Vínland Revisited is certainly a valuable introduction to the topic of Norse Migration. It emphasizes the need for a holistic approach to Viking studies, where the critical analysis of historical and linguistic sources is teamed with the examination of material culture. The apparent discrepancies and even contradictions that come with this method underline that this is an energetic field of study which is open for much further debate.

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OVER THE PAST SEVERAL DECADES, the idea of “urban legends” has entered our academic lexicon, just as the legends themselves have overflowed into our fax machines and e-mail accounts. Sometimes it is implied that these stories are read and re-told as “simply” entertainment. But in this crisply written and eminently readable book, folklorist Diane Goldstein uses contemporary legends and urban myths to explore the nature of lay perceptions of health risks around HIV/AIDS. By citing a wide range of stories about AIDS, its origins, its dangers (real and imagined), and the actions of those with the syndrome, this book is able to convincingly illustrate the semiotic riches that contemporary legends offer.

The book begins by setting the provincial social and cultural context for the discussion. Here Goldstein points out the early exposure to ideas of risk through kids’ games (where AIDS may be used as a metaphor for risk), as well as the social context of the fear of the outsider. Given the high rates of teen sexual involvement in this province, and low rates of protection used, the author reminds us that interpretations of risk and danger are serious issues. Using several public health models, Goldstein shows how individual perceptions of risk can affect health decisions, giving the book significance beyond the study of AIDS.

The first three chapters function as an introduction to the topic and relevant theory. This is followed by four sets of legend themes that are used as illustration. The first set revolves around the struggle to determine the origins of HIV. This can become a search for who or what to blame, and it results in contemporary legends of transgression. For example, the arguments that HIV jumped from animals to humans provide a fertile space for distortions of cultural and sexual practices, while stories that AIDS is “man-made” feed into conspiracy theories.
The second set of legends begins with the widely disseminated story of a young woman who travels to Florida for a vacation. While there, she meets a man who charms her. After a period of courting, she agrees to have sexual intercourse. As she prepares to return to Newfoundland, he gives her a small package, and tells her to open it on the plane. She is expecting a ring, but it is a small coffin, inside which is a message: “Welcome to the world of AIDS.” The details of this legend relate to perceptions, such as AIDS as a mainland phenomenon and the Newfoundlander as innocent victim. The chapter is a fascinating account of a widespread narrative, showing that the variant of the story that is privileged is the one that makes the most cultural sense.

The third set of cases relates to the creation of a Public Health scapegoat. By citing the case of a Newfoundlander who was charged with knowingly infecting two sexual partners with HIV, the book shows how pre-existing legends help to feed the frenzy when a “real life” case emerges. The chapter offers a valuable insight into this specific case and its ensuing demonization of Conception Bay North. The final set of legends relates to the fear of being pricked by a needle infected by HIV, a fear of wilful transmission by an anonymous evil entity. This locates risk in the public sphere, in faceless strangers, rather than in our own houses and relationships, thus relieving us of some of the requirement to protect ourselves and to analyze our own everyday practices. The site of danger became darkened theatres, crowded bars and the change slots of vending machines.

In the final section, the book returns to the question of how these legends of risk relate to public health. When there is debate and inconsistency in medical accounts and in public health pronouncements, this opens a space for vernacular accounts of risk management. In order to understand how people incorporate legends in managing risk, the author suggests that it is time to listen to the storytellers. Goldstein is well placed to offer insight into this area, having followed the unfolding of AIDS legends for two decades. Her sources span a range from alternative literature to public health comments, media accounts, academic treatises, and surveys of her students. The book is highly recommended for a variety of audiences — those who follow contemporary legend and myth, students of sociology of health or media and popular culture studies, and public health practitioners. Finally, the book will also appeal to the general interest reader who seeks more insight into the role of a particular set of urban legends.

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