

“HIV in My Day” – Interview #93

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Interviewee: Altair Millares (AM); Interviewer: Ben Klassen (BK)

Ben Klassen: Great, I'm just sitting down with Altair today, speaking over the phone. So, just to get started, thank you so much for being here and agreeing to share part of your story with me today. We like to start by asking a little bit about how you first started connecting with the gay community or engaging in gay life.

Altair Millares: Oh, that was back in—I've always been—I've always, in Manila, in the Phillipines, I've always been connected with my own sexuality. Like every—I knew already who I was attracted to or what I was attracted to and what I was waiting to explore. I was an only child raised by middle-class—in a middle-class family, and in private school. Not just private school but—well, private schools there are run by Catholic religious organizations. Either they're Franciscan nuns or Spanish, Spanish-based church or whatever. And so, there's a lot of religion and guilt building in me. Although even with that, I was always somewhat – well, not somewhat – I'm always the rebel with regards to what was the norm. And I would usually explore a lot of things by myself. And then I finally found a group of friends that shared the same ideals or fantasies or you know, so I got into a lot of shenanigans in Manila. So, when the opportunity came to study in Canada in '92, of course I took it. And then of course I said to myself, I'm going to explore a lot of Caucasian guys in Canada. So, that was really the beginning, and it just snowballed into something else. And also during that time in Manila, I was fresh out of high school and I was attending university. I was encouraged to take this job at the McDonald's, right smack in the middle of the red light district. So, coming from a very protective school, high school, you know, religion. So of course, my head would be turning like Linda Blair every time I'd take the public transit, because the route to the university I was going to had to pass the red light district. So, it was just, you know, it was just beckoning. It was beckoning and saying, you have to walk these streets at night. And so, I did. So, I got this job at the McDonald's, and my cousin who was one of the managers there hired me, and of course I had to attend school in the morning. And then did evening shifts. And believe it or not, McDonald's there had a staff room that had bunk beds. So, you can have—you can close—you can close and then sleep there and then open again the next day.

BK: Oh my.

AM: Yeah, I know. Against labour laws here of course, but it's Manila. So anyways, I would say to my mom, I won't be sleeping here, but I will be sleeping at McDonald's. But then, so that allowed me to get out, and go to the red light district and immerse myself in that culture of, you know, pimps, prostitutes, and all these dangerous people in Manila. So, I wanted to meet a Caucasian guy, so that's what I did. I basically got involved in prostitution, not because I needed the money, but I wanted to meet Caucasian guys. And boy, did I meet them. And of course, I also discovered that I was into much older men. And so that's, well, that's basically what the market is there. I mean ex-pats and tourists, and you know people on business trips. So, it's not like, you know the people with *90210*, you know all these Aaron Spelling, because I grew up watching all these Aaron Spelling produced drama and series. So, you know, I never found any

Asian guys to be sexually attractive as a result. That's what affected me, my ideals for these Caucasian guys, right? And then I met this guy who was from Berlin, and he was younger than my usual clientele, and so, we built a relationship from there and he spent a whole, like a year in Bangkok. And I wasn't sure but I think, I'm pretty sure now – actually, like I contracted HIV in '89 because of my friend [name], who is a Facebook friend now, because what am I going to do? I mean at least I—I don't want to burn bridges with him. If I wanted to go to Berlin, I can still stay at his place. This was back in '89, I still communicate with him. So, that's how I think I contracted it, but I wasn't sure then. And then some weird shit started happening to me. I think I contracted herpes simplex, and because I had weird marks down my groin, and then they would disappear. And then I heard of getting these hives. And then there was this—I knew there was something wrong but...

Then this opportunity to come to Canada came and I thought to myself, well, here we go, I'm sure they're going to test for HIV there. And they didn't. They don't—they don't—they're not—that wasn't part of the health exam for people travelling. And so, I thought it was, I was just assuming. And I guess they just tested for TB. And so, I assumed that I was clean, or I shouldn't use the word clean now, I was HIV negative. So, I had this idea that I was HIV negative when I moved to Canada until '95. And it was a sick – no, what had happened was it was a sick bet between me and my roommate. Because my roommate was working at the Roost, a very—it was the main drag and [inaudible 07:30] was the main gay bar in Edmonton, and he worked as a drag queen there. He was a part of the nightlife. Bennetons. And so, it was a sick bet and let's go over there. And we used to have this one-bedroom apartment and he used to always get lucky, I'm the one who's probably going to be—like I have no doubts. And then... so that began the very complicated and multi-layered story that I had to deal with, and I also did the—went through denial. I'm still going through some fallout from that. And I think that's maybe why my life is so dysfunctional. See I told you I ramble.

BK: No that's great. This is what we want to do with this project is have people tell their stories, so we definitely want to leave space for you to do that. When you were back in Manila, was there information about HIV back then?

AM: Only what we would hear peripherally, it wasn't such a big deal back then. Back then it was—I think the news outfits were—it's very, very sensationalized and they're more about corruption in the government. And all the AIDS stuff, was we'd hear it from—believe it or not, the first time I heard about it was through watching *The 700 Club*, with Pat [Robertson]. [Laughs] You know *The 700 Club*, right?

BK: I'm not sure actually.

AM: Okay, it's a religious program. Extremely right-wing, and Pat, I forget now the last name. Anyways, they were showing about there's this thing that's going on with homosexuals in the States. So, they were showing all this, like, gay pride marches and so forth, of course. And so I just thought, oh, only white people get. It's over there. It doesn't exist here. I had a very, very, very, very, very limited or barely any knowledge or understanding about it, of course. And so yeah, that's the first time I've heard it, and wasn't really concerned about it until '88, '89, because that's when I got introduced into using condoms. And, oh yeah, did I tell you my first—

my first john, first wasn't really a john, he picked me up off the bar. And I wasn't really expecting money. He introduced me to a thing called frottage. And you can imagine, and eighteen-year-old, you know, finally getting hooked up with this Caucasian daddy, and then I go straight to the cookies, and then he fucking flicks me off and then tells me, "This is what we're going to do." He's from Belgium. I don't know a Belgian accent, but whatever. He was like, he's like, "This is what we're gonna do." And I was like, what? All I remember I was trembling. I was like—my knees were like Jello because I was just so nervous. And I'm thinking, I'm finally getting this. And my god, I mean when he unzipped his pants, his Belgian—his Belgian hose just popped out and I've never seen anything so humungous. And I was just like straight to the cookies and then he flicked me off. I mean what the! And so he's like, "This is what we're going to do, we're just going to rub bodies." I'm like what are you talking about? It wasn't wrong, it was sexy, but it was boring as fuck. And then he started telling me about this and that and about HIV and this and that. And I'm just like, ah, when is this night going to be over. And so I guess he sensed there was no passion from me, and so in the morning, he—when I was getting dressed to go back to school, and put on my school uniform, and this guy was like, "You know, you weren't so good, but here's some money." And I'm just like thinking to myself, I'm thinking to myself, ah thank god, I can go to McDonald's for breakfast. Get some McMuffin sandwich. That was all I thought about. And then I was thinking, oh my god, my fucking girlfriends are going to blow their minds after I tell them this story. Of course I did. And I was revered as the most worldly person in our group, being I was the biggest hoe. [laughter]

So yeah, it was just insane that they were—I didn't even care about self-image or whatever. Thinking I was the—all I remember was he was pouring this oil over me, and I'm thinking I'm Bo Derek from that movie *Bolero*. Where's the honey? Because I don't know if you're familiar with pop culture of the eighties and seventies. Bo Derek was the shit. And he—she—her—she became quite famous after that movie with Dudley Moore called *Ten*, which you should watch. And it's amazing, and so after that, she became like this sex symbol of the early eighties, and there was this movie called *Mat*—no *Bolero*, and where she was getting, you know she was—has this sexual relationship with this Arab prince, and the Arab prince of course like—which developed my fetish for guys with beards. I became a pogonophile even before I knew it. He was like pouring all these oils, and honey, and I was like my god, you know, I'm Bo Derek in *Bolero*. Anyways, I digress. Yeah, so that was the first, that was the first time I kinda conjured up all this idea about what was going on. And then of course with the guy from Berlin, [name], he told me about it. He was aware of it. But the condoms broke—keep breaking. And I didn't, know back then that condoms had expiration dates, either. [inaudible 14:10] That was stupid. I'm not a very fun person about anal sex. Receiving it, anyway. It's too painful, it's too messy and it's a lot of effort, isn't it? I don't know, I'm a lazy lover. And so yeah, so that's how I kind of began to know and then when I moved to Canada is when I started really getting to know more and more about it.

BK: So, in Edmonton, you were maybe learning more about it through the community maybe?

AM: Definitely, absolutely. When—when—especially after my diagnosis, because then they referred me to some service, from an ASO over there. And then all I remember is my counsellors, like, he looks like an actor. Gorgeous, and I've seen him since at some conferences because I became involved – when I moved to Kelowna, I became heavily involved with the

AIDS service organization here, and then eventually working as the volunteer coordinator for about two years.

BK: Oh wow.

AM: Mmhm. This is just the, you know, the outline, we're skipping some things.

BK: Of course. Yeah, no, I'll definitely want to hear a little bit about your involvement there, because I don't think we've actually heard very much about AIDS service organizations in the Okanagan, so that would be great to hear about.

AM: Really? Well, they kind of, it's not as—well, first of all, the funding was cut. And they're operating in a very small office, with a very small budget now, I understand. So, it wasn't like the nineties. Nowadays it's now maybe relying on the AIDS Walk, and they're not—and also, the needle exchange. Plus, they're also servicing hep C now over here. And I haven't been involved in the operations of it administratively for years. But I still have contact and friends that used to be involved, and one of my friends—good friends—who's an executive director, Daryle Roberts, who used to work for AIDS Vancouver. And I was part of the hiring process when we hired him on as executive director back in the nineties. And he basically overhauled and put the AIDS service organization, well it was called KARES back then, Kelowna AIDS Resource and Education Services. And then we became AIDS Resource Centre when Daryle Roberts came in. Now it's called Living Positive Resource Centre of the Okanagan. And it's still very active, so...

BK: So, you were involved there most actively in the mid-to-late nineties?

AM: Yes. Mid to early – well, 2001.

BK: Okay. What did that organization look like back then?

AM: It was great. It was—I think it was, it peaked during that time because it was very active. Actively going into schools, education – was really pushing that agenda of education, education, education. This was the pre-internet. And we also had several projects that interacts with the community. We had the condom cops, who would go to all the clubs and distribute condoms. We had the speaker's bureau, which used to include me, that would go to the schools and talk about it, the disease, how it's contracted, have a little in-service how to put on a condom and what are the options of how to put on a condom using your mouth. So, you know, yeah, it was very active. And it was just full-tilt. Education and being out there, up-front, not hiding, not apologizing about what we are, and what our agenda was.

BK: And was there a lot of support for people who are positive through that organization too?

AM: Yeah, well, they had no choice, it was the only organization or they would have to go to Vancouver. There was a small organization in Kamloops, I believe, and that's it, that I was aware of. I think there was also ANCHORS [?]. We took a lot and learned a lot from AIDS Vancouver and PWA back then.

BK: So, what did that support look like? Was it just hanging out with other positive people or...?

AM: Yeah, for me, I became actively involved because I wasn't allowed to really work with my student visa, so they gave me like an honorarium. They felt sorry for me, and I was living then with—we're skipping, your story was back in Edmonton, right, about how I got diagnosed and involved. That where I also met my first legit boyfriend, who was based here in the Okanagan, in Peachland. And then after my stint at NAIT [Northern Alberta Institute of Technology] fell apart and me being in denial about my HIV, it was really affect—anyways, he asked me to move, to move with him here in the Okanagan, which I agreed to. And then, that's when I decided I was going to seek help or volunteer my service—my free time, until I figured out my immigration status. Get involved with the AIDS service organization here, and that's how I found out about KARES. And then that was it, I was involved with it. And that's the only place I felt protected and felt supported, and plus it was like the hub of knowledge of what services are being offered, and what services I can access as a person who has very limited health insurance, or there's no health coverage. It was—everything was going to be out of pocket, you know, from bloodwork to consultations to everything.

But we had the greatest—great—what do you call it, infectious disease specialist. And he had a lot of compassion. And put me on some cocktails, he started me on—I guess he was – he was very, very well-intentioned, and I got hooked up with him with a doctor and then he was giving me pills that were being brought back by people who either passed away or they're not going—they're not doing well with the medication, and so they would stop therapy and they would give the pills back to the hospital. I don't know why they didn't give it to the pharmacy, maybe back then they weren't working with the pharmacy, we would just get all our medications direct from Vancouver, through Montaner, through Dr. Montaner, through BC Centre for Excellence. So back then, little did I know that I started seeing Dr. Montaner as well, who is the most amazing person. You know, like he should be a Nobel prize winner. He's just, yeah, just amazing, just amazing guy. I know you're aware what he does, and what he does now I don't know, I haven't seen him in years, because they—he's obviously, his workloads must be tremendous. So yeah, that's how I got involved, and acquired more knowledge about HIV and also my health, current health and how I maintained or not maintained it.

Because I didn't have any coverage, I wasn't in a drug program, so whatever, Dr. [name] was just scrounging to put me on this medication that should've been regular, you know, I mean like daily. Then if he could only give me certain things and then mix it up. So, I was—what he ended up doing, it was increasing my immunity to certain medication and complicated my situation, which ultimately put me in ICU in 2000. And back then, Dr. [name] was already gone, he took a job in Saudi Arabia. So yeah, I almost died in 2000. And after that, I was still, my immigration thing, it was still not you know, fixed. And so basically, I was dealing with immigration, how to, you know, get health services, everything was out of pocket, so I was just fortunate that—that at that time I had a partner who was very well-off, and supported me financially in everything until my immigration thing became good. Eventually I applied for—we applied to change our status, from student visa to a landed immigrant. But apparently, I had to leave the country, and that was not an option for us at the moment. And then, so they said, well, you can apply under compassionate grounds, and we can't recognize you as a couple but we will have—if you say that you guys are a couple, you have to prove to us that you're a couple. They weren't convinced

that my boyfriend and I were a couple, because I was, I think I was in my—twenty-six, or late twenties. And then my partner there was pushing seventy. So, they were not—if you can imagine in Kelowna in the nineties, we’d go into the immigration office, and there’s this guy, this Asian guy with this older, much older fellow with silver hair. And we’d go there, and they’d be like, what? We could just see the expressions on their faces and what they’re thinking, you know. We just blew their minds. They didn’t know what to really say to us.

But that was the outcome, they didn’t believe us and I was going to be deported. And then I said, well, this is the last—you know the last thing, maybe you should try for refugee status. So, I barged into the immigration office and demanded from immigration some refugee application papers. And then we acquired a lawyer, an immigration lawyer in Vancouver, forgot his name now. He was even skeptical that it was going to work. Because there was no—there wasn’t a lot of human rights abuses towards gays and lesbians in the Philippines that he was aware of. And luckily then I had access to internet, and in the—contacted the international gay and lesbian human rights association in—based in San Francisco. And asked them if there was any compiled information regarding the Philippines and the LGBT. And lo and behold, there was this big package that came in from FedEx. It’s this huge bible, it’s this huge compiled information, newspaper clippings, that was the news items from the Philippines about human rights abuses there against gays and lesbians. And back then, in—this was in late – no, early 2000s—they started compiling discrimination about, discrimination against people with HIV and AIDS. It was very sensationalized in Manila, how people were responding to it, and government officials were appalled and basically blaming the victim. So those were the items that really padded the case, and gave it some meat.

And then I got into my immigration hearing in Vancouver at the library. The lawyer was just, so, they’re like, “It would be a miracle that they would do this. But so please, you know, lower your expectations,” basically. And so, there was some hard questions, and there were some questions about I was going to bring hardship to the Canadian society because, you know, I would give them—who would pay for the bill, for my health bills? Well, I said, well, so far it’s my partner who’s been paying. And I said he’s a business owner, he pays taxes. So, you know, until I get my own coverage, I’d be able to be—to become taxable and have taxable income and contribute to society. I’ve been working with an ASO locally, you know it’s not like I was just sitting around in my ivory tower, with an IV. You know what I mean? It’s just I’ve been actively contributing, and this is even before the immigration stuff. So, to make a long story short, I became a landed immigrant, they granted me my refugee status. I should’ve gone for it when the—got a t-shirt that says gay refugee, or gay refugee [inaudible 28:53]. So yeah, I became a landed immigrant in 2004. Oh no, sorry, shortly after that. And then I became a Canadian citizen in 2004. And then I got all my health benefits. So, yeah. Sorry, I’m winded now.

BK: No, that’s an amazing story. Wow.

AM: That’s a lot, I know it’s dense. And that’s just, you know, some of it.

BK: Of course. And so, then you were able to get onto treatment more consistently and—

AM: Yes, that's the word, consistent treatment. Yeah. And now with the help of Dr. Montaner and, I forget now, [name], Dr. [name], they managed to—they said to me, “You're kind of like a miracle because when you came into ICU, you got your bloodwork, you were just like zero, zero white blood cells,” he says, and there was nothing that would prevent me from dying. And so, they were quite amazed how I bounced back, and now they—my regimen is so simple. It used to be—well, there's greater, better pills now. And so now I only take like, three pills in the morning. No, four pills in the morning and two pills at night. As compared to, you know, having something refrigerated, you have to take it with food and this and that. So yeah, it was now, it was the most—it's the most streamlined therapy I've had, drug cocktail I've had, since the nineties. I've been through the gamut.

BK: No kidding. And side effects on the cocktail now, or on the meds today?

AM: No, no. Zero. Well, okay, the usual which is diarrhea. And I don't even have neuropathy, I had maybe a bout of it when I was on AZT. Yeah, that's how far back, AZT. And what else? I threw up, I got hives because they put me on Septra—

BK: Oh yes.

AM: And I became addicted—not addicted, I became allergic to sulfa-based drugs. So, if I—yeah, I would go get hives, pop out in hives. I just thought, oh this is the effect, not thinking this is a side effect. And yeah it wasn't great. So.

BK: And then with HIV itself, did you ever really get sick or were you...?

AM: Yes! I got sick I was in ICU in 2000. Well, '99. '99, I was in the hospital in December, and I was in ICU during—just before New Year's. And so yeah, it's because I'd started—pneumonia caught up—I developed—pneumo—I got pneumonia in '99, and then that's why, it became PCP, because I guess all the medication I was on, the virus had become immune to them because they couldn't put me on something consistent. So, it was just like, whatever we can grab for you. I became like this receptacle for these rejected drugs from other PWAs, so yeah. That was the health, the biggest health issue I had was PCP. But then I became stabilized after that.

BK: Yeah, it's very clear from your story how much your immigration status affected your access to care and support.

AM: And distrust, back then too. I had these horrible, developed these horrible warts. They would grow, they would start growing at a rate I couldn't understand or believe. Even my general practitioner, Dr. Leung, I was there every week constantly having to go through the pain of getting them frozen with liquid nitrogen. And it was horrible. Might as well have a cigarette butt seared into my skin, because that's basically the same thing. Yeah, I had warts all over my hands, so I would wear gloves. And back then I was also DJing, so people would say, “Oh, you're Michael Jackson now because you're wearing gloves?” Black gloves in the middle of summer while DJing. And so yeah, it was just – I ran through the gamut of that and then I, of course I didn't realize that it was connected with your immune system, and because my immune system was starting to decline, the HPV virus manifested itself in these warts in my hands, and

also the soles of my feet. So yeah. And then after that my health became—bounced back, they just disappeared basically like overnight.

BK: Crazy. About KARES, who were the types of people that were going to that organization at the time? Was it mostly gay men, or was it a wider...?

AM: Mostly gay men, because it was ran mostly by gay men and some stalwarts of professional women. And there was like maybe a token straight person, I'd say guy on the board, you know identifying as straight. And so yeah, once in awhile, but it's mostly gay people that accessed it. If there were some straight ones, I wasn't even aware, because they're—the coverage for KARES back then was just Central Okanagan, so it was a pretty wide net. And I used to think people then were not really ready to access it, or they don't want to, or some people don't even know they have the virus because testing was not very being pushed. Because then the idea was, well, gays only get it, you know that's—or marginalized people were the only ones that get it. Or they don't want to know, so they don't get tested and continue to spread it.

BK: And so that group of folks who maybe use IV drugs, that wasn't really a big group back then?

AM: Not that I was aware of, but we were doing a lot of outreach, and once in awhile I would see somebody, street person with a nurse, with a community nurse, you know from outreach that would come in with so and so, a client. I was working the reception desk as well, so I'd see a lot of people, but the people that accessed it were mostly gays. And very few straight people. But I wouldn't – like I don't know whether they're straight or not, but I know the gay people that I know because they run the socials back then.

BK: Did you want to say anything else about the medical response to the epidemic, how that looked from your perspective here?

AM: I think they were supportive, funding-wise anyway. But there was also great skepticism about our competency. Daryle Roberts' competency was of course questioned very aggressively. And they were wondering, oh, where's this money going, they have these fancy offices, blah blah blah, and all this stuff. But the evidence is there, I mean everything was—we had records of everything that—who goes out of that office for outreach, what happened, what was the result, everything was quantitative, and we have evidence for it. Although we went through some scandals too, so that didn't help with with the reputation of peers back then. There were some scandals. We had an executive—not executive, a board, president of the board was embezzling money from his job. And then we also had a treasurer who embezzled some money from KARES, so there was these two incidents that kind of put a blight on the reputation of the AIDS service organization at the time. There was some drama, major drama, that happened. Otherwise, I think they were fair, but they really scrutinized Daryle and the operation and where the money was going. We'd get audited every year. So, but the programs were effective. And if anything, people were talking about it more. There was an AIDS Walk, the AIDS Walk was tremendous. So, every year it just grew and grew and grew and grew. So, it grew within the community and also within the public opinion. So, it really raised the bar for—with regards to AIDS service organizations here within the Interior. So apparently people from smaller towns, even Kamloops

and Vernon, they would look up to the ones here in Kelowna and look at the business models, programs, and whatever else. And so, they always referred here, even the volunteer program that I ran.

BK: Yeah, I mean how was mainstream society responding to HIV back in those days, back in the nineties?

AM: It was difficult, it was difficult. The nineties were the dark ages – I call it the dark ages. It was a lot of opinion in the paper, it was a lot of letter writing, and letters to the editor expressing—because back then the internet wasn't really all there, as you know, a place for public forum. But there was – you know, it wasn't like – it was a totally different time. And it may seem primitive now compared to back then, we thought we were—but there was a lot of effort. A lot of effort thwarting myths about HIV, hep C, and how it's contracted. You know, thank god for the speaker's bureau program because we had to fight and prove ourselves to the school board, that what we're bringing to the schools is that we're arming these people that are filled with hormones and blood and so, they're easily excitable. So, we are trying to arm them with information that could save them having to contract HIV. So that was – there was reluctant support. But now it's like, information is everywhere and you, if you contract HIV, then I hate to say it to you, but okay, you might have done it accidentally, but ultimately it's up to you to be responsible for your own sexual health. And your own health in general. Never leave it to another person. Never blame another person for your being contracted. How about maybe you just disregarded information that's available to you for whatever reason for whatever reason you have personally.

But I don't know, some people still have this stereotype and stigma. The stigma. And so, they're operating and running—even nowadays, I run into people who have no idea about how it gets contracted. They have the stupidest ideas on how it gets contracted. And I said, it's easier for you to catch hep C and you know, the herpes virus, compared to HIV. You know? So, it's—and if you're going to expose yourself, not that I'm judging, I'm very sex-positive, you know. And I said, okay you're going to go to a group situation, you're going to go to the sex party, and then you want to be a cum receptacle for everybody. Well, and then you don't practice—you don't know or you don't want to know and you don't take PrEP. And what do you expect? That you're going to go—be unscathed? Well, maybe if you're lucky. But you know, generally, if you become a cum receptacle for fifty guys in one weekend, what do you expect? You know, so when people come to me, I give them cold truths. It's like honey, you gotta just look at this way, why are you putting on other people, your safety? And that's what people on Grindr – “clean only” or “safe only.” Define safe behaviour, please. You know. So yeah, that's what I'm dealing with right now.

BK: Yeah.

AM: Yeah, this age you should be—I don't know, people are dumb. I have the right to—I've earned to say that because I mean, back then, I contracted this in '88, '89, and I was dumb.

BK: But there's a lot more information out there now than there was back then.

AM: Absolutely. Absolutely. They can access anything. I mean if they can access felching videos without ID, they can ask if a high school guy could... A nineteen-year-old can watch felch videos all day, sniffing poppers. What the fuck? You know? Know what I mean? [Laughs] You can quote me on that.

BK: Yeah, we might.

AM: Oh god. So yeah, I mean, if you can access all that information there, then there is no excuse, girl.

BK: Well, speaking of stigma, how prevalent was that within the gay community back in the nineties?

AM: Oh my god, seriously? You are simply a pariah if you come out as positive. I mean, when we were in university, we running this booth, people from the social, from the, you know what do you call it? The social service program would come up, “Oh, do you have AIDS?” Girl, this is your classmate, she is volunteering, and you are accusing her of having AIDS? You know, like what? Just because you’re volunteering for the—volunteering at the booth, you have AIDS, or you’re gay? I mean, yeah, that was the mentality back then.

BK: Wow.

AM: This is Kelowna, it’s in the bible belt. So, they have all these stupid, twisted ideas about it. And the stigma was just further enflamed by all these weird ideas. Plus, we hear all these people dying, right. And becoming horrible—I mean everybody’s health, when they have health problems, people with cancer, they become looking like cadavers, you know even before they die. So, it’s the same. But it’s the same but it’s different because AIDS has a more like – oh, you know, the god’s punishing you. Cancer’s different. So they—cancer has a different brand and it’s a different – people have a different idea about cancer. So, sometimes people will die of AIDS complications, it would – they say they died of cancer.

BK: Just because the stigma is so bad.

AM: Yes, exactly. I buried a friend. His mother had no idea he died from AIDS complications.

BK: Wow. Yeah, certainly the death of so many young men is a big part of this story too, if you were a part of the gay community.

AM: Yep.

BK: Just looking at some other questions here. Did you get involved in any forms of activism around HIV? I guess going into schools, that’s kind of a form of that.

AM: Yeah, yeah exactly. That’s our form of activism, was me getting involved with AIDS resource centre. Being able to facilitate that, facilitating like a group, support group. Not a sex party group, but you know, it’s just being able for people to come into a place and they feel safe

sharing, talking, and exchanging and—numbers—and so, and ideas. So yeah, I guess you can say that. Well, I attended a World AIDS Conference. So, there was a lot of ideas and I joined some groups that were, you know, had some picketing going on. There was a lot of activity back then, whether I categorized it as activism, I think the fact that I was involved in it was my you know, even administratively in itself was that, was activism. And having to go the mayor's office, and us getting World AIDS Day proclaimed. But in the same—the same week, getting our Pride week—Pride week questioned for the proclamation, and that's when we ended up suing the mayor. We sued the mayor for taking the Pride from the proclamation. I don't know if you've heard about it, but we were pretty controversial back then. We sued the mayor. For human rights stuff, and the human rights, I forget the word. But anyways it was—we put Kelowna in national news for our nerve to do that.

BK: When was that?

AM: Early two-thousands. You have to Google it.

BK: I will.

AM: It was quite—and then the funny thing was, it came full circle, a few years ago now. Mayor Walter Gray, he got re-elected as the mayor, but this time around he was kissing the gays, and joining the Pride, and proclaiming it world—Kelowna Pride week and all that. It was amazing, it just came full circle. Because it just—you know he's—who would've—he probably had no idea that he was going to be a marshal for the Pride day, as a celebration, kissing a drag queen right on stage. It was amazing. Kelowna's quite the place, town. Very storied.

BK: Yeah, I'm also just curious about what the gay community looked like back then in Kelowna, because we haven't talked to that many people...

AM: I told you it was the dark ages.

BK: Yeah.

AM: We were in caves. To get a man, we'd beat them up and then drag them into the caves. No, I'm just kidding. It was any other small place, and they were all—it was very hush, hush, you know? There was a lot of shame, guilt, self-hatred, which still happens but it's not—it's not as intense back then. The kids nowadays, you can walk around downtown Kelowna and be in full drag, in full face and get, you know, hey girl! It's like, it's amazing, it was like Davie in the nineties, Davie St. in the nineties. And now it's like people don't even blink, a girl walking around with a Sinead O'Conner haircut and kissing her girlfriend right there. It was just nothing. Also, we still once in a while, we get the bashes and this and that, but that's part of it, you can never have good without the bad. But there's definitely way more good now, social climate has just, ah it's amazing now. I fell in love with Kelowna again.

BK: Yeah, it's amazing. I mean that is amazing how different it is compared to a couple decades ago.

AM: Exactly. God, decades.

BK: Well yeah, it's true. So, then nobody would be out as HIV positive at the time in Kelowna, I guess?

AM: No, it's very, very few. I wasn't. Back then, I was really – you know, when I was trying to hook up, none of that came up. Mind you, I only do oral. So, you know, and also, see I was undetectable. I wasn't really like, I wasn't upfront with it, and again it's just like oral. And I never brushed my teeth if I knew I had a date. So, I was very cautious about it, and there's a word for it. But anyways, I was very careful in making sure I don't infect anybody. And also, it put a toll in my own—with you know, facing myself in the mirror. Like can you continue doing this, there's this guilt. There's this, you know, and then finally I came out. This year I came out. Full out. On Grindr it says positive, undetectable. Of course, nobody talks to me now. I'm a social pariah again.

BK: Is that—really? That's still the—

AM: Mhm. Yeah, well you know, that's just the way it is. Yet they will watch Treasure Island media videos all night while you know, their wife's cooking in the next room, and you know. Some thing never change.

BK: Yeah, but I would hope that that message around undetectability is actually getting out there to people. That's discouraging.

AM: But some people – you know how people are. They're like, “Positive, undetectable – what does that mean?” And doesn't matter, you have the virus, you have the virus. They don't care whether you're undetectable or not you know. Really, they don't. Ultimately.

BK: I mean, they should.

AM: Some people do. They should. And also, there's some people that are educated about it, and I think the younger people, young people, millennials under twenty-five have a more real grasp of what undetectable means, because they see it a lot now. And this is the older ones, who are very ageist, for one thing. You know they put people back into the closet, having these requirements about being clean, the wording of clean and [inaudible 55:25]. And what else, yeah, or if you're over thirty, you might as well be dead, you know what I mean? I remember putting up this on Facebook, there was this news item about the world's oldest living creature, which is this tortoise. Male tortoise, is gay. So, I said, so in human years, this means this poor turtle is thirty. So, I got a lot of likes on that one.

BK: Yes. My partner just turned thirty and one of our gay friends joked that he's entered the gay death years.

AM: Yeah, exactly. I mean, yeah, there's so many biases, and you know ill-informed negativity. Ill-informed negativity.

BK: So, the stigma is still out there. How has your perception of what HIV means since the eighties and nineties to the present? How's that changed?

AM: Well, I have a different opinion of myself now. In the fact that despite the abuse and that I put my body through, I mean, I went through the muscle Mary stages because I was at one point going to New York City a lot, I was dating somebody in Brooklyn. So, I had to have the look, and so till I almost had kidney failure because I was overdoing all the 'roids, and the hormones. I have a different opinion about myself now. And definitely a positive one. No pun intended, but you know what I mean, I get to have a different—like, I'm dirty, I'm an AIDS-infected hoe bag. You know, it's nothing like that no more, it's more like, yeah, I'm undetectable. I got away with murdering myself almost.

BK: What led to that change in your self-perception?

AM: Well, more better information about the latest news about what being undetectable means, and this and that. The guilt has been lifted, because I'm always trying to get my bloodwork as recent as I can and it's always been undetectable, which is really crazy to me. You know, after having contracted it in the eighties, and I'm still undetectable. And can still a pass a sturdy. Like, I'm pushing fifty, so...

BK: That's amazing.

AM: Asian don't crack.

BK: That's amazing on both fronts.

AM: Well, full disclosure, I had a chemical peel when I was forty, I had some Botox, but still.

BK: I'll keep that in mind as I age a little bit, as a back up plan.

AM: Yeah, chemical peels are good. Avoid the sun.

BK: Yes. And how do you think the epidemic changed the gay community, whether that's in Kelowna or Edmonton, or any of the other communities that you might've been a part of?

AM: Well, I can't say much about the other places, but I can say, well here, very minimal that I'm aware of. Just by the use of the app, right? Grindr was without my—without my status showing, people are just ready to talk. And then you put positive, undetectable, suddenly nothing. I've even got one friend that goes, well if you're positive, blah, blah, blah. And, you know, and then I sent him all the documents just to cover my ass legally. And it's like, here you go, here's the information. So, not liable, bitch. Thanks for trying.

BK: Do you see PrEP on people's profiles there?

AM: Yes, I see that a lot. And I seen that even before PrEP was approved here, which is a total bullshit. Because I said, well, how are you accessing it? Oh, I have my connection in the States.

Really? Do you even know what the fuck Truvada means, bitch? So, I was very skeptical. And because, you know, let's call – I mean, let's face it, the porn that people watch affects how they wanna do their, how they act in their sex lives. I'm not blaming, okay, I'm not going to blame porn, but the fact that it's so readily accessible, it affects our brains. And when that's our fantasy, that's where we want to live that fantasy. You know to quote Bianca. And I would be like, if I was the empress nowadays and I see all this Treasure Island media and all this group thing, and that's like normal. So, they would just put, negative, PrEP there and just say, oh you know, then they can just say, engage in all this high risk behaviour. So, that's the thing, but of course I'm very pessimistic because I'm an old gay. But in the same way, however, I will say that it's way better now. Yeah, there's more—it facilitates coming out for people in their – when back then there was really no option but to keep it on the down low.

BK: Well, we've talked about the young whippersnappers out there in the community a little bit. Do you have any advice for younger gay folks out there who didn't...?

AM: Don't do meth. [laughter] Don't slam it, don't inhale it, don't snort it. So yeah, that's number one—although I'm not judging. Because I had a nineteen-year-old come over, but I said to them, “Don't expect sex. You will have a warm bed to sleep on, because I, you know, I know you're homeless or you're sleeping in your car for whatever reason. But you will get, not a lecture but a bunch of stories.” I know that's a true story I had, I spoke to two nineteen-year-olds and they were telling me that already they tried meth. At first, they said, “Oh, I thought it was crack.” And like, there's two different types of pipes for those things. Meth, it has a bubble in the end, crack it's like a Bic, like a pen, you know, so how could you mistake it? I don't know. I just say to them, I don't judge you for doing these things, but I will say that it's a very slippery slope, and once you're in the thick of it, sometimes it's hard to get out. Actually, it's hard to get out. So that's the cold hard truths. Enjoy when you can, but please be responsible for your own health. Don't ever blame anybody, because blaming anybody won't solve any problems, it'll just burn bridges.

BK: Yeah, we know that the substance use numbers within the community today are pretty high, so it's certainly something to be aware of.

AM: I know. Because I go to a dinner party with, you know, professionals around the table, and the dessert is this pipe, it's a bong for meth pipes. I mean, in this posh house, up in the hills. And that's, you know – I'm like, ah, well. What can I say? So you know, it really – it's insidious. I shouldn't say negative things because people will do what they want to do, whatever their philosophical beliefs are, regarding life. They wanna be empiricists. They want to experience everything before they can make an opinion about everything. Well that was me. And so, you know, people should be responsible for their own sexual health is basically what I want to say out there. Never blame anyone else for infecting you, if you contract anything, doesn't have to be HIV. Ultimately, we are responsible for our own health and state of being.

BK: I think that's a good message to pass along, for sure.

AM: And then that also deals with the stigma, because if you're responsible for your own health, then you can't – you know, people are hard pressed to deprecate themselves, especially you

know, in this age of self image, and Instagram and all this stuff. But deep down, they're still rotten. They know they're rotten inside. What I'm saying is that when there's more responsibility, if you have to answer to yourself, then people will maybe have a more better understanding, more empathy. Maybe the empathy will come out it, you know, towards people who are positive.

BK: That's a good point. Any other thoughts on where you got support from after your diagnosis, besides from KARES? Were there any other major sources for you?

AM: PWA, East Vancouver, through that, Friends for Life. That's it. I mean, I'm just so busy that sometimes I didn't know that I was accessing, but the fact that you're getting involved you've accessed the service. Because it gives you a different opinion about yourself, and the self-discovery, and you're—you have better knowledge and grasp of who you are, and what your abilities are as a human being, towards how you view other people. The empathy, you know, compassion that stems out of it. Anyways, if that answered your question, I don't know. Anyways we're almost, I'm late for – well, not late, I told the my appointment that I'll be in about two-thirty, so if we can—

BK: Okay, so I should—

AM: Is there more questions? Maybe skip the hard ones.

BK: No, that's kind of most of the stuff I wanted to ask. We always like to leave a little bit of space at the end just to see if there's anything you want to touch on that we maybe didn't cover.

AM: No, that's pretty much of it, what the gist of my experience is, that you know, I was an asshole before and now I'm an older and less—I'm a curmudgeon still, but an old curmudgeon. Also, I have more compassion, I empathize with people being—have the privilege of having you know, a wealthy boyfriend back in the day made me an asshole. And also having all this self-hatred. But now I'm kind of pushing on fifty going on twenty-seven, because basically my co-dependency issues are ridiculous. This is the longest time I've been single, and I kind of wanted to be single, because there's a lot of things that I should've learned as a human being living with this virus, that I should've learned in my twenties, or early thirties, as opposed to pushing fifties. Don't do drugs when you're forty, especially when you've never tried drugs. Although, because of my empiricist ideals, I thought I should try what these gays are doing when I turn forty. What am I missing? What's a circuit party? What is this? And so yeah, just yeah, I'm just – that's my thing, have more compassion and empathy towards people – just because they have that health problem, you don't know their lives. But you can't tell these things to people, they have to learn it by themselves and discover it.

You can put all that message and information out there as much as you want to lower stigma or maybe erase stigma, but it will never be erased. People will always have these antiquated, ill-informed ideas about it. But it's up to us how to deal with it. And you can self-destruct, which is the easier way, or you can make yourself valuable and help out in erasing that stigma. I mean, I guess I could go back to the gym and kills myself and become a messy queen. No, I don't want to be, but I can certainly, when this opportunity came about... Well, sorry, I don't even

remember how I—did I email you? Or did I apply? I don't even remember. Oh yeah, I remember I got a card – where did I get it from? I don't even remember now but I saw the number or the email, and I thought I'd email and you know partake in this study.

BK: Yeah, well thank you so much for taking the time to talk to me today. I think you've kind of shared a perspective that's a little bit different than a lot of the ones that we've captured so far.

AM: Yeah mine pales in comparison because there's a lot of stupid comedic moments. I see things differently now than of course when I was younger, before I was an asshole, major asshole back then. I'm just me, I can live minimalistically, which also translates to I'm poor. And so, I'm okay now with myself, I'm more comfortable in my own skin and having come out as a positive, undetectable individual.

BK: Great, well, thank you so much for sharing all of this with me. Unless you have anything else to add, I'll just stop the recording.

AM: No, nothing else to add. I'm just glad I took part to tell you that, and that's that. So, hopefully you'll make sense or use of it. I should've told you I ramble.

BK: No, this is actually fairly concise in the grand scheme of things, so not too bad at all.