individuals—Perrow and Guillen are strong. Their view is that AIDS presents unique and unusually difficult problems for organizations that in the best of times are prone to failure. These problems, and they constitute quite a list, are (1) that AIDS is seen as self-induced by people who engage in illegal risk behaviors; (2) that AIDS hits the hardest in the outcast communities, especially among the urban poor, that is, minorities, homosexuals, intravenous drug users, and prostitutes; (3) that AIDS is frightening to the public and that it appeared at the same time as a powerful conservative movement, whose leaders felt more comfortable pursuing as a basic goal the “conservative fantasy of how people ought to behave” (p. 125) than policies that could have stemmed HIV transmission; and finally, (4) that AIDS interacts with and exacerbates other social problems: the crisis of our health system, intravenous drug abuse, the diffusion of other sexually transmitted diseases, homelessness, and the hopelessness of the young in the urban ghettos. Perrow and Guillen argue that the failure of organizations responding to AIDS cannot be understood outside this context.

It is in the poor communities of the major urban cities that HIV/AIDS is now spreading most rapidly, in association with intravenous drug use and the crack epidemic. It need not have gone this route, but the transmission system of AIDS now means that we can, in the absence of effective policies to stem disease spread, expect infection to saturate the high-risk populations and then to trickle down to the lower-risk groups. Local organizations, especially in the minority and intravenous drug use (IVDU) communities, are especially critical for outreach and health care. Few organizations are in the position to be effective. Perrow and Guillen track a sample of local organizations during the AIDS epidemic and discuss cogently their strengths and weaknesses. The basic message is that few coped with AIDS very well. Not a trivial number of them simply broke down in response.

Perrow and Guillen identify five organizational responses to AIDS: (1) the incorporating of AIDS programs, with a resultant enrichment of other programs, (2) denial and flight (federal government, NYC housing...
authority, (3) the segregation of HIV/AIDS programs (the response of the state and local administration in New York), (4) goal distortion (schools, Catholic Archdiocese shelter), and breakdown (hospital special teams, families). There is no unitary finding.

Drawing from in-depth interviews with agency heads and members and representatives of organizations (many of whom were openly hostile to the authors), Perrow and Guillen uncover the jagged and irregular sides of organizations struggling to define goals and strategies in a context defined as much by ideological opposition and fiscal constraint as by tangible need. Few succeeded. Centralized and bureaucratic organizations failed as profoundly as decentralized organizations staffed by volunteers. Local units failed, as did larger state and federal units. Each failure generated additional problems for other organizations—hospital bed shortages created problems for shelters for people with AIDS, inadequate funding of IVDU treatment centers meant that men and women seeking treatment for addiction would have to wait months for a vacancy, leading to further HIV transmission—and so on. Perrow and Guillen provide flavor to the ecology of AIDS in a population of related social problems. Their analysis leads them to call for a massive intervention program along the lines of the Polaris missile program. Even Desert Storm would be an improvement.

This book has weaknesses. Readers may find the tone too normative for their tastes. The diffusion model which underlies the text is simplistic, neglecting the pathbreaking work of modelers from Los Alamos (see J. Hyman and E. A. Stanley, *Proceedings of Mathematical Approaches to Environmental and Ecological Problem Solving* 81:190–219) or Michigan (see J. Koopman et al., *Journal of AIDS* 1:486–504) whose work on mixing models appears basic to our understanding of AIDS epidemiology. The organizational analysis is not as crisp as one might expect, especially given the standards set by Perrow in *Complex Organizations* (New York: Random House, 1986), and the in-depth interviews that provided much of the documentary evidence seem underdeveloped in the text. I kept looking for more depth. These weaknesses aside, *The AIDS Disaster* does not fail. This book will shape sociological models of organizational response to the AIDS epidemic in the years to come. This disease is important, even if we would like to think it away. Perrow and Guillen have provided us with lots to think about.