"HIV in My Day" – Interview 33

June 12, 2018

Interviewee: Sean Grieve (SG); Interviewer: Ben Klassen (BK)

Ben Klassen: Well, thanks so much for being here...

Sean Grieve: Of course.

BK: ...And for sharing your story with us today. We're really looking forward to hearing your experiences. We like to start these interviews by asking you how you first became involved in the gay community or started engaging in gay life.

SG: I actually started hanging out in front of what was then called Pal's on Government St. in Victoria. I used to take down numbers for a girl that worked the street there. And little by little, I got little braver as I got a little older, and went down the stairs, and that's actually how I got involved in the gay scene. It was probably 1983 – yeah, '83. By '84, I was [laughs] here in Vancouver and hanging out in places like the Gandy Dancer, the Edge, Love Affair – all the fun, festive bars up and down Davie St. Yeah.

BK: There were a lot more of them back then, I guess.

SG: If I remember correctly, there were thirty-four gay bars here at one time, like operating at one time. It was candy to a kid, I'll say that. Yeah, that initially is how I got introduced into the gay community. Prior to that, I was the only gay person I thought I knew. I grew up in Sydney at that point, so apparently nobody else there was gay, although I found out later on, several of the people I went to high school with... surprise. [Laughs]

BK: I mean, statistically... [laughs]

SG: Statistically, exactly.

BK: You have a little snapshot of the gay community in Victoria then?

SG: A small one, yeah. It was tiny – it was a cliquey little community. I don't really know what to say about Victoria. I didn't spend a long time there. As soon as I was – I guess I probably was nineteen when I moved over here by myself. So, I was in Victoria maybe for a year, year and a half. I was a street kid in the beginning, so I did kind of jump between the two cities a lot, but I didn't really have... I guess I had a childhood friend that I knew who was gay, but other than that, I didn't really – there wasn't much of a gay street life, not like there is now, where kids are okay to be very out and open if they live on the street. You had to be quiet.

BK: Was that a community that you were a part of when you came to Vancouver as well?

SG: Yeah, a little, a little. Yeah, I hung out on Granville St. for a while, but even then, back then, it was pretty – I shouldn't say that it's not like it isn't now – Granville St. is still pretty dicey,

right? Just depends on the time that you're down there. Back then, it was during the day. But no, I didn't really know anyone that was gay on the street here. So, it wasn't until I got a little older and started jumping in and out of bars... Well, not legally-speaking, but... [laughs]

BK: Any other thoughts on what the community looked like in Vancouver in those early years when you were here?

SG: It was far more colourful than it is now, I can say that. Davie St. was very lively. I think it had a lot to do with – forgive the term of the day – the hookers, the hookers on Davie, right? From all the way down on Howe to all the way down on Jervis, and even a little further than that. It was just colourful, it was vibrant, and there was a real sense of community that seems to have disappeared. And I get that. We're a lot safer on the street than we used to be and we didn't have to look after – like, now you don't look after each other the way you used to back then. You had to have many eyes because, you know, the guys from Surrey would come in and jump you, and it could be violent on Davie, but at the same time, boy, it was a lot of fun. Just the different characters – not that there isn't any now either, but it just it seemed – well, obviously there were more. HIV wiped out half of us back then, you know, almost overnight. So, there were a lot more drag queens – it was fun. It was a very festival atmosphere all the time, and I'm talking on a Tuesday night. Like, Davie St. just ran twenty-four hours a day, seven days a week. Now it seems to have business hours, you know? Yeah.

BK: Is it sanitized or something now? That's probably not a good word to describe...

SG: Yeah, sure it is. You know, gentrification happens everywhere. I kind of equate those two words – sanitized and gentrified. It just – I think, too, homosexuality is a little more accepted now, so there isn't really the need to be as in-your-face and as flamboyant as we used to be. Yeah, I'm here, I'm queer, get over it. So, that's what's kind of changed Davie St., probably. It's just a little quieter.

BK: Do you recall what happened with all of the sex workers and that vibrant street life – do you recall when that started to disappear?

SG: Yeah, it's kind of weird, I don't really remember when it disappeared. I do remember a shift, you know how it went from the street to more – giggle, giggle – in the newspapers, because it was becoming a little more acceptable to advertise. Sex workers could kind of advertise in the back of the *West Ender*, or *Georgia Strait*, or *Discorder* magazines of the day, and then the Internet came along eventually, and I think that's what really dried up Davie St. They could bring it indoors and sex work wasn't as looked down upon either, so I think that too has something to do with it somehow. I don't really remember why though, but I do remember just little by little it started to disappear and it was sort of quiet.

BK: It's certainly not what the West End is known for nowadays, at least to my knowledge.

SG: No, not to my knowledge either, but it used to be, you know? Gee, even in the '70s, I can recall as a kid being told stay away from here, because there were heroin junkies here and hippies, for heaven's sake.

BK: It's hard to imagine.

SG: Yeah, can you imagine? The West End's changed a lot in the last thirty-plus years, drastically, and I think it's for the good, you know. It's still colourful, but like I said, it's on business hours – there's nothing wrong with that.

BK: Not to switch gears completely here, but when did you first start to hear about HIV or maybe start to see that?

SG: I remember hearing about GRID, the gay-related immune deficiency, at – I just spoke about it but it's gapping me... bar down at the end of the street – Gandy Dancer. And there was pins they were handing out, these little punk pins of the day, and they said, "On me, not in me." And for the longest time, the group of us didn't really get what that kind of meant at all, and then one of us got brave enough to say, "What are you talking about?" And this guy said, "Well, you've heard about the gay cancer haven't you?" And went off about GRID and we were all sort of horrified, like what do you mean we can die having sex? Then it clued into us all, right – "On me, not in me," like cum on me, don't cum in me. That was the only way to survive at that point – that was like 1983 – probably late-'83, 'cause I was just underage and was giggling that I was getting in there. [Laughs] But that was the first time I had ever heard about it. And then obviously after that it was Rock Hudson, and then suddenly it became known as HIV/AIDS, it was no longer the gay disease, which was odd because Rock was gay. But you know, Liz Taylor had something to do with changing society's view, actually. But that was my first exposure to it. It was kind of frightening actually, and at the same time, at that age, I didn't really – not that I didn't care, it just didn't seem to have an impact on me. It wasn't until a few years later on when things really got bad around here that it had an impact.

BK: So, initially there was a sense of distance almost?

SG: A total sense of distance. You know, that's kind of why I bring up the button. It was just like a button you wore with a slogan on it, right? It didn't really mean anything. It hadn't really hit home yet. I'm sure we were all just kind of in denial, right? Oh, it's happening in Europe, it's not happening here – all that sort of silly thinking that you do, usually when you're young. [Laughs]

BK: And something potentially terrifying. How do you make sense of that?

SG: Exactly, you don't. Usually you just sort of put it in the back of your mind and figure if it happens, it happens, and I'll deal with it when it does.

BK: It is interesting though to me that your first experience hearing about this was through a bar where - it wasn't through an ASO, it was through...

SG: Which is where it would happen now, right? I guess that was the only place to reach out to people back then. And there literally is – as I smile – telephones sat at home, right? There was no Internet, there was nothing. So, I don't even remember reading anything about it in the paper, you know. And I guess too that kind of makes sense if I think about the time. It was gay-related

so we didn't exist, so why would any of that exist? And so, a bar would be the logical place to reach out to people. I remember it was Tiny, actually – who wasn't tiny... he was a very large man, that was handing out the buttons. I kind of wish I had asked, I just sort of proudly put it on and thought, yeah, whatever... [laughs] Literally, it was a couple of weeks later, I believe, that I finally got brave enough on a Friday on one of the men's nights to go, "Tiny, what's this all about?" You know...

BK: But I guess that's what some of the earliest forms of education might have looked like, the information being put out there.

SG: It pretty much was word of mouth, that really was it. There... well, I guess there was a queer paper here, but that too didn't really focus on a lot of – not in the beginning. As it became more politicized, yes, *Xtra West* was quite... yeah.

BK: And I think there was a paper called *Angles* that was maybe around at the time.

SG: Oh, I'd forgotten all about *Angles*. [Laughs] Oh wow, hey.

BK: Do you recall maybe not in the earliest period of the epidemic, but as the epidemic progressed a little bit, do you recall where you were getting your information from? Were there good sources of information out there that you were aware of?

SG: Not that I was aware of. Most of everything that I heard or I was able to get was from someone else who had heard it from someone else, which really – after a while, that reliability on that information being factual just gets out there with opinion, right? Yeah, it's lost. That was pretty much the only way in the very beginning. And the Bute St. Clinic now that I think about it. They were pretty good about trying to get the word out, 'cause I went in for a test on a whim and it was someone standing out saying that they were offering anonymous testing, so...

BK: And do you recall when that was roughly?

SG: '92, probably in October – somewhere around there, and I remember calling back and them saying, "Oh, we can't tell you that. You need to come in." And so, that was it. I bolted actually. I knew that there was no point in going back, I know what they're going to say. So, I didn't really get tested-tested until, I believe it was Sean Fay, said, "You're not looking very well, and I think we need to test you." And I said, "No, no we don't. I already know what it is." And blah, blah, blah. And he said, "Well, still we need to test you." He did the same thing. I called. They were like, "No, we can't tell you the results over the phone." And I was like, "No, I know. I've known for a while. Thank you." Different time, definitely. Not like it is now, you know, where everyone's tested – if you go into the hospital, you're tested, and that just makes complete sense, right?

BK: Well, I definitely want to talk about and get to that point and talk about your experience at that juncture, but I guess sticking with this earlier portion of your story, how were you responding to this initial information that was coming out, I guess in terms of any of your behaviours or...?

SG: It didn't change any of my behaviours in the slightest – not at all. It did change how I was seeking employment though. I heard that people were afraid to go into people's houses and start looking after people, and so that's initially what I did. I stopped hairdressing – that was roughly... memory's foggy, so it was probably 1986, '87 that I started to transition into Upjohn Healthcare Services, and I would go into people's homes and look after them – cook for them, do whatever was necessary, and that's kind of how I dealt with it. I thought I have to do something rather than just sort of not do anything. I don't know how to explain that, I just remember being so moved by the whole thing that was happening and I thought I have to do something about this, and I didn't really know what to do. I don't even remember how it happened that I ended up in that – probably picked up an ad in probably Angles of all things – you know, now that I'm thinking about it. And they were asking people to go in and do simple things, like wash people's dishes, because people obviously were sick and couldn't, you know, function at all – at all. Some of that medication was horrible. You know, AZT was made unfit for human consumption in 1968, so they knew something about it then, but it was a last-ditch effort. You know, and I remember that really clearly, a lot of the guys around me just dying so quickly, and that I guess was how I dealt with it. I thought, well, I'll go and help as best I can. It's funny, I distinctly remember thinking back then, I'll never get this, I will never get this disease, and I thought that since I had immersed myself in it somehow at the ground level that it was never going to happen to me. Surprise. But you know, that has a lot to do with not changing my behaviours, you know? I spent a lot of denial in the early days about it – it was someone else's disease, oddly.

BK: Who was that? Was there a conception of who that someone else was for you?

SG: Sure, yeah. It was some guy that always hung out in a bathhouse or something like that. I'm one of those rare gay guys — I've been to a bathhouse once in my life. The experience freaked me out so bad that I just never went back, right? [Laughs] I'm sure they're great places, but for me, that's actually where — I guess I demonized it. Actually, the more I think about it, yes, that was sort of the person I thought would be likely to have HIV, someone who went there, or went to the park, or, you know. Not someone who goes and does the same behaviour in a bar, right? [Laughs] Yeah. It's funny actually, I think a lot of people demonized people in bathhouses and going down to Stanley Park in that day as being people who spread it, although never taking responsibility for themselves. I don't ever remember condoms being available anywhere back then, at all. In fact, I believe you had to buy them — I don't... It's almost as if there's bowls of them now in restaurants. [Laughs]

BK: Yeah, almost literally, yes.

SG: Literally, yes. The Fountainhead has them, right? Yeah, I've gotten off track there.

BK: No, I think that's an interesting tangent to follow a little bit. So, safer sex or safe sex wasn't really something that was being talked about or promoted all that much in those early years from what you saw?

SG: People were promoting it. Was it being listened to? About as much as it is today. Yeah, some people were very adamant about it. Most though, just didn't care or didn't think – like, I

thought, "It's not going to happen to me, it happens to other people, you know? That happens to people who use drugs. I don't use those kind of drugs, so I'll be fine, right? I don't shoot cocaine, I snort it, so I'm not like them," although no different. Yeah. It was a very interesting time. There really wasn't – if I think back, really think back, there really was no resources at all outside of that Bute St. Clinic. I cannot remember anywhere else in all of Vancouver. You certainly wouldn't have gone to St. Paul's – they didn't really like gay people back then, but it was a Catholic Church, you know. It was the '80s. People actually believed in witches. [Laughs] I was thinking back, you know, before I thought about doing this, and Anita Bryant, the woman that got the famous pie in the face, right? The gospel singer, the super-hater of the world, she believed that witches existed, really believed it. It was a very simple time. [Laughs]

BK: This is absolutely tangential, but one of the guys that we interviewed was actually at the event that she got pied at - I believe it was in Toronto. Completely tangential, but...

SG: Exciting. We had our own activists here, I remember them well – no names mentioned. Someone once tripped the premier's wife and covered her in ketchup.

BK: His name has come up a few times. [Laughs]

SG: He has a nickname – [name]. [Laughs] That's actually, if we hit back on it, guys like him too were sort of our source for finding out about how really serious this epidemic was. If it wasn't for a few them, I think – you know, the Joe Averages, as those people who stepped up really early... yeah. All the beginners, I don't think I would have had half the information I was able to get at all. I've often wondered, if I was a young kid now, would I become HIV positive. I doubt it. I think the resources are strong enough that I would have to have faced that truth, whereas back in the day because it was so few and far between, you could dismiss it and do it quite comfortably – oh, it's not going to happen to me, like we were talking about. It's those type of guys that get it. I go out every night, but I get up and I run, I exercise, I do these type of things. It's not going to happen to me, I live a different life. Although, I went to the Shaggy Horse just like the rest of them, so... [Laughs]

BK: What was the Shaggy Horse?

SG: Oh, the Shaggy Horse. The Shaggy Horse was a - I guess it was a leather bar, although I never really saw that side of it. All I ever really remember, the Shaggy Horse, was that it had terrible carpet on the walls.

BK: Shag carpet? [Laughs]

SG: Yes, oddly enough, and sticky. So, I'm sure there were things going on at the Shaggy that I really didn't want to know about at that age anyway. [Laughs] I was usually quite inebriated by the time I ended up there. I vaguely remember where it was – I believe it was on Hornby, it may have been Howe, but down there somewhere.

BK: Hearing about all these places, it does almost make you long to have experienced some of those...

SG: Yeah, Vancouver was fun. I really can't stress how fun it used to be. Not that it – you create your own fun obviously, but this just had a built-in fun. You started at the Gandy Dancer and you moved to The Edge, and then from there you went to the Love Affair, and then you crossed over Davie St., because Celebrities used to be called the Rock Palace and it was a rock bar of all things – I know, on Davie St., yeah. Hardcore rock, too, like the biker, leather... So, you'd have to avoid that, because they were angry folk. And then right next to it is Numbers, so you'd cross back over, right? If you were brave enough, like us, we would just march right past what is now Celebrities, but you would zigzag back and forth all the way down Davie St. all night and then make your way back down. It was fun. There was no cover in bars then, there was nobody living in Vancouver, actually. [Laughs]

BK: Yeah, the city has changed a lot too, right?

SG: Yeah, it's grown so fast.

BK: Yaletown used to be a bunch of warehouses, and...

SG: I was just going to say, everything you see from Burrard St. west, it didn't exist – just didn't exist. There was a collection, a handful, maybe two handfuls of high rises in Vancouver. There's now 650. Yeah, you're making me think of Doll & Penny's – I'm sure you've heard a lot about that. That actually – when did Pumpjack – whenever Pumpjack showed up was when Doll & Penny's kind of ended, but it was the last sort of – places like that, too, now that I'm thinking about it, restaurants, that's where we got our information from. I can remember a little, you know, sort of one of those info card things there, and there was one about HIV there, although it was really called AIDS, but the HIV wasn't quite there yet. Yeah, it's funny. Actually, I hadn't thought about that in a while.

BK: No, I think it's really important for us to get a snapshot of that, because I think there is a conception of ASOs throwing lots of information at people, but maybe in a lot of instances it was a lot less formal than that. It was just...

SG: Far less formal. I don't think there was any formality in it. It probably wasn't until 1990 that I remember everyone sort of collecting together. Prior to that, it was just sort of very fringed – you know, the odd radical individual – no names mentioned. Bless them because we wouldn't be where we are today without those folks, you know? Yeah, there was maybe five, six people that I can think of that were very outspoken.

BK: And getting their hands on information and getting it out there.

SG: Exactly. And spreading the word. Things like, you know, that AZT wasn't good for you, you know? That I never read anywhere until someone told me. "You know that that was made unfit for human consumption?" And I thought, BS, so I actually went to the library and looked it up, and sure enough... But it was that radical group of individuals that got that sort of stuff out to us – don't do DDI, don't do this, don't do that. Yeah, it was an information-starved time. I think of now and anything I want to know about HIV, I just ask Google and I do it at work all the time.

I'll be on the computer and go, oh gee, I don't get what that is. Hey Google, what does CHIWOS [Canadian HIV Women's Sexual & Reproductive Health Cohort Study] stand for – stuff like that. That's amazing, actually, but it would have been so helpful back in the day had we had some sort of – well, society didn't care, the more I'm thinking about it. They just didn't care. I can distinctly remember Ronald Reagan saying on TV, "They're gay, why would we give them medication?" They're only going to kill themselves anyway, basically was his attitude, you know? I know, weird, hey? I mean, I was kicked out of the house for being gay. There were a couple other things that helped me with that decision, but that was the primary factor. But that's how it was dealt with in that time. Yeah, it was a police officer that told my parents that, that was the best thing for me was to be out on the street... [laughs]... which oddly enough, when I look back on it, weirdly enough it was probably the best thing that happened to me, but yeah. I wouldn't be the stellar individual I am today.

BK: Wow. What did the mainstream response to the epidemic look like here in Vancouver? Can you recall any of that?

SG: There... That was really, really... That didn't really exist either. I know of a couple of doctors and it was like that until '98, '99, you know? You could go to Sean Fay, he would help you out, Richard Taylor – there were so few doctors that were even willing to deal with it, so there was no mainstream – it just didn't exist. Not like it is now. I mean, we have the Infectious Disease Clinic – it goes on and on and on. Fifth floor... I remember a time when people died in St. Paul's and they put caution tape on and then emptied the room and everything was incinerated – the bed, everything, it was all put into plastic and incinerated. Yeah, that was weird. So, there wasn't a mainstream – it just didn't really exist. It really was a small group of people who figured they needed to do something. You know, I can remember Sean Fay saying to me, "I was tired of seeing all you young guys come here and signing your death certificates a year later." But it's bizarre, hey? If I go out now, which I don't do often, I look around and there is literally a generational gap. There doesn't seem to be anyone that's about forty-eight to fifty-eight – we're just so few and far between. It's interesting. If you put a timeline up, you can also see when medications came out that were good.

You know, I recently went to the Positive Gathering and we all grouped ourselves in a large room by the year diagnosed. There was actually someone from '81, which was like, oh my god. [Laughs] Here, let me touch you – you've got some mojo going there. But it was neat to look around the room, and you went from '81 to about 1990, there were four people, maybe five. And then in '91, there were a few more, by '92, there were four of us, you hit 1995, there were ten people, then there was like '96 – there was twenty, and groups got bigger and bigger and bigger. And then towards the end, toward most recent times, it got smaller again, which I thought was... odd, that it would sort of... But I think people are treated now, so they're living, they don't go to these functions anymore. Someone asked me about work – how could we reach the youth? How can we get youth involved because youth doesn't see that this is an epidemic, it's not a problem with them. You take your red pill or your blue pill – off you go. So, none of that, nothing like that, not even a – existed. Like, I'm surprised we even got any information. You're making me think about it, I remember most of that information now being stopped at the border – it was up there with pornography. Little Sister's couldn't get anything in in the beginning. They just saw it

as demonizing. Interesting, I'd forgotten about that. There was very little you could do to get... It's nice now.

BK: Yeah, it is interesting to think about those newly diagnosed folks, and maybe there being a perception that they don't need that community anymore.

SG: No, they don't. When I look at the communities that I belong to, like Positive Living as it's called now, there's very few. Most of the people that are in ASOs all seem to be around my age, which is – it stands to reason. We were about the last generation prior to the HAART drugs and everything else that heavily relied upon those services. You know, I'm sure you've heard the coined phrase Lazarus Effect, living in five-year increments. I'm still doing that to this day. It's a mindset that you just – I guess when someone tells you, "Get your things in order, kid. You're not going to be here in a few years." So, you party for a few years and you don't die – wait... well, still not dead... hm, guess I better do something with myself.

BK: Yeah, when you were diagnosed, was your conception that it was still a death sentence?

SG: Oh, yes. Sean literally looked at me and said, "If you're lucky, you're going to live five years, so my suggestion is you go and have a fun time with your life. Just go and enjoy yourself," because in that day too, once you were diagnosed, someone at AIDS Vancouver took over for you and made sure you were put on disability. Thankfully, they came into existence, because... You know, so you just – I guess most of us just sat around waiting to die, and it didn't happen. A lot of us ended up with addiction issues because, well, what do you do? Do drugs, party, have fun – sadly, spread the disease around, more than likely, right? When I think back, yeah, it was reckless – I was completely reckless, as most people were, from my perception anyway. Things are different now that way. The urgency is no longer there. That said though, I'm very aware that that's in a unique bubble we live in here in Vancouver, because once you leave Vancouver and start getting out into the real world, people actually still die of AIDS and are stigmatized and all those other things that are draconian from that era that we keep reflecting back on in the mid-'80s, early-'80s.

BK: When did it stop feeling like a death sentence to you? Was there a moment where it clicked – hey, I'm actually not going to die from this?

SG: Yes, I do. I do remember that. It was roughly around 2002 and I thought – actually, it was 2000, 2001, I thought, well, I'm not dying and I've got to do something. I can't sit around anymore, I'm so bored, it's not funny. If I see another re-run of whatever, I'm going to vomit on myself. [Laughs] And so, I went back to school, I went back and got my grade twelve and other things that I just didn't get a chance to do because of circumstances when I was young. But I distinctly remember thinking I'm not dying, so I'm obviously one of those weird freaks that – knock on wood... I've been on the same medication for I don't know how long, probably seventeen years now. So, early 2000s is when I kind of went, this really isn't a death sentence anymore. Although, if I think about that, outside of BC, yeah, it appeared to be that way. Vancouver's always seemed to me anyway to have stepped up very quickly. It followed San Francisco and New York, places that were much, much bigger than it, and kind of saying, you know, we have to do something about this or it's not going to bode well in the end.

BK: With the exception of things like incinerating whole rooms at St. Paul's in the early years.

SG: In the early years – well, they actually did that for quite a long time, but bless them. You know, there was actually – a lot of people have negative things to say about St. Paul's and I often try to remind them that you know that was one of the few places – that and Mount St. Joseph – you could go, because if you went to Vancouver General, they sent you to St. Paul's and Mount St. Joe's. They weren't going to deal with you, they didn't want to have anything to do with you. You know, "You're from the West End. You need to go back down there." Of course, that was back in the day – you might as well have just worn a t-shirt that said faggot on it. [Laughs]

BK: If you were looking for anything to do with HIV treatment?

SG: Yeah, exactly. It didn't happen to straight people. Funny story about that, I was volunteering at BCPWA as a peer counsellor. I met a girl who was straight, that was HIV positive and from South Van, and I still distinctly can feel my body just going, [gasp] what? Almost as if I'd seen a white spirit bear in the middle of the forest. It was just like, "Holy shit, you do exist!" I've heard rumours, you know, that straight people get this disease. That's another thing actually if I think about it back in the day, it really wasn't – if any media source hit on it, it was always from a gay male issue. Like, I remember kind of 1996ish when the – what was that thing? World AIDS Conference came here, I guess that's what it was called – the World AIDS Conference. But being really shocked about the whole African continent being – it never really occurred to me, I guess... I don't know, there was a real disconnect, the more I'm thinking about it. Like, I honestly believed it was a gay disease, and a little time goes on, you kind of go, okay, maybe it's not. Maybe the information I've received is false. [Laughs] Somebody's changed this in Wikipedia. [Laughs] User edit.

BK: Even after the whole GRID thing falls by the wayside, there's still this really strong connection made between HIV and gay men.

SG: And gay men. Actually, it still is, you know. I won't mention any names or that of a study or anything, but at work, I have had the opportunity to interview people outside of this little bubble we're in downtown, and it still is thought of as a gay disease. And the stigma that surrounds that prevents a lot of people from seeking treatment, and that shocks me, it kind of freaks me out completely that, really, it's still... Like, we talked about earlier, it's still 1980 in Surrey. Yes, there are some services there, but the attitude is still 1983, '84, which is troublesome, because I know how I felt then. Oh, it's not going to happen to me. I'm impervious to this, right? Yeah, interesting.

BK: When did the epidemic start to become a little bit more visible here in Vancouver? Do you...?

SG: 1990 – '89, '90. It looked like a lot of what used to be really beefy men in Levi's 501s – the old clone look as we used to call it – the moustache, shaved head – they all started losing their asses, and then their legs got skinny, and then they got skinny. And then they all started looking like the old Benneton ad – ghosts, just basically draped. And it was everywhere. And I do

remember, there was a lot of stigma. I felt really bad for a lot of the guys, actually, because they were really shunned. You know, I can remember people crossing the street to avoid talking to people, because I guess that meant that we all had to face it too, right? But it was probably, yeah, 1990. Prior to that, it sort of – it was still this ethereal, no, it's not really happening here. That's happening in San Francisco, yeah. But by 1990, it was very visible. Like, you went into a doctor's office, and guaranteed, you know... As my friend used to – I shouldn't laugh, but bless him, he had a wonderful sense of humour, and he was very morbid, but he'd say, "Oh god, I just sat down next to a skeleton," you know. But you'd be in a waiting room and there were several people who had wasting syndrome, and it was apparent that something wrong was going on because you could see the balance was starting to... I can distinctly remember that. It almost happened overnight, which was weird. I think back, I was young and memory makes you think that things happened like that. It probably was a one- to two-year period where it just really – it exploded. It just - it no longer was one guy out of ten, it now was like six, seven guys. And, "Hey, have you seen so-and-so?" "You didn't know? He died." And it would be like, "No, oh my god, I didn't." You know, it was very strange. Scary, really – really scary and sad when I think back on it to watch Davie St. just sort of wither away like that, and literally wither away. Like, really big guys, the sort of lumberjack look. It was frightening to run into someone that you once knew at 220lbs and they were suddenly 90lbs, you know? Yeah, it was hard. I'm glad it doesn't happen anymore, not around here anyway.

BK: And by that point, was the community starting to respond in a more...

SG: Positive manner, no pun intended. Yes, definitely. There were a lot more organizations springing up, and almost like overnight. I believe it must have been 1990 or '91 that BCPWA started on Hornby St. in the – it's gone now, but there used to be a purple house there. And it was just actually a collection of lesbian women who just saw us all disappearing and they figured – you know, Jackie Haywood and folks figured something had to be done here. And so, the grassroots, bless them, all grew and here we are today with more ASOs than we can shake a stick at, which is good – they cater to everybody. One time, we were all lumped into just one group, which must have been horrible for straight people – I can't – I don't really remember. I do actually remember when the straight folks started to come into BCPWA, and it was when injection drug use started to really spread it, but someone living a so-called "clean straight" life would have never in a million years showed their face anywhere near those places. Not like it is now where you have the women's network and, you know, it's just amazing. But very few resources, very few people wanted to do anything.

I asked my dad, because I wanted to get a perspective, why was homosexuality so looked down upon? You know, I said, "Come on, you guys must have known Liberace was gay." I worried as a small boy that I was going to end up like him, you know. [Laughs] I knew we had something in common, I couldn't put my finger on it, and then I thought, oh god, the rings. Yikes. And my dad said, "You have to understand, if you called someone gay, that was worse than murdering them." It was a death sentence kind of thing, you would have ruined their career, everything would have fallen apart for them. He was like, "You don't have any idea what that word kind of meant." And I was like, whoa. I can see why it was so long and why it took so long for people – and why it was women who really stood up first and said, "No, this has got to stop. Our brothers are dying everywhere here." I hadn't thought about that in a long time.

BK: So, was there a sense of the community coming together in some ways?

SG: Oh yes.

BK: And lesbians.

SG: Definitely, yeah. It was a – I talk with guys often about this now, you know, you guys have no idea how segregated the bars are now. They're very – preps go here, rough boys go here. Back in the day though, it was mingled and there were women in the bars. It was – the supportive community, that I see has sort of drifted away and the support now is a paid supported community – nothing wrong with that, but the dynamic has changed. But it was a little more supportive, and just grassroots-level, doing it for free, not for \$22.85 and hour.

BK: I guess a lot of those early ASOs were really heavily reliant on volunteers.

SG: Yes, definitely. BCPWA, I can think when I first started there, I think it had five, maybe six staff members, but a hundred volunteers, because it wouldn't have existed otherwise. And there were a lot of guys like me too that were in that very early time that – after a few years of partying and realizing you're not dying, you're slowly looking for something to do that's more than just snorting cocaine, smoking pot, and drinking your face off – that gets boring after a while. It sounds great in the beginning and it is, but it tires quickly for most.

BK: When did you get involved at PWA?

SG: I have a hard time remembering when that happened. It probably was about 1994, roughly about the same time as... actually, yeah, Kurt Cobain died. Funny how you mark things, hey? [Laughs]

BK: That's a big one, yeah.

SG: It was a big one. Actually, it's funny, I came out to my friend that night, the night that Kurt died. We were at – what the hell was the name of that place? Fish House or something like that – it was sort of a trendy straight bar that had punk bands – anyway. But I came out to him in the bathroom there and it was like coming out all over again. [Laughs]

BK: It never ends.

SG: Yes, it never ends. Yeah, it was about '94, and it's funny, when I think back on that, the individual who took me in there eventually became a board member, but there was no application form, there was none of this security, police records – all that kind of... She just looked at me and said, "You want to help us out? Fantastic. We'll see you tomorrow morning at such-and-such a time. We'll find something for you to do." Yeah, it was an interesting – it was just much different, very volunteer-run. And way more supportive when I think about it. But nobody needs support anymore. Vulnerable populations now seem to need the support, the average person doesn't seem to need it anymore. They're navigating the HIV life quite well. You

know, there aren't really any side effects on the medication, most people can work full time, most people can live full lives. Back then, when I think about it, you spent a lot of time on the toilet, either above it or on it, you know. You didn't eat well, you didn't sleep well, so...

BK: When you talk about support, what did that look like at PWA?

SG: PWA was amazing. They had Polly & Esther's, which first started as a pile of clothing and it eventually morphed into a store. But they had the lounge where, you know, there weren't the rules like there are now too on restaurants donating food to places and stuff, so we actually ran kind of a kitchenless kitchen. There was always food, clothes – you pretty much could get everything you needed. You know, I remember the AIDS Vancouver food bank was horribly substantial – you would walk out of there with five, six bags. You didn't need to buy food – it was amazing how the community rose up like that in the beginning. And obviously, as more and more people became positive, it started to thin out, but in the very beginning, all that was met, all those needs were met, and there didn't seem to be any urgency for anything. You know, I can even remember thinking – my TV died one time and I went in and said, "My TV died." And she said, "Oh, here, come look, we have several of them. Do you want one?" My first computer was from BCPWA – a lovely little Mac tower, with the little window – kind of wish I'd kept it.

BK: It's probably worth money now.

SG: It's probably worth money now. [Laughs] It was a great organization. It's a shell of its former self now, which is again understandable. The dynamic of HIV has changed. You know, those of us that function higher are functioning well, and people who can't are the ones that need the most support now, which obviously would be the medication that did all of that for us, right?

BK: So, I guess there were all those different components of more material support, like clothing and food. Was there also a lot of social support?

SG: Definitely. Yeah, there was – although it recently just ended, there was the Average Joes where positive guys could meet once a week at Numbers, and there just was stuff like that everywhere. But again, we kind of were singled out in society back then. Now, it's just like, "Oh, you have a chronic illness. How unfortunate for you," right? I shouldn't laugh about it, I'm glad it is that way. You know, yeah, you got the bug, huh? Oops. Yeah, the support was grand when I think about it at one time. In fact, there became a... almost a war between the gay and straight drug using community over BCPWA and its resources. Little by little, the Downtown Eastside seemed to have won out for a while there, which they needed it the most. I think early intervention in the beginning with all those nice girls that stood up and did something for us gave gay men an advantage over most people. They were the first to sort of realize, well, this isn't a death sentence – time to move on, I guess. It was interesting. That actually was 1996. I distinctly remember working in the lounge then and you could see the dynamic – the demographic changed. The gay people went away and a lot of women started coming in, which was really – with kids – that was frightening. Hm, I hadn't thought about that in a while actually. That was quite an interesting time in Vancouver, watching the division build in a community where people would say, "I don't go there anymore. It's for junkies. I wouldn't walk through the door." And funny how it's flipped again, right? Now it seems a little more acceptable to go to Positive

Living, which is interesting. I think the early days of HIV, there was a lot of stigma, and much more I think than I recall. And we were even pushing it on each other – that I do remember though, very well – avoiding people. People would whisper, "So-and-so is..." That would be it, you'd never see them again. Sad – weird, hey?

BK: And that was pretty pervasive within the community as well?

SG: Yes. Yeah, you died alone, really. You know, you died among strangers in 10-C, which actually used to be somewhere else, but I don't really quite remember where it was. I think it was on the seventh floor to tell you the truth – it might have even been the fifth. But it did move around for a while, yeah. People got forgotten, which is sad, really – freaky. I'm sure that when I go, if there's something up there, I'm in trouble anyway, because I added a person's name to the quilt when it came to town, and they specifically told me before they died that under no circumstances was I to do any such thing. [Laughs] Anyhow, I did. Actually, you asked too when I thought that it might be survivable – I think maybe when the quilt came to town, too, was my first inkling that maybe, just maybe we were all going to pull through this, that this was going to be a survivable event. And that would have been probably 1997 I guess – I believe it came for '96.

BK: What was seeing the quilt like?

SG: Overwhelming, because it's big and we only had a very small portion of it come to Vancouver, and it covered where Robson – where the art gallery is. They laid it out there and it covered that whole plaza. It was quite something. I mean, it's football fields-long. Yeah. Boy, you know, the more I'm thinking back on it, women really stood up and took the early reins in the AIDS movement. Huh. Funny how you don't notice things, I guess, when you're in them. [Laughs]

BK: Well, if you're worried about surviving...

SG: Yeah, exactly. But now that I'm thinking about it, all ASOs were basically women. Not much has really changed – now it's a little more fifty-fifty now, but yeah, bless the women, especially that Jackie Haywood.

BK: We're so lucky to have her on our team.

SG: Is she on the team?

BK: Oh yeah. She's a lovely, lovely woman.

SG: Oh, nice. She sure is, isn't she? That society did so much. I wouldn't be sitting here in this chair without them. You know, I went on their very first healing retreat to Bowen Island and that really... The more I think about it, that's when I actually knew I'd survive it, and that was mid'90s. I don't know if I believed it. Definitely, you know, 2000, 2002, I knew – no, you'd be dead by now. [Laughs] You're one of those people you read about.

BK: Was there anywhere else that you found support in those early years when you were newly diagnosed?

SG: The only place I knew of was BCPWA and AIDS Vancouver, and to be honest with you, I don't think anything else existed. I can remember Healing Our Spirit coming into being and thinking, wow, there's three places now, and it's for the Indigenous folks. Like... Yeah, there was no PAN [Pacific AIDS Network], no none of that – it just didn't exist. I literally cannot think of anywhere else. I mean, perhaps the Bute St. Clinic, but after my phone call with them, I avoided them like the plague – giggle, giggle. [Laughs]

BK: Oof, bad joke. [Laughs]

SG: Bad joke, exactly. It's something you learn – you learn to laugh at death. We had to, we had to have black humour. When I think back to that tragedy happening at Davie St., if we didn't all make those jokes about those poor guys, I don't think we would have all survived, the ones of us that managed to survive. I think you had to take that horrible sort of black humour and... You know, I still kind of find it funny sometimes. My roommate will say, "Do I look like Skeletor in these jeans?" And recently he was having a wasting issue, which was a little frightening, but the medication is back under control and yeah. But it makes me think back to that time – that was how we probably survived it all. We laughed at it – didn't really have a chance, I guess, you know. For god's sake, it was referred to as the diet. "Oh girl, you've got the diet. Uh-oh." [Laughs] There were all sorts of horrible jokes – you know, the rolaids – but the diet... we used to refer to it as the diet. "No, I don't have the diet yet." But I guess that's what happens in extreme tragedies – you take one of two veins. You either lie down and submit to it or you stand up against it, laugh at it, make fun of it, point at it instead.

BK: Were there other ways that you had of coping? I mean, there was PWA and black humour...

SG: Black humour – yeah, that was about it. And friends. We all kind of became a lot more cliquier with each other. Like, I remember someone saying to me once that Vancouver was a very cliquey city, and I thought, yeah, but I know why though. We're protecting each other, so... I remember my best friend getting sick. That actually was horrific. But I even shunned him. The worse he got in the hospital, the less I was willing to go see him, and that I think is because – well, obviously, I thought I'd have to face it one day myself. That was actually very early when [name] died – [name] died in the same year I was diagnosed, actually. He died of pneumonia, and there's nothing more frightening than seeing somebody lie in a bed with tubes coming out of their side and the shit that's being sucked out of them. And they don't even look like themselves anymore – knock on wood that that doesn't really happen anymore. But you just didn't cope, I guess, is what I'm getting at with that story. You just dealt with it – you either had to or – like, you did, you stopped seeing people, you know?

I distinctly remember when [name]'s mom said that she had brought him home for the last couple of weeks of his life. I thought, thank god, because I really didn't want to visit him in the hospital, and I thought – how selfish is that? But I guess that's how you coped with it – denial, denial, denial. It's not going to happen to me, it's happening to someone else, it's all a bad dream. Yeah. I still have survivor's guilt actually over [name], which is funny – I laugh about it

now, I've come to terms with it. But it probably should have been me and not him. I won the contest after all. We had a contest to see who could sleep with the most men in a year, and I won because [name] actually did a repeat. The rules were there were no repeats, it was a one-time-only thing. I think we both ended up with the disease because of that contest, right? I'm pretty sure that that's how it happened – in fact, I know that's how it happened. And he didn't last long. He was dead within two years. But that was normal back then. It's interesting what happens now. You know, now we're studying aging. Like, I'm the first generation to actually poke past fifty and have this disease. A good thing, denial [laughs] – it seemed to work for me, I guess.

BK: Did you ever find yourself in a caregiving role of any kind with any of your friends or working at PWA?

SG: Not with my friends, but at Upjohn Health Services, yeah. I did home healthcare, and in that day, I basically was, you know – what do they call them now... an LPN, so I did everything and anything that needed – from wiping ass to cooking, vacuuming, helping someone bathe, dress. I did a lot of that and I burnt out from it – I had to quit, actually. I did that for almost three years, and little by little, again, I started to switch away from people with HIV to doing people who were geriatric – I started to do a little more taking the old people for a walk around the park, because it started to get a little too real for me. You know, I can remember one – we referred to them as clients – one client in particular. He was very wealthy, but under no circumstances was I allowed to let him drive – he drove me home every single day and he insisted on it. But his impact was... I don't know. That was I think really tough to watch him die, and I found him actually. And it was – it was disturbing – I don't know, I shouldn't really talk about it or I might get upset. Yeah, it was traumatic actually. Maybe I should talk about it. He... he did such a wonderful job of imparting so much seventies gay history to me before he died, you know? I probably wouldn't know where I came from, so to speak, if it wasn't for him, and I won't say his name because it doesn't matter – you're going to take it out anyways – Mr. Redacted. Yeah, I actually hadn't thought about him in a very, very long time. I loved him driving me home. It frightened the hell out of me because he was half-dead, but he insisted on it, you know?

Yeah, I did a lot of that work, as much as I could in the beginning, but it had a really high burnout rate. You just — it's hard to look after someone for several months and then have them die, especially when you — you're so intimate with them. It's much more different than having a relationship with someone, you know? Chances are in a relationship, you're not going to wipe their ass, even when they're really sick — you're going to take them to the hospital, that's how most people react. When it's a stranger though, you have a tendency to be a little more compassionate, but you're involved in every part of their life. He couldn't get out of bed at one point, in the end. He just — all he did was lie in bed and give his things away, which was bizarre. Hard too to listen to someone tell you that they're going to get well and go on a vacation, and you know damn well that they're not getting well — that was really tough. But I'm glad and I'm honoured that I had the opportunity to look after so many guys in the last parts of their life. That is just as important as the job I do now and hold people's stories. It's an honour to do that. Yeah, it was — a lot of people wouldn't do that work back then, you know?

I can remember my friend, [name] – bless his little soul, he's gone now – but him, "Pft, I don't fucking understand why people won't do it. Do you think you're going to get the disease? You

can't get AIDS from dishes." And that was like 1988, I remember him actually going after one of the nurses at Upjohn Healthcare Services. He was like, "I'm not wearing gloves and I'm not putting bleach in the water for them anymore." Because I'd commented – [name] and I used to talk and sort of debrief, I guess, with each other, and I said, "Have you noticed when you're washing the dishes that the gloves are like melting and leaving plastic residue on the plates?" And he was like, "Yeah, why are we putting bleach in the..." He finally looked at me and he said, "I can blow a guy and not get AIDS, so why am I putting bleach in the water?" So, he confronted one of the nurses with that exact statement. "So, tell me, if I can suck a guy off, why am I wearing gloves and putting bleach in the dish water in order to do their dishes?" Company policy. There was a lot of barriers – like, literal barriers – to looking after people back then, which I guess... I never followed them, now that I think about it. I was always like, whatever. If I can be that intimate with someone and walk away disease-free, I really don't think that touching them, rubbing their legs because they have bone cancer, you know, is going to cause me to be infected. And yeah, if I get a rash, I get some cream or whatever.

Yeah, there wasn't a lot of support, especially at end of life. It's not like now, you know – you can go... although the Dr. Peter Centre has been around for seventeen, eighteen years, but now you can go there to die. There wasn't anywhere like that. I think about Dr. Peter himself, if you're familiar with him, obviously. What a brave thing to do, to die on television. That actually was frightening, although I remember all of us getting together every single week, moving the rabbit ears on the TV to get the CBC in and watch Dr. Peter. That's actually a good – that's one of the places that information was spread, that we relied on. What he did for us – and he died in '92, so he's been – I guess it was 1990 to '92 on TV – eighteen months, something like that. That was a source of information, a trusted source actually, because it was coming from a doctor, a doctor who happened to be gay as well and out – oh my god. [Laughs] Yeah. But supports were few and far between for guys. Notice I haven't said women. There were no women that were dying of HIV that we knew of in Vancouver, you know? I only really knew of one up until about '97. Interesting. I can see where people believed it was a gay disease – a so-called gay affliction in North America anyway.

BK: Yeah, when you first got involved with PWA, it was probably gay, white men.

SG: Yes. And the odd Indigenous guy, yeah. It seemed to affect the gay Indigenous community really hard in the beginning. But you know, I think back to the time, it wasn't uncommon in an ad at the back of the *West Ender* for one guy to ask for another guy and say, "No fats, no femmes, no Asians... and no Indians." And it was like – you wouldn't do that today. Bigotry isn't as acceptable today as it was back then. It still blows my mind that the newspaper would print something like that. But I remember it hitting the Indigenous community, the gay community here really hard in the beginning. But primarily, you're right – 75% was white male.

BK: That's an important nuance, to say actually this community was really prevalent too, because we've heard lots of other people say that it was super white, so it's interesting to hear you say that there were lots of Indigenous folks.

SG: Very much so, very much so. And in fact, the first women I knew were Indigenous women, which stands to reason – marginalized population. Yeah, I could go off about demographics and

social determinants. I'm living proof that social determinants do actually determine what you become in life, you know? I wouldn't be sitting in this chair today had I not left the house at such an early age. It's funny, I was sitting at work – we had a meeting just to kind of – you know one of those pecha kucha things – have you ever heard of that? It's Japanese for chit chat. It's just basically a PowerPoint and you do your life in twenty pictures – it's very prevalent in this... I actually used the "Silence = Death" to represent a time that – it made me realize, looking around the room and listening to everyone, that you were more likely to not be HIV-infected if your parents were supportive, you went to university – da, da da... And I realized, it really hit home that it was like, wow, you know, your social determinants really do play a large role in – well, even today, as to whether you're infected with HIV or not. It's not to say that someone at university has the brains not to... because they don't but they're less likely and they're probably less likely due to social support. Yeah, it was just an interesting thing that sort of hit me and I thought, wow, life probably would have been a little different. I might have been a little more educated about HIV in the very beginning, or at least have had access. You know, *Encyclopedia Britannica* doesn't exist on the street – doesn't exist anymore now, either, but... [Laughs]

BK: Probably not, yeah.

SG: Yes, there was a time that you went to a group of books... [laughs] to look things up.

BK: I can barely remember doing that.

SG: It's been a while. I actually think they stopped producing them, probably twenty years ago now.

BK: Just a minor clarification about your care – providing homecare for people from that period, were those mostly HIV positive folks or...?

SG: 99% of them were HIV positive. It was at the end that I started looking after elderly – it was actually two elderly women and an elderly man, but otherwise it was all gay men. And when I think about it, they were all white. But that too, I guess you would have had to pay for Upjohn Health Services to come in. It wasn't funded – I don't think it was funded by the government, not in the beginning.

BK: Whereas some programs at AIDS Vancouver might have had – like the buddy program may have been more accessible to a broader demographic.

SG: Yes, and I think roughly about – that's when the buddy program kind of started was late-'80s, because the more I'm thinking about it, it was [name] that got me interested in really wanting to do home healthcare – he sort of sparked it and he was part of the buddy program in the beginning.

BK: Interesting.

SG: Yeah, it is interesting. Interesting how the brain works.

BK: Yes, interesting to dredge stuff up

SG: It's from the past, yeah. All I remember from that work really was just how... how hard it was. It really – I have got skin on my back like a leatherback turtle now when it comes to people dying. I'm just kind of like, hm, so why are you telling me this? Surprise, life ends. [Laughs] Oops. God, I remember at one point, everybody I went to go see was dead. Yeah, it was weird.

BK: It must have given people a very different perspective on death and dying, especially because so many of these people were so young.

SG: Well, that's it, right? And you did develop a different perspective on death. It just... As silly as this sounds, it just became a part of life, an expected part of life. And I don't think that that's something that young men and women of eighteen, nineteen, twenty, twenty-one, should have to live through, because I don't think it happened before us, I don't think it happened to the generation after us – not in that sense. I mean, half my friends are gone. Half the gay men I knew are gone. And it's probably a little more than half, but I just don't include acquaintances and things like that because I can't really remember their names. But close friends, half of my close friends are gone. Yeah. One of them fairly recently, but that's a whole other epidemic, you know? Actually, when I'm thinking about it, the only other time in history that I experienced what I experienced in the beginning of the so-called AIDS epidemic is what's happening now with the opioid crisis, and particularly between 2016 and '17. It mirrored, although it outpaced the death rate, but it mirrored what it was like. You know, you would see someone one week – the next week they were gone. And literally healthy-dead.

BK: And speaking of social determinants of health and how that factors into this ongoing epidemic...

SG: Exactly. It's interesting, isn't it? I look at that epidemic and think why is it even happening? We've already been through this. Yes, it was a disease and, you know, the circumstances were slightly different, but we've already been through this. I mean, that I remember too at the beginning – unnecessary death of people. Like... just unnecessary. But what else were we to do? There weren't really – I mean, the medications killed you. I flat-out refused in the beginning – I will not take it, I'll take my chances, and I'm glad I did. You know, I watched a lot of guys die because of medication. I watched a lot of guys go to a certain doctor – we'll never mention his name – and they all died. You know, you're really making me think about how we got information out. It was really underground – guys going up to each other and going, "Stay away from that doctor. Stay away from that person. Stay away from this clinician. You won't live long." Whether that was true or not, there was a lot of that going on. I distinctly remember saying to my friend, [name], "You need to go to Sean Fay, because the guys that are living the longest right now are under Sean's care." Funny, now you'd be able to go to a website. [Laughs] There's no shortage of specialists, actually – there were no specialists back then. The handful of doctors I can think of were the specialists, and they were just GPs – in fact, most of them still are.

BK: Those physicians were just playing a guessing game a lot of the time too, I guess, and just hoping that things would stick.

SG: It was a game of Russian roulette, no different than acquiring the disease. You spinned the cylinder to see if you would live. A lot of people didn't – those drugs were really toxic. I can remember looking after one guy who was quite beefy and everything when I first started looking after him, and his only problem was fatigue and diarrhea. Then he went on the DDI, and within weeks – in weeks, he was gone, and irreversibly so. But he took his chance. Chances are, he probably wouldn't have survived anyway. You know, usually by the time you were getting chronic diarrhea, you were on your way out – that led to wasting and everything else, KS and other scary things, that – knock on wood – we don't hear of so much anymore.

BK: We talked briefly about activism earlier. Were you involved in any forms of activism or did you see activism happening in Vancouver?

SG: I didn't get involved, but I saw a lot of it happen. I remember the guys linking their arms in front of emergency, not allowing anyone into St. Paul's unless they were going to be treated and treated with respect, and everything else. That I remember distinctly. It was a proud gay moment, one of those... Those are my brothers. [Laughs] Ol' [nickname] was one of those guys. I also think too back to [name] and those other folks starting the art projects to fund things like AIDS Vancouver and A Loving Spoonful – all those kinds of things that were coming up. But otherwise, no, I didn't really get involved. I don't know why. I guess maybe I thought I was doing enough looking after people, that that was kind of my role in the fight against it. Yeah, I don't know, I just – which is odd, because I'm really quite outspoken. I was very Queer Nation back then, you know, in-your-face – combat boots and a tutu – you know it. [Laughs] So, I'm surprised I didn't get involved, but I guess... That would have been tough, a lot tougher on my family than – somehow, I think that's what prevented me, the more I think about it. It would have brought shame on the family, so to speak.

BK: No, I certainly don't mean to imply that you should have...

SG: No, not at all. I think back and I wish I had – I wish I had been part of that movement, because I was very vocal, you know? I was the kid in grade seven that when the cutest girl in school couldn't get me to go out with her was the first one to say, "Well, it's because I'm gay. It has nothing to do with you, I'm just gay." So, I was a little outspoken that way, so I'm surprised I didn't... But if I think about it, I don't think my family would have appreciated that. It was hard enough on my mom having me gay, and then hard enough even having me HIV positive, you know, because I was open about that right from the beginning. We had to be. I always thought about others, not that you can get it from a salad, Mom. [Laughs] But you had to think that way, right? Yeah. But a lot of the activism, yeah, I just didn't really pay attention to it. It was sort of being done for me, I guess. I selfishly just thought, oh, thank you. I do remember watching it in the media. You know, you couldn't escape it, it was always on the front page of Xtra West, a couple of individuals always in particular. [Laughs] And bless them for standing up for us. That was a rough fight for some of them. Like, I said, when they linked – I can't even remember what year that was – but when they did all stand in front of the door of emergency and not let anyone in and demanded to be treated, that's bizarre, for one, that we lived in a world where that happened, but yay that it did, because it probably paved the way for everything else. Activism was big here, I remember that. I remember at one point, it did make it into *The*

Vancouver Sun and The Province and it became mainstream kind of news. I myself never participated in it.

BK: Thinking on a larger scale here – I'm slowly getting near the end of my questions – how did the epidemic change the community if it did at all? What did it…?

SG: It fractured it, killed it. There is no community anymore, it's gone. It does not exist the way it used to – that's really sad. Yeah, the community's gone – it's just gone, it died. My friend and I talk about this, there's no one left other than a few men like myself to teach kids the way I was taught, you know? I was taught the difference between a guy wearing a dress and having a moustache, and all those gay idioms I guess, and there really isn't anyone to teach kids that stuff anymore. That chain was broken and you can see it in the gay community – the drag community dried up. There used to be a very vibrant drag community here – it's just meh now, but no one was around to teach anyone. The clone look is gone, [laughs] as I cry with a little laugh, but that should have been passed on, and it was, kind of. Some things were kind of done, but for the most part, there was nobody to foster community, and the community that did exist was too busy trying not to die. I really miss that time. There was – I don't know. You would walk into an establishment and you would know everybody – everybody knew each other. And yes, it's because Vancouver was a little tinier, but that said, if you go to larger gay communities, that kind of still exists, but not here. We really were wiped out, you know.

I read somewhere that statistically that we fared worse than New York and San Francisco and Los Angeles, that sort of per capita thing, that more of the community died here than anywhere else kind of thing. And that – it just left a gap. You know, I walk up and down Davie St. now – not that I stay out until midnight anymore, but if I'm out at ten o'clock on Davie – we used to call it the Gaza Strip, and I know that kind of evokes all sorts of images, right, and you're right – every one of those images you're having is pretty much correct. [Laughs] People doing it on the street, all sorts of just... and it's gone. The carnival's over, the circus left the town, and all we're left with now is the odd person that wanted to stay behind. And you go into a bar now and you – there's no friendly atmospheres anymore. Don't get me wrong, there is, but not like it used to be. Yeah, the family, the sense of family is gone. And I guess, too, that comes with, you know, kids being able to grow up gay now – that has a lot to do with it too. We didn't grow up like that, so we had – we were forced into being social and reliant on each other, because that was all we had. It's not so anymore. But HIV really did a big number on our community – it snuffed it... it wiped it out. If I think off the top of my head, I know a handful or two of guys that survived in the fifty-plus, you know, and once you go past sixty... The only person I knew died recently and not from HIV-related causes, but I don't think there's anyone really around from that sort of Boomer... They're rare, they're very rare.

Yeah, there's no community and that's sad really – it really is sad. If the kids could only... [laughs] I'm thinking back to Graceland, which was a bar and it – my god, they handed ecstasy out in the beginning in bowls before it was illegal, so everybody was all over everybody. It was very hedonistic – that's a good way to say it – the hedonism of the gay community has become very closeted where it used to be very open, and that's a direct effect of HIV taking that gap out and not having teachers, people to pass on. "This is what it means to be a radical faerie," you know? Now kids have to Google it to figure it out. There's nobody to tell you how to be a radical

faerie and there used to be people that did that. Yeah, I guess what I'm saying is the leaders of our community are gone, so we're kind of like Jews just wandering the desert looking for somewhere to live – the more I think about it, that's a great way to describe it actually. We went from being a community that was very grounded and planted to one that is just sort of wandering around, not... I don't see a cohesiveness anymore. And maybe that's a good thing, and maybe, hopefully, it is because kids can grow up gay now, they can grow up trans, they can say to their parents, "I like both sexes, actually. I want to be piggy," right? But I definitely miss that community, or maybe it's that I miss the people. Yeah.

BK: You talked about the older gentleman who you looked after and him telling you all the history, passing that on. I think that was just part of the way the community was before HIV. There was this kind of passing down.

SG: There wasn't a need for you and I to do this to pass on oral history, it was just passed down. Yeah, I can always remember that the older gay men – I'm sure it was nefarious for most reasons, but they did sort of teach you things, pulled you aside and said, "You know, when you grow up, these things that you're worried about now, they're not going to mean anything to you." Or the older ones saying, "Oh girl, you hang on to that you thing, it's gonna... Get a career." Yeah, there's no one to do that for the young kids. And those of us that are around are just too busy trying to live – I don't have time to do stuff like that, I'm too busy trying to prepare for a retirement that I wasn't supposed to have. I was forced to get rid of my RRSPs, all of that. I have nothing. So, there's no time for me to do community things. I'm more occupied with trying to prepare for a future – yay. I can look forward to being an old man, you know, according to Julio Montaner, I can look forward to being a super senior if those genes are in my... Like, wow. But that too comes with a price. We're not able to connect, I guess, and I think that's common. I see a lot of single men my age, and it's for multiple reasons, I guess – you get a little finicky. But I think that too has something to do with the epidemic. We have other priorities that we have to concentrate on.

BK: Is part of that maybe about burnout? Like, the people that actually made it through this...

SG: I am HIV burnt out in that sense, yep. Like, I've – I don't think about actually anymore in the sense of worrying about it, but that's a good way to put it – I think we're burnt out from the whole epidemic. I don't know, maybe it's just that we've taken the time to actually be selfish, too, and said, well, time to survive. So, that too doesn't leave a lot of time for community. I don't know, it's interesting to think about.

BK: Continuing on this thread, what advice do you have for younger generations of gay guys or what would you want to pass on – lessons learned or anything like that?

SG: Be blessed for where you're at right now. Be blessed for the world that that generation that disappeared just before me fought so hard for you to have, 'cause the generation that's left just after them, we spent too much time surviving, so we don't really have the ability to pass the torch to those kids. Just be blessed for the world that you live in. Be happy you live in North America, because research that I've done says that only 11% of the entire world accepts who we are, and that's what I would pass on. And make sure that this doesn't happen again in any

capacity with any disease. Like, an off-shot sort of thought, but suddenly I'm thinking back to the '70s when my aunt got cancer and nobody would sit in a room with her. This seems to be something that we keep doing and maybe it needs to end with HIV – the stigmatization of disease and all that. That's what I would pass onto them – don't let it happen again, because it's going to happen again. I think we're all getting a little too comfortable and if we're not careful, we might end up with a strain of this disease that is resistant to all medications.

So yeah, just be happy, be mindful, and do your best to pass on the homo gene. [Laughs] Well, you know what I'm saying – become a community. There's not enough people in my age group to really form a community anymore, you know? Most of us sadly passed away due to drug issues, that's the sad part about my part of the generation – we survived and then chose another way to step out. So, don't let it happen again, that's the only thing I can pass on. How to do that, I have no idea, but just to be mindful that it could – it very well could happen again. I mean, if all the ASOs lose their funding and everything else, we're back at ground zero, and that's a big reality that's happening right now, because everybody believes this is a survivable event. I would beg to differ. It's a manageable event, but don't let it happen again. A lot of – not that I'm going to blame myself or anyone in my sort of age group, but we did turn our backs a little on what was going on, and I think we could have prevented a lot of it from happening and we didn't. But we also were the HAART generation, right, the first to start to survive. And the last thing I'd pass on – combat boots and tutus are awesome. [Laughs]

BK: Especially in combination.

SG: Always. They have to be worn together. There's no other way. And preferably pink. Yeah, be proud, literally. And it's nice that they're growing up in an era where they can be proud. Yeah, that's actually what I would pass on – be proud. Stand up, act up, fight back. And don't forget who Marsha P. Johnson was – you know, those kind of things. Google stuff. Don't forget the beginning of the movement. I've thought about that actually a lot in the past few weeks – what would those three individuals that started that Stonewall march, what would they think of us now? I don't think their thoughts would be nice. I think they would think that we're lazy and complacent, compliant. That generation would be flabbergasted by gay marriage. [Laughs]

BK: And some of those people that started that riot would still not be very welcome in our community.

SG: No, they're not welcome in our community. I think of Marsha and the fact that she was a trans woman puts her at a disadvantage in our community, even today, despite how the Jenner's made it socially popular – I'm still trying to be politically correct there. That's the other thing I'd pass on – stop this politically correct business. [Laughs]

BK: We need more black humour.

SG: Yes, we do. We do need more black humour. I've noticed working in research that we went from being gay and bisexual to MSM and now we're right back to where we were except now we're gbMSM. Doesn't gay and bisexual just sort of say it all? Don't be politically correct, use your black humour.

BK: I guess relatedly, any advice for folks who are newly diagnosed or would your advice to the younger generation be the same for newly diagnosed folks.

SG: No, my advice to newly diagnosed folks is start your drugs right away – don't wait. Seek treatment right away and set those supports up for yourself. Yeah, don't think that it's an easy ride, because it's not. It's a lot more than taking two pills a day. People never talk about the fact that along with those two pills a day, you spend a good hour of every morning sitting on the toilet – there's a whole host of other things that come along with it, you know? It's not uncommon for people to go to the gym and then have to go home and have a nap. All those kind of... So, if you start treatment right away, I think you avoid all those things. Put those social supports in line for when they're needed in the future, 'cause the disease hasn't changed, just how we view it has. I think a lot of kids just think it's a chronic illness, and sure it is in Vancouver. You step outside of Vancouver – go to Kelowna – people die of AIDS. So yeah, I'd say seek and treat yourself right away.

BK: And now that we have these drugs that are amazing for the most part available...

SG: We have a chemical condom now – how amazing, right? Like, the fact that we have PrEP is just – the fact that we have a government that's willing to hand it out for free... Yeah, do take advantage of those things.

BK: PrEP, that's all been in the last year that that's... I think I'm out of my formal questions, not that I really followed those. Anything else that you want to add or expand upon, or anything I didn't touch on?

SG: I can't think of anything, but although I'll leave here and I'll have ten trillion things flood me at once – oh, should have talked about that, should have talked about that. Yeah, bring the activism back into HIV, actually. Not that it's needed, but it is.

BK: Where do you see it needed or what's missing right now, I guess?

SG: People have just become compliant about what they're told to do rather than... I guess fighting for others is what I'm trying to hit on, however that works for someone outside of this bubble we're in, to fight for those people, because they need a voice. And that's really obvious. I can share this – I worked on the Stigma Index, the pilot project here in BC, and outside of this city, it's still 1980. But there isn't all the stuff going on that went on then. And so, a lot of folks outside of Vancouver are still being left in the dust. You know, there's still guys showing up, and girls, with less than 90 T-cells, and they're not on treatment. So yeah, the activism needs to come back to get rid of the stigma that still surrounds this silly thing. But I guess that's why I hit upon that thing with my aunt [name] and cancer in the early-'70s. It's not the first time that we've had a disease that's terrified humanity, and humanity is very good at not dealing with things when it's scared – most of them stick their heads in the sand. [Laughs]

BK: And demonize the people who are sick.

SG: Exactly. The same way that people who drink alcohol demonize people in the Downtown Eastside yet never for one moment consider the fact that they too are doing their poison of choice – it just happens to be a clean, regulated drug source – no different. I actually bring that up a lot in the community – community tables. It helps some academics to ground themselves and go, oh, that's right, that litre of wine I drink every night is actually... woops. [Laughs]

BK: Anything else?

SG: No, I can't think of anything else.

BK: I think I'll just stop this then, but thank you so much for sharing all of this with us.

SG: Thank you guys for doing it, actually. That's the most important thing, because like you and I hit on, this is the way that my generation, the generation kind of before me – this is our only avenue of passing these things on now. We don't collect in large numbers anymore and when we do, if you bother to look around at the gay parade, most of it is straight people. [Laughs] Come down to watch the gay people.

BK: With their families.

SG: Which is cool. So, it's really been an honour to just impart what I remember. And I'm sure once I leave here, I will have way more.

BK: Like I said, we can also sit down again in the future if that sounds like it would be productive for you.

SG: And for you guys, too.

BK: Of course. It's built into our research protocol.

SG: Follow up.

BK: But thanks again.

SG: Thank you.